A HISTORY

OF THE

INDIAN MEDICAL SERVICE

1600-1913
THE REMNANTS OF AN ARMY.

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A HISTORY
OF THE
INDIAN MEDICAL SERVICE
1600–1913

BY
LT.-COLONEL D. G. CRAWFORD
Bengal Medical Service, Retired List

"That ye may tell it to the generation following"

Psalms xliv., 13

VOLUME II

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VOL. II

THE REMNANTS OF AN ARMY . . . . . . Frontispiece

JAMES ANDERSON . . . . . . . . . . to face page 15
HISTORY OF THE
INDIAN MEDICAL SERVICE

CHAPTER XXIII
ADMINISTRATION; THE MEDICAL BOARD

"Dress in a little brief authority."
SHAKESPEARE, MEASURE FOR MEASURE, ACT II, SCENE 2.

How it was found necessary, as soon as a regular Medical Service had been established, that that Service should have some definite head, has already been related in Chap. XVII, Rank. In Bengal Thomas Anderson was appointed Military Surgeon General on 8th Nov., 1760, and in March, 1773, Daniel Campbell, who was head of the Civil branch of the Service, became Surgeon General also, with authority over all members of the Service, Military and Civil. A proposal made by Campbell in 1783, to appoint a second Surgeon General for the Army, while he retained the rank and post of Civil Surgeon General, was rejected. In Madras Stephen Briggs was Military Surgeon General in 1759-60, the title was abolished when Briggs became Senior Civil Surgeon. When, in 1770, Gilbert Pasley was associated with Briggs to form a Committee governing the Medical Department, this Board was in all but name, and in the fact that it consisted of two members instead of three, identical with the Medical Board formally established in 1786. On Briggs' retirement Pasley and James Anderson, the two Madras Surgeons, discharged the same duties. The title of Surgeon General was renewed, in Pasley's favour, on 25th March, 1780. On Pasley's death in 1781, Anderson and Lucas continued to act together on this informal Board. The four Principal Surgeons of Bombay filled a similar position in that Presidency.

H.I.M.S.—VOL. II.
In 1785 the Court of Directors sent out orders for the regulation and government of the Medical Departments of the three Presidencies. These orders are contained in a General Letter from Court, to all three Presidencies, dated 21st Sept., 1785, and in the accompanying documents. Of the latter, the most important is entitled, *Regulations respecting Military Hospitals in India.*

Para. 36 of the Court's letter of 21st Sept., 1785, to Madras are as follows:

"Conceiving the care of our sick or wounded soldiers to be an object dictated as well by sound policy as by humanity, we have bestowed particular attention in examining that subject; and the investigation has pointed out to us the propriety of transmitting to you precise Regulations for the conduct of our Hospitals. These Regulations have in view to remove every chance of the Troops suffering from a want of proper attendance, comfortable accommodations, good medicines, Diet, Hospital Necessaries, &c., and to establish such a control over the several Departments of the Hospital, as will limit the Annual expenses to what are merely necessary and to ascertain the charges with accuracy. They have likewise in view to abolish the absurd practice of allowing Surgeons to benefit in proportion to the number of Sick under their care, or to derive any advantage in consequence of their remaining a length of time in the Hospitals, which under such a system must be too often the case to the prejudice of the service, and to the great disgrace of humanity. But at the same time that these Regulations are particularly directed against any degree of abuse, they hang out encouragement to Men of abilities and character to prosecute the Medical line in India, by establishing reasonable prospects to Individuals and a regular progression of Rank from the highest to the lowest station, in the Company's service.

Para. 37. "These Regulations are contained in two Papers which accompany this: one entitled 'Regulations respecting Military Hospitals in India,' the other entitled 'Forms and Regulations for the Apothecary in charge of the Medicine Stores at the different Presidencies in India.'"

Para. 38. "Our Military Establishments even upon the scale to which they are reduced, joined to the proper supply of our Hospitals will require a very considerable number of Surgeons and Assistants. But from the latest returns we have seen, we take it for granted, there must be now in Bengal a sufficient number for all the purposes we have directed and likewise as many more as may afford a supply to our other Settlements, if any should be required at any of them."

Para. 39. "As in the present state of our affairs, we cannot admit of any unnecessary expense we have come to a resolution and direct that no more Surgeons or Assistant Surgeons, than those necessary for our several Hospitals and Establishments shall draw pay or allowances from the Company. The Supernumeraries must depend on their private practice till Vacancies fall; as it was not our intention in permitting Surgeons of

* Owing to deaths and resignations, the surplus number of Medical Officers in Bengal had been absorbed into the regular establishment, before this letter was written. See Chap. XIV, *Strength from time to time.*
ADMINISTRATION; THE MEDICAL BOARD

- Any description to proceed to India to practice in their Profession that they should immediately on their arrival receive pay, unless appointed to some station in consequence of Vacancies.

Para. 40. "From this resolution, however, it is our intention to exempt such as have been in actual service with the Troops or in Detachments during the War, and we consent to their drawing their pay while unemployed."

The accompanying Regulations, which are of considerable length, are given below, as published in Madras G.O. of 8th July, 1780.*

Extract from the Medical G.O., 8th July, 1780.

G.O. The Honorable President, and Council are pleased to publish the following Rules, and Orders from the Court of Directors for the Medical Department, and to direct that the strictest attention be paid to them, by all Paymasters, and others concerned therein.

"1. With a view to give every degree of encouragement to Men of Professional Abilities and integrity to procure the Medical Line in our Service in India, We hereby direct that at Bengal and Madras there shall be a Physician General as Director of the Hospital with a salary of 1,500 p. Annam, and a Chief Surgeon with a salary of 1,200 p. Annam, and the Head Surgeon of every Hospital where 500 men may be stationed in Peace or War, shall have a salary of 1,200, and the Head Surgeons of all the other General Hospitals are to receive each 1,000 p. Annam.

2. That every Surgeon to Regiments shall have the pay and emoluments of a Captain of Infantry upon their Establishment, - Hospital Mate of the Pay, and Emoluments of a Lieutenant of Infantry upon their Establishment, and Regemental Mate the pay, and Emoluments of Ensign of Infantry upon their Establishment. At the Presidency of Bombay the Physician General as Director, is to receive a salary of 1,500 p. Annam. One Hospital Surgeon with a Salary of 1,200 p. Annam. The Surgeons to Regiments are to receive the pay and Emoluments of Captain. Hospital Mate are to receive the pay and Emoluments of Lieutenant; and Regemental Mates are to receive the pay and Emoluments of Ensign on the Bombay Establishment.

3. That the Governor and Council shall appoint a Hospital Board which is to consist of the Director, Chief Surgeon, & Surgeon of the Hospital established at Head Quarters, for the Purpose of Directing the necessary Regulations, and Arrangements for all the Hospitals of the Presidency.

4. That the Members of the Hospital Board shall Recommend to the Governor and Council the most able, and deserving Officers, to direct, and Superintend the Duties at each Hospital, and are to be responsible for the Conduct of those who may be appointed in consequence of their Recommendations; when a Vacancy of Surgeon at the Head of any of the Hospitals shall take place the Hospital Board will Recommend to the Governor, and Council, the most deserving Regimental Surgeon for the

* These regulations are summarised in a paper entitled, "Gleaning from the Early Records of the Bengal Medical Department," by Colonel J. H. Hendley C.I.E., in the Proceedings of the Indian Medical Congress of 1894.
† From the Madras Record Office.
Succession, the most deserving Hospital Mate to succeed the Regimental Surgeon, and the most deserving Regimental Mate to succeed the Hospital Mate, But although the most ample Encouragement is hereby given to Merit, yet it must also be understood that Seniority, and equal Merits are to have the first Claims to Promotion.

"4th That as the Head Surgeons of the Hospitals are to be Responsible for the Conduct of the Officers under their Command, and that the Business of their Respective Hospitals shall be Discharged with skill, and Integrity, they are henceforth to have the Power of suspending any of the Inferior Officers who may attempt to Disobey their Orders, or Prove Negligent, and inattentive to the Public Service. In which Case they are to Report the Conduct of such Officers to the Hospital Board, who are to lay the same before the Governor and Council to be confirmed, or set aside as they shall judge expedient.

"5th That the Head Surgeon of every Hospital shall assign the several parts of Duty to the Inferior Surgeons, and others employed at His Hospital, and shall direct that the Sick be conveniently Lodged in wholesome wards having a free Circulation of Air, that they be kept clean and not crowded in their Apartments, and are Regularly subsisted agreeable to the Diet Tables Established for that Purpose. They are also empowered to dismiss such of the Nurses, Servants or Attendants as they shall find negligent or ill qualified for the Business of the Hospital.

"6th That the Chief or Head Surgeon of each Hospital shall be Responsible that such of the Non-Commissioned Officers, Drums, or Privates, as are admitted into their respective Hospitals be regularly supplied with a clean Cott, or Cradle, a large Pillow, fresh Bed Cloaths, a fresh Gown Cap shirt and long Drawers, and that those whose Case require it shall have a fresh shift of Cloaths, a Bed, and a Small Pillow or two if necessary. He is also to take particular Care that no Person belonging to the Hospital shall receive any Reward or Emolument from the Patients in the Hospital and to dismiss such who shall attempt advantages of that nature.

"7th That Non Commissioned Officers, Drums, & Privates shall only be admitted into the General Hospitals on their producing an Order signed by the Commanding Officer of the Corps to which they belong, specifying their names, Rank, and the Number of their Company and Regiment. This Order to have a Certificate from the Surgeon or Surgeons Mate of their Respective Regiments annexed to it setting forth their Age, Distemper or Wounds and the Day of their being sent into the Hospital, to which the Head Surgeon of the Hospital shall attach the initials of his Name, with the Day of the Month on which the Patient was received. He is also to Record in a Book to be kept for that purpose the Names of the Patients Received, their Ages and Diseases, &c., and when they are dismissed from the Hospital they are to be sent to their Respective Regiments accompanied with a Discharge from the Head Surgeon, mentioning their Names and Ranks, the time they were in the Hospital and the Day on which they were Discharged, Recording the same in the Hospital day Book already mentioned; all Vouchers specifying the time of Admission and Dismission of Non Commissioned Officers and privates &c. to and from the Hospital are to be sent to the Deputy Purveyor or to the Paymaster of the Troops for that District on the last Day of every Month, or as often as shall be found necessary for regulating the Established stoppages
of Daily subsistence for the sick of the Regiments, which stoppages are to be uniformly applied in discharging such of the Hospital Expenses as the Governor in Council shall direct.

"8th That no Medicines shall be applied for or administered in the Hospitals without the Orders of the Head Surgeon of that Hospital, of which Medicines an exact account is to be taken and stated in a Journal Book to be kept for that purpose, as a Voucher against Embezzlement and Miss Applications.

"9th That the Surgeons of Regiments and Corps shall send to the Head Surgeon of the General Hospitals of the District, weekly returns of their Sick specifying their Names, Ages, and Diseases, the Number admitted since last return and the Numbers discharged, all Requisitions for Medicines from the Surgeons of Regiments must be certified by the Commanding Officer of the Regiment for the time being and the Quantities sent from the General Hospital in consequence of such Requisitions are to be Regulated according to the Judgment of the Hospital Surgeon, who is to express the Quantity issued to the Regimental Surgeons in a particular Return to the Hospital Board, on the last day of every Month.

"10th The Monthly Returns of the Sick in the General Hospitals, together with the weekly Returns of the Sick belonging to the Regiments and Corps in their particular Hospitals, shall be forwarded by the Head Surgeon of the General Hospital along with his Requisitions for Medicines to the Hospital Board, who will order the quantities demanded to be sent without loss of time.

"11th That the Oldest Hospital Mate at each General Hospital shall have Charge of the Medicines but he is not authorized to issue them to the Regimental Surgeons without the Orders of his Superior the Head Surgeon of the Hospital. He is also to keep an Account of the Receipts, and Issues of Medicines, and to be allowed such an encrease of pay on that account as the Governor and Council shall direct.

"12th That the Governor and Council shall appoint a Purveyor at the Presidency for taking care of all the stores (Medicines excepted), who will receive from the Hospital Board full Instructions on the subject of providing Hospitals, Hospital Nurses or Attendants, Provisions and other Necessaries for the Sick. The Purveyor is to open a set of Books stating the quantities & prices of Provisions and other Articles purchased by Order of the Hospital Board. He is also to make out a Monthly state of his Receipts and expenditures and to transmit the same to the Hospital Board once in every Quarter, specifying the quantities Remaining in Store. The Purveyor's Books are to be open for the inspection of any of the Head Surgeons of the Hospitals whenever they shall think fit to examine them, The Purveyor shall have a Deputy at each General Hospital who shall purchase the Provisions according to the Directions of the Hospital Surgeon, and enter all his purchases and expenditures in a set of Books to be kept for that purpose which are to be open to the inspection of the Head Surgeon, and his Mates, as well as to the Officers Commanding Corps in the District belonging to the Hospital.

"13th That all Contracts for provisions must obtain the approbation of the Hospital Board, who are to take care that the Charges of Provisions daily consumed shall not exceed the usual prices of the Market where the Hospitals are stationed and if the pressing necessity of the sick should require such Relief from Diet as their pay is insufficient to furnish, the
Chief Surgeon of the Hospitals for the time being is to report the same to the Hospital Board, who will thereupon give him a discretionary Order for supplying their wants, of which supplies he is to make an accurate Return to the Hospital Board on the last day of every Month.

"14th That the Governor and Council shall direct the Medical stores to be placed under the care of an Apothecary who has been brought up in a Druggists shop, and that the Receipts and Expenditure of these Stores shall be accounted for according to the form in the Paper No. 1 hereunto Annexed, the Apothecary shall not however Issue any Medicines without an Order signed by the Hospital Board, and shall once in three Months give in a state of the Stores with the expenditures and Vouchers, as well as a list of such Medicines as may be wanted for the Service of the next Quarter. When any of the Medicines are Damaged a Surgeon and two Mates are to Survey them and report such as are unfit for Service to the Hospital Board who will condemn and dispose of them as they shall think proper.

"15th That the General Hospitals shall at times be supplied with a Guard from the nearest Regiment, and to be regularly visited by the Officer of the Day, who is to report to the Commanding Officer of the District the Daily state of the Hospital; The Head Surgeon or in His absence the first Mate of the Hospital is to accompany the Officer of the day upon his Rounds at the Hospital, and to answer such Queries as he may have occasion to offer, for the purpose of obtaining every necessary satisfaction regarding the situation and treatment of the Sick.

"16th That the Head Surgeon of each Hospital shall Visit the Regimental Hospitals in their particular Districts as often as possible, without neglecting the Hospital under their particular Charge, and the Officers of the Hospital Board shall frequently visit the General Hospitals at the out stations on leave being obtained from the Governor.

"17th That the Officer Commanding in Chief at each of the Presidencies, shall see and direct that good Order and Discipline be kept up in all the Hospitals, and that the Chief Surgeons as well as the Surgeons, purveyors, Apothecaries, and Surgeons Mates &c under them, shall discharge their respective Duties completely.—In case of Neglect or Misbehaviour in any of these Offices the Commander in Chief is to Report the same to the Governor and Council who will instantly suspend, Remove, or dismiss them on such Complaints appearing to be just and well founded.

"By Order of the Hon'ble President and Council. (Signed) John Chamier, Sec."
term in Madras appears to have been in August, 1796.* By
the end of the century the designation Hospital Board had been
superseded by that of Medical Board, and the latter term remained
the official designation of the Board until its abolition.

- The Calcutta Medical Board.—The Bengal Minutes of
Council of 22nd May, 1786, contain extracts of paras. 89–94 of
the Court's Letter of 21st Sept., 1785. Para. 89 gives the new
Hospital regulations. The other five paras. are the same as those
quoted above, as paras. 36–40 of the letter to Madras.

The same Minutes direct the appointment of James Ellis,
who was at the time Surgeon General and head of the Service,
as Physician General; of Andrew Williams, who stood next to
Ellis in seniority, and who was the senior officer in military
employ, as Chief Surgeon; and of John Fleming as Surgeon of
the Hospital at headquarters. Fleming thus superseded several
senior officers, including three out of the four Surgeon Majors of
the Army. The establishment of the Hospital Board is also
ordered, as follows:—

"Ordered that the Hospital Board consisting of the Physician General,
Chief Surgeon, and Surgeon of the Hospital established at Headquarters
do assemble without delay, and, having considered of such Regulations
as they may deem necessary for this Department, that they wait upon
the Commander-in-Chief with them for his Approbation, and finally that
of the Board." †

The Board held its first meeting on 29th May, 1786, when
the following order from the Bengal Council, dated 23rd May,
1786, directing its formation, and appointing its three members,
was read. All three were present. After this order had been
read, the Board made an application to Government to appoint
a Secretary, and adjourned.

"Gentlemen. I have already notified to you the appointments to
which you have been nominated by the Honble the Governor General and
Council in pursuance of a new arrangement made by the Honble Court of
Directors for the reform of their Medical Departments and for the conduct
of their Military Hospitals. This arrangement has been prescribed in a

† The Proceedings of the Calcutta Medical Board are preserved in the Imperial
Record Office, Calcutta; catalogued as Medical Board Proceedings, 1786–1854,
in the List of Home Department Records, 1749–1859. They fill 289 large folio
volumes.
‡ Board here refers to the Bengal Council.
separate General Letter from the Company bearing date the 21st September, 1785, and in a paper transmitted with it entitled 'Regulations respecting Military Hospitals in India.' An extract of the former and a copy of the latter are enclosed, together with copy of a Paper received from the Court of Directors and entitled 'Forms and Regulations for the Apothecary in charge of the Medical Stores at the different Presidencies in India.' These are transmitted to you for your information and Guidance.

"You will observe in the Regulations respecting Military Hospitals in India that the Honble the Governor General and Council are desired to appoint an Hospital Board which is to consist of the Director, Chief Surgeon, and Surgeon of the Hospital established at Head Quarters for the purpose of directing the necessary Regulations and Arrangements for all the Hospitals at the Presidency.

"It is the pleasure of the Honble the Governor General and Council that you form yourselves into an Hospital Board without delay for the purpose stated by the Court of Directors, and having considered of such Regulations as you may deem necessary for your Department that you wait upon the Commander-in-Chief with them for his approbation, and finally that of the Board.

"Mr R. C. Birch has been appointed Purveyor and Mr Edmund Bengough Apothecary, in consequence of the arrangement made by the Company.

"I am, &c, (Signed) E. Hay, Secretary. Council Chamber, Secret Dept. of Inpn, 23rd May 1786."

In the Minutes of Council of 3rd June, Thomas Gillies was appointed Secretary to the Board, and Gawen Turnbull, Assistant to the Apothecary. Bengough, Gillies, and Turnbull were members of the Bengal Medical Service; Birch, the purveyor, was not a medical man.

Neither Gillies nor Bengough held their appointments for long. Gillies got leave to go home in Dec., 1786, and did not return to India, Surgeon Alexander Campbell taking his place as Secretary. Bengough died in Calcutta on 10th Jan., 1787.

The new Regulations for Military Hospitals, quoted above, are entered in the Proceedings of the second meeting of the Hospital Board, on 6th June.

In accordance with the second clause of the new Hospital Regulations, the senior member of the Board, James Ellis, was entitled Physician General and Director of Hospitals, with a salary of £2500 per annum; the second member, Andrew Williams, Chief Surgeon, with a salary of £2000; while the Head Surgeon of the Presidency General Hospital, John Fleming, was appointed ex officio third member, with a salary of £1500.

Of the four officers who had hitherto held the rank and post of Surgeon Major in the Army, the senior, Andrew Williams,
had been appointed second member of the Board. In the Minutes of Council of 30th June, the other three were appointed Head Surgeons of Hospitals, Andrew Hunter of Barhampur; John Stormonth of Dinapur; and John Laird of Cawnpur.

* The establishment of the Board was reported to Court in a Bengal Secret Letter dated 28th Aug., 1786, as follows:—*

**Para. 260.** "Hospital Board has been formed, agreeable to Court's orders and consists of Mr. J. Ellis, Physician General.

Mr. A. Williams, Chief Surgeon.

Mr. J. Fleming, Surgeon at Head Quarters.

**Para. 261.** "Dr. F. Balfour, conceiving himself entitled to the Station of Physician General, addressed the Board on that Subject, claiming the Appointment, but his application could not be complied with.

**Para. 262.** "Salaries in the Medical Department fixed as follows.

Surgeon to the Hospital at Head Quarters, a Member of the Board, £1500 p. ann. Salaries granted by the Court in Pounds Sterling to be paid at the same rate of Exchange as those of the Council and Judges.

Secretary to the Hospital Board . . . 800 Rs p. Mº.

Allowance for Contingencies . . . 600 do.

Sub Secretary . . . . . . . . . . 400 do.

**Para. 263.** "Regulations for the Hospital Board will be found on Consultation. State the distinction to be observed with respect to the Surgeons employed in the Civil and Military Departments.

**Para 264.** "Purveyor to the Hospitals, Mr. Robert Birch appointed. Regulations for the Office are on Consultation. The Purveyor is to be paid by a percentage on his Disbursements, which is not yet fixed; His Deputies at each Station are allowed 400 Rs. each.

**Para. 265.** "Hospital Regulations. Physician General's observations thereon, stating the increase that would arise by the New Regulations; and that they were in many cases inferior to the old ones, and recommending a deviation from them till the Court's pleasure can be known. He was informed no deviation could be allowed. The General Hospital at the Presidency is to be considered as a Military Hospital, and the Patients admitted there, tho' not in the Military Service, are to be attended by the Surgeon of the Hospital at Head Quarters, and the Medicine supplied by the Purveyor.

**Para. 266.** "Medicine shop at Calcutta is delivered over to Mr. Edward † Bengough, who is to account to the Hospital Board for the receipt & issue of Medical Stores, and is allowed a Salary of 800 Rs p. Mº and his Assistant 400.

**Para. 267.** "Hospital wanting Repairs. Buxey ordered to Estimate the Expense.

**Para. 268.** "Surgeons and Assistants, no more than necessary."


† Edmund Bengough, as given in the appointment letter of 23rd May, 1786, is the correct name, not Edward. His Christian name is given as Henry in Dodwell and Miles' List. He was born in 1731, appointed Asst. Surgeon on 10th April, 1780, and died in Calcutta on 10th Jan., 1787. Francis Balfour succeeded him as Presidency Surgeon and Apothecary to the Company. (Proc. Med. Board, 23rd Jan., 1787.)
The Members of the Medical Board were not, at this time, administrative officers only. All three were also Presidency Surgeons, having to undertake the duty of attending all sick officers, military or civil, stationed at or on leave at the Presidency, and drawing pay as Presidency Surgeons in addition to their salaries as Members of the Medical Board. The third member, with the charge of the Presidency General Hospital, as well as his duties as a Presidency Surgeon and a Member of the Board, must have had his hands full. That their appointments and pay as Presidency Surgeons were in addition to their Membership of the Board is clearly stated in the note appended by Lord Cornwallis to the Regulations of 1788.*

A Letter from Court, dated 8th Jan., 1796, published in Minutes of Council, Mily. Dept., of 29th April, 1796, and in the C.G. of 30th April, 1796,† ordered the reduction of the number of Members of the Board from three to two, the Head Surgeon of the Presidency General Hospital, a post then held by Francis Balfour, losing his seat at the Board.

Five years later, in 1801, W. R. Munro, when Head Surgeon of the Presidency General Hospital, claimed the allowances of a Presidency Surgeon, but these were refused, on the ground that the holder of that post was no longer a Member of the Medical Board. The order to this effect is contained in a letter from the Bengal Government, dated 19th March, 1801, embodied in the Proceedings of the Calcutta Medical Board of 29th April, 1801.

"By resolution of 24th October 1788, the allowances of a Presidency Surgeon were granted to the three Members of the Medical Board, this being a Civil allowance, paid by the Civil Department, in addition to their military pay, as Members.

"The Head Surgeon of the General Hospital at the Presidency was then ex officio third Member of the Board, and drew the allowances of a Presidency Surgeon as third Member, not as Head Surgeon.

"By the orders of the Governor General in Council, dated the 24th June 1796, under instructions from Court, the Medical Board was reduced to two Members, the Head Surgeon of the General Hospital at the Presidency losing his seat at the Board. Members of the Medical Board were, in the same orders, permitted to draw the allowance of Presidency Surgeon still, but this did not apply to the Head Surgeon of the General Hospital, who was no longer a Member.

"Mr Balfour was then Head Surgeon of the General Hospital at the Presidency, and lost his seat at the Medical Board, and his allowances as Presidency Surgeon.

* See Chap. XVI, Military and Civil.  
† Ibid.
Mr. Balfour was subsequently permitted to draw the allowances of Presidency Surgeon.

Mr. Munro has therefore no claim to the allowances, even though he once drew them for a short time, while officiating as Head Surgeon and third Member of the Medical Board."

In a letter dated 23rd April, 1802, contained in the Proceedings of the Calcutta Medical Board of 24th April, 1802, Munro asked to be appointed to a seat at the Medical Board, as Head Surgeon of the Presidency General Hospital, and stated that a third member had again been appointed to the Medical Boards of Madras and Bombay. The statement appears to have been correct, as regards Madras, but not with respect to Bombay.

In 1805 the number of Members was again raised to three, by Bengal G. O. of 31st July, 1805, published in the C.G. of 8th Aug., 1805.

"The Governor General in Council is pleased to direct, conformably to recent orders of the Hon'ble the Court of Directors, that Mr. John Fleming, who has returned to Bengal from furlough, be appointed an additional member of the Medical Board, to take rank according to his standing in the Service.

"The Medical Board is to consist of three Members, until further orders, as follows, viz.: —

Mr. J. Fleming, first member.
Mr. F. Balfour, second member.
Mr. W. R. Munro, third member."

The three Members originally appointed to the Calcutta Medical Board were, as stated above, James Ellis, Andrew Williams and John Fleming. In para. 261 of the Bengal Letter of 28th Aug., 1786, quoted above, it is stated that Francis Balfour claimed the first place at the Board, but that his claim had been rejected. The C.G. of 20th Dec., 1787, notified that Andrew Williams had resigned the Service. John Fleming became Chief Surgeon and second Member, while Francis Balfour got the post of Head Surgeon of the Presidency General Hospital and ex officio third Member. Assistant Surgeon James Campbell succeeded Balfour as Apothecary. He also became Secretary to the Board later on.

A Mily. Letter from Fort William, dated 30th April, 1804, states in paras. 144, 145, that Mr. James Campbell, Apothecary, is allowed to draw salary as Secretary to the Medical Board, but that the two appointments should not be combined.

A year later, the C.G. of 12th Feb., 1789, notifies the appointment of James Lynd to be Head Surgeon of the Presidency
General Hospital, and youngest member of the Medical Board, in place of Balfour, who had gone home.

Ellis resigned on 24th Dec., 1789, when the Governor General, Lord Cornwallis, wished to appoint John Fleming to succeed him as President of the Medical Board. Protests were made by two Surgeons, senior to Fleming, who had not yet served on the Board, Andrew Hunter and John Laird. A letter from Lord Cornwallis to the Court, dated 4th Nov., 1789, gives his reasons for preferring Fleming as follows, (Abstracts, Letters from Bengal, Vol. V, 1789-95, p. 18) :—

Paras. 6 to 10. "Messrs. Hunter and Laird. Admits the latter to be a Man of Professional Ability; but having come from Canton since Mr. Fleming's admission into the service, in whose abilities the Inhabitants in general repose the highest confidence, did not think it necessary to fix him (Mr. Laird) at the Presidency, which would have induced Mr. Fleming to have relinquished his appointment. With respect to Mr. Hunter, represents him as a Man, who had been more engaged in pecuniary transactions, than in the pursuit of any Professional knowledge. Shall however recommend to the Board to appoint Mr. Hunter to the office of Chief Surgeon, when it shall become vacant."

The Bengal Government appears to have considered that the Court had ordered Hunter's appointment as President, for the C.G. of 31st Dec., 1789, notifies his appointment as President of the Hospital Board, and also the appointment of W. R. Munro as Head Surgeon of the Presidency General Hospital and third Member of the Board, in place of Lynd, who appears to have gone home.

The Directors, however, ordered Hunter to be removed, in para. 21 of a Mily. Letter from Court, dated 15th Dec., 1790, (Abstracts, Despatches to Bengal, Vol. II, 1785-97).

"Messrs Hunter and Laird. We are perfectly satisfied with the reasons for superseding Mr. Hunter, and as in conformity to our supposed Orders you appointed him President of the Hospital Board, it will be necessary to form another Arrangement. As to Mr. Laird, no explanation of our former Orders appear necessary."

A Bengal Mily. Letter of 10th Aug., 1791, reports Hunter's removal, and another, dated 25th Nov., 1791, informs the Court that Laird has been appointed President, (Abstracts, Letters from Bengal, Vol. V, 1789-95, pp. 151 and 174).

10th Aug., 1791, paras. 17-19. "Surgeon Hunter. Removal from the Station of President at the Hospital Board. These orders have been
communicated to him, and he is removed accordingly. He has addressed a Memorial to the Court in consequence."

25th Nov., 1791, paras. 115-118. "Hospital Board. Mr. Laird appointed President on the recommendation of Lord Cornwallis. Mr. Fleming to take charge of the Duties of that Station during the absence of Mr. Laird with the Bengal Troops on the Coast. Mr. Hunter to take charge of one of the Hospitals on the first Opening that offers, and in the meantime to draw the allowances of a full Surgeon."

The orders of the Directors on these changes were conveyed in paras. 62, 63, of a Mily. Letter from Court dated 25th June, 1793, (Abstracts).

Para. 62. "Allowances to Messrs Laird and Fleming, from the period of Mr. Hunter's discontinuance in the Office of President of the Hospital Board, approved.

Para. 63. "Allowance to Mr. Hunter, have already expressed our approbation thereof."

Hunter was never reappointed to the Board, but remained a Head Surgeon till he retired in Oct., 1797.

A Mily. Letter from Court, dated 6th May, 1791, in paras. 61 and 67. (Abstracts), nominated Andrew Williams to the post of President of the Board. Williams, however, never returned to India.

Para. 61. "Surgeon Mr. Andrew Williams permitted to return to his rank as Senior Surgeon. He is to take his Seat as President at the Medical Board, on the first Vacancy after his Arrival, meanwhile to be employed wherever an Opportunity shall offer."

Para. 67. "Senior Surgeon Mr. Andrew Williams has leave to remain till next Season."

In Jan., 1794, George Boyd was appointed to the third seat at the Board, as Head Surgeon of the Presidency General Hospital, in place of Munro, who had been transferred to the charge of the hospital at Dinapur. Soon after, Balfour, who had returned from England in 1792, was re-appointed Head Surgeon of that hospital, and third member of the Board. It was Balfour who lost his seat when the Board was reduced from three to two members in 1796.

On 8th Dec., 1800, Laird went home on furlough. He retired on 2nd June, 1802, without returning to India. On his departure Balfour at last got permanently on to the Medical Board, to which he had first been appointed in 1789, eleven years before. Fleming went on furlough in Dec., 1802, when Balfour became
President, and Munro second member, by Bengal Order dated 13th Jan., 1803, entered in the Proceedings of the Medical Board of 31st Jan., 1803. On Fleming's return in 1805, as stated above, the number of members was again raised to three, Fleming resuming his post as President.

The Madras Medical Board was constituted on 14th April, 1786, a month earlier than that of Calcutta, as recorded in the Madras Mily. Cons. of that date. It was, of course, formed in obedience to the orders conveyed in the Court's letter of 21st Sept., 1785. But earlier in the same year the Madras Council had determined to introduce a somewhat similar method of medical administration. The same Cons. of 1st Jan., 1786, contain a long minute by Sir John Dalling, the Commander-in-Chief, on the Medical Department. This minute, with another minute on it by Mr. Daniell, a Member of Council, and Dalling's reply, fill eighty-nine folio pages. On 17th Jan. the Council determined to adopt the system proposed by Dalling, and to appoint a Committee of three, Surgeon General James Anderson, and the two Surgeons next in seniority, Colley Lucas and Arthur Sinclair, to frame regulations for the Medical Department. The report of this Committee is contained in the Cons. of 1st Feb. On 3rd Feb., the Committee to administer the Medical Department was formally appointed, consisting of James Anderson, Colley Lucas, and William Horsman, Surgeon of the 73rd Highlanders. Sinclair protested against Horsman's appointment, and claimed the third seat, but without success. Lucas also claimed to be ranked above Anderson. His claim and its rejection were reported in a Mily. Letter from Fort St. George, dated 2nd Dec., 1786, paras. 18 to 21, (Abstracts, Letters from Madras, Vol. III. 1785-92).

"Mr Lucas, the Chief Surgeon, claims rank above Dr Anderson, the Physician General, referred to the Court to decide. The Board believe it will not be thought entitled to the consideration expected by Mr Lucas who has since requested to be styled Surgeon General instead of Chief Surgeon. Papers on the subject transmitted."

The Mily. Cons. of 13th and 17th Feb. contain observations, made by this Committee on Sir John Dalling's minute.

This Committee was superseded by the Medical Board, established under orders of Court from 14th April, 1786, when the Board was constituted; composed of James Anderson, Physician
ENGRAVED FOR THE BEE.

James Anderson, M.D.
MADRAS.

Published by J. Anderson, May 9th, 1792.
General; Colley Lucas, Chief Surgeon; and Thomas Davies, Head Surgeon of the Presidency General Hospital; with Job Bulman as Apothecary. Andrew Berry was subsequently appointed Secretary on 6th May. The Cons. of 6th May contain a ruling that the new medical arrangements apply to the Company's troops only. The formation of the Medical Board was reported to Court in paras. 46–50 of a Letter from Fort St. George, dated 14th Oct., 1786. (Abstracts, Letter from Madras, Vol. III, 1785–92).

The dispute as to precedence between Anderson and Lucas, mentioned above, is of some interest. Lucas put in his claims in a long letter, which is entered in the Madras Mily. Cons. of 17th Oct., 1786. He states that he received a commission as Surgeon in the A.M.D. in June, 1761, was ordered to the Coast in 1762, and arrived in Aug., 1762; and that he entered the Company's service in 1764, "to rank next Mr. Gray," who stood next below Pasley. He further states that he did not consider himself superseded by Anderson's appointment to Madras before him, because a Physician was then required, and he, as a Surgeon, made no claim to fill the post of Physician.

The Madras Council ordered that a copy of Lucas' letter should be sent to Anderson, and Anderson's reply is entered in the Mily. Cons. of 26th Oct., 1786. The gist of Anderson's letter is given in the two following paragraphs:

"In the year 1762, when the expedition against Manilla took place, the Deputy Governor and Council for that Station, finding the Service would be in distress by having only one Surgeon (Mr. Grey) for the expedition did apply to me in person as well as through the medium of Captain Jackson of the ship Essex (of which ship I was then Surgeon and on which they sailed from Madras) to enter into the Service.

"For this purpose and at the same time to procure a Surgeon for the ship, I exchanged with Mr. Cooper of His Majesty's Artillery, and remained at Manilla, with the double appointment of Surgeon in His Majesty's and the Honble Company's Service, and Mr. Grey's Illhealth obliging him to return to the Coast the whole Duty of the Manilla Department fell on me, a twelve month before Mr. Lucas even by his own account ever thought of entering into the Service of the Honble Company."

Anderson's statement that he held a commission as Surgeon in both the King's and Company's services at the same time is of special interest. Fifty years later William Twining held a commission as Assistant Surgeon in the King's and one in the Company's service simultaneously for six years, from 1824 to 1830. Anderson
further states that, when appointed second Surgeon at Madras, he superseded two officers senior to him in the Service, Hinchley and Maule.

In another letter, entered in the *Mily. Cons. of 7th Nov., 1786*, Lucas states that he had no wish to injure Anderson, and asks to be styled Surgeon General of the Forces on the Coast. The Madras Council stated that they had no power to make such an appointment, and sent the whole correspondence home for the decision of the Court. This decision was in favour of Anderson. The whole trouble seems to have originated in the wording of Lucas’ first appointment, “to rank next Mr. Gray”; Anderson, who was then at Manilla, being apparently forgotten.

At the same time that the Hospital Board was constituted, three Head Surgeons were appointed, Whyte, Turing, and Duffin. The senior officers of the Madras Service at this time stood in the following order—

James Anderson, 1762.  
Arthur Sinclair, 6th June, 1763.  
Colly Lyon Lucas, 9th Jan., 1764.  
William Raine, March, 1764.  
Thomas Davies, 13th Aug., 1764.  
William Gordon, July, 1759.  
James Whyte, June, 1765.  
Robert Turing, 1st Aug., 1766.  
William Duffin, July, 1767.

The first five had joined as Surgeons, so ranked senior to Gordon, who joined as Assistant Surgeon, becoming Surgeon on 30th June, 1766. Anderson, Lucas, Sinclair, and Raine had all served in the A.M.D. previous to entering the Madras Service.

Three of the nine, it will be seen, were passed over in making these appointments. Sinclair was recommended by the Hospital Board for appointment as Head Surgeon, but rejected by the Madras Council on account of ill-health. He died in June, 1786, so apparently the Council were right. Raine asked to be allowed to decline the charge of a General Hospital, and to retain his post as medical officer to sick officers in Black Town, and was allowed to do so. Gordon was passed over as unfit for the charge of a General Hospital. The Hospital Board, in *Mily. Cons. of 26th May*, recommended that Gordon should receive some gratification, rather than the responsible charge of a hospital. The Council asked what gratification they suggested, and on 3rd June, they recommended that he should receive a personal allowance of 100 pagodas a month instead of promotion.

In *Mily. Cons. of 9th May, 1786*, the Council ordered, with
reference to Raine's case, that any Surgeon declining an appoint-
ment should have no claim to promotion in future. And as
regards Gordon, in the Cons. of 13th June, they ordered—

"If a Surgeon is not qualified to discharge the duties of Hospital
Surgeon when it may be his turn to succeed to that Station, it is not just
that he should be appointed in his turn, nor reasonable that he should be
considered entitled to Additional Pay as a Surgeon on Account of his
being found not fit to fill a Superior Station."

Two years later, however, the Council granted Gordon a per-
sonal allowance of 50 pagodas a month, in Mily. Cons. of 13th
May, 1788, and on 4th June, 1793, three months before his death,
he was duly promoted to Head Surgeon after all.

Davies died at Madras on 24th April, 1788. Gordon applied
for his place. On 29th April the Hospital Board recommended
the promotion of Raine to the vacant post of Head Surgeon
Madras General Hospital, and third Member of the Board. The
Council rejected Raine, because he had refused the charge of a
General Hospital, and promoted Duffin, who stood next, Whyte
and Turing having just retired. A Mily. Letter from Court,
dated 5th March, 1790, orders in para. 7, (Abstracts, Despatches to
Madras, Vol. I, 1743-92)—

"Head Surgeon and Member Hospital Board. Mr Wm Raine must
be appointed in the room of Mr Wm Duffin, who is junior to him."

In the original draft of this letter the Court state that Raine
had been passed over because he had declined the charge of a
General Hospital. In answer to this, the Court decided that Raine
had asked permission to retain his charge as Surgeon of Black
Town, with medical charge of sick officers there residing, in pre-
ference to taking the charge of a General Hospital, and had been
allowed by the Madras Government to do so; and that his long
captivity in Maisur, his services during that time to the other
prisoners, and his general professional merits, deserve promo-
tion in his turn. Apparently no reflection on Duffin was
intended.

Raine's appointment is noted in the Mily. Cons. of 4th July,
1790, and he took his seat at the Medical Board on 6th July. At
this time, however, Lucas, the Chief Surgeon and second Member
of the Board, was absent on deputation as Surgeon General of the
Madras forces serving in the third Maisur war. Raine therefore
joined as permanent third and acting second Member of the Board, Duffin retaining his seat as acting third member. Lucas rejoined on 6th June, 1792, and Duffin, who had applied for sick leave on 12th March, vacated the appointment and went home. He asked and got permission to return to India in May, 1795, but changed his mind. A Mily. Letter from Court to Madras, dated 18th Oct., 1797, states in para. 5 that Duffin, not having returned to India in the previous year, must be considered to have left the Service, and orders the payment to him, through his attorneys at Madras, of a gratuity of 1000 pagodas.

Two Madras G.O.'s of 1794 give the duties of Members of the Medical Board and of Superintending Surgeons respectively.

G.O. 29th Jan. 1794. "As the Regulations for the Medical Department, published in the Orders of Government of the 4th ultimo, do not define with sufficient accuracy, the Duties to be exercised by Head Surgeons, the Honourable the President in Council is pleased to declare, that it is the particular province of the Head Surgeon to visit every Hospital in the District, European and Native, as often as may be practicable, to have free access upon all occasions, to the sick whether in Hospital or Barracks, and to give such directions regarding them as he may find expedient; to see that the Clothing, Bedding, &c be complete and sufficient for the number of sick, and that the Diet be good and wholesome, and conformable to the Diet Tables laid down; that due cleanliness be preserved in the Hospital, and that proper Medical attendance be provided; at the end of each visit, the Head Surgeon is to report to the Hospital Board, the state of every Hospital, particularizing for the information of Government such matters, requiring redress, as may occur."

G.O. 19th March 1794. "As the regulations for the Medical Department, established during the Government of Sir Archibald Campbell,* do not accurately define the specific duties required of the Senior Members of the Hospital Board, in regard to a personal superintendence of the different Hospitals on the Coast, the Honourable the President in Council has been pleased to resolve, that the Physician General, and Chief Surgeon, shall alternately visit the Hospital at the Presidency once a week, and that the Chief Surgeon shall once in every year, at such time as may be approved by the Hospital Board, proceed to each of the other General Hospitals on the Coast, and make enquiry into every matter relating to them and to the conduct of the respective Surgeons, taking especial care, that the President in Council be made acquainted through the Hospital Board, with all circumstances necessary for his information."

By the orders of Court dated 7th Jan., 1796, the Board was reduced from three to two members, and Raine lost his seat.

* The Medical Regulations of 1786. Major-General Sir Archibald Campbell, K.C.B., was Governor of Madras from 6th April, 1786, to 7th Feb., 1789, and also Commander-in-Chief. The Regulations were revised in 1793.
A Mily. Letter from Fort St. George, dated 16th Aug., 1796, reports in para. 56—*

"Dr William Raine allowed in consideration of circumstances brought forward in his favour by the Hospital Board to retain his former salary of £1500 p. Annum, and the Station of Head Surgeon, and upon retiring from the Service will be entitled to the Pension of £500 p. annum."

The order reducing the numbers of the Board was published as G.O. of 27th July, 1796, and the reduction is also recorded in *Mily. Cons.* of 2nd Aug., 1796.†

Raine was out of the Board for a few months only, being re-appointed, as second member, on the death of Lucas on 25th March, 1797.

The Madras Board got back its third member earlier than did the Calcutta Board. An order from Court dated 29th May, 1799, granted permission to return to India to Head Surgeon Terence Gahagan, and directed his appointment to a seat on the Board.‡

Gahagan was appointed Assistant Surgeon on 4th Aug., 1767, so had now over thirty-two years' service. He arrived in Dec., 1799. On the 31st Dec., the Medical Board recommended his appointment as Head Surgeon of the Madras General Hospital, with a seat at the Board. The Court's order directing Gahagan's appointment to the Board seems to have been taken as sanction to raise the numbers of the Board again to three. A Mily. Letter from Fort St. George, dated 22nd Jan., 1800, reports in para. 12 that he had been appointed to the Board.

Gahagan's appointment was followed by friction with the Madras Government. A Mily. Letter from Fort St. George, dated 14th April, 1800, reports in paras. 25 and 26—§

"Mr Gahagan's return from England, and appointment as Head Surgeon of the Presidency General Hospital, and his intention to take into his own hands the management of the Hospital.

"Charge of the General Hospital at the Presidency. Animadvert on the conduct of the Medical Board in submitting, upon the arrival of Mr Gahagan with the Court's appointment thereto, that Gentleman's

proposed intention to undertake the interior Management of the Hospital, according to the orders of 1786, thereby recommending the revival of a system noted for its flagrant abuses, and the abolition of the very Regulations suggested by themselves for their correction. Remark that unless the Medical Board shall observe a Conduct more consistent with its own principles and the general integrity of the Service, they shall not confine their animadversion to mere disapproval."

When the Madras Government stated that their animadversion might not be confined to mere disapproval, they greatly understated the case. They had already removed Gahagan from the Service, and in a letter dated 13th April, the previous day, had informed him that they could not reconsider their resolution for his departure from India. The Mily. Cons. of 22nd April record Proceedings of the Medical Board, with recommendations regarding appointments consequent on the furlough of Mr. Raine, and the removal of Mr. Gahagan from the Service. *

Gahagan having been removed and sent home, and Raine having gone on furlough, Anderson was left for a month as sole member of the Board. Nicol Mein, the senior Head Surgeon, was appointed to the Board, and joined before 20th May. For a year and a half, the Board was again reduced to two members.

Raine and Gahagan sailed together, in the Asia. Raine died on board, on 7th July, on his way home.

Gahagan seems to have had considerable influence with the Court of Directors. In 1799 they had given orders for his appointment to the Board, and on the present occasion they overruled the orders of the Madras Government. Before the end of 1801 Gahagan was back in India, and was again a Member of the Board. A Mily. Letter from Fort St. George, dated 15th Oct., 1801, reports that Mr. Gahagan has resumed his seat at the Medical Board. Mein retained his place, and the numbers of the Board again became three, this time permanently.

The issue of a new Code of Medical Regulations is reported in a Madras Mily. Letter of 22nd Feb., 1803, paras. 130, 131.

Mein died at Fort St. George on 3rd April, 1804, and was succeeded by James Richardson, who held office for nearly three years, till he died at Madras on 13th Feb., 1807. On Richardson's death Andrew Berry, who had been the first Secretary of the Board, was appointed third Member. Berry had entered

as Assistant Surgeon on 27th Sept., 1784, becoming Surgeon on 25th April, 1791, so had little over twenty-two years' service when he reached the Board. The senior Surgeon on the Madras list was the Botanist, William Roxburgh, but he was a member of the Service in name only, having been Superintendent of the Calcutta Botanical Gardens for fourteen years, since 1793. The next was Head Surgeon A. Watson, who had entered on 7th June, 1777, so was over seven years senior to Berry. He appealed without success against Berry's appointment, but was destined to get even with the latter two years later. The third, Maxwell Thompson, had years before been debarred from promotion beyond the rank of Surgeon, for neglect of duty. The fourth, Head Surgeon Henry Miller, was on leave at home prior to retiring; he left the Service on 16th Aug., 1808. The fifth and sixth were Henry Harris and Alexander Boswell, both of whom entered on 4th July, 1783; both subsequently became Members of the Board. Berry stood seventh.

There appears to have been friction between Anderson and Gahagan, as is natural enough, if Anderson had anything to do with Gahagan's dismissal in 1800. A Madras Mily. Letter of 21st Oct., 1807, reports in paras. 747–749—

"Appointment of Mr. Goldie to be Medical Storekeeper in preference to either Messrs Horseman or Ainslie, which created such dissensions at the Medical Board (and which daily occur) as to render them a subject of ridicule to the whole Settlement."

After Anderson's death, when Gahagan, Watson, and Berry constituted the Board, Goldie again became a subject of contention, for a Mily. Letter of 15th March, 1811, reports in para. 538—

"Intemperate discussion at the Medical Board on appointment of Mr. Goldie."

John Goldie also rose to the top of the Service in his turn. He entered as Assistant Surgeon on 12th Jan., 1790, became S.S. on 10th July, 1812, Member of the Board on 15th May, 1819, retired on 31st Dec., 1823, and survived his thirty years of Indian service for another thirty years, dying in London on 11th June, 1855. William Horseman, who is mentioned in the above extract is,

* See Chap. XXXIV, Courts-martial.
as the dates of course show, not the same William Horsman who was a Member of the Medical Committee of Feb.-March, 1786. He entered the service on 1st Jan., 1798, became S.S. on 2nd Feb., 1823, and retired on 21st June, 1828. Whitelaw Ainslie was the well-known author of *Materia Indica* and many other works. He entered on 17th June, 1788, became S.S. in 1810, retired on 28th Feb., 1815, was knighted on 10th June, 1835, and died in London on 29th April, 1837.

Anderson died at Madras on 5th Aug., 1809, and Gahagan became President of the Medical Board. The title of Physician General was revived for his benefit, as reported in a Mily. Letter from Madras, dated 6th Feb., 1810, paras. 373-75. Watson came into the Board, apparently as second Member. Gahagan retired on 29th Feb., 1812, with nearly forty-five years' service, and was specially recommended by the Madras Government for an increase of the usual pension. It is to be hoped he got it, for he survived his retirement less than two years, dying in London on 21st Jan., 1814.

On Gahagan's retirement, Watson was appointed President, and Harris second Member of the Board, both superseding Berry, who had previously superseded them both, and now remained third Member. A Mily. Letter from Madras, dated 17th Oct., 1812, reports these appointments (para. 235), and also that Berry had submitted a protest couched in very intemperate language (para. 236). His protest was without effect. He went on furlough (para. 237), and was succeeded by Alexander Boswell. Berry retired in England on 10th Aug., 1814.

In *Mily. Cons.* of 28th March, 1776, Thomas Howell was appointed Assistant Surgeon, and Secretary to the informal Medical Board, composed of Pasley and Anderson. On the institution of the permanent Medical Board in 1786, Andrew Berry, a young Assistant Surgeon of less than two years' service, was chosen as Secretary. Berry was Anderson's nephew, which probably was the reason why he was chosen for the post. The Court of Directors disapproved of his appointment, and insisted that a member of the Civil-Service should hold the post. A Military Despatch to Madras, dated 31st July, 1787, states in paras. 6 to 9, (Abstract)—

"Military & Hospital Boards, their proceedings in establishing them approved. Secretary & Deputy to the former must be filled by Civil
Servants & Secretary to the latter, by one of our own Servants, no increase of allowances must be made without our orders."

In the original draft para. 8 runs as follows:

• "We also disapprove of the Appointment of Mr Berry to be Secretary to the Hospital Board and direct that the office be filled by one of our Covenanted Servants, at the salary of 50 Pagodas p. Month as already settled by you."

In obedience to this order a Mily. Letter from Fort St. George, dated 1st March, 1788, reports in paras. 129 to 131, (Abstract)—

"Hospital Board. Mr Berry has been removed from post of Secretary and Mr Atkinson a Civil Servant appointed in his stead. Board wrote us on Mr Atkinson's appointment that the office could only be filled properly by a Person bred to the Medical Profession. Hope, however, that Mr Atkinson will be found competent."

The Medical Board succeeded in carrying their point, and before long got a medical officer as their Secretary. A Mily. Letter from Court, dated 8th April, 1789, states in para. 92, (Abstract)—

"Secretary to Hospital Board, approve of appointment of Mr Edwd Atkinson, but if none but a Medical man can be adequate to the task, Mr Berry may be restored."

Atkinson held the post for nearly two years. A Mily. Letter from Fort St. George, dated 15th Jan., 1790, reports in para. 31—

• "Secretary to the Hospital Board. Mr V. Conolly appointed in consequence of Court's permission to nominate a Professional man to that post if judged necessary."

Berry protested against Conolly's appointment as Secretary, and obtained an order for his reappointment to that post from the Court of Directors. In a Mily. Letter of 15th Dec., 1790, they wrote in para. 11, (Abstract)—

"Secretary to Hospital Board. Mr Berry must be restored to that office."

A Mily. Letter from Fort St. George, dated 14th July, 1791, reports in para. 33, (Abstract)—

"Secretary to the Hospital Board. Mr Berry appointed, and will take charge of the office, as soon as his services in the Field can be dispensed with."
It seems curious that the Court should have desired the appointment of a Civilian as Secretary to the Madras Medical Board. The selection of members of the Medical Service for the corresponding posts in Bengal (Thomas Gillies), and in Bombay (John Williams), seems to have met with no objection. With the single exception of Atkinson, the post, in all three Presidencies, was always filled by a medical man; as the corresponding post, of Secretary to the Director General, is filled to this day.

In 1794 the Madras Government tried to get more work out of the Medical Board. A Mily. Letter of 18th Feb., 1794, states in paras. 85–87, (Abstract)—

"Physician General and Chief Surgeon, unless actively employed in their profession, as well as Members of the Hospital Board, cannot render any Service at all adequate to their Salaries; it is therefore recommended as well to amend the Regulations of 1785 as to direct that they shall by turns visit the Madras Hospital Weekly or daily, and that when required they shall attend any of the Civil Servants or Military Officers at the Presidency, and that all Surgeons shall be obliged to give their aid to the Servants of every description."

The attempt failed. Mily. Letter of 2nd Oct., 1795, notes in para. 30 that, on account of the amount of official correspondence required—

"The Services of the Physician General and Members of the Hospital Board cannot be rendered more extensively useful."

On 1st July, 1800, Anderson and Mein, the then Members of the Madras Board, represented that their salaries, and those of the Head Surgeons, were insufficient. The Madras Government agreed, and in paras. 91–94 of a Mily. Letter dated 9th Oct., 1800, reported to the Court of Directors—

"Inadequate salaries of Members of Medical Board and Head Surgeons, compared to those in Bengal. Recommend being put on same footing as Bengal."

In the orders establishing the Medical Boards, the salaries of the Members, in Bengal and Madras, were fixed at exactly the same rates. Presumably the above complaint refers to the fact that in Bengal the Members of the Board were also given the pay and allowances of Presidency Surgeons, in addition to their pay as Members of the Board. Apparently this was not the case in Madras. But it appears, from the extracts from
letters of 1794 and 1795, given above, that neither did the Members of the Madras Board perform the duties of Presidency Surgeons.

The Bombay Medical Board.—The Hospital Board at Bombay was not instituted until more than a year later than those of Bengal and Madras. At a meeting of the Bombay Council held on 16th Aug., 1787, the establishment was ordered of a Hospital Board, composed of two Members, Andrew Durham, Physician General and Director, on a salary of £1500 per annum, and Richardson Harrison, second Member and Hospital Surgeon, on £800.

Why the Bombay Service was treated so much worse than Bengal and Madras is not apparent. The number of Members of each Board, and the salaries of each, are distinctly laid down in the Medical Regulations attached to the Court's Orders of 21st Sept., 1785. Bengal and Madras each got a Board composed of three Members, on £2500, £2000, and £1500, respectively; Bombay only two members on £1500 and £800. The salary of the Physician General at Bombay was the same as that of the third Member in the other Presidencies; that of the second Member at Bombay little more than half the same amount, and less than the salary allotted to the Head Surgeons of the General Hospitals upcountry in Bengal and Madras. It is true that the Bombay Service was much the smallest of the three; but this hardly accounts for the great difference in the pay.

The two original Members of the Board, Durham and Harrison, were fortunate in getting these appointments, in spite of the comparatively low pay they carried. Had the Bombay Board, like the other two, been constituted in 1786, John Blakeman, who died at Bombay on 1st Aug., 1787, would have been senior member, Durham second; while A. G. Clugstone, who went home on furlough in the Rockingham in March, 1787, was also senior to Harrison.

The Government order appointing the Bombay Board runs as follows:—

Extracts from the Proceedings of Government in the Public Department, dated 16th August 1787.

"The Board now meet to carry the Company's Commands into Execution relative to the Hospital received in December last.

* From the Bombay Record Office.
The Appointment of the Hospital Board being the first Object of
Consideration Resolved that it be composed of—
Mr Andrew Durham as Physician General and Director with a
salary of £1500 per Annum.
Mr Richardson Harrison as Hospital Surgeon with a Salary of
£800 per Annum.

Resolved that the Board above constituted be furnished with the
copies of the Company's Regulations for their Guidance and in conformity
thereto be instructed to recommend to us as soon as possible such Surgeons,
Mates and Assistants as they may judge properly qualified for the Several
Hospitals—also that they frame and lay before us such regulations as
they may deem necessary for conducting the Medical Department pursuant
to the plan prescribed by the Company.

"When the report now ordered shall be laid before us, we shall make
the other appointments & arrangements necessary on the above subject."

The Bombay Board held its first meeting on 24th Aug., 1787,
and addressed to the President and Council a long letter, in which
they protested against the constitution of their Board on terms
inferior to those of Madras and Bengal, asked for a Secretary,
and suggested various appointments. At their second meeting,
on 28th Aug., they forwarded a second letter on the subject of
the provision and cost of medicines, and asked Government to
purchase from them the Hamams, or Turkish baths attached to
the Hospital, which were the property of the Surgeons.*

The first of these letters is given below; also the answer of
the Bombay Council, dated 1st Sept., 1787, in which they refused
to sanction a third Member of the Board on their own responsi-
bility, but agreed to transmit the request to the Court; sanctioned
most of the appointments recommended, including that of John
Williams as Secretary to the Board; and refused to purchase
the Hamams.

Letter from the Members of the Hospital Board, dated 24th August, 1787.†
"To The Hon’ble Rawson Hart Boddam, Esquire, President & Governor
&c Council.
"Hon’ble Sir and Gentlemen,
"Under the 16th instant we were furnished by your Secretary
with a Copy of the Regulations established by the Hon’ble Company for
the conducting of the Medical Department, and at the same time we were
directed to recommend to your Honour &c such Surgeons, Surgeon’s

* The Bombay Cons. of 12th May, 1772, record that these hamams have lately
been built, and that the Surgeons recommend their use in the treatment of the
sick in hospital. On 2nd June the proprietor offered to sell them for Rs. 8000,
or to rent them for Rs. 150 a month. Government closed with the latter offer.
Presumably the Surgeons bought them afterwards. Government purchased them
from the Surgeons for Rs. 6000 on 14th Oct., 1787.
† From the Bombay Record Office.
Mates, and Assistants as might be eligible to superintend the several Hospitals pursuant to the Regulations, and also to frame such others as might appear to us best adapted to carry the plan prescribed by the Hon’ble Company into Execution.

"Permit us to observe, Hon’ble Sir and Gentlemen, that after the most attentive perusal of the Regulations, we cannot reconcile the latter part of the first Paragraph that relates to Bombay, either to the second Paragraph or to the spirit of the Regulations at large. The latter part of the first Paragraph makes Provision for no more than two, the Physician General, as Director and one Surgeon of the Hospital, whereas by the second Para an Hospital Board is appointed which is to consist of the Director, Chief Surgeon, and the Surgeon of the Hospital established at Head Quarters, for the purposes of directing the necessary regulations and arrangements for all the Hospitals in the Presidency, whereby it appears that a degree of responsibility is intended to be lodged in the Board, not only with regard to the manner in which the Medical Department in general is to be conducted, but also with regard to the propriety of the appointments of the several Surgeons, Surgeons Mates and Assistants, whose Professional abilities are supposed to be better known to the Members of the Hospital Board than to others. We are however humble of opinion that two are not competent to constitute a Board possessing any degree of power or responsibility, unless for a short time; for in all matters to be decided upon by a Board, when the number of voices are equal the casting one generally rests with the oldest member, but where there are only two, whenever a difference of opinion may arise, there must be either no business done, or the opinion of the Senior must be followed, which is in effect to vest the sole power in one person.

"We beg leave further to remark to your Honour &c that we humbly conceive the particular situation of this Presidency was not sufficiently attended to when these regulations were framed, or two Surgeons would not have been deemed adequate to afford due attendance to the numbers generally sick belonging to this Garrison; which we believe much exceed those at Fort St. George, and in general even equal those at Calcutta; in both of which places the Hospital Board is to consist of three members. The number sick in the three Hospitals by the reports of this morning amounted to 325 of which 221 were Europeans. The Hospitals being situated at some distance from each other and two of them without the gates, render it scarcely in the power of two Surgeons to give them due attendance consistently with the other parts of their duty, the attending on the Hon’ble Company’s Servants and their families when sick; and indeed this has hitherto been the opinion of the Hon’ble Company themselves, who have until now allowed four Principal Surgeons of the Hospital of this Garrison.

"Should the reasons already urged be thought to require any additional force to show the propriety and necessity of appointing a third Member to the Hospital Board a considerable degree will be afforded by the 16th Para of the Regulations which points out more clearly what the duties of the Director and Chief Surgeon are, the Rank intended them, and that it was not designed either of them should be attached to a particular Hospital; for were they to have had immediate charge of any Hospital, those visits to the Subordinate ones, directed by the latter part of that Para, would not have been mentioned.
"We flatter ourselves the above reasons will sufficiently make it appear to your Honour &c that the plan established by the Hon'ble Company can be but imperfectly carried into execution in this Presidency, unless a third Surgeon be appointed, and if our ideas on the subject should happily coincide with those entertained by your Honour &c we take the liberty of recommending that Mr Anthony Toomey, now Surgeon of the General Hospital at Tellicherry, be appointed third Surgeon at Bombay with a proportionate salary.

"Should Mr Toomey be removed from Tellicherry we beg leave to recommend Mr William Lloyed to succeed as Surgeon of the Hospital there.

"The distance that the Settlement of Tellicherry is situated from others, and the circumstance of all communication with the Presidency being cut off for near four months in the year, render it necessary and proper in our opinion, that two Medical Men should reside there, we therefore take the liberty to recommend that a Mate be appointed to the Hospital there as soon as the Service will admit.

"By the 14th Para of the Regulation an Apothecary is appointed to the Hospitals, who is to take charge of the Europe Medicines and Stores, and be accountable for their expenditure to the Hospital Board, we take the liberty to recommend Mr Helenus Scott as a Person duly qualified to discharge the office of Apothecary.

"As the office of Apothecary will be attended with much trouble and confinement and be a place of considerable Trust, we hope that your Honour &c will not think us presuming in recommending that an adequate salary be assigned him. We are of opinion that it ought to be somewhat greater than that of a Regimental Surgeon.

"As the Battalion of Artillery will be in want of a Surgeon (should Mr Scott be appointed Apothecary) we beg leave to recommend to your Honour &c that Mr William Moir be appointed to that station.

"The reduction that will take place in the number of Hospital Surgeons, will render the increasing the number of Mates now employed more necessary, we therefore beg leave to recommend to your Honour &c that another Mate be appointed to the General Hospital where the greater number of Sick are and those too with Disorders of a more complicated nature. As Mr Thomas Drummond who at present resides at the General Hospital, has given us the most perfect satisfaction and being a person on whose abilities we can rely, we wish to retain him as first Mate, and beg leave to recommend Mr William Sandwith to be appointed second Mate of the same Hospital.

"We beg leave to recommend to your Honour &c Mr Francis Toomey to be appointed Mate of the Town Hospital upon his return from Bussora, and that Mr John Price be continued to act until that time.

"We beg leave to recommend to your Honour &c Mr Gabriel Alvares, as a person properly qualified to act as Mate to the Sepoy General Hospital.

"We take the liberty to observe that we understand that a Secretary has been allowed to the Hospital Board at the other Presidencies, for the purposes of drawing up the several addresses to your Honour &c. on the subject of the recommendations to fill up the vacancies that may happen and on any other matter that may affect the Medical line in general, for the purposes of receiving and recording the returns of sick from the several General and Regimental Hospitals, and for the receiving and registering
the returns of Expenditure of, and requisitions for Medicines from the several Surgeons in the Presidency. All which together with that degree of attention that must be bestowed upon and that degree of control that must be exercised over the offices of the Apothecary and Purveyor would too much interfere with our other duties, and as no Purvoe* can possibly answer the intention, we hope that your Honour &c will be pleased to indulge us with a Secretary in whom we can place sufficient confidence to prepare and lay before us the particular business on which we are to deliberate as a Board. Should your Honour &c be pleased to grant our request, we beg leave to recommend Mr John Williams for the appointment of Secretary with an adequate salary.

The duties of visiting the Sepoy Battalion Hospitals and attending the punishments of the Invalids and Pensigners in Garrison, may be performed for the present, by the Secretary to the Hospital Board and Mates of the General Hospital, some additional allowance being granted by your Honour &c on those accounts.

We trust that your Honour &c will not accuse us of stepping beyond the line of propriety when we request your attention to the situation to which the Surgeons at the three general Hospitals at Surat, Tellicherry and Tannah, will be reduced should no more than the Pay and Emoluments of a Regimental Surgeon be allowed them. To adduce any arguments why a Surgeon in Charge of a General Hospital who has so much more trouble and responsibility than a Surgeon in Charge of only a Regimental one should have a superior salary, would be attempting to prove the truth of a self-evident proposition. But what gives a claim to each of the Surgeons at the above-mentioned Settlements to consideration, in addition to the one arising from having charge of the Hospital is, that they have the civil establishment of the Hon'ble Company's Servants and their Families also to attend, for which considerations we flatter ourselves that your Honour &c will be pleased to allot an adequate allowance.

As the Hospital Board is the Channel through which every representation regarding the Medical Department ought to pass to your Honor &c we beg leave to submit to your consideration whether some allowance in lieu of off-reckonings ought not to be made to the Regimental Surgeons, as the latter part of the first Para of the regulations particularly assigns them Pay and Emoluments of Captains of Infantry on their respective establishment, whereby we are led to believe that Incomes equal to those of Captains of Infantry were intended them, as for the different denominations under which an income is received, they ought to make no difference in this case, it is the amount that should be attended to, and we conceive ought to include every species of known and allowed income.

We further beg leave to mention that the 11th Para of the Regulations directs that the oldest Hospital Mate at each General Hospital shall have charge of the Medicines, who is to keep an account of the Receipts and Issues of them, and to be allowed such increase of pay on that account as the Governor and Council shall direct. Though we are sensible that the increase of Pay here mentioned, be intended for the Mates of the general Hospitals at the subordinate Garrisons (the Medicines being directed to be under charge of the Apothecary at the Presidency) yet from the particular situation of our general Hospital, being situated without the Gates,

* Purvoe or Parvoe, a clerk, name of the Writer Caste in Western India, a corruption of Prabhu, Lord.
and the circumstance of all supplies of Medicines and necessaries being sent to it from the Town hospital where the stores are, an account of which supplies must be kept, we take the liberty of expressing our opinion, that the first Mate of the General Hospital here is intitled to the increase of Pay above directed, as he will certainly have as much trouble (if not more) as if he was at a more distant station. We hope therefore that the same allowance will be made Mf Drummond as your Honor &c will be pleased to establish for other Mates.

"We have been thus particular in mentioning the several allowances to be established for the different Ranks of Surgeons and Mates in order that your Honor &c might have the whole at one view. With regard to the number of Surgeons and Mates that will be necessary for this Presidency we will address your Honor &c on that head as soon as you will be pleased to signifie to us your sentiments on the subject of the recommendations in this letter. As for the establishments of the Assistants, Purvoes and Servants for the three Hospitals belonging to this Garrison the present will be sufficient.

"There being but a few days of this month, to come, and there being some Paragraphs of the Regulations, to be communicated to the Commanding Officers of Corps, and the Regimental Surgeons respecting the manner of sending patients henceforth into the Hospitals, and as the Purveyor will require some time after his appointment takes place to prepare the different supplies according to the instructions we must furnish him with, We request that your Honor &c will not order the new regulations to be inforced so soon as the 1st of next month, but that sufficient time may be afforded for preparing every thing proper, for the above orders to the Commanding Officers of Corps and Regimental Surgeons to be issued, as well as those necessary for carrying the plan into execution communicated to the subordinate Settlements, so that it may take place in all parts of the Presidency at the same time.

"Permit us to conclude by assuring your Honor &c that every possible attention on our part in discharge of the trust reposed in us, shall be paid to our Hon'ble Employers, consistently with the benefits intended to be afforded to the Sick, and also that due deliberation shall be bestowed on the propriety of every recommendation that we shall take the liberty of making to your Hon'ble Board."

"We remain &c Sd. Andrew Durham, Sd. Richardson Harrison.

"Bombay, the 24th August 1787."

Government reply dated 1st September, 1787, to the Hospital Board.

"To Messrs. Durham and Harrison, Members of the Hospital Board.

"Gentlemen,—The Hon'ble the President and Council have given me in command to acknowledge the receipt of your two letters addressed them under the 24th and 28th ultimo, and in reply thereto, to convey to you their Resolutions as follows.

"The Court of Directors having clearly and expressly pointed out the establishment of which the Medical Board at this Presidency shall consist, no deviation can be made therefrom, but your representation respecting the inadequacy of two members to fulfil the duties enjoined, shall be transmitted to the Company for their consideration.

"They coincide with you on the propriety of a Mate being appointed to assist the Surgeon of Tellicherry Hospital."
"They likewise for the reasons you have assigned, acquiesce in the appointment of a Secretary to your Department, and at your instance nominate Mr John Williams for that province with an allowance of Rupees 120 per month, Mr Williams while he continues to act as Surgeon to the Invalids will also receive Pay as such.

They have in compliance with your recommendation appointed

Mr William Lloyd . Surgeon to the Artillery Corps.
Mr William Moir . First Mate in the General Hospital.
Mr Thomas Drummond . Second Ditto.
Mr Helenus Scott . Apothecary with a monthly allowance of 250 Rupees.
Mr Francis Toomey . Mate in the Town Hospital.
Mr William Sandwith . Provisional Mate in ditto.
Mr John Price . to be stationed in one of the Cruizers.
Mr Gabriel Alvares . A mate in the Sepoy Hospital but to be considered in point of rank and pay as a native Assistant only.

As the Medicines at the Presidency will be under the charge of the Apothecary, an extra allowance to the Head Mate can only be admitted at the Subordinate Hospitals.

The Surgeons to the Hospitals at Surat, Tanna and Tellicherry are to receive Stlg. 600 per annum, and those stationed to Residencies are to be placed on the footing of Regimental Surgeons—the latter are to be allowed no more than they have hitherto received.

I am further directed to acquaint you that the Governor and Council do not judge proper to make you any consideration as heretofore for a Private Dispensary; neither any allowance on account of the Marine.

They decline purchasing the Hummuns on the Company's account, or of continuing to rent them.

They are pleased to direct that you lay before them an Inventory of your private Stores on hand, when they will consider of your application respecting the purchase of them; and as soon as the state of the Treasury enables them, they will take measures for extinguishing the Arrears due on your Accounts.

I am further directed to acquaint you that they have appointed Mr James Rivett to be Purveyor of the Hospital under the new regulations, whom you will furnish with such Instructions as you may deem necessary for his Guidance.

It is enjoined me in conclusion to recommend to you the strictest attention to frugality in every province under your Control, and to acquaint you that the new Medical Establishment is to take place on the first day of the ensuing Month. I have &c Sd. William Page, Secretary.

Bombay Castle, 1st September 1787."

The Court, in para. 28 of a Public Letter to Bombay dated 8th April, 1789, after approving of the establishment of the Hospital Board, sanctioned the appointment of a third member. A Bombay Public Letter of 24th Dec., 1789, reports this appointment in paras. 16–21, (Abstracts, Letters from Bombay, Vol. IV, 1782 to 1789).
"Mr. Toomey appointed Hospital Surgeon on the departure of Mr. Harrison, and at the recommendation of Hospital Board appointed a third member thereto with the Title of Head Surgeon at a Salary of £1200 p. Annum. Allowance for Civil Dispensary discontinued, but afterwards re-established on recommendation of Hospital Board at 400 Rupees p. Month."

The Court approved of these appointments in a Public Letter, dated 15th Dec., 1790, para. 3. The Bombay Medical Board seems to have been thus put on an equality with those of the other two Presidencies. The salaries of the first and second members of the Board are not mentioned; but as the salary of the third member, as fixed in 1789, is considerably higher than that of the second in 1787, and nearly as high as the first, presumably the pay of the two senior members must also have been raised.

The third member appointed in 1789, whose name is not given in the Bombay letter, was Francis Crozier.

Early in 1790, Surgeon Alexander Grant Clugstone, who was senior to two of the members of the Board, but had been in England when the Board was constituted, returned to India, and claimed the post of President. This claim, and its refusal, were reported in the fourth para. of a Bombay Mily. Letter of 7th July, 1790, (Abstracts, Letters from Bombay, Vol. V, 1785 to 1799).

"Surgeon A. G. Clugstone, who arrived on the Francis asserted a claim to preside at the Hospital Board in virtue of your permission to him to return to his rank. But as the Hospital Regulations are modelled on a Military System, and it would cause great confusion by shifting every Surgeon from his Station to comply with this request, we agreed to consider him as a Supernumerary until there should be a Vacancy at the Board on an Allowance of 500 Rupees p. Month subject to your satisfaction. Letter from Mr. Clugstone sent, request Instructions for our guidance in similar instances in different lines of the Service."

The Court, in a Mily. Letter dated 4th Aug., 1791, para. 4, approved of the rejection of Clugstone’s claim to the Presidency of the Board, but disapproved of the special allowance of Rs.500 a month, directing that he should receive only the ordinary pay of a Surgeon, till a vacancy at the Board should occur. Long before this letter was written, Durham had gone home, later in 1790, and Clugstone had succeeded him as President. He served as Surgeon General of the Bombay Army in the third Mysore war, and died at Bombay on 12th July, 1792.

Toomey then became President, and William Spink got a seat at the Board. Toomey died at Bombay on 16th Jan., 1797,
and the Board was reduced in number to two, Crozier and Spink, the vacancy not being filled up. The Bombay Board, unlike those of the other two Presidencies, consisted of only two members for a considerable time, over twenty years. A third Member was provisionally appointed by Bombay G.O. of 25th May, 1820; another G.O. of 11th July, 1823, notified that the third Member had been permanently sanctioned in a Letter from Court dated 3rd April, 1822.

Spink died at Bombay on 20th May, 1798, and was succeeded by William Moir. Crozier left for England in 1800, and died on his way home, on the Woodford, on 23rd July, 1800. On his departure Thomas Cruso became second Member. He also went home in 1801, and died in England on 25th July, 1802. Helenus Scott joined the Board in 1801, and became President on Moir's death on 21st April, 1806. William Sandwith then came on to the Board, and held the post for two years; he went on leave in 1808, and died on the way, on board the Metcalfe, on 9th Aug. Jonathan Thorpe succeeded him on 26th Feb., 1808, and became President when Scott went home on 15th Aug., 1809.

A Mily. Letter from Court to Bombay, dated 5th Jan., 1810, in para. 115, grants to the Members and to the Secretary of the Medical Board, the pay and half batta of their corresponding military rank, from 24th April, 1806; the Members as Lieut.-Colonels; the Secretary, if a Surgeon, as Captain, if an Assistant Surgeon, as Lieutenant.

**Inspection by Medical Board.**—The Regulations of 1786, in their sixteenth clause, require the Head Surgeons to inspect hospitals in their divisions, and the Medical Board to inspect the General Hospitals upcountry. In 1794 John Laird, then senior Member of the Calcutta Board, was ordered to inspect the Hospitals upcountry; and in the same year the Madras Board received a similar order, but succeeded in passing on this duty to the Head Surgeons.* The Proceedings of the Calcutta Medical Board of 14th June, 1797, also contain an order to John Fleming, junior Member of the Board, which then consisted of two Members only, to carry out a similar inspection.

"John Fleming, Esq. Junior Member of the Medical Board to proceed to the different Stations of the Army for the purpose of inspecting the Hospitals, and to report the state of them to the Commander in Chief."

* See Chap. XVII, Rank.
On this occasion Laird seems to have carried on the duties of the Calcutta Board single-handed, during Fleming's absence, which must have lasted for some months. More than twenty years later Walter Ogilvy, the senior Member of the Bengal Board, an officer of over forty years' service, was deputed to inspect the Hospitals at the chief cantonments. On this occasion, although there were two other Members of the Board, Alexander Russell, one of the Presidency Surgeons, was appointed to officiate in the Board, during Ogilvy's absence.*

On the whole, however, it appears that the Medical Boards did little or no inspection throughout the greater part of their existence.

Tenure of Office.—A Letter from Court, dated 26th Dec., 1818, paras. 136–145, answered in a Bengal Mily. Letter of 26th June, 1819, para. 97, directs that Members of the Medical Board shall vacate their seats after four years. This order does not appear to have been enforced for several years; but at last was published in India as Bombay G.O. of 11th July, 1823, Bengal G.O., No. 231A of 12th Aug., 1824, and Madras G.O. of 17th June, 1825. The Bengal order, which appeared in the C.G. of 23rd Aug., 1824, runs as follows:—


" (1) In obedience to the Orders of the Honourable the Court of Directors, the following Regulations are to have effect in the Medical Department of this Presidency, from the 1st of May last.

" (2) The Members of the Medical Board shall hereafter be relieved from that situation at the expiration of four years from the date of their respective nominations. In the case of the present Members, this rule is to operate only from the 1st of May 1824.

" (3) The Salaries of the Members of the Medical Board shall from the same date, be equalized, by striking the average of the former Salaries of the three Members, viz. Sonat Rupees (2409. 13. 0), two thousand four hundred and nine, thirteen annas; exclusive of their Civil Allowance as Presidency Surgeons—this rule is only to operate prospectively with the first Member of the Board:—the officer now filling that situation will continue to receive the Salary heretofore drawn by him on the principle generally recognized by the Court, that reductions in Staff Allowances are not to affect incumbents.

" (4) The Members of the Medical Board, relieved from the duties of their station at the end of four years, shall be at liberty either to return to Europe on the retiring Pensions to which they are respectively entitled, or to resume their duties as Surgeons on the Establishment.

(5) The following Scale of Rank and Precedence is assigned to the Medical Officers.

The Members of the Medical Board as Lieutenant Colonels.
Superintending Surgeons as Majors.
Surgeons as Captains.
Assistant Surgeons as Lieutenants.

(6) The Rank so granted, is to be considered as purely official or by Courtesy, and is not to give any Claim either to Military Command or to Encreased Allowances of any kind, except in cases of distribution of Prize Money, in which the Officers of the Medical Establishment will be allowed to share according to the scale of rank now established.—Wm Casement, Lieut. Col., Secy to Govt. Mil. Dept.”

In the C.G. of 3rd April, 1828, it is stated that a Member of the Medical Board, who recently vacated his seat on the expiration of four years’ tenure, had claimed to revert to Superintending Surgeon, but that the Commander-in-Chief had decided against his claim, and ordered that, if he did not retire, he must revert to the executive grade as Surgeon only.

A Letter from Court, dated 27th Aug., 1828, published in Madras G.O. of 27th Jan., 1829, extends the tour of office to five years.

"Fort St. George, January 27th, 1829. The following extract from a letter from the Hon. Court of Directors, under date the 27th August 1828, is published in General Orders, and the regulations which it contains are to take effect from the 1st proximo.

52. Members of the Medical Board to be hereafter relieved from that situation at the expiration of five years from the date of nomination to it, unless on any occasion the Government shall be of opinion that the continued service of any member of the Board is indispensable to the public interests, in which case such individual may be continued in that situation until our decision on the case shall be made known. In every such case you will furnish us with such information as is necessary to guide our judgment on it with the least practicable delay.

53. Members of the Medical Board who shall have been in that station not less than two years, and not less than twenty years in India, including three years furlough, shall be permitted to retire from the service and allowed £500 per annum.

54. Members of the Medical Board who shall have served five years in that situation, and not less than twenty years in India, including three years furlough, shall be permitted to retire and allowed £700 per annum.

55. Superintending Surgeons who shall have been in that station not less than two years, and not less than twenty years in India, including three years furlough, shall be permitted to retire from the service and allowed £300 per annum.

56. Superintending Surgeons who shall have served five years in that situation, and not less than twenty years in India, including three years furlough, shall be entitled to retire on £365 per annum.
57. Retirements under the above regulations may take place either in India or in England.

58. We have also resolved that Superintending Surgeons who come to England on sick certificate shall resume that rank and station on their return to their duty."

Another Letter from Court, dated 27th May, 1829, paras. 2 to 4, published in Bengal G.O. of 11th Sept., 1829, orders that a Member, vacating on completion of five years' tenure of office, must retire, thus withdrawing the option of continuing to serve in the grade of Surgeon.

"Fort William, Sept. 11th, 1829. The Governor General in Council is pleased to direct that the following extracts (Paras 2 to 4) from a general letter from the Hon. the Court of Directors in the Military Department, under date the 27th May 1829, be published in General Orders.

"Para. 2. By our letter in this department dated the 27th August 1828 (Para. 4), we authorized the continuance of members in the Medical Board for a period of five years, and grant to those members who shall serve in the Board during the whole of that time, a retiring pension of £700 per annum.

"3. We are disposed to grant to Dr Meik the benefit of this regulation, and we accordingly desire that Dr Meik be allowed to resume his seat at the Medical Board, on the first vacancy that shall occur after your receipt of this despatch, for one year; at the expiration of which period, he will be entitled to retire on the augmented pension of £700 per annum.

"4. Having made this liberal provision for our medical servants, who have had a tour at the Medical Board, we direct that they be not, after such tour, again allowed to serve in any medical capacity, except in special cases of public exigency, to be reported to us, and subject to our confirmation."

A Mily. Letter from Court, dated 3rd Feb., 1841, para. 23, published in Bengal G.O. of 31st March, 1841, directs that a Member of the Medical Board, granted sick leave to England, may resume his seat at the Board, for the rest of his five years' tour, if he returns to India.*

A Mily. Letter from Court, dated 4th May, 1842, published as Bengal G.O. No. 169 of 1st July, 1842, introduces increased pensions, at different lengths of Service, and also confers new titles on the three Members of the Medical Board, the senior being designated Physician General, the second Surgeon General, and the third Inspector General of Hospitals. From this time on, as long as the Boards continued to exist, on each occasion when a vacancy occurred, promotions were formally made from one to

* See Chap. XIX, Furlough.
another of these posts; i.e. when the Physician General retired, the Surgeon General was gazetted to be Physician General, the I.G. of Hospitals to be Surgeon General, and a Superintending Surgeon to be I.G. of Hospitals.

"General Orders by the Honourable the President in Council. Fort William, 1st July, 1842."

"No. 169 of 1842. In obedience to the Orders of the Honourable the Court of Directors in their Military Letter to the Government of India, No. 6 under date the 4th May 1842, the following Regulations are to have effect in the Medical Department of the three Presidencies, from the 16th instant.

"The situation of Superintending Surgeon to be considered a Staff Appointment, to which only those fitted for it by a zealous and able discharge of their professional Duties shall be deemed eligible, and the Appointment to future vacancies will be made without reference to the order of succession, whenever it may be the opinion of Government, that such departure from Seniority is required for the maintenance of the Public Interests.

"The present system by which all Pensions in the Medical Service superior to those of Surgeon (Captains full pay after 17 years service in India) are dependent on promotion to the Staff Appointment of Superintending Surgeon, is abolished, and in its stead, the principle of granting those Pensions according to length of Service established, upon the following scale, viz.—

After 20 years service, 3 years Furlough included, as at present £191 a year.

<table>
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<tr>
<th>Years</th>
<th>Pension</th>
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<tr>
<td>28</td>
<td>£300</td>
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<tr>
<td>32</td>
<td>£365</td>
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<tr>
<td>35</td>
<td>£500</td>
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<td>38</td>
<td>£700</td>
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"The present Regulations by which Superintending Surgeons are entitled as such to Retiring Pensions of £300 and £365 a year, and Members of the Medical Board to Pensions of £500 and £700 a year, according to period of Service in these ranks respectively, will cease to be the rule of the Service for Medical Officers, after the date of the introduction of the new arrangement; but individuals then in the Service, and who may be appointed to the offices of Superintending Surgeon and Member of the Board within ten years from that date, will be allowed the option of retiring upon Pensions upon the old scale of length of Service in these Ranks, instead of the new scale of length of Service in India.

"The designation of 1st, 2nd, and 3rd members of the Medical Board is abolished, and the following titles are substituted:

- Physician General . . . . . 1st Member.
- Surgeon General . . . . . 2nd Member.
- Inspector General of Hospitals . . 3rd Member.

"The Members of the Board will accordingly be commissioned with these Titles when appointed to the respective positions above mentioned, and when retiring from the Service will be placed on the Retired List with the Title then held by them.

"The Regulation which fixes the rank of Brigadier General as the
relative Army Rank of Members of the Medical Board, will equally apply to those Members under the new Titles now established.

"All Surgeons of 30 years' Service, to be designated 'Senior Surgeons,' and their relative Rank with officers of the Army to be that of Major. This arrangement like all others having reference only to the rank and designation of Medical Officers, confers no claim whatever to superior allowances, and will make no change whatever in the nature of their employment."

The Bengal Medical Regulations of 1851, in the second chapter, on the duties of Superintending Surgeons, direct, in rule 15, that the duties of S.S. at the Presidency shall be discharged by the third Member of the Medical Board. This was practically a reversion to the state of affairs when the Board was first established in 1786, when its third Member was the Head Surgeon of the Presidency General Hospital.

**Promotion to the Medical Board.**—Promotion was always made, in theory, by selection; but almost always, in practice, went by seniority, pure and simple, from a very early date until the Boards were abolished.

When the Medical Boards were first instituted, many cases occurred in which officers represented themselves as aggrieved by the appointment of others, whom they considered junior to themselves. But in those days questions of seniority and rank had not yet been definitely settled.

A Bombay Mily. Letter dated 29th Jan., 1799, reports in para. 51 such a case of supersession.

"Hospital Board. Mr William Moir appointed second Member in room of Dr Spink deceased. Claim of Mr Laplain to the appointment rejected in consideration of his having been deemed in 1789 ineligible to a much inferior situation, but have stationed him at the Presidency on the Pay of his Rank."

Laplain entered on 11th Oct., 1774, Moir in May, 1777, so the former was originally the senior of the two by over two and a half years; Laplain had, however, been passed over for promotion to Head Surgeon, a rank which Moir had attained in May, 1797. It has been described above also how Andrew Berry superseded Watson and Harris on the Madras Medical Board, and how later they in turn again went over his head.

A Letter from Court dated 27th Oct., 1824, published in Bombay G.O. of 12th April, 1825, states that promotion to Superintending Surgeon is to go by seniority, to the Medical
Board by selection. Little attention seems to have been paid to this order in India. On one occasion when it was acted on, the promotion so made was cancelled by orders from Court. In the beginning of 1831 the three members who formed the Madras Board were William Colquhoun-Stirling, Simon Heward, and Thomas Owen. Stirling retired on 21st Feb., 1831, when John Hay came in as third Member of the Board, and Heward on 17th June, 1831, when the Madras Government appointed James Annesley, one of the most distinguished men who have ever entered the Madras Medical Service, as junior member. Hay had entered the Service on 1st Jan., 1797, Annesley on 29th April, 1799, and both had superseded S.S. Thomas Hart Davies, whose first commission was dated 13th Jan., 1796. Madras G.O. of 21st Sept., 1832, notifies that, under orders from Court, Annesley’s appointment to the Board is cancelled, and that he reverts to Superintending Surgeon, and is posted in that capacity to the Nagpur Division, relieving T. H. Davies, who takes his seat as second Member of the Board. Owen died of cholera at Madras on 14th Jan., 1833, and Annesley then came in again as junior Member. Davies retired on 22nd Feb., 1836, his five years’ tour of office being counted from the date of Stirling’s retirement, when he was first passed over.

Heward and Annesley were both knighted after their retirement from the Service; Sir Simon Heward on 5th June, 1837, for his services as S.S. in the Burmese war, twelve years before; Sir James Annesley on 13th May, 1844, for his professional fame as author of a standard work on the Diseases of India.

That promotion to the Board should be given on account of merit rather than by strict seniority is strongly laid down in the tenth and eleventh paras. of a Mily. Letter from Court, No. 6 of 7th March, 1848, published in Bengal G.O. of 5th July, 1848.* Para. 11 suggests that while the two senior Members of the Board might be selected from among the S.S.’s, the junior post might be filled by a Surgeon, promoted over the heads of all the Administrative Medical Officers. This suggestion does not seem ever to have been literally carried out. After the abolition of the Medical Boards, however, ten years later, it was all but acted upon when Campbell Mackinnon, who was the junior S.S., and

* See Chap. XVII, Rank.
had only attained that rank a month before, was appointed I.G., on the death of I.G. Edmund Tritton.

The substitution of a Director General for the Medical Board is advocated in an article on the constitution of the Medical Service in *The India Journal of Medical and Physical Science* for 1836, New Series, Vol. I, edited by Frederick Corby.* In Dalhousie's Minute on the Indian Medical Service,† the Governor General strongly recommended, in paras. 4–12, the abolition of the Board, and the substitution of a single officer as head of the Service, in each Presidency, with the title of Director General, and the appointment of Inspector Generals, two in Bengal, one each in Madras and Bombay, between him and the S.S.'s.

The Governor General's recommendations to this effect were carried out, a year and a half later, with effect from 12th Nov., 1857. At the beginning of 1857 the Bengal Medical Board consisted of G.G. Spilsbury, Physician General; Charles Renny, Surgeon General; and J. B. Clapperton, Inspector General of Hospitals. Renny retired on 10th April, 1857, when Clapperton became Surgeon General, and John Row junior Member of the Board and I.G. Spilsbury died on 6th July, 1857, and his place was not filled up. On the reorganisation, on 12th Nov., 1857, John Forsyth, who then stood second on the list of S.S.'s, was appointed Director General. Clapperton was left unemployed, and retired on 13th Feb., 1858. John Row, the junior Member of the late Board, became senior I.G.; and the second appointment of I.G. was filled by Edmund Tritton, who then stood ninth (Forsyth included) among the S.S.'s. Tritton died on 15th June, 1858, and was succeeded by Campbell Mackinnon, who became S.S. on 30th July, 1858, and I.G. on 27th Aug. At the same time one Director General and one I.G. were appointed in each of the other services, Madras and Bombay.

The title of Director General was abolished in the first clause of the I.M.S. warrant of 1st Feb., 1859, being altered to Principal I.G. from Forsyth's retirement on 25th April, 1862. This title, of Principal I.G., was abolished when its second holder, H. A. Bruce, retired on 1st Sept., 1866. And when I.G. W. A. Green retired on 31st March, 1869, the second post of I.G. was also

* This article is in two parts, beginning on pp. 127 and 346.
† See Chap. XXXVII, *The Crown succeeds the Company*, where Dalhousie's minute is given in full.
abolished, only one I.G. being left, as head of the Bengal Medical Service. By the Royal Warrant of 10th May, 1873, this title was changed to Surgeon General, while in 1880 it became Surgeon General and Sanitary Commissioner with the Government of India.

In 1895 the title of Director General was again introduced, and the officer holding that post was recognised as head, not of the Bengal Service alone, but of the whole I.M.S. in the three Presidencies. It may be noted that, on the two last occasions on which the office fell vacant, Government acted on the principle of promotion by selection to a greater extent than had ever been done before, on each occasion passing over all the Colonels, who filled the administrative posts, and promoting a Lieut.-Colonel. S.G. Bomford, when appointed D.G. on 1st Jan., 1905, was the senior Lieut.-Colonel in Bengal. S.G. Lukis, who succeeded him on 1st Jan., 1910, then stood fifth on the list of selected Lieut.-Colonels in the Bengal Service. Exactly the same happened in the R.A.M.C., when Lieut.-Colonel A. Keogh was appointed D.G. from 1st Jan., 1905.

The title of Director General was changed to Principal I.G. by the first clause of the I.M.S. warrant of 1st Feb., 1850, Forsyth continuing to hold that post, as head of the Service, till he retired on 25th April, 1862. When Row retired on 1st Aug., 1859, Campbell Mackinnon became second, and G. G. Brown, third I.G. Brown held the post for little more than a year; he retired on 8th Nov., 1860, when John McClelland became junior I.G. When Forsyth retired on 25th April, 1862, McClelland became Principal I.G., and J. B. Dickson was promoted to third I.G. Mackinnon retired on 6th Aug., 1862, when H. A. Bruce got the third I.G.-ship. Dickson retired on 31st March, 1864, and W. A. Green became I.G. Principal I.G. McClelland retired on 24th Nov., 1865, H. A. Bruce succeeded him in that post, and John Murray became junior I.G. Bruce held the position of head of the Service for less than a year, retiring on 1st Sept., 1866; and from that date the appointment of Principal I.G. was abolished, W. A. Green, as senior I.G., becoming the head of the Service. From Green's retirement on 31st March, 1869, the number of I.G.'s was reduced to one, John Murray, who succeeded Green as head. Murray retired on 1st Jan., 1871, and was succeeded by Sir John Campbell Brown, K.C.B., during whose
tenure of office the title was changed to Surgeon General. The post of head of the Service, since Brown, has been filled successively by J. F. Beatson, 24th Nov., 1875; J. M. Cuningham, 29th March, 1880; Sir Benjamin Simpson, K.C.I.E., 29th March, 1885; W. R. Rice, 29th March, 1890; James Cleghorn, 29th March, 1895; Robert Harvey, 25th Oct., 1898; Sir Benjamin Franklin, K.C.I.E., 2nd Dec., 1901; Sir Gerald Bomford, K.C.I.E., 1st Jan., 1906; and Sir C. P. Lukis, K.C.S.I., 1st Jan., 1911. Harvey was the only one who died in office. The senior of these officers still living is Sir Benjamin Simpson.

The three Members of the Madras Medical Board, on 1st Jan., 1857, were J. B. Preston, Physician General; J. L. Geddes, Surgeon General, and A. N. Magrath, I.G. of Hospitals. On the abolition of the Medical Board Preston took furlough, and died near Southampton on 24th June, 1858; Geddes remained unemployed till he retired on 1st Jan., 1860; Magrath was appointed Director General from 29th Dec., 1857; and Duncan Macpherson, an officer who had been deputed to serve in the Crimea, became I.G. from 8th Jan., 1858. Macpherson superseded several officers senior to himself; two of whom, Pearse and Cole, subsequently again went over him.

Magrath retired on 27th Jan., 1859, and was succeeded as Director General by G. Pearse, whose title, soon after, was changed to Principal I.G. Pearse retired on 23rd April, 1864, and R. Cole became Principal I.G. Macpherson held the post of junior I.G. till 1st Aug., 1864, when he vacated the appointment, remaining in India, on the active list, but unemployed, till he died at Merkara on 8th June, 1867. James Shaw succeeded Macpherson as junior I.G., and when Cole retired, on 10th Aug., 1866, became Principal I.G. This appointment was abolished from Shaw’s retirement on 28th Feb., 1867, the Madras Service retaining only one appointment as I.G. At the reorganization of 1880, Brigade Surgeon W. R. Cornish was appointed Surgeon General, Madras. Like Cuningham in Bengal, he superseded a number of senior officers, all the D.S.G.’s, and most of the Brigade Surgeons.

In the Bombay Service, John McLennan was appointed to the Medical Board, in his turn, on 20th May, 1848, while on furlough, and in less than a year, on 1st Jan., 1859, had risen to Physician General, without actually joining the Board. From 20th May, 1848, till the beginning of 1850, when McLennan
rejoined from furlough, there were, therefore, four nominal members of the Bombay Board. When McLennan returned to India, the junior Member, W. B. Taylor, reverted to S.S., but got back to the Board on 2nd Jan., 1852.

On 1st Jan., 1857, the three Members of the Bombay Board were C. D. Straker, Physician General, E. W. Edwardes, Surgeon General, and James Don, I.G. of Hospitals.* Straker died at Bombay on 16th Jan., 1857, when B. P. Rooke came on to the Board. Don went on furlough from 28th May, 1857, and John Scott became junior Member. Edwardes retired on 17th Nov., and Don on 28th Nov., 1857. At the reorganisation in that year, Rooke was appointed Director General, and John Scott, I.G., both from 1st Dec., 1857. On the abolition of the title of Director General, in 1859, Rooke became Principal I.G. He retired on 5th April, 1862, and was succeeded by Matthew Stovell. Scott retired on 3rd June, 1862, and Thomas Mackenzie became I.G. When he retired on 13th Feb., 1864, F. S. Arnott took his place. On Stovell’s retirement on 6th April, 1867, the appointment of Principal I.G. was abolished, Arnott becoming head of the Bombay Service, which now had only one I.G. At the reorganisation of 1880, T. B. Beatty was appointed Surgeon General, Bombay, from 1st April, 1880. Unlike Cunningham in Bengal, and Cornish in Madras, he was not promoted over a number of seniors, but in regular order.

When the title of Director General was reintroduced in 1895, the three Medical Services, Bengal, Madras, and Bombay, for the first time came under one head. So far, the post of Director General has always been filled by an officer of the Bengal Service, but no rule or order seems to exist which would exclude officers of the Madras and Bombay Services from being eligible for the post.

On six occasions, since 1860, the principle of promotion by selection has been carried to a considerable extent. At the reorganisation of 1880, Surgeon Major J. M. Cunningham became Surgeon General with the Government of India, superseding all

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* More than twenty years before, on 25th Sept., 1835, James Don had been tried for murder in the Bombay Supreme Court. He had been called in when Assistant Surgeon J. P. Malcolmson, on 18th July, 1835, killed Captain Alexander Urquhart in a duel at Poona. All the prisoners were acquitted, the Judge remarking that Don had only been present by accident, and should not have been put on his trial. See Chap. XXXIV, Course-martial.
the D.S.G.'s. At the same time Brigade Surgeon W. R. Cornish, when appointed Surgeon General, Madras, superseded a number of senior officers, as stated above. Sir Gerald Bomford, the last, and Sir C. P. Lukis, the present Director General, and Surgeon Generals H. W. Stevenson and W. B. Bannerman, the present heads of the Bombay and Madras Services, were all, when promoted to these posts, Lieut.-Colonels on the selected list. All six of these officers thus superseded all the then Administrative Medical Officers.
CHAPTER XXIV

THE SEA SERVICE

"They that go down to the sea in ships, that do business in great waters; These see the works of the Lord, and His wonders in the deep."

Psalm cvii. 23, 24.

The Marine Medical Service of the East India Company might form material, not only for a chapter, but for a complete book. From the earliest times the Company provided for the medical requirements of their ships' crews.

In the sixteenth and seventeenth centuries the standing and position of the medical profession, apart from a few leading men in London, was by no means high; and the Company's Marine Service, naturally, did not attract the best men. Sainsbury's Calendar, which covers the period up to 1634, contains many references to the Surgeons of the Company's ships.

Some account of Surgeons of ships employed in the early voyages has been given in Chap. I, The First Beginnings, and in Chap. XXII, Appointment to the Service, Examinations; illustrated in both cases by extracts from Sainsbury's Calendar. In Chap. XXXII, War Services, will be found several references to sea fights in which Indianmen were engaged.

A later entry in Sainsbury's Calendar, given below, shows a sporting offer on the part of Surgeon George Turner, which the Company declined. Turner did, however, go to India soon after, though not on the terms he proposed. A letter from President Kerridge and Council at Surat to the factors in Persia, dated 7th Dec., 1626, gives George Turner's name in a list of men sent to Persia from Surat, and says that he may be employed either as factor or as Surgeon, as required.* On p. 314 of the same work Turner's name appears in a list of the Company's servants in the Indies, as "an unprofitable chirurgion," drawing £40 a year.

* Foster, English Factories in India, 1624-1629, p. 164.
Court Minutes of E.I. Co., 27th Jan., 1625/26 (Vol. IV, p. 143, No. 248). —"George Turner, late Surgeon in the William, offered his services in the Indies for five years, on condition of being paid 500l. at the end of that time if he be alive, but if he die within the time then to expect nothing; he was offered 50l. per annum upon that contingency, but utterly refused same."

The Court Minutes of 5th Feb., 1633/34,* note that George Turner, who had served seventeen years, is entertained Chirurgeon (a marginal note says Purser) of the London. This was his last voyage. At a Cons. held on board the London at Swally Bar, by Methwold and others, on 9th April, 1635, orders were passed that the creditors of the late George Turner, Surgeon of the London, were to be paid the money due to him.†

Sainsbury's Calendar is being gradually continued by Miss E. Sainsbury. A further volume, Calendar, 1635–39, published in 1907, on p. 261, contains the following curious story:—Gerard Polman, a gem merchant, after traversing many countries in search of precious stones, in the year 1631 took a passage home on board an English East Indiaman from Persia. He had with him a large collection of gems and precious stones, collected during the previous thirty years. On the homeward voyage Polman was poisoned by Abraham Porter, Surgeon of the ship, and his goods were divided among the crew. The crime becoming known, parts of his estate ultimately came into the hands of the East India Company, of the Earl of Lindsey, to whom letters of administration were granted in behalf of the true heirs, and of others. A suit was filed for recovery of the property. Nothing is recorded as to the result.

The life of a Surgeon on board an Indiaman must have been hard. Probably there was no great amount of professional work, but accommodation and food were bad, and much must have depended upon the personal qualities of the captain. A Surgeon who did not get on well with his Commander must have had a hard time.

Andrew Trumball, Master of the Hopewell in 1643, admitted to having corrected his Surgeon, perhaps the famous Gabriel Boughton, with a rope's end.‡

The following letter of complaint, from John Leckie, Surgeon

* Sainsbury's Calendar, Vol. V, No. 536, p. 520.
† Foster, English Factories in India, 1634–1636, p. 107. For Turner, see also Chap. VI, Early History, Surat, Persia, Bombay, and the West.
of an Indiaman in 1695, to the Captain, certainly puts forth decided grievances. Though, from the whole tone of the letter, and specially from his appeal to the "Laws of Oleron," one is inclined to think that the writer was a bit of a "scallawag."*

"Goombrook, August the 24th, 1695.

"Capt. Edgecombe—Sr The many abuses I have rec'd from you, with your unjust, illegall and arbitrary proceedings against me by a pretended power as Capt. of an East India Ship, hath made me assume the liberty to informe you that your beating me with your cutlass at Mohilla upon the 15th March, with your beating and wounding me of 19th June, as also beating my servant and barber the same day without any crime and your making me fast in order to duck me upon the 21st June, which is the next punishment unto death and not to be inflicted without martiall law after a suffict. triall and proof of being guilty of some notorious crime, but your accusation proveing false both before your officers and men rendred the ducking odious to them, in so much that they would not obey you notwithstanding your cutlass and threatening, knowing innosense and your justice; your sending your Steward to your cooke, with your order not to let the barber or my servant come into the cooke-room, and if they come to take notice that they should not throw any of my powders amongst your victuals; for you did believe yourself poysoned or had gotten a dose already in your water gruell, because for the four days past you were not well nor could not eat; your detaining me as a prisoner on board without letting me know the cause; your keeping and detaining three pints of Cordiall waters on board belonging to me with I had presented to Mr Popham in a small case of his; your hindering me from sending some goods ashoar which I had the Companies liberty for; your denying several other priviledges that are due to me as chirurgeon; your threatening me with the law of Olerone, which I presume you have forgetting, or else would not have exceeded them so often as you have done this voyage, Sr you may impose upon some of your officers and sailors who do not understand them laws; but know that I have read all the marine laws in practice, and particularly those of Olerone Wisby and the Hanstownes; with the statute laws appointed by King Charles the second for the regulating the Navy Royall, with Jure Maritime and Lex Mercatoria relating to marine laws, and have read some of the common and statute laws of England; as also of the civil laws upon which both the other depends, and am sensible that your proceedings with me and some others on board are illegal and without a precedent, for no man by the law of Olerone is to be beaten for lyeing on shoar, but his wages are to be deducted for the time, and what damages are sustained by his absence, he is to make good; neither is any man obliged to receive from a master of a merchant ship any more than one blow and retire; if the master p.sue him he has liberty to defend himself; all Commission relating to martiall or marine laws without instructions are void, and all Commissions relating to marine

affairs which are not from the Commissioners of the Admiralty are void by a grant from their Majesties to them, during his Majesties continuing them in their office. As for a pretended or assumed power as Capt. of an East Indiaman, it is both illegall and arbitrary, and a master of a Collier of 50 tons to Newcastle may assume the same power as legally as an East Indiaman. All this I have concealed hitherto (notwithstanding the just provocations I have had from you to doe otherwise and shall for some time still doe the same) both from your officers and sailors lest it should lessen you and your officers command over your sailors. So I have served their Majesties in three several of their capitall ships as master chirurgeon, I have served them also as Principal Surgeon to their hospital at Plymity and Surrey or over all Surgeons of the western ports of England, and likewise I have served as Chirurgeon General of their Majesties hospitals in Flanders, and since as Chirurgeon to his Majesties household, where I was intrusted with his p.son during the time of the engagement against the French at Landew. I have had betwixt five and six thousand wounded men under my care for cure this war; and have been intrusted with about forty thousand pounds of their Majesties moneys which I did faithfully dispence to the uses I had it for, for all the services I have ample certificates to show; yet am taxed by you as a rogue and cheat and imbeeceler of the medicines belonging to the ship. Therefore to cure you of that jealousy I have here inclosed sent you the list of what medicines were at first in the chest as also what medicines have been expended, which does not value of 5 pounds. Your chest and medicines cost £55 and I doe affirme there is not a bad or spoiled medicine amongst them, which by my care I have preserved. So in consideration of the abuses I have received from you, the denying me the priviledges and liberty which all Chirurgeons enjoy, I doe desire you to let me know what my crimes are, being hitherto ignorant of them; and if I doe not acquit myself of my accusation and plainly make it appear that your informers are prating and malicious rogues, I will willing suffer what punishment you will please to inflict upon me, and will publickly beg your pardon with all submission imaginable and true sorrow if guilty. So your complying with this just and modest desire of mine will make me forget all the injuries done to me and reestablish that love and respect which I bore to you before the Mohilla abuses. So I humbly beg you to take this into consideration, for if this is not complied within three days, I will deliver you your keys of your chest and will act no longer as Chirurgeon of your ship, let the consequences of it be what it will. I therefore desire if you doe not come on board yourself, that you would let me come ashore, that I may prove myselfe either an honest man or a rogue, and I shall always acknowledge the obligation and ever after remaine. So your most humble servant. John Leckie."

Gombroon, where the above letter was written, is the modern Bandar Abbas, on the coast of Persia. Mohilla is one of the Comoro Islands, off the coast of Mozambique. Oléron is an island on the west coast of France, near La Rochelle, now in the department of Charente Inférieure. Wisby, or Wisbeach, is a town in Cambridgeshire, formerly a seaport on the Wash. The punishment of ducking referred to as being next to that of death,
is probably the old naval punishment of "Keelhauling," in which the victim was fastened to a rope carried from the ship's yardarm on one side, underneath, to the other, and so dragged under the keel.

In Mr. P. M. Malabari's book Bombay in the Making (p. 263) is given a short account of the Laws of Oleron. They were a code formed under the Dukes of Guienne in the twelfth century. (The Black Book of the Admiralty, by Sir Travers Twiss, Vol. II, p. xlvii.) Cleriac says they were drawn up by Eleanor of Aquitaine, mother of Richard I. They are said by some to have been founded on the Laws of Wisby. The Hanseatic Laws of the Sea were collected into a code in 1591, and revised in 1614.

The Surat Cons. of 21st April, 1696, note receipt of a petition from "Dr. John Leckie, Chyrurgeon of the Mocha frigget," complaining against the Captain of the Mocha, and asking for his discharge. The petition itself is not given. The Bombay Cons. of 2nd Feb., 1702/03, mention that Philip Page, Assistant in the Hospital, is allowed to resign, and to embark on the Constant Friend, commanded by Captain John Leckie, possibly the same man who was Dr. John Leckie seven years before.

The Bombay Cons. of 11th April, 1698, mention the murder of Captain Leonard Edgcomb, while on a voyage to China, by his crew, which had mutinied. (Factory Records, Bombay Diaries, Vol. V, 1696–1704.)

The Captains of Indiamen were necessarily invested with very considerable powers over all on board. More than a century after the date of Dr. Leckie's letter, in 1818, an Indiaman arrived in Bombay with a passenger on board who had been in irons for twenty-one days. The culprit was a young Lieutenant in the army, and the offence was whistling on the quarterdeck, in the presence of the Captain, after he had been told to desist! This exercise of arbitrary power cost the Captain a fine of five thousand rupees. And in Hough's Courtmartials, p. 572, is noted a case in which a Bengal Assistant Surgeon, about 1814, was seriously injured by a blow given by the Captain of an Indiaman, on which he was a passenger. He prosecuted the Captain in the Supreme Court at Calcutta, and got Rs.6000 damages.

That Surgeons were liable to, and sometimes deserved, punishment, is shown by an entry in a log of the voyage to India of


H.I.M.S.—VOL. II.
Captain Blyth’s fleet in 1625, extracts from which are quoted by Foster.* This log notes that, on 15th April, within a week of sailing, Edward Baynham, purser, and Basil Hull, Surgeon, of the Falcon, were put into the bilboes for getting drunk and refusing to attend prayers.

The Madras Cons. of 4th Aug., 1686, contain the following entry:—

"Itt is also order’d that Lachary Attwood, the Doctor of the Chandos (he refusing to go aboard & Capt Levellis requesting our assistance as p. his letter dated this morning), be sent aboard by force, there being so much want of him, in their voyage to Sumatra."

At the same time George Page, purser of the Chandos, was ordered to ride the wooden horse as a punishment.

In the Bombay Cons. of 8th March, 1724/25, is recorded punishment inflicted on John Murray, Surgeon of the Duke of York, who was sent a prisoner to Bombay for insolence to his Captain and refusal to obey orders.


104. "We have given strict Orders that the Surgeons of our Ships shall attend upon and take all possible Care of the Health of the Military officers and private Men during the Voyage and if upon Examination it shall appear that this Order has been duly attended to, the Surgeons are to receive the same headmoney for this Service as is usually allowed for our own Recruits."

This extract appears to refer to officers and men of King’s regiments going out to India. Headmoney, at the rate of ten shillings per man, had always been paid to Surgeons of ships for medical charge of men going out to join the Company’s army. There are scores of notes of such payments in the Cons. of all three Presidencies. If complaints were made and proved that the Surgeon had neglected his duties to the troops on the voyage, this headmoney was withheld. At the beginning of the nineteenth century the rate was raised to fifteen shillings a head.

In the same year Minutes of Council of 18th Dec., published in Bengal G.O. of 24th Dec., 1783, order that when Surgeons in the Company’s service are permitted to take service on chartered

* Foster, The English Factories in India, 1624–1629, p. 103.
ships, they will receive no pay from the Company, but must be paid by the owners of the ships.

"Resolved in Case any Surgeon or Assistant Surgeon belonging to this Establishment shall serve as Surgeon on board any of the Company's Chartered Ships, that they be not permitted to draw any Pay, Batta, Gratuity, or Allowances. The Board deeming the Pay, Privileged, &c., granted them by the Owners a sufficient Compensation for that Service."

Much information about the Marine Medical Service is contained in a little work, by Charles Hardy, published in 1800, entitled *A Register of Ships employed in the service of the Hon. the United East India Company, from the Union of the two Companies in 1707, to the year 1760*. This book gives the name of each ship sent by the Company to the East, from 1707 to 1759, with her tonnage, and the name of her commander. A much fuller statement is given for the years 1760 to 1800, including the names of the first four Mates, Surgeon, and Purser, of each ship, with the date of sailing and of return, or the fate of the ship if taken or lost. A quantity of miscellaneous information is given in an appendix. A second edition of this work was published in 1813, by the son of the original author. In this edition the voyages from 1707 to 1759 are omitted, those from 1760 to 1800 are brought up to date, 1812, and the information given in the appendix is much more detailed. The second edition also contains the official report, by Commodore Nathaniel Dance, of his famous action with Admiral Linois, on 14th Feb., 1804, and the orders of the Court of Directors thereon.*

The following order, regarding the appointment of Surgeons of Indiamen, was passed in 1800:—

"*At a Committee of Shipping, Dec. 23"*, 1800. Ordered, That no Person be permitted to proceed as Surgeon of any of the Company's Ships, who shall not have performed one Voyage in the Company's Service, as Surgeon's Mate, or acted Twelve Months in that Situation in His Majesty's Service, in a hot Climate, until the Persons before mentioned shall have obtained Births, with an Exception only in Favour of such Persons, who, during the Suspension of the standing Order before mentioned, have been permitted to proceed as Surgeons, without having performed a Voyage as Surgeon's Mate.

"Dr Hunter, examiner of Medical Journals, resides at No. 9, Charles Street, St. James's Square. Any Journal left with Mr Pepys, Cutler, No. 24, in the Poultry, will be forwarded to the Doctor's House."

In the second edition, the regulations for appointment of

* For this action see Chap. XXXII, *War Services*. 
Surgeons are considerably amplified. The first paragraph is the same as that given above. The regulations then proceed—

"That a surgeon of an extra ship, who shall have been previously examined and found qualified; and after having performed a voyage to and from India, shall be considered eligible to proceed as surgeon in the regular service, if, upon the usual examinations respecting his abilities, he shall then appear qualified for the same.

"That the surgeon and surgeon's mate do produce a certificate from the examiners of the Royal College of Surgeons, and also from the Physician appointed by the Company, of their being qualified for such stations.

"Dr Wm Dick, Physician to the Company, 8 Hertford Street, Mayfair, for examining surgeons and surgeon's mates; and the surgeons are to deliver him their medical journals on their return home, for examination.

"N.B. The surgeons of regular ships are allowed for private trade as follows—To and from China six tons; but in ships for India are allowed six tons outward; and four tons, thirty two feet, homeward. They are also allowed fifteen shillings per man on the voyage for medicines and attendance upon the military and invalids."

A Resolution of Court, dated 19th Oct., 1791, fixed the ship's complement of an Indiaman of 750 to 800 tons at a total of 101; viz., fourteen officers, twenty petty officers, and sixty-seven of lower ratings. The fourteen officers were, the Captain, six Mates, four Midshipmen, Surgeon, Purser, and Surgeon's Mate. Larger ships carried a more numerous crew, but apparently not more officers; viz., 900 tons, 110; 1000 tons, 120; 1100 tons, 125; 1200 tons, 130.

In 1800, the pay of the Surgeon of an Indiaman is shown as £3 per month in time of peace, £3 5s. in time of war; those of a Surgeon's Mate as £1 10s. and £2 10s. respectively.

A Public Letter from Court to Bombay, dated 6th Oct., 1802, states in para. 3—

"Surgeons of Country Ships. None will be permitted to proceed to India as such till examined and proved qualified in the same manner as Surgeons Mates of the Company's regular ships, the Owner to give Bond for their return as Surgeons on Ships bound to England. All such persons residing on Shore without our Licence are to be sent home, and not on any account employed in the Company's Service."

Another Public Letter to Bombay, dated 29th May, 1807, states in paras. 13 and 14, (Abstracts)—

"Surgeons and Surgeons Mates of the Company's Ships. Encrease in their pay and Indulgence in Private Trade stated. The Allowance to the Surgeons for Medicines and Attendance on Military or Invalids in the Voyage increased from ten to fifteen shillings per man. The regulations respecting their qualifications to be strictly enforced."
The original draft of this letter shows that Surgeons of the regular ships were granted £5 per month pay, and private trade as in the last para. of the rules above; Surgeons Mates as third Mates; Surgeons of extra ships £5 per month and two tons private trade out and home; the rules to take effect from the beginning of the current season. It is also stated that the owners of private ships have agreed to give these terms.

In 1812, according to Hardy, a Surgeon got £5, a Surgeon’s Mate £3 10s. per month.

A Surgeon in 1800 received the following allowance of stores for the voyage: one puncheon of rum, fourteen dozen of other liquors, two firkins of butter, one cwt. of cheese, one cwt. of grocery, and one case of pickles. A Surgeon’s Mate was allowed twelve dozen of liquor, half a cwt. of grocery; of cheese, butter, and pickles, the same quantity as the Surgeon. The quantities allowed in 1812 are much the same as those of 1800.

In 1800 the Surgeon was allowed three tons, the Surgeon’s Mate two tons, of private trade. In 1812 the amount of private trade allowed to Surgeons, as shown in the last para. of the rules above, had been considerably increased.

We have seen that, according to Woodall, the Medical Departments of the Army and Navy were sometimes, in the seventeenth century, recruited by the pressgang, (Chap. III, pp. 18, 19). During the great war with France, a century ago, complaints were made by the E.I. Co. of medical officers of their Indian men being pressed to serve in the Navy. A Public Letter from Court to Madras, dated 12th Nov., 1806, states in para. 2, (Abstracts)—

"Impress of Surgeons Mates from the Co’s Ships. Transmit orders from the Lords Commissioners of the Admiralty for the prevention thereof in future."

In 1812 some interesting information is given in the Instructions to Commanders. The first four Mates, the Surgeon, and the Purser, were provided with "births" on the gundeck, in small cabins, or cubicles, separated by canvas partitions. All officers were obliged to wear uniform when on duty. Rules No. 4, 26, 28, and 31 dealt specially with the duties of medical officers.

"4. That your Surgeon and Surgeon’s Mate do each produce a certificate from the Court of Examiners of the Royal College of Surgeons,
and also from the Physician appointed by the Company, of their being qualified for such station respectively.

"26. That you acquaint your Surgeon and Surgeon's Mate, that it is the Committee's positive orders, that they join your ship previous to her leaving the Hope.

"28. That at the same time * will be forwarded to you a separate book for the Surgeon to keep a journal of his practice, and to record his medical observations during the voyage.

"31. That, whenever the ship is in port, the Surgeon's journal be deposited in the same place with the ship's logbook, under the charge of the Commanding Officer; but that your Surgeon, or his Mate, have access thereto, to enter the transactions of each day; at other times, the journal is to remain in the possession of the Surgeon."

Pensions were allowed to officers of Indiamen, not possessed of private means, on a fairly liberal scale, in 1812; the highest being £100 a year to a Commander who was not possessed of other means to £125 a year. A Surgeon not having £40 a year of his own, got a pension of £35; a Surgeon's Mate, not owning £25 a year, got £20.

A Surgeon's widow, not having £30 a year, got a pension of £25; a Surgeon's Mate's widow, not owning £25 a year, got £20. Orphans of a Surgeon received £5 a year, if their mother drew a pension; £11 13s. 4d. if she did not; orphans of a Surgeon's Mate £4 and £6 13s. 4d. respectively.

For these pensions only eight years' service was required. To an officer who was disabled, or to the widow of an officer who was killed, in the defence of the ship, or in doing duty on the ship, pensions were granted without reference to length of service. All these pensions were granted from the Poplar fund, to which all officers had to contribute; the rates of contribution are not given.

The following information has been gathered from the tables of voyages in Hardy's Register of Shipping. From 1708 to 1812, a period just over a century, the Company sent out to India rather more than seven hundred ships, which among them made 2511 voyages, an average of about three and a half each. A few of these vessels were the property of the Company, but most of them belonged to private owners, and were chartered for one or more voyages. Some made one voyage only, out and home; but most of them made several voyages in the Company's service, some as many as seven or eight. One ship, the Sir Edward

* Previous to departure from Gravesend.
Hughes, made nine voyages between 1788 and 1807, and in the latter year was fitted out as a frigate.

In the earlier years some ten to fifteen ships only were sent to India each year; in the later years forty to fifty; in one season, 1802–03, as many as fifty-three. In time of war the ships usually sailed in large fleets, under convoy; a fleet of thirty-nine sailed together from Portsmouth on 2nd May, 1794. From 1708 to 1773, the Indiamen were of 180 to 500 tons burthen, after 1740 usually 498 or 499, after 1774 from 600 to 900. The first of over 1000 tons was the Nottingham, 1152 tons, which sailed from the Downs on 10th April, 1787. The largest of all was the Royal Charlotte, 1252 tons, which sailed on her first voyage on 11th Aug., 1796. Up to 1786 a small packet usually went out once a year with despatches. Some of these packets were of only 135 tons.

The Indiamen usually sailed either from the Downs or from Portsmouth, some from Torbay and Plymouth, a few from Falmouth and Bristol, a fleet of fourteen from Cork on 31st Aug., 1805. These were the ports from which they finally sailed, and reported their departure; they all originally started from the Thames, but usually left their moorings there many weeks before they finally sailed from England. Up to 1788 either Portsmouth or the Downs is given as their port of arrival on their return; thence they went on to London. From 1789 on, the day of their reaching moorings in the Thames is given as their date of arrival.

From 1702 to 1812, one hundred and ten years, the number of Indiamen lost, taken, etc., was 143, just about twenty per cent. of the whole number of individual ships, but of the number of separate voyages only about 5.70 per cent. Of these 143 ships lost, forty-two were taken, of which four were retaken before reaching port, three were blown up, ten were burned, ten are entered as foundered, one as never heard of after sailing, and the remaining seventy-seven are simply entered as lost.

The same names recur over and over again. When a ship was lost, taken, or withdrawn from service, it was often replaced by another ship of the same name. During the century six different ships, one after another, bore the name of Britannia, there were five Houghtons, and four each named Essex, Kent, London, Nottingham, and True Briton. In 1810 two Indiamen called Warren Hastings, and two called Union, were in the service.

The long arm of coincidence shows that some ships were
lucky, others seem to have had unlucky names. The Lord Nelson, 819 tons, in spite of her name, was an unlucky ship. Taken on her second voyage home, and retaken a few days later, she was lost with all hands on her third voyage. She sailed from Portsmouth on 5th March, 1808; on 28th Oct., 1808, in latitude 8° 30' south, and longitude 80° east, i.e. in the middle of the Indian Ocean, she, along with the Glory and the Experiment, parted company in a gale from the rest of the homeward bound fleet, and none of the three were ever heard of again. One Vansittart was lost in 1718, another was lost off Banca on 23rd Oct., 1789. One Osterley was taken by the French on 22nd Feb., 1779, another was taken by the French frigate La Forte in 1799, but retaken soon after by the English frigate La Sybille. One Kent was taken off the Sandheads by the French privateer La Confiance on 7th Oct., 1800; the burning of another Kent in the Bay of Biscay on 1st March, 1825, is one of the most familiar stories of maritime disaster.*

Two MS. volumes in the India Office Record Department, Marine Records, Miscellaneous, Nos. 672 and 673, provide some further information, giving a list of Surgeons and Surgeon's Mates, in the former volume from 1801 to 1814, in the latter from 1809 to 1833. The first therefore overlaps Hardy's Register of Shipping, and the second overlaps the first.

Employment as a Surgeon in the Marine Service was often, though far from invariably, a stepping-stone to a commission in the regular land Services. Newly qualified medical men often made one or two voyages in an Indiaman, as they now do in the great steam lines, for the sake of a change, and to see something of the world, before settling in practice, with no intention of joining the Company's service as a permanency. Others made as many as ten or a dozen voyages. Many lost their lives in shipwreck, or by individual accident or disease. Promotion was irregular. A few men were appointed as Surgeons, without having previously served as Surgeon's Mates. Some became Surgeons after one voyage as Mate, others made several voyages in the inferior rank. A few, after making one voyage as Surgeon, had to revert again to Mate.

The index to Hardy's Register of Shipping gives the names of

* The capture of the Kent in 1800, and of the Lord Nelson in 1803 are related in Chap. XXXII, War Services.
435 Surgeons between 1760 and 1812. Omitting those whose names are given by Hardy, the two MS. volumes add about 800 more, Surgeons from 1813 to 1833, and Mates from 1801 to 1833. The exact figures cannot be given, as it is impossible to say, when the same name recurs after an interval of several years, whether it is that of the same individual or not. We may take the number roughly as 1200 in all. Out of this number, 343 got appointments in the land Service; viz. Bengal 174, Madras 102, Bombay 56, Prince of Wales Island 4, China 4, and St. Helena 3. During these years, 1760 to 1833, about 4800 medical officers joined the land Services. The proportion of ship Surgeons, therefore, who received appointments on land was about thirty per cent.; while of the land Services about seven per cent. had previously served at sea.

In a few cases the names are given, as Surgeons of Indiamen, of men who were already in the I.M.S. These were probably officers returning from furlough. One man, Charles Owen, served for some time on board ship after having resigned his commission in the I.M.S.

The Bengal Cons. of 18th June, 1790, contain a list of deserters from ships, who were all ordered to proceed to England on the first opportunity. Among the names is that of Charles Key Bruce, Surgeon, Editor of the Mirror. Bruce left England as Surgeon of the Triton, on 5th April, 1788. He must have been the first member of the medical profession who acted as an Editor in India. The Mirror, of course, was an ordinary newspaper, not a medical journal.

Many men who served as Surgeons of Indiamen afterwards attained considerable success, and became more or less well known, in other totally different lines of life. Of some of these short notices are given below. The list is not exhaustive, but contains only a few out of many names. Spence, Maclean, and Grant, however, were Surgeons of private Indiamen, after the Company's trade had come to an end.

Of all such men, who served for a time in the Company's Marine Medical Service, the most famous is the African explorer, Mungo Park. He was born near Selkirk on 10th Sept., 1771, educated at Edinburgh University, and took the diploma of L.R.C.P., Edinburgh, in 1791. He served as Surgeon's Mate of the Worcester Indiaman in 1792–93. He sailed for Africa, on his
first expedition to try to discover the sources of the Niger, on 22nd May, 1795, and, after over two and a half years' absence, during which he was supposed to have disappeared for ever, reached England again on 22nd Dec., 1797. On 2nd Aug., 1799, he married the daughter of Dr. Anderson of Selkirk, to whom he had been apprenticed from 1786 to 1789. He then tried practice at Peebles, but found the work of a country doctor in Scotland harder and less profitable than African exploration. He started on his second expedition on 31st Jan., 1805, and was last heard of on the Niger on 17th Nov. of the same year, after which no further news of him was received.

The mystery of his disappearance was not finally cleared up until 1812, when it was ascertained that, after a fight with the natives, he was drowned in the Niger, towards the end of 1805.

A statue of Mungo Park stands in the centre of the public square at Selkirk. His eldest son, also named Mungo, received a commission in the Madras Medical Service on 8th May, 1822, but had a very short career in India, dying of cholera at Trichinopoly on 20th Jan., 1823. His second son, Thomas, a midshipman in the Navy, in 1827, got leave to make an attempt to reach Boussa on the Niger, in search of traces of his father, but died of fever on the way, on 31st Oct., 1827.

James Lind was born in Scotland on 17th May, 1736. In 1762–63 he visited India and China as Surgeon to the Indiaman Drake, and again in 1765–67 as Surgeon of the Hampshire. In 1768 he graduated as M.D. at Edinburgh with a thesis entitled De Febre Putrida Puludum quae grassabatur in Bengalia A.D. 1762, a translation of which was published in 1772. Bengal Cons. of 15th Nov., 1762, report the examination of Assistant Surgeon Peter Smith for promotion by a Board consisting of Clement Crooke, James Lind, and Christopher King, Surgeon of the Hardwicke.* He became F.R.C.P., Edinburgh, in 1770, and F.R.S. on 18th Dec., 1777. In 1777 he was also appointed Physician to the Royal Household at Windsor. He died in London on 17th Oct., 1812.

At least four medical officers of the name of James Lind or Lynd were contemporary, more or less, as members of the public

* See Chap. XXII, Appointment to the Service, Examinations. For Crooke, see Chap. XII, William Fullerton, and the Patna Massacre.
services. The eldest was born in 1716, served for many years in the Royal Navy, became M.D., Edinburgh, in 1748, and F.R.C.P. there in 1750, and was the author of a Treatise on Scurvy, published in 1754, with subsequent editions in 1757 and 1772; and of a once well-known work on Tropical Diseases, An Essay on Diseases incidental to Europeans in Hot Climates, which was published in 1768, and reached a sixth edition in 1808. He was appointed Physician to the Naval Hospital at Haslar in 1758, and held that post till his death at Gosport on 13th July, 1794.* The third James Lynd was a member of the Bengal Medical Service, in which he rose to be a Member of the Medical Board, from 7th May, 1771, to 11th Jan., 1797, and died on 13th Sept., 1816. An entry in the Madras Mily. Cons. of 9th July, 1760, notes that Mr. Lynd, Surgeon to the Squadron, reports many men in the Naval Hospital at Madras, under his charge, as fit for duty. This can hardly have been either the first or the third of the officers of the name of James Lynd mentioned above. And, if the dates in the Dictionary of National Biography are correct, it cannot have been the Naval Surgeon either, the second James Lind, for he served at Haslar from 1758 till his death.

A Letter from Court to Madras, dated 23rd Dec., 1778, (Abstracts, Despatches to Madras, Vol. I, 1743–92), mentions James Lind as Surgeon to the Atlas in that year. This may be the same Lynd who was at Madras in 1760.

--- Para. 60. "Dr. James Lind who is Surgeon of the Atlas, has been allowed at the request of the Royal Society, to take with him sundry Instruments &c for making Improvement in Science. You are to assist him in those Pursuits, if not attended with any great expence to the Company."

John Clark was born at Roxburgh in 1744. After studying divinity at Edinburgh, he entered the E.I. Co.'s service as Surgeon's Mate on an Indiaman, serving in the Marine Service up to 1775. He got the degree of M.D., St. Andrew's, in 1773, and the diplomas of L.R.C.P., Ed., and F.R.C.P., Ed., in 1785. After quitting the sea, he settled in practice at Newcastle, where he founded the Newcastle dispensary, which developed into the Newcastle Infirmary, of which he became senior physician. He died at Bath on 15th April, 1805. He was the author of two works, Observations on Fevers and on the Scarlet Fever with Ulcerated

* Dictionary of National Biography.

Charles Maclean had a somewhat stormy career. He entered the Company’s marine medical service about 1790, and served successively as Surgeon to the William Pitt, the Northumberland, and the Houghton. He is mentioned in the Madras Press Lists, on 16th Sept., 1793, as Surgeon of the Houghton. The Dictionary of National Biography says that he was in charge of a hospital in Calcutta about 1792, but his name does not appear in any Bengal medical list, nor does there appear to be any other reference to any service of his in Bengal. In 1798 he was serving at Batavia and Bencoolen, and, according to the same authority, was deported by order of the newly-appointed Governor-General, Lord Mornington (Wellesley), in the same year. A Commercial Letter from Calcutta, dated 7th Feb., 1795, reports in para. 87 that he had deserted from the Houghton.

"Mr Maclane, Surgeon of the Houghton reported by the Commander to be absent on mustering the Crew previous to the dispatch of the Ship. Have directed search to be made for him and ordered to proceed to England. Such conduct shall meet with no indulgence."

A month later, another Commercial Letter, dated 20th March, 1795, states in para. 11 that Maclean had been ordered to proceed to England by the Lascelles or Royal Admiral. He managed to evade these orders, however, and three years later was still in Calcutta. He was then deported, as noted in a Law Letter from Calcutta, dated 29th Sept., 1798, paras. 2 to 7.

"Mr Charles Maclean. A Letter having appeared in a Newspaper under his Signature, animadverting on the conduct of Mr Jacob Rider in his official capacity as Judge and Magistrate; also a Letter in the same paper under a fictitious Signature; The Editor and Mr Maclean were called on, to apologize for their conduct, which the former immediately did; but Mr Maclean positively refused. Consider Mr Maclean’s Conduct highly indecent and disrespectful, and it appearing that he was in India without License, having left his Ship to which he belonged, and had been ordered to be sent to Europe whenever he could be apprehended, he is therefore sent to Europe as a Charterparty passenger on the Busbridge."

Time-expired soldiers, shipwrecked seamen, etc., were usually sent home as charter-party passengers, equivalent to the modern steerage or third-class passage.

In 1800 he got the degree of M.D. from Marischal College,
Aberdeen. In April, 1804, he was appointed to the Army Medical Department, and served at York Hospital, Chelsea, and at Chelmsford, but left the service without leave, and was advertised in the *Hue and Cry* as a deserter. No further steps were taken against him. In 1809 or 1810 he was appointed Lecturer to the E.I. Co. on the Diseases of Hot Climates; in 1815 to 1817 he travelled in the East, and in 1818 was re-appointed to the same lectureship. He died about 1824. He was the author of several works, both medical and political, the list is too long to quote; all are long since forgotten.

Neil Arnott was born at Arbroath on 15th May, 1788, studied at Marischal College, Aberdeen, where he became M.A. in 1805, and at St. George's, and entered the Company's Marine Medical Service in 1807, making two voyages to China, as Surgeon of the *Surat Castle*, in 1807–09, and 1810–12. After leaving the sea, he settled in London in 1812, and got the diplomas and degrees of M.R.C.S., 1813; M.D., Marischal College, Aberdeen, in 1814; L.R.C.P., London, in 1817. In 1816 he became physician to the French, and afterwards to the Spanish Embassy. He invented the water bed in 1832, and Arnott's stove in 1838. He was appointed an original member of the Senate of London University in 1836, Physician Extraordinary to the Queen in 1838, F.R.S. in 1838, and member of the General Medical Council in 1858. In 1854 he received the Rumford medal of the Royal Society; and the Legion of Honour, with a gold medal, at the Paris Exhibition of 1855. He died in London on 22nd March, 1874. He was the author of several works, *The Elements of Physics*, 1827, which ran through seven editions, and was translated into French, German, Dutch and Spanish; *A Survey of Human Progress*, 1861; *Arithmetic*, 1867; and a pamphlet on *National Education* in 1870.

James Spence was born in Edinburgh on 31st March, 1812, became L.R.C.S., Ed., in 1832, and made two voyages as Surgeon to an East Indiaman in 1833–34. After his return he settled in practice as a Surgeon in Edinburgh, became F.R.C.S., Ed., in 1849, Lecturer on Surgery in the Extramural School the same year, Assistant Surgeon to the Royal Infirmary in 1850, and full Surgeon in 1854, Professor of Surgery at Edinburgh University in 1864, President of the Royal College of Surgeons, Edinburgh, in 1867–68, Surgeon-in-ordinary to the Queen in
Scotland in 1868, and Member of the General Medical Council in 1881. He died in Edinburgh on 6th June, 1882.

A few well-known members of the I.M.S., who had served in the Marine Service, previous to receiving commissions in the land forces, may also be mentioned.

Francis Buchanan Hamilton, the well-known author of *A Journey from Madras through the countries of Mysore, Canara and Malabar, An Account of the Kingdom of Nepal, The Fishes of the Ganges, and Eastern India*, made four voyages as Surgeon to an Indiaman. He sailed as Surgeon of the *Duke of Montrose* on 22nd May, 1785, for Bombay, returning in May, 1787; in the same ship to Bombay and China in 1788–89; in the *Phænix*, to the Coromandel Coast and Bengal, in 1791–92; and in the *Rose*, to Bengal, in 1794. On arrival in Bengal he was appointed an Assistant Surgeon on the Bengal Establishment on 26th Sept., 1794. He retired on 14th Aug., 1816, and died on 15th June, 1829.

William Charles Maclean, whom a few seniors may still remember as Professor of Military Medicine at Netley, was born at Ayr, on 29th Nov., 1811, became M.D., Edinburgh, in 1833, and served as Surgeon to the Indiamen, *Upton Castle* and *Marquis Camden*, in 1833–35. He entered the Madras Service as Assistant Surgeon on 27th April, 1838, served in the China War of 1840–43, and afterwards as Residency Surgeon at Haidarabad, was appointed Professor of Military Medicine in the Army Medical School at Fort Pitt, Chatham, in March, 1861, and subsequently held the same appointment at Netley up to 1886. He died at Sidmouth, Devon, on 10th Nov., 1898.

Joseph Hume was born at Montrose on 22nd Jan., 1777, and served as Surgeon to an Indiaman in 1797–99. He entered the Bengal Service as Assistant Surgeon on 27th Aug., 1799, served in the second Maratha War of 1802–04, with the 18th Native Infantry, and resigned in Feb., 1808, with a fortune of £40,000, said to have been made out of Army contracts. He was elected M.P. for Weymouth in 1812, and subsequently sat for the Montrose Burghs, 1813–30; for Middlesex, 1830–37; Kilkenny town 1837–41, and the Montrose Burghs again 1842–55. He died at Burnley Hall, Norfolk, on 20th Feb., 1855.

Alexander Grant was born in Jan., 1817, became L.R.C.S., Ed., in 1838, and made a voyage to Madras, Calcutta, and China,
as Surgeon to the Indiaman *Thames* in 1838–40. He entered the Bengal Service on 11th Nov., 1840, and served in the China War of 1841–42, and with the Depot Hospital in the Sutlej Campaign of 1845–46. After serving as Civil Surgeon of Bhagalpur, 1845 and 1846–48, and Chapra, 1848–49, he was appointed Medical Officer to the Governor-General, Lord Dalhousie, and served in that capacity till Dalhousie left India in the spring of 1856, when he accompanied the Governor General on the voyage home. Shortly before he left India, Dalhousie appointed Grant Superintendent of the Calcutta General Hospital. He joined in Dec., 1856, but only held that appointment for one month, becoming Apothecary General (Principal Medical Storekeeper) in Jan., 1857. He left India on 22nd Feb., 1861, was appointed Honorary Surgeon to the Queen on 6th Sept., 1861, retired on 23rd Aug., 1863, and died in London on 3rd Jan., 1900. Along with John Grant, his predecessor as Apothecary General, (no relation, though both bore the same surname), he started the *Indian Annals of Medical Science* in Oct., 1853, and continued to edit that journal up to Nov., 1860. Alexander Grant’s life was written, a few years ago, by Dr. George Smith, LL.D., C.I.E., under the title of *Physician and Friend*, (London, Murray, 1902), a most interesting work.

When the Company’s trade was abolished in 1833, and their fleet of Indiamen sold, compensation was given to the officers who thus lost their employment, as laid down in Court Minutes of 19th Nov., 1834. Surgeons received £900.

Piracy has always flourished in the Eastern seas. Until well on in the nineteenth century, Malay *proas* and Chinese junks were a constant terror to unarmed merchantmen. Even at the present day, though European vessels are seldom attacked, the pirate pursues his calling on the great waterways of China. In the seventeenth and in the first half of the eighteenth century, European pirates were frequently met with in the East. The European pirate in Eastern seas, however, though he sometimes flew the Jolly Roger, was a comparatively mild follower of his trade, and had little in common with men like Blackbeard and Teach, the terrors of the Spanish Main. He seldom took life, except in what might be called fair fight. He did not scuttle the vessels he captured, nor make crew and passengers walk the plank; but usually let them go, after plundering them of their
valuables. In fact, though usually called a pirate, he was rather a privateer.

The records contain numerous references to their depredations. Complaints were made in 1635 that two English ships, the Samaritan, commanded by William Cobb, and the Roebuck, commanded by William Ayres, were committing piracies, under license from the King of England, on vessels owned by Musalmans. They had not attempted to attack the Company's Indians; but the particular interest of the Company lay in the fact that vessels from Surat, belonging to subjects of the Mogul, having been captured by Englishmen, the Governor of Surat demanded that the E.I. Co., also composed of Englishmen, should make good their losses. Ten years later, in 1644, the piracies of Cobb and Ayres were still under consideration in England. At a Court of Committees with the mixed Committees, on 24th May, 1644, William Cobb, a prisoner in the King's Bench on the Company's suit, petitioned to be released on account of poverty, which was refused. William Ayres, late Master of the Roebuck, petitioned that the Company's suit against him might be dropped, alleging that he had been forced into the business against his will. Glover, Surgeon of the Roebuck, testified in his favour, and the Company agreed to stay their actions in the Admiralty and in the Sheriff's Court, on Ayres giving a bond of £1000 not to go to India again without the Company's consent.*

These pirates or privateers seem always to have carried Surgeons, as numerous references show. The Madras Public Cons. of 1688 note orders to the Captain of the Bengal Merchant to seize the pirate ship Batchelor's Delight, and to examine her Surgeon, an Irishman named H. Coppinger, also Coppinger's account of the pirate ship.† The Cons. of 7th June, 1688, note that Harman Coppinger, an Irishman, Surgeon of the "Pyrat" ship Batchelor's Delight, commanded by Captain Read, deserted, with 27 others, who were pardoned on his handing in a full account of her cruise.

The famous Captain Kidd, with the Adventure, was in the Eastern seas in 1696–98. Several references to him occur in the Madras Press Lists. In 1697 a Calicut General Letter to Anjengo

intimates the arrival of the *Adventure* Galley.* On 13th Dec., 1697, a letter was received from Surat about Kidd the pirate.† On 4th April, 1698, is recorded Kidd’s seizure of the *Quedah Merchant* under pretence of orders from the King of England.‡ On 12th May, 1700, news was received in Madras of the capture of “Captain Kid, late Grand Pirate.”§ In the following year, 1701, the Madras Council received the King’s commission for trying pirates at Madras.||

William Kidd was given command of the *Adventure* as a privateer, to put down piracy, and sailed from Plymouth in May, 1696, for Madagascar. Soon after he was reported to have joined the pirates he was sent to suppress. He returned to Boston in July, 1699, in his prize, the *Quedah Merchant*, and was thrown into jail. He admitted piracy, but pled that he had been deposed and confined in his cabin by mutineers, and that the *Quedah Merchant*, sailing under French colours, was a lawful prize. He was sent to London, tried, found guilty, and with several companions was hanged at Execution Dock on 23rd May, 1701. It is probable that Kidd was guilty of piracy. It is certain that he did not get a fair trial.¶

Captain Alexander Hamilton, in his *New Account of the East Indies*,** says that when at Calicut, in 1703, he met there a pirate, Captain Green, who was afterwards hanged in Scotland. The first mate of the pirate, Mr. Mather, and the Surgeon, whose name is not given, wished to leave Green and join Hamilton, but the latter refused to take them. Hamilton appears to have been on quite friendly terms with the pirates, who did not attempt to molest him.

The *Bengal Cons.* of 19th Dec., 1720, mention the capture of the Company’s ship *Cassandra* by “Pyratts” off Madagascar, and record a report that there were then eleven sail of pirates, some of them carrying forty to fifty guns, at Johanna.

European piracy in the East finally died out about the middle of the eighteenth century. When England and France were

‡ Ibid. No. 853 of 4th April, 1698; *Pub. Cons.*, Vol. XXVII, pp. 95, 96.
¶ *Dictionary National Biography*.

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then at war, both countries sent considerable fleets to India. The strongest pirate was no match for a King's ship, French or English, and pirates met short shrift from the naval officers of either country.

With the above statements of fact, from records, may be compared the imaginary account of the Surgeon on a pirate in the Spanish Main, given by R. L. Stevenson in *Treasure Island*, Chap. XI.

"'No, not I,' said Silver. 'Flint was cap'n, I was quartermaster, along of my timber leg. The same broadside I lost my leg, old Pew lost his deadlights. It was a master surgeon, him that amputated me,—out of college and all—Latin by the bucket, and what not; but he was hanged like a dog, and sun-dried like the rest, at Corso Castle.'"

Though he had no connection with the I.M.S., or even with India, it may here be mentioned that one man has contributed to combine the practice of piracy, or at least of privateering, with that of medicine, and has attained considerable success in both professions; Thomas Dover, who gave his name to *Pulvis Ipecacuanhae Compositus*. Dover was born in Warwickshire in 1660, studied under Sydenham, took the degrees of B.A. and M.D. at Cambridge, and set up in practice at Bristol in 1684. In August, 1708, he sailed with Captain Woodes Rogers, in the *Duke* and *Duchess*, on a privateering expedition round the world. Dover was second in command of the expedition, and commanded the *Duke*, he had no medical responsibilities. The two ships carried six Surgeons, one of them, John Ballet, who had been Surgeon to Dampier, being rated as third mate. In April, 1709, the expedition captured and plundered Guyaquil. The sailors slept in the churches of the town, and were much annoyed by the smell of dead bodies buried therein, victims of a recent epidemic of plague. The disease broke out among the crews, 180 being attacked; Dover ordered them all to be bled to one hundred ounces each, and given dilute sulphuric acid to drink; this treatment is said to have been so successful that only eight died. The expedition reached England, by the Cape of Good Hope, in 1711, Dover commanding a Spanish prize. On 30th Sept., 1721, he took the diploma of L.R.C.P., London, settled in practice in London, and died in Arundel Street, Strand, in 1742. Dover may be said to have had a share in the origin of a great
English classic, for during this expedition, on 2nd Feb., 1709, Woodes Rogers took off the island of Juan Fernandez Alexander Selkirk, who had spent over four years on the island after a shipwreck, and upon whose adventures Defoe founded *Robinson Crusoe.*

CHAPTER XXV

CONTRACTS AND TRADE

"O fortunati mercatores, gravis annis
Miles ait, multo jam fractus membra labore."
Horace, Satires, I, 1.

In the literature of the eighteenth century the Anglo-Indian "Nabob" is a proverbial feature for wealth and extravagance. The traditional Nabob, celebrated for the amount of money he had made and the profusion with which he spent it, was usually a member of the Civil Service, less frequently a military officer, a merchant, or a planter. Most of the mercantile houses, and great part of the planting industry in India, indeed, were founded by servants of the Company. The pictures drawn by the novelists of the time may have been, indeed were, exaggerated, but had a solid substratum of truth. But, whatever the nature of his duties in India, civil, military, or medical, the man who made a fortune in the East did so, not out of his pay and allowances, but by trade and speculation. Such pursuits were perfectly legitimate. The Company's servants were paid such poor salaries that they were allowed, even expected, to add to their incomes by private trade. It is true that the Court of Directors in London often fulminated against their servants' private trade. But it was only when such private trade was pushed to such an extent as to interfere seriously with the profits of the Company's own commerce, as it did in Bengal in 1760–65, or to embarrass the Government, as it did in causing the War of 1763, that such objections were pressed. Roughly speaking, up to a period well after the middle of the eighteenth century, trade of all kinds was followed by the Company's servants, of every service and of every grade. And such speculation in a modified form, in contracts, in silk, in indigo, in zamindari, and in banking, was continued until nearly the middle of the nineteenth century. During
this period many medical officers, among others, piled up large fortunes. But such fortunes were made, not from professional earnings, still less from official pay, but from contracts and trade. To a much later date, we may say up to the present day, individuals have added considerably to their incomes by judicious or fortunate investments in the limited liability companies by which nowadays most Indian industries, such as tea, cotton, and jute, are carried on.

In the seventeenth century, Robert Douglas, who was the Company's Surgeon in Bengal from 1676 to 1684, figures in the *Diary of William Hedges*, President and Governor of Bengal from 24th July, 1682, to 17th July, 1684, as a habitual trafficker with interlopers, and also as partner with Hedges himself in various commercial transactions, as reported in the *Court Book* of 25th Jan., 1681/82.*—[Vincent, Littleton, and Douglas.]

They were not arrested, but all three were dismissed. Matthias Vincent was Chief of Kasimibazar Factory previous to 1677, then Agent in Bengal for five years, from 7th Sept., 1677, till superseded by Hedges in July, 1682. Edward Littleton went out as a factor in 1671. When dismissed in 1682 he went home. In 1699 he was knighted, and sent out as Agent in Bengal for the new English E.I. Co., arriving in July, 1699. He was dismissed in 1705, and died of fever in Calcutta on 24th Oct., 1707.

Even in early times some medical officers seem to have made a good deal of money. A Bengal General Letter of 14th Nov., 1737,† speaks of Robert Broadfoot, then one of the Calcutta Surgeons, as retiring with a considerable fortune. And the compensation for losses at the sack of Calcutta, drawn in 1757 by William Fullerton, amounted to nearly £30,000.

The ease of the transition from Surgeon to Merchant is shown by the following extracts from Bombay General Letters.

4th Apr., 1760, *para. 29.* "Surgeon Robert Herriott resigns on accou't of his illhealth, he was permitted to return by the way of China, it being imagined there can be no ill effect from Single Persons proceeding that way; Mr. John Page chusing a Mercantile way of life, Mr. John Parker as next in turn succeeds."

19th Feb., 1766, *paras. 158, 159.* "Surgeon Richd Percival has

† *Abstracts, Letters from Coast and Bay*, Vol. IV, 1734-1743, p. 232. See also Chap. VIII, *Early History, Bengal and the Bay*. In the *Fort William Cons. of 7th Dec.*, 1738, and 27th Jan., 1738/39, is noted the grant to John Patoun of bills of exchange in favour of Robert Broadfoot, amounting to £8955.
resigned his Employ on account of his bad health, but desires to remain on the Island as a Free Merchant. He has always conducted himself perfectly to satisfaction, and is therefore recommended to the Court's favourable Notice. Mr. Wm. Shepperd is appointed to succeed Mr. Perceval, and Mr. Saml Richardson is chosen as an additional one, two not being sufficient, with the same Diet and Allowances as the others receive."

John Page was appointed Surgeon's Mate at Madras in 1749, returned home a few years later, and in 1759 was appointed in the same capacity to Bombay. The above extract shows that he declined promotion to Surgeon in the following year. His "mercantile way of life" was probably not very successful, for he soon returned to the Medical Department. The Bombay Cons. of 1st Feb., 1763, note his appointment as Surgeon at Surat. A year later, on 10th Feb., 1764, he was transferred from Surat to Bombay. He resigned on account of ill-health and went home in November, 1764. Richard Percival was serving as Surgeon of the Bombay Grab in 1752-53. He was appointed Surgeon at Anjengo on 22nd May, 1755, and to the Presidency before April, 1758. He lived at Bombay only two and a half years after his retirement. His tombstone in the cemetery at Sonapur, Charni Road, Bombay, shows that he died at Bombay on 20th Aug., 1768, aged 38. The Cons. of 27th Sept., 1774, mention a claim by his executors for a debt of Rs. 34,236, due from one Ransor Sinh.

In 1765, when private trade was abolished, was formed, under the orders of Lord Clive, then Governor of Bengal, the Inland Trade Association. The formation of this Association is entered in Cons. of 8th Sept., 1766, and is reported in para. 31 of a Bengal Letter dated 30th Sept., 1766. The Association was an exclusive company, consisting of the first three classes of Covnanted civilians, with Field Officers, Chaplains, and Head Surgeons. The profits made were divided half-yearly between the members.* There were sixty shares in all, distributed among the members according to their rank; the four Head Surgeons each had one-third of a share.

In 1767, this Association was abolished, and, instead of its profits, a commission on the provincial revenues was given. In

* Long's Selections, No. 836, p. 428. Also Bengal Secret and Mily Cons., 10th Aug., 1765, 18th Sept., 1765, and 3rd Sept., 1766. The abolition of the Association, under orders from Court, is first mentioned in the same Cons. of 16th Jan., 1767.
the *Cons.* of 27th June, 1768, Colonel Richard Smith, the Commander-in-Chief, complained that the Court of Directors had confined the privilege of sharing in this commission to Members of Council and Field Officers, and requested that Surgeon Majors of Brigades might be granted a share, as they had in the profits of the salt trade. Discussion was postponed. Three months later, in the *Cons.* of 21st Sept., 1768, the following resolution was passed:—

"Agreed and Resolved,
"That the Surgeon Majors of each Brigade shall have a Major's share in the Commission on the Revenues.
"That they shall have half the Emoluments of the Hospital.
"That the Surgeons and Surgeons Assistants shall have the other half.
"That the Surgeon Majors shall not be allowed to draw the Company's Gratuity.
"That the other Surgeons shall draw the same Gratuity as allowed to a Captain.
"That the Surgeons Assistants shall draw the same as is allowed to a Lieutenant."

The grant of this commission is reported in paras. 80–83 of a Letter from Fort William, dated 2nd Feb., 1769.*

Two months later, the *Cons.* of 20th Nov., 1768, contain a resolution to the effect that a share in the Commission on Revenues shall be granted to the four Head Surgeons in Calcutta, three-fourths of a share being allotted among the four.

The *Cons.* of 17th July, 1770, contain a notice of allotment of shares in the Commission on Revenues, to be paid in the following November. The amounts payable to Medical Officers are as follows:—

"John Taylor . Rs.2250 Thomas Anderson . Rs.2250
James Ellis . , 2250 Andrew Williams . , 2250
Daniel Campbell . , 2250 Robert Knight . , 2250
Thomas Bagnall . , 1218 James Campbell . , 1404
Henry John Chandler , 1031

The first five of these officers held the four posts of Head Surgeon in Calcutta, Chandler having relieved Bagnall from 8th Dec., 1769. The last four were the four Senior Surgeons in military employ, Anderson being the Surgeon General, and the other three Surgeon Majors of the three Brigades. Why James Campbell got a smaller share than the others is not apparent.

* Quoted in Chap. XVIII, Pay. See also Chap. XVI, Military and Civil.
The orders of 20th Oct., 1763, which constituted the Medical Service, direct that the two Senior Surgeons at Calcutta are to have the Hospital Contract. In Long's Selections (No. 829, p. 422) is quoted the following order:

*No. 80. 27th Dec., 1765. "The Surgeons are in future to be allowed 18 rupees per annum for each sick person lodged in the hospitals, which allowance shall stand in lieu of all charges for coolies, carriage, black assistants, bazar medicines, &c, &c, and it is hereby understood that every expense shall be defrayed by the Surgeon, whether in Garrison or in the Field, the erecting Hospitals, providing Cloaths, furnishing Europe medicines, and providing diet excepted, for which last article they are to draw from the Soldiers pay in the usual manner."

Long also (No. 867, pp. 454, 455) quotes from the Cons. of 22nd Sept., 1766, the rates at which the Surgeons should draw for victualling the sick, the soldiers having to pay at a higher rate when admitted for venereal than for other disorders.

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<th>In Garrison.</th>
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<td>From the Company</td>
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<td>Contractors</td>
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<td>Total</td>
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The same order goes on to give the rates at which the profits are to be divided between different medical officers.

Long also (No. 875, p. 459) quotes from the Cons. of 27th Oct., 1766, an order which seems to show that the profits of these contracts were so great that it was necessary to supervise the Surgeons carefully.

"We express our apprehensions that the Surgeons of the Army will find their account in encouraging the men to plead sickness in order to be received into the Hospital, and that we must therefore depend upon the vigilance of those officers who visit the sick to prevent this evil."

The terms of this contract are given in para. 79 of a letter from Fort William dated 29th March, 1766.

"Hospital Expence in Field and Garrison, to reduce it have Contracted with the Surgeons to supply each Man with everything except bedding, Lodging, and Europe medicines at 18 Son¹ R² p. Month, being about 18d p. day and 6d less than is allowed to the King's Hospitals in India."
Broome, in his *History of the Bengal Army*, (p. 546), speaks of the hospital contract of 1765 as follows:

"The charges of the medical department, which were paid upon Contingent Bills drawn by the Surgeons, amounted to a very large sum, in consequence of which, at the suggestion of Lord Clive, arrangements were made on the 11th of November, for reducing these expences by giving the Surgeons a contract for the supply of medicines, which contract was fixed at the rate of 18 shillings for each European, to include everything, except clothing, bedding, cots, and lodging; more than double the sum at present allowed."

Broome seems to be mistaken in saying that the rate was eighteen *shillings* for each European. It was eighteen *rupee* rupees, an amount then equivalent to about 45 shillings. The contract of 1765, however, included among the items supplied by the Surgeons, the cost of "black assistants," who in 1850, when Broome wrote, had long been superseded by the Military Sub-medical Department, paid by Government. That such contracts were very profitable is shown by the fact that many disputes among medical officers, as to their relative shares in the Hospital Contract, were referred to Government for decision. The *Madras Mily. Cons.* of 12th Aug., 1771, report one such dispute about the profits of such contracts at Vellore and Trichinopoly. In those of 11th Jan., 1779, a similar difference of opinion between Surgeons Wilson, Gordon, and Carere, at Pondicherry, was referred for decision to Surgeon General Pasley. A quarrel of much the same kind in Bengal is embodied in the *Proceedings of the Calcutta Medical Board* of 14th June, 1797.

A General Letter from Fort William, dated 9th May, 1777, in paras. 10 and 11 reports a Hospital Contract made with the Surgeon General, Daniel Campbell.

"In case the Surgeon General should die before the expiration of his Contract for defraying Hospital and Medical charges, M'I Williams the next Surgeon in rank is to fulfill the same. And all General Orders not contrary to the terms of the Contract are to be equally binding on the Surgeon General as if inserted in the contract."

This contract was made, contrary to the advice of the Commander-in-Chief, General Clavering, who expresses his disapproval in the fifteenth para. of a Letter to Court, dated 28th March, 1777. (*Abstracts, Letters from Bengal*, Vol. IV, 1774–1783, pp. 257–58).

"Disapprove highly of the Surgeon General M'I Campbell's plan for contracting to defray the Hospital Expences for three years, Reasons stated."
In an article on the Constitution of the Medical Department in Corbyn’s *India Journal of Medical and Physical Science*, *(New Series, Vol. I, 1836, pp. 127, 346)*, the author states that towards the close of the eighteenth century Government gave to Regimental Surgeons contracts for the purveying of hospitals, and supply of European and bazar medicines, from which many men made large fortunes.

"In Lord Lake’s camp such were the enormous receipts in consequence of these contracts for supplying corps with medicines, diet, and dhoooles, that Doctors Monroe and Cochran especially realised the largest fortunes ever made in this country."

This was in the second Maratha war. Presumably the writer, when he speaks of "the largest fortunes ever made in the country" means fortunes made by medical men only.

Walter Ross Munro was born in 1747, went out to Madras as Assistant Surgeon in 1770, and was transferred to Bengal from 27th July, 1771; became Surgeon on 1st Sept., 1778, Head Surgeon on 1st Feb., 1787, officiated in the Medical Board from 24th Dec., 1789, to 31st Dec., 1793, but did not get a permanent seat at the Board till nine years later, on 24th Dec., 1802, became President on 17th Dec., 1811, went on furlough 4th Jan., 1815, retired 30th June, 1815, and died on 9th Aug., 1816. He had risen far above the rank of regimental Surgeon by Lord Lake’s time, being then in the Medical Board. He was one of the three medical officers who protested against their supersession by Balfour’s return from the combatant to the medical line.*

Peter Cochran entered the Bengal Service as Assistant Surgeon on 6th April, 1780, became Surgeon on 5th Feb., 1790, Head Surgeon on 11th April, 1805, and Member of the Medical Board on 17th Dec., 1811. He succeeded Munro as President on 4th Jan., 1815, went on furlough on 21st Jan., 1819, retired on 5th June, 1821, and died at Beauvais in France on 18th June, 1831.

These hospital contracts were abolished in Bengal in 1815, in Madras for European troops from 6th July, 1827, for native troops from 5th May, 1829.†

A contract for the upkeep of the Bombay Hospitals was given to the senior Surgeons in the Bombay Cons. of 2nd July, 1777. Two years later, on 14th July, 1779, the standing Hospital

* See Chap. XV, *The Double Commissions*.
Committee reported that the contract with the Surgeons had effected a saving of more than Rs.60,000 yearly. These contracts were abolished by Bombay G.O. of 19th June, 1828.

"Bombay Castle, June 19th, 1828. The Hon. the Governor in Council is pleased to authorize the following alteration in the mode of furnishing supplies for the use of the Native General Hospital at the Presidency, the civil hospitals at Poona, Surat, and Ahmedabad, Lock Hospitals, and Eye Infirmary.

"The present contract held by medical officers for the supply of articles of diet, wine, sago, spices, and articles of that nature, together with cottes, cumbles,* country medicines, and other necessaries, is abolished from the 1st of July next, and all such supplies are to be, after that period, made by the Commissariat Department, the diet on a daily indent signed by the surgeon, and other articles when required, and under the countersignature of the Superintending Surgeon of the Division in which the hospital may be situated, agreeably to the principles laid down in article xxii, section x.

"As almost the whole of the remuneration of the surgeon of the Native General Hospital at the Presidency is derived from the contract he at present holds, under the old system, for the supply of all materials for the use of the hospitals, he is permitted to draw a salary of Rs.(400) four hundred per mensem.

"The following is the establishment of the Native General Hospital at the Presidency.

1 Assistant Apothecary and steward—Rs.40.
1 Compounder . . Rs.15 1 Barber . . . Rs.5
1 Dresser . . . 10 2 Cooks, 1 Portuguese (each) 8
2 Ward boys (each) . . 6 1 Dhobi . . . 7
1 Matron (woman's ward) . . 10 3 Hallaadores * (each) . . 6
2 Puckalies * (each) . . 7½ 3 Peons (police) . . —

To show the kind of speculations frequently undertaken by medical officers some instances may be quoted. The Bengal Cons. of 21st April, 1766, contain a claim by the executors of the late Dr. Robert Fisher for over Rs.37,000, from the Raja of Dinajpur, due for trading transactions. Archibald Keir, who, however, had long left the Medical Department, is mentioned in para. 7 of a Revenue Letter from Fort William, dated 9th Feb., 1779, as having purchased the mines of Ramgarh (Hazaribagh) from the Raja of that district. Seven years later another Revenue Letter, of 24th March, 1786, mentions this mining speculation, which does not appear to have met with great success. The extract supplies an early instance of the proposed flotation of a jointstock company in India, and incidentally infers that no

* Cumbly, kamal, or kamli, blanket; Halalkhor, (literally, one who eats what is lawful), sweeper; Pakhali, pack bullock for carrying water.
speculation could be permitted in India which might injure any trade in England.*

Paras. 7-10. "M' Keir—Mines in Ramgurh. Court's orders forbidding an extension of his Lease for working the Mines have been communicated to him, he has offered to surrender the Grant provided the Company will reimburse him the actual Expense he has been at in Working the Mines, otherwise he expects to divide his property therein into Shares and carry on the work by a Society of Merchants. Have not complied with M'r Keir's proposal, but recommend it to the Court's favourable Consideration. A Copy of his Proposal sent in the Packet. The undertaking might have proved of great local utility without injury to the Export Trade of England. The Original Encouragement given to the undertaking, arose from an expectation of its proving a Commercial benefit to the Country, and was at all events deserving Encouragement, as promoting Industry and Civilization among the Inhabitants. The heavy expense attending the pursuit of this Undertaking, the incompetency of M'r Keir's private fortune, his long and meritorious Services, (particularly with Major Lawrence at Trichinopoly in 1754 and with Captain Kilpatrick at Fultah in 1757), we hope will dispose the Court to attend to and relieve his embarrassments."

The C.G. of 19th March, 1789, announces the grant of a contract to the Civil Assistant Surgeon of Rajshahai.

"The contract for the repairs of the Lushkerpore, Bettorcah, and Bhoorna Pools † during the current year, advertised in our Gazette of the 1st January last, is to be made with M'r Todd, the Surgeon at Bauleah, his proposals having proved the lowest of several which were tendered."

A Separate Letter from Lord Cornwallis, the Governor General, dated 4th Nov., 1789, in paras. 9 and 10, refers to Surgeon Andrew Hunter as follows:—

"With respect to M'r Hunter, represents him as a Man, who has been more engaged in pecuniary transactions, than in the pursuit of any Professional knowledge. Shall, however, recommend to the Board to appoint M'r Hunter to the office of Chief Surgeon, when it shall become vacant."

Hunter entered as Surgeon's Mate in Bengal on 2nd Feb., 1764, became Surgeon on 30th March, 1767, and was appointed President of the Medical Board when James Ellis retired on 24th Dec., 1789, superseding John Fleming, who had held the post of second Member for nearly two years. Hunter was removed from the post of President on 15th June, 1791, and remained a Supernumerary Surgeon till he retired in Oct., 1797.

Commercial speculation was not always successful. Two

* For Keir see Chap. XV, The Double Commissions,
† Pools, here means embankments, (pul, bridge).
Mily. Letters from Court to Bombay, of 3rd June, 1814, paras. 2 to 13, and of 6th June, 1814, paras. 44 to 48, refer to a petition by Helenus Scott, against the cancellation of his contract for the supply of spirits. Scott says he lost a lakh of rupees thereby.

Two instances of large fortunes left by members of the Bengal Medical Service may be quoted from the Gentleman's Magazine. The issue for January, 1810, mentions that the will of the late Dr. Gray of India left £30,000 to the town of Elgin. Alexander Gray entered the Service on 15th April, 1783, being locally appointed, after serving five years in the Navy. He became Surgeon on 17th June, 1799, and died in Calcutta on 26th July, 1807.

In the same magazine for 1851, (Chronicle, p. 297), is contained a long obituary notice of Thomas Phillips, who was born on 6th July, 1760, was a pupil of John Hunter, and, like Gray, had served in the Navy, on the North American station. He entered the Service on 20th April, 1781, became Surgeon on 21st Oct., 1794, Head Surgeon on 2nd July, 1810, Member of the Medical Board on 4th Jan., 1815, went on furlough on 30th Jan., 1817, and retired on 6th Aug., 1817. He died in London on 13th June, 1851, a few days before completing his ninety-first year, and is said to have then been the oldest living member of the College of Surgeons. His will left large sums for education in Wales, to St. David's College, Lampeter, and to schools at Llandovery, some £19,000, besides endowments.

As an instance within the last half century may be mentioned the case of Assistant Surgeon B. C. Chaudhri,* of the Bengal Civil Sub-Medical Department, who died at Hughli, aged 97, in Aug., 1907, leaving a large fortune, which was said to amount to twenty lakhs, or, even at the present rate of exchange, over £130,000. The foundations of this fortune were laid by medical practice, but the bulk of it was made by judicious and successful investments in zamindari, etc.

John Fullarton was born in 1780, became M.A. in 1794 and M.D. in 1800 at Glasgow, and entered the Bengal Medical Service on 1st Aug., 1802. He resigned on 21st Oct., 1812, and entered the banking house of Alexander and Co., Calcutta, as a partner. He left India with a large fortune in 1823. In 1834 he was sent

* For B. C. Chaudhri, see Chap. XLIII, Medical Education in India.
by Government on a special mission to China. He died on 24th Oct., 1849.*

His more famous contemporary, Joseph Hume, was born on 22nd Jan., 1777. He was an early instance of a much qualified man, as he took the L.R.C.S., Edinburgh, in 1796, the Certificate of the London Corporation of Surgeons in 1797, and the M.D. of Marischal College, Aberdeen, in 1799. He became Surgeon to an Indiaman in 1797, and served for two years, till he got a commission as Assistant Surgeon in Bengal on 27th Aug., 1799. In the second Maratha war he did great service by making fit for use a large store of gunpowder, which had become damp, and also served as interpreter to the Commander-in-Chief. A Calcutta Mily. Letter of 30th April, 1804, states, in paras 147, 148, that Assistant Surgeon Hume has been appointed to officiate as Deputy Paymaster of the troops in Bundelkand, on an allowance of eight rupees a day; but he can hardly have made a fortune out of that. He resigned in Feb., 1808, with a fortune of £40,000, and sat in Parliament, as an advanced Radical, from 1819 till his death, which took place at Burnley Hall, Norfolk, on 20th Feb., 1855. He was elected F.R.S. on 8th Jan., 1818, was twice, in 1824 and 1828, Lord Rector of Marischal College, Aberdeen, and made a blank verse translation of Dante's Inferno.

In the Minute on the conditions of service in the I.M.S., dated 8th June, 1838, by Surgeon, afterwards I.G. Sir Ranald Martin, he speaks most forcibly of "the commercial habits acquired at a civil station," and the "professional idleness" consequent thereon, as rendering men who had been long in civil employ absolutely useless for professional work.†

Chevers, in his article on Surgeons in India, Past and Present, in the Calcutta Review for 1854, No. 45, quotes a description of the Civil Surgeon, but warns his readers that it is a caricature.

"The Philosophic Surgeon, who on his way to his indigo factory, would enquire of the native doctor—'Any thing to-day'—and, upon receiving the ready answer, 'All's well, Lord of the world, only five men dead,' would exclaim cheerfully—'good, very good'—and canter gaily about his business."

Martin's Minute takes it for granted that all or nearly all medical officers in civil employ spent their time on commercial

* For Fullarton and Hume, see Dictionary of National Biography, and for Hume, also Chap. XXIV, The Sea Service.
† This minute is quoted in Chap. XVI, Military and Civil, p. 292.
pursuits. Two well-known instances of men who followed such a course with great success were G. N. Cheek at Bardwan and Bankura, and David Turnbull at Mirzapur.

George Nicholas Cheek was born on 18th Nov., 1793, and entered the A.M.D. as Hospital Mate on 19th July, 1813, with the Certificate of the London Corporation of Surgeons. He served in the Peninsula and at Waterloo. Entering the Bengal Service as Assistant Surgeon on 30th Sept., 1816, he served in the third Maratha war, and afterwards settled down in civil employ in Bengal, first at Bardwan, later at Bankura, then known as West Bardwan, or the Jungle Mahals. There he went in extensively for zamindari, indigo-planting, and trade in country produce. He gave up promotion to retain his civil appointment, which he did for nearly forty years, dying on 26th June, 1859, while on short leave at the Nilgiri hills.

David Turnbull was born in 1768, and appointed to Bengal as Assistant Surgeon on 2nd Sept., 1791. Soon after he was posted to Mirzapur, where he carried on an extensive trade in country produce, and also, like Cheek, went in for indigo and zamindari. On 27th March, 1800, he was promoted to Surgeon, with effect from 14th Jan., 1806, as reported in paras. 691–706 of a Mily. Letter of 27th March, 1809, which goes on to state that this antedated promotion brought in a crop of fifty-one memorials from the Surgeons thereby superseded. However, in 1813, Turnbull was allowed to resign his rank as Surgeon, to revert to Assistant Surgeon, and to remain at Mirzapur, where he died on 14th Dec., 1822. In 1806, he discovered the use of lac dye, according to the Gentleman’s Magazine for 1807, Vol. I, March.

"Mr. Turnbull has lately discovered at Mirzapoor, in India, a new Dye, which he has called Lac Dye, and which is likely to prove a valuable article of Commerce."

The Civil Assistant Surgeon was usually also Postmaster of his station, not unfrequently Registrar, sometimes sadr amin, or Sub-judge. The advisability, or rather the nonadvisability, of such extra-professional appointments, is discussed in a leader on Dawk Travelling in the Friend of India for 31st Dec., 1835. This journal was started as a quarterly at Serampur, in 1821, by J. C. Marshman, later was issued monthly, and from 1st Jan., 1835, as a weekly paper, and soon made itself a power in the land.
It was subsequently edited, from 1848 to 1860, by Meredith Townsend, afterwards in London joint editor of the Spectator from 1861 to 1905; and from 1864 to 1875 by George Smith, C.I.E., LL.D. It has long been incorporated with the Calcutta daily, the Statesman.

"We mean no disrespect to the Deputy Postmaster at Bancoorah and Burdwan when we say that he has no time to attend to all the minutiae of dawk arrangements on that extensive line of communication. He is Surgeon to the Civil Station at Burdwan, and has the management of an extensive private establishment of works. This privilege is fully conceded by the Regulations of Government, but it is a vicious system which allot property so confessedly inadequate, as to render it necessary to grant liberty of private trade to make up the deficiency. The Judge and the Surgeon of the district have both received an equally liberal and expensive education in England to qualify them for the public service; yet there is so great a disproportion between their allowances, that the Surgeon receives but one sixth the pay of the Judge. The salary of the Surgeon ought to be so generous as to enable Government to command his exclusive services, and to require him to devote his whole time to the medical police, topography, and statistics of the district; and in Burdwan at least he ought to be relieved from the charge of the postoffice."

Officers of the Army were forbidden to enter into commercial speculations by Bengal G.O. of 1st Jan., 1824.

"In consequence of some recent instances of private commercial transactions in this army having been brought to the notice of Government, it is hereby declared, that any military officer who may be proved, summarily, to the satisfaction of the Governor General in Council, to have engaged in any mercantile or commercial speculations whatever, shall be held ipso facto incapable of serving, and shall be forthwith suspended and sent to Europe, with a recommendation to the Hon. Court of Directors that he be discharged from their army. His Excellency the Commander in Chief is requested to give the fullest effect to this order."

This order was approved by the Court of Directors, and made applicable to the whole of India, in paras. 31 and 32 of a Mily. Letter from Court, dated 23rd Aug., 1826, and republished as Madras G.O. of 12th Jan., 1827.

In the Asiatic Journal for Sept., 1836, occurs the following note on the commercial transactions of Surgeon John Henderson* of the Bengal Medical Service. His commission as Assistant Surgeon is dated 3rd Oct., 1815. In 1817 he was appointed Civil Surgeon of Kalpi (Culpee) in Bundelkand, and remained there for six years. After a short spell with the Cawnpur levy, he was Civil

Surgeon of Aligarh from 1825 to 1827. He was promoted to Surgeon on 11th June, 1826, and joined the 5th N.I. on 27th Oct., 1827, subsequently serving with the 41st N.I. at Muttra and Nimach, the 28th at Agra, and the 65th at Mhow. In 1835 he took furlough, and made a journey to Ladakh, dying at Ludhiana on 12th March, 1836, almost immediately after his return.

"During a residence in India, which cannot have fallen much short of twenty years, his active mind seems to have been ever devoted to objects of national interest, and for many years past, to have been unremittingly employed in introducing measures of direct public utility. It was at Calpee, we believe, that Dr. Henderson first engaged in mercantile speculations, and then prosecuted them keenly till the Bhurtpore war. Investments of ghee, catching elephants, supplies of horses, and banking, all occupied his attention; but the improvement of the cotton of Upper India was the more favourite scheme, and employed his pen in a correspondence with the talented Holt Mackenzie. He endeavoured, too, to introduce the spinning jenny at Coel, but without success, and was, after much unsuccessful speculation in indigo and cotton, driven, in 1828, to Van Diemen's Land, with shattered health, and in embarrassed circumstances."

"Since his return to India, Agra has been the chief scene of his labours. The Medical Retiring Fund, a medical library, the publication of an English, Persian, and Hindu newspaper, the remodelling of the Orphan School, the establishment of the Agra bank, the attempt to cause the existence of a branch horticultural society, the formation of the Agra public library, the erection of an extensive corn-mill, are all schemes which either emanated from his fertile brain, or were the objects of his anxious attention. His endeavours, in 1834, to erect a new town near Landour, created much sensation, and lent additional impulse to the awakening public spirit of Upper India. His journey to Little Thibet, Cashmere, and to the Indian Caucasus, would have filled up an important chasm in the geography of Central Asia, had that life been spared by disease, which had eluded the treachery of native chiefs, and the violence of highland robbers. Still he managed, amid all his difficulties and dangers, to insure the introduction of the silk-worm of Little Thibet on this side of the Sutledge, and as yet with every prospect of success, by which a most important advantage will be conferred, alike on the manufactories of Lahore and Multan, which are at present supplied with silk from Bokhara, at a risk and expense of overland carriage for 700 miles."

Most of Henderson's commercial ventures appear to have been started before the above orders, but the establishment of the Agra Bank and of the corn-mill at that station were after the date of the orders forbidding military officers to take part in

* Koel, now generally known as Aligarh.
† This journey was the subject of a work entitled, Observations in the Colonies of New South Wales and Van Diemen's Land, published by Parbury, Allen and Co., London.
trading ventures. As Surgeon to a native regiment, he must certainly have come within the terms of these orders.

Medical officers in Civil employ were not included in the terms of the orders of 1st Jan., 1824. Seventeen years later the prohibition was expressly extended to Civil Surgeons, by an order dated 17th Aug., 1841, though not with retrospective effect.

"Judicial and Revenue Department, Aug. 17th, 1841. With the sanction of the Supreme Government, the Right Hon. the Governor of Bengal notifies for general information, that the Hon. the Court of Directors have been pleased to prohibit for the future in every case the connection of civil surgeons with business as bankers, traders, and indigo planters, and to direct that, in the cases in which it has been permitted, no extension of such employment be allowed. The contravention of this order, the Hon. Court further observe, must be considered as ipso facto a resignation of their service."

In 1844 this order was reissued, landholding being included among the prohibited forms of speculation. The Gazette of India of 1st Feb., 1844, publishes extracts from a Letter from the Court of Directors, No. 7, dated 29th Nov., 1843, as follows:—

Para. 8. "We have already, in paras. 17 and 18 of our Judicial Despatch, dated 2nd June, 1841, directed that Civil Surgeons shall not be permitted to engage in business as Bankers, Traders, or Indigo Planters."

Para. 9. Extends to Civil Surgeons the prohibition contained in para. 53 of Despatch from Court to Government of India, dated 23rd February, 1842, which runs as follows:—

Para. 53. "We direct the invariable observance of the rule of the Service that no officer holding Civil authority in a District, shall directly or indirectly be a holder of land, or be concerned in any description of speculation therein."

The Bengal Medical Regulations of 1851 repeat these orders, in rule 29, (page 50), in a manner which seems to show that the prohibition of 1841 had not been strictly enforced.

"It has occurred more than once, within a short period, that Officers of the Medical Department, who have been attached to Civil Stations, when restored from the Civil to the Military Department, have pleaded their entanglement with mercantile or agricultural pursuits, as reasons for demanding long periods of leave of absence, instead of forthwith taking upon themselves the Military duties, to the discharge of which they are nominated. His Excellency the Commander in Chief therefore deems it necessary to give this public notice to Military Surgeons, that he considers that their entering into any pursuits, which prevent their being immediately available for the duties of the service to which they belong, as contrary to what is right, and that he will not in future listen to such pleas as are alluded to in the antecedent paragraph."
In 1862 the Government of India issued an order, published in *I.M.D. Circ.* No. 35 of 20th Dec., 1862, forbidding medical officers in civil employ to hold lands for agricultural purposes in the district in which they are employed. This rule, in fact, is simply a repetition of the former order of 1st Feb., 1844. Eleven years later another order, Govt. of India, Home Dept., Public, No. 13/467 of 13th Feb., 1874, published in *I.M.D. Circ.* No. 16 of 28th April, 1874, extended this prohibition from the district to the province of employment, forbidding also all speculation.

A General Letter from the Court of Directors, dated 30th Dec., 1825, forbids officers of every service and department, civil and military, to have any connection with the public press. This order was issued in a Bengal Order of 11th May, 1826, given below, and also in a Bombay Order of the same date, 11th May.

"*Fort William, General Department, May 11th, 1826.* The following extract from a public general letter from the Hon. the Court of Directors, bearing date the 30th of December, 1825, is published for the information of the Honble Company’s servants on this Establishment.

" We feel it incumbent on us, from a regard to the public interests, to issue, in a circular to our Indian governments, our positive prohibition against any person in our service, either civil, naval, or military, surgeons and chaplains included, connecting himself with any newspaper or other periodical journal, (unless devoted exclusively to literary and scientific objects), whether as editor, sole proprietor, or sharer in the property.

"This order we shall enforce, if necessary, by dismissing from our service those who may contravene it. And in regard to such as may have already formed connexions of this sort, we desire they may be immediately warned that if the connexions are not dropt within six months after notice so given, they shall be held liable to the consequences of a breach of this prohibition, which you will publicly promulgate for the information of our servants. You will also report to us the names of the parties to whom this injunction may apply’

"Published by command of the Right Hon. the Governor General in Council.—C. Lushington, Chief Sec. to the Government."

A Bengal Order of 30th Nov., 1842, forbids civil, military, and medical officers to act as Secretaries to Public Societies, but permits them, as members, to take part in the proceedings of such Societies.

It is hardly necessary to state that all these orders, forbidding trading, banking, land-holding, planting, etc., are still in force, up to the present day. They have been republished on several occasions during the last thirty years. Recent orders on the subject may be summarised as follows. In all cases, the dates
are those of Resolutions of the Home Dept. of the Govt. of India.

(1) Lending and borrowing forbidden; 16th March, 1888, and 16th Jan., 1890.

(2) Landholding and commercial speculation forbidden; 13th May, 1885.

(3) Connection with press, how far allowable; 16th Aug., 1884, and 3rd June, 1885.

(4) Sale of property to natives; 20th Jan., 1882.

(5) Reception of contributions from natives towards public objects; 11th July, 1885, and 14th Aug., 1889.

(6) Pecuniary arrangements between Government servants in connection with resignation of appointments forbidden; 29th Dec., 1883; (also G.O. No. 216 of 9th Dec., 1842).

(7) Receipt of testimonials by Government servants; 22nd July, 1887, and 6th May, 1898.

(8) Political agitation forbidden; 18th March, 1890.

(9) Acceptance of presents by Government servants forbidden; 13th July, 1876.

This last prohibition is simply a republication of an order which has been in force for considerably over a century, having been promulgated in Act XIII, George III, caput 63, section 24. In section 25 of this Act, and in all subsequent orders on the subject, the right of medical officers to accept fees in return for professional services rendered is definitely reserved.*

* Sections 24 and 25 of Act XIII, George III, caput 63, are quoted in Chap. XVIII, Pay.
CHAPTER XXVI

THE MINOR MEDICAL SERVICES

"How far is St. Helena from the field of Waterloo?"

Kipling, Rewards and Fairies.

In addition to the Indian Medical Service, employed in Continental India, the E.I. Co. used to maintain four other Medical Services, employed in their other possessions and factories, viz.—

The St. Helena Medical Service.

The West Coast (of Sumatra) Medical Service.

The Prince of Wales Island Medical Service.

The China Medical Service.

I. The St. Helena Medical Service.

The island of St. Helena was first discovered by a Portuguese navigator, Juan de Nuova Castella, on 21st May, 1502 (St. Helena’s Day). In 1588 it was visited, on his return from a voyage round the world, by Captain Thomas Candish or Cavendish, who found the island inhabited by only a few slaves of the Portuguese, and speaks of seeing a cross, with the date 1571, and a church, and mentions that the Portuguese Indiamen usually touched at the island on their homeward voyages.* The island was formally occupied by the Dutch in 1633, but abandoned by them in 1651, when they took possession of the Cape of Good Hope. When the Dutch left St. Helena, the E.I. Co. occupied the island, and their possession was confirmed by a charter from King Charles II, dated 3rd April, 1661. In 1668, Captain Stringer was appointed Governor, and a resident Surgeon was posted on the island. In 1673, the Dutch captured the island, but it was retaken in the same year by Captain (afterwards Sir) William Munden, R.N., and re-granted to the Company by a new charter, dated 16th Dec.,

1673.* The E.I. Co. retained possession of the island until 1834, except during the years 1815 to 1821, when the British Government held it as a residence for Napoleon, who died there on 5th May, 1821. When Acts 3 and 4 of William IV, cap. 85, in 1833, abolished their trade, the Company ceded the island to the Crown.

The E.I. Co., however, undertook to administer the island, on behalf of the Crown, for one year more, as notified in the following G.O:—

"St. Helena, April 17th, 1834. The Governor and Council think proper to publish in General Orders the following extracts from the Hon. Court of Directors’ despatches to this Government, dated 22nd January, 1834.

"We have to acquaint you that, at the request of His Majesty's Government, we have undertaken to administer the government of your island, under the Crown, for one year from the 22nd April next (unless a final arrangement should be previously made by the King's Government).

"We have resolved, in accordance with the wish which His Majesty's Government have expressed, that no vacancies, either in the civil or military establishments, shall be filled up, nor any new appointments made, nor any re-enlisting take place, without previous communication with the Lords of His Majesty's Treasury."

As might be expected, from the size of the place, the St. Helena Medical Service was a very small one. At most, there appear to have been four or five men serving at one time, of whom one would usually be on furlough. In 1813 there were, a Medical Superintendent, a Head Surgeon, one Surgeon, and two Assistant Surgeons.

Matthew Livingstone, who entered in 1815, became Surgeon on 23rd June, 1817, and Supt. in 1820, an instance of very rapid promotion, took part in the autopsy on Napoleon, on 6th May, 1821. He himself died of apoplexy at St. Helena, five months later, on 10th Oct., 1821. The Asiatic Journal of June, 1830, recording the trial by court-martial and acquittal of James Price, a Surgeon in the St. Helena Service and Health Officer of the island, states that at the time he was also an Assistant Surgeon in the A.M.D., on half pay of H.M.'s 100th Foot.

The last medical officer permanently appointed to the St. Helena Service, George Brown Waddell, joined in 1828, and was

* Among the parchment records at the India Office, in the List of General Records, 1599–1879, are No. 18a, Proclamation of the Dutch on taking possession of St. Helena, dated 1633, and Letters Patent granting the island of St. Helena to the East India Company, dated 16th Dec., 1673.
murdered by pirates two years later. The *Asiatic Journal* of Oct., 1830, states that he left the island for England, in the schooner *St. Helena*, on 31st March, 1830. The schooner was taken by pirates on 6th April, and most of those on board murdered; the Commander, Captain Harrison, and Dr. Waddell, being tied back to back and flung overboard.

A St. Helena G.O. of 15th June, 1835, granted furlough for two and a half years to James Arnott, the Medical Supt., and to Surgeon Gordon Lorimer, and noted that, by their departure, the Service was reduced in numbers to three; to two of whom, Surgeons McRitchie and Reed, extra allowances of £85 each were given. The remaining officers became Colonial Surgeons, and the E.I. Co.'s St. Helena Medical Service came to an end. James Arnott was the last survivor of this Service. He took the degrees of M.A. in 1812 and M.D. in 1825 at Marischal College, Aberdeen; was appointed Medical Superintendent at St. Helena in 1825, left the island for good in 1835, and died in London, nearly half a century later, on 4th March, 1883.

II. The West Coast Medical Service.

The history of the E.I. Co.'s early settlements in the Malay islands has been given in Chap. IV, *Early History, the Islands, Amboyna*. After the Company had withdrawn from the other islands, they concentrated their efforts on Sumatra, where they founded numerous factories and settlements along the South West coast of the island; whence the name in general use, West Coast. Bengooleen was occupied in 1685, and at that settlement were built Fort York in 1685–87, and subsequently Fort Marlborough in 1715. Other settlements on this coast were Moco Moco, established about 1712, Manna in 1714, and Natal in 1751. Throughout the first half of the eighteenth century, Sumatra was officered from Madras, and was subordinate to that Presidency. Service on the island was unpopular, and men who were not wanted at Madras seem to have been relegated there. In 1763, Bengooleen was made an independent Presidency, but twenty-two years later, in 1785, it was placed under Bengal. Hence all the correspondence about the West Coast Medical Service went through the Calcutta Medical Board. Many of the officers appointed to the West Coast Service, after serving there for some time to the satisfaction of their superiors, succeeded in getting transferred;
in the first half of the eighteenth century to Madras, and later on mostly to Bengal.

After the I.M.S. had been constituted in 1764, up to the end of the eighteenth century, the medical officers serving on the West Coast formed a small separate Service of their own, which gradually died out in the first years of the nineteenth century. The West Coast Service was still maintained, but was officered entirely from India, chiefly from Bengal, with a few men from Madras. These men served temporarily on the West Coast, retaining their places in their own Service, and reverting to it after a tour of duty in Sumatra. After 1794, no new names, other than those of officers of the I.M.S., appear among them.

This Service came to an end in 1825, the British possessions in Sumatra being handed over to the Dutch from 5th July, 1825, in exchange for the territory of Malacca, in the Malay Peninsula, by the Treaty of 17th March, 1824. The medical officers serving in Sumatra then rejoined their own Presidencies.

III. The Prince of Wales Island Medical Service.

The island of Penang was ceded to the E.I. Co. in 1786 by the Raja of Kedah or Quedah, and was given the name of Prince of Wales Island. The same potentate in 1798 ceded a tract of country on the mainland opposite Penang, to which was given the name of Province Wellesley. Malacca was first occupied by the Portuguese in 1511, taken from them by the Dutch in 1640, and taken from the Dutch by the British in 1795. The British retained it up till 1818, when it was given back to Holland. As stated above, the Treaty of 17th March, 1824, gave Sumatra to the Dutch in exchange for Malacca, the Dutch also recognising British sovereignty over Singapore, which they had previously disputed. Singapore was occupied by the British in 1819, and formally ceded to them by the Raja of Johore in 1824.

In 1801 it was proposed to form a fourth Presidency, besides those of Bengal, Madras, and Bombay, to include the Company's possessions in Further India and the islands, with the seat of Government at Penang. The post of President of the Medical Board was offered to Dr. McGrigor, then serving as a Medical Officer of British troops in India.* After consideration he

declined the offer, partly on account of the protest against their supersession which would have been made by the Company's medical officers. The scheme was, to a certain extent, carried out, Penang being made a separate Presidency in 1805, but no Medical Board was ever appointed.

The medical officers in these settlements were supplied partly by a small separate Service, partly by men temporarily lent from the other Presidencies, chiefly from Bengal. The numbers were very small, only some fourteen or fifteen men altogether, besides the men lent.

The Asiatic Journal for June, 1817, (page 611), contains the following note:—

"The Medical Establishment at Prince of Wales Island, which has hitherto been provided for from the other Presidencies, is now made separate and permanent. The medical gentlemen appointed to that Presidency are to rise in regular succession to the highest stations."

There had certainly, however, been a separate Service for these settlements, i.e. medical officers serving there who did not belong to any of the other three Presidencies, as early as the first years of the nineteenth century. The names are given, as a separate Service, in Dodwell and Miles' East India Medical List.

G.O. No. 90 of 5th May, 1826, published in the Calcutta Gazette of 8th May, 1826, increases the strength of the Bengal Medical Service by 50 men, 20 Surgeons and 30 Assistant Surgeons. The 5th para. of this order runs as follows:—

"Singapore, one of the stations enumerated by the Medical Board as requiring an Asst. Surgeon, will be supplied with Medical Servants from the Establishment of the Incorporated Settlements of Prince of Wales Island, Singapore, and Malacca, as soon as the complement of Medical Servants for these Settlements shall have been furnished."

From 1823 to 1826, John Crawfurd, of the Bengal Medical Service, was Administrator of Singapur.

Penang, Singapur, and Malacca, were incorporated together in 1826. From 1st May, 1830, this small Presidency was abolished, being placed under the Bengal Government, with as its Chief a Resident. Of the Company's servants in these settlements the more senior were pensioned, some of the juniors were transferred to Bengal.

In 1830 there were only four men left in the Service, one of whom, John James Boswell, was transferred to Bengal in that
year. The other three were transferred in 1831, by the following General Order in the *Calcutta Gazette* of 3rd Oct., 1831:

"The undermentioned Assistant Surgeons of the Penang Medical Service are transferred, under instructions from the Honorable the Court of Directors, to the Bengal Establishment, with rank immediately above Assistant Surgeon J. J. Boswell:

Asst. Surgeon John Campbell Boswell.
"  "  Adam Thompson.
"  "  Thomas Oxley."

The last survivor, Thomas Oxley, retired on 20th Jan., 1857, and died at Southampton on 6th March, 1886, having long survived the other three, both in length of service and in length of years.

One officer of this Service attained some note, Charles Mackinnon. He was appointed to the China Service in 1806, but probably never joined, being transferred to Prince of Wales Island the same year. He retired on 14th November, 1821, was elected M.P. for Ipswich in 1826, 1830 and 1831, and died at Beauvais in France on 19th Nov., 1834.

These settlements were supplied with medical officers from Bengal for the next thirty-seven years, until in April, 1867, they were removed from the control of the Indian Government and incorporated into a Crown Colony, under the name of Straits Settlements, by Acts 29, 30, Victoria, *cap.* 115.

**IV. The China Medical Service.**

The China Service was the smallest of all, and consisted of never more than two men at one time, serving in the Company's factories at Canton and Macao. The East India Company never owned any territory in China. Hongkong was taken possession of by the British in Jan., 1841, and formally ceded by the Treaty of Nankin in 1842.

The Company's first voyage to China was made by the *London*, which left Surat for Macao in April, 1635.* Macao had been occupied by the Portuguese nearly a century before, in 1545, and ceded to them in 1586. The Dutch had settled a factory in Formosa in 1607. The E.I. Co.'s first factories in China were Tywan or Taiwan, in Formosa, founded in 1670-71, and abandoned in 1682-83; Tonquin, founded in 1672, abandoned 30th Nov., 1697; and Amoy, founded 1679, captured by the Chinese in 1680, and not reopened. The Company's frigate *Eaton* reached

Chusan on 11th Oct., 1700, and tried unsuccessfully to trade with Ningpo and Nankin. Attempts were made to found a factory at Chusan in 1704, 1709, 1735, 1753, 1756, and 1759, but without success. The factory at Canton was established in 1715. In 1757 all English trade was confined to that port.

A Fort William General Letter of 5th April, 1783, contains in paras. 167 and 168, the following reference to a late Surgeon of the Canton factory:

"167. Mr Abraham Leslie, late Surgeon to the Factory at Canton, presented a memorial complaining of oppressions which he suffered in a long and unmerited imprisonment from the Portuguese Government at Macao, and praying our interference to obtain redress. As it appeared, from his own state of the case, that his confinement at Macao was occasioned by his violent and unjustifiable conduct towards the Chinese at Canton, and the consequent necessity of removing him thence at the requisition of the Mandarines, we did not think it proper to countenance his complaint.

"168. Mr Leslie produced the most favourable Certificates from the Supercargoes and others of his qualifications and conduct as a Surgeon at Canton, and petitioned to be admitted into the Service here as youngest Surgeon, but your orders to the Supercargoes concerning him prevented our receiving him in any capacity. Cons. 13th March."

The statute of 55 George III, cap. 155, in 1813, abolished the Company's monopoly of trade with India, but left them with that of the China trade. Acts III and IV of William IV, cap. 85, in 1833, abolished their trade altogether. Their factories in China were closed, and the China Medical Service came to an end. Most of the members of the Company's China Service, serving in the Canton factory, were transferred to the Indian Civil Service.

From 1756 to 1834 only some twelve or fifteen names appear in the lists of Surgeons serving in China, and of these few, two seem never to have joined. The last medical officer appointed to Canton was a man of some mark, Thomas Richardson Colledge. Born in 1796, he joined the Canton Factory in 1831. When the Company withdrew from China, he continued to serve at Canton under the Crown, but returned to England in 1841, when his appointment of Surgeon to the Canton Consulate was abolished. He settled at Cheltenham, where he lived for 38 years, and died there on the 28th Oct., 1879. In 1839 he took the degree of M.D. of King's College, Aberdeen; became F.R.C.P., Edinburgh, in 1840; F.R.S., Edinburgh, in 1844, and F.R.C.S., England, in 1853. While still serving in China, in 1837, he founded the Medical Missionary Society of China.
Ceylon was first occupied by the Portuguese in 1507. They were dispossessed by the Dutch about a century and a half later. When England was at war with France, and consequently with Holland also, at the end of the eighteenth century, the E.I. Co. sent an expedition to Ceylon, and seized the Dutch settlements there, in 1796, and annexed them to the Madras Presidency. Five years later, in 1801, they handed over Ceylon to the British Government, and it became a Crown Colony. Up to that date, however, Portuguese, Dutch, and English possessions, in Ceylon, were only a strip along the seacoast, with a few scattered settlements. The Company never constituted any separate Service for Ceylon, which, while they held it, was considered part of the Madras Presidency, and officered from Madras.

Madras Mily. Cons. of 25th Sept., 1798 (Vol. CCXLII) record the appointment of Mr. J. Ewart, of the King’s Army, as Physician to the Forces, and Inspector General of Hospitals in Ceylon. The Company’s medical officers in Ceylon served under this officer up to 1801.

History repeats itself; and during the last ten years regiments of the Indian Army, with officers of the I.M.S. in medical charge, have again been serving in Ceylon, as well as in Singapour, Hongkong, and China.

One medical officer, however, whose name does not appear in the Madras list, appears to have been appointed to Ceylon by the Company. Thomas Christie was born in 1773, educated at Aberdeen University, and entered the Company’s Service in 1797, being posted to Trincomali. In 1800 he was appointed Superintendent of Military Hospitals in Ceylon. His services appear to have been taken over by the British Government, for he remained in Ceylon until 1810, serving in the war against the King of Kandy in 1803. In 1810 he went home, and in the following year he settled in practice at Cheltenham, where he died on 11th Oct., 1829. He was appointed Physician Extraordinary to the Prince Regent in 1813.

The Cape of Good Hope was first occupied by the Dutch about 1651, and taken by England in 1795. The E.I. Co. never governed the Cape, but kept an Agent there till 1835, and made great use of the Colony as a sanitarium for their officers, Military and Civil, on sick leave.
CHAPTER XXVII

THE UNCOVENANTED AND SUBORDINATE MEDICAL SERVICES

"The backbone of the Army is the noncommissioned man!"
KIPLING, The Heathen, Seven Seas.

I. The Uncovenanted Medical Service.

Even so early as the end of the eighteenth century we find instances of European medical men, not members of the Company's regular Medical Service, practising in India, and, in some cases, holding appointments under Government. Dr. Rowland Jackson, a member of the Royal College of Physicians, London, was granted permission to practise in Bengal, in a letter from the Court of Directors, dated 4th July, 1777, and came out to Calcutta in the following year. In those days, and indeed up to a much later date, the physician, both socially and professionally, stood distinctly higher in position than the surgeon. Soon after his arrival, Dr. Jackson requested the Bengal Government to employ him as Physician to the Company, and Inspector of the Company's hospitals, the Company's medical officers being only Surgeons. This application, from a new-comer in the country, to be placed practically at the head of the Bengal Medical Service, naturally excited great indignation among the officers of the regular Service.

A petition, signed by fourteen officers,* protesting against any such appointment, was sent to Surgeon General Daniel Campbell, and by him forwarded to Government. This petition may be seen in the Cons. of 26th April, 1779. The petitioners state that they have heard a rumour that Dr. Rowland Jackson is to be appointed Physician to the Company; that such an appointment is unprecedented, and derogatory to the whole body of Surgeons.

in the Service, who have hitherto carried out both medical and surgical duties.

The Cons. of 30th April, 1779, contain minutes by the different members of Council on this petition.

A minute by the Governor General, Warren Hastings, suggests that Dr. Jackson be appointed Physician Extraordinary to the Presidency, on a salary of [blank] per month; to be called in as a consultant to the hospital or private patients, but not to be on the strength of the establishment.

Sir Eyre Coote, the Commander-in-Chief, had no objection to allow Dr. Jackson a stipend—

"provided it does no injury to gentlemen against whom there has been no complaint for want of capacity in their profession, and many of whom from long experience must be sufficiently qualified to discharge the particular functions of their stations."

Mr. Francis approved of Dr. Jackson's being employed, and would prefer that—

"the motion had gone further and assigned him a direct inspection over the hospitals, which I conceive might be done without the smallest diminution of credit or emolument to the surgeons. The offices of surgeon and physician are in my judgment totally distinct."

Mr. Wheler agreed with Mr. Francis.

Mr. Barwell disapproved. He had no objection to giving Dr. Jackson a salary, but without authority over the members of the Service. He quoted a similar case in which great opposition had been made, in 1760 or 1761, to the appointment of a physician named Banks,* who finally joined as a Surgeon, like others.

In the Cons. of 13th May, 1779, Dr. Jackson was appointed "Medical Attendant to the Civil and Military Servants of the Company, when called upon," on a salary of Rs.600 a month, with Rs.200 house-rent. He was subsequently appointed Physician to the Jail. He died in Calcutta on 29th March, 1784. His tombstone may still be seen in South Park Street Cemetery.

After Jackson's death his widow applied for a pension from Lord Clive's Fund. The Bengal Council strongly recommended her claim, in paras. 63 to 65 of a Fort William General Letter, dated 23rd August, 1784.

* No other reference to this Dr. Banks has been traced.
"Dr. Rowland Jackson died the 29th March. His widow solicits to be admitted to the benefit of Lord Clive's Pension. Doctor Jackson was Physician to the Settlement, on which his widow founds her plea to be admitted to the benefit of the Pension on the same footing as the widows of Military Surgeons. Mrs. Jackson's claim warmly recommended."

This recommendation from the Bengal Council would seem to show that they, at least, considered Dr. Jackson as a regular member of the Establishment. The Court, however, refused to admit Mrs. Jackson's claim, as shown by para. 289 of a Secret Letter from Fort William, dated 23rd Aug., 1786.

"Widow of Dr. Jackson. Court's Resolution not to allow her the Pension cannot be communicated to her, she being sailed for Europe."

The C.G. of 6th June, 1811, contains a notice of the death of Dr. John Buirette,* Police Surgeon, Calcutta; and that of 24th Oct., 1816, notes the death "at Monghier, lately," of Dr. Francis de Souza, M.D., late Police Surgeon. The appointment of Police Surgeon, Calcutta, was held by uncovenanted medical officers until a comparatively recent time; about 1878 it was combined with that of Superintendent of the Campbell Hospital, when the late Dr. S. C. Mackenzie succeeded Dr. C. T. O. Woodford as Police Surgeon. These two posts were again separated towards the end of 1906, when an officer of the I.M.S. was appointed Police Surgeon. In Bombay this appointment is held by a medical officer who is not a member of the Service.

The regular Uncovenanted Medical Service seems to have crept into existence gradually during the second quarter of the nineteenth century. No formal order constituting such a Service appears to be in existence. The Court was always extremely jealous of any attempt on the part of the Governments who represented them in India to make appointments to any of the commissioned or covenanted Services, Civil, Military, or Medical. The Medical Service was naturally the one in which such local appointments were most often made, as the number of medical officers was always only just sufficient to fill the sanctioned posts, and to provide for a small proportion absent on furlough. Consequently, whenever any sudden demand arose, from war, famine, or pestilence, for extra medical officers, the regular service was found insufficient in numbers to cope with the emergency. To apply for more men from home was of little use, owing to the length

* For Buirette, see Chap. XXXII, War Services.
of time required for communication between India and England. On several such occasions, in the Mysore and Maratha wars of 1780-81, the third Maratha war of 1817-18, and the first Burmese war of 1824-25, the Indian Government made numerous local appointments of Assistant Surgeons. On the first occasion, the Court ordered the removal of all the locally appointed men, and filled their places by men sent out from home, but allowed the local men to enter again, junior to the new appointments, as vacancies occurred. On the second and third occasions the Court insisted on the removal of all the locally appointed men. About half of them managed to obtain commissions in the regular way, by nomination at home, and kept their places; the others, who were not so fortunate, were gradually struck off. In the first China war of 1840-42, a number of similar appointments were made, but the men so appointed were not shown in the Army Lists, as they had been on the earlier occasions, as part of the regular Service, but were considered as only temporarily engaged.

But, while they could not make appointments to the regular commissioned Medical Service, the Indian Government appear to have found it feasible to make appointments to a local and inferior or uncovenanted Medical Service, which thus gradually grew into existence. Medical officers were thus locally appointed to some of the smaller civil stations, not recognised as regular collectorates, and to the regiments composing various irregular forces, such as the Gwalior contingent. Many of the officers thus appointed succeeded in time in getting nominated as Assistant Surgeons, and so entering the commissioned Service. Two uncovenanted medical officers subsequently became professors in the Calcutta Medical College. R. O'Shaughnessy served as Demonstrator of Anatomy from 1839 to 1841, got a commission as Assistant Surgeon on 4th Dec., 1841, became Professor of Surgery in 1845, and held that post till he went on furlough in 1859, retiring on 4th May, 1860. Surgeon Major S. C. G. Chuckerbutty served as an uncovenanted officer from 1850 to 1854, when he went to England, and entered the I.M.S. at the first competitive examination for commissions therein, on 24th Jan., 1855. He became Professor of Materia Medica in 1864, and held that post till he went on furlough in 1874, dying in London on 29th Sept., 1874.
A despatch from the Secretary of State, No. 61 of 16th April, 1863, published in *I.M.D. Circs.* No. 14 of 23rd June, 1863, makes these appointments pensionable.

"Uncovenanted medical officers may be admitted to the benefits of the Uncovenanted Service Pension Rules, as recommended by your Government."

After the Mutiny, during the period of four and a-half years, 1860–64, when no recruits were admitted to the I.M.S., the number of Uncovenanted medical officers employed considerably increased. But the substitution of Uncovenanted for Commissioned medical officers was not found, in practice, to be a success. This result was only natural, considering the low rate of pay, and the poor prospects. The result was economy, but economy at the expense of efficiency. The same cause would have produced the same effect, had the proposals made nearly fifty years later, in 1909, ever been carried out to any extent.

The evil effects of this false economy are very plainly set out in the 6th para. of the report of the Commission of 1866 on the I.M.S., *(Mily. Dept. Proc.,* May, 1866). In paras. 62 and 63 of the same report, proposals were made for the improvement of the pay and prospects of the Uncovenanted Medical Service, proposals which were soon after carried into effect.

"6. In consequence of the Home Government having ceased, for the last five years, to send out Assistant Surgeons upon the Indian Medical Establishment, the authorized numbers have, in some instances, become so reduced, that, in order to meet the requirements of the public service, it has been found necessary, more especially in Bengal, to entertain as Civil Surgeons any medical men offering to accept service under the local Governments.

"The arrangement has not been found to work altogether satisfactorily. Medical men so employed have been known to resign their appointments rather than leave particular stations, thus causing embarrassment in the administration of the Medical Department and inconvenience to the public service. A more serious consideration is, that a body of uncovenanted officers of this class cannot be held available as a military reserve in cases of emergency. In the late military operations in Bhootan, the Commission understands that there was much difficulty in supplying a sufficiency of Medical Officers for the force, partly owing to the fact that the uncovenanted surgeons temporarily engaged for civil duties could not be ordered to serve otherwise than in a civil capacity. Dr Bruce has related an instance of an officer of this class in charge of a Police Corps in Bhootan, who, finding the charge irksome, resigned his appointment, and left his charge in the field without waiting to be relieved.

"The pecuniary advantages to Government do not appear to be
sufficient to counterbalance the inconveniences we have noted. From a Return before us it would appear that the emoluments of these officers including extra allowances, average about Rs.400 a month. They are also entitled to leave and pension in accordance with the regulations laid down for the uncovenanted Civil Service.

"One economy results from their employment, viz. that their services are generally temporary, liable to be dispensed with at the pleasure of Government.

"The fixed rates of pay sanctioned for these officers are not such as to attract a well qualified class of candidates. The uncovenanted Civil Surgeons now in Government employ are mostly dissatisfied with their position and prospects, and have memorialised the State to sanction a higher scale of pay, ranging from 300 to 700 Rupees a month, and graduated according to length of service. The memorial has been strongly supported by the Bengal Government, and we are of opinion that even to retain those now in the service, it will be necessary to concede in substance all that they have asked for.

* * * * * *

"62. The scale of pay already given is intended for officers of the covenanted service only. There are at the present time about thirty uncovenanted Surgeons holding civil medical charges, chiefly under the Government of Bengal. We suggest that these appointments should ultimately be filled up by officers belonging to the regular service, but meanwhile we would recommend the issue of a graduated scale of pay to those already entertained. The present system appears to be that no uncovenanted medical officer is to receive more than three hundred rupees per mensem, but we observe that many draw higher salaries, the difference being made up by special allowances for police, dispensaries, &c.

"63. We would suggest for the consideration of the Government of India, that the present is a fitting opportunity for laying down a suitable scale of salaries for officers of this class, and for abolishing extra allowances. This scale we propose to apply also to members of the Subordinate Medical Establishment who may be selected for the medical charge of civil stations, under such rules as may be determined upon hereafter.

"The scale we recommend is as follows:—

Uncovenanted Surgeons (employed in the Civil Department).

Below 5 years’ service . . . . Rs.350 per mensem
Above 5 and under 10 . . . . 450 " "
" 10 " " " 15 . . . . 550 " "
" 15 " " " upwards . . . . 700 " "

"These consolidated sums are in lieu of all extras, travelling and deputation allowance only excepted."

Rules regarding the Uncovenanted Medical Service were published in Govt. of India, Home Dept., No. 1/77–84 of 17th March, 1885, and are quoted in *I.M.D. Circs.* of 1885. They run as follows:—

"With reference to paragraph 2 of Resolution of the Government of India in the Home Department (Medical), No. 17/481–494, dated 31st
October, 1884.* the following rules are prescribed for uncovenanted medical officers in the Bengal Presidency.

" Uncovenanted medical officers are engaged, as occasion arises, to fill the appointments specified in the Resolution above cited.

" 2. Candidates who desire to enter the service should apply to have their names recorded in the office of the Surgeon General with the Government of India, where a register for this purpose will be kept.

" 3. Candidates may be of any nationality, but must be licentiates or graduates in medicine and surgery, and must produce satisfactory evidence that they bear a good character, and that they are physically fit for the service.

" 4. Candidates, as a rule, must not exceed 28 years of age.

" 5. Assistant surgeons may be made uncovenanted medical officers by selection.

" 6. Uncovenanted medical officers in the Bengal Presidency will all be borne on one list, and all additions to this list, as well as the distribution to particular provinces, will be made by the Government of India on the recommendation of the Surgeon General.

" 7. Transfers from one charge to another within any province will vest with the Local Government concerned, but no uncovenanted medical officer can be transferred from one province to another, except by the Government of India.

" 8. The following is the scale of consolidated salaries for uncovenanted medical officers when in medical charge of civil stations:—

Below 5 years of service . . . . . Rs.350 per mensem.
Above 5 and under 10 years of approved service . " 450 " "
Above 10 and under 15 years of approved service " 550 " "
Above 15 years . . . . . . . . . . . " 700 " "

"This scale of salary is to be considered as payment in full for all official medical and sanitary duties, inclusive of those appertaining to dispensaries and police, etc., save that for the medical charge of a lunatic asylum, or a college, or for the administrative charge of a jail, the extra allowance admissible to a covenanted medical officer for the like charge will be given. Travelling allowance will also be given under the rules prescribed in the Civil Travelling Allowance Code.

" 9. An uncovenanted medical officer not holding a substantive appointment, if appointed to the medical charge of a civil station for which an uncovenanted medical officer or a covenanted medical officer is authorised, shall be allowed an aggregate acting allowance of Rs.350 per mensem.

" 10. The service of an uncovenanted medical officer towards the periodical increments of pay reckons from the date of his permanent appointment to the medical charge of a civil station.

" 11. An uncovenanted medical officer, in permanent medical charge of a civil station, is allowed to count towards the periodical increase of pay the time passed in medical charge of a Government steamer.

" 12. As regards leave and pension, uncovenanted medical officers come under the rules applicable to the uncovenanted service of Government generally."

* This resolution gave a list of all medical appointments in India, specifying which were reserved for covenanted and uncovenanted officers respectively.
Previous to the publication of the above rules, appointments to the Uncovenanted Medical Service had been made direct by the provincial Local Governments, and the officers so appointed had not been considered liable to transfer to other provinces.

Officers of this Service were known as civil medical officers, the title of Civil Surgeons being only applied to commissioned officers, up to 1903, when Govt. of India, Home Dept., Resolution No. 405-418, Medical, of 21st April, 1903, extended the title of Civil Surgeon to all medical officers holding civil surgeoncies, covenanted and uncovenanted alike.

As an instance of a successful career in this Service we may mention that of Sir John William Tyler, born in 1839, who served in the North-West, now the United Provinces, for many years as Superintendent of Agra Jail, subsequently as Inspector General of Jails. He was made a C.I.E. in 1886, and knighted in 1888. He retired in July, 1896, and died in London on 12th May, 1913.

This Service is now gradually dying out, no new appointments having been made since the last decade of the nineteenth century.

II.—The Subordinate Medical Services.

From very early times the Company's medical officers employed indigenous assistants in their hospitals. These assistants, at first, were merely native servants trained locally to act as dressers, under the immediate supervision of their superiors. Up to the middle of the eighteenth century such native servants, and occasional European soldiers told off to help in the hospitals, who gradually learned to act as apothecaries, were the only medical subordinates employed.

From such small beginnings sprang the present subordinate medical services. Of these, exclusive of the Civil Apothecaries in Madras, now gradually dying out, there are four—

The Military Assistant Surgeons.
The Civil Assistant Surgeons.
The Military Hospital Assistants, (now Sub-Asst. Surgeons).
The Civil Hospital Assistants, (now Sub-Asst. Surgeons).

Native medical subordinates appear to have been employed from a very early time. A letter from President Fremlen at Surat to the Company, dated 9th Dec., 1639, states that he has
satisfied the claims of "our Banyan doctor" for money lent to three European servants at that factory.* This native doctor's name was Odor Butt, i.e. Adhar Bhatt. A later letter from Fremlen, dated 27th Jan., 1641/42, reports that he has required the Banyan doctor to refund the interest paid him, which he said he was unable to do, as he was only an agent in the loan, and had passed on the money to the actual lenders, who refused to return what they considered justly due to them.† This loan, apparently, was an early instance of a benami transaction.

In the *Diaries of Stroynsham Master*, (Vol. I, p. 431), is given the name, Nilchand or Nilkanth, of an Indian doctor employed at Hughli factory in 1676.

That an Indian doctor was employed at Fort St. David as early as 1690 is shown by an entry in the *Fort St. David Cons. for 30th Oct., 1740.*‡ One Numshivia put in a petition that he and his father Shevandavadum had served the Company as physicians, at Fort St. David and Conimeer, for over fifty years. His father used to receive two pagodas a month, and he one pagoda as assistant. After his father's death, he succeeded to his place, and had now served over fifty years, and had grown old. He asked that his son, who was capable of acting as physician, and had acted as assistant for several years, might be granted a salary of one pagoda a month. His request was granted.

A black hospital assistant is mentioned as serving in the Bombay Hospital in 1701.§

In the *Bombay Cons.* of 10th Dec., 1741, is mentioned the appointment of one Morar Purvoe as Mate in the hospital, *vice* Balloo. It is stated that he attends constantly and is useful in making up the Doctor's prescriptions. His pay was at the same time raised from twelve to sixteen rupees a month, the amount drawn by his predecessor. This note is interesting as using for a native doctor the title "hospital mate," usually given to a European Assistant Surgeon.

An entry in the *Bombay Cons.* of 8th April, 1760, speaks of a "country doctor" employed in the Company's factory at Scindy (Sind).

The *Bombay Cons.* of 30th June 1738, || contain a list of the

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subordinate staff of the Bombay Hospitals, as it existed, and also a new scale then introduced.

<table>
<thead>
<tr>
<th>Present scale.</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apothecary</td>
<td>10</td>
</tr>
<tr>
<td>Black assistant</td>
<td>6</td>
</tr>
<tr>
<td>Black doctor to Regiment</td>
<td>12</td>
</tr>
<tr>
<td>Black doctor at Mahim</td>
<td>6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Proposed scale.</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apothecary</td>
<td>10</td>
</tr>
<tr>
<td>Mate</td>
<td>10</td>
</tr>
<tr>
<td>Four assistants</td>
<td>22</td>
</tr>
<tr>
<td>Two assistants for going abroad</td>
<td>12</td>
</tr>
</tbody>
</table>

The hospital assistants' pay is fixed at six rupees, and that of out-door assistants at Rs.8, sums which do not fit into the proposed scale given above, so apparently must have been in addition to it.

The pay seems very small, but was not out of proportion to that of medical officers. In the previous year, the Cons. of 5th Aug., 1837, contain a petition from Assistant Surgeon Peachey, that he had served for several years, and never received more than Rs.24 per month. The Board declined to increase Dr. Peachey's pay, but gave him a gratuity of Rs.400, equal to about eight rupees a month for all the time he had served. He would seem, therefore, to have served for a little over four years.

When the Company raised a standing army, native medical attendants were appointed to each corps and regiment.

In the Bengal Muster Rolls, Vol. I, 1718-1771, is contained a document entitled "A General Return of the Land Forces in the Kingdom of Bengal and Province of Bahar, under the command of Colonel Eyre Coote, November 1st, 1761." This document bears Coote's autograph at the foot, in a large almost upright hand. Seventeen "black doctors" are shown on the strength of the Bengal Army.

A return of the Company's Bengal Army, dated 21st Jan., 1762, quoted in Broome's History of the Bengal Army, (Appendix, p. xxxi), gives nineteen "black doctors" to a grand total of 8,338 rank-and-file, or about two per battalion of a thousand men. Another return, on page xxxvii, six pages further on, gives the troops under the command of Captain Peter Carstairs at Patna on
30th April, 1763, and shows two battalions, the 2nd and 3rd, each with a strength, including officers, of 1,090 men, and three "black doctors"; while a third battalion, the 5th, had two "black doctors" to 529 men. Four years later, in 1767, the Madras Government sanctioned the appointment of a native doctor, on the pay of a havildar, to each battalion of sepoys.* At the end of 1785, a native doctor was attached to each battalion of native infantry, on Rs.31 per month, a sepoy's pay plus stoppages.† In Jan., 1788, native dressers were appointed to each native cavalry regiment on 10 pagodas, or Rs.35 per month, a trooper's pay plus stoppages.‡ Those in the Infantry got 6½ pagodas, or about 21 rupees, a month, a private's pay plus stoppages. These subordinates seem to have established their claim to be considered pensionable servants before the end of the eighteenth century. The Proceedings of the Calcutta Medical Board of 8th April, 1797, contain a letter from Assistant-Surgeon G. Fraser, of the 2nd Battalion, 2nd N.I., stationed at Kishanganj, in which he recommends Ramath, Brahman, native doctor of the Battalion, for pension, and gives a certificate that he has served for twenty-six years. The S.S. of Barhampur, Walter Ross Munro, forwarded the letter to the Medical Board, with a recommendation that they would lay before the Commander-in-Chief "the justice of including that useful class of servants, the native doctors, in the benefits of the invalid establishment." The claim seems to have been admitted, for the Proceedings of the same Board of 13th Sept., 1798, note that the native doctor of the 2nd Battalion, 2nd N.I., has lately been invalidated, and that another native doctor is required in his place.

A Political Letter from Madras, dated 15th March, 1811, states in paras. 313, 314, that Native Dressers are continued on the Pension List on half pay, five pagodas a month. These Native Dressers in Madras corresponded to the Black Doctors of Bengal, and to the Military Sub-Assistant Surgeons of the present day.

A Military Subordinate Medical Department seems to have crept into existence, in the Madras Presidency, soon after the middle of the eighteenth century. No definite orders sanctioning

† Ibid. II., 176.
‡ Ibid., II, 158; and Mily. Cons., 29th Jan., 1788.
such an institution appear to exist. Indeed, the Service seems to have owed its existence to the energy of individual medical officers, who trained private soldiers and Eurasians to assist them in their hospital work. At first, such assistance was paid for by the medical officers themselves, out of the allowances given for the upkeep of their hospitals. Gradually, the best of these Assistants were taken on to the paid establishment of the Medical Dept., under the title of Sub-Assistant Surgeons.

There are many allusions to officers of this class in the Madras Mily. Cons. The first mentioned by name seems to be Charles Casimir, who was appointed on 5th Jan., 1770. He held the post of Assistant to the Medical Storekeeper throughout his service, and died at Madras on 14th May, 1792. He, however, seems to have been in a better position than the others, having been appointed direct by Government. On 5th Aug., 1781, the Native Surgeon at Tellicherry asked that his pay might be increased to thirty rupees a month. This appears to have been a civil post. Tellicherri and Anjengo were officered from Bombay, but received orders through Madras. On 24th Dec., 1784, John Nor, Sub-Assistant Surgeon of the Bombay force which had served in the second Mysore war, asked to be paid fifty rupees a month, his Bombay rate of pay, which was allowed. This entry shows that a similar class was then recognised at Bombay.

In the Mily. Cons. of 5th Dec., 1786, the Madras Council ordered the Hospital Board to submit a list of Sub-Assistant Surgeons. The Board submitted the list on 20th Dec. with a minute stating that their number was small, and that many of them had served with credit, and recommending that they should continue to be employed, their pay being only ten pagodas a month each. This list is not given in the Cons. The Mily. Cons. of 4th March, 1788, however, contain a list of the whole Madras Medical Dept., submitted by the Hospital Board, which includes Sub-Assistant Surgeons. There were only seven in all, two of whom were pensioned within the next few months, Davies on 27th Dec. and de Roza on 27th June, 1788. The grant of pensions shows that they must have served for a good many years. Three of the seven had been private soldiers, four were country born. The list is as follows:—

"John Crawford, Masulipatam Hospital, a private in the Honble Company's Service."
Francis Lapton, Madras Hospital, a native of India, appointed a Sub-Assistant by Mr. Wynch at the recommendation of Mr. Lucas, to whom he had served his regular apprenticeship.

Miché Rencontre, Chingleput, born in India, from his assiduity in that line, appointed a Sub Assistant.

James Patterson, Trichinopoly Hospital, came out a private, and is now returned as a Matross in the 2nd Battalion Artillery.

Andw Davies, Vellore Hospital, a private in the Honble Company's Service.

John Paschall, Vellore Hospital, born in India and apprenticed to Mr. Gahagan.

Domingo Vancloster de Roza, Madras Hospital, a native Portuguese, formerly apprentice to Mr. Raine.’’

It will be noticed that Casimir's name, though he was serving at the time, is not included in the list. Presumably he held a position superior to the others, rather that of an Uncovenedanted than a Subordinate officer.

Some of the medical officers whose names appear in the Bombay Army Lists seem to have been practically only subordinates. Three Assistant Surgeons in the Bombay List are called “unranked assistant surgeons, not to rise.” They were, Christian Mathias Kehn, or Kiln, entered Dec., 1772, Gabriel Alvarez, entered March, 1786, and William Schott, entered 1799. From their names, they appear not to have been Englishmen. None of the three ever rose to the rank of Surgeon, though the first two served for thirty and twenty years respectively. A letter from the Bombay Council, to the newly established Hospital Board, dated 1st Sept., 1787, sanctions the appointment of Gabriel Alvarez as a mate in the Sepoy Hospital, but states that in point of rank and pay he is to be considered as a native assistant only.

The Madras Mily. Cons. of 8th April, 1771, contain a list of medical officers employed in that Presidency, which includes eighteen Surgeons, four Mates, and six "Assistants in the Hospital, not to rise.” * These last six, at first sight, would seem to have been men of a class corresponding to those afterwards called Sub-Assistant Surgeons. This, however, was not the case. Four of the six were debarred from promotion because they were foreigners; three Frenchmen, Tenier, Buret (Buirette), and Suffrein, and one Portuguese, Antonio Simoens, shown in this list as Simmons. The last eventually was promoted to Surgeon. The other two were Terence Gahagan and Swallow. Gahagan also was promoted.

in time, and rose with such effect that he became President of the Medical Board and head of the Madras Service.*

A subordinate class also existed in Bengal, though not many references to them occur in the Records. Nicola, or Nicholas, Anderson's dresser at Patna, has already been mentioned in Chap. XII, William Fullerton, and the Patna Massacre. He, however, seems to have been a native. The Bengal Mily. Minutes of Council of 5th April, 1779, contain a petition from William Pinhorn, stating that he has served for nine years as dresser and dispenser in the hospital of the first Brigade, and asking for increase of pay. Andrew Williams, Surgeon Major of the Brigade, recommended him for the allowances of an Assistant Surgeon or Conductor, and Brigadier General Stibbert for those of Conductor. The result is not stated. Two years later, in the Cons. of 17th Sept., 1781, Surgeon General Daniel Campbell recommended Pinhorn for appointment as Assistant Surgeon, but without success.

In 1802 a scheme was formulated in Bombay for training native doctors to serve on the cruizers of the Bombay Marine. This scheme was reported in para. 104 of a Bombay Public Letter, dated 5th Feb., 1803.

"Medical Board have been permitted to admit the Sons of Natives as Apprentices into the private Dispensary who when duly qualified are to be appointed to the smaller Cruizers at 30 Rs. p. Month which will enable them to attach the European Surgeons to the Army or to such other Departments as may require their services."

An early instance of a native serving as Surgeon in the Bombay Marine appears in the Bombay Cons. of 12th Sept., 1750, which contain an inquiry into the capture, off Gharia, of the Restoration grab by Angria's fleet, consisting of five grabs and thirty-seven gallivats. Among the Proceedings is the evidence of Dowjee, a Moorman, who acted as Surgeon of the Restoration.

A.—The Military Subordinate Medical Department.—The military sub-medical department in Bengal appears to have been definitely constituted in the first years of the nineteenth century. A general order, dated 15th June, 1812, published in the C.G. of 2nd July, 1812, approves of a plan submitted by the Medical Board for training boys from the Upper and Lower

* See Chap. XXIII, Administration, the Medical Boards, Vol. II, pp. 20–22.
Orphan Schools and from the Free School, as compounders and dressers, and ultimately as Apothecaries and Sub-Assistant Surgeons. This appears to be the earliest use of the title Sub-Assistant Surgeon in Bengal.

"Fort William, Jun: 15th, 1812.

"The Right Honourable the Governor General in Council having approved a plan submitted to him by the Medical Board, for the instruction of Boys from the Upper and Lower Orphan Schools and Free School, to serve as Compounders and Dressers, and ultimately as Apothecaries and Sub-Assistant Surgeons in the Medical Department of this Presidency, His Lordship in Council is pleased to pass the following Resolutions:—

"1st The Medical Board shall select 24 Boys of 14 or 16 years of age, from the above Institutions, in the choice of whom the Governors of these Schools are enjoined to afford every possible assistance. The Boys thus selected, are to be posted as follows, viz.:—

At the General Hospital at the Presidency . 10
Garrison Hospital, Chunar . . . . 10
General Dispensary . . . . 4

"2nd The Education of these Boys is to be conducted under the immediate charge and management of the Surgeons of the General Hospital at the Presidency, of the Garrison of Chunar, and of the Honourable Company's dispensary, respectively, under the general control and direction of the Superintending Surgeons of those Stations, and according to a plan of instruction to be prescribed by the Medical Board.

"3rd When these pupils are considered by the Superintending Surgeon, and the Surgeons under whom they will be more immediately educated, duly qualified for exercising the duties of Compounders and Dressers, they shall then be stationed at the recommendation of the Medical Board with such native corps as may more peculiarly require their aid; and afterwards with the different European Corps of the Honourable Company's Service, with Field Hospitals, and with the Depôts of Medicines.

"4th As an incentive to improvement, after two or three years service in the Stations to which they may have been nominated, the Medical Board, on a full conviction of their qualifications, will recommend them to Government for promotion to the rank of Sub Assistant Surgeons and Apothecaries, to be employed with European or Native Corps, or with the Medical Depots, or with the General or Field Hospitals, as circumstances may require.

"5th During their state of pupillage at the stations mentioned, in Article 1st, the Surgeons under whom they are to be educated, will be allowed to draw on account of each Boy, a monthly allowance of 25 Sonant Rupees, for which they will furnish them with Clothing and Maintenance; on their promotion to the Stations of Dressers and Compounders, they will be permitted to draw on their own account, the Monthly Allowance of 35 Sonant Rupees; and on their promotion to the higher ranks of Sub-Assistant Surgeons and Apothecaries, they will receive a Salary of Sonant Rupees 100 per Mensem.

"6th If the establishment of Quarters at the Hospitals, and at the General Dispensary, where they are educated, does not admit of accommodation for them, suitable and well aired Apartments will be constructed for them at the public charge.
"7th Monthly Reports of their proficiency and general conduct are to be made by the Surgeons, under whose management they are more immediately placed, to the Superintending Surgeons of Divisions, who will make Quarterly Reports of the same nature to His Excellency the Commander-in-Chief, and to the Medical Board, for the information of Government. (Signed) J. Adam, Sec. to Govt. Mil. Dept."

A Mily. Letter from Madras, dated 17th Oct., 1812, in para. 241, quotes the "favourable report of the Medical Board on the conduct of boys undergoing instruction." This extract shows that the training of boys for the I.S.M.D. was started in Madras as early as in Bengal.

The I.S.M.D. was to some extent recruited from the ranks of European regiments, as well as from boys specially trained. Madras Mily. Letter of 29th Feb., 1812, states in para. 417 that Private Scott has been appointed a Supernumerary Sub-Assistant Surgeon, and employed in the Field Hospital at Arnee. He died at Fort St. George in Aug., 1814.

The following extract from Bombay G.O. is quoted in the Asiatic Journal for Dec., 1819—

"25th June 1818. Private John Bly, lately arrived as a recruit for the Hon’ble Company’s Service, is transferred from the Military to the Medical Establishment, and appointed a Sub-Asst. Surgeon until further orders."

A Mily. Letter from Bombay, dated 7th July, 1819, reports in para. 22 that Patrick Cassidy, late Serjeant H.M.’s 17th Dragoons, having received a medical education, is appointed Sub-Assistant Surgeon of that regiment.

J. Huntly, nominated a Sub-Assistant Surgeon in Bombay G.O. of 3rd Nov., 1823, was remanded to the Artillery as a Gunner in Bombay G.O. of 8th Feb., 1825.

Many cases of similar appointments could be quoted from the Records.

A Madras G.O., dated 9th Aug., 1819, orders that—

"the medical pupil establishment, which was limited to thirty, is augmented to receive forty boys for professional instruction."

This order apparently refers to the Apothecary class.

A Madras G.O. of 27th April, 1827, organised the sub-medical department, of course a purely military department, into two branches, apothecaries and dressers. The latter became hospital assistants in 1868.
This order was followed by another on 5th Oct., 1827, giving new titles to the I.S.M.D. in the Madras Presidency.

"*Fort St. George, Oct. 5th 1827.* The Hon. the Governor in Council is pleased to direct, that when a noncommissioned medical servant is placed in an independent medical charge, he shall receive only half the rate of allowance for medical supply to which a commissioned medical officer is entitled.

"The following is the relative rank of noncommissioned medical servants, under the new designations, which were published in G.O. dated the 27th April last:

```
Former Designation.  New Designation.
Sub-Asst. Surgeon    Apothecary
Apothecary            Second ditto
First Dresser         Assistant ditto
Medical Pupil         Medical Apprentice
First Dresser         Native First Dresser
Second Dresser        Native Second ditto
```

"The Hon. the Governor in Council is further pleased to direct, that the new rate of pay and allowance for noncommissioned medical servants, which was authorized by G.O. dated the 27th of April, shall have effect from the 1st of May last."

A widows’ and orphans’ fund for the benefit of the I.S.M.D. was established by Madras G.O. of 22nd Feb., 1831.

Revised rules for the instruction of pupils in training for the I.S.M.D. were published in Madras G.O. of 13th Feb., 1835.

By G.G.O. No. 200 of 25th June, 1847, it was ordered that hospital apprentices, after two years’ service in military hospitals, should be sent to the Calcutta Medical College, to undergo there a course of two years’ professional instruction.

The *Bengal Medical Regulations of 1851* give the grades of the sub-medical department, and the scale of pay for each, as follows:

<table>
<thead>
<tr>
<th></th>
<th>Pay.</th>
<th>Furlough pay.</th>
<th>Pension.</th>
<th>Invalid allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rs.</td>
<td>Rs.</td>
<td>Rs.</td>
<td>Rs.</td>
</tr>
<tr>
<td>Senior apothecary</td>
<td>250</td>
<td>75</td>
<td>100</td>
<td>0</td>
</tr>
<tr>
<td>Apothecary</td>
<td>110</td>
<td>50</td>
<td>80</td>
<td>0</td>
</tr>
<tr>
<td>Steward</td>
<td>51</td>
<td>30</td>
<td>60</td>
<td>14</td>
</tr>
<tr>
<td>Asst. apothecary</td>
<td>55</td>
<td>30</td>
<td>60</td>
<td>0</td>
</tr>
<tr>
<td>Asst. steward</td>
<td>35</td>
<td>30</td>
<td>60</td>
<td>0</td>
</tr>
</tbody>
</table>

In 1868, by G.O.G.G. No. 550 of 5th June, the Military Sub-Medical Department was divided into two classes, the Apothecary class and the Hospital Assistant class, the grades of Steward and
Assistant Steward having now dropped out. The first comprised the following classes:—

(a) Senior apothecary.
(b) Apothecaries, first and second class.
(c) Asst. apothecaries, first and second class.
(d) Hospital apprentices.

All ranks above hospital apprentice ranked as warrant officers. Promotion from second to first class Assistant Apothecary and Apothecary was given after five years in the lower grade. It is noted that the rank of Honorary Assistant Surgeon is not a grade, but a rank and title given as a special distinction. Such officers were to be supernumerary to the establishment and were not to be employed as medical subordinates.

In 1894, by the Royal Warrant of 12th March, 1894, quoted in I.A.C. of 15th May, 1894, clauses 63 and 64, the title of Apothecary was changed to Assistant Surgeon, the two grades of Senior Assistant Surgeon receiving Honorary Commissions as Captain and Lieutenant respectively; and in the following year, under G.G.O. No. 870 of 1895, the Military Sub-Medical Departments of the three Presidencies were amalgamated.

For more than half a century past, many of the senior members of this service have been employed, with credit and success, in independent charges, as Civil Surgeons, and in various other capacities. Two at least have received Orders. Honorary Assistant Surgeon Joseph Anderson, of the Bombay S.M.D., received the Persian order of the Lion and Sun more than fifty years ago. Major T. H. Hill, of the Bengal S.M.D., was made a C.I.E. on 9th Nov., 1901. And Hospital Apprentice Arthur Fitzgibbon, of the Bengal S.M.D., was awarded the V.C. on 13th Aug., 1861, for gallantry at the capture of the North Taku Fort, in China, on 21st Aug., 1860.

Many officers of the Military Sub-Medical Department have, from time to time, obtained commissions in the I.M.S., under the Company's rule by nomination, in more recent years by competition. Curiously, most of these officers have served in Madras, either in the subordinate or in the commissioned service, or in both. Apothecary Robert Nighland was appointed an acting Assistant Surgeon on 21st Aug., 1819, and posted as Civil Surgeon of Howrah. He died a year later, on 20th Oct., 1820, holding that appointment. Most of the Assistant Surgeons
temporarily appointed in India in 1817-19 were struck off from 31st Oct., 1820. John Bowron, born in Feb., 1799, entered the Sub-Medical Department as a medical pupil on 1st July, 1813, was appointed Apothecary on 7th Sept., 1816, promoted to Assistant Surgeon on 25th Dec., 1825, became Surgeon on 16th Dec., 1840, retired on 31st Dec., 1851, and died at Hove, Brighton, on 5th March, 1899, aged one hundred.

Among other instances may be given the following:--

Alexander Boggs, born in July, 1823; Assistant Apothecary, Madras, 13th Oct., 1843; resigned and went to Europe; served with the Turkish contingent in the Crimea in 1854-55; M.R.C.S., 1856; Assistant Surgeon, Madras, 29th Oct., 1856; served with the Sagar Field Force, in the Indian Mutiny, in 1858; received the Order of the Medjidie, 1858; resigned 31st Dec., 1861; became M.D., Paris, 1866, with a thesis *Notes et Reflexions Médico Chirurgicales sur les Phlegmasies de la Matrice*; died in Paris, 5th Oct., 1890.

John Shortt, born 26th Feb., 1822; Assistant Apothecary, Madras, 20th Jan., 1846; M.D., King’s College, Aberdeen, 1854, M.R.C.S. and L.S.A., 1854, also Member of the College of Veterinary Surgeons, Edinburgh, 1854; M.R.C.P., London, 1859; Assistant Surgeon, Madras, 20th Sept., 1854; Surgeon, 20th Sept., 1866; Surgeon Major, 1st July, 1873; retired 12th Feb., 1878; died at Yercaud, 24th April, 1889. Dr. Shortt was one of the first to experiment with the poisons of Indian snakes. He was also a voluminous writer, chiefly on agricultural subjects. A list of his works is given in Chap. XXIX, *Other Extra-professional Work*.

James Keess, born 3rd Feb., 1820; Assistant Apothecary, Madras, 11th Sept., 1848; M.R.C.S., 1855; M.D., Marischal College, Aberdeen, 1856; L.R.C.P., London, 1856; Assistant Surgeon, Madras, 4th Aug., 1856; Surgeon, 4th Aug., 1868; Surgeon Major, 1st July, 1873; Principal, Medical College, Madras; retired, 1884; died at Stuttgart, 29th Dec., 1900.

Daniel Robert Thomson, Assistant Apothecary, Madras, 25th April, 1855; M.D., St. Andrews, 1860; M.R.C.S., 1861; Assistant Surgeon, Madras, 1st April, 1867; Surgeon, 1st July, 1873; C.I.E., 1st Jan., 1879; Surgeon Major, 1st April, 1879; retired, 14th May, 1888; died 12th July, 1913.

The first, and so far the only I.M.S. officer, who had served in
the Sub-Medical Department, to attain administrative rank, is Colonel Patrick Hehir, promoted to that rank on 25th March, 1912.

Previous to about the year 1880, Honorary Commissions as Surgeon, and in a very few cases as Surgeon Major, were occasionallly conferred on some of the senior officers of this Service. Instances of the latter rank being given are the late Surgeon Major T. Briscoe, for many years Civil Surgeon of Kuch Bihar, and Surgeon Major R. E. Wrafter, who served in the Panjab war, and was afterwards for twenty years a Civil Surgeon in the Panjab. He died at Dehra Dun in March, 1911. As stated above, honorary rank as Captain and Lieutenant respectively was in 1894 bestowed upon all Senior Assistant Surgeons. In a few instances the rank of Major has been granted, e.g. to Major T. H. Hill, C.I.E., who got that rank on 10th March, 1892, and retired on 1st Nov., 1900; and later, to R. H. Dolby and L. A. H. Clerke.

The following Royal Warrant, dated 26th Sept., 1911, published in the Gazette of India of 18th Nov., 1911, No. 970, makes the rank of Major attainable after fifteen years’ commissioned service.

"Whereas we have deemed it expedient to alter the rank and designation of the senior officers of the Indian Subordinate Medical Department, our will and pleasure is that our warrant of March 12th, 1894, be hereby cancelled, and the commissioned grades in the Indian Subordinate Medical Department shall hereafter be as follows:—

"1. Senior Assistant Surgeon with the honorary rank of Lieutenant.
"2. Senior Assistant Surgeon with the honorary rank of Captain.
"3. Senior Assistant Surgeon with the honorary rank of Major.
"Promotion to the grade of Senior Assistant Surgeon with the honorary rank of Lieutenant or Captain shall be made according to the regulations governing such promotion.
"Promotion to the grade of Senior Assistant Surgeon with the honorary rank of Major shall not ordinarily be made until after fifteen years’ service in the commissioned grade. Senior Assistant Surgeons shall enjoy the precedence and other advantages attaching to their honorary military rank. They shall have authority under the Medical Officers to command members of their own department, hospital attendants, patients in military hospitals, and such warrant officers, non-commissioned officers, and men as may be attached thereto (without their own officers) for hospital duty. Given at our Court at Balmoral this 26th day of September, 1911, in the second year of our reign."

The strength of this Service, as shown in the Indian Army
List of Jan., 1913, was 695, of whom 231 were seconded for civil employment. They were graded as follows:—

Senior Asst. Surgeon and Hony. Captain . 47 (of whom seconded 23)
   "    " Hony. Lieut. . 54 (          ) 34
First Class Asst. Surgeon, ranking as Conductor, 61 (          ) 31
Second "    "    " Sub-Conductor, 250 (          ) 58
Third "    "    "        " 130 (          ) 82
Fourth "    "    "        " 153 (          ) 3

Totals 695 (          ) 231

One officer in civil employment, included in the first grade, has the honorary rank of Major.

B.—The Civil Sub-Medical, or Provincial Medical Department.—The first attempt at the foundation of a Civil Sub-Medical Dept. appears to have been made in 1833. In Bengal G.O. of 13th Sept., 1833, was published a scheme for the training of a certain number of the best native doctors in the army to form a superior class, with the designation of Sub-Assistant Surgeon, and with rates of pay from Rs.50 to Rs.100 a month, rates much higher than those at the time attainable by the ordinary members of the Service. The G.O. states that the men thus promoted might hope to attain to independent charge of the smaller civil stations. Nothing seems to have come of this scheme, and it was almost immediately superseded by the more ambitious design of training men in the new Medical College, opened in 1835.

"Fort William, Sept. 13th, 1833. With a hope of rendering a portion of the native doctors educated at the Medical Institution more efficient, and the purpose of affording to all a motive for acquiring a more profound knowledge of medicine and surgery than they now attain, the Right Hon. the Governor General in Council is pleased to create a higher grade of native medical officers, to be distinguished from the ordinary class by the designation of Sub-Assistant Surgeons, and by the receipt of a higher rate of pay.

"Native medical officers of the superior grade will be allowed, eventually, when a sufficient number may be duly qualified, to such an extent as the public service may seem to require; the pay of the grade will be from Rs.50 to 100 per mensem, according to the situation and merits; but promotions will not be made at once, nor according to seniority, but as qualified individuals can be found, and in the first instance will be deferred for twelve months, with the view of affording to every native doctor of the existing educated class an opportunity of qualifying himself for the higher one.

"Each candidate will be required to pass an examination before a committee composed of at least one member of the Medical Board, and
such other medical officers as the Board may select; and the scale of attainments to be required will be such as to qualify him for the independent charge of a gaol-hospital, or even of a small detached civil station."

An article in the *India Journal of Medical and Physical Science*, edited by F. Corbyn, for 1836, (p. 543), states that the Medical Board have suggested to Government a plan for organising a Civil Sub-Medical Department. The foundation of the Medical Colleges, those of Calcutta and Madras in 1835, and that of Bombay a little later, gave the opportunity of forming such a department, by educating native students of medicine up to a much higher level than had been attempted by the previous schools for native doctors. Such a school for native doctors had been opened in Calcutta in 1822. It was transferred to the new Medical College in 1839.

The first graduates of the Calcutta Medical College, four in number, qualified in February, 1839, and soon obtained appointments in the new hospitals which had been opened in the mofussil during the preceding decade. As an instance, Babu Badan Chander Chaudhri, who was one of the first batch of students who entered the Medical College in 1835, though not one of the first batch to qualify in 1839, was appointed on 23rd Feb., 1842, to the Imambara Hospital, Hughli, which had been opened in 1836.

Bengal G.O. of 16th July, 1839, ordered that the native medical students newly appointed from the Calcutta Medical College should be designated Sub-Assistant Surgeons.

Bengal G.O. of 5th July, 1848, quotes extracts from a Mily. Letter from Court, No. 6 of 7th March, 1848, on the medical establishment of the Bengal Army.*

Para. 16, which concerns the Civil Sub-Assistant Surgeons, is as follows:—

"The number of Native Sub-Assistant Surgeons it is proposed to increase from 34 to 56. The increase to 56 has our sanction."

At the present day, the strength of this Provincial Medical Service, of Civil Assistant Surgeons, throughout India, is not less than five hundred.

In Jan., 1849, the following regulations for the Service of Civil Sub-Assistant Surgeons were published in the *Gazette of India.*

* Paras. 6 to 11 of this letter are quoted in Chap. XVII, *Rank*; and paras. 12 to 16 in Chap. XIV, *Strength from time to time.*
THE SUBORDINATE MEDICAL SERVICES

"Orders by the Honourable Deputy Governor of Bengal. Rules for regulating the promotion and increase of allowances of Sub-Assistant-Surgeons."

1. Students of the first Class of the Medical College of Bengal, in obtaining the diploma of the College, shall, if they desire it, be admitted to the Public Service in the Rank of Sub-Assistant-Surgeon.

2. Sub-Assistant-Surgeons shall be classed in three ranks: the third rank to be the lowest or junior.

3. All Sub-Assistant-Surgeons shall serve seven years in each of the two junior ranks, excepting in those instances in which the merits of the individual, as described in Rule 12, shall be considered to entitle him to promotion to a Superior Rank at an earlier period.

4. On obtaining the diploma of the Medical College, the graduate will, by the orders of Government, be placed at the disposal of the Medical Board, for employment in the Public Service, and from the date of the Government order, his rank of Sub-Assistant-Surgeon of the third rank, shall be held to commence; but he will not be considered as having claim to his salary, as such, (that is, at the rate of 100 Rupees per month), until he has actually joined the Station to which he may be appointed, and entered on the duties assigned to him.

5. The following shall be the scale of allowances for each rank.

<table>
<thead>
<tr>
<th>Service Period</th>
<th>Allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seven years' service</td>
<td>Co.'s Rupees 100</td>
</tr>
<tr>
<td>Seven years and under fourteen</td>
<td>150</td>
</tr>
<tr>
<td>Fourteen years and upwards</td>
<td>200</td>
</tr>
</tbody>
</table>

6. Sub-Assistant-Surgeons, on completing each of these septennial periods, shall appear before a committee Composed of three Medical Officers, for Examination as to their continued proficiency in the practical branches of their profession: viz. Practice of Medicine, Surgery, and Midwifery; as to their acquaintance with its past and current literature; and with the later improvements or discoveries on all points connected with their duties.

7. The Sub-Assistant-Surgeon, on completing his septennial period, shall report the same to the Superintending Surgeon of the Division in which he may be serving, who will obtain the orders of the officer commanding the station itself, or the one nearest to it, where three resident Medical Officers may be available, for the assembly of the above Committee; the Superintending Surgeon himself serving on the Committee, at stations where, as at Dacca, for example, the number of Medical Officers present may be insufficient without him.

8. The Committee will forward their report to the Superintending Surgeon of the Division for transmission to the Medical Board, whose duty it will be to submit it for the orders of the Government.

9. Should the Report of the Committee be favourable, the promotion of the Sub-Assistant-Surgeon will be notified in Government Orders, and he will receive the salary of his new rank, from the day succeeding the date on which he may have completed his last septennial period.

10. Should the report of the Committee on the other hand be unfavourable, the Sub-Assistant-Surgeon will continue in the lower rank, and on its allowances, for the period for which the Committee may deem fit to remand him to his studies, and to the more diligent discharge of his duties.

11. Should the Sub-Assistant-Surgeon still fail, at the close of that
probationary period, to afford to the Examining Committee satisfactory proof of proficiency and diligence, his case will be submitted, in the manner prescribed in rule 8, for the consideration and orders of Government, as to his removal, or otherwise, from the rank of Sub-Assistant-Surgeon, or from the public Service.

"12. Mere Seniority will, in no instance, constitute in itself a claim to promotion, and it is distinctly to be understood that high attainments, whether the result of eminent talent or of laborious industry, persevered in for a reasonable time, will give such claim at any time intermediate to the septennial periods; and the Medical Officer under whom a Sub-Assistant-Surgeon may be serving, or the Superintending Surgeon himself, in case the Sub-Assistant-Surgeon may be holding an independent charge, shall consider it to be his duty to bring every instance of distinguished merit under the notice of the Medical Board, accompanied by a Statement of the particular circumstances, which he may consider as entitling the individual to early promotion, to enable them to judge of the expediency, or otherwise, of recommending the case to the favourable consideration of Government.

"The Hon'ble Court have ruled that Sub-Assistant-Surgeons shall not, at any time, be admitted to the benefit of the rules under which pensions are granted to the members of the Uncovenanted Service.

"J. P. Grant, offg. Secy. to the Govt. of Bengal."

The Secretary of State's Order No. 61, of 16th April, 1863, under which Uncovenanted Medical Officers were made eligible for pensions, appears to have included the Sub-Assistant Surgeons, who thus became a pensionable service.

Under the Royal Warrant of 10th May, 1873, the rank of Assistant Surgeon in the I.M.S. was abolished; and by the Govt. of India, Home Dept., Not. No. 132 of 25th March, 1874, the title of Assistant-Surgeon was bestowed upon those who had hitherto been Sub-Assistant Surgeons.

Under Govt. of India, Home Dept., Medical, Resolution No. 1141-50 of 22nd Aug., 1898, a new grade of Senior Assistant Surgeons was created, on Rs.300 a month; and orders were issued that a certain number of Civil Surgeoncies should be reserved for and filled by Civil Assistant Surgeons. The number was fixed at nineteen for the whole of India, distributed over the different provinces, but was increased in the following year to twenty-eight. Hitherto, however, so large a number have not actually been appointed.

A Govt. of Bengal Resolution, published in the C.G. of 6th March, 1912, introduced a time scale of payment for Civil Assistant Surgeons in the province of Bengal. The following extract is quoted from this Resolution.
"It was soon felt that the former concessions, though valuable to senior officers, did not sufficiently improve the pay in the first years of service. In 1908, memorials were received from Civil Assistant Surgeons urging the necessity of improving the conditions of service and suggesting certain methods of doing so. Orders have since been passed on all the other suggestions, but the principal complaint, viz. the alleged inadequacy of the pay, has been under consideration, and the question has now been finally decided by the Government of India and the Secretary of State. In the place of the existing scale of pay a timescale has been sanctioned, and the two scales are compared below:

### New Scale now sanctioned.

<table>
<thead>
<tr>
<th>Existing Scale.</th>
<th>Years of service in the Assistant Surgeon's Department</th>
<th>Rate of</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Rs.</td>
</tr>
<tr>
<td>Third grade, under seven years' service, Rs. 100 a month.</td>
<td>0-2</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
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<td>4</td>
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<td></td>
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<td>6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Second grade, under fourteen years' service, and after passing a professional examination, Rs. 150 a month.</td>
<td>9</td>
<td>170</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10</td>
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<td></td>
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<td>11</td>
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<td>12</td>
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<td>13</td>
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<tr>
<td></td>
<td></td>
<td>14</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>First grade, after fourteen years service, and after passing second professional examination, Rs. 200 a month.</td>
<td>16</td>
<td>240</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17</td>
</tr>
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<td></td>
<td>18</td>
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<td>19</td>
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<td></td>
<td></td>
<td>20</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>Senior grade, selected from first grade without examination, Rs. 300 a month.</td>
<td>22-24</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Ten per cent. of the total cadre to be in these two grades, which are to be filled by selection on merit alone from officers having more than fourteen years service.</td>
<td>300</td>
</tr>
<tr>
<td>Civil Surgeons, selected from senior grade, Rs. 350-30-500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

"In future, after two years' service, Civil Assistant Surgeons in Bengal will receive an annual increment of Rs. 10 until they reach the pay of Rs. 300 a month; but the passing of examinations after 7 and 14 years' service is still a condition precedent to the drawing of any further increment. Above the pay of Rs. 300, there will be two grades on Rs. 325 and Rs. 350, ordinarily limited to 10 per cent. of the service and filled by selection from all officers who have completed 14 years' service. In addition, the appointments to Civil Surgeoncies, eventually seven in number in the Province, as at present constituted (i.e. before 1st April, 1911) on a pay of Rs. 350-30-500 will still be open to members of the service.

"These orders will have effect from the 1st April, 1912."
The Civil Assistant Surgeons, from the first, were recruited and organised provincially, *i.e.* in separate cadres, one for each province.

A few members of this service have subsequently entered the I.M.S., either by nomination, before 1860, or competition.

It will be seen that, except for the establishment of their right to pension, the creation of the grade of Senior Assistant Surgeon, and the newly introduced time scale of pay in Bengal, the Service of Civil Assistant Surgeons stands exactly where it did when it was first created; over sixty years ago; although, in the interval, the standard of medical education has greatly advanced, and the pay of almost every Service in the country has been increased.

The epithet *Subordinate* is quite out of place, when applied to this Service, and should be replaced by the title *Provincial*. They stand in exactly the same relation to the Medical Department that Deputy Magistrates fill to the Executive, Sub-judges and Munsiffs to the Judicial, branches of the Indian Civil Service.

C.—The Military Hospital Assistants.—We have seen that a native medical staff, somewhat similar in status to the present Hospital Assistants, existed a century and a half ago, in the "Black doctors" attached to the native troops; also that, by the end of the eighteenth century, they appear to have established a claim to pension.

A school for training native doctors was established in Calcutta by G.O.G.G. of 21st June, 1822, published in the C.G. of 22nd June, 1822. This G.O. consists of 39 paragraphs, and fills two and a half columns of small print in the *Gazette*; it is, therefore, far too long to quote in full. It may be summarised as follows:—

(Para. 4). Twenty students were to be admitted, vacancies to be filled up as they occurred. (Para. 5). Students must be able to read and write Persian or Nagri, and must be between the ages of 18 and 26. (Para. 7). Sons of native doctors to have preference for admission. (Para. 8). Students to be regularly enlisted as soldiers, and to succeed to vacancies on the establishment of native doctors as they occurred, in the Army or in the Civil Dept. Period of enlisted service to be fifteen years, from date of leaving the school, after which they might demand discharge, in time of peace. (Paras. 9–10). Duties of Supt., instruction of students, preparation of professional manuals in the vernacular, correspondence. (Para. 11). The school to be under the Medical Board. (Para. 18). Students to be attached to the Presidency General Hospital, the King’s Hospitals, the Native Hospital, and the General Dispensary, for practical work, as convenient. (Para. 23). The Medical Board may dismiss
students, for good cause. (Para. 26). When the Supt. considers a student sufficiently qualified, he will certify the same to the Medical Board, who will grant a certificate to the student, and appoint him as a Native Doctor upon the occurrence of a vacancy. (Para. 27). Rupees eight per month allowed to each student for clothing and maintenance. (Para. 24). Pay of native doctors educated at the school to be higher than that of those previously serving.

<table>
<thead>
<tr>
<th>Old Scale, Rs.</th>
<th>New scale, for school men, Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Garrison or Civil Station</td>
<td>15</td>
</tr>
<tr>
<td>On service</td>
<td>20</td>
</tr>
</tbody>
</table>

(Para. 30). Pensions to be granted to native doctors disabled by wounds or by disease contracted on duty. (Para. 31). Scale of pensions.

- With less than seven years' service . Rs.7 per month.
- Seven to fifteen years' Military . One-third field pay.
- Do. Civil . One-third Garrison pay.
- After fifteen years' service . Rs.10 per month.
- After twenty-two years' service . Full pay.

(Para. 33). Native doctors not to be dismissed except by courtmartial. (Para. 34). All are liable to military service, whether serving in military or civil department. (Para. 35). Present native doctors are not affected by these rules, except that those who are under the age of 26 may apply for transfer to the school. (Para. 36). Salary of Superintendent, Rs.800. (Para. 39). Surgeon James Jameson appointed Supt.

Jameson died in Calcutta in the following year, on 20th Jan., 1823, and was succeeded by Surgeon Peter Breton. The school was transferred to the new Medical College in 1839. In 1852 a Bengali Class for Native Doctors was started at the College. These classes were removed to the new Campbell Medical School, at Scaldah, Calcutta, in November, 1873. This school, however, has always educated native doctors for civil, rather than military, employment; the requirements of the Army being supplied chiefly from the Medical Schools at Agra, opened in 1853, and Lahore, opened in October, 1860.

Bengal G.O. of 24th May, 1832, published in the C.G. of 9th June, orders that native doctors are not to be submitted to the degradation of punishment by flogging, to which, as enlisted men, they were then liable; but that dismissal is to be substituted as a punishment, in cases of such importance as to require so severe a penalty.

"Headquarters, Simla, May 24th, 1832. An instance having lately occurred of a native doctor who was found guilty of intoxication, being sentenced, by a regimental court-martial, to be flogged, the Commander-in-Chief desires it may be understood that he does not consider corporal punishment as a fit sentence for a class of persons whose respectability
His Excellency is desirous to maintain. Where the conduct of a native doctor may be found such as to degrade him in the eyes of the regiment, or to render him unworthy of the confidence of the Surgeon, His Excellency is pleased to authorize a regimental court-martial to award, as a punishment, dismissal from the service, as only men of good character will be allowed to remain in so respectable a situation.

"In all such cases, the proceedings of the court-martial are to be transmitted to head-quarters for the approval of the Commander-in-Chief."

The Medical Regulations of 1851 give the pay of native doctors of the late Medical Institution, as follows—

Pay in garrison, Rs.20; in field, Rs.25, on appointment.
Ditto ,, 25 do. ,, 30, after seven years' service.

The Military Sub-Medical Department was divided into two classes, the Apothecary class and the Hospital Assistant class, by G.O.G.G. No. 550 of 5th June, 1868. The latter class was organised in four grades: first, second, and third class Hospital Assistants, and medical pupils, the last youths under training for the service.

In G.O.G.G. No. 152 of 1st Feb., 1870, were published rules for the regulation of the Hospital Assistant Service. All "passed native doctors," Hospital Assistants, and equivalent grades, were eligible for transfer to the establishment of Hospital Assistants, and were graded, in the first place, according to their standing at the time. "Unpassed native doctors" were to continue to bear that designation, and were to be eligible for civil subordinate duties only. All future appointments to the establishment were to be made from among the passed medical pupils, and all were liable for military duty, even if chiefly employed in the civil department.

This service was reorganised, on considerably increased rates of pay, by Clause 85 of I.A.C. of 1900. The grade of Sub-Hospital Assistant was abolished. The Senior Hospital Assistants were granted commissions as such, the first class ranking as Subadars, the second class as Jamadars. All Hospital Assistants were granted warrant rank, but junior to all Military Assistant Surgeons. The pay of the various grades was fixed, with extra allowances for being qualified in English, as follows:—

<table>
<thead>
<tr>
<th>Grade</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Hospital Assistant 1st class, pay 70, English qual. 30</td>
<td>Rs.</td>
</tr>
<tr>
<td>&quot; &quot; &quot; &quot;</td>
<td>2nd</td>
</tr>
<tr>
<td>Hospital Assistant</td>
<td>1st</td>
</tr>
<tr>
<td>&quot; &quot; &quot; &quot;</td>
<td>2nd</td>
</tr>
<tr>
<td>&quot; &quot; &quot; &quot;</td>
<td>3rd</td>
</tr>
<tr>
<td>&quot; &quot; &quot; &quot;</td>
<td></td>
</tr>
</tbody>
</table>
In April, 1910, the designation of Hospital Assistant was changed to that of Sub-Assistant Surgeon.

"With effect from May 13th, 1912, the Government of India sanctioned the following enhanced rates of pay for military sub-assistant surgeons:—

**Senior Sub-Assistant Surgeons.**
First class, ranking as Subadar . . . Rs. 110
Second class, ranking as Jamadar . . . 90

**Indian Warrant Officers.**
Sub-Assistant Surgeons, first class . . . Rs. 70
Sub-Assistant Surgeons, second class . . . 50
Sub-Assistant Surgeons, third class . . . 35

The above rates are inclusive of the extra pay for an English qualification."

In 1912 the strength of the Sub-Assistant Surgeon branch of the I.S.M.D. was fixed at 871, distributed as follows:—

<table>
<thead>
<tr>
<th></th>
<th>Bengal</th>
<th>Madras</th>
<th>Bombay</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military appts., including reserve</td>
<td>469</td>
<td>95</td>
<td>175</td>
<td>740</td>
</tr>
<tr>
<td>Civil and miscell. appts., including reserve</td>
<td>116</td>
<td>15</td>
<td>1</td>
<td>132</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>585</td>
<td>110</td>
<td>176</td>
<td>871</td>
</tr>
</tbody>
</table>

The actual strength of this Service, as shown in the *Indian Army List* of Jan., 1913, was 883, distributed as follows. The numbers differ greatly from those sanctioned in 1912.

<table>
<thead>
<tr>
<th></th>
<th>Bengal</th>
<th>Madras</th>
<th>Bombay</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Sub-Asst. Surgeon, 1st Class</td>
<td>49</td>
<td>2</td>
<td>9</td>
<td>6/</td>
</tr>
<tr>
<td>do. do. 2nd Class</td>
<td>25</td>
<td>8</td>
<td>11</td>
<td>44</td>
</tr>
<tr>
<td>Sub.-Asst.-Surgeon, 1st Class</td>
<td>217</td>
<td>70</td>
<td>34</td>
<td>321</td>
</tr>
<tr>
<td>do. do. 2nd Class</td>
<td>139</td>
<td>40</td>
<td>35</td>
<td>214</td>
</tr>
<tr>
<td>do. do. 3rd Class</td>
<td>129</td>
<td>34</td>
<td>84</td>
<td>247</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>550</td>
<td>160</td>
<td>173</td>
<td>883</td>
</tr>
</tbody>
</table>

Of the whole number of 883, only twenty-nine seem to be seconded for civil employment; twenty-five in Bengal, and four in Bombay; none in Madras.

**D. The Civil Hospital Assistants.**—The formation of this Service was ordered in Govt. of India, Home Dept. (Medical), Resolution dated 9th Jan., 1878; published in *Circs. of the Surgeon-General, India*, No. 140 of 11th March, 1878.
Prior to this date, all subordinate civil duties had been performed by military native doctors and Hospital Assistants, whose services were only lent to the Civil Governments, and who were at all times liable to recall to military duty.

Under the above orders a separate cadre of Civil Hospital Assistants was organised for each province. Military Hospital Assistants then serving were allowed to volunteer for transfer to any province in the new civil branch. "Local native doctors" were to be gradually absorbed into the new service.

The Civil Hospital Assistants were graded in three classes, as follows:

<table>
<thead>
<tr>
<th>Class</th>
<th>Years of Service</th>
<th>Pay</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd class</td>
<td>under seven</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>years' service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd</td>
<td>seven to</td>
<td>25</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>fourteen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st</td>
<td>over fourteen</td>
<td>35</td>
<td>20</td>
</tr>
</tbody>
</table>

The pay and prospects of this Service were much improved in 1901, by Govt. of India, Home Dept., Medical Resolution No. 1002-1014 of 4th July, 1901, which regraded the Service, with grades and pay as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Years of Service</th>
<th>Pay</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fourth grade</td>
<td>under five</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td></td>
<td>years' service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third grade</td>
<td>five to ten</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td></td>
<td>years' service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second grade</td>
<td>ten to fifteen</td>
<td>45</td>
<td></td>
</tr>
<tr>
<td></td>
<td>years' service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First grade</td>
<td>sixteen to</td>
<td>55</td>
<td></td>
</tr>
<tr>
<td></td>
<td>twenty years'</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior grade</td>
<td></td>
<td>70</td>
<td></td>
</tr>
</tbody>
</table>

Promotion from the second to the first, and from the first to the senior grade, is by selection; to the third and second grades by examination. Qualification in English is necessary before entering the Service.

From the beginning of 1910 a revised scale of pay was introduced, giving a further increase, as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Pay</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fourth grade</td>
<td></td>
<td>30</td>
</tr>
<tr>
<td>Third</td>
<td></td>
<td>45</td>
</tr>
<tr>
<td>Second</td>
<td></td>
<td>55</td>
</tr>
<tr>
<td>First</td>
<td></td>
<td>65</td>
</tr>
<tr>
<td>Senior grade, second</td>
<td></td>
<td>80</td>
</tr>
<tr>
<td>class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;</td>
<td>&quot;&quot;</td>
<td>100</td>
</tr>
<tr>
<td>first</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Promotion from the fourth to the first grade to be by seniority, subject to passing examinations; from the first to the senior grade, and within that grade, by selection. The numbers in the first class of the senior grade to be restricted to two per cent., and in the second class to ten per cent., of the total strength.
From April, 1910, the title of Sub-Assistant Surgeon was bestowed upon the Civil Hospital Assistants, instead of their former title, with its almost menial significance.

There is probably no service in India in which so much difference exists between the best and the worst members as that of the Civil Hospital Assistants. It would greatly improve the standard of the whole class if arrangements were made under which the best individuals might, after further study, qualify for, and be promoted to, the Assistant Surgeon class.

E.—The Civil Apothecaries.—The Civil Apothecary class, intermediate between the Civil Assistant Surgeons and the Civil Hospital Assistants, exists in Madras only. The formation of this class was ordered in Madras G.O. No. 1001 of 7th May, 1875, and the first batch of students educated for it passed out in 1878. There were five grades, paid respectively Rs.50, 75, 100, 125, and 150, with an additional Rs.50 for charge allowance. This Service was recruited for a few years only, being abolished by Madras G.O. No. 1079 of 13th May, 1884, and has now almost died out, having been replaced by the Civil Hospital Assistant, now Civil Sub-Assistant Surgeon class.
CHAPTER XXVIII

SURGEONS AS CIVIL AND POLITICAL OFFICERS

"In utrumque paratus."

Virgil, Aeneid, Book II. line 61.

It has always been the practice of the Indian Government to utilise the services of specially selected officers in filling posts for which the men chosen have shown special fitness, without consideration of the Service, civil or military, to which they originally belonged. In carrying out this policy, the "Commissions" of the non-regulation provinces were officered from the Army in larger numbers than from the Civil Service. The Political Department, especially, has always drawn its members from all sources. While chiefly recruited from the I.C.S. and Army, it has employed, from time to time, officers from the Medical Services, the Police, and the Public Works Department.

When, after the Mutiny, the fate of the I.M.S. was trembling in the balance, when its retention as a separate Service or amalgamation with the A.M.D. was under discussion, Sir James Outram, who was Military Member of Council in India from April, 1858, to July, 1860, contributed to the discussion a Minute, dated 2nd Jan., 1860, from which the following extracts are taken.*

From Appendix to Sir James Outram's Minute of 2nd Jan. 1860.

"The boons I crave for the Medical Service are, in my opinion, but a small instalment of what is due to a body of highly-educated and accomplished English gentlemen, distinguished for their devotion to their duty, their philanthropic zeal, and their high moral character—a body of men to whom almost every member of the Civil and Military Service is indebted for his own life saved, or his health restored, or for like blessings bestowed on those most near and dear to him. I regard our treatment of the Indian

Medical Service as regards its 'relative rank,' its pay rules, the distribution to it of honours, and its exclusion from the Political and Administrative Department, as unworthy alike of our age and nation. But in now proposing to open freely to that body, the Civil, Political, and Miscellaneous offices of the State, I do so exclusively on considerations of State policy.

"The preliminary education of medical men places them on a level, in respect of intellectual accomplishments, with the average of those with whom it is our good fortune to recruit our covenanted Civil Service—and above the average of our purely military officers; and their professional education gives them special qualifications for aiding in developing the resources of the country, and in ameliorating the condition of its inhabitants. They are necessarily acquainted, to a greater or less extent, with Geology, Botany, and other branches of Natural History. To their researches do we owe most, if not all, the economic discoveries in Natural History by which the East has of late years enriched the industrial resources of the world. And it is superfluous to indicate the many benefits which a knowledge of Natural History will enable a district officer to confer on the people of his district. As superfluous is it to dwell on the vast importance to the people of this country, amongst whom an overworked civil surgeon can rarely travel, that their district officers should have that knowledge of the laws of health and of practical sanitary economics which is demanded of every candidate for a Medical Diploma. The knowledge of Medical Jurisprudence, possessed by every medical man, would be of incalculable value to district officers in the detection and prevention of crime, enabling them to arrive at definite and correct conclusions in very many cases wherein from want of such knowledge doubt must under existing arrangements necessarily exist in their minds to the detriment of the interests of justice; and, as in the case of the doubtfully insane, to the danger of life and property, and the prolonged sufferings of the helpless. And, to conclude a series of illustrations which might easily multiply, I need but glance at the boon that would be afforded to the villages in the more remote parts of the country by the occasional passage amongst them of gentlemen competent to afford them medical aid—to give sight to the blind, hearing to the deaf, and ease to the suffering—who, but for the advent amongst them (for magisterial and fiscal purposes) of 'a kind physician, skilled their wounds to heal,' might for ever seek relief in vain from the local native practitioner.

"Believing as I do that medical officers are admirably qualified for civil executive duties, and that their extensive employment in such duties would be advantageous to the material and social interests of the people, I am not less satisfied that it would tend to the elevation and improvement of the Medical Service itself. In the medical, as in all professions, there are 'round' men, whom a mistake on their own parts, or an illjudged selection on the part of their parents or guardians, have thrust into 'square holes,' men who, with little natural taste or aptitude for the healing art, have high qualifications for the performance of other duties; and it is, I conceive, eminently desirable that men of this description should not only be permitted, but invited, to transfer themselves from an uncongenial to a congenial sphere. Such a transposition is effected in England by the existing arrangements and demands of Society; in India it can only be effected through the interposition of Government. And by encouraging
it, the Indian Government would not only strengthen their civil establish-
ment, but greatly add to the professional prestige of their Medical Corps. 
Would it have promoted the welfare of the sick, the political interests of 
England, or the reputation of the Indian Medical Service, had Sir John 
McNeill been compelled to remain in medical charge of a zillah instead of 
representing his country in Persia, or had D'f Lord been kept attached to 
a regiment of Native Infantry? Were the years during which Horace 
Hayman Wilson was condemned to feel pulses and examine tongues 
because he was an 'Assistant Surgeon' considered as profitable to 
himself, his patients, or the world at large, as they would have been had 
his marvellous philological genius been provided with the full scope and 
free development that a Professorship would have afforded? Did not the 
public voice of England justly ridicule and condemn the persistent con-
finement to professional duties of the accomplished brother of Sir Alexander 
Burnes, who, but for the real experience of our Service, might have achieved 
a name as great as that bequeathed by his illustrious relative? Not five 
years have elapsed since very cutting strictures were made in the medical 
periodicals on the regulations which compelled Lord Elphinstone—whose 
constant and anxious effort it is to put 'the right man in the right place' 
—to keep Liebig in charge of a native hospital, and the son of the ornitho-
logist Gould—a man hardly less versed in Ornithology than his father—
in medical charge of a Government steamer, principally employed in con-
veying troops and commissariat stores between Bombay and Kurrachi.

"By admitting medical officers to civil and miscellaneous posts as 
freely as our military officers, no additional cost would be incurred, and no 
embarrassment would be occasioned to the operations of the Medical 
Department. For when it became known that, through that Department, 
the general service of the State could be entered, and that, by the elimina-
tion from its effective strength of officers having administrative tastes 
and aptitudes, departmental promotion was accelerated, we should not 
only find an abundance of candidates presenting themselves at the com-
petitive examinations in London, but candidates of even a higher calibre 
than those we now secure. For, seldom as I look into medical periodicals, 
I am well aware that the gentlemen now in our Service do not send home 
encouraging reports of the manner in which we treat them. And at the 
recent competitions in London, but forty-three competitors appeared for 
upwards of fifty appointments. By opening to them the posts I have 
named, and treating them in reference to promotion, in the same spirit of 
liberality as the medical officers of the Royal Army have been treated, we 
should make the Local Medical Service as popular and as highly esteemed 
as the Local Military Service."

The suggestions made in Outram's minute, as to the frequent 
employment of medical officers on executive duties, and their 
transfer from the Medical Department to other branches of the 
public service, no doubt sound strange nowadays. For over 
thirty years past no medical officer has been serving as a regular 
member of any of the "Commissions" which, including military 
and uncovenanted officers as well as members of the Indian Civil 
Service, administer the non-regulation provinces; and for over a
dozen years there has been no medical officer in the ranks of the Political Department, other than those employed on professional work. But twelve and thirty years are short periods in the life of a Service. It is, no doubt, improbable that medical officers will ever again serve in the Commissions; more especially as the general tendency of the time is to restrict such employment more and more to the Covenanted Civil Service. The Bengal Commission, indeed, has vanished altogether; and the places which, thirty years ago, were held by fully a dozen military and uncovenanted officers, are now all filled by the I.C.S. The only medical officer in this Commission, William Henry Hayes, after serving in it for twenty years, retired on 16th April, 1878. The officers of the I.M.S. enter that Service for purely medical work, using the word medical in its wider sense, as including various branches of science. Cases in which an officer shows evident aptitude for work other than that for which he has been specially trained must always be rare, though from time to time they do occur. Military officers in India have attained the highest distinction in civil administration, notably Sir John Malcolm and Sir Henry Lawrence. Even stranger is the fact that a young civilian, of little account in his own Service, should rapidly have developed into the most brilliant soldier, the most successful General, the foremost Statesman, of his time in India. Yet this is exactly what was done by Clive, a junior Writer. The I.M.S. has never had in its ranks any officer who has attained to the fame of Malcolm or of Lawrence, much less to that of Clive. Yet it is surprising how many of its members have been employed on work, administrative, executive, or political, foreign to their proper sphere of duty; and how successful, on the whole, have been the officers so employed. Two, indeed, John Holwell and John McNeill, attained no small measure of honour and reputation. To give a short account of the careers of some of the officers thus employed on extra-professional work is the purpose of this chapter.

The employment of medical officers in political and administrative duties, entirely foreign to their profession, was not introduced into India by the English, but was previously the practice of the Mogul Emperors. When the Company first began to trade with India, the post of Viceroy of Guzrat was held by Muqarrab Khan, who earlier in life had been a Surgeon, under the name of
Hassu, and had been advanced by Jahangir to higher employment on account of his professional skill. Muqarrab Khan, while Viceroy of Guzrat, was sent on an embassy to Goa, and while there is said to have become a Christian, but the story is probably a myth. He was superseded in Guzrat by Prince Khurram, afterwards the Emperor Shah Jahan, and transferred to the Government of Bihar, and three years later to that of Agra. In the beginning of Shah Jahan's reign he was pensioned, and died some years later at the age of ninety.* And in 1635 a Persian named Hakin Masih-al-Zaman, who had for many years served Jahangir and Shah Jahan as a physician, was appointed Governor of Surat.†

Not many years after the foundation of the Company, mention is made of the employment of medical officers in non-professional duties. In 1614, one Samuel Saltingston was appointed factor and Surgeon at Bantam.‡ On 7th Dec., 1626, George Turner was sent from Surat to Persia, to act either as factor or surgeon.§ Robert Surtees was steward and surgeon at Surat in 1636.|| In 1703, Edward Jarry, Surgeon at Surat, was appointed to be steward in addition to his own duties.¶

Two doctors, Edward Bulkley and Thomas Faucet, were transferred from the Medical to the Civil Service at Madras, in the early part of the eighteenth century, and both met with considerable success in their new sphere, as described in Chap. VII, *Early History, Madras and the Coast.* The career of John Holwell has filled a chapter to itself.

John William Wye, who entered the Bombay Service in 1790, appears to have served as a Civilian in Malabar, from the following extract from a Bombay Public Letter of 5th Feb., 1803, para. 112.

"Dr. Wye of the Medical Establishment previous to his departure for England some time ago advised his intention of addressing the Court on the treatment he had received from the Madras Government. Observe in respect to him that his knowledge of the Language and experience in the affairs of Malabar early recommended him to the employment of a Translator, and afterwards to be a Collector in that Province."

‡ Sainsbury, *Court Minutes of East India Co.*, Vol 1, p. 332, No. 785.
Wye went on furlough in Jan., 1801, and retired without rejoining on 21st Nov., 1804, so spent little more than ten years in India. He died at Hartford, Huntingdon, a few months later, on 26th June, 1805. An obituary notice in the Gentleman's Magazine for 1805, Vol. II, states that he had served as Judge and Collector in the Ceded Countries, i.e. in Malabar.

Another Bombay Surgeon, James Wilson, was employed on similar duties. Dodwell and Miles give the date of his commission as Assistant Surgeon as 1788, his appointment, however, is notified in para. 9 of a Mily. Letter to Bombay, dated 28th April, 1791. In a Mily. Letter to Bombay, dated 5th Jan., 1810, para. 103, the Court write—

"M' Surgeon Wilson. He can have no claim to the benefit of the Medl Regns being employed in a line foreign to his profession."

The East India Register shows Wilson's appointment as "Sub-collector of Revenue in Malabar." His departure for England on sick leave is reported in para. 8 of a Mily. Letter from Bombay, of 16th Oct., 1809. He died on furlough in England on 1st April, 1811.

Charles Chaston Assey, who entered the Bengal Service on 19th Sept., 1799, was for three years, 1814 to 1817, Chief Secretary to the Govt. of Java, while that island was under British rule. He died in Fort William on 21st March, 1821.

John Crawfurd, who joined the same Service on 24th May, 1803, was one of the most successful of the I.M.S. officers who have adopted a political career. In 1808 he was posted to Penang, and in 1811 accompanied the expedition to Java, which resulted in the reduction of that island. For the next six years, 1811 to 1817, he was in political employment in Java. From 1817 to 1820 he was on furlough, and from 1820 to 1823 was at the head of an Embassy from the Company to the Courts of Siam and Cochin China. In 1823 he succeeded Sir Stamford Raffles as Administrator of Singapur, and held that appointment till 1826, when he went on an Embassy to the Court of Ava. He retired on 12th July, 1827, when holding the post of Civil Commissioner of Pegu; and lived at home for over forty years more, dying at his house in South Kensington on 11th May, 1868. He was elected a Fellow of the Royal Society on 7th May, 1818. Crawfurd wrote several books on the countries of Further India, which
were for long the recognized authorities on the subject; *History of the Indian Archipelago*, three volumes, 1820; *Account of an Embassy to Siam and Cochin China*, 1828; *Journal of an Embassy to the Court of Ava*, 1829; *Grammar and Dictionary of the Malay Language*, 1852; and *A Descriptive Dictionary of the Indian Islands*, 1856.

Another Bengal officer, Andrew Murray, who joined as Assistant Surgeon on 20th Aug., 1811, was for some years in political employment in Java.

John McNeill attained to greater success than any other member of the I.M.S., having been employed as an Ambassador and honoured with the dignities of G.C.B. and Privy Councillor, the only officer of the Service who has ever received these honours. He was the third son of John McNeill, Laird of Colonsay, and was born in that island on 12th Aug., 1795. He graduated as M.D. at Edinburgh in 1814, at the age of nineteen, and entered the Bombay Army as Assistant Surgeon on 6th Sept., 1816. In 1818–19, he saw active service in the Baroda Field Force, in Cutch and in the Southern Konkan, and in 1819–20 in Persia. Towards the end of 1820 he was appointed medical officer to the Mission at Teheran, joining in Jan., 1821. In 1822 he went home, returning to Persia via St. Petersburg in 1823. At the close of the Russo-Persian war of 1826 he was employed by both parties in negotiating the payment of an indemnity by Persia to Russia, and was offered the Cross of St. Anne by the Czar, and the Lion and Sun by the Shah, but was not allowed to accept either. In 1830 he became Political Assistant to the Envoy; in 1833 he received the Lion and Sun. In 1834 he went home again, and on 10th Feb., 1835, was appointed Secretary to the Persian Embassy. On 11th June, 1836, he retired from the Company's service, and on 5th June, 1836, left England for Persia as Minister Plenipotentiary and Envoy Extraordinary from the Court of St. James to the Shah, presenting his credentials on 11th Dec., 1836. In January, 1839, he came home again, and on his arrival received the Grand Cross of the Bath, Civil Division. Returning again to Persia, he arrived in Sept., 1841, and left Persia for the last time on 7th May, 1842. In 1845, the Scottish Poor-Law Act was passed, and a Board of Supervision appointed, of which McNeill was made Chairman. He held this appointment for twenty-three years, till 1868. In 1855 he was sent to the Crimea as Special
Commissioner, to inquire into the working of the Commissariat and Transport departments in that campaign, and for his services there was offered a Baronetcy, which he declined, and was made a Privy Councillor. Oxford gave him the D.C.L. in 1857, and Edinburgh the LL.D. in 1861. He died at Cannes on 17th May, 1883.

Many, members of the I.M.S., probably many of his own contemporaries, have been far more successful than Sir John McNeill, as far as the mere accumulation of money goes. But none, we may fairly say, since William Hamilton, has done better service to his country. Certainly none has received higher rewards and honours. Yet, while he attained to high honours, and lived to extreme old age, Sir John’s life was marked by many private sorrows. He was thrice married. His first wife died two years after marriage, leaving one daughter, who also died in childhood. His second wife, who shared his joys and sorrows, his trials and success, for over forty-five years, predeceased him by fourteen years. Of the five children she bore him, four died in infancy and childhood. One daughter only, the youngest, reached maturity and married; she also died twelve years before her father.*

Josiah Harlan, an American, was appointed a temporary Assistant Surgeon on 1st July, 1824, and served in the first Burmese war. The Court of Directors insisting on the dismissal of all locally appointed Assistant Surgeons, he was struck off in 1827. He then took service under Ranjit Singh, the Lion of Lahore, King of the Panjub, from whom he received the rank of General, and the Governorship of the district of Gujrat. After serving the Lahore Darbar from 1828 to 1835, he quarrelled with Ranjit Singh, and left his employment for that of Dost Muhammad, Amir of Afghanistan, remaining in that country from 1836 to 1838, after which he returned to America. He was the author of A Memoir of India and Afghanistan, published in 1842. In this work he speaks of having in preparation another work, entitled Personal Narrative of General Harlan's eighteen years' Residence in Asia, but this work, apparently, was never published.

Surgeon Thomas Davies, who joined the Madras Service on 13th Aug., 1764, in a representation contained in the Madras

Mily. Cons. of 12th Aug., 1771, states that, after serving in the first Mysore war, he was appointed to be personal Surgeon to Haidar Ali and British Resident in Mysore, but that the project of his appointment to these posts was never carried out, Haidar in the end declining his services.

Graeme Mercer, who was appointed Assistant Surgeon, Bengal, on 18th Jan., 1780, and became Surgeon on 21st Sept., 1804, in the latter year was appointed Agent to the Governor General at Farakhabad. In 1806 he was posted as Resident at Scindia's Court, and held that position till 1810, when he went on furlough. During the greater part of this time, from 1807 on, the Resident's escort was commanded by Captain, afterwards Colonel, Thomas Duer Broughton, author of the well-known work, Letters written in a Mahratta Camp, Murray, London, 1813. Though a medical officer himself, Mercer had a Residency Surgeon on his staff. This post was held by Henry Wise in 1807, and from 1808 to 1813 by Kenneth Macaulay, who died at Gwalior on 17th Oct., 1813. Mercer retired on 30th Oct., 1814, and died at Mavisbank, Midlothian, on 6th Oct., 1841. Broughton does not directly mention Mercer's name, but in the ninth letter mentions a Mr. M—, who was evidently a Surgeon, and in the thirty-first and thirty-second letters speaks of Mr. M—, the Resident. Probably Mercer is the man intended.

Archibald Campbell entered the Bengal Service on 8th May, 1827, and became Surgeon on 16th Jan., 1844. He held the post of Supt. of Darjiling from 1840 till his retirement on 8th Feb., 1862. When touring in Sikkim with Sir Joseph Hooker, they were seized by the Diwan of the Sikkim Raja, on 7th Nov., 1849, and kept in confinement at Tumlung till 9th Dec. Campbell was subjected to considerable indignities and illtreatment, but Hooker was not molested, and indeed would have been allowed to go, but refused to leave Campbell. On 9th Dec. they were allowed to start for Darjiling, under the Diwan's escort as far as the Rangit, and reached Darjiling on 24th Dec. As a result of this outrage, the Government of India annexed the Sikkim Tarai, and the hills up to the Great Rangit river; and also stopped the annual subsidy of Rs.3000, formerly paid to the Sikkim Raja as rent for the site of Darjiling.

John Spencer Login, an Orkneyman, entered the Bengal army as Assistant Surgeon on 5th March, 1832, becoming Surgeon on 17th
April, 1848. He served in the first Afghan war, and was with D'Arcy Todd at Herat in 1839-40. He was then for some time Residency Surgeon at Lucknow, served in the Panjab campaign of 1848-49, and on the annexation of the Panjab became Postmaster General of the new province. Soon after he was appointed guardian and tutor to the Maharaja Duleep Singh, the late King of the Panjab, and held that post from 1849 to 1858, when his ward came of age. He was knighted on 14th Nov., 1854; retired, after spending several years in England in charge of Duleep Singh, on 15th April, 1858, and died at Felixstowe on 18th Oct., 1863. Sir John's younger brother, James Neil Dryburgh Login, who entered the Bengal Service on 6th May, 1842, after serving in the Sutlej campaign of 1845-46, became medical officer, and subsequently Political Assistant, in Nipal. While holding that post he died of cholera at Dinapur on 13th Nov., 1849.*

Percival Barton Lord entered the Bombay Medical Service on 23rd Nov., 1834. In 1836, he accompanied Captain, afterwards Sir Alexander, Burnes, on his commercial visit to Kabul, and visited Kunduz in 1837. When the Government of India determined to restore Shah Shuja to the throne of Kabul, in 1839, Lord was appointed one of the Political Assistants to Sir William Macnaghten, the Chief Political Officer. Lord came up to Kabul with the force from Peshawar, under Colonel Wade, in July, 1839, and served as A.D.C. to Wade at the forcing of the Khaibar Pass. He was then posted as Political Agent to Afghan Turkistan, at Kunduz, and passed the winter of 1839-40 in the caves of Bamian. He was killed in the battle of Parwan, where Dost Muhammad defeated Shah Shuja's forces, on 2nd Nov., 1840.

James Pattison Walker entered the Bengal army as Assistant Surgeon on 5th April, 1845, served in the Panjab campaign of 1848-49, and was present at the battle of Gujrat. Entering civil employ in the N.W.P. in 1849, he was Civil Surgeon successively of Hamirpur and Mainpuri, and in 1851 was appointed Superintendent of the Agra Central Jail, the first central jail opened in India, and served at Agra during the Mutiny. In 1858, the Indian Government resolved to establish a penal settlement for life convicts, chiefly mutineers, at Port Blair in the Andaman Islands, then a primeval forest. Walker was appointed the first Supt. of Port Blair, and organised the great convict settlement

* Sir John Login and Duleep Singh, by Lady Login; London, 1890.
there. Owing to the severity with which he dealt with an outbreak among the convicts, executing eighty-eight, he was removed from that post in 1859. He reached the rank of D.I.G. on 22nd June, 1872, retired on 22nd June, 1877, and died at Clacton-on-Sea on 14th Feb., 1906.

Henry Walter Bellew, after serving in the Crimea, entered the Bengal Medical Service on 14th Nov., 1855, and soon made a name for himself as an authority on the language, manners, and customs of the Afghans, and as a traveller. During the Mutiny he was with the Lumsdens at Kandahar; in 1871 he accompanied Sir R. Pollock's mission to Seistan, and in 1873 went with Sir Douglas Forsyth to Kashgar and Yarkand. He received the C.S.I. in 1873. In 1878–79 he served in the second Afghan war as Chief Political Officer at Kabul, but had to return home on account of ill health, being succeeded by Sir Lepel Griffin. After serving for five years as Sanitary Commissioner of the Panjab, he retired on 14th Nov., 1886; he died at Farnham Royal on 26th July, 1892.*

It was said of Bellew that his services on the frontier were worth a couple of regiments to the Government. This very high praise, however, has been bestowed upon more than one medical officer. Before Bellew's time, a similar remark was made about Charles Lindsay Cox, who entered the Bengal Army on 27th July, 1841, became D.I.G. on 22nd June, 1867, retired on 1st Dec., 1873, and died at Clifton on 23rd May, 1886. In much later times the same thing has been said, with equal truth, of Dr. T. L. Pennell, the famous frontier medical missionary, who died at Bannu of blood-poisoning, contracted in the performance of an operation, on 22nd March, 1912.

The *Indian Medical Gazette* for November, 1887 (p. 333), quotes from a letter addressed by General Sir Neville Chamberlain, G.C.B., to Dr. David Boyes Smith, Professor of Military Medicine at Netley, a tribute to the work of medical officers on the frontier, in almost exactly the words used above, except that no individual name is mentioned.

*You are right in supposing that I have expressed an opinion that the peaceful and civilizing influence of the work done in the dispensaries and by regimental surgeons on the frontiers of India, has been in political importance equivalent to the presence of some thousands of bayonets.

* For Bellew see also next Chapter, *Other extra-professional work.*
I have held this opinion, because no amount of military coercion or of purity of administration could have exercised the same pacifying effect on the heart of the nations that has been produced by the sympathetic care and successful treatment of diseases, many of which had been previously considered incurable. Throughout my service on the frontier of India, I have never known a time when the halt, the lame, and the blind have not flocked into our cantonments or into our camps in search of relief from suffering; and, however distasteful may have been the sight of our soldiers, or, however galling the idea of subjection to British rule, the people have come with confidence from far and wide to seek medical aid. The fame of the English doctors has spread beyond our frontiers into the remotest hills and glens, and the difficulties overcome and sufferings endured in order to reach a medical officer might seem incredible to those unable to realize what it is to be living under conditions devoid of medical and surgical aid.

"Another humanizing and reconciling influence has been the careful and sympathetic treatment of the wounded enemy who have fallen into our hands, and the fact of their being liberated and sent back to their homes when cured.

"It is because of such unexpected philanthropy that, as conquerors, we hold a position in the minds of the people which would not otherwise be possible. The great question to be solved in the future is that of how to bridge over the chasm which separates the rulers from the ruled. The means of accomplishing this end may be mainly looked for in the sympathy to be created between the races; and I think the medical profession will always have it in their power to give most important aid towards the attainment of this object."

A somewhat similar tribute to the value of the services of the Army Surgeon was paid, long before the British or even the Roman Empire existed, by no less a poet than Homer, in the eleventh book of the Iliad. In Pope's translation the lines run as follows:—

"A wise physician, skill'd our wounds to heal,  
Is more than armies to the common weal."

A brief mention may be made of a few medical officers who have served in political employ at a later date, contemporary with some of those still serving. John Proudfoot Stratton, who entered the Bombay Service on 20th Oct., 1852, and retired on 23rd Dec., 1886, spent most of his service in the Political department, and was for many years Resident at Jaipur. Sir Alfred Lethbridge, who joined the Bengal Army on 30th Sept., 1867, after being for nearly twenty years I.G. of Jails in Bengal, was Supt. of the Thagi and Dakaiti department till his retirement on 1st April, 1898. Oliver Thomas Duke, also of Bengal, after serving for some years as medical officer of the Biluchistan
Agency, became a Political Agent in that province. After his retirement on 22nd Feb., 1887, he thrice contested South Bedfordshire in the Unionist interest, but without success. Sir George Scott Robertson, who entered the Bengal Service on 30th March, 1878, made a name by his exploration of Kafirstan, where he spent some two years, the result of his travels being given to the world in *The Kafirs of the Hindukush*; London, 1896. On his return he was posted to the Political department, and received the K.C.S.I. as Agent in Chitral during the war in that state in 1895, an account of which he has written in *Chitral, the Story of a Minor Siege*; London, 1898. He retired on 12th Oct., 1899, and since 1906 has been M.P. for Central Bradford.

The above list of I.M.S. officers who have distinguished themselves, more or less, in political or administrative offices, is by no means exhaustive. It does, however, include all the best-known and most successful.

Officers of the I.M.S. have also played an important part in the foundation of some other departments, the work of which is entirely non-medical; the Post Office, the Forest, Education, and Telegraph departments. The Assay department of the Mint has been officered almost entirely from the I.M.S. for over a century. Under recent orders medical officers will no longer be appointed to posts in the Mint.

James Ranken, who entered the Bengal Service on 3rd Feb., 1809, was Postmaster General of the N.W.P. from 1st Jan., 1841, till he retired on 18th Sept., 1845. George Paton, appointed to Bengal on 21st Jan., 1835, was Postmaster General of the N.W.P. from Feb., 1854, to Nov., 1859. He officiated as Director General of the Post Office from 1st April, 1856, to 31st March, 1857, when Stewart Clark, (Bengal, 24th Nov., 1849) acted for him in the N.W.P. In June, 1861, he became Director General of the Post Office in India, and held that post till his retirement on 26th Sept., 1864. Elijah Impey, who entered the Bombay Service on 4th Dec., 1840, was Postmaster General of Bombay, from 16th May, 1856, till his death on 19th Nov., 1868. Sir John Login's appointment as first Postmaster General of the Panjub has been mentioned above.

In Education, Thomas Alexander Wise, who was appointed Assistant Surgeon in Bengal from 13th Aug., 1827, when Civil Surgeon of Hugli, founded Hugli College, of which he was the
first Principal, doubling the work with the Civil Surgeoncy from 1836 to 1839, when he was appointed Secretary to the Committee of Education, a post corresponding roughly with that now called Director of Public Instruction. James Esdaile, who entered the Bengal Service on 10th Feb., 1831, succeeded him, both as Civil Surgeon of Hugli and Principal of Hugli College. Wise was subsequently Principal of Dakka College. He retired on 11th Feb., 1851, and died on 23rd July, 1889. He was a prolific author, his chief work being *A Commentary on the Hindu System of Medicine*, Calcutta, 1845, a very mine of information on the subject of which it treats. He also wrote a *Treatise on the Diseases of the Eye in Hindustan*, Calcutta, 1847; and one on *Cholera*, Cork, 1864; and a *Review of the History of Medicine*, two volumes, London, 1867. John Peet, appointed to Bombay, on 2nd May, 1842, also served in the Education department as Inspector of Education, Bombay Presidency, from 1856 to 1861; though most of his service was spent on the staff of the Jamsetji Jijibhai Hospital, and for the last five years of his service he was Principal of the Grant Medical College, Bombay. He retired on 14th Jan., 1867, and died at Shanklin on 18th Jan., 1874.

The work of I.M.S. officers in founding the Forest and Telegraph departments falls more naturally into the following chapter.

During the first half of the nineteenth century it might be said to have been the rule, rather than the exception, for Civil Surgeons, whose professional duties were, in all except the largest stations, very light, to carry on some other extra-professional duties. The office of Postmaster, in particular, was frequently given to the District Medical Officer. A few instances are quoted below of various civil offices being conferred on Civil Surgeons as additional duties, with, of course, additional allowances in each case. The instances quoted are only a few examples out of many. Similar appointments as Register might be extracted from the *Gazettes* in dozens, as Postmaster in scores. The other appointments were of less frequent occurrence.

A Bombay Public Letter of 22nd Feb., 1806, reports the appointment of Assistant Surgeon Hine, at Bagdad, to be Assistant Resident, in addition to his own duties, with an allowance of Rs. 400 a month.

A Bengal Public Letter of 31st July, 1820, reports the appointment of the Civil Assistant Surgeons of Etawa and Aligarh to be
Postmasters of these stations, the allowance in each case being one hundred rupees a month.

Bengal Civil Orders of March, 1832, note the appointment of Assistant Surgeon Donald Butter to be Sadr amin (Civil Subjudge) of Ghazipur, and Assistant Surgeon J. Davidson to the same office at Bihar (Gaya).

A Bombay Order of 27th Feb., 1839, appoints C. D. Straker, Civil Assistant Surgeon of Ahmadabad, to be Assistant Magistrate in addition to his own duties.

In the Bengal Civil Orders of July, 1839, are gazetted several appointments of Civil Assistant Surgeons as Registers (i.e. Registrars) of their respective stations.

In more recent times an Uncovenanted Medical Officer, who retired less than twenty years ago, held the double appointment of Civil Surgeon and Extra Assistant Commissioner of Sinhhbum throughout his service.

Mention may be made of some medical officers who have attained distinction as diplomats or administrators during the past half century, not in India, but in other parts of the world. Sir John Kirk was Consul General at Zanzibar in 1886–87. Sir Rutherford Alcock was Consul General in Japan from 1858 to 1862, and Minister Plenipotentiary at Pekin from 1865 to 1871. Sir Samuel Rowe, of the A.M.D., was Governor successively of the Gambia, the West African Settlements, the Gold Coast, and Lagos. Sir William MacGregor, first a Colonial Surgeon, became subsequently Administrator of British New Guinea, Governor of Fiji, Governor of Lagos, and is now Governor of Queensland. Sir Leander Starr Jameson, the leader of the famous raid on Johannesburg, was recently, from 1904 to 1908, Premier of Cape Colony.
CHAPTER XXIX

OTHER EXTRA-PROFESSIONAL WORK—EXPLORATION; SCIENCE; PHILOLOGY; LITERATURE

"Qui mores hominum multorum vidit et urbes."
Horace, Ars Poetica, line 142.

"Felix, qui potuit rerum cognoscere causas."
Virgil, Georgics, II. 490.

An account has been given, in the preceding chapter, of the services of some officers of the I.M.S. in political and administrative posts, the duties of which are entirely foreign to the profession of Medicine. In this chapter are briefly described other extra-professional services of members of the I.M.S., in travel and exploration, in natural sciences, in philology, in ethnology, and in literature. None of these have any special connection with the medical profession, except science. And, while a certain amount of grounding in some of the natural sciences is a necessary foundation for the study of medicine, the pursuit, as a profession, of these sciences is now usually a thing apart from the actual practice of medicine and surgery.*

I. Travel and Exploration

To begin with, a brief mention may be made of the names of George Strahan, (Bo. 1619), who was taken into the service of the Company's factory at Isphahan after making his way overland to Persia, and spending some years in the service of an Arab chief; and of John Fryer, (Bo. 1672), author of one of the best known early works of travel in the East.† Boughton's visit to Balkh in 1646 has been mentioned in Chap. V, (p. 51).

* The letter and date given after each name show the Presidency, and the year of entering the Service.
† For Strahan and Fryer, see also Chap. VI, Early History; Surat, Persia, Bombay, and the West.
Coming to more recent times, William March, (Bo. 1766), visited Kandahar in 1771-72. March was appointed Assistant Surgeon, Bombay, on 1st Jan., 1766, and, after serving at Fort Victoria, was posted to Tatta in Sind, as recorded in Bombay Cons. of the 10th Nov., 1769, relieving Jeremiah Farmer there. The same Cons. of 16th Jan., 1771, post Surgeon A. G. Clugstone to Sind, and order March to take Clugstone's place as Surgeon of the Resolution. Apparently, instead of joining the Resolution, he went to Kandahar, for the same Cons. of 2nd Feb., 1773, order arrears of salary to be paid him "from the time of his arrival at Scindy from Candaal to the time of his leaving it to return hither," and direct him to join the Bombay Hospital as Assistant. On 23rd Oct., 1778, he was granted sick leave, the Bombay Surgeons giving him a sick certificate for fever and liver disease contracted in Sind, went home, and never rejoined.

Alexander Hamilton, (B. 1773), who accompanied George Bogle on his mission to Tibet in 1774, was thus one of the first Englishmen to visit the forbidden city of Lhasa; a city which only one other of their countrymen had reached before the expedition of 1904. Subsequently, in 1776 and 1777, Hamilton was twice sent on missions to Bhutan. Robert Saunders, (B. 1782), accompanied Captain Samuel Turner's mission to Tibet in 1783-84; they, however, never reached Lhasa. Adam Frere, (B. 1781), who had served at Aleppo previous to entering the I.M.S., went with Colonel Kirkpatrick's mission to Nipal in 1792-93. Francis Buchanan, (B. 1794), afterwards better known as Buchanan-Hamilton, accompanied Captain Knox to Nipal in 1802-03, and published an account of Nipal in 1819.

Buchanan, however, achieved more important work in his detailed surveys of Maisur, Kanara, and Malabar, carried out in 1804-06; and of Northern Bengal and Bihar, from Rangpur to Gorakhpur, from Nipal to Gaya, done in 1807-14. Both of these surveys have been published, the first as A Journey from Madras through the Countries of Mysore, Canara, and Malabar. London, 1808; the second as Martin's History, Antiquities, Topography, and Statistics of Eastern India, London, 1838. This work consists of Buchanan's survey, abridged and edited, with some notes, by Montgomery Martin.

The M3S., both of Buchanan's detailed report of his survey, and of the daily journal from which the report was compiled, are
preserved in the records at the India Office. Both of Buchanan's surveys remain standard works to this day.

James Gilbert Gerard, (B. 1814), accompanied Captain (Sir) Alexander Burnes in his first journey through Central Asia in 1832–33, visiting Kabul, Balkh, and Bokhara, and returning by Teheran, Isphahan, Shiraz, and Bushire. Gerard helped in compiling the scientific part of Burnes' book on his travels. He died at Subathu on 31st March, 1835, too early to participate in Burnes' subsequent successes or in his fate.

William Moorcroft, Supt. of the Bareli stud, made a long and adventurous journey through Ladakh, Kashmir, Afghanistan, and Bokhara, which covered a period of six years, 1819 to 1825. The party consisted of five in all, Moorcroft himself, George Trebeck, William Guthrie, a member of the Sub-Medical Service, Munshi Mir Uzzat Allah, and Ghulam Haidar Khan, an orderly. The last alone lived to return to India. Moorcroft died at Andkho, about 15th Aug., 1825, Guthrie at Balkh in the same month, Trebeck soon after at Mazar, and Mir Uzzat Allah, who had left the party some time before, at Kabul in 1826. Ghulam Haidar Khan got safely back to India, bringing Moorcroft's rough journals. From them H. H. Wilson compiled an account of the journey, under the title _Travels in the Himalayan Provinces of Hindustan and the Panjab, in Ladakh and Kashmir, in Peshawar, Kabul, Kunduz, and Bokhara_, London, 1841.

John Henderson, (B. 1815), visited Ladakh in 1835, dying immediately after his return, as described in Chap. XXV, _Contracts and Trade_.

George Thomas Bayfield, (M. 1828), was appointed Assistant to the Resident at Ava on 13th March, 1835. Between Dec., 1836, and May, 1837, he made a journey from Ava to Assam and back, under the orders of the Resident, Lieut. Colonel Burney. His account of this journey was published in 1875, in a _Selection of Papers regarding the Hill Tracts between Assam and Burma and on the Upper Brahmaputra_. He also wrote _An Historical Review of the Political Relations between the British Government in India and the Empire of Ava, from the earliest date on record to the end of the year 1834_, Calcutta, 1835. In 1839, Bayfield was appointed Political Agent at Rangoon, under the orders of the Resident at Ava, but the Burmese refused to allow his stay in that town. On 7th August, 1840, he was gazetted Assistant to the Agent to
the Governor General on the North East Frontier. He died at 
Gauhati, a month later, on 9th Sept., 1840.

The services and the fate of P. B. Lord, (Bo. 1834), have been 
related in the preceding chapter. Another Bombay officer who 
lost his life in the same part of the world, a little later, was 
Frederick Forbes, (Bo. 1832), who was murdered by Ibrahim Khan, 
Chief of Seistan, in that province, in Sept., 1841.

The explorations of William Griffith, (M. 1832), and of T. 
Thomson, (B. 1839), are related further on, under the head of 
Botany.

H. W. Bellew, (B. 1855), has also been mentioned in the pre-
ceding chapter. He wrote accounts of his stay at Kandahar, 
*A Political Mission to Afghanistan in 1857*, London, 1862; of his 
journey with Sir R. Pollock in 1871, *The Mission to Seistan, 
Calcutta, 1873*; and *From the Indus to the Tigris*, London, 1874; 
and of his travels with Sir D. Forsyth’s mission, *Kashmir and 
Kashgar*, London, 1875.

Another medical officer who served with Forsyth’s mission 
was George Henderson, (B. 1859), joint author with A. O. Hume 
of *Lahore to Yarkand*, Calcutta, 1873.

Sir George Robertson, (B. 1878), was the first European to 
penetrate into Kafiristan, as described in the preceding chapter.

W. G. Thorold, (B. 1886), accompanied Captain (now General) 
Bower on his journey through Tibet, Chinese Turkestan, and 
Mongolia. The journeys in China of C. C. Manifold, (B. 1887), in 
1898–99, earned him a special promotion.

One of the world’s greatest explorers, Mungo Park, though 
not a member of the I.M.S., was a medical officer in the Company’s 
service, as Surgeon’s Mate of the *Worcester* Indiaman in 1792–93. 
He left that service to undertake the exploration of West and 
Central Africa, as described in Chap. XXIV, *The Sea Service*.

II. Natural Science

A. Botany.—This science is one of those in which officers of 
the I.M.S. have done their most successful work, witness the names 
of Roxburgh, Wallich, Wight, Griffith, Thomson, King, etc.

John Gerhard Koenig, (M. 1778), came to India in the Danish 
service in 1768 as Surgeon and Naturalist at Tranquebar, entered 
the service of the Nawab of Arcot in 1774, and was appointed 
Naturalist to the Madras Government on 17th July, 1778. It
seems doubtful whether he was a regular member of the Medical Service. He drew his pay through the Military paymaster; a Fort St. George letter to that officer, dated 1st April, 1780, informs him that Koenig’s salary has been increased from forty to sixty pagodas a month, i.e. from about 135 to about 210 rupees. Apparently, therefore, he was considered a military officer. He died of dysentery at Jaganathpuram on 26th June, 1785.

William Roxburgh, (M. 1776), was born at Craigie in Ayrshire on 3rd June, 1751, and educated at Edinburgh University. After serving as Surgeon’s Mate of an Indianman, he was appointed Assistant Surgeon at Madras on 28th May, 1776, and reached the rank of Surgeon four years later, on 27th Nov., 1780. Most of his early service was spent at Samulcotta in the Northern Circars. In 1789 he succeeded Patrick Russell as Naturalist at Madras, and on 29th Nov., 1793, was appointed Supt. of the Calcutta Botanical Gardens, in the place of Colonel Kyd, founder and first Superintendent of these gardens, who died on 26th May, 1793. Roxburgh went home in 1813, and died in Edinburgh on 18th Feb., 1815. His chief works were *Plants of the Coast of Coromandel*, three volumes 1795, 1802 and 1819; *Hortus Bengalaensis*, Serampur, 1814; and the famous *Flora Indica*, published in part with additions by Wallich, after Roxburgh’s death, in two volumes in 1820 and 1824, and in full without these additions in 1832. The 1832 edition was reprinted in 1874.


Benjamin Heyne, (M. 1799), was appointed Supt. of the Pepper and Cinnamon Plantations in Madras in Sept., 1792, in place of Roxburgh, transferred to Bengal. He was confirmed in the Madras Medical Service from 30th April, 1799, and died at Vepery on 6th Feb., 1819. He was the author of *Tracts, Historical and Statistical, on India*, published in 1814, in which are included journals of tours in India and Sumatra.

Nathaniel Wallich was of Jewish extraction; his original name, it is said, was Nathan Wolff. He was born at Copenhagen on 28th Jan., 1786, and after qualifying in 1806 as Licentiate of the Royal Academy of Surgeons in Copenhagen, came out to Serampur as Surgeon to the Danish Settlement there in 1807.
Serampur was taken over by the British in 1808. A public letter from Calcutta, dated 30th June, 1809, states in para. 210 that—

"Dr Wallich, a Danish prisoner, has been appointed to assist Dr Roxburgh, but without any additional allowances. In the event of his pursuing his researches in the interior of the country he is to be granted Rs. 200 per month for travelling charges."

Wallich got a commission as Assistant Surgeon on 10th May, 1814, succeeded Buchanan Hamilton as Supt. of the Calcutta Botanical Gardens in 1816, and held that post for over thirty years, till he retired on 9th April, 1846. He died in London on 28th April, 1854. During his long tenure of office he made botanical expeditions in Nipal in 1822; in Penang, Malacca, and Assam in 1835; and in Cape Colony, while on leave there, in 1836. His chief works were *Tentamen Florae Nepalensis*, 1824–26; *Planta Asiatica Rariores*, 1830–32; while he edited some portion of Roxburgh's *Flora Indica*, with additions bringing it up to date.

Robert Wight, (M. 1819), succeeded James Shuter as Naturalist at Madras in 1826, but only held that post for a short time. He retired on 28th Feb., 1853, and died at Grazeley, Reading, on 26th May, 1872. He was the author of *Illustrations of Indian Botany*, Glasgow, 1831, and Madras, two volumes, 1838–50, and of *Icones Plantarum India Orientalis*, published in six volumes, with over 2,000 plates, at Madras, from 1838 to 1853.

William Griffith, (M. 1832), in 1835, went with Wallich and McClelland on an expedition to explore Assam, returning through Ava and Rangoon. In 1838 he accompanied Major Pemberton's Embassy to Bhutan. In 1839 he served with the Army of the Indus, and went over the Hindukush to Khorasan, collecting plants. In 1842–44 he filled the post of Supt. of the Calcutta Botanical Gardens. He died at Malacca on 11th Feb., 1845. His works, all on Botany, were published in Calcutta after his death, edited by McClelland; *Icones Plantarum Asiaticarum*, 1847–51; *Itinerary Notes*, 1848; *Palms of British East Indies*, 1850; and *Notulae ad Plantas Asiaticas*, 1851.

Thomas Thomson, (B. 1839), also served in the first Afghan war, and was taken prisoner at the fall of Ghazni in March, 1842. In 1845 he went through the Sutlej campaign. In Aug., 1847, he was appointed one of the Commissioners for defining the boundary between Kashmir and Tibet. In 1850 he travelled
with Sir Joseph Hooker through the Khasia Hills, Kachar, Chittagong, and the Sundarbans. He went to England in 1851, and worked at Kew in 1851-54. In the latter year he succeeded Falconer as Supt. of the Calcutta Botanical Gardens, and held that post till 1861, when he went home again, retiring on 25th Sept., 1863. He died on 18th April, 1878. He described his travels in a book entitled Western Himalaya and Tibet, London, 1852, and was joint author with Hooker of their Flora Indica, published in 1855.

Thomas Anderson, (B. 1854), while a student at Edinburgh, assisted in arranging Dr. Cleghorn's Indian Herbarium for the University Museum. He served with Hodson's Horse in the Siege of Delhi, and in 1861 succeeded Thomson as Supt. of Calcutta Botanical Gardens. While holding that appointment, he imported yellow bark cinchona from Java. He died in Edinburgh, while on furlough, on 26th Oct., 1870. He contributed to the transactions of the Linnaean Society.

James Edward Tierney Aitchison, (B. 1858), in 1863, published Flora of the Jhelum District, and in 1869 a Catalogue of the Plants of the Punjab and Sind. In 1872 he was appointed British Commissioner to Ladakh, and compiled a Handbook of the Trade Products of Leh. After serving in the second Afghan war, he accompanied the Afghan Boundary Commission of 1884-85, and wrote the Flora of the Kuram Valley and of Afghanistan, 1880, and The Botany of the Afghan Delimitation Commission, 1888, and Notes on the Products of Western Afghanistan and of North Eastern Persia, 1890. He retired on 14th May, 1888. In his later years he was engaged on a work Flora Indiae Deserta, which he did not live to complete. He died at Kew on 30th Sept., 1898.

Sir George King, (B. 1865), was appointed Supt. of Calcutta Botanical Gardens in 1871. He received the C.I.E. in 1890, the K.C.I.E. in 1898, retired on 28th Feb., 1898, and died at San Remo on 13th Feb., 1909. He compiled a Manual of Cinchona Cultivation in India, 1876, reprinted 1880; Annals of the Royal Botanic Garden, Calcutta, seven volumes, 1889, and Flora of the Malay Peninsula.

K. R. Kirtikar, (Bo. 1787), was the author of Poisonous Plants of Bombay. He retired on 24th May, 1904.

Arthur Barclay, (B. 1874), is known by his work on the life-histories of the lower cryptogams; many of his papers on this
subject appear in the first six volumes of *Scientific Memoirs*. He died of enteric fever at Simla on 2nd Aug., 1891.

Lastly, must be mentioned Lieut. Colonel Sir David Prain, (B. 1884), who succeeded King as Supt. of the Calcutta Botanical Gardens in 1898, and in 1905, on the retirement of Sir W. T. Thiselton-Dyer, became Director of the Royal Botanic Garden at Kew. He was elected F.R.S. in 1905, retired on 31st July, 1906, received the C.I.E. in 1906, and the C.M.G. in 1912, was knighted on 16th June, 1912, and is the author of *Bengal Plants*, two volumes, Calcutta, 1904.

**B. Zoology.**—Though the list is not so long as that of the Botanists, several members of the I.M.S. have made valuable contributions to the study of Zoology in India.

The first in point of time is Patrick Russell, (M. 1785), who was born on 6th Feb., 1727, and, after serving as Physician to the Turkish Company’s Factory at Aleppo from 1753 to 1771, was appointed Botanist and Naturalist at Madras in succession to Koenig, on 4th Nov., 1785, when he was nearly fifty-nine. He only held the post for a little over three years, resigning on 26th Feb., 1788. He died in London on 2nd July, 1805. The chief fruit of his labours in India is contained in his great work, *An Account of Indian Serpents*, four volumes, London, 1796 to 1809. He also wrote *Descriptions and Figures of Two hundred Fishes collected at Vizagapatam*, London, 1803; and *A Treatise on Plague*, two volumes, London, 1791, in which he embodied his experience of an epidemic of that disease at Aleppo in 1760–62.

Clarke Abel, (B. 1823), accompanied as Naturalist Lord Macartney’s Mission to China, in 1816. On their return H.M.S. *Alceste*, which conveyed the Mission, was wrecked on a reef off Pulo Leat, between Borneo and Sumatra, on 16th Feb., 1817. The crew and passengers were rescued by H.M.S. *Ternate* on 6th March, but almost all the collections were lost in the wreck. Abel wrote a *Narrative of a Journey in the Interior of China*, 1816–17, London, 1818. Five years later he was appointed to the I.M.S., but died at Cawnpur, with under four years’ service, on 24th Nov., 1826.

Thomas Caverhill Jerdon, (M. 1835), stands first as a Zoologist, through his famous work, *The Birds of India*, three volumes, Calcutta, 1862–64; and three other works of hardly less importance, *Illustrations of Indian Ornithology*, Madras, 1844–47;
The Mammals of India, Madras, 1854, republished at Rurki in 1867 and in London in 1874; and The Game Birds and Waterfowl of India, 1864. He retired on 27th Feb., 1868, and died at Norwood on 12th June, 1872.

George Charles Wallich, (B. 1838), a son of Nathaniel Wallich, served in the Sutlej and Punjab campaigns. After his retirement on 1st Sept., 1859, he was attached to the Bulldog in 1860, on her survey of the Atlantic bottom for the proposed cable to America; and made a study of marine zoology for twenty years. He was the author of The North Atlantic Seabed, 1862. In 1898 the Linnean Society conferred upon him its gold medal. He died on 31st March, 1899.

Francis Day, (M. 1852), made a special study of Indian Fish. He held the appointment of I.G. of Fisheries from 1865 till his retirement on 1st Nov., 1876. He received the C.I.E. in 1885, also the Cross of Commander of the Crown of Italy. He died at Cheltenham on 10th July, 1889. He was the author of more than a dozen works on his own speciality, the chief of which are The Fishes of India, two volumes, London, 1875 and 1888; and The Fishes of Great Britain and Ireland, two volumes, London, 1880 and 1884. He also wrote two books on other subjects, The Land of the Permauls, and Tropical Fevers, both published at Madras, in 1863.

F. Buchanan Hamilton, mentioned above under the head of Travel, was also the author of a work on The Fishes of the Ganges, two volumes, Edinburgh, 1822.

Alfred William Alcock, (B. 1885), for many years Supt. of the Calcutta Museum, was the author of many papers on Marine Biology, as well as of that most interesting popular book, A Naturalist in Indian Seas, London, 1902. He was elected F.R.S. in 1901, received the C.I.E. in 1903, and retired on 29th Dec., 1907.

Under the head of Zoology must also be mentioned the experiments on snake poison carried out by Sir Joseph Fayrer, (B. 1850), and embodied in his great work The Thanatophidia of India, London, 1872, second edition, 1884; also those of John Shortt, (M. 1854); of A. J. Wall, (B. 1873), author of Indian Snake Poisons, London, 1883, second edition, 1898; and of F. Wall, (M. 1895).

C. Geology.—Under this head three names require mention. Hugh Falconer, (B. 1830), succeeded Royle as Supt. of Saharanpur
Botanical Gardens in 1832, and in the same year, along with Sir Proby Cautley, discovered the Siwalik Fossils. In 1837-38 he travelled in Kashmir, Skardo, Baltistan, and Ladakh, and brought to notice the uses of asafaetida. In 1844-47 he was on special duty in England, arranging the Siwalik Fossils in the British Museum. In 1847 he succeeded Wallich as Supt. of the Calcutta Botanical Gardens. He retired on 3rd Sept., 1855, and died in London on 31st July, 1865. In 1845 he was elected F.R.S., and from 1863 to 1865 was Vice-President of the Royal Society. He wrote *Fauna Antiqua Sivalensis*. After his death another work, *Palaontological Memoirs*, was published in 1868, edited by Charles Murchison.

John McClelland. (B. 1830), entered the Service on the same day as Falconer, 7th April, 1830. He became I.G. on 8th Nov., 1860, retired on 24th Nov., 1865, and died at St. Leonards on 31st July, 1883. As mentioned above, he edited the posthumous Botanical Works of William Griffith. He also wrote *The Geology of Kumaon*, Calcutta, 1835; *Reports of the Geological Survey of India* for 1843 to 1846, and *Medical Topography of Bengal and the N.-W.P.*, London, 1859; and edited the *Calcutta Journal of Natural History* from 1841 to 1847.

Henry John Carter, (Bo. 1842), was the author of *Geology of the Island of Bombay*, 1852; *Summary of the Geology of India*, 1854; and *Geological Papers on Western India*, 1857. He received the Royal Medal of the Royal Society in 1872. He retired on 31st March, 1864, and died at Budleigh Salterton on 4th May, 1895.

D. Economic Science.—This is rather a wide subject. Here it may be taken to mean the application of the Natural Sciences to practical use in working life.

James Anderson, (M. 1762), served in the Siege of Manilla in 1762, and afterwards was Supt. of the Madras Botanical Garden. In 1781, on the death of Gilbert Pasley, he was appointed Surgeon General, and when the Madras Medical Board was founded in 1786, became the first President of the Board and Physician General. He died at Madras on 5th Aug., 1809. He introduced cochineal into India, and had a large share in the introduction of silk, sugarcane, coffee, and American cotton. He was the author of a series of papers on these subjects, published from 1781 to 1796, and of a paper on *The Minerals of Coromandel*, Madras, 1796.
Helenus Scott, (Bo. 1783), in 1784 introduced a new method of preparing alkali, which was highly praised at the time.

David Turnbull, (B. 1791), who for most of his service was Civil Surgeon of Mirzapur, and combined with his professional duties an extensive business in zamindari and country produce, discovered the use of lac dye in that district about 1806.*

John Forbes Royle, (B. 1819), in 1823 was appointed Supt. of Saharanpur Botanical Gardens. He retired, after a long spell of leave in England, on 25th April, 1837. From 1836 to 1856 he was Lecturer on Materia Medica in King's College, London; and from 1847 to 1857 Reporter on Economic Products to the East India Company. He represented the Company at the great Exhibition of 1851 in London, and at that of 1855 in Paris, when he was made a Knight of the Legion of Honour. He died at Acton on 2nd Jan., 1858. In 1834 he published *The Botany of the Himalaya Mountains and Kashmer*, and, after his retirement, he wrote many works on Indian Economic products: *The Productive Resources of India*, 1840; *The Production of Isinglass in India*, 1842; *Culture of the Teaplant in the Himalayas*, 1849; *The Fibrous Plants of India*, 1855; and *The Culture and Commerce of Cotton in India*, 1851. He was also the author of an *Essay on Hindu Medicine*, 1837; and of a *Manual of Materia Medica and Therapeutics*, a standard text-book in its day, though now forgotten, which ran through six editions, the last, edited by John Harley, in 1876.

Since Royle's death, appointments of much the same nature as his, under different names, have been held, in the India Office, by John Forbes Watson, (Bo. 1850), and Sir George Birdwood, (Bo. 1854). Both were the authors of many works. Watson combined with this appointment the post of Keeper of the India Museum, till he retired in 1879. He died at Norwood on 29th July, 1892. His chief work is the *Textile Manufactures and Costumes of the People of India*, London, 1866. Birdwood was Curator of the India Museum from 1875 to 1879, and special Assistant in the Commerce and Statistics Department of the India Office, up to his retirement in 1898. He received the C.I.E. in 1877, a Knighthood in 1881, and the K.C.I.E. in 1887. Of some twenty published works, the chief are *Report on the Old Records*.

* Gentleman's Magazine, March, 1807. For Turnbull, see also Chap. XXV, Contracts and Trade.
of the India Office, 1879; and The Industrial Arts of India, 1880.*

Edward Green Balfour, (M. 1836), founded the Government Museum at Madras in 1830. He was Surgeon-General of the Madras Service from 15th Aug., 1871, till his retirement on 30th June, 1877, and died in London on 8th Dec., 1889. Of a long list of works, the chief are The Timber Trees, Timber, and Fancy Woods as also the Forests of India, Madras, 1862; and his great Encyclopædia of India, three volumes, Madras, 1857, with two supplementary volumes, 1858 and 1859, second edition, Madras, 1871-73, third edition, London, 1885.

Edward John Waring, (M. 1849), had been in the Colonial Medical Service in Jamaica before entering the I.M.S. He served in the second Burmese War, retired on 13th Sept., 1865, received the C.I.E. in 1881, and died in London on 22nd Jan., 1891. In 1868 he compiled the first official Pharmacopæia of India. He was also the author of the well-known work on Bazar Medicines, first published in 1860, and still in frequent use. The sixth and latest edition, issued in 1901, was edited by the present Director-General, Sir Charles Pardey Lukis.

John Shortt, (M. 1854), wrote much on agriculture and kindred topics; Handbook to Coffee Planting, Madras, 1864; Manual of Indian Cattle and Sheep, 1876; On the Cocoanut Palm, 1888; and Manual of Indian Agriculture, 1889. He was also the author of An Account of the Tribes on the Neilgherries, 1868, and a Manual of Family Medicine for India, 1875.

The work of Francis Day, (M. 1852), on fishes, and his appointment as Inspector-General of Fisheries, have already been mentioned.

Forestry comes naturally under the head of Economic Science, rather than of Botany. So early as 1796 an attempt to extract teak from the forests of Malabar, and to substitute that wood for oak as the standard material for shipbuilding, was made by a syndicate, the guiding spirit of which was Alexander Lockhart Maconachie, (Bo. 1788). This venture ended in failure. In the correspondence between Bombay and the Court, between 1800 and 1810, there are many references to Maconachie’s forest leases and to his sawmills at Beypur, near Calicut. A Public Letter

* For Royle, Watson, and Birdwood, see also next chapter, Medical Officers employed in England.
from Court, dated 2nd May, 1806, in paras. 34 to 36 orders the abandonment of the sawmills, the venture having ended in heavy loss. In another letter, dated 3rd July, 1805, paras. 16 to 23, the Court directed that Maconachie might receive a moderate salary for his work, which was in the public interests. Among other speculations he then had in hand was the building of a 74-gun ship at Beypur, with teak from the Malabar forests. He died at Calicut on 19th May, 1806.

Some members of the I.M.S. had a large share in the organization of the Forest Department. Alexander Gibson, (Bo. 1825), was appointed Supt. of the Dapuri Botanical Gardens in 1838, and Conservator of Forests in 1847, holding that post till he retired on 8th June, 1860. He died on 16th Jan., 1867. He was the author of Forest Reports, Bombay Presidency, 1847 to 1855; Bombay Flora, 1861; and Handbook to the Forests of the Bombay Presidency, 1863. Wallich, in 1827, had examined and reported on the teak forests of Tenasserim. In 1852 McClelland was appointed Supt. of the Forests in the newly-acquired province of Lower Burma, an appointment in which he was succeeded, in Jan., 1856, by (Sir) Dietrich Brandis, for long the first head of the Forest Department. Hugh Francis Clarke Cleghorn, (M. 1842), after serving for some years in the Maisur Commission, was Professor of Botany and Materia Medica at Madras from 1851 to 1855, when he was appointed Conservator of Forests, and in 1867 Acting I.G. of the Forest Department. He retired on 11th Feb., 1869, and died on 16th May, 1895. He was the author of several works on his own specialty, including The Forests and Gardens of South India, London, 1861; and a Report upon the Forests of the Panjab and Western Himalaya, 1864. John Lindsay Stewart, (B. 1855), after serving through the Siege of Delhi in the Mutiny, officiated for Dr. Jameson as Supt. of Saharanpur Botanical Gardens in 1860–61, and was appointed Conservator of Forests in the Panjab in 1864, holding that post till he died at Dalhousie on 5th July, 1873. While on furlough in 1869–71 he worked at Kew on the preparation of a Forest Flora of Northern and Central India. He was the author of several papers on his own subject, Flora of the Peshawar Valley, 1863; Flora of Waziristan, 1863; The Sub-Sewalik Tract, 1865; A Botanising Tour in Hazara and Khagan, 1866; A Tour on the Panjab Salt Range, 1866; and A Botanical Tour in Ladakh and Western Tibet, 1869.
The appointments of Drs. Gibson, McClelland and Cleghorn seem to have been the first such appointments made in India; though it was under Sir D. Brandis, who was not a member of the I.M.S., that the Forest Department was organized.

Buchanan-Hamilton’s surveys might perhaps better be included under the head of Economic Science than under that of Travel.

William Jameson, (B. 1838), succeeded Falconer as Supt. of Saharanpur Botanical Gardens in 1842. He played an important part in the introduction of the cultivation of tea into India. He received the C.I.E. on 1st Jan., 1878, retired on 31st Dec., 1875, and died at Dehra Dun on 18th March, 1882. He was the author of a Report on the Cultivation and Manufacture of Tea in Kumaon and Garhwal, 1845; The Cultivation of Flax in the N.W.P., 1861; Government Tea Plantations, 1862; and The Plantation of Canal Banks, 1876.

Emanuel Bonavia, (B. 1857), advocated the cultivation and improvement of the date palm and of oranges in India by his writings, The Future of the Date Palm in India, 1885; and The Cultivated Oranges and Lemons of India and Ceylon, 1890.

Telegraphs.—Sir William Brooke O’Shaughnessy, (B. 1833), while Professor of Chemistry in the Calcutta Medical College, conducted the first experiments for the introduction of the Electric Telegraph into India. He was appointed Director-General of Telegraphs in India in 1852, and held that post till his retirement on 10th Oct., 1861. Begun in 1853, the telegraph lines from Calcutta were completed to Agra in 1854, to Madras and Bombay in 1855. He was knighted in 1856, in 1861 added the surname of Brooke after O’Shaughnessy, and died at Southsea on 10th Jan., 1889. He was the author of The Bengal Dispensatory, London, 1842, and of The Bengal Pharmacopæia, Calcutta, 1844.

Veterinary.—The Veterinary Department in India is of comparatively recent development, and, until within the last half century, the only trained exponents of this science were a few veterinary surgeons in Cavalry regiments. Most of what little was done in this science was done by officers of the I.M.S. W. Gilchrist, (M. 1830), compiled treatises On the Diseases of the Camel, 1841, of the Elephant, 1843, and of the Bullock, 1846; republished in one volume by the Madras Government in 1849.
Shortt's *Manual of Indian Cattle and Sheep* has already been mentioned. K. McLeod, (B. 1865), while Civil Surgeon of Jessore, in 1869, submitted a full *Report on the Epizootic Diseases of Cattle in Lower Bengal*, which clearly established that the common cattle disease of India was rinderpest. He subsequently drew up a *Manual of Diseases of Cattle*, 1869, which was translated into Bengali, and a *Report on the Sanitary Treatment of Epizootics*, 1869. In 1870 he served upon a Commission to inquire into Indian cattle disease, and compiled their report in 1871. In 1883 he compiled a *Report on Establishing a Veterinary School in Bengal*. The site for the veterinary hospital and school at Belgachia, with Rs. 30,000, for its erection, were given by Raja Sheo Baksh Bagla, a grateful patient of McLeod's, at his suggestion; the school and hospital were opened in 1894.

Julius Jefferys, (B. 1822), was the first to suggest the suitability of Simla for a hill station, and was also, in 1836, the inventor of the respirator.

Here also may be mentioned the experiments of James Esdaile, (B. 1831), in mesmerism, when he demonstrated the possibility of performing major surgical operations painlessly under anaesthesia caused in this manner.

James Esdaile was born at Montrose on 6th Feb., 1808, educated at Edinburgh University, where he took the degree of M.D. in 1829, and entered the I.M.S. as Assistant Surgeon on 10th Feb., 1831. From 1835 to 1838 he was on furlough to Europe. He succeeded Thomas Wise as Civil Surgeon of Hugli early in 1839. He also succeeded Wise in the appointment of Principal of Hugli College, but that post was shortly afterwards separated from the Civil Surgeoncy and given to James Sutherland. In the C.G. of 22nd April, 1843, Esdaile was appointed also to be Registrar of Deeds, Hugli.

In 1845 he began the experiments in mesmerism, which made him famous, the first being done on 4th April, 1845. These experiments are described in Esdaile's published works, which are not easily accessible. A short account of them is given as Appendix Q, pp. 175-7, of a small book called *A Sketch of the Administration of the Hooghly District, from 1795 to 1845*, by George Toynbee, I.C.S. This account was furnished by Assistant Surgeon Badan Chaudra Chaudhri, who had himself witnessed and taken part in these experiments.
In a period of eight months he performed seventy-three operations on patients rendered unconscious by mesmerism, several being major operations, amputations and excisions of tumours, on patients in this condition, who apparently felt no pain. The list of tumours removed includes fourteen cases of excision of *elephantiasis scroti*, a long, bloody, and, one would suppose, a very painful operation. One of these tumours weighed as much as eighty pounds.

Esdaille having reported his success in obtaining anaesthesia by mesmerism, Government ordered further experiments to be conducted in Calcutta. A room, with accommodation for ten patients, was allotted in the Calcutta Native Hospital, for the admission of patients willing to submit to operation under mesmerism, and a committee appointed to watch and to report upon the experiments, which were, of course, carried out by Esdaile. This committee consisted of the following seven members:

James Atkinson, I.G. of Hospitals, Chairman.
E. M. Gordon, Esq.
Duncan Stewart, M.D., Presidency Surgeon.
John Jackson, Surgeon to the Native Hospital.
James Hume, Esq., Police Magistrate.
A. Rogers, Esq.
William Brooke O'Shaughnessy, M.D., Secretary.

Of the first ten patients experimented on, three could not be brought under the mesmeric influence, and were discharged; the other seven underwent operation with success. These seven cases included five tumours excised, one amputation of the thigh, and one minor operation. Of these, three tumours and the amputation case were reported as having undergone operation without apparent pain; in the other three the absence of pain was considered doubtful. There could, however, be no doubt whatever as to whether pain was present or not, in a subject upon whom operation was performed without an anaesthetic of any kind.

The report of the committee being favourable, a mesmeric hospital was opened, for one year, in Mott's Lane, Calcutta, in Nov., 1846. Cases of all kinds were admitted and operated on, under the mesmeric influence, by Esdaile. This hospital, having only been sanctioned for one year, was closed in Jan.,
1848. Esdaile was promoted to the rank of Surgeon from 1st Jan., 1848, and was also appointed one of the Presidency Surgeons. The Calcutta public petitioned Government to keep the hospital open, but were informed that, if they chose, the hospital might be reopened and supported by public subscription. It was accordingly revived, under Esdaile's superintendence, from 1st Sept., 1848, but it was kept up for only one year. Soon after it was closed Esdaile was appointed Supt. of the Sukia Street Dispensary, where he continued to practise mesmerism, until he left India on furlough in June, 1851. He retired on 11th Oct., 1853, and died at Sydenham on 10th Jan., 1859.

As it happened, it was only a very short time after Esdaile's experiments on mesmeric anaesthesia that chloroform was introduced. Doctor, afterwards Sir James, Simpson made his first experiments with ether in 1846, after hearing of the success of trials of that drug in America, and in 1847 he carried out, on himself and his assistants, the famous experiments with chloroform which led to its general introduction in surgical practice.

The discovery of the possibility of inducing general anaesthesia by chloroform, and of performing surgical operations without pain under the influence of that drug, was fatal to any chance there might otherwise have been of the practice of operation on patients in a state of mesmeric trance meeting with general acceptance. Chloroform was much more sure; and, while chloroform also has its own risks, these were at first neither known nor suspected. Not every individual was capable of inducing unconsciousness by mesmerism, not every patient was susceptible to mesmeric influence. Any one could administer chloroform, every human being was subject to its power. Moreover, the administration of a general anaesthetic was free from the suspicion of charlatanism, and also free from the vague fears of future will-subjection to the operator, with which mesmerism has always been associated. On the other hand, few patients who had to undergo operation but would gladly accept anaesthesia by mesmerism, rather than suffer without any anaesthetic at all, as all, high and low, rich and poor, alike had to do seventy years ago. Had he lived and made his experiments fifty years earlier, or had the discovery of general anaesthesia been delayed for another half century, the name of James Esdaile, instead of being familiar only to a few
curious investigators of old records, would have stood high on the roll of fame, among the great men of the world.

The late Mr. F. W. H. Myers, in his work *Human Personality, and its Survival of Bodily Death*, London, 1903, speaks thus of Esdaile's work—

"Next came the era of Elliotson in England, and of Esdaile in his hospital at Calcutta. Their method lay in mesmeric passes, Elliotson's object being mostly the direct cure of maladies, Esdaile's deep anaesthesia, under which he performed hundreds of serious operations. His success in this direction was absolutely unique;—was certainly (setting aside supernormal phenomena) the most extraordinary performance in mesmeric history. Had not his achievements been matters of official record, the apparent impossibility of repeating them would probably by this time have been held to have disproved them altogether." (Vol. I, page 160, para. 507.)

III. Philology

Philology is, with the possible exception of Botany, the branch in which the work of officers of the I.M.S. has attained its highest level. Three great names stand out pre-eminent, Leyden, Wilson, and Sprenger, and there are many lesser lights.

Holwell seems to have been the first of the Company's servants to take an interest in the languages and religions of the natives of the country. After his retirement he published his *India Tracts* in 1764, and *Interesting Historical Events relative to the Province of Bengal and Empire of Indostan*, in three volumes, from 1765 to 1771. The latter work contains several treatises on the Hindus, including *The Religious Tenets of the Gentoos* (Hindus), and *The Metempsychosis of the Brahmans*.

Francis Balfour, (B. 1769), was the first officer of the I.M.S., and one of the first of the Company's officers, to take up the study of Persian and Urdu. In 1781 he published *The Forms of Herkern*, a State letter-writer in Persian. He is said to have made a translation of the *Sair-ul-Mutakherin*, but, if he did so, it has been lost. James Ross, (B. 1783), who wrote under the *nom-de-plume* of Gulchin, (Culler of Roses), made a translation of the *Gulistan* of Saadi, published in 1823. Henry Harris, (M. 1783), when he had only seven years' service, in 1790, published a *Hindustani Dictionary*. On the work of Harris, Shakespeare's *Hindustani Dictionary*, first published in 1817, was to a great extent founded.

John Borthwick Gilchrist, (B. 1783), was a most voluminous
writer on philology, over twenty works standing to his credit. The most important are his *Hindustani Dictionary and Grammar*, published, the first in 1787 and 1790, the second in 1796. He was for long on special duty compiling these works. Among other books, well-known in their day, but long since forgotten, may be mentioned *The Oriental Linguist, 1798; The British Indian Monitor, 1800; The Stranger’s East India Guide, 1802; The Hindoo Moral Preceptor, 1803; Hindooostance Philology, 1810; and Hindoo-Roman Orthoepeigraphical Ultimatum, 1820.* Some of these works are abridgements or amplifications of others.

Robert Drummond, (Bo. 1796), compiled Grammars of the Marathi and Gujarathi languages in 1799. He had served in the 77th Foot before entering the I.M.S., and was lost in the *Lady Jane Dundas* on 14th March, 1809.

John Leyden, (M. 1803), was born at Denholm in Roxburgh on 8th Sept., 1775. After studying at Edinburgh, he was licensed as a preacher of the Church of Scotland at St. Andrew’s in May, 1798. He made some reputation in literature, but was not successful in the Church. He was offered an appointment in the I.M.S., if he could obtain a medical qualification, and succeeded in getting both the L.R.C.S., Edinburgh, and the M.D., St. Andrew’s, in 1802, after six months’ study. He landed at Madras on 19th Aug., 1803, and, after serving in the General Hospital there, was employed in surveying Maisur, and wrote a report on the geology, crops, language, and diseases of that province. In 1805 he travelled in Cochin, Malabar, and Penang, and in 1806 was transferred to Calcutta, where he was appointed Professor of Hindustani in the College of Fort William, three years after he had reached the country, with service little longer than his pupils. In 1808 he was appointed Judge of the 24 Parganas, in 1809 Commissioner of the Court of Requests, Calcutta, and in 1810 Assay Master of the Mint. In 1811 he accompanied the Governor General, Lord Minto, to Java, was present at the capture of Batavia on 7th Aug., 1811, and died on 28th Aug., at Cornelis, Batavia, from fever. During his short service of eight years, he seems to have done no medical work after he left the Madras General Hospital. During these eight years he wrote a *Dissertation on the Languages and Literature of the Indo-Chinese Nations*, an *Essay on the Indo-Persian, Indo-Chinese and Dekkan Languages*, compiled Grammars of Malay and Prakrit, translated
the Gospels into Pushtu, Baluchi, Maldivian, Macassar, and Bujis, and translated into English *Malay Annals*, and part of the *Memoirs of Babar*.

The *Dictionary and Grammar of the Malay Language*, published in 1852 by John Crawfurd, (B. 1803), was long a standard work. Crawfurd's political career has been described in the preceding chapter.

James Atkinson, (B. 1807), made many translations of the Persian classics into English, Firdausi's *Sohrab* in 1814, *Hatim Taez* in 1818, *Aubid* in 1819, and the whole *Shahnama* in 1832; and of Nizami's *Layla and Majnun* in 1836. He was also the author of many volumes of verse, of translations from the Italian, etc. Among his numerous writings only one professional work is comprised. That one, curiously, is on Lithotrity; *The New Process of Perforating and Destroying the Stone in the Bladder*, published in 1831, nearly half a century before that great advance in surgery came into general use. Atkinson served as S.S. of the Army of the Indus in 1839–42, became a member of the Medical Board on 15th Feb., 1845, retired on 10th April, 1847, and died in London on 7th Aug., 1852.

Horace Hayman Wilson, (B. 1808), soon after his arrival in India was posted to the Calcutta Mint, of which he became Assay Master in 1816, and spent the whole of his service in the Mint, an appointment which left him ample leisure for his linguistic studies. In 1811 he became Secretary to the Asiatic Society. He also took a great interest in the drama, and managed the Calcutta theatre for many years; his wife was a granddaughter of Mrs. Siddons. In 1820 he was temporarily deputed to Benares to reorganize the Sanskrit College there. He returned to England in 1831, and retired on 28th Jan., 1834. On 15th March, 1832, he was elected Boden Professor of Sanskrit at Oxford, by 207 votes, against 200 for Dr. Mill. In 1836 he was appointed Librarian to the East India Company; and held both appointments till his death, which took place in London on 8th May, 1860. Wilson was the author of nearly thirty works of importance, historical and philological, many of which ran through several editions. Space can only be spared for the names of a few; a translation of Kalidasa's *Meghaduta*, or *Cloud Messenger*, 1813; *The Theatre of the Hindus*, three volumes, 1826–27; *Sanskrit-English Dictionary*, 1819; *The Vishnu Purana*, 1840;
Sanskrit Grammar, 1841; The Religious Sects of the Hindus, 1846; Rig-Veda Sanhita, six volumes, 1850–58, and a Glossary of Indian Judicial and Revenue terms, 1855. The last work is still in frequent use.

Gerhard Andreas Herklots, (M. 1818), translated the Qanoon-i-Islam or Customs of the Musalmans, published in 1834.

Aloys Sprenger, (B. 1843), was born at Nassereit in the Tyrol on 3rd Sept., 1813, and educated at Vienna and at Leyden, where he took the degree of M.D. in 1841. Soon after he joined, in 1844, he was appointed Principal of the Muhammadan College at Delhi. In 1848 he was transferred to Lucknow as Assistant Resident, and in 1850 to Calcutta, as Principal of the Madrasa, and Persian translator to Government. He retired on 10th March, 1859, and soon afterwards was appointed Professor of Oriental Languages at Berne University. He resigned that chair in 1881, and died at Heidelberg on 19th Dec., 1893. While in India he collected a great library of Oriental MSS., which was purchased for the Prussian State Library in 1858. He is said to have known twenty-five languages. The list of his works is long. They consist chiefly of catalogues and of editions of Persian MSS., but include History of Mahmud Ghuznah, 1847; Life of Muhammad, 1851; and a translation of the Gulistan, 1851.

Bellew's Pushtu Dictionary and Grammar have already been mentioned. A. S. Jayakar, (Bo. 1867), translated a zoological lexicon from the Arabic. The works of G. S. A. Ranking, (B. 1875), in Urdu and Persian, including an English-Hindustani Dictionary, 1905, may also be noted.

Ethnology.—A few works on this subject may here be enumerated, the treatises in Holwell's Historical Events; Customs and Manners of the Women of Persia, by J. Atkinson; Judaic Sabism by W. Tytler, (B. 1808); Fayet’s Serpent Worship; Shortt’s Tribes on the Neilgherries; Bellew's Races of Afghanistan and Ethnography of Afghanistan, and some of the works of L. A. Waddell, (B. 1880), Tribes of the Brahmaputra Valley and The Buddhism of Thibet.

IV. Literature

Under this head no member of the I.M.S. can claim a place of any importance. No work of anything like the first rank has ever been produced by any member of the Service.
One famous author, who holds a place in at least the second rank of English writers, made an attempt to enter the Company's service as a medical officer in the Madras Presidency. In Sir Leslie Stephen's life of Oliver Goldsmith, in the Dictionary of National Biography, it is stated that he was promised a post as Surgeon to a Factory on the Coromandel Coast, where he was to receive £100 a year as pay, and might expect to make £1000 a year by practice. (It may be stated that a Surgeon's pay, at the time, was still only £36 a year. The hypothetic value of the practice seems also to have been greatly exaggerated.) On 21st Dec., 1758, he was examined by the London College of Surgeons for a certificate of fitness to serve as Surgeon's Mate in India, and, though he held an M.D. degree, either from Louvain or Padua, was rejected.

Professional works do not come under the head of Literature. Works on Travel, Science, etc., have been separately considered above. Many men have tried their hands at writing novels, but without much success; the most readable, perhaps, being Golden Bullets, by W. W. Ireland, and Spirit of Storm, by Sir Ronald Ross. Leyden had some reputation as a minor poet, before he entered the service. Many other men have published volumes of verse, the most pretentious being the translation of Dante's Inferno into blank verse, issued by Joseph Hume, (B. 1799), the once well-known Radical M.P., in 1812; but none are at all likely to live. As instances, however, of interesting works in their respective lines may be given Indian Field Sports, by Daniel Johnson, (B. 1789); Sketches from Nepal, by H. A. Oldfield, (B. 1846), and Plagues and Pleasures of Life in Bengal, and Some Indian Friends and Acquaintances, by D. D. Cunningham, (B. 1868).

As a subject of Literature the I.M.S. does not figure largely. In almost all novels of Anglo-Indian life, members of the Service, civil or military, appear more or less among the characters. The hero of The Surgeon's Daughter, published in 1831, Sir Walter Scott's last and weakest novel, is Adam Hartley, a member of the Madras Medical Service. The period of this work is not distinctly stated, but must have been about 1770–80, as Hartley meets Haidar Ali, who died on 7th Dec., 1782. In Sir Arthur Conan Doyle's story and play, The Speckled Band, the chief character is Dr. Grimesby Rylott, a retired Indian Surgeon, who
commits a mysterious murder through the agency of a poisonous snake.

To Indian History members of the I.M.S. have contributed many volumes. If none can claim to rank among the great histories of English Literature, many are sound works of some historical importance, and many are interesting to read. Room can only be spared to give the bare names of a dozen or so of authors and their works: J. Atkinson, (B. 1807), *The Expedition into Afghanistan*; H. H. Wilson, (B. 1808), *Narrative of the Burmese War, 1824–26*; Wilson also compiled the last three volumes, the sixth to the ninth, of Mill's *History of British India*; R. H. Kennedy, (Bo. 1811), *Narrative of the Campaign of the Army of the Indus in Scinde and Kabul in 1838–39*; J. Bird, (Bo. 1818), *History of Gujarat*; Sir James Burnes, (Bo. 1821), *History of Cutch*; W. L. MacGregor, (B. 1826), *History of the Sikhs*; D. Macpherson, (M. 1836), *The War in China and Antiquities of Kertch*; T. Duka, (B. 1854), *Ozoma de Koros*; J. J. Halls, (B. 1854), *Two Months in Arrah in 1857*; W. W. Ireland, (B. 1856), *History of the Siege of Delhi*; D. Wright, (B. 1858), *History of Nepal*; Sir Henri Blanc, (Bo. 1859), *Narrative of Captivity in Abyssinia*; J. Duke, (B. 1872), *Recollections of the Kabul Campaign*; and finally that most charming book, *Echoes of Old Calcutta*, by H. E. Busteed, (M. 1855).

Art is not a subject which has appealed greatly to many Indian officers of any service. But the work of Colonel T. H. Hendley, (B. 1869), and his publications on Indian Art, during nearly a quarter of a century at Jaipur, should be noted; *Jeypore and its Arts, Alwar and its Art Treasures, Jeypore Enamels, Damascening on Steel, Asian Carpets, and Indian Jewellery*. Under the head of Art may also be mentioned Atkinson’s *Sketches in Afghanistan*, 1842, the original paintings for which now hang in the India Office, and some of the works of J. F. Watson and of Sir George Birdwood.
CHAPTER XXX

MEDICAL OFFICERS EMPLOYED IN ENGLAND

" Distat opus nostrum, sed fontibus exit ab isdem.
Artis et ingenuae cultor uterque sumus."
OVID, Epistolae ex Ponta, Book II, Epistle V, lines 65, 66.

From within a few years of its foundation, up to its dissolution, the East India Company always employed one or more medical officers in England, the number rising, in the first half of the nineteenth century, to about a dozen. Since the Crown succeeded the Company, the number has been smaller, but there are at present four medical appointments under the India Office held by retired members of the I.M.S.

The first of these posts was that held by John Woodall, appointed Surgeon General to the Company in 1614. His career has been described at length in Chap. III. He served the Company for nearly thirty years, resigning in May, 1643, when his nephew, Henry Boone, was appointed in his place. Boone, however, was not given the title of Surgeon General, and appears to have been paid by fees, not to have received a fixed salary.

For over a hundred years no more is heard of the Company's medical officers in England. But it is evident that the duties performed in his time by Woodall, such as examination of supplies of instruments and drugs, selection of medical officers for service on land or sea, and general professional advice, must have been discharged by some medical man, whether paid by salary or by fees.

In 1773, the Directors appointed a professional Board in London, to examine candidates for their medical service.* The names of the Surgeons or Physicians who formed this Board are not given in the orders.

The first medical man to hold this post, whose name can be

* See Chap. XXI, Appointment to the Service, Examinations.
given, was George Marten. The Gentleman's Magazine for July, 1793, records the death in London, on 3rd July, aged 77, of "George Marten, Esq., of Limehouse, many years Examining Surgeon to the East India Company."

On Marten's death, Drs. Lorimer and Hunter took his place. An extract from a Letter from Court, dated 8th July, 1795, quoted in the Proceedings of the Calcutta Medical Board of 6th Jan., 1796, notes the names of Dr. Lorimer and Dr. Hunter as being the two Physicians appointed to examine all medical indents from India.

Dr. Lorimer appears to have died soon after his appointment. A volume of Papers presented to the House of Commons on 14th April, 1806, containing lists of pensions and gratuities paid by the Company, notes the payment in 1794-95 "to Dr. Hunter for Dr. Lorimer, examining Surgeons, Surgeons Mates, etc., £225 15s. 0d." And in 1796 "To Dr. Lorimer's representatives for examining Ship's Journals, £181 2s. 6d."

The Proceedings of the Calcutta Medical Board of 30th March, 1797, quote an extract from a Letter from Court dated 27th July, 1796, to the effect that John Hunter had been appointed as their Examining Physician, to inspect medical indents, etc. No mention is made of Lorimer, who was presumably dead. The Parliamentary Papers of 14th April, 1806, quoted above, mention payments "to Dr. Hunter, for examining Surgeons, Surgeons Mates, etc.," yearly, from 1797-98 to 1805-06, inclusive. These payments vary in amount, the lowest being £112 17s. 6d. in 1798-99, and the highest £228 7s. 6d. in 1805-06.

Though completely overshadowed by his far greater contemporary of the same name, John Hunter the Anatomist, who died on 16th Oct., 1793, the Company's Examining Physician, John Hunter, was also a man of some note in his day. He was educated at Edinburgh, where he took the M.D. in 1775. After getting the diploma of L.R.C.P., London, in 1777, he entered the A.M.D., and served in Jamaica in 1781-83. On his return from the West Indies he left the Army and settled in practice in London. In 1788 he published a work entitled Observations on the Diseases of the Army in Jamaica, which reached a second edition in 1796 and a third in 1808. He was elected F.R.S. in 1787, F.R.C.P. in 1793, and subsequently was appointed Physician Extraordinary to the Prince of Wales. He died in London on 29th Jan., 1809.
Hunter's successor was William Dick, a retired officer of the I.M.S. He entered the Bengal Service as Assistant Surgeon on 8th Nov., 1781, became Surgeon on 20th Oct., 1794, put in most of his service as Superintendent, and owner, of the Calcutta Lunatic Asylum,* and retired on 17th Dec., 1802. He held the post up to 1818, and died in Scotland on 16th Jan., 1821.†

In 1815, William Frederick Chambers was appointed as Assistant to William Dick, and in 1818 succeeded him as Examining Physician. Chambers was born in India in 1786, and was educated at Cambridge and Edinburgh Universities and at St. George's Hospital. He took the degrees of B.A. Cantab. in 1808, M.A. in 1811, M.D. in 1818. In 1816 he was appointed Physician to St. George's Hospital, and in 1819 was elected F.R.C.P. He held the appointment of Examining Physician to the Company up to 1835, when he resigned, under the pressure of increasing practice as the leading Consulting Physician in London. In 1836 he was appointed Physician in Ordinary to the King, William IV, and in 1837 the Knighthood of the Royal Hanoverian Guelphic Order was conferred upon him. He was appointed Physician in Ordinary to Queen Victoria on her accession, in 1837, and to her mother, the Duchess of Kent, in 1839. He died at Lymington, aged 69, on 17th Dec., 1855.

When Chambers resigned, another retired officer of the A.M.D., John Robert Hume, was appointed in his place, and held the post for ten years, 1835 to 1845. Hume was born in 1781, educated at Glasgow and Edinburgh Universities, and entered the A.M.D., serving throughout the war in the Peninsula. When peace was made, he was placed on half-pay, and entered on practice in London. He took the M.D. at St. Andrews in 1816, and the L.R.C.P., London, in 1819. In 1834, he received the degree of D.C.L., Oxon, and in 1836 was elected F.R.C.P. He was also Physician to the Duke of Wellington. In 1836 he was appointed a Commissioner in Lunacy. He resigned his appointment under the Company in 1845, received the C.B. in 1850, when the Bath was first conferred upon Medical Officers, and died in London on 1st March, 1857.

Hume's successor was Dr. John Scott. He was born at

* See Chap. XLII, Hospitals in India.
† Another William Dick served in the Prince of Wales Island Medical Service; he retired on 6th Nov., 1807.
Benholme, in Kincardine, on 26th Jan., 1797, studied at Marischal College, Aberdeen, from 1810 to 1814, but did not graduate, afterwards at the London Hospital, and Edinburgh University, and took the L.R.C.S., Edinburgh, in 1817, and the M.D. in 1820. After making three voyages to the East, as Surgeon’s Mate of the Lady Melville in 1818-19, and Surgeon of the Farquharson in 1820-21 and in 1822-23, he settled in practice at Barnes in 1824. Among the candidates on Hume’s retirement were two far more distinguished men, Sir James Annesley and Ronald Martin, but the Chairman of the Court of Directors strongly supported Scott, who was his own medical attendant, and carried his appointment by a small majority. Scott held office till his death, which took place, from angina, on 18th Jan., 1859.

Shortly before Scott’s death, the Government of India had passed from the Company to the Crown. Sir James Ranald Martin, who succeeded Scott, was appointed “Physician to the Secretary of State for India in Council.” Martin was one of the most distinguished officers who have ever served in the I.M.S. He was born in Skye on 12th May, 1796, educated at St. George’s and at the Windmill Street School of Medicine, took the M.R.C.S. on 7th Oct., 1814, at the age of eighteen, and entered the Bengal Medical Service as Assistant Surgeon on 5th Sept., 1817. In 1820 he served with the Ramgarh Battalion in Sambalpur and Sinhbum, in 1821 he was appointed to the medical charge of the Bodyguard. Towards the end of 1823, on the advice of Simon Nicolson, then the leading physician in Calcutta, he was selected by the Governor General, Lord Amherst, to go to Haidarabad, to attend Sir Charles Metcalfe, the Resident, who was seriously ill. Having treated his patient with success, and having brought him to Calcutta, Martin rejoined the Bodyguard, and served with that corps in the first Burmese war of 1824-26, being present at the capture of Donabew. On his return from Burma he was appointed Assistant Surgeon to the General Hospital in Calcutta, a post which he had twice previously held for short periods. On 22nd Sept., 1828, he reached the rank of Surgeon, and in the same year was appointed Surgeon to the Governor General, Lord William Bentinck, on his arrival in India. In 1829 he was appointed Garrison Surgeon of Fort William, and officiating Surgeon of the General Hospital; in 1830 he became a Presidency Surgeon, and in Nov. of the same year was appointed to the
charge of the Calcutta Native Hospital, in the place of Simon Nicolson. These appointments he held till he left India in Jan., 1840, retiring, after two years' furlough, on 20th May, 1842.

While carrying on a large practice in Calcutta, along with much official work, Martin found time to put forward many plans for the amelioration of the city, and for the improvement of the prospects of his own service. In 1835 he suggested that medical officers should be called upon to write medico-topographical reports on their stations and districts, a suggestion which was adopted by Government. His own work, *Notes on the Medical Topography of Calcutta*, was published in 1837, a second edition following in 1839. In 1838 he submitted minutes on promotion and pension in the I.M.S.* After his retirement, in 1856, he submitted an important minute on the Status of the Army Medical Officer.† He strongly advocated the grant of military honours, such as the Bath, to the medical officers of the Army. The part he played in obtaining this recognition for the A.M.D. and the I.M.S. is shown by the following letter from General De Lacy Evans, written to congratulate Martin on his knighthood and C.B., and quoted in Fayrer's *Life of Martin*, page 168.

"My dear Sir,—I had the pleasure of calling on you yesterday merely to express to you in person the gratification I felt on the announcement of the honorary recognition of your most valuable public services by Her Majesty. This, though late, is, as reformers say, a step in the right direction.

"Under your instruction, and solely through the information afforded me by you, the motion I made in Parliament was the direct proximate cause of the Order of the Bath being extended to the Medical Department. And yet years have elapsed before the originator of this long withheld extension participated in the result. Better late than never. With hearty good wishes, Believe me, etc.,—De Lacy Evans."

The General remarks that, while Martin had a leading share in gaining this recognition for his Service, years elapsed before he himself reaped the benefit of it. Curiously, also, while the grant of increased pensions to the I.M.S. from 16th July, 1842, and from 19th April, 1844, was mainly due to Martin's advocacy, he himself retired a little too early to gain any advantage from the increase.

* These minutes are given in full in Fayrer's *Life of Sir James Ranald Martin*, pp. 84–91. Extracts are quoted in Chap. XVI, *Military and Civil*, and in Chap. XXXV, *The First Half of the Nineteenth Century*.

† This minute is given in full in Fayrer's *Life of Martin*, pp. 150–152, thence copied in Chap. XXXV, *The First Half of the Nineteenth Century*. 
Martin had been elected F.R.S. in 1845. The C.B. was conferred upon him on the 25th April, 1860, and in the same year he received the honour of knighthood. In 1844 he was selected as one of the original Fellows of the Royal College of Surgeons, when that grade was first instituted.

On 31st Oct., 1864, was established the Medical Board of the India Office, Martin, as Physician to the Secretary of State, being ex-officio President, and receiving the rank of I.G., that there might be no doubt of his seniority to the other members. Two other members were appointed; one an officer of the A.M.D., the other of the I.M.S. The A.M.D. member was dropped in 1873, and the Board reduced in numbers to two, the President and one Member, the number at which it still remains. Up to about 1889 the appointment of Member was usually filled by an I.M.S. officer on furlough, since that year by an officer on the retired list.

Martin resigned his appointments on 17th Nov., 1874, and died of bronchitis a few days later, on 27th Nov. He was succeeded by Sir Joseph Fayrer, who had held the post of Member of the Board for the two preceding years. In 1897, Fayrer published a Life of Inspector General Sir James Ranald Martin, from which most of the above facts are taken.

Sir Joseph Fayrer held office for just twenty years, retiring on 12th Jan., 1895. He was succeeded by Sir William Hooper, who retained the appointment till near the end of 1903, when he retired, and Sir Arthur Branfoot was appointed. Branfoot held the post for nearly ten years, and was succeeded on 28th Feb., 1913, by the present President, Sir Richard Havelock Charles, G.C.V.O.

The names of the medical officers employed in England by the Company, and later by the India Office, and those of the posts which they held, may be found in the successive half-yearly volumes of the *East India Register*, and, since that publication was discontinued in 1876, in the *India Office Lists*. The dates given in these lists are, of course, merely approximate.

The earliest of these appointments, in date, which appears in the *East India Register*, is that of Inspecting Surgeon for Invalid Seamen and Soldiers, shown for the first time in 1803, when the post was held by James Bureau, who continued in office till 1807, when he was succeeded by William Hopkins. In 1813, Samuel Proctor was appointed to this post, and held it for thirty-six
years, till 1849, when he was succeeded by W. G. Merrett, who retained it till 1858, when the post was abolished, on the demise of the Company.

In 1813 a second appointment of a similar kind appears in the lists, that of Inspecting Surgeon for Lascars and Chinese, the holder being Hilton Docker, who was succeeded by John Hyslop in 1815. Hyslop held the post up to 1834, when it was abolished, being no longer necessary, when the Company's monopoly of the China trade came to an end with the Charter of 1834, and the Company's fleet of Indiamen was sold off.

A third similar appointment, that of Inspecting Surgeon for Lascars and Chinese on board ships in the river, is first shown in 1817, and was held by Adam Parke from that date up to 1834, when it also was abolished.

An appointment, however, of much the same nature, that of Inspecting Surgeon, Gravesend, is shown from 1851 to 1858, when it came to an end. Charles Pinching held the post for these eight years.

In 1811 are given the names of Lewis Leese and Benjamin Travers as Surgeons to the Warehouse Department. In 1815, James Hume Spry took the place of Travers. Leese and Spry are shown as filling these posts up to 1838, after which both names and posts are omitted from the lists.

In the first third of the nineteenth century the East India Company kept up a Brigade of Volunteers, consisting of three Battalions of Infantry and one Company of Artillery, officered and manned by their servants in England. From 1803 to 1807 James Bureau was Surgeon to this Brigade, with Robert Cooke as Assistant Surgeon in 1806. From 1808 to 1813 Lewis Leese and Benjamin Travers were Surgeons to the Corps, showing that their appointments as Surgeons to the Warehouse Department probably existed for some years before they were included in the Register. During the years 1814 to 1822 inclusive, the Corps disappears from the lists, but reappears in 1823. Leese and Spry were Surgeons to the Brigade up to 1834, when it was finally disembodied, on 25th March, 1834.

Towards the end of the eighteenth century, the Company instituted a recruiting depot in England for its European troops in India. At first, and during the early part of the nineteenth century, this depot was situated in the Isle of Wight. In 1815, it
was transferred to Chatham, and in 1844 to Warley in Essex. It was abolished in 1860, being no longer required when the Crown had taken over the Company’s army.

The first medical officer of this depot whose name has been preserved was a Dr. Ogle, to whose widow a pension of £20 was granted by the Company on 28th Dec., 1804.* Dr. Thomas Ogle, presumably his son, held the post from 1803 to 1822, when he was succeeded by Surgeon William Albert Davis, a retired Bombay officer. Davis entered that Service on 5th Dec., 1799, became Surgeon on 5th March, 1812, went home on sick leave early in 1813, and took the M.D. at St. Andrews in that year, retiring on 24th Oct., 1814. He held the post up till 1837, and died at Brompton on 17th July, 1838. From 1826 to 1832 Robert Elliot is shown as Assistant Surgeon to the Recruiting Depot. Elliot had spent fifteen years in the Sea Service of the Company, sailing as Surgeon’s Mate of the Contis in 1908–10, then four voyages as Surgeon of the Ceres, from 1810 to 1820, and two as Surgeon of the Kellie Castle in 1821–22 and 1823–24. He succeeded Davis in 1837, but held the appointment for only three years. His successor, appointed in Jan., 1841, was Surgeon Alexander Russell Jackson, a retired Bengal officer, who took the M.D. at Edinburgh in 1818, the M.R.C.S. in 1819, and got a commission as Assistant Surgeon on 15th April, 1820, becoming Surgeon on 18th June, 1831. He was one of the original Fellows of the Royal College of Surgeons, elected in 1844. He retained the post till his death at Warley Barracks on 28th July, 1855. He was succeeded by another retired officer of the I.M.S., Duncan Stewart, who took the diploma of L.R.C.S.E. in 1823, and the M.D. at King’s College, Aberdeen, in 1824. He entered the Bombay Service as Assistant Surgeon on 15th April, 1825, was transferred to Bengal on 5th Oct., 1825, and became Surgeon on 9th March, 1839. He was appointed to the Depot on 2nd Oct., 1855, and retired from the I.M.S. on 9th Oct., retaining the post till it was abolished in 1860. He died at Tunbridge Wells on 26th March, 1875.

From 1844 to 1860, an Assistant Surgeon was also retained on the staff of the Depot. This appointment was held by a succession of I.M.S. officers on furlough, some fourteen men in turn during the sixteen years the post was in existence.

The appointment of Surgeon to Poplar Hospital appears for

* Papers presented to the House of Commons, 14th April, 1806, p. 3.
the first time in the *East India Register* of 1828, when it was held
by Francis Beale, who retained the post till 1851, when he was
succeeded by Thomas Gray, who held office up till 1858. On the
abolition of the Company, the appointment, as an appointment
under the Company, necessarily came to an end. A hospital at
Poplar, however, still exists, the Poplar Hospital for accidents,
at East India Dock, established in 1855.

From 1809 to 1819 the name of Charles Maclean is shown as
Lecturer on Diseases of Hot Climates. The *Dictionary of National
Biography* states that Maclean was appointed to this post in 1809
or 1810, that he was travelling in the East from 1815 to 1817,
and was reappointed to the Lectureship in 1818. An account
of Maclean's stormy career is given in Chap. XXIV, *The Sea
Service*, pp. 60, 61.

For the eight years from 1818 to 1825 John Borthwick Gil-
christ's name is given as Lecturer on Hindustani. Gilchrist was born
in 1759, and, after serving in the Navy, was appointed Assistant
Surgeon, Bengal, in G.O. of 5th April, 1783. He became Surgeon
on 21st Oct., 1794. A Public Letter from Calcutta, dated 25th
Dec., 1798, states in paras. 114-118 that Mr. Gilchrist has been
appointed to give daily lessons to the junior servants, (civilians),
and that the allowances drawn by each writer for *Munshis* have
been abolished, and given to Mr. Gilchrist. When the College of
Fort William was founded by Lord Wellesley in 1800, Gilchrist
was appointed its Head or Principal. He returned to England
in 1804, and received the degree of LL.D. Edinburgh on 30th
Oct., 1804. He retired on 6th Jan., 1809, and died in Paris on
9th Jan., 1841. His successor as Lecturer on Hindustani was the
famous Orientalist, Duncan Forbes, compiler of Forbes' *Hindus-
tani Dictionary, Grammar*, and many other works.

A greater Oriental scholar, Horace Hayman Wilson, was
appointed Librarian to the East India Company in 1836, and held
that post until his death on 8th May, 1860.* This appointment,
Librarian of the India Office, still exists, but since Wilson's death
has not been held by a medical officer.

Thomas Horsfield was appointed Keeper of the Company's
Museum in 1818, but his name first appears in the *East India
Register* in 1837, as holding that post, which he retained for over

* For Wilson, Royle, Watson, and Birdwood, see also Chap. XXIX, *Other
Extra-professional Work*. 
forty years, till his death in London on 24th July, 1859. Horsfield was born at Bethlehem in Pennsylvania on 12th May, 1773, took the degree of M.D. at Pennsylvania University in 1798, and went to Java as a Naturalist in 1800, serving in that island under both the Dutch and English governments. In 1818 he accompanied Sir Thomas Raffles to England; in 1828 he was elected F.R.S. He was the author of several works on Natural History, *Zoological Researches in Java*, 1821; *Planta Javanica variores*, London, 1838 to 1852, and, with Sir William Jardine, *Illustrations of Ornithology*, 1840.

After Horsfield's death, the post of Keeper of the Museum was held by William Downing from 1860 to 1866, when it was combined with the appointment of Reporter on the products of India.

In 1838, John Forbes Royle was appointed to a post in the East India House as Officer in charge of correspondence relating to the Vegetable Products of India, or Supt. of the Company's Economic Department, and held the post till his death. Royle was born at Cawnpore on 20th May, 1798, and entered the Bengal Medical Service on 30th Sept., 1819. He became Surgeon on 29th July, 1830, and retired on 25th April, 1837. For most of his service in India he held the appointment of Supt. of the Botanical Garden at Saharanpur. In 1837 he took the degree of M.D. at Munich, and was elected F.R.S. He died at Acton on 2nd Jan., 1858.

On Royle's death he was succeeded in the post of Reporter on the Products of India by John Forbes Watson, an officer of the Bombay Medical Service. Watson was born in Scotland in 1827, educated at King's College, Aberdeen, where he took the degrees of M.A. in 1847 and M.D. in 1848, also studied in Edinburgh and Paris, and took the M.R.C.S. in 1848. His commission as Assistant Surgeon was dated 31st Aug., 1850. After officiating as Lecturer on Physiology and Professor of Medicine in the Grant Medical College, Bombay, he came home on sick leave, and, getting Royle's appointment in the India Office, never returned to India. In 1866 he was also appointed Keeper of the India Museum, and held both appointments until he retired in 1879. He received the LL.D. at Aberdeen in 1875, and was a Commander of the Order of Francis Joseph of Austria. He died at Norwood on 29th July, 1892. Besides his book on the *Costumes*
of the People of India, he edited Meadows Taylor’s work, The People of India, six volumes, London, 1868 to 1872.

Another ex-officer of the Bombay Medical Service, George Christopher Molesworth Birdwood, was in 1875 appointed Curator of the Museum and Assistant Reporter on the products of India. Birdwood was born at Belgaum on 8th Dec., 1832, educated at Edinburgh, where he took the degree of M.D., as well as the L.R.C.S., in 1854, and entered the I.M.S. as Assistant Surgeon on 20th Dec., 1854. Ten years later, on 27th Dec., 1864, he resigned the Service, after holding the Professorships, first of Anatomy and Physiology, and later of Botany and Materia Medica, in the Grant Medical College. He also served as Sheriff of Bombay in 1864. In 1879 he was appointed Special Assistant in the Revenue, Statistics, and Commerce Department of the India Office, and held that post until 1899, when he retired.

In the East India Register from 1843 to 1859 is shown the appointment of medical officer to the Company’s Military Seminary, at Addiscombe, where the officers of the Artillery and Engineers of the Company’s army were educated. This post was held throughout these years by Edward Westall. When the Crown took over the Government of India from the Company, Addiscombe was closed.

In 1846, the Company instituted an Asylum for insane soldiers of their army, at Pembroke House. When the Company came to an end, this Asylum was kept on by Government, received the name of Royal India Asylum, and was transferred to Ealing. Thomas Beath Christie joined the Asylum as Assistant Supt. in 1854, went to York Asylum in 1857, and returned to Ealing as Supt. in 1870, holding that post for over twenty years, till the Asylum was closed on 31st Dec., 1891. In 1887 he received the C.I.E. He died on 15th Jan., 1892, a few days after his retirement.

In 1859, the India Office appointed an Examiner of Surgical Instruments, Mr. George Pollock, Surgeon to St. George’s Hospital, receiving the post, which he held till 1892. He was also Examiner in Surgery at the examination for admission to the A.M.D. and I.M.S. He died in 1897. Since Mr. Pollock's retirement this post has been held by retired officers of the I.M.S., Surgeon Major N. C. Macnamara holding it from 1892 to 1907.

An Examiner of Medical Stores was appointed in 1883, Surgeon Major F. N. Macnamara holding the post up to 1899, when he
was succeeded by Lieut. Colonel C. J. H. Warden, late Chemical Examiner and Professor of Chemistry, and afterwards Medical Storekeeper, in Calcutta. Warden died within a year, on 18th July, 1900, when Lieut. Colonel James Reid, who had been his predecessor as Medical Storekeeper in Calcutta, received the post, which he held up till 1911. Reid's successor was Lieut. Colonel L. J. Van Geyzel, who had been Chemical Examiner and Professor of Chemistry at Madras for twenty years.

The Professorship of Military Medicine in the Army Medical School, first at Fort Pitt, Chatham, from 1860 to 1862, and at Netley from 1862 till the Netley school was finally closed in 1905, was always held by a retired officer of the I.M.S.*

Though the appointment was not in England, and was held by officers of the A.M.D., not of the I.M.S., it may be mentioned here that the India Office maintained a medical officer in Egypt from 1868 to 1871, with the title of P.M.O., Overland Transport Service.

* See Chap. XXII, Appointment to the Service, Examinations.
CHAPTER XXXI

AFTER RETIREMENT

"Dabit deus his quoque finem."


To most officers of the Indian Services the day of retirement comes as the close of their active life. Some leave India with pleasure, some with regret. But the great majority end their life's work when they quit the East for good. In most cases, indeed, this is inevitable. Combatant officers of the Army, members of the Civil Service, of the Police, and of many of the other Services, have no other profession than that to which they have devoted their lives in India, and no possibility of following that calling anywhere else.

Comparatively few have a profession which can be practised in any part of the world. Among these few are included officers of the I.M.S., also Engineers. The profession of medicine knows no boundaries. Its practice can be carried out in Europe as well as in India. Still, the great majority, even of the I.M.S., make no attempt to practise their profession after retirement. A few do so. Some of those who have achieved reputation in India set up as Consultants, and a few have met with great success, notably Martin and Fayrer, not to mention men still living and working. A few go in for general practice. Some have applied themselves to study, scientific or literary; a few have devoted their time and their energies to public work. The greater number, however, wish for only rest and some reasonable amount of recreation. Many, indeed, are too broken in health to be capable of any serious work.

The case is different with those who, either on account of reasons of health, or from dislike to the conditions of life in the East, or from any other motive, have severed their connection with the Service in their early years, before they have earned a
pension. Unless blessed with private means, which is uncommon, they are faced with the necessity of earning their living in some other way, and must work in order to do so; and, naturally, practise the profession of medicine, the only one they know. Some such men, who have left the I.M.S. after a few years' service, have attained considerable distinction in their profession at home.

To give some account of the work done by men who have served in the I.M.S., after their resignation of or retirement from the Service, is the object of this chapter. Those who have continued to serve the Government, of the Company previous to 1858, or of the Crown since that year, are not included here. Their work has already been treated in Chap. XXX, Medical Officers employed in England.

Almost all the officers mentioned in this chapter were Bengal men. The most successful of all, however, Sir John McNeill, belonged to Bombay. And the most distinguished I.M.S. officer of the present day, Sir Ronald Ross, was a member of the Madras Service.

The first member of the Service who distinguished himself in his after life in England was Bussick Harwood. He was born at Newmarket in 1745, went out to India as Surgeon of the Indiaman Harcourt, sailing on 22nd April, 1773, and was appointed Assistant Surgeon in Bengal on 19th Feb., 1774. In Bengal Cons. of 29th April, 1776, he was posted as Surgeon to attend the officers deputed to serve the Nawab of Oudh, and in that province he spent most of his short Indian service. He appears to have made a good deal of money by practice there among the members of the Court of Oudh. He served in India, however, for barely four years, resigning on 4th Feb., 1778. Returning to England, he entered at Christ's College, Cambridge, where he took the degree of M.B. in 1785, with a thesis on the transfusion of the blood, a subject on which he carried out numerous experiments, with considerable success. In the same year, 1785, he was appointed Professor of Anatomy at Cambridge. He took the M.D. degree there in 1790, having previously been elected F.R.S. on 27th May, 1784. In 1800, he was appointed Downing Professor of Medicine, continuing also to hold the Anatomical chair. He was knighted in 1806, and died at Downing College, Cambridge, on 10th Nov., 1814. In 1796 he published at Cambridge the first
part of *A System of Comparative Anatomy and Physiology*, 4to, 72 pages; but never carried the work further.

John Fullarton was born in 1780, educated at Glasgow, where he took the M.A. in 1794 and the M.D. in 1800, and entered the I.M.S. as Assistant Surgeon, Bengal, on 1st Aug., 1802. Resigning on 21st Oct., 1812, he entered the house of Alexander and Co., bankers, Calcutta, as a partner, leaving India, with a large fortune, in 1823. He was afterwards employed by Government, from 1834 to 1838, on a special mission to China. In 1844 he published a work *On the Regulation of Currencies*. He died on 24th Oct., 1849.

John McNeill entered the Bombay Service as Assistant Surgeon on 6th Sept., 1816. His career has been described in Chap. XXVIII, *Surgeons as Civil and Political Officers*, p. 130.

William Knott was educated at St. George's, and took the M.R.C.S. in 1814. He was appointed temporary Assistant Surgeon in Bengal from 3rd July, 1818, but resigned a year later, on appointment by the Commander-in-Chief as Hospital Mate to the British troops in Ceylon. Retiring from the A.M.D. in 1835, he received the post of medical attendant on the household of the Queen Dowager, at Canford House, Dorset.

William Wrighte Hewett was born on 5th Dec., 1795, took the M.D. at Marischal College, Aberdeen, in 1821, and entered the I.M.S. as Assistant Surgeon, Bengal, on 5th May, 1821. He resigned from 16th April, 1830, and subsequently became Apothecary to St. George's Hospital and Physician to King William IV. He was the father of Admiral Sir William Hewett.

James Adair Laurie was born on 25th June, 1801, educated at Glasgow, where he became M.A. in 1820 and M.D. in 1822, and received a commission as Assistant Surgeon, Bengal, on 12th March, 1823. Going home sick in 1828, he retired on Lord Clive's Fund from 18th June, 1831. In 1830 he took the diploma of M.R.C.P., Glasgow. From 1829 to 1852 he was Professor of Surgery in Anderson's College, Glasgow; and held the same chair in Glasgow University from 1852 till his death, which took place at Bridge of Allan on 23rd Nov., 1859.

Frederic John Mouat was born at Maidstone in July, 1816, educated at University College, London, Edinburgh University, and Paris, took the M.R.C.S. in 1838, and the M.D., Edinburgh in 1839, and was one of the original Fellows of the Royal College of
Surgeons, London, elected in 1844. He entered the I.M.S. as Assistant Surgeon, Bengal, on 3rd Jan., 1840, became Surgeon on 1st Dec., 1853, and Surgeon Major on 3rd Jan., 1860. He was appointed Professor of Chemistry and Materia Medica in the Calcutta Medical College on 17th Dec., 1841, and also served as Secretary of the College from 1841 to 1851. On 15th Nov., 1849, he became Professor of Medicine, and, on the opening of the Medical College Hospital in 1853, ex-officio First Physician. In 1855 he was appointed I.G. of Jails in Bengal, and held that appointment till he retired on 3rd Dec., 1870.

In Nov., 1857, Mouat was deputed to the Andaman Islands with a party to choose a site for a convict settlement there, an expedition which resulted in the foundation of Port Blair. In a fight with the Andamanese he was wounded in the mouth and had two ribs broken. The result of his experiences was embodied in a book, *Adventures and Researches among the Andaman Islands*, 8vo, London, 1863.

After his retirement from the I.M.S., Mouat was appointed, in 1874, one of the Medical Inspectors of the Local Government Board in England, and held that office for thirteen years, until 1887. He died in London on 12th January, 1897. While serving as Inspector, he was employed on one most singular and interesting duty. In 1876, it was found necessary to restore the Church of St. Peter ad Vincula in the Tower of London. The removal of the pavement in the chancel was begun on 9th Nov., 1876, in the presence of Mr. Gerard Noel, First Commissioner of Works, Colonel Milman, resident Governor of the Tower; Sir Spencer Ponsonby Fane, Controller, Lord Chamberlain's department; Mr. Doyne Bell, antiquary; Dr. Mouat, representing the Local Government Board, and Lord Redesdale. Among those buried under the chancel were found and identified the skeletons of Queen Anne Boleyn, and of Lady Rochford, companion to Queen Katharine Howard, executed by order of Henry VIII; of the Duke of Somerset, Lord Protector, beheaded under Edward VI; of the Duke of Northumberland, father-in-law of Lady Jane Grey, executed under Queen Mary; and of James, Duke of Monmouth, son of Charles II. The skeleton of Katharine Howard was not found, but her young bones may well have disappeared, three centuries having elapsed since her execution.*


H.I.M.S.—VOL. II.
Charles Murchison was born in Jamaica on 26th July, 1830, studied at Aberdeen and Edinburgh Universities, took the L.R.C.S., Edinburgh, in 1850, and the M.D., Edinburgh, with honours, in 1851, receiving a gold medal for his thesis, *A Contribution to the Pathology of Tumours*. Entering the I.M.S. as Assistant Surgeon, Bengal, on 4th April, 1853, he acted as Professor of Chemistry in Calcutta from 1st June to 26th Oct., 1853, after which he served in Burma. He resigned in Oct., 1855, and returned home. In the same year, 1855, he became M.R.C.P., London, and was appointed Physician to Westminster Dispensary, and Lecturer on Botany and Curator of the Museum at St. Mary's Hospital. From 1856 to 1860 he was Assistant Physician to King's College Hospital. In 1859 he was elected F.R.C.P., London, and in 1860 went to Middlesex Hospital as Assistant Physician and Lecturer on Pathology, becoming full Physician in 1866, and retaining the post till 1871. During these years he served also on the staff of the London Fever Hospital, as Assistant Physician from 1856 to 1861, as Physician from 1861 to 1880. He was elected F.R.S. in 1866; in 1870 Edinburgh conferred upon him the degree of L.L.D. In 1871 he went to St. Thomas's Hospital as Physician and Lecturer on Medicine. He was also Physician to T.R.H. the Duke and Duchess of Connaught. He died suddenly in London, on 23rd April, 1879, of aortic disease, while seeing patients in his consulting room. Murchison was a voluminous author, his chief works being a translation of Frerich's *Treatise of Diseases of the Liver*, published in two volumes by the Sydenham Society in 1860-61; *Lectures on Diseases of the Liver*, 1867; and *A Treatise on the Continued Fevers of Great Britain*, 1862. Both these ran through several editions.

Nottidge Charles Macnamara was born on 14th Oct., 1832, became M.R.C.S. in 1854, and entered the Bengal Army as Assistant Surgeon on 4th Nov., 1854, becoming Surgeon on 4th Nov., 1866, Surgeon Major on 1st July, 1873, and retiring on 15th April, 1876. He served in the Sonthal campaign of 1855-56, and held the chair of Ophthalmic Surgery in Calcutta from December, 1863, till his retirement. In 1875 he became F.R.C.S., England, and F.R.C.S.I. in 1887. After his retirement he was Surgeon and Lecturer on Clinical Surgery at the Westminster Hospital, and Consulting Surgeon to the Westminster Ophthalmic Hospital. He was a member of the Council of the Royal College of Surgeons,
England, from 1885 to 1901, Vice President in 1893 and 1896. The list of his works is a long one. The chief are *Lectures on Diseases of the Eye*, London and Calcutta, 1866, fifth edition, 1891; *A Treatise on Asiatic Cholera*, 1870; *History of Asiatic Cholera*, 1876; *Diseases of Bones and Joints*, 1878, third edition, 1887; *The Story of an Irish Sept*, 1900; and *The Origin and Character of the British People*, 1900.

William Wotherspoon Ireland, a descendant of John Knox, through the Reformer's daughter, Mrs. Welsh, was born on 27th Oct., 1832, educated at Edinburgh, where he took the M.D. in 1855, and at Paris, and got a commission as Assistant Surgeon, Bengal, on 4th Aug., 1856. He served in the Mutiny, at the siege of Delhi, where he was severely wounded, being shot through the head, and returned as killed.* Three years' sick leave failed to restore his health, and he resigned from 1st Aug., 1861. After some years spent at Madeira and on the Continent, he took up the post of Medical Supt. of the Scottish National Institution for Imbecile Children at Larbert. Many years afterwards he became Supt. of a private institution for feeble-minded children at Prestonpans. He died at Musselburgh on 17th May, 1909, more than fifty years after having been officially returned as killed in action. Ireland also was a prolific writer, mostly on his own specialty. His chief works are *History of the Siege of Delhi*, 1861; *Randolph Methyl, a story of Anglo-Indian Life*, 1863; *On Idiocy and Imbecility*, 1877, republished in an enlarged form in 1898 under the title of *The Mental Affections of Children; The Blot on the Brain*, 1885; *Through the Ivory Gate*, 1889; *Golden Bullets, a story of the days of Akbar and Elizabeth*, 1890, the best novel written by any member of the I.M.S.; and *The Life of Sir Harry Vane*, 1905.

William Smoultt Playfair was born at St. Andrews on 27th July, 1835, educated there, in Paris, and at Edinburgh, where he took the M.D. in 1856, and the L.R.C.S. in 1857, and entered the I.M.S. as Assistant Surgeon, Bengal, on 4th Aug., 1857, passing first, and served in the Mutiny, but had to take sick leave soon after, and resigned from 20th Oct., 1864. While on furlough he got the post of Assistant Physician and Lecturer on Obstetrics at King's College Hospital in 1863, becoming Physician in 1873, and retaining the appointment till 1898. He took the F.R.C.S.,

* See Chap. XXXVI, *The Medical Services in the Mutiny.*
Edinburgh, in 1861, the M.R.C.P., London, in 1863, and was elected F.R.C.P., London, in 1870. St. Andrews gave him the LL.D. in 1885, Edinburgh in 1898. He also received the Order of the Crown of Roumania as Grand Officer. He died at St. Andrews on 13th Aug., 1903. Playfair's first book was A Handbook of Obstetric Operations, 1856; but his best known work is his Treatise on the Science and Practice of Midwifery, 1876, a work celebrated not only for its matter, but for its easy style, being one of the most readable professional works now current, and one which reached its ninth edition in 1898, in little more than twenty years. He also contributed articles on his own specialty to Quain's Dictionary of Medicine and Allbutt's System of Medicine.

A few men who are still living and working may also be mentioned. Lieut. Colonel G. S. A. Ranking, (B. 1875), for long Examiner in Oriental Languages at Calcutta, has been Persian Lecturer at Oxford since 1905. Lieut. Colonel P. J. Freyer, (B. 1875), has been Surgeon to St. Peter's Hospital, London, since 1897, having during his Indian career, by his work in Litholapaxy, achieved a great reputation, which has been still further enhanced, since his retirement, by his development of the operation of Prostatectomy. Lieut. Colonel L. A. Waddell, (B. 1880), was appointed Professor of Tibetan in University College, London, when he retired in 1906. Lieut. Colonel Sir Ronald Ross, (M. 1881), while still serving, worked out the development of malarial fever through the mosquito; and since he retired on 31st July, 1899, has enhanced his reputation, the highest achieved by any member of the Service in the past or the present generation, by his work in the Liverpool School of Tropical Medicine. The list of the distinctions he has earned is long, and shows that, even now, a prophet may be not without honour in his own country: Parkes Memorial Prize, 1895; F.R.S., 6th June, 1901; Honorary F.R.C.S., England, 1901; Nobel prize in Medicine, 1902; C.B., 27th June, 1902; D.Sc., Dublin, 1904, and Leeds, 1909; LL.D., Aberdeen, 1906; Commander of the Order of Leopold II of Belgium, 1907; K.C.B., 19th June, 1911. Lieut. Colonel Sir David Prain, (B. 1884), was appointed Director of the Royal Botanical Gardens at Kew in Dec., 1905. He also has earned numerous honours: LL.D. Aberdeen, 1900; F.R.S., 1905; C.I.E., 29th June, 1906; Polar Star of Sweden, 1910; LL.D., St. Andrews, 1911; C.M.G., 1st Jan., 1912; Knight, 14th June, 1912.
During the last fifteen years several retired officers of the I.M.S. have been appointed Lecturers on Tropical Medicine at various Medical Schools; G. A. Maconachie, (B. 1867), at Aberdeen in 1899; A. Crombie, (B. 1872), at Middlesex in 1899; J. Moorhead, (B. 1876), at Belfast in 1901-02; Sir R. Ross, (M. 1881), first in the Liverpool and afterwards in the London School of Tropical Medicine; A. W. Alcock, (B. 1885), on Medical Entomology, London School of Tropical Medicine, 1913; D. G. Marshall, (B. 1888), in the Edinburgh Extramural School in 1905, and in Edinburgh University in 1909; and S. R. Douglas, (I.M.S. 1898), on Bacteriology at St. Mary's in 1909. A. E. H. Pinch, (B. 1896), was Superintendent of the Medical Graduates' College and Polyclinic, London, from 1899 to 1909, and in the latter year was appointed Director of the Radium Institute, London.

The number of retired officers of the I.M.S. who have sat in the House of Commons is not large. The first seems to have been Joseph Hume, who entered the Bengal Service on 27th Aug. 1799, and resigned in Feb., 1808.* He was elected M.P. for Weymouth, as a Tory, in Jan., 1812, but only retained his seat for a few months. In 1818 he was elected for the Montrose Burghs, and became a Radical. He sat for that constituency until 1830, for Middlesex from 1830 till 1837, when he was defeated, for Kilkenny town from 1837 to 1841, and again for the Montrose Burghs from 1842 till his death on 20th Feb., 1855.

John Fleming was born in 1747, and entered the I.M.S. as Assistant Surgeon, Bengal, on 17th Aug., 1768, becoming Surgeon on 11th Dec., 1771, and, on the establishment of the Medical Board on 25th May, 1786, junior Member of the Board, instances of very rapid promotion. He became President of the Board on 8th Dec., 1800, and held that post, with an interval of furlough from 24th Dec., 1802 to 31st July, 1805, until 17th Dec., 1811, when he again took furlough to England. He retired on 10th Nov., 1813, after 45 years' service, for twenty-seven years of which he had been a Member of the Board. In 1818 he was elected M.P. for Gatton,† a pocket borough disfranchised in 1832,

* For Hume, see Chap. XXIV, The Sea Service.
† Gatton is near Reigate, in Surrey. At a by-election in 1816, there were only three electors on the roll, of whom one was abroad, and one did not vote; the Tory candidate was returned by one vote, the Whig candidate receiving none.
but only retained his seat for two years, till 1820, when he did not stand again. He died in London on 17th May, 1829.*

Charles Mackinnon served as Surgeon of the Indiaman *Duke of Buccleugh* in 1794-95, and of the *Nottingham* in 1796-98. In 1806 he was appointed Surgeon of the Company's factory at Canton in China, but appears not to have taken up that appointment, as he joined the Prince of Wales Island Medical Service from 14th March, 1806. He retired on 14th Nov., 1821, and was elected M.P. for Ipswich in 1826, and again in 1830 and 1832. He died at Beauvais in France on 19th Oct., 1833.

A gap of over forty years elapsed before the I.M.S. was again represented in Parliament. John James Trevor Lawrence, son of the well-known Surgeon of St. Bartholomew's, Sir William Lawrence, entered the I.M.S. as Assistant Surgeon, Bengal, on 20th Jan., 1854. He became Surgeon on 1st Jan., 1866, and resigned a few weeks later, on 24th Feb. On his father's death, on 5th July, 1867, he succeeded to his Baronetcy, which had been conferred only a few weeks before, on 30th April. He was elected as a Conservative for Mid-Surrey in 1875, and sat for that constituency till 1885, and for the Reigate Division of Surrey from 1885 to 1892, when he resigned, not coming forward at the general election in that year. He was also Treasurer of St. Bartholomew's from 1892 to 1904; and received the K.C.V.O. on 9th Nov., 1902. He died at Burford House, Dorking, on 22nd Dec., 1913.

William Guyer Hunter received a commission as Assistant Surgeon, Bombay, on 21st Feb., 1850, became Surgeon on 15th June, 1864, Surgeon Major on 21st Feb., 1870, D.S.G. on 29th Sept., 1876, and S.G. on 15th Sept., 1877, retiring on 31st March, 1880. He was Vice Chancellor of Bombay University in 1879, was appointed Honorary Surgeon to the Queen on 10th April, 1880, and, after retiring, for his services as a member of the Cholera Commission in Egypt in 1883, received the K.C.M.G. on 19th Feb., 1884. He was elected as Conservative M.P. for Central Hackney in 1885, and represented that borough till 1892, when he did not seek re-election. He died at Anerley, in Kent, on 16th March, 1902.

* The *Dictionary of National Biography* gives the date of Fleming's death as 10th May, 1815; the *East India Register* gives 25th Dec., 1827. The *Gentleman's Magazine* for June, 1815, records the death of a Dr. John Fleming, M.D., on 10th May, 1815. But the same magazine, for May, 1829, records the death of "John Fleming, late Physician General East India Company," at Gloucester Place, London, on 17th May, 1829. This date, 17th May, 1829, is also given in the *C.G.* of 14th Sept., 1829, and in the * Asiatic Journal* for June, 1829, p. 803.
Sir George Scott Robertson entered the Bengal Medical Service on 30th March, 1878, and retired on 12th October, 1899.* In 1900 he unsuccessfully contested Stirling County as a Liberal, and was elected for Central Bradford in 1906, and again in Jan. and Dec., 1910.

A few other members of the I.M.S. have sought a seat in the House without success. In recent years Brigade Surgeon J. E. T. Aitchison, who entered the Bengal Service on 27th Jan., 1858, and retired on 14th May, 1888, stood for the counties of Clackmannan and Kinross as a Liberal Unionist in 1892.† Colonel Oliver Duke stood, as a Conservative, for the South or Luton Division of Bedfordshire three times, at the general election of 1892, at a by-election later in the same year, and in 1895, greatly reducing the adverse majority on the two later occasions, but failing to gain the seat. He also stood, but again without success, for the Stirling Burghs in 1900, against Sir Henry Campbell-Bannerman.

A few men have left the I.M.S. for the Church. Buchan Warren Wright, (M. 1829), resigned on 25th Feb., 1837, and William French Clay, (Bo. 1848), on 12th March, 1858, both for ordination in the Church of England, and spent the rest of their lives as clergymen. Peter Cullen, (B. 1859), after retiring on 1st June, 1892, was ordained priest in 1900. On the other hand, the famous John Leyden was licensed as a preacher in the Church of Scotland in May, 1798, before he turned his attention to medicine. And John Taylor had worked as a missionary in Madras, under the London Missionary Society, from 1805, till he was appointed to the Bombay Medical Service in 1808, as an Acting Assistant Surgeon, being afterwards confirmed from 26th March, 1809.‡

Though not, perhaps, exactly pertinent to this chapter, it may be mentioned here that Kenneth Murchison, (B. 1776), was the father of the famous geologist, Sir Roderick Murchison. George Playfair, (B. 1805), was the father of Lord Playfair, also of Dr. W. S. Playfair, whose work has been briefly described

* For Sir George Robertson's career in India, see Chap. XXVIII, Surgeons as Civil and Political Officers.
† For Aitchison, see also Chap. XXIX, Other Extra-professional Work.
above; and David Woodburn, (B. 1827), of Sir John Woodburn, Lieutenant Governor of Bengal. Mungo Park, (M. 1822), was the eldest son of the great African explorer, who himself had served in the Company's Marine Service.* Alexander Christison, (B. 1851), was the eldest son of Sir Robert Christison, and inherited the Baronetcy conferred upon his father. Francis Sempill, (B. 1814), was the second son of Hugh, thirteenth Baron Sempill, and is the only peer's son who has entered the I.M.S. John Brown, (B. 1797), who died at Cuttack, a Member of the Medical Board, on 23rd July, 1833, was the father of General Sir Samuel James Browne, V.C., G.C.B., K.C.S.I., the inventor of the Sam Browne belt. Sir Samuel's wife was the daughter of an I.M.S. officer, Surgeon Richard Sherwood,* (M. 1799), who was dangerously wounded on the Indianman Kent, when she was taken by the French privateer La Confiance off the Sandheads on 7th Oct., 1800.

* See Chap. XXIV, The Sea Service, for Mungo Park; and Chap. XXXII, War Services, for Sherwood and the capture of the Kent.
CHAPTER XXXII

WAR SERVICES

"Pride, pomp, and circumstance of glorious war."
SHAKESPEARE, Othello, Act III. Scene 3.

The early servants of the Company went to the East as traders, not as soldiers. Nothing was farther from their desires than war. They sought in India neither glory, nor power, nor dominion, but simply commercial profit. Still, even in early times, the necessity of fighting for their rights, even for their existence, was occasionally forced upon them. Before the end of the seventeenth century they had to wage two serious wars, at the same time, upon opposite sides of India; Charnock's struggle with the Nawab of Bengal, which lasted from 1686 to 1690, directly leading to and ending in the foundation of Calcutta; and the siege of Bombay, in 1689–90.

From the first foundation of the Company's factories in India, a Surgeon always formed one of the staff of officers kept up, at each of the principal settlements. These Surgeons were, of course, civilians, but among their duties was included medical attendance on the garrisons of the factories. These garrisons were small, a few companies of topasses, or armed peons, mostly Portuguese Eurasians, or native Christians, and hardly worthy of the name of soldiers or sipahis, with a sprinkling of Englishmen, employed chiefly as gunners. Yet, when fighting became inevitable, these small armed forces, led by a few English officers, seem to have borne themselves well. In Charnock's war in Bengal, though they suffered great losses by disease at Hijli, they had much the best of what actual fighting took place. And the siege of Bombay, which lasted sixteen months, from 15th Feb., 1688/89, to 22nd June, 1690, ended with the retreat of the besieger, the Siddhi.

An interesting diary of this siege, kept up from day to day, is contained in the Factory Records in the India Office, Bombay
Diaries, Vol. III. The name of the writer is not given. The small force in Bombay lost heavily, over a hundred men being killed during the siege, many of whom were English, including several officers; and a still larger number deserted, mostly topasses, but including a few Englishmen. Among the latter, a soldier named Isaac Scott was taken prisoner after he had joined the enemy, and was promptly and deservedly hanged. The English retained command of the sea throughout the siege, which was from the land side only. The name of the Surgeon of Bombay, who served during this siege, was Robert Michill or Micholl, (probably Mitchell), who was first appointed on 24th April, 1686.

It was not until the middle of the eighteenth century that the Company's forces became committed to serious and lasting war. And even then it was war with France, that is with the French settlements in India, not with any of the country powers. France and England were at war in Europe as well as in India from 1745 to 1748, and in the East, the struggle between the two nations, nominally as the allies and representatives of rival Nawabs and Rajas, but actually as principals, went on for fully fifteen years more, till terminated by the final success of the English arms. It was these wars which first necessitated the maintenance of standing armies by the Company. And in the war in the Karnatak Clive's genius found its first scope. Before the middle of the eighteenth century the European trading Companies had been rival suppliants for the favour of native rulers. When Paradis routed a greatly superior force of native troops, led by Maphuz Khan, son of the Nawab of the Karnatak, at San Thomé, on 4th Nov., 1746, the Eastern world learnt that the French, at least, could fight. Some years elapsed before they discovered that the British could fight equally well. The defence of Arcot in 1751, and of Trichinopoly in 1752, and Clive's victory over the French at Kavaripak on 24th Feb., 1752, settled that question for ever.

During the second half of the eighteenth century, Madras was the Presidency which was most engaged in war. In Bengal a number of decisive actions were fought between 1757 and 1764; Plassey in 1757; Condore, in the Circars, but won by Bengal troops, in 1758; Biderra in 1759; Katwa, Garia, and Undwa Nala in 1763; Buxar, in 1764. The Bengal army also shared in the Karnatak wars, detachments from Bengal took part in all
the four Maisur wars, and a force from Bengal marched across to Western India in 1778, and served in the first Maratha war from 1778 to 1781. But it was in the Madras Presidency that the Maisur wars were fought, while the scene of the first Maratha war was Central India and the Bombay Presidency. It may be said that it was not till the second Maratha war of 1803–05, that the now greatly enlarged Bengal Presidency became the chief scene of Indian warfare.

In every war, and in every frontier expedition, in which the Indian Army has taken part, from Hunza and Nagar on the north-west border of Kashmir, to Ceylon, from China to Arabia, members of the I.M.S., as an integral part of the Indian army, have played their part; also in Africa, from Egypt to the Cape of Good Hope.

But members of the I.M.S. have also served in many wars in which the Indian army has had no share. The Service has been represented in these wars, in a few cases by officers officially deputed, in a few by officers who had left the Service, in many by young men, recently qualified, who entered the I.M.S. later on.

Four men, who afterwards joined the I.M.S., served in the Peninsula, and three at Waterloo; about twenty-five in the Crimea. In short, in every war of importance in which the British Army was engaged, during the nineteenth century, except in the final advance on Omdurman, past, present, or future members of the I.M.S. have served; also in the American Civil war, the Franco-German war, and the Russo-Turkish war.

Unfortunately, the war services of officers in the eighteenth century are not recorded. Medical officers, as a rule, were not of sufficient importance for their names to be recorded, in despatches or in correspondence. However, the names of several Surgeons who served in the Karnatik between 1750 and 1760 can be picked out of the records.*

James Wilson, (M. 1749), served in the defence of Arcot in 1751 and of Trichinopoly in 1752. He wrote accounts of both sieges, which have been preserved in the Orme MSS.† Other medical officers who served in this war were Joseph Hinchley, (M. 1750), Archibald Keir, (M. 1753), Archibald Swinton, (M. 1752), and

* The letters and dates given after names in this chapter show the Presidency and year of entering the Service.
Tyso Saul Hancock, (M. 1749). The last treated Clive for wounds received in April, 1752, at Samiavaram.*

Many of the medical officers who joined the I.M.S. between 1760 and 1765 had previously served in the British Army, and doubtless some of them had seen active service in King’s regiments, but no exact information is available. A petition from Surgeon G. M. Kenderdine, (B. 1764), entered in the Fort William Cons. of 23rd Nov., 1767, states that he had been qualified seventeen years, had been an apprentice of William Hunter, and had served three years in His Majesty’s army in Germany.

The names of the medical officers serving in Fort William at the time of its capture on 20th June, 1756, have been given in Chap. XI, Holwell, and the Fall of Calcutta. The names of those present at Plassey do not seem to have been preserved. But probably John Taylor, (M. 1749, B. 1754), then Surgeon to the army, and Archibald Keir, as a Lieutenant, both took part in that action; possibly also William Forth, and one or both of the two John Knoxes.

John Bristow, (B. 1751), was present at the battle of Condorc, won by Colonel Forde on 8th Dec., 1758, not as a medical officer, but in command of the miscellaneous European rabble in the service of Raja Anandaraz.

The names of the medical officers who were at Patna in the war of 1763 have been given in Chap. XII, William Fullerton, and the Patna Massacre. Of those who accompanied the army under Major Adams to Patna, and served at Katwa, Gharia, and Undwa Nala, no record seems to exist, except in two cases, James Ellis and Charles Wasmus. In the Orme MSS., (Orme, Various, Vol. 197, pp. 13-18), is preserved a memorial from Surgeon General James Ellis, (B. 1759), undated, but apparently written in 1774, setting forth his services. In this paper Ellis states that he served as senior Surgeon in the army under Adams at Sooty, (Gharia), “Woodah Nullah,” and the capture of Monghyr and Patna.

Charles Wasmus was born in Germany in 1734, educated at the University of Helmstadt, served as Assistant Surgeon in a German regiment, and went out to Batavia as Surgeon’s Mate of a Dutch Indiaman. Thence he went to Calcutta, and was appointed Surgeon’s Mate in the Army. The Fort William Cons. of 8th Aug.,

1769, mention his having served at Kasimbazar, and afterwards at Patna. He was subsequently appointed Surgeon at Fort Marlborough. In 1796 he was granted a pension of £300 a year, and permitted to return to Europe, but never went home, dying in Calcutta in 1800. He was the author of a small work, *Memoirs of a Gentleman who resided several years in the East Indies during the late Revolutions*, by C. W., London, 1774. The book is dull, and gives no dates, but mentions that he served in the actions at “Catna.” (p. 150), and “Woodynall.” (p. 155), also at Patna, where he lived in the “Chalsistoon,” (p. 156). In a letter dated Fort Marlborough, 4th Oct., 1789, contained in the *Proceedings of the Calcutta Medical Board of 30th Dec.,* 1789, he states that he has spent the best part of his life in the King’s and Company’s service, chiefly in India, and has served under Lord Clive, Colonel Forde, Major Adams, and Sir Hector Munro, and for the last thirteen years at Fort Marlborough.

Surgeon John Doak, of the Madras Service, met his death by a very singular accident, while on service with a detachment against the Poligars in Dec., 1766. The fact is reported in a letter from Colonel Wood, commanding at Trichinopoly, to Robert Palk, Governor, and Council at Fort St. George, dated Trichinopoly, 14th Dec., 1766, entered in the *Madras Mily. Cons.* of that date.

“I am extremely sorry to acquaint you of the Death of poor Mr. Doak, Surgeon, by a most unfortunate accident. He was with Major Flint’s Detachment, the Night they halted at Secundaramally, going into a small Choultry to visit a sick Man, and on returning, the Arms of the Piquet, being Lodged against the Choultry, or rather a mud Wall, the Bayonets being on the peices were above the Wall near a Foot, which he went to jump over, pricked himself on one of them under his left breast that run him through the Heart, and expired in less than a minute, without saying a single word, only I am pricked.”

Another exceptional case of death by violence on service was that of Thomas Cumming or Cummins, Surgeon of the *Defiance Prahm*, which accidentally blew up, in the Persian Gulf, on 15th Nov., 1767. Only 35 were saved, out of a crew of 300, all the officers being killed. There were at this time two Surgeon’s Mates of the name of Cummins serving in Bombay.

During the second half of the eighteenth century the English fought four fiercely contested wars with the Musalman rulers of Mysur. In all these wars the French were in alliance with Mysur,
and in the first two French troops took a large share in the fighting. Most of the members of the Madras Medical Service seem to have served more or less in these wars.

The first Mysore war, against Haidar Ali, lasted from 1767 to 1769. The Madras Press Lists for 1769, (No. 6875 of 7th April, 1769), mention that a Dr. Gordon, a prisoner of Haidar Ali, was killed in trying to escape. This, however, is a mistake. A memorial from Surgeon William Gordon, (M. 1758), dated Tanjore, 28th Feb., 1777, states that he was taken prisoner at Erode, (which surrendered on 23rd Dec., 1768), dangerously wounded in trying to escape, near Palamcotta, and confined as a prisoner at Seringapatam till peace was proclaimed.* Gordon saw much service in the first and second Mysore wars, also in the siege and capture of Pondicherry in 1778.

The second Mysore war lasted from 1780 to 1784. A great deal of information about this war may be found in Memoirs of the War in Asia from 1780 to 1784, quoted in Chap. II, European Surgeons serving Native Potentates. During the course of this war the British arms met with three severe reverses. The first of these was when Colonel Baillie’s force, consisting of five to six hundred Europeans and over three thousand sipahis, was defeated and cut to pieces by Haidar Ali at Perambakam on 10th Sept., 1780. After a large number of officers and men had fallen, the whole of the remaining force was captured. Four medical officers were present in this action, Raine, Wilson, Campbell, and Ogilvie. William Raine, (M. 1764), the senior Surgeon, was wounded and taken. Surgeon Thomas Wilson, (M. 1770), was killed in action. The author of the Memoirs mentions that Wilson’s head, among others, was laid before Haidar after the action. George Campbell, (M. 1773), was severely wounded, and died of wounds in prison at Arni a week later, on 18th Sept. George Ogilvie, (M. 1777), was taken unhurt, and remained a prisoner for four years. Twenty-nine officers in all were killed at Perambakam, and fifty-seven taken, of whom thirty-eight were wounded, and of them six died of their wounds. The most celebrated of the officers taken was Captain Baird of the 73rd Highlanders, afterwards General Sir David Baird, who was severely wounded. Baillie died in captivity in Oct., 1782.

The second reverse occurred when Colonel Brathwaite was

defeated at Anagudi, six miles north-east of Kambakonam, and three miles south-east of the Kolurerun river, on 18th Feb., 1782. There appears to have been only one medical officer with this detachment, Surgeon James White, (M. 1766), who was taken unwounded.

Haidar Ali died on 7th Dec., 1782. The third disaster was the surrender of General Matthews and the Bombay column to Tipu Sultan at Bednur on 30th April, 1783. The terms of capitulation, that the British force should surrender the fort, and be allowed to retire to the coast, were broken by Tipu, who detained the whole force as prisoners. Matthews and many of his officers were subsequently murdered by poison. At least three medical officers were among the prisoners. Assistant Surgeon Gifford, of the 100th Foot, was one of those poisoned with Matthews. Surgeon Frederick Carmichael, (Bo. 1771), died in captivity at Chitaldrug on 5th Nov., 1783. Assistant Surgeon James Shields, (Bo. 1779), was released at the end of the war. A list of the Bombay Medical Service, in the Bombay Cons. of 19th Feb., 1784, shows three men as prisoners, Carmichael, (who was dead by that time), and Shields, taken at Bednur, and Assistant Surgeon Christian Mathias Kiln, (Bo. 1771), taken at Mangalore. Surgeon William Lloyd, (Bo. 1777), was also at Bednur, but, fortunately for himself, was sent to Mangalore with a convoy of wounded, shortly before the surrender.

The author of the Memoirs states that on 5th Dec., 1783, the prisoners were joined by twelve others, taken after having been shipwrecked on the Malabar coast. The only officer among these twelve was a Mr. King, (M. 1773), a Surgeon in the civil line, whom, curiously, he calls a foreigner, though the name sounds English enough. Assistant Surgeon John Buirette, (M. 1769), was also taken prisoner in this war, at Jinji, on 19th Sept., 1781. At the capture of Cannanore on 14th Nov., 1783, Surgeon William Walker, (Bo. 1765), was among the wounded.

In the C.G. of 13th and of 20th May, 1784, are given lists of prisoners released by Tipu Sultan after peace had been made. These lists include the names of several medical officers, White, King, Cowin, (M. 1781), Briscoe, and Scarsdale. The two last were not members of the I.M.S. Briscoe was Surgeon of the 100th Foot, and was taken at Bednur, as probably was Cowin also. Scarsdale may have been either an officer of the A.M.D., or a
naval officer. A large number of officers and men of the Royal Navy, taken prisoners by Suffrein, were handed over to Haidar by the French. Though their names are not included in these lists, Raine, Ogilvie, and Shields were also among the prisoners then released. The C.G. of 15th July, 1784, contains a list of officers murdered by Tipu, which includes Gifford's name.

The Madras Mily. Cons. of 22nd May, 1787, contain a report by the Hospital Board on Buirette. They state that he was serving at Jinji as Assistant Surgeon, and was taken prisoner there, that he did good service to other prisoners, has good certificates, and is a capable Assistant Surgeon. They do not recommend him for promotion, but advise that he should be appointed to a regiment of sipahis. The Council ordered the matter to be considered. The Mily. Cons. of 6th June contain the Council's orders about Buirette.

"Mr Buirette can have no further service from this Government, and it is the height of effrontery in him to expect arrears of Pay as a Prisoner, when it is well ascertained that he immediately entered the service of the enemy after his being captured and had continued with Tippoo till the hour of his desertion from him. To give countenance to such acts of treachery to the Flag of the Company would be Hanging out extraordinary emoluments to those who could be the most abandoned in their Principles."

A charge such as the above, of desertion and treachery, would seem somewhat difficult to live down, but Buirette succeeded in doing so. A Mily. Letter from Court to Madras, dated 21st May, 1794. (Abstracts), in para. 16, grants him a pension.

"Mr Buirette, formerly an Assist. Surgeon, cannot comply with his request to be reinstated, but authorize the granting him a pension."

In the original draft of this letter it is stated that letters had been received from Lieut. C. Macaulay, who was taken with Buirette at Jinji, and from other officers who were prisoners in Maisur, testifying to his professional services to the prisoners.

In 1795 he was posted to the Corps of European pensioners. A Mily. Letter from Bengal, dated 13th March, 1798, states in para. 96. (Abstracts).

"Mr Burrett, late a Surgeon at Fort St George, permitted to reside in Bengal, where his Pension of 20 Stf. Pagodas p. Month is to be paid him during his residence."

A Mily. Letter to Fort St. George, dated 30th July, 1806, in
paras. 417, 418, increased his pension to forty pagodas a month. He was appointed Police Surgeon, the first to fill that post, in Calcutta, and died there on 4th June, 1811.

The sufferings of the prisoners in Muisur have often been related, and are well known. Those taken with Matthews fared worst, many of them being murdered. Those confined at Serin-gapatam were also very badly treated. Those kept at Bangalore seem to have suffered less. For one thing, Bangalore was nearer to Madras, and the prisoners were supplied from Madras with money, with which they were able to obtain some mitigation of the hardships of their confinement. Of those sent to be kept in small parties in different hill forts, many were murdered by Tipu's orders. In other cases, their treatment seems to have depended a good deal on the disposition of the Qiladar, or Fort Commandant. Medical officers in particular were able in some cases to win the goodwill of their gaolers by their professional skill. Raine, who was confined at Bangalore, was for long in correspondence with the Madras Government, and it was through him that supplies of money were sent to the prisoners. A letter dated Bangalore prison, 17th March, 1782, from Raine to the Madras Council, contained in the Madras Mily. Cons. of 10th April, 1782, states that he had been taken out of prison on 18th Dec., 1781, and his irons removed, by Haidar's orders, because of his success in treating the family of the Qiladar and other inhabitants, and says that, by his comparative liberty, he had been enabled to be of service to the other prisoners, especially to the soldiers, who were dying without medical treatment. It was on account of Raine's services at this time that the Court of Directors, eight years later, insisted on his promotion to the Medical Board, as related in Chap. XXIII, Administration; the Medical Boards. Carmichael also, in July, 1783, successfully treated Daulat Bhaui, Qiladar of Chitaldrug, who offered to give him a house outside the prison. Carmichael preferred to remain with the other captives, but seems to have been well treated. Though he died there in confinement a few months later, there seems to be no suspicion that his death was due to other than natural causes.

The Madras Mily. Cons. of 18th April, 1782, contain an order that all Dutch medical officers, taken prisoner at Negapatam, are to be released, and that medical officers are not to be regarded as prisoners of war.

H.I.M.S.—VOL. II.
"To Captain Johnston, commanding at Negapatam.
"Sir—Inclosed we send you a list of Physicians, Surgeons, and Apothecaries, now supposed to be prisoners at Negapatam.
"We desire that you will release them and give them permission to proceed whither they please without molestation.
"And for your further direction we are to inform you, that according to the usage in Europe which we mean to follow here, No Medical Person in the service of the Hospital ascertained to be such are to be considered or detained as Prisoners.
"We have the honour to be—Macartney (&c. Council).
"Select Committee, Fort St. George, 18th April, 1782."

The list mentioned is not given in the Cons. There can hardly have been many medical officers in the small garrison of Negapatam. In fact there appears to have been only one. Regnier Van Vlissingen, Governor of Negapatam, gives a list of the Dutch prisoners taken there, in a letter dated 22nd Feb., 1782, contained in the same Cons., Miscellany Book, Jan. to June, 1782. The only medical officer in the list is Johannes Francois Heynemann, Surgeon's Mate, pay seven pagodas a month.

The rule that medical officers should not be considered prisoners of war, but should be released, does not appear to have been in force for any length of time. In many instances medical officers, both French and English, were detained as prisoners of war for long periods. Even when observed, it sometimes worked to the disadvantage of the released Surgeon. The Miscellany Book for July to Dec., 1782, contains a letter, dated 7th Sept., 1782, from Surgeon Nicol Mein, (M. 1772), saying that he sailed from Madras on 14th June in the Yarmouth, which was taken by the French frigate La Fine next day; that being a medical officer he was not considered a prisoner of war, and therefore received no subsistence allowance, though he was detained at Kadalur over two months, till 20th Aug., when he was allowed to go to Madras.

The third Maisur war lasted from 1790 to 1792. In this war John Laird, (B. 1771), served as Surgeon General of the Grand Army under Lord Cornwallis; Colley Lucas, (M. 1764), as Surgeon General of the Madras troops; and Alexander Grant Clugstone, (Bo. 1768), as Surgeon General of the Bombay column. The first two at least were present at the siege of Seringapatam in Feb., 1792. In this war three medical officers lost their lives: Assistant Surgeon Henry Morris, (M. 1788), second Madras Cavalry, killed on 13th Sept., 1790, in a skirmish at Pongar in Maisur; Assistant Surgeon Sutherland, 19th Dragoons, killed in the same
skirmish; and Surgeon A. Home, of the 36th Foot, taken prisoner at Bangalore in Sept., 1791, and, after being kept at Seringapatam some time, put to death before the capture of the Fort. Assistant Surgeon Paley, 71st Foot, was wounded in the siege of Seringapatam. The Madras Mily. Cons. of 17th Dec. 1790, give a list of officers taken by Tipu at the surrender of Dorapuram, a small fort, and released on parole not to serve again during the war, which includes Henry Miller, (M. 1780), Surgeon of the First European Infantry, and Mr. Nolhe, Surgeon's Mate of the 52nd Foot. Miller was kept unemployed till peace was made.

The fourth Maisur war was fought in 1799, and ended with the storm of Seringapatam. Tipu fell in the storm, and the Musalman dynasty of Maisur came to an end. No officer of the I.M.S. lost his life in this war, but two medical officers of the De Meuron regiment, then in the service of the Company, were killed: Dr. Glasser at Malavelly, and Assistant Surgeon Lesser in the storm of Seringapatam.

Indian troops were for the first time employed beyond Asia, in the expedition to Egypt, under Sir David Baird, which left India in March, 1801, but reached Egypt too late to take part in the fighting. The senior medical officers employed with the force seem all to have been members of the A.M.D. The P.M.Ó. was Dr., afterwards Sir James, Mcgrigor,* who received from the Company a special commission as Superintending Surgeon, in addition to his King's commission, that there might be no doubts as to the I.M.S. officers with the force being under his orders. The second in seniority was Dr. W. R. Shafter, who was afterwards I.G. of Hospitals under Sir John Moore, in 1808–09, in Spain.

Colonel Wellesley, afterwards the Duke of Wellington, was appointed second in command of the expedition, but fell ill at Bombay, and was unable to go. This illness was fortunate for England and for himself, for the ship in which he had intended to sail was lost, with all hands, between Bombay and Egypt.

In this expedition the following Assistant Surgeons of the I.M.S. served:—


In the Peninsula four officers served who afterwards entered the I.M.S.; G. N. Cheek, (B. 1816); H. Mackenzie, (B. 1829); W. Twining, (B. 1824), and W. Fasken, (M. 1819); Mackenzie as a subaltern in the 57th Foot, the other three as Hospital Mates in the A.M.D. Cheek served at the capture of San Sebastian and at Orthez; Mackenzie at Vittoria, Nive, and Nivelle; Twining was on Lord Hill's staff. Fasken seems to have served throughout the war. His epitaph, in the cantonment cemetery at St. Thomas Mount, where he died on 3rd Oct., 1836, states *qui corporis mala medendi peritus per Lusitaniam, Hispaniam, et Galliam castra Britannica fortiter secutus.*

Twining and Cheek were present at Waterloo; as also was C. H. Hoffbower, a Hanoverian, who acted as a temporary Assistant Surgeon in Bengal from 14th Oct., 1825 to 1827, during which time he served in the first Burmese war.

Sir Thomas Sevestre had served in the Navy at the capture of Cayenne, and had gained the Knighthood of the Tower and Sword of Portugal, before he entered the Madras Service in 1809.

In the Crimean war some twenty-five officers of the I.M.S. served. Their names are given below. Of these, D. Macpherson, E. Campbell, J. Vaughan, W. H. Harris, J. Macgregor, and St. G. Williams were deputed to serve there, Macpherson as P.M.O., Campbell as D.I.G. of the Turkish contingent. Sir John McNeill was sent from England, in 1855, as President of a Commission to inquire into the working of the Commissariat and Transport, Colonel Alexander Tulloh being the other member. Ainger spent his furlough serving with the Turkish contingent. The others were young men, who subsequently entered the I.M.S. Reed was an Assistant Surgeon in the Navy, and served in the Baltic, not in the Crimea. Those marked with an asterisk received the order of the Medjidie. McNeill was given a Privy Councillorship for his services.

Frederick Harrington Brett, who had held the Professorship of Ophthalmic Surgery in Calcutta, was deputed from England to the Crimea to serve as Field Surgeon, but it seems doubtful whether he ever actually went to the seat of war. He entered the Bengal Medical Service on 22nd Sept., 1825, retired on 23rd Jan., 1844, and died on 10th Dec., 1859.
The *Lancet* of 28th Nov., 1857, (p. 563), states that the Russian army in the Crimea lost 382 medical officers by death, and that out of 550 medical officers in the French army, 81 died of disease during the war. Compared with these figures, our own losses in the Crimea and in the Mutiny appear small.

A note in the *British Medical Journal* of 14th Sept., 1912, quotes a statement that, during the past eighty years, 548 medical officers of the French army have been killed in action. The French army is, of course, very much larger than that of England or of India. The period comprises the Crimean war, the war in Italy in 1859, and the Franco-German war; also a long series of campaigns in Algeria, West Africa, and Indo-China, but not the Napoleonic wars.

Dr. Léon Labbé, member of the French Senate, in speaking of the number of victims of professional duty in the French Army Medical Service, says that in the last eighty years 548 medical officers have been killed in battle, while 399 have died of plague, yellow fever, typhoid, and cholera. In the Crimea the French army lost 18.22 per cent. of its medical officers, while the loss of combatant officers was 14.17 per cent. In the Mexican expedition the army lost 20 per cent. of its medical officers and 4 per cent. of its combatant officers from yellow fever.

A separate chapter being devoted to the Medical Services in the Mutiny, it is unnecessary to say anything more about that subject here.

Among other British wars, in which the Indian Army took no part, but in which members of the I.M.S. have served, may be mentioned the Kafir war of 1850, the Maori, the Ashanti, and the Zulu wars.
Kafir war of 1850, J. P. Bowling, (B. 1851), as a volunteer.
Maori war, F. Broughton, (Bo. 1843).
Ashanti war, J. O'Neil, (B. 1875), and A. Adams, (M. 1875), both as Surgeons in the Navy.
Zulu war, G. M. J. Giles, (B. 1880).

In the South African war four officers of the Bengal Medical Service served, W. H. W. Elliott and G. H. Frost in the Field Hospital sent from India to Natal at the outbreak of hostilities; W. R. Edwards as Surgeon to the Commander-in-Chief, Lord Roberts; and S. J. Thomson, in charge of concentration camps towards the end of the war. A fifth Bengal officer, H. Cayley, (1857), who retired on 29th April, 1887, went out as Supt. of the Scottish Hospital. C. H. B. Adams-Wylie, of the General Service I.M.S. (1899), was also sent to South Africa, where he died at Bloemfontein on 2nd June, 1900. And at least ten men who afterwards entered the I.M.S. served in the war, as Civil Surgeons or as combatants.

Of foreign wars, in which the British Army was not engaged, I.M.S. officers have served in the following, at least, probably some also in other wars.

Italian war, 1848: J. Fayrer, (B. 1850), operations at Palermo and attack on Rome.
American Civil war: A. L. Mackay, (B. 1856), after having left the Service, and H. I. Jones, (M. 1869), before entering. Mackay served as Senior Medical Officer of the Artillery in the Army of Tennessee, and was present at the battles of Chickamauga, Atlanta, Jonesborough, Franklin, Nashville, Spanish Fort, and the siege of Moville. Jones also served in the Confederate forces.
Franco-German war: G. C. Hall, (B. 1872).
Russo-Turkish war: D. F. Dymott, (M. 1880).

During the long wars with France, there was one risk to which all men serving in India were exposed, from which they have now been free for over a century. Every man going home, or returning to India, soldier or civilian, merchant or planter, was practically on active service throughout the voyage, and might at any moment be called upon to fight for his life, or at least for his liberty. He stood the chance of being killed in the fighting, and the certainty of detention as a prisoner of war if the ship he was in was taken by the enemy.
The Company's Indiamen carried large crews, and were all well armed. But the strongest Indiaman was no match for a frigate, much less for a line of battleship. The race is not always to the swift, nor the battle to the strong. And cases did happen in which Indiamen beat off much stronger assailants. One such instance took place in 1757, when three Indiamen, the Houghton, Captain Walpole, the Suffolk, Captain Wilson, and the Godolphin, Captain Hutchinson, fought two French men-of-war, of 64 and 36 guns, east of the Cape, and beat them off with heavy loss. The Indiamen reached London on 29th Aug., when the Directors made a grant of £2000 to each ship's company. During the short war with the Dutch in 1759, on 24th Nov., three Indiamen, the Calcutta, 761 tons, Captain Wilson, Commodore, the Duke of Dorset, 544 tons, Captain Forrester, and the Hardwicke, 573 tons, Captain Sampson, carrying not more than thirty guns each, attacked the Dutch fleet in the Hugli, consisting of the Vlissingen, the Bleiswijk, the Welgelegen, and the Princess of Orange, each of thirty-six guns, the Elizabeth Dorothea and the Waerdel, each of twenty-six guns, and the Mossel, of sixteen guns; and took them all but one. The Bleiswijk escaped down the river, but near the mouth met two other Indiamen, the Oxford and the Royal George, coming up, and struck her colours to them. Hardy's Register of Shipping shows that the two Wilsons, mentioned above, were different men. Captain William Wilson commanded the Suffolk in 1757, Captain George Wilson the Calcutta, in 1759.

But the most celebrated case of this kind is that of Commodore Dance, who commanded the Company's China fleet, homeward bound from Canton, in 1804. This fleet left Canton on 31st Jan., and consisted of sixteen Indiamen and eleven country ships. Off Pulo Aor, in the Malay sea, on 14th Feb., they met a French Squadron, under Admiral Linois, consisting of one line of battleship, three frigates, and a brig, waiting for them, and expecting to pick up many rich prizes when the Indiamen scattered before them. On sighting the French squadron, however, instead of trying to escape, Dance, as Commodore or senior Captain, hoisted signals to attack them at once. The Royal George, Captain Timmins, led the attack; the Ganges, Captain Moffat, a fast brig, and Dance's own ship, the Earl Camden, followed. On the Ganges was also Lieut. Fowler, R.N., who was going home with
Dance as a passenger. On seeing them attack him without hesitation, Linois apparently mistook the two Indiamen for British line-of-battleships, and retreated, the Indiamen pursuing him for two hours. The English loss was one killed and one wounded, both on the Royal George. The Surgeon of the Royal George was William Gillies, of the Earl Camden, Patrick Maclachlan.

Dance's official report on the action, and the orders of the Court of Directors, are given in Hardy's Register of Ships, (second edition, 1813, pp. 134-140). The value of the China fleet was reckoned as some eight millions sterling. The Court distributed rewards, amounting to about £50,000, among the officers and crews of the fleet. To Commodore Dance they voted two thousand guineas, a piece of plate value two hundred guineas, and a pension of £500 a year. To Captain Timmins they gave one thousand guineas, to each of the Captains of the other ships five hundred guineas, and a piece of plate. Lieut. Fowler received three hundred guineas. All the officers received rewards in proportion. It may be noted that each Surgeon received eighty, and each Surgeon's Mate fifty guineas. Each man of every crew got six guineas. The Patriotic Fund presented Dance, Timmins, and Fowler with swords of honour. The King offered Dance a baronetcy, which he declined, and knighted him on 21st Aug., 1804.

Such instances as the above were, however, quite exceptional. The best found and best manned Indiaman was, as a rule, no match for a frigate, or even for a strong privateer, which, though usually of less size and tonnage, was specially built for speed and for fighting, not for transporting cargo, and carried heavier guns and a larger crew of fighting men.

Though the French navy, as an active force, was practically annihilated at Trafalgar in Oct., 1805, for five years longer French men-of-war and privateers found a safe base in the harbour of Port Louis, the chief town of Mauritius, where they could refit when damaged in action, and replenish their exhausted stores. In no part of the world did French sailors meet with more success than in Eastern seas, where they carried their depredations to the very mouth of the Hugli. In 1810 the Governor General, Lord Minto, sent an expedition from India which conquered the French islands, and, with the seizure of their harbour of refuge,
the interference of the French ships with the Company's commerce came to an end.

On 21st June, 1806, a new Indiaman, the *Warren Hastings*, making her first voyage, was taken in the Indian Ocean, after a stiff fight, by the French frigate *Piémontaise*. Among the wounded on the *Indiaman* were the Surgeon, John Barnes, severely, and the Surgeon's Mate, James Greville. For his services on this occasion John Barnes, the wounded Surgeon, received a commission as Assistant Surgeon, Bengal, on 13th March, 1808. The *Piémontaise* herself was captured off Cape Comorin, nearly two years later, on 8th March, 1808, by the British frigate *San Fiorenzo.*

Only one officer of the I.M.S. appears to have been actually killed in action on board ship. Many were wounded or taken prisoners. It may be of interest to quote some cases, a few out of many.

The *C.G.* of 9th Aug., 1804, relates the capture, on 14th Aug., 1803, off Ferrol, of the Indiaman *Lord Nelson* by the French privateer *Bellone*. This action is also described in the *Gentleman's Magazine* for Sept., 1803, and, in greater detail, in James' *Naval History*, Vol. III, pp. 283–84. Among those killed, when the *Lord Nelson* was taken by boarding, were Surgeon William Spottiswood, (B. 1781), a brother of the Captain of the *Lord Nelson*, and Lieut.-Colonel Peter MaclGregor Murray, Adjutant-General of the Bengal Army. The *Lord Nelson* was retaken a few days later, on 25th Aug., by the *Colossus*.

The *Fort William Cons.* of 31st Jan., 1763, contain a list of prisoners taken on the *Walpole*, and sent ashore on parole, including her Surgeon, Robert Knight, who was appointed Supernumerary Surgeon to the army on 2nd Feb., 1764.

The *Proceedings* of the Calcutta Medical Board of 8th June, 1787, contain a letter from Assistant Surgeon Robert Collins, (B. 1780), in which he states that he sailed for India on 29th July, 1780, in the *Mount Stuart*, which was taken by the combined French and Spanish fleets on 9th Aug., and was detained for some months as a prisoner of war in Spain. He again left England in the *Osterly* early in 1781, was delayed at the Cape, reached Bombay in March, and Calcutta on 6th July, 1782. He claimed to rank from 6th Jan., 1780, which was allowed.

The same Proceedings for 4th Aug., 1794, contain a letter, dated 31st July, 1794, from Thomas Lyon, (B. 1794), who states that on 7th Feb., 1794, he was captured with the Pigot Indiaman off Bencoolen, lost the savings of nine years' service as a Surgeon on the Company's ships, and was a prisoner of war for three months. He asked for a commission as Assistant Surgeon, which was granted him from 9th Oct., 1794.

On 9th Oct., 1800, the French privateer La Confiante, commanded by the famous Robert Surcouf, the most daring of the French privateersmen in the East, took the East Indiaman Kent off the Sandheads, when almost in sight of port. This action is described by James, (Vol. III, p. 77), also in the C.G. of 14th Oct., 1800, and in the Gentleman's Magazine for March, 1801. The passengers in the Kent were allowed to go in the boats. Among those wounded in the fighting were three young Assistant Surgeons on their way out to India, Henry Gibson, (B. 1799), Richard Sherwood, (M. 1799), and John Alexander Andrew, (M. 1799). Sherwood was dangerously wounded, and had to be left on board the captured vessel as a prisoner. Andrew also was dangerously wounded, and was left for dead. The account in the Gentleman's Magazine gives his name among the killed. Both recovered; Sherwood retired on 5th Jan., 1822, Andrew died at Nellore on 15th April, 1817.

The following letter from Andrew Baird, Surgeon of a captured Indiaman, is preserved in Vol. II, of the books of Assistant Surgeons' Certificates in the India office:

"To Dr John Hunter, Physician to the Honourable East India Com-
Company.

"Sir,—I have the honour to acquaint you that I was Surgeon of the
Honorable Company's ship Culland's Grove, which was captured on the
22d July 1803, and since that time I have been a prisoner of war in France.

"That unfortunate event has not only prevented me from returning
to India, an Assistant Surgeon on one of the Honourable Company's Estab-
lishments, but it has also deprived me of the means of subsisting myself
by the exercise of my profession. After a period of three years' captivity,
I hope it will not be considered premature to solicit the protection of the
Honorable Company, nor presumptive to request the favour of being
appointed on one of their establishments, with the privilege of taking rank
from the time of appointment. Convinced from the justice and generosity
of the Honourable Court of Directors that it is only necessary that my
unfortunate situation should be represented to them in order to obtain the
favour I ask, I hope you will have the goodness to lay it before them as soon
as convenient."
"Your zeal for the interest of the department of the Honorable Company's affairs over which you preside, leaves me no room to doubt of your taking an early opportunity to comply with my request. I have the honour to be, Sir, Your most obedient servant, Andrew Baird.—Verdun in France, 15th May, 1806."

Dr. Hunter forwarded Baird's letter with the following recommendation:

"Dear Sir,—The enclosed letters will explain themselves. You will judge whether it is best to lay them before the Committee of Shipping, or the Court of Directors. All I know of Mr. Baird is that in March 1802 I examined him as Surgeon, and found him well qualified. I am, dear Sir, Yours sincerely, J. Hunter.—Hill House, July 17th, 1806."

This letter bears no address, but presumably it was to Mr. Millett, one of the Directors of the Company, for Baird's letter is endorsed "recommended for Bengal on my nomination, George Millett."

Baird's commission as Assistant Surgeon was dated 3rd Feb., 1807, and he ranked from that date, while still vegetating at Verdun for some years. A letter from Court, dated 30th May, 1810, published in the C.G. of 20th Dec., 1810, states that he had succeeded in escaping from Verdun, and had been permitted to proceed to Bengal. His career was short, for he died at Chittagong on 28th June, 1812.

Assistant Surgeon W. H. Robertson, (B. 1797), is shown in the East India Register of 1806 as "on furlough, a prisoner on parole." When and where he was captured is not mentioned.

A Mily. Letter from Court to Bombay, dated 17th Jan., 1810, in para. 25, states that Assistant Surgeon William Thomas, (Bo. 1799), who had come to England on furlough as a prisoner of war on parole, had been exchanged.

In his Autobiography, (p. 278, and Appendix E, p. 412), Sir James McGrigor claims to have obtained for medical officers, for the first time, the honour of mention in despatches. After the siege of Badajoz, taken by storm on the night of 6th April, 1812, McGrigor requested Wellington to mention the good work done by the Medical Department in his despatch announcing the capture of the fortress. Wellington asked him whether such mention was usual, and McGrigor admitted that it was not; but urged that the Medical Department had deserved mention for their services, and that the fact that they had not been mentioned
in despatches before was no reason why they should not receive such honourable mention now. On consideration, Wellington agreed, and accordingly in his despatch makes mention of the good services of "Mr. McGrigor and the medical gentlemen under his direction"; (Despatch of 8th April, 1812, London Gazette, 24th April, 1812). They are mentioned again in the same terms after the battle of Salamanca; (Despatch of 21st July, 1812, London Gazette, 16th Aug., 1812).

Presumably the services of medical officers had not been previously mentioned in despatches in European warfare. They had, however, met with recognition at an earlier date in the East. In the despatch, dated 21st July, 1810, from Lieut.-Colonel Keatinge, announcing the capture of the island of Bourbon, published in the London Gazette of 25th Oct., 1810, among the officers mentioned are S.S. Henry Harris, (M. 1783), and Surgeon W. A. Davis, (Bo. 1799).

In the C.G. of 18th April, 1816, is quoted a Division order issued by Major-General Sir David Ochterlony, K.C.B., on the Nipal war, dated Camp Doorcah, 5th April, 1816.

"The Medical Department was ably conducted under Mr. Superintending Surgeon Gillman, and in the discharge of the duties of the Field Hospital, Mr. Surgeon Proctor fulfilled the expectations which the Major General had formed from his high professional character of skill, ability, and humanity."

William Fullerton's services at the battle of Mohsinpur and at the siege of Patna in 1760 have been described at length in Chap. XII, William Fullerton and the Patna Massacre.

A Milt. Letter from Bombay, dated 12th Sept., 1818, in paras. 51-60, describes the battle of Koregaon, or Corrygaum, fought on 2nd Jan., 1818, in the third Maratha war; and praises highly the courage and devotion of the European officers engaged, including Assistant Surgeon John Wylie, (M. 1812), all of whom were specially mentioned in the Gazette.

"51. Towards the close of the evening, the Detachment was placed in a most trying situation, nearly the whole of the Artillerymen were Killed or Wounded, and about one third of the Infantry and Auxiliary Horse. The exertions which the European Officers had been called upon to make in leading their men to frequent charges with the Bayonet had diminished their Numbers, Lieutenant Chisholm of the Artillery and Assistant Surgeon Wingate of the 2nd Battalion of the 1st Regiment were Killed, and Lieutenants Swanston, Pattinson, and Connellon Wounded, leaving only
Captain Staunton, Lieutenant Jones, and Assistant Surgeon Wyllie of the Madras Establishment, nearly exhausted, to direct the efforts of the remaining part of the Detachment, who were nearly frantic from the want of Water, and the almost unparalleled efforts they had made throughout the day, without any sort of refreshment, after a fatiguing march of twenty Eight Miles.

* * * * * * * *

"58. The British character was most nobly supported throughout the whole of this arduous defence by the European Officers, and the small detail of Madras Artillery. The Medical Officers also led the Sepoys to Charges with the Bayonet, the nature of the contest not admitting of their attending to their professional duties. In such a struggle the presence of a Single European was of the utmost consequence, and seemed to inspire the Native Officers and Soldiers with their usual confidence of Success. Every Individual displayed the most romantic bravery under the pressure of thirst and hunger almost beyond human endurance."

The Gentleman’s Magazine of Jan., 1822, contains an extract from a letter written by an officer from Sambalpur on 24th July, 1821, describing the Kol troubles, not of sufficient importance to be considered a war, on what was then called the South-West Frontier, in which he speaks of the great mortality in the expedition, due, not to the resistance of the enemy, but to nature and to climate.

"Out of the four medical men that commenced the campaign, only one survived the excessive fatigue that they were obliged to undergo, so that the whole of the medical charge devolved upon him. His exertions, having at the time upwards of 400 sick in the camp, called forth the public thanks of His Excellency the Commander in Chief."

As an instance of the deadly nature of the jungles of this part of the country, it may be mentioned that a stone in the old burial ground at Midnapur records how, at Balmanghati, now in Singhbhum district, the 38th B.I. lost from disease, in ten days, five officers, including Surgeon James MacRa, (B. 1818), who died on 27th May, 1832. This latter Kol trouble lasted from 1832 to 1837.

When Shah Shuja’s Gurkha regiment was annihilated at Charckar in Afghan Turkestan, during the first Afghan war, 13th to 15th Nov., 1841, the services of Assistant Surgeon G. M. Grant, (Bo. 1838), are thus described in Kaye’s History of the War in Afghanistan, Vol. II, pp. 233–34:

"Mr Grant, a medical officer,—not the first medical officer who has played the part of the true soldier in battle, and justified the claims of his profession to the soldier’s honours and rewards,—having spiked all the guns
with his own hands, led out the main body, whilst Ensign Rose brought up the rear."

Rose and most of the men were killed at Kurdurrah. Grant got within three miles of Kabul cantonments before he was killed.

The story is well known how Assistant Surgeon William Brydon, (B. 1835), reached Jalalabad on 13th Jan., 1842, the sole survivor, apart from hostages and prisoners, of the force which started on its retreat from Kabul a week before. His arrival is depicted in the painting by Lady Butler, now in the Tate Gallery, called The Remnants of an Army. Sir Robert Sale, who commanded the garrison of Jalalabad, thus reported Brydon's arrival, in a despatch to General Lumley—

"Jellalabad, January 13th, 1842.

"Sir. I beg to acquaint you, for the information of His Excellency the Commander in Chief, that Assistant Surgeon Brydon, a few hours since, arrived at this place wounded, and has reported that, on the faith of a treaty, our troops left Cabul on or about the 6th instant.

"They were treacherously attacked on the road by overwhelming numbers, and from the nature of his recital there is reason to expect that he is the only one of the fugitives that we shall ever see alive. R. Sale."

* * * * * *

The following anecdote is taken from The Story of the Guides, by Colonel G. J. Younghusband, C.B., (p. 48). When the first Commandant of the Guides, Lieutenant, afterwards Sir Harry, Lumsden, was on leave in England in 1853, the temporary command was given to Lieutenant W. S. R. Hodson, afterwards the famous Hodson of Hodson's Horse. A Brigade was detailed to punish the cluster of villages called Bori, in the country of the Jowaki Afridis, near where Cherat now stands, the advance being led by the Guides.

"At one of the furthest points ahead was Lieutenant F. McC. Turner, who with about thirty men of the Guides had driven a very much superior force of the enemy into a stone breastwork at the top of a high peak. Here the British officer was held; not an inch could he advance; and now he was called upon to conform with the general movement for retirement. To retire, placed as he was, meant practical annihilation, so sticking to the rocks like a limpet he blew a bugle calling for reinforcement. Hodson, who himself was faced by great odds, seeing the serious position of his friend, sent across all the men he could afford to extricate him, but these were not strong enough to effect their purpose. Then it was that Dr. R. Lyell, the Surgeon of the Guides, took on himself to carry forward the much-needed succour. In reserve lying near him was the Gurkha company of the Guides, and also a company of the 66th Gurkhas under a native officer. Taking
these troops, with great dash and personal gallantry he led them to the attack, drove back the already exulting enemy, stormed their position, and extricated Lieutenant Turner and his party from their perilous position. It was a noble deed, nobly and gallantly carried out; and when it had been achieved, the brave fighter returned to the tender care of the wounded, and to alleviate the pains of the dying."

Robert Lyell, (B. 1847), the medical officer of the Guides, for his services in this campaign was appointed Principal Assistant to the Opium Agent at Patna. He was killed there, while engaged in helping to quell a riot in Patna city, during the Mutiny, on 3rd July, 1857.

The exploits for which the V.C. was conferred upon J. Crimmin, (Bo. 1882), and H. F. Whitchurch, (B. 1888), are detailed in Chap. XXXIII, Honours and Rewards.

Below is given a list of officers of the I.M.S. killed in action, or in desultory fighting, or died of wounds. The number is not very large. During the Mutiny twenty-eight officers of the Bengal Service were killed; but though no doubt most or all of them "took it fighting," not more than three were killed in action, or four if we include Lyell. The names of all are given in the chapter on the Mutiny. The names of the men killed at Patna in 1763, which are given in Chap. XII, William Fullerton, and the Patna Massacre, are not repeated here, nor are the names included of a few men who have been murdered on journeys of exploration.

The total number, thirty-four, is not large, even allowing for the fact that two-thirds of the Service have usually been in civil employment. The R.A.M.C. has probably lost at least ten officers killed in action for everyone of the I.M.S. who has fallen in this way.

Out of the thirty-four, Bengal contributes nineteen, including three in the second and one in the third Maratha war, five in the retreat from Kabul in Jan., 1842, and four in the Mutiny; Madras only four, two in the second and one in the third Mysore wars, and one in the third Maratha war; Bombay nine, including three in Arabia and three in the first Afghan war; the General Service one, in Somaliland. The thirty-fourth, in date the earliest, Paul, can hardly be said to have belonged to either of the three establishments. He was a servant of the New Company. Pulo Condore is an island off the coast of Cambodia, the factory there was officered from Bengal.
The term "killed in action" has been rather widely used. Perhaps a more accurate phrase would be "perished by violence on service." The disasters at Pulo Condore and at Attinga were rather massacres than fights. The same might be said of the retreat from Kabul. Campbell, Darby, and Cassidy died of wounds. Morris, Hooper, Maysmor, Beadon, Burdon, Whigham, and Gordon, fell in petty skirmishes, barely mentioned in the records of the time, and long since forgotten. But Dig, Sitabaldi, and Koregaon were actions of first-class importance, as also the siege of Delhi and the relief of Lucknow were military operations of the greatest consequence.

(1). St. (Stephen?) Paul, killed in the massacre at Pulo Condore, 10th May, 1705.

(2). The Surgeon of Anjengo factory,—his name, unfortunately, seems not to have been preserved,—killed when the Chief, Gyfford, all the Staff, and most of the garrison of the factory were cut off, at Attinga, on 12th April, 1721.

(3). Joseph Burdon, (Bo. 1770), killed at Muskat, 18th Nov., 1771.

(4). Thomas Wilson, (M. 1770), killed at Perambakam, in the second Mysur war, 10th Sept., 1780.

(5). George Campbell, (M. 1773), severely wounded at Perambakam, 10th Sept., 1780, taken prisoner, died of wounds at Arni, 18th Sept., 1780.


(7). William Spottiswood, (B. 1781), killed on board the Lord Nelson, off Ferrol, 14th Aug., 1803.

(8). Henry Hooper, (B. 1802), killed in action with Mir Khan, Pindari, near Kunch in Bundelkand, in the second Maratha war, 22nd May, 1804.

(9). John Burgh, or Brugh, (B. 1782), killed at Sikandra, near Agra, in Colonel Monson's retreat, in the second Maratha war, 29th Aug., 1804.

(10). Thomas Lyon, (B. 1794), killed in the battle of Dig, in the second Maratha war, 29th Aug., 1804.

(11). Humphrey Donaldson Niven, (M. 1815), killed in the battle of Sitabaldi, in the third Maratha war, 27th Nov., 1817.

(12). Thomas Wingate, (Bo. 1817), killed in the battle of Koregaun or Corrygaum, in the third Maratha War, 2nd Jan., 1818.

(13). Archibald Anderson, (B. 1806), killed at the siege of Chanda, in the third Maratha war, 11th May, 1818. The Gentleman's Magazine for May, 1819, states that he was shot through the heart by the last gun fired from the fort.

(14). George Whigham, (Bo. 1806), killed at Alashkara, in Arabia, 10th Nov., 1820.

(15). John Gordon, (Bo. 1819), killed at Zoar, on the Red Sea, 2nd March, 1821.

(16). Humphrey Maysmor, (B. 1823), killed at Ramu, on the Chittagong frontier, in the first Burmese war, 16th May, 1824.
(17). Hugh Beadon, (B. 1826), killed by an arrow at Nanklau, Assam, in operations against the Khasias, 28th May, 1829.

(18). Percival Barton Lord, (Bo. 1834), killed in the battle of Parwan, when a body of Shah Shuja's troops were defeated by Dost Muhammad, in the first Afghan war, 2nd Nov., 1840.

(19). George Morrison Grant, (Bo. 1838), killed in the retreat from Charekar to Kabul, in the first Afghan war, 15th Nov., 1841.

The next five, all Bengal men, were killed in the retreat from Kabul, 10th to 13th Jan., 1842. Duff's case was particularly hard. He had been permitted to retire from 15th Oct., 1841, but had been unable to leave Kabul before the main body of the force. He was severely wounded, and had an arm amputated, early in the retreat, before he met his end. Harper was one of the last six survivors, who got as far as Fatchahad, a few miles from Jalalabad, on the morning of 13th Jan., Brydon alone reaching the fort later in the day.

(20). William Duff, (B. 1817), between Tezin and Silh Baba, 10th Jan., 1842.


(22). Edward Rotherham Cardew, (B. 1839), on or about 10th Jan., 1842.

(23). Francis Ralph Metcalfe, (B. 1839), 1842.


(25). Thomas Brickwell, (Bo. 1826), killed in a skirmish in the Bolan pass, in the first Afghan war, Oct., 1842.


(30). William Beatty Smyth, (B. 1877), killed at Chapri Thal, Kurram Valley, in the second Afghan war, 25th June, 1879.

(31). Ambrose Hamilton Kelly, (B. 1869), killed with Sir Louis Cavagnari, at Kabul, 3rd Sept., 1879. Third class Hospital Assistant Rahman Baksh was also killed on this occasion, in the defence of the Residency.

(32). Christopher Clemens Cassidy, (B. 1891), died at Datta Khel, Tochi Valley, on 22nd June, 1897, of wounds received on 10th June.

(33). Charles Bradley Maitland, (M. 1880), killed in action, Jubaland, Somaliland, 16th Feb., 1901.

CHAPTER XXXIII

HONOURS AND REWARDS

"Palmam qui meruit ferat."

JORTIN, Lusus Poetici; (also Lord Nelson's motto).

For the first two and a half centuries of the existence of the East India Company, the number of honours and rewards bestowed upon its servants was not large. Towards the end of the seventeenth century, the honour of knighthood was conferred on several of the senior servants of the Company in India. In the middle of the eighteenth century, the pre-eminent services of Robert Clive won him a peerage. But the first and greatest of the Governor Generals, Warren Hastings, went undecorated and unrewarded to his grave. In the eighteenth century, the only military order in existence was that of the Bath, with only one grade, K.B., or Knight of the Bath, which corresponded to the G.C.B. of the present day. During his tenure of office as Commander-in-Chief of the Bengal Army, from 2nd Nov., 1774, till his death on 30th Aug., 1777, the Bath was bestowed upon Sir John Clavering. The only other Commander-in-Chief, previous to 1790, who received this honour, was Sir Eyre Coote. And both Clavering and Coote were King's, not Company's officers. In 1815 the order of the Bath was greatly increased, and divided into three grades, G.C.B., or Grand Commander; K.C.B., or Knight Commander; and C.B., or Companion. The third grade was then bestowed with fair frequency on senior officers of the Company's armies; and less commonly, the second. And, in the first half of the nineteenth century, several successful soldiers won peerages.

The other orders are all modern creations, since the Mutiny. The order of the Star of India was instituted in 1861. In 1868 the order of St. Michael and St. George, established in 1818 for the inhabitants of the Ionian Islands and Malta, was enlarged,
and extended to the colonies generally. The order of the Indian Empire was established in 1878, the Distinguished Service Order in 1886, the Royal Victorian Order in 1896.

It was not until 1850 that medical officers were made eligible for the Military Division of the Order of the Bath. Previous to that date Sir John McNeill, of the Bombay Medical Service, had received the G.C.B. of the Civil Division in 1839, on vacating the office of Ambassador to Persia, three years after his retirement from the Service. In 1826, while Surgeon to the Persian Embassy, he had been offered by the Czar the cross of the second class of the Order of St. Anne, and by the Shah the first class of the Lion and Sun, but was not allowed to accept either. The latter Order he was permitted to receive in 1835.

The first honour of any kind bestowed upon an officer of the I.M.S. seems to have been the knighthood conferred in 1806 on Sir Bussick Harwood. But this was given on account of his eminence in the profession as Professor of Anatomy and Medicine at Cambridge, and was given nearly thirty years after he had left the service, which he did on 4th Feb., 1778.

James Penrose, who entered the Bombay Service in Aug., 1798, and died at Mangalore a year later, on 4th Nov., 1799, before he came to India held the appointment of Surgeon Extraordinary to the King.*

A few foreign orders had from time to time been bestowed upon officers of the I.M.S. prior to 1850. Sir Thomas Sevestre had won the Knighthood of the Tower and Sword of Portugal as a Surgeon in the Navy, before he entered the Madras Service in 1809. Nathaniel Wallich received the order of the Dannebrog (Denmark) in 1818, and a higher grade of the same order in 1820. The Persian Lion and Sun was given to John Cormick, (M. 1800), in 1825, to J. P. Riach, (Bo. 1821), in 1832, and to James Anderson, (Bo. 1821), in 1848. The Afghan order of the Durani Empire was bestowed upon P. B. Lord, (Bo. 1834), in 1849, and on James Atkinson, (B. 1807), and John Forsyth, (B. 1820), both in 1841. Sir James Burnes, (Bo. 1821), was made a Knight of the Royal Hanoverian Guelphic order in 1837. Knighthoods were also conferred upon a few retired officers from time to time; on Sir George Campbell, (Bo. 1799), on 5th March, 1832, for services as a County Magistrate in Fife, twelve years after his retirement;

* C. G., 2nd Jan., 1800.
and on three officers of the Madras Service, Sir Whitelaw Ainslie on 10th June, 1835, Sir Simon Heward on 5th June, 1837, and Sir James Annesley on 13th May, 1844, on Heward for services as S.S. during the first Burmese war, on Ainslie and Annesley for professional eminence.

A baronetcy was also conferred upon Sir William Russell on 18th Feb., 1832, for services in the London cholera epidemic of the previous year. Russell was born on 29th May, 1773, took the degree of M.D. at Edinburgh in 1793, and entered the Bengal Medical Service as Assistant Surgeon on 25th June, 1797. He went on sick furlough in Jan., 1803, and on his return in 1806, was appointed Presidency Surgeon in Calcutta, and Supt. General of Vaccination, posts which he held till his retirement. He became Surgeon on 21st July, 1808, and gave up further promotion in order to retain his appointments in Calcutta. He went on sick leave on 1st Feb., 1829, retired on 18th June, 1831, was elected F.R.S. on 5th April, 1832, and died at Charlton Park, Gloucestershire, on 26th Sept., 1839.

The only other member of the I.M.S. who has received a baronetcy is Sir Joseph Fayrer, created a baronet on 11th Feb., 1896, after his retirement from the Presidency of the Medical Board of the India Office. Two other officers, however, Sir John Trevor Lawrence and Sir Alexander Christison, have inherited baronetcies conferred for professional eminence on their fathers. A baronetcy was also offered to Sir John McNeill in 1857, but he preferred to accept the membership of the Privy Council.

Medical officers were first made eligible for the military division of the order of the Bath in 1850, by the following notification, published in the *London Gazette* of 16th Aug., 1850.

"The Queen has been graciously pleased to make and ordain a Special Statute of the Most Honourable Order of the Bath, for the purpose of authorising the admission into the Military Divisions of the second and third classes of the said most Honourable Order of such officers of the Commissariat and Medical Departments of the Army and Navy, and of the East India Company's Armies and Navy, as by their meritorious services have already or may hereafter be deemed by Her Majesty to have deserved such distinction. Her Majesty has accordingly been pleased to give orders for appointing

Sir John Bissett, Knight, Commissary General;
Sir James Mcgrigor, Baronet, Doctor of Medicine, Director General of the Medical Department of the Army;"
Sir William Burnett, Knight, Doctor of Medicine, Director General of the Medical Department of the Navy; and
James Thomson, Esq., Inspector General of Hospitals on the Bengal Establishment of the East India Company’s Service;
To be Ordinary Members of the Military Division of the Second Class, or Knights Commanders of the said Order.”

By the above notification, the K.C.B. was conferred upon one officer of each of the three great Medical Services, the Army, Navy, and Indian.

At the same time, the C.B. was bestowed upon the following seventeen medical officers, seven of the A.M.D., six of the Navy, and four of the I.M.S.

Duncan McArthur, M.D., Physician of the Fleet, retired.
Sir John Webb, Knight, Director General of Ordnance Medical Dept.
Sir James Robert Grant, Knight, I.G. of Hospitals.
John Gunning, I.G. of Hospitals.
John Robert Hume, M.D., I.G. of Hospitals.
Sir John Richardson, Knight, I.G. of Hospitals and Fleets.
Benjamin Fonseca Outram, M.D., I.G. of Hospitals and Fleets, retired.
Robert Perkins Hillyer, I.G. of Hospitals and Fleets, retired.
Sir George Magrath, Knight, M.D., I.G. of Hospitals and Fleets, retired.
Sir John Riddell, Knight, M.D., I.G. of Hospitals and Fleets.
Henry Franklin, I.G. of Hospitals.
James French, M.D., I.G. of Hospitals.
Stephen Woolryche, I.G. of Hospitals.
Charles Renny, Superintending Surgeon, Bengal.
Bannatyne William Macleod, M.D., S.S., Bengal.
John Wylie, M.D., I.G., of Hospitals, Madras.
Charles Doyle Straker, M.D., S.S., Bombay.

The honour of appointment on the Honorary Medical Staff of the Sovereign was first granted to the I.M.S. by the Royal Warrant of 1st Feb., 1859, para. 15.

“Six of the most meritorious medical officers of the Army shall be named My Honorary Physicians, and six, My Honorary Surgeons.”

The first officers to receive these appointments were gazetted from 6th Sept., 1861. Their names were—

Honorary Physicians to the Queen—
Principal I.G. John Forsyth, Bengal.
I.G. Campbell Mackinnon, Bengal.
Surgeon Edward Goodeve, Bengal.
Principal I.G. George Pearse, Madras, (retired).
I.G. Duncan Macpherson, Madras.
Principal I.G. Benjamin Proctor Rooke, Bombay.
Honorary Surgeons to the Queen—
Surgeon Major Alexander Grant, Bengal.
D.I.G. William Abbott Green, Bengal.
Principal I.G. Robert Cole, Madras.
Surgeon Major Charles Morehead, Bombay.

By para. 8 of the Royal Warrant of 30th April, 1887, the rank of D.S.G. (now Colonel) was granted to any officer of a lower rank appointed Honorary Physician or Surgeon to the Queen.

"On appointment as Honorary Physician or Surgeon to Her Majesty under Article 12, an officer below the rank of Deputy Surgeon General shall be promoted to that rank, remaining supernumerary of his rank until he would have been promoted in ordinary course."

As a rule, however, these appointments were given only to senior officers on the retired list, up to 1911, when the Royal Warrant of 8th Aug., 1911, published in the Gazette of India of 7th Oct., 1911, restricted them to officers on the active list, who must relinquish the appointment on retirement.

"Whereas We deem it expedient to amend the rules for the promotion and precedence of Our Indian Medical Service Our will and pleasure is that Our warrant of the 13th March, 1908, be amended in accordance with the following provisions:—(1) The following shall be omitted from paragraph 10: An officer below the rank of Colonel who may be appointed as Our Honorary Physician or Surgeon after retirement from the Service shall be granted the honorary rank of Colonel. (2) The following shall be substituted for paragraph 14: Six of the most meritorious medical officers of the service on the active list shall be named Our Honorary Physicians and Six Our Honorary Surgeons. An officer shall relinquish the appointment of Honorary Physician or Honorary Surgeon on retirement. Given at Our court at St. James's this eighth day of August, 1911, in the second year of Our reign."

The first officer of the I.M.S. to gain the most coveted of all distinctions, the Victoria Cross, was Surgeon John Crimmin, of Bombay, on whom it was bestowed in 1889 for gallantry in the Karenni campaign in Burma. It is somewhat curious that no officer of the I.M.S. gained the Cross in the Mutiny, when it was earned by no less than three officers of the A.M.D.: Surgeon H. T. Reade at the storm of Delhi, and Surgeons J. Jee and A. D. Home in the first relief of Lucknow. The Cross, however, was gallantly earned by a young Hospital Apprentice of the Bengal Sub-Medical Department, Arthur FitzGibbon, in the
second China war, at the capture of North Taku Fort on 21st Aug., 1860, twenty-eight years before it was conferred on any commissioned officer of the I.M.S. The grant of the V.C. to FitzGibbon was made just a year later, on 13th Aug., 1861. He died some fifteen years afterwards as a Civil Surgeon in Bengal. The only other officer of the I.M.S., besides Crimmin, on whom the Cross has been conferred, is Surgeon Captain H. F. Whitchurch, of Bengal, in the Chitral campaign of 1895.

The notifications conferring the Victoria Cross on FitzGibbon, Crimmin, and Whitchurch, are quoted below.

Arthur FitzGibbon, 13th Aug., 1861. "For having behaved with great coolness and courage at the capture of the North Taku Fort on the 21st of August 1860. On the morning of that day, he accompanied a wing of the 67th Regiment, when it took up a position within five hundred yards of the Fort. Having quitted cover, he proceeded under a very heavy fire, to attend to a dhoolie bearer, whose wound he had been directed to bind up; and, while the regiment was advancing under the enemy's fire, he ran across the open to attend to another wounded man, in doing which he was himself severely wounded."

J. Crimmin. "Lieutenant Tighe, 27th Bombay Infantry (to the Mounted Infantry of which corps Surgeon Crimmin was attached), states that in the action near Lwekaw, Eastern Karenni, on January 1st last, four men charged with him into the midst of a large body of the enemy who were moving off from the Karen left flank, and two men fell to the ground wounded. He saw Surgeon Crimmin attending one of the men about 200 yards to the rear. Karens were round the party in every direction, and he saw several fire at Surgeon Crimmin and the wounded man. A sepoy then galloped up to Surgeon Crimmin, and the latter joined the fighting line which then came up. Lieutenant Tighe further states that very shortly afterwards they were engaged in driving the enemy from small clumps of trees and bamboo, in which the Karens took shelter. Near one of these clumps he saw Surgeon Crimmin attending a wounded man. Several Karens rushed out at him. Surgeon Crimmin thrust his sword through one of them and attacked a second; a third Karen then dropped from the fire of a sepoy, upon which the remaining Karens fled."

H. F. Whitchurch. War Office, July 16th, 1895. "The Queen has been graciously pleased to signify her intention to confer the decoration of the Victoria Cross upon the following officer, whose claim has been submitted for Her Majesty's approval, for his conspicuous bravery during the sortie from Chitral Fort on March 3rd last, as recorded against his name:—Surgeon Captain Harry Frederick Whitchurch, Indian Medical Service. During the sortie from Chitral Fort of 3rd March last, at the commencement of the siege, Surgeon Captain Whitchurch went to the assistance of Captain Baird, 24th Bengal Infantry, who was mortally wounded, and brought him back to the Fort under a heavy fire from the enemy. Captain Baird was on the right of the fighting line, and had only a small party of Gurkhas and men of the 4th Kashmir Rifles. He was wounded on the heights at a distance of a mile and a half from the fort. When Surgeon Captain
Whitchurch proceeded to his rescue the enemy, in great strength, had broken through the fighting line; darkness had set in, and Captain Baird, Surgeon Captain Whitchurch, and the Sepoys were completely isolated from assistance. Captain Baird was placed in a dooley by Surgeon Captain Whitchurch, and the party then attempted to return to the fort. The Gurkhas bravely clung to the dooley until three were killed and a fourth was severely wounded. Surgeon Captain Whitchurch then put Captain Baird upon his back, and carried him some distance with heroic courage and resolution. The little party kept diminishing in numbers, being fired at the whole way. On one or two occasions Surgeon Captain Whitchurch was obliged to charge walls, from behind which the enemy kept up an incessant fire. At one place particularly the whole party was in imminent danger of being cut up, having been surrounded by the enemy. Surgeon Captain Whitchurch gallantly rushed the position, and eventually succeeded in getting Captain Baird and the Sepoys into the fort. Nearly all the party were wounded, Captain Baird receiving two additional wounds before reaching the fort."

The first Good Service Pension conferred on an officer of the I.M.S. was given to D.I.G. J. C. Brown, afterwards S.G. Sir John Campbell Brown, K.C.B., on 13th Dec., 1867.

The Fellowship of the Royal Society, the blue ribbon of Science, was conferred upon Dr. John Fryer, the author of a well-known volume of travels in India, in 1697. The earliest instances of its being bestowed upon officers of the I.M.S. are—

John Fryer, (Bo.) . . . 1697.
J. Z. Holwell, (B.), 29th Jan., 1767.
Patrick Russell, (M.), 29th Nov., 1777.
Bussick Harwood, (B.), 27th May, 1784.
William Blanc, (B.), 16th April, 1795.
John Corse Scott, (B.), 16th Jan., 1800.
Francis Buchanan Hamilton, (B.), 1st May, 1806.

Russell had gained the F.R.S. eight years before he entered the Service on 4th Nov., 1785. Fryer, Holwell, Harwood, and Blane had all retired before their election; the three first long before. The first medical officer who was elected F.R.S. while actually serving was J. C. Scott, and he retired a few months later, on 30th July, 1800. Practically, therefore, Francis Buchanan Hamilton, who was serving up to Aug., 1816, ten years after his election, was the first officer of the I.M.S. who attained this honour while a member of the Service on the active list.

During the last half-century a good many officers of the I.M.S. have received the Honorary degree of LL.D. from various Universities, but previous to that time very few, and these with one exception Bombay men. Not only has the number of
Universities largely increased during the last fifty years, but also the Honorary degrees have been given more freely. The following officers received this honour previous to 1860:

Samuel Guise, (Bo.), LL.D., Marischal College, Aberdeen, 9th June, 1809.
James Burnes, (Bo.), LL.D., King's College, Aberdeen, 29th Aug. 1835.
W. B. Barrington, (Bo.), LL.D., Glasgow, 1836.
LL.D., T.C.D., 1834.
LL.D., Cantab, 1846.
Sir John McNeill, (Bo.), LL.D., St. Andrews, 1854.
D.C.L., Oxon, 1857.
J. W. Winchester, (Bo.), LL.D., Marischal College, Aberdeen, 1857.

It has sometimes been made a subject of complaint that the number of honours and decorations bestowed upon officers of the I.M.S. has not been large. The table below shows that considerably over two hundred such honours have been bestowed upon members of the Service, on the active list or retired; mostly during the last half-century. The larger share, some two-thirds of the whole, has fallen to Bengal, but that Service has always been in numbers about equal to the other two together. The new I.M.S. has done well in earning fourteen decorations, for such honours usually go to the senior men. It is curious that the Bombay Service, always much the smallest in numbers, has done better in this line than Madras. A Bombay officer was the first to earn the V.C., another Bombay officer gained the only G.C.B. and the only Privy Councillorship which the I.M.S. has received. It is probable that some honours have been omitted in the table; certainly all those entered have been conferred. Various other distinctions, appointments as Honorary Physician and Surgeon to the Sovereign, Honorary Degrees from Universities, Fellowships of the Royal Society, Good Service Pensions, Baronetcies, and Knighthoods, are also entered in a second table, but not included in the total quoted of over two hundred decorations. These other distinctions number one hundred and seventy-six.

Mention is also due to the appointments of Sir Joseph Fayrer as Physician Extraordinary to the King, of Sir Richard Havelock Charles as Serjeant Surgeon to the King, of the Nobel Prize bestowed upon Sir Ronald Ross in 1902, the Parkes Memorial Prizes gained by J. F. Polden in 1882, A. Duncan in 1885, and
R. Ross in 1895, and the choice of C. C. Manifold as MacGregor Silver Medalist in 1903.

It is true that the most open path to honours has always been military and political service; next to that, scientific distinction. It is hard to judge of purely professional work. It is not necessarily the man who shows most prominently in the public eye who is doing the best work. Still, many honours and distinctions have been bestowed for purely professional service and merit; e.g. the knighthoods conferred upon Whitelaw Ainslie, James Annesley, and James Ranald Martin; the C.B. to Martin, and the C.I.E.'s to Morehead, Waring, and Chevers; not to come to more recent times.

A study of the list of honours makes apparent two facts. The first is, that the names of several men of the first eminence, professionally and in the Service, do not appear in them at all.* The second is, that gaining one honorary distinction greatly increases a man's chances of getting another. Of course, all those who have been decorated with the higher grades of various orders, with the single exception of Sir John McNeill, have gone through the lower grades also, and are thus counted twice over in the table. Sir William Mackenzie, of Madras, held the C.B., C.S.I., K.C.B., and Q.H.P. Sir Joseph Fayrer received the C.S.I., K.C.S.I., Q.H.P., a Good Service Pension, and a Baronetcy; also a brevet promotion for the Mutiny, the appointment of Physician Extraordinary to the King, the Fellowship of the Royal Society, the orders of the Star of Conception of Portugal and the Medjedie, and the honorary degree of LL.D. from two Universities, Edinburgh and St. Andrews.

The following lists are carried down to the end of the year 1913. They include a batch of Good Service Pensions granted in 1913, from various dates during the preceding nine years; one of the recipients, indeed, had been dead for more than eight years. They also include an appointment as Honorary Physician to the King, gazetted in January, 1914, with effect from August, 1913; but not any honours conferred on 1st January, 1914.

* As instances may be mentioned the following names, which do not include those of any men now living; James Anderson, John Fleming, Francis Balfour, Simon Nicolson, H. H. Wilson, F. J. Mouat, E. G. Balfour, H. Cleghorn, T. C. Jerdon, Charles Murchison. Many of these men, however, lived and served before the days of decorations.
## Honours and Rewards

### Orders

<table>
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<tr>
<th>Honours</th>
<th>Bengal</th>
<th>Madras</th>
<th>Bombay</th>
<th>Combined Service</th>
<th>Total</th>
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<tr>
<td>V.C.</td>
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<td>G.C.B.</td>
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<td>K.C.B.</td>
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### Other Distinctions

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<th>Bombay</th>
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CHAPTER XXXIV

COURTS-MARTIAL

"Nothing extenuate, Nor set down aught in malice—"

SHAKESPEARE, Othello, Act V, Scene 2.

It has always been the custom, among all civilized powers, that offences against discipline, committed by members of their armed forces, naval or military, should be tried by special tribunals, or Courts-martial. Such special tribunals can hardly be considered a privilege of the accused; for many charges, punishable with severity by these special courts, would be considered trivial, or even dismissed, by the regular criminal courts.

As regards offences committed by men subject to military law, not specially of a military character, but such as are ordinarily tried by the regular courts, custom has varied from time to time. In the eighteenth century such cases as murder or robbery by soldiers or sipahis were usually tried by Courts-martial; whereas in more modern times they are left to be dealt with by the ordinary criminal law.

During the earlier part of the nineteenth century, and indeed up to the Mutiny, the trial of officers by Courts-martial was of very frequent occurrence. In the thirties and forties of last century the weekly issues of General Orders, and the weekly press, teem with reports of such trials, sometimes half-a-dozen or more in a week. The most common charges were drunkenness, duelling, insubordination, absence without leave, the wide term of "conduct unbecoming to an officer and a gentleman," and, less frequently, pecuniary defalcations. The last class, indeed, seldom appear to have been cases of deliberate fraud; but usually originated in carelessness, in leaving money matters to subordinates, or in simple inability to keep accurate accounts.

At the present day, the trial of an officer by Court-martial is of rare occurrence. Many causes have contributed to this great change. For one thing, officers come out to India at a
later age. A hundred years ago cadets, and civilians also, often came out at about sixteen, an age at which they would have been better suited to the discipline of a public school than to that of the army. Assistant Surgeons were often not more than twenty when they first joined. Duelling died out before the Mutiny. Over-indulgence in alcohol has greatly decreased, during the last century, among all classes, and in none to a greater extent than in that which officers the army. The Accounts Department now keep a much closer and more frequent scrutiny over public accounts; and appointments such as postmasterships and registrarships, which involve dealing with public money, are not now held by military or medical officers. And it was the custom to bring to trial by court-martial numerous cases which, at the present time, would be dealt with departmentally by senior officers, and which would often, if any punishment were considered necessary, be met by a mere reprimand.

In these frequent trials by Court-martial the Medical Service seems to have had its full share. The number of officers of the I.M.S. cashiered, dismissed, or discharged by Court-martial (the term cashiered is less frequently used than the other two) has not been large. Excluding cases in which the sentence was remitted, and the offender reinstated, but including some entered as "removed from the service," in which it is not stated that such removal was due to the sentence of a Court-martial, the total is only some twenty-nine cases out of a total of about 5600 officers, or just over one in two hundred, one-half per cent., viz.—

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<tbody>
<tr>
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<tr>
<td>Madras</td>
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<td>1400</td>
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<tr>
<td>Bombay</td>
<td>3</td>
<td>950</td>
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<tr>
<td>Junior I.M.S.</td>
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Total 29 5600

It is now more than thirty years since any officer of the I.M.S. was cashiered or dismissed.

But the number of culprits actually dismissed from the army bears a very small proportion to the number of cases tried. Acquittal was frequent; in many cases, indeed, trials were held on the demand of the accused, in order to clear his character, and conviction by no means necessarily involved dismissal.
Sentences of less severity were frequently passed, such as suspension from rank and pay, for periods varying from two years down to three months; removal from appointment; loss of seniority, by being reduced a certain number of places on the list; and not unfrequently simple reprimand.

In this chapter it is proposed to give an account of some of the more interesting cases in which medical officers have been tried by court-martial, showing the nature of the offences thus tried, instances of varying sentences, etc.

The first case quoted is the most interesting of all, as the only instance of a summary or "drumhead" Court-martial, in which detection of the offence was followed by trial, and sentence by execution, without the usual delays of the law; and also as the only instance of the infliction of the death penalty. The case has therefore been described at length. Whether the culprit had ever actually been employed as a medical officer in the Service is, to say the least of it, doubtful. He certainly never received a regular appointment by warrant as an Assistant Surgeon. He had applied for employment at Fort St. David, but apparently did not get it there. Caillaud appointed him to attend the hospital at Trichinopoly, but states that he never took up the post. In fact, he appears to have been only a candidate for employment, or unmedwar. In the proceedings of the Court of Enquiry, however, he is usually called the Surgeon.

On 28th Dec., 1757, a French Assistant Surgeon, who had taken service under the English, was hanged at Trichinopoly for treason. The following account of this affair is taken from Orme's *History of Indostan*, Vol. II, p. 289, the beginning of Book IX.

"The new year opened in the Carnatic with as little activity as the last had closed. The French troops remained in Pondicherry, waiting the arrival of their expected armament from Europe, during which, M. Soupire, as he says in a memoir he has published, entered into a negotiation with two Jemautdars of the English Sepoys to surprize Trichinopoly, by means of the French prisoners. Four hundred were in confinement in the city, and 50 or 60 had at various times been received into the English service, and in the end of December, soon after Calliaud returned from Madras, two of the enlisted Frenchmen accused one De la Forge, who had been accepted as a Surgeon's mate, that he had tampered with them to concur in a project, by which the foreigners in the service of the garrison were to murder the English guards in the night, then open the prisons, arm the prisoners, and with their assistance, overpower the rest of the troops. Four other Frenchmen avowed the same conversation with De la Forge, who, with much obstinacy, denied that he had ever spoken one word to
any of them: he was, however, hanged two days after his trial. This might have been the first opening of Mr Soupiere’s scheme, although he says nothing of it; but nothing was discovered of his conspiracy with the sepoys, which he seems to have protracted until the end of April.”

The original account of this affair is found in two letters from Captain Caillaud,* commanding at Trichinopoly, to the Governors of Fort St. David and Madras, dated 28th Dec., 1757, and Jan., 1758, respectively. The name of the unfortunate Frenchman appears to have been La Forge, not De la Forge, and whether he was ever actually employed in the British service seems somewhat doubtful. Caillaud’s letters are as follows:—†

“To Alexander Wynch, Esq., Governor of Fort St. David.

Dear sir,—I was informed last night of a design amongst the French soldiers here (entertained in our service) of endeavouring to surprise the garrison; the chief promoter of this scheme was one Bernard, alias La Forge, who came to your settlement from Pondicherry as Surgeon some time last April or May, and along with him a companion who calls himself an engineer, and I believe may still be with you, the surgeon came here some time ago, not being employed (as he said he could wish) at Fort St. David; he further said his intention was to go to Dindigul, unless I had any commands for him, I told him to wait thinking perhaps in his profession I might find him of use; however, he had other views for himself it seems; the fact of having endeavoured to seduce many of the Frenchmen to surprise the garrison, was fully proved on him this morning, and for which I hung him this afternoon. The good of the service required an immediate example, so I did not wait for orders; the particulars of this whole affair will pass through your hands in a few days, but this is chiefly to inform you of what we were made acquainted with this morning at the court of enquiry by his principal agent here in the affair; that this La Forge had in confidence assured him he had the same designs upon your garrison while there, that he had wrote to Pondicherry about it, and that his comrade the engineer was in the secret; I thought the sooner I could inform you of this the better, that you may take measures accordingly, perhaps by first having him strictly watched you may find out more than if he was immediately confined, of this, however, you are the best judge.

“I have received your two last favours and shall with thanks answer them when more at leisure, this affair has given me and will give me yet a day or two more trouble, however, everything is safe and quiet and I am as usual very much. Your obliged humble servant.—Trichinopoly: December 28th, 1757.”

* John Caillaud (not Caillaud), arrived in India in 1753, was appointed in 1759 to command the East India Co.’s troops in Madras, and to the Command of the Bengal Army on 25th February, 1760; was in command during the war in Bihar in 1760; succeeded as Commander-in-Chief by Major John Carnac on 31st Dec., 1760. Brigadier-General, 1763; retired, 1775; died, 1810.
"To the Honourable George Pigot, Presdt. and Governor, etc., at Madras.

Sir,—I have now the honour to lay before you the proceedings of a court of enquiry held here on the 28th instant in consequence of an information given me by two Frenchmen of a design formed by some of their countrymen (deserters and others whom I some time ago had taken out of prison when before Madura) to surprise the garrison, and endeavour to make themselves masters of the place; one of the principal actors in this tragedy was to have been one La Forge, a Surgeon, who had come here from Fort St. David a few days before I set out for Madras: he produced me a discharge from the French service, dated in April last, and informed me that he and another of his comrades with a discharge also had left about that time Pondicherry and came to Fort St. David, that his comrade had found service as engineer, that he himself had attended awhile in the hospital, but on some disagreement with the surgeon had leave to come away, that he came then to Tanjore, where finding no employment, he came to offer his services here and if not wanted that I would give him leave to go to Dindigul: this was his story.

"The want sometimes of people in his profession made me desire him to stay; and that he might attend our hospital if anything offered, and that * our surgeon found him capable and diligent, I might, perhaps, find an opportunity of employing him; on my return from Madras, our surgeon informed me, he never once attended the hospital, on which I proposed sending him about his business, but deferred it as I had some thing of more consequence that took my time and attention.

"I may now refer you, Sir, to the proceeding † of the Court for the remainder of the affair, and humbly hope my determination after strict examination of ordering the immediate execution of the villain, may not be thought by you a rash action, or too great an exertion of power, or a breach of respect I owe you Sir in not waiting for your orders, but I own the necessity of an immediate example appeared to me in so strong a light, that I should have thought myself deficient in my duty had I not done it; if unfortunately your opinion of the affair should differ from mine, I must think myself to blame, but hope even in that case you will consider it as well meant for the good of the service, an action certainly not of choice, but seemingly to me of absolute necessity.

"The Court continues sitting every day in order to sift the affair to the bottom, and to find out as many as possibly we can who were accomplices, or who knowing of it did not acquaint their officers: the crime is of such a nature as cannot be taken cognisance of by a regimental Court-martial, therefore if you choose they should be tried here, an order must be sent to enable us to hold a general one: you will also be pleased to inform me if you will confirm my offers of pardon to those who will turn evidence against the rest: the only way I can think of to come at the truth. Gille Lalot is one and I believe hath told the most he knows. Vadeboncœur was another to whom I made the same conditional offers, but he is a villain, and in the course of examination shows he knows much more than he will confess: however if you will please to confirm me that power, if they are to be tried here, I will endeavour to make the best of it I can.

* Word if omitted in copying MSS.
† The Proceedings of the Court of Enquiry are given below.
"A judge-advocate will also be necessary and as the sending up one
may be attended with inconvenience, I beg leave to mention Mr Alexander
Boswell* as one fit for that office, if you will please to send him a
deputation.

"The articles of war mention for the East Indies, that there must be
nine officers to constitute a general Court-martial, we are but eight here, if
you think proper to honour one of the volunteers with a commission or
order for appointment, we shall have a sufficient number.

"In the court of enquiry you will observe that passage in Gille Lalot's
evidence where he says that La Forge in confidence told him he had the same
design at Fort St. David, and how he proposed to effect it, and that his
comrade knew of it; as I hear that man is still employed there I gave
Mr. Wynch immediate notice of it that he might take the proper precautions
with regard to him.—*Trichinopoly, January, 1758."

It appears very doubtful whether the unfortunate La Forge
was ever actually employed as a Medical Officer in the Company's
service, either at Fort St. David or at Trichinopoly. If we
consider that he was so employed, then each of the three great
public medical services has had one of its members hanged.
Edward William Pritchard, the notorious Glasgow poisoner, had
served in the Navy. He was born in 1825, took the diploma of
M.R.C.S. in 1846, and entered the Navy as Assistant Surgeon in the
same year, but resigned in 1847. After trying practice in several
other places, he settled in Glasgow in 1860. In Feb., 1865, he
poisoned his wife and mother-in-law with antimony, was tried,
condemned, and was executed at Glasgow on 28th July, 1865,
this being the last public execution in that town. And in Dec.,
1887, a retired Surgeon-Major of the A.M.D. was sentenced to
death at Cork for poisoning his wife with arsenic, and subsequently
executed. Full accounts of the whole case may be found in the
Lancet and British Medical Journal of the time.

The Proceedings of the Court of Enquiry are contained in quite
a different part of Orme MSS.; Orme, Various, Vol. LXI, pp.
123-30. They are as follows:—

"At a Court of Enquiry held by y° officers of the Garrison of Trichi-
nopoly Decem° y° 28, 1757:

"Cap1 John Cailaud Presid1.
Cap1 Joseph Smith.
Lieu4 Donald Campbell.
Lieu1 John Clarke.
Lieu1 John Ralliard.

{ Lien1 Frederick Gurtler.
Lieu1 John Dickinson.
Lieu1 David Blake.

* Alexander Boswell, a medical officer, mentioned also in Orme's History,
Vol. II, Book X, p. 437, was for many years physician to the Nawab of the
Karnatak. Retired 12th Feb., 1776.

H.I.M.S.—VOL. II.
"The Court proceeded to ye Examination of Jean Jacques Tivelin Centinel in Capt. Caillaud's Company; who was desired to Inform the court of what he knew with regard to a design (formed amongst ye French soldiers Entertain'd in ye honble Company's service) of endeavouring to surprise the Garrison, and to make themselves masters of ye Fort. Of which the aforesaid witness gave ye following Account.

"That on ye 26 Ins, in ye morning the Prisoner La Forge commonly called ye Surgeon, Asked ye witness How long he had been in ye French Service, and how long Prisoner here? The witness told him five years in ye Service, Of which he had been four Prisoner. At that rate said ye Surgeon you must have a great deal of pay due to you from ye French. The witness answered The French commonly pay off arrears with Blows. If you think so, said ye Surgeon I see you are no Frenchman. The conversation ended here & they Parted.

"Soon after which he was met by one Gillalot Matross who asked him to breakfast at his house and there spoke to him as follows. You know we are a long time Prisoners together, I know you for a good and discreet man that will not betray his friend. We have a design to make a revolte in ye Garrison. The Witness asked him how do you propose to do it. By the means of ye Frenchmen whom we have gain'd, who are to be divided into three bodies with their Chiefs, one to each Company who are to Dispatch with their Bayonets, all they can meet, while the third body is to do ye same with the Guard. The whole then, each man taking two Firelocks, are to march to ye release of ye Prisoners, and so we Intend to get masters of the Place. The Witness then made many objections against ye Insufficiency of their numbers to succeed In such an Enterprise. To which ye Prisoner Gillalot told him not to be concerned For that once it was begun they should be joined by many more. He afterwards beg he would keep this a Secret, & so they parted.

"The Witness upon this Imediatly went in search of one of his Comarades Named Jean Boulard of Capt Caillaud's Company. And having found him related the whole of what Gillalot had told him; and asked him his advice how to proceed to put a stop To such a horrid design. Boulard told him he had best Imediatly acquaint ye Commanding Officer of it; That he said he intended doinge, but would chuse to have a witness with me, If you will serve as such, We will endeavour to find out Gillalot, And I will make him repeat before you, what he hath just been telling me.

"That they soon found the Prisoner whom they asked to drink with them; but not finding any one to serve them at ye arrack down,* Tivelin ye witness told him to come a little a further for he knew where to find some. That they stoped on one of ye Bastions, and he said to him. It does not signify drinking of a dram now, I want you to repeat here to me, before my Comarade, What you told me in ye Morning. That on this he observed the Prisoner turned pale and answered, I am not well enough yet Informed of ye affair but this night you shall know it all. That they afterwards walked on ye Witness, & ye Prisoner, Boulard, behind. When ye Witness asked him Is not ye Surgeon one of ye accomplices in ye affair, No said the Prisoner, on which they Parted.

"Jean Boulard confirms the above evidence very circumstantially as

* Down is probably miswritten for godown.
far as he was concerned: Except he did not hear ye last question made by ye witness about ye Surgeon.

"The Prisoner Gille Lalot Matross in ye Train of Artillery was brought before ye Court, and desired to relate before them what he knew of ye affair. It is proper here to Inform you Sir That the night before After ye two Witnesses Tivelin & Bouard had informed the Commanding officer of what they knew. Gillalot was sent for Prisoner; and on having an offer of pardon made him if he would confess what he knew of ye design, & those who were concerned in it he had confessed ye whole to Cap1 Caillaud.

"The Prisoner Gille Lalot then Informed the Court that some days before Christmass The Surgeon La Forge had been Tampering with * in several conversations about deserting, To which he owns he consented, But that a little time after La Forge said to him You must not Go I have another Scheme in hand for you, which will be ye making of your fortune, & several more. I have sounded the hearts of many of our People here & find them resolute & well disposed for a revolt will you be one with me. To which ye Deponent said he would. But asked him how he Intended to effect it, & who he had gained.

"The Prisoner La Forge told him that the means to effect it were easy. That ye men who were joined should be divided into three bodies. Two of which were to surprise the men in Barracks; and the third for ye Guard. That they were to dispatch every one they met with their Bayonets Draw out three pieces of Artillery which were to be disposed in ye streets and prevent ye Garrison getting together, & then to proceed to release ye Prisoners. Every man to take two firelocks one for himself the other to arm ye Prisoners with. That their reward should be 10000 R£ each man. He then told him to go speak with one named Va de bon Cœur of Capt —— † Constant Lamy & Tivelin & La Treuchee. & further said I have sounded these people I know their hearts & you will find out that what I tell you is truth. Upon this they parted and ye Prisoner went First to Va de bon Cœur. To whom he asked whether he was a good Frenchman & whether he would lend a hand to some thing that was to be done that Va de bon Cœur answered yes why not. Then says he Come with me to ye Surgeon's La Forge who will explain it further. That he was present at the Surgeon's and heard the whole conversation In which the Surgeon Related to Va de bon Cœur the same as he had told before to Gillalot about ye surprising of ye Garrison & ye means he proposed doing it by; as also ye reward & further said you may Also expect to be made an officer by it Will you be my Second in ye affair and how many men can you secure for us. Va de bon Cœur said he would try, that he believed he could answer for Ten, but that he would go speak to his Comrades.

"The Prisoner Gillalot finished this deposition with also Informing ye Court that the Surgeon la Forge had in confidence told him He had had a scheme of the kind for ye surprise of Fort St David while he was there. That he had wrote to ye Governor of Pondicherry about it desiring he would assist him in it with Twenty men who should come as deserters by whose means & ye others there He would engage to release ye Prisoners & make themselves masters of ye Town. & that his Comrade who came with him from Pondicherry to Fort St David was also in ye Secret.

* Word him apparently omitted.
† Name left blank in original; of Capt. So-and-so's Company.
"Further informed ye Court that he had spoke & comunicated ye Design to those other men Named Constant Lemy La Trauhee & Tivelin to some in general terms only to others ye Particulars that some had consented & others given doubtful answers.

"Va de bon Cœur was then Called into Court & asked of what he knew Concerning ye affair. He absolutely denied he knew anything at all of it, or had ever been spoke to about such a Transaction by either ye Surgeon or Gillalot. Upon which he was confronted with the latter who told him I have confessed all you must do ye same. But he still persisted in knowing nothing about it at last offer being made him that if he would Confess ye whole truth he might save himself He then Confessed before ye Court the principal part as above related of ye Conversation with the Surgeon and of his going to speak with his Comarades about it.

"His Comarades then were brought into Court by name La Trauhee Le Pret Gero Rabot & Casamir who being asked the Question Owned that Va de bon Cœur had proposed to them from ye Surgeon La Forge the Design of Surprising the Garrison and that they were asked if they would be of it But that they had all refused.

"The Prisonner La Forge was then examined but denied the whole. He was confronted with the Witnesses and stood it out denying to their faces he had ever spoke with them. In short every method we made use of to make him Confess but he still persisted in ye denial.

"The Court on that first day of examination Confined themselves only to Enquire into ye Proofs against the Prisonner La Forge of his having had the design of endeavouring to surprise ye Garrison and having also endeavoured to seduce many of the men of ye Garrison to assist him in it. The Court then broke up.

"But The fact having been proved on ye Prisonner la Forge beyond a doubt The Commanding officer thought an Immediat example absolutely necessary for the Good of ye Service, to deter others from ye like practice, so that he ordered the Prisonner La Forge as a spy and a Traitor to be executed, which was done according to ye usual forms in such Cases that very afternoon."

The next case given, that of Surgeon Major Francis Balladon Thomas, is also noteworthy, on account of the rank of the accused, and of the nature of the charge. Dr. Thomas had held the post of Residency Surgeon, Lucknow, the most lucrative civil medical post in the Company's service, and at the time of his trial was Surgeon Major to the First Brigade, the highest military appointment, with the single exception of that of Surgeon General, open to a medical officer. The case was one which, at the present day, would not be brought before a Court-martial, or any other Court, but would probably be dealt with departmentally, perhaps by removal of the accused from his appointment. Considering that Dr. Thomas was acquitted, though not entirely exonerated, on three out of the four charges against him, and partly also on the fourth, as the Court found that the word false could not be
established, one cannot help thinking that discharge from the Service was a severe punishment. Dismissal did not, at that date, as it does now, involve forfeiture of pension, for no officer had a right to pension then. It would also be interesting to know what were the scandalous and highly indecent terms Dr. Thomas used in drawing up his bill. This case is quoted at length in Hough's Courtmartial, pp. 734-36.

"Minutes of Council, 26th January, 1785.

"Case 4.—Proceedings of a General Court-martial held in Fort William, from the 15th December, 1784, to the 15th January, 1785.

"Crime.—Mr Francis Balladon Thomas, Surgeon-Major to the First Brigade, and late Surgeon to the Residency of Lucknow, ordered into arrest by the Commander-in-Chief, for the following charges exhibited against him by Mr J. Bristow, late Resident at Lucknow.

"I accuse Mr F. B. Thomas, Surgeon-Major to the First Brigade, and late Surgeon to the Residency of Lucknow, of conduct and behaviour unbecoming of a Gentleman in having demanded from me payment of a Bill for Medicines and personal attendance whilst I was Resident at Lucknow, in doing which he has acted unlike a Gentleman in the following particulars.

"1st.—For demanding from me payment for the said Bill, notwithstanding his having been at the same time, in the receipt of allowances from the Company as Surgeon to the Residency.

"2nd.—Supposing Mr Thomas to have had a right to make some charge, he has behaved unlike a Gentleman in demanding exorbitantly in one or more instances in the Bill.

"3rd.—He has acted unlike a Gentleman in drawing up or detailing the said Bill in false, scandalous, and indecent terms, in several particulars, with an apparent design and tendency to injure my character, and destroy the peace of my family.

"4th.—Supposing his charge had been reasonable, and had been occasioned by the causes alleged in his Bill, he has departed from the conduct of a Gentleman in divulging and publishing those causes in breach of confidence, and in violation of the sense of honour and fidelity, held sacred among Gentlemen of his profession."

"(A true copy). (Sd.) P. Murray, Adjutant-General. (Sd.) J. Bristow."

"Finding. Article 1st.—The proof of demanding payment of the Bill is before the Court, and although they are of opinion that act does not subject Mr Thomas to the charge of conduct and behaviour unbecoming the character of a Gentleman, yet they think it highly reprehensible in a Surgeon in the H. C.'s service to make any charge for Medical attendance or medicine to a Company's servant.

"Article 2nd.—The Court is of opinion the charges are very exorbitant, but as there is no established rule for charge in the Medical Profession in this country, they acquit Mr Thomas of ungentlemanlike behaviour in this particular.

"Article 3rd.—The Court is of opinion the Bill is drawn up and detailed in language most scandalous, and highly indecent, and upon this part of
the charge, they do find the Prisoner Mr F. B. Thomas to be guilty of conduct and behaviour unbecoming the character of a Gentleman.

"The charge of false with respect to Mr Bristow's disorder, does not appear to the Court to be established, but, in the case of the Bramin, said in the Bill to have been wounded by his people, it appears to them that this man was wounded by Sepoys without the knowledge or participation of Mr Bristow.

"Article 4th.—The Court acquit Mr F. B. Thomas of this part of the charge.

"Sentence.—The Court having found Mr F. B. Thomas guilty of conduct and behaviour unbecoming the character of a Gentleman, in breach of the 2nd Article of the 15th Section of the Articles of War, do sentence him to be Discharged the Company's Service, and is hereby discharged accordingly.—(Signed) W. Duff, Lt.-Col., President."

Dr. Thomas appears to have remained in India for some years after his dismissal. The C.G. of 15th Nov., 1787, contains an account of an action for illegal arrest brought by him against Mr. Bristow in the Calcutta Supreme Court, which awarded him damages to the extent of five thousand rupees.

In 1787 a dispute took place between Anthony Toomey, Surgeon to the Factory at Tellicherry, and Major Nugent and Captain Bannatyne, of the 5th Battalion of Sipahis, stationed there, about the removal of sick men from the regimental barracks to the General Hospital at Tellicherry, of which Toomey was in charge. Toomey alleged that cases which required treatment in the General Hospital were not sent to it. A somewhat acrimonious dispute followed. Finally Captain Bannatyne demanded that Toomey should be tried by Court-martial for bringing a false charge against him. The Tellicherry Council referred the matter for decision to Headquarters at Bombay. The decision given was that Toomey, as Surgeon to the Settlement, a civil appointment, was not amenable to military law, and so far was in his favour. As regards the original matter in dispute, the decision was against him, the Bombay Council stating that the removal of sick sipahis to the General Hospital lay entirely in the discretion of the Commandant and the Surgeon of the Battalion. This is distinctly laid down in the Bombay G.O. of 13th Jan., 1785, to which reference is made; the same G.O. appoints Messrs. Lloyd and Lawrence as Surgeons to the Sepoy Corps. The decision of the Council is given in their General Dept. Letter to Tellicherry, dated 18th March, 1787, as follows:—

"Captain Bannatyne must be acquainted that if he has any complaints to make of Mr Toomey, he should lay them before you, as we do not deem the Surgeon of the Settlement amenable to Military Law: It must at the same time be signified to Mr Toomey that his province with respect to patients to be removed from the Battalion to the General Hospital, is pointed out in General Orders of the 13th January, 1785, conformably to which such sepoys whose cases are chirurgical or otherwise very particular, will be put under his care at the discretion of the Commandant and the Battalion-Doctor."

Assistant Surgeons locally appointed in India, and not yet confirmed by Court, were liable to dismissal without formal trial. Two such cases are recorded in the Madras Mily. Cons. of Oct. 1791, John Jones and John Price, both while serving in the second Maisur war. Jones had served in the Navy, as Surgeon's Mate of H.M.S. Phaenix, and had been left behind at Madras, where he was locally appointed as Assistant Surgeon on 12th Oct., 1790. He was dismissed on 18th Oct., 1791, under orders from Lord Cornwallis and General Medows, for abducting a Sergeant's wife. Price was appointed on 20th April, 1791, and dismissed on the recommendation of General Medows, for neglect of duty and disrespect to his superior officer, Surgeon Finlay Ferguson, from 4th Oct. 1791.

Departmental inquiries were not unknown in the eighteenth century. The conduct of Assistant Surgeon Thomas Martin, 2nd Batt. Artillery, was the subject of a long inquiry by the Calcutta Medical Board, embodied in their Proceedings of 23rd Oct., 1789. The Board found that his treatment of a patient, Corporal Henry Hugh, by injudicious bleeding and omission to give Peruvian bark, was injudicious; removed him from his appointment as Assistant Surgeon to the Artillery, and ordered him to attend the Presidency General Hospital as a pupil until further orders. Eight months later, on 21st July, 1790, he was posted to the 5th European Battalion.

The Proceedings of the Calcutta Medical Board of 25th April, 1791, contain a report extracted from G.O. of 18th April, 1791, of a Court-martial held at Fort William on 26th March, 1791, on Surgeon Thomas Phillips, of the 5th European Battalion, for assaulting Assistant Surgeon Thomas Martin. Phillips was acquitted on this occasion, but was again tried by Court-martial, a month later, on 26th April, 1791, and sentenced to six months' suspension, for having insulted the members of the Court at the
previous trial. The remarks of the Court in this case are given at some length by Hough, (p. 458).

"The Court determine that the paper read in open Court by Mr P— (the prosecutor), is an insult of the grossest kind upon the proceedings of this Court, replete with misrepresentation, and a reflection on the dignity of Courts-martial, and that after the repeated reprimands Mr P— has already received from the Court, and experiencing their lenity to so great a degree as he had done by several instances of his conduct being hitherto overlooked, they find themselves under the indispensable necessity of ordering him into arrest for his contumelious disrespectful conduct.

"The Court are further of opinion that Mr P—'s delivering into the Court, the written paper which he called a protest, saying he had nothing now to offer in reply and retiring immediately, instead of making his reply as was expected, and for which leave was granted by the Court at his own request, is a serious aggravation of the offence that preceded it, and is a menace which seems intended by him to bias their judgment in passing sentence on Mr M—. Taking these matters, together with the intemperate and contumacious conduct of Mr. P— throughout the whole of this trial into their most serious and solemn contemplation, and feeling the necessity of discouraging in the most exemplary manner all sorts of intemperance and contempt towards the only tribunal that exists for the preservation of discipline in the Army, they pronounce Mr P—, Surgeon of the 5th European Battalion, guilty of a breach of the 13th Article of the 12th Section of the Articles of War, and they sentence him, and he is hereby sentenced to be suspended from his rank, pay, and allowances in the H. C.'s service for the term of six months."

Mr. M— is evidently the unfortunate Assistant Surgeon Thomas Martin. He seems to have got off on the occasion referred to above; but was cashiered two years later, by a Court-martial held at Barhampur on 16th Feb., 1793, for cheating, by passing two separate sets of pay bills for one month.

A Mily. Letter from Fort St. George, dated 25th May, 1792, states in paras. 31, 32.

"Surgeon Blackader was sentenced by a Court-martial to be suspended from pay and batta for eight months for having neglected the wounded Europeans placed under his charge, but Lord Cornwallis, dissatisfied with the sentence, recommended, and in which we most readily agreed, that his suspension should be continued till Court's pleasure should be known. He has since been permitted to resign, and is mentioned as a very unfit person to return to India in any capacity whatsoever."

On 14th Feb., 1794, charges of neglect of duty were brought against William Raine, then junior Member of the Madras Medical Board, by Alexander Anderson, one of the Presidency Surgeons. Raine requested trial by Court-martial, on 18th Feb., and on 21st Feb., was placed under arrest, pending his trial. He was
acquitted. Anderson was removed from his appointment as Presidency Surgeon by G.O. of 26th March, and was appointed to the 4th Battalion of European Infantry, in the place of M. Thompson, suspended.*

A Court of Inquiry held at Eilore on 25th Dec., 1793, recommended that Surgeon Maxwell Thompson, of the 4th European Battalion, should be tried by Court-martial for "gross neglect of duty and inattention to the sick of the hospital under his care." The Court-martial found him guilty, and sentenced him to suspension for six months. The Madras Medical Board, on 18th March, 1794, considered him unfit for the position he held, reported him to the Court of Directors, removed him from his corps, and appointed Surgeon Alexander Anderson, himself in trouble, to the vacant post. The Madras Council ordered that Thompson should not again be employed in any public capacity till the pleasure of the Court of Directors was known. The Court's orders were to the effect that he should be suspended from pay and allowances for a further period of two years, in addition to the six months' suspension ordered by the Court-martial.†

The case was reported in a Madras Mily. Letter, dated 25th July, 1794, paras. 9-14.

"Mr Surgeon Thompson has been found guilty of having discharged several patients from the Hospital uncured, and of not having taken the necessary and proper steps that the sick under his charge might not suffer by the failure of the contractor in the stipulated Supplies of Clothing and Linen; for which he was sentenced to a suspension from Rank and Pay for six months, a punishment very inadequate to his misconduct. Had not the officer commanding the Army confirmed the sentence, we should have dismissed him from the service. The matter submitted to the Court, whose attention is requested to the instances adduced by the Judge-Advocate of the very culpable and inhuman conduct of Mr Thompson, and to the circumstances of the dismissal of Surgeon Blackader in 1792 for neglect of the wounded Europeans under his charge. The penalty will be exacted of the Hospital Contractor for his failure in the stipulated Supplies of Clothing, etc."

Surgeon William Betty, of Madras, was cashiered by Court-martial on 6th Oct., 1803, after having killed in a duel Lieut.-Colonel Robert Hamilton, of the Bengal Army, at Amboyna in Java, on 7th Sept., 1802. This was a somewhat exceptional instance, such cases usually being handed over for trial to the Supreme Court. Possibly the reason for Betty's trial by Court-martial was, that Amboyna was not within the jurisdiction of any of the Indian Courts. Betty was restored to the Service from 7th March, 1805, by orders conveyed in a Letter from Court, dated 18th April, 1805, published in the Madras Gazette of 4th Sept., 1805, and quoted in the Asiatic Annual Register for 1806, Part I, Chronicle, p. 71.

Para. 14. "We have agreed to restore to the service Mr. William Betty, a Surgeon on your Establishment, who was dismissed by the sentence of a Court-martial, and the General Court have concurred in this our resolution.

Para. 15. "We have been influenced in our decision upon Mr. Betty's case, by the peculiar circumstances of his long arrest previous to his trial, and of his having been acquitted of all the charges brought against him, except that of breaking his arrest, in which he appears to have acted more from an error in judgment than intentional disobedience, and likewise by the very strong and unanimous recommendation of the Court-martial in his favour."

From the above order it appears that Betty must have been acquitted of the more serious charge, and convicted only of a more or less technical offence. Presumably Hamilton was the challenger and the aggressor.

Assistant Surgeon David Reid, of Madras, was cashiered on 11th Sept., 1815, for sending a challenge to his Commanding Officer. He was reinstated from 12th May, 1815, by G.O. of 29th July, 1816.

Assistant Surgeon Thomas Compton, of the Bengal 4th Volunteer Battalion, then serving in Java, was cashiered on 21st Dec., 1816, for insubordination and drunkenness; the sentence was, however, remitted by the Commander-in-Chief. This case, as extracted below, is included in Hough's Court-martials, p. 208, where, however, only the initial letter is given.

"Asst. Surgeon C——, 4th Volunteer Battalion, placed in arrest on the following charges:—

"1st.—For scandalous conduct at Sourabaya, on the 1st August, 1816, in having gone to a public billiard room in a state of intoxication, and having there in a violent manner wantonly and grossly insulted Captain Drury.
"2nd."—For contempt of authority on the same occasion in refusing to obey the order of his superior officer, Lieut. Dwyer, who had desired that he would consider himself under arrest to his home.
"3rd."—For conduct unbecoming an Officer and a Gentleman on the abovementioned date, and for contempt of authority in grossly abusing, threatening, and resisting Lieut. and Adjutant Christie, when communicating to him the orders of his Commanding Officer.
"Finding."—Guilty.
"Sentence."—To be cashiered.
"The Court at the same time beg strongly to recommend him to the mercy of H.E. the Commander-in-Chief.
"Approved and signed."—Moira."

"The Commander-in-Chief agrees fully in the considerations (apparent in the proceedings) which have induced the Court to intercede for leniency in this case, the sentence is accordingly remitted; but, as it would be unsafe that hospital patients should be left to the treatment of a person subject to sudden aberrations of mind, the Commander-in-Chief will make an application to the Governor General in Council, for putting Mr. C—— on the pension list.—By Command, (Signed) C. J. Doyle, Military Secretary."

In 1817, Assistant Surgeon Charles Pears, of Bengal, was tried by Court-martial, with the following somewhat curious result. This case also is taken from Hough's Court-martials, p. 534. The first charge, on which the accused was acquitted, is not quoted. The second charge was one of having insulted Assistant Surgeon Luxmoore, Deputy Apothecary General, and it is in the verdict that the interest of the case lies.

"Finding."—Not guilty of the first charge. The Court proceeds to consider the second charge, but there being an equality of votes on the whole or partial guilt of the Prisoner, and the same equality in the quantum of punishment to be assigned, and the Judge Advocate-General having declared his opinion that a majority of voices must concur to pronounce judgment, the Court arrest their proceedings and adjourn until the further pleasure of the Most Noble the Commander-in-Chief be obtained.
"Under the circumstance of the parity of votes the Commander-in-Chief is to consider the opinion of the Court as an acquittal and confirms it as such. (Signed) Hastings."

Another trial given by Hough (p. 532) is that of Surgeon Thomas Hart Davies, of Madras, in 1819, accused by John Douglas, acting Member of the Medical Board, of "scandalous and infamous conduct unbecoming the character of an officer and a gentleman." The Court found the prisoner "not guilty, and do most fully and most honourably acquit him of the charge." The Commander-in-Chief of the Madras Army, Lieut.-General
Sir Thomas Hislop, confirming this verdict, made some rather strong remarks to the effect that the charge should not have been brought. Davies himself rose to be senior Member of the Medical Board some fourteen years later, in 1833.

It is quite unnecessary to recapitulate most of the cases of trial by Court-martial of medical officers, whatever the result. Only a comparative few are given, in which some point in the charge, verdict, or sentence appears to be worthy of note.

On 17th Aug., 1825, Assistant Surgeon J. A. D. Watson, Bengal, was tried by Court-martial for unnecessarily reporting himself sick, found guilty, and sentenced to be reprimanded by the Commander-in-Chief, who remitted the sentence, as being beyond the powers of the Court.

On 27th April, 1829, Assistant Surgeon John Ladd, Madras, was sentenced by a Court-martial at Bellary to be cashiered for signing false muster rolls. The sentence was remitted by the Commander-in-Chief on the ground that the Colonel and Adjutant had done the same, and that the signatures had been affixed as a matter of form, without intent to defraud. At the same time a strong warning was given that such practices must cease.

On 4th Nov., 1830, Assistant Surgeon William Jacob, Bengal, was tried by Court-martial for demanding fees for professional attendance from Lieut.-Colonel Dun, of the 35th B.I., found guilty, and sentenced to suspension for three months.

On 23rd April, 1832, Surgeon C. M. Macleod, Bengal, was tried by Court-martial for absence without leave, and acquitted on the ground of aberration of intellect, being invalided from the date of his trial.

Bengal G.O. of 15th July, 1834, directs the removal from their appointments of Surgeon Wood, of the 4th, and Assistant Surgeon William Jacob, of the 5th Batt. Artillery, for addressing to the Medical Board, in insubordinate terms, complaints, which were deemed frivolous, about the medicines and instruments supplied to them. This case seems to have been dealt with by Government without formal trial. Jacob was the same officer who had been suspended for three months in 1830.

Bengal G.O. of 26th Feb., 1839, publishes the results of a Court-martial held at Dinapur, in which an Assistant Surgeon, holding the posts of Civil Surgeon and Postmaster of Hazaribagh, was
discharged the service for habitual drunkenness and embezzlement as Postmaster.

Assistant Surgeon A. R. Morton, Bombay, was tried by Court-martial at Tatta in Sind, on 7th Jan., 1839, for drunkenness, found guilty, and sentenced to lose eight steps. The Commander-in-Chief refused to confirm the sentence as inadequate to the offence; the result being that the accused was released from arrest and sent back to duty. It seems curious that the effect of ordering an inadequate punishment should have been the infliction of no punishment at all. The same result had followed the trial of Assistant Surgeon J. A. D. Watson mentioned above.

Bombay G.O. of 26th Aug., 1839, publishes the result of a Court-martial held at Kharrak in the Persian Gulf, on Assistant Surgeon W. K. Williams, Bombay, serving in the Indian Navy, for striking his superior officer on 8th Nov., 1838. He was found guilty, and sentenced to be dismissed.

Another Bombay Assistant Surgeon, William Jeaffreson, was dismissed by Court-martial on 21st Sept., 1832, for the same offence, striking his superior officer.

Bombay G.O. of 25th Nov., 1840, publishes the result of a Court-martial on another Bombay Assistant Surgeon, serving in the Indian Navy, for indecent conduct. The accused fortunately was acquitted.

In Haidarabad G.O. of 8th Sept., 1840, is published a Court-martial on Surgeon Riddell, of the 5th Nizam's Infantry, for refusal to obey orders. The accused was found guilty, but got off with a reprimand. There must have been, presumably, considerable extenuating circumstances.

Bengal G.O. of 14th Sept., 1841, publishes the result of a Court-martial, held at Delhi on Sept. 1st, 1841, on Assistant Surgeon A. Mackean, of the 22nd B.I. and Officiating Assistant Garrison Surgeon, for neglect of duty, in not visiting a patient, seriously ill, between the 6th and 12th July. The accused was found guilty, and reduced twelve places in the list.

Bengal G.O. of 20th Jan., 1843, gives the result of a Court-martial held on Assistant Surgeon H. N. Nugent, accused of neglect of duty in having left the transport on which he was ordered to embark for China. Accused was found in Calcutta some time after the transport had sailed. He was found guilty, and sentenced to suspension from rank and pay for six months. The
sentence appears a light one, for what might have been called
desertion when ordered on active service.

In 1850 Surgeon Donald Butter, Civil Surgeon of Benares,
was Court-martialled along with Captain C. G. Fagan, for fraud,
in their capacity as Directors of the Benares Bank. Both were
found guilty, and sentenced to be cashiered. The *Friend of India*,
in its issue of 30th May, 1850, reporting this case, protests against
the severity of the sentence, pointing out that the two accused
were no worse than the other Directors, who, not being military
officers, were not subject to trial by Court-martial; while all of
them had been guilty of error of judgment, rather than of fraud.
Butter was reinstated from 8th Dec., 1852, by G.O. No. 140 of
16th Feb., 1853, became S.S. on 31st Dec., 1854, and retired on
23rd April, 1859. Fagan was also reinstated.

In the *Lancet* of 12th Feb., 1853, is contained a report of a
Court-martial on Assistant Surgeon J. E. Umphelby of Bengal, held
at Fort William on 2nd Oct., 1852. The charge is decidedly
curious, and it is fortunate for the reputation of the Service that
the accused was acquitted.

"Charge.—For conduct disgraceful to the character of an Officer and a
Gentleman, in having, at Calcutta, on July 7th, 1852, subjected himself to
the indignity of being publicly kicked by Mr A. P. Pennefather, a clerk in
the office of the Administrator-General, without adopting any sufficient
measures, either immediately or for three days, to obtain reparation for
such insult.

"Finding.—Not guilty and honourably acquitted.

"Approved and confirmed.—(Signed) W. M. Gomm, General, Com-
mander-in-Chief, East Indies.

"Simla: October 18th, 1852.

"The Commander-in-Chief is glad that he is able fully to approve and
confirm the honourable acquittal of Asst.-Surgeon Umphelby of the dis-
graceful imputation brought against him, and His Excellency trusts that
the painful position in which this officer has been placed will be a lesson
to him to be more careful in future in the choice of his associates, and more
guarded in his language and behaviour."

Five years later, however, on 23rd April, 1856, Umphelby
was discharged by Court-martial.

The *Lancet* of 14th Sept., 1861, gives the result of a Court-
martial held on Assistant Surgeon H. P. Lawrence, Bombay, who
was convicted and sentenced to be cashiered for having given a
cheque, to meet which his balance was insufficient. The sentence
was remitted by the Commander-in-Chief, who considered that
the offence was simply technical, and that the accused had reason to suppose, when he gave the cheque, that the funds to his credit were sufficient to meet it.

Cases in which an officer was charged with murder by killing another man in a duel, were usually sent for trial by the Supreme Courts, not tried by Court-martial, though Betty's case quoted above was an exception.

The earliest instance of this kind in the I.M.S. seems to be the case of James Ford, in 1777, papers about which are preserved in the Calcutta Record Office. A letter, dated 4th June, 1777, from Captain W. Crabb, commanding at Monghir, reports that Surgeon Ford had shot Lieut. Thomas Sydney Smith in a duel. Ford was sent down to Calcutta for trial by the Supreme Court. On 5th Dec., 1777, Robert Jarrett, the Company's attorney, was ordered to conduct the prosecution. On 27th Dec., Jarrett reported that Ford had been honourably acquitted.*

Surgeon John Martin, of the Madras Medical Service, was tried for murder in 1787, and acquitted. Martin was a Frenchman, who had been in the service of Haidar Ali, and had deserted to the English in Dec., 1767. The circumstances under which he came over are given below.† In Aug., 1786, he was placed under arrest on suspicion of complicity in a murder at Bimlipatam, and in March, 1787 was sent from Vizagapatam to Madras for trial.‡ In the C.G. of 23rd Aug., 1787, it is stated, that he had been tried at the Madras Quarter Sessions and acquitted. In Oct. he was restored to the service, and appointed Surgeon to the Foreign regiment.§ In a memorial dated Bimlipatam, 1st Jan., 1795, which he submitted to the Madras Government, and which is contained in the Madras Cons. of 20th Feb., 1795, || he states that he entered the Company's service from that of Haidar Ali, bringing with him all Haidar's European Cavalry, as will be shown by the records of 1767–68, and was appointed full Surgeon at once. A copy of the order appointing him Surgeon from

† Though always called John Martin in the records, his real name, as a Frenchman, was Jean Martin, and so he signs himself. For Martin and other Frenchmen in the Service, see Chap. XXII, Appointment to the Service, Examinations.
|| The original memorial must have been in French, as that in the Cons. is certified by the French translator to be a correct translation.
1st Dec., 1767, is appended. He goes on to state he saw much service in the field, and was stationed in cantonments at Chicacole, Vizagapatam, Ganjam, and Aska; that in 1776, when war with France was declared, he was ordered to reside at Bimlipatam, and that after the peace he was passed over and forgotten. A copy is appended of an order, dated 29th Aug., 1776, directing him to leave Aska and to reside at Bimlipatam during the war with France; this order states that no reflection on his character is intended, and that he will draw full pay from Vizagapatam factory.

As regards the murder, he states that in 1784 he was assaulted and robbed by one of his peons, and that this peon was himself murdered five days later, probably by one of his accomplices in the division of the spoil; that he was accused of this murder, kept a prisoner for over a year, was then acquitted by the Court at Madras, and sent back to duty. He goes on to complain that his pay had since been stopped, owing to his son’s having engaged in the slave traffic, which was not then prohibited. No answer to nor orders on this petition seem to have been recorded.

A letter from the Fort St. George Govt. dated 29th Sept., 1767, toColonel Joseph Smith, who was in command of their army in the first Maisur war against Haidar Ali, mentions that the Government had hopes of inducing many, if not all, of Haidar’s European officers to desert to the English. Among these officers was Dr. Martin.

“A Frenchman by name Le Chevalier de St. Lubin who had been detained as a prisoner and ill treated by Hyder Ally, having found means to make his escape with Captain McKain, seems full of Resentment at his ill Treatment, and has communicated to Us a Project for withdrawing from Hyder Ally, all his European Horse and Foot Topasses, and Mogul Cavalry; this Project is to be conducted by one Martin, formerly in our Service at Madura, now Doctor with and much in the Confidence of Hyder Ally, and one Eley Commandant of the Portuguese and Topasses. He is an officer belonging to Goa, but detained against his Will to serve Hyder Ally, consequently is much dissatisfied, as are, we understand, all his Troops.”

Colonel Smith, immediately after the relief of Ambur, on 8th Dec., 1767, drove Haidar Ali from his position in front of the Fort at Vaniambadi. On this occasion the troop of French Horse serving Haidar under Captain Aumont, deserted to the English. Smith

reported his action, and the desertion of the French, to Fort St. George, in a letter, dated Camp Vaniambadi, 9th Dec., 1767, and gave Martin’s name among those of the officers who had come over.*

A letter from Charles Bouchier, Governor of Madras, to Colonel Smith, dated 23rd Dec., 1767, informs him that Martin had been admitted to the Company’s Medical Service.

“This will be deliver’d to you by Mons. Martin who we have entertained as a Surgeon upon our Establishment and he is to be appointed to do duty with the Corps of foreigners as soon as they are formed • • • • he is to receive Pay and Batta the same as our other Surgeons.” †

In the C.G. of 19th Jan., 1815, is reported the trial in the Supreme Court, on 13th Jan., of Assistant Surgeon Walter Key, of Bombay, medical officer of the Company’s Cruizer Malabar, for the murder of Lieut. Passmore, of the same vessel, by killing him in a duel, on the island of Bouro, one of the Moluccas, on 22nd Feb., 1814. Lieut. Edward Searight, who was first Lieutenant of the Malabar at the date of the duel, but had succeeded to the command by the time of the trial, was also indicted, having been Passmore’s second. Lieut. Irwin, who seconded Key, does not seem to have been put on trial. The evidence consisted chiefly of the statement of Lieut. Searight, which was to the effect that Passmore had been the aggressor. The jury acquitted both prisoners. Key, who was stated to be very ill at the time of the trial, died a few days later, on 22nd Jan., 1815.

Assistant Surgeon John Porter Malcolmson, Bombay, was indicted in the Bombay Supreme Court, on 25th Sept., 1835, before the Chief Justice, Sir Herbert Compton, and Sir John Awdry, Puisne Judge, for the murder of Captain Alexander Urquhart, at Poona, on 18th July, by shooting him in a duel. Mrs. Malcolmson appears to have been the cause of the duel. Malcolmson was wounded in the hand, got tetanus, and recovered. The two seconds, Major Foster Stalker and Lieut. James McDonnell, and Assistant Surgeon James Don, were also put on trial. The prisoners offered no defence. When Awdry began to deliver the charge to the jury, the foreman stated that the jury had made up their minds to acquit all the prisoners. In accepting this verdict,

† Ibid. Vol. LXXVI, pp. 244, 245.
Sir John Awdry remarked that Don, who had not been present at the duel, but had been summoned after it was over, should never have been put on his trial. Don rose to be a Member of the Bombay Medical Board twenty years later, on 26th Jan., 1855.*

No case appears to be on record in which any member of the I.M.S. has been brought for trial before a Court-martial for cowardice. And the three cases quoted above, seem to be the only ones in which a member of the Service has been cashiered for fraud.

Only one case of heinous civil crime committed by an officer of the I.M.S. appears in the records. On 19th June, 1821, a Madras Surgeon of over twenty years' service was sentenced to transportation for fourteen years for forgery. He died in New South Wales before the end of the year.†

Madras G.O. of 23rd Oct., 1840, notifies that an Assistant Apothecary of the Madras Service had been sentenced to death for the murder of another Warrant Officer of the same rank. The Commander-in-Chief commuted the sentence, on account of extenuating circumstances, to penal servitude for life.

It is curious that these two last cases, Blackwall's treason, Brown's case of poisoning,‡ Martin's trial for murder, and the execution of La Forge, all occurred in Madras.

* This case is reported at considerable length in the Asiatic Journal for April, 1836, Asiatic Intelligence, p. 208.
† This case is also reported in the Asiatic Journal for Jan. to June, 1822, p. 491; and that of the Assistant, Apothecary in the same journal for March, 1841, p. 235.
‡ For Blackwall and Brown see Chap. VII, Early History, Madras and the Coast.
CHAPTER XXXV

THE FIRST HALF OF THE NINETEENTH CENTURY

"Jaldi sab lad hojega."
Ranjit Singh.

This period, especially if we take it not as the exact term of fifty years, but include in it the fifty-six years before the Mutiny, was one of expansion and consolidation of the British power in India. One after another, great part of the Madras and Bombay Presidencies, the Upper Duab, Rohilland, Arakan and Tenasserim, the Panjab, Nagpur, and Oudh, "became red." Some of the most important Indian states, Maisur, Gwalior, and Indore, passed from the condition of dangerous rivals into that of protected allies.

Apart from war and annexation, the most important events of this period were the successive extensions of the Company's charter. Renewed for twenty years in 1793, considerable opposition was made to its further renewal in 1813. Though passed, the new charter abolished the Company's monopoly of Indian trade, which was thrown open to all British subjects. When the charter was again renewed in 1833, the China trade followed, and the Company ceased to exist as a trading corporation, remaining a governing power. In the appendix to the C.G. of 25th July, 1834, is printed an order of 4th July, 1834, republishing Act 3 and 4 of William IV.

By cap. i the Company's trade was abolished, while it was confirmed in all its possessions, which it was to administer on behalf of the Crown, except St. Helena, which was handed over to the British Government. In 1853 the charter was again renewed; not, as on former occasions, for a fixed period of twenty years, but indefinitely. Five years more, and the rule of John Company came to an end.

All matters of importance, concerning the I.M.S. as a Service, which occurred during this period, have been included in the
preceding chapters on Rank, Pay, Furlough, Pension, etc. In this chapter are comprised various miscellaneous items, which cannot well be brought under any of the previous headings.

A Political Letter from Madras, dated 20th Sept., 1816, in para. 17, reports an application from Assistant Surgeon Hunter for extra allowances for attendance on the Raja, the Raja Tondiman, and the missionary establishment at Tanjore. The Madras Government granted him fifteen pagodas a month and palki allowance for attendance on the missionaries, and ordered that for his attendance on the Raja he might accept any remuneration offered, but must not demand any fees.

Three autobiographical works by officers of the I.M.S. deal with this period. All three are anonymous. The first in point of date of commencement of the author's service, though not the earliest published, is called The Autobiography of an Indian Army Surgeon, or Leaves turned down from a Journal; published by Richard Bentley, London, in 1854. The author calls himself Wilmington Walford, evidently an assumed name. The internal evidence is not sufficient for identification, especially as he states that several of the incidents in the book, his trial by Court-martial, and his voyage to China on an opium smuggling clipper, are taken from the career of another officer, not from his own. The book is dull, but is of some interest to a member of the I.M.S. as a picture of the conditions of medical service in Bengal sixty to ninety years ago. The author says that he went in for medicine with the intention of entering the I.M.S., and studied at Edinburgh as a pupil of a retired army surgeon, who had served in India at the capture of Seringapatam, and in the Peninsula at Salamanca and Badajoz. He joined the Bengal Medical Service about 1820, paying £110 for his passage out, but got back half that amount to act as Surgeon of the ship on the voyage. He spent his whole service in military employ, served in the first Burmese war and in the Panjab war, being present at Chilianwala, but not in the first Afghan war nor in the Sutlej campaign, and retired shortly before the Mutiny. He seems to have been satisfied with his lot, as he calls the I.M.S. (p. 41) "the most liberal public service" and "a most generous service."

By far the most interesting of these three works is The Diary of an Assistant Surgeon. This has never been published in book form; it appeared in the Asiatic Journal in sixteen parts, from
1841 to 1843. The internal evidence is not sufficient to identify the author. He joined the Madras Medical Service in 1828 or 1829, and served successively with the Horse Artillery at St. Thomas' Mount, with the 46th Foot at Bellary, with "Caesar's Legion," presumably the 10th M.N.I., at Arni and Vellore, for a short time as Civil Surgeon of Chittur, and with another N.I. regiment at Trichinopoly and Quilon. From Quilon he went by sea to Madras, round Ceylon, a voyage which was expected to last eight days, but actually took only five, costing him Rs.250. From Madras he went home on sick leave, on the Lord Amherst, paying £150 for a cabin to himself. S.S. Sir Thomas Sevestre was a fellow-passenger. He resigned the Service on the expiration of his furlough.

Much of this Diary is very interesting. Like the author of the first book, the writer seems to have been satisfied with his lot. He says that the pay of junior officers is insufficient, but that of those in medical charge of a regiment is ample. He gives a table of expenses, and reckons those necessary at Rs.171 a month; viz., Servants 59, house-rent 17, mess-bill 65, other necessaries Rs.30, total Rs.171; and states that, out of his pay of Rs.300, an Assistant Surgeon, if unmarried, should be able to save Rs.1000 a year. The servants' wages are given as follows: Munshi 17, headboy 8, dressing boy 5, horsekeeper 7, grasscutter 5, washerman 7, ironman 5, waterwoman 3, chokra 2; total Rs.59. Surely the largest item, the munshi, would not be a permanent servant, but only employed for a year or so. No khidmatgar appears in the list, perhaps the headboy did this work; and no sweeper is included. What is an "ironman?" If washerman and ironman together do the work of the dhobi, the cost of washing seems very high, for a bachelor, eighty years ago. The cost of stable servants is also nearly as high as in Northern India at the present day. The other items strike one as low.

As regards the rate of mortality he states that Assistant Surgeons are more, not less, exposed to risks than other officers, but on the other hand have the advantage of going out older and more experienced than Cadets and Writers, and continues—

"In the year 1830, the number of Assistant Surgeons on the Madras Establishment amounted to 147; of this number, in 1840, will be found on the list of the Medical Department the names of 83 of the same individuals; leaving 64 casualties, or about 6½ per annum. But of these 64, fourteen
retired on the pension list; supposing therefore, that the whole remaining fifty died in India, it will show an amount of deaths at five per annum, or on 147 persons barely three per cent."

When he says "barely three per cent." he overlooks the fact that a mortality of three per cent. for young adult males, all passed as in good health to begin with, is a very high mortality.

The author gives a short account of two cholera epidemics; in the first thirty-three men and two officers were attacked in seven days, and just one half, sixteen men and one officer, died. In the second, on the march from Trichinopoly to Quilon, in 31 days, 93 cases occurred among sipahis, and 170 among camp followers. The deaths were, one officer, one officer's child, two native officers, the head doctor babu, and thirty privates, besides camp followers. The epidemic ceased immediately the regiment crossed the Travancore frontier.

Among miscellaneous matters mentioned, the author prefers Madras to the upcountry stations, and calls Bellary a very unpleasant station. He says that the duties with a King's regiment are heavier than in the N.I.; with the former a sick list of fifty is moderate, with the latter twenty form a high sick list. The other officers he found mostly very good fellows. He says that the medical officer is recognized as a mounted staff officer. The mess dined at 3.30 p.m. He gives some fair stories of tiger shooting and of duelling; the latter he considers a necessary evil. He also mentions a conjuring performance, in which he saw a native conjurer sitting in the air some feet off the ground, as far as he could see without any support. The conjuror died soon afterwards of cholera at Cuddapa. When stationed at Vellore, he tells the story of the Mutiny at that station, in 1806.

The third book is called Stray Leaves from the Diary of an Indian Officer, and was published by Whitfield Green and Son, London, in 1865. The author calls himself Mr. Carlisle. His real name was Robert Bakewell Cumberland. He joined the I.M.S. as Assistant Surgeon in Bengal on 16th April, 1828, became Surgeon on 1st Feb., 1845, retired on 20th Jan., 1854, and died at Crediton on 17th Dec., 1876. Unlike the other two, he spent much of his service in civil employment. Landing at Calcutta in Sept., 1828, he served with regiments at Cawnpore, Mainpuri, and Sagar, and went home sick in 1830. On his return in 1832 he was posted to Balasore, then to regiments at Cuttack and Midnapur,
and in 1836 became Civil Assistant Surgeon of Puri. There he spent nine years. His descriptions of Puri, and of a visit to Sambalpur, are the most interesting part of the book. In Jan., 1846, he went on sick leave to Australia, and married there. On his return to India he went back to military duty, and was posted to a N.I. regiment at Dakka. He states that this regiment suffered from fever at Dakka to such an extent that on one occasion, out of a strength of between 800 and 900, only one man was fit for duty. The regiment was ordered to the Panjab in 1848, in the Army of Reserve, but was found too sickly for active service, so was halted at Allahabad and then sent to Etawa. The number of this regiment is not given, but it was the 62nd N.I., originally raised at Cawnpur in 1818. It mutinied at Multan in 1858. On retirement Cumberland went to Australia, and settled there; but after six years in the Colonies returned to England.

In 1835 Surgeon Ranald Martin suggested to the Medical Board that officers of the I.M.S. should be called upon to compile medico-topographical reports of their stations. The Board at first threw cold water on the scheme, whereupon Martin laid his suggestion before Government, which approved; and the Board then called for such reports. A number were compiled and submitted, and several were published during the next few years. The best known are Martin’s own report upon Calcutta, published in 1837, with a second edition in 1839, and Taylor’s *Dakka*, 1840. Other reports published under this scheme are—

- Butter, D.; Oudh and Sultanpur, 1839.
- Dollard, W.; Kumaon, 1840.
- Irvine, R. H.; Ajmir, 1841.
- Jacob, W.; Jessore, 1837.
- McCosh, J.; Assam, 1837.
- Macleod, D. A.; Bishnath, (Assam), 1837.
- Rankine, R.; Saran, 1839.
- Strong, F. P.; Calcutta, 1844.

Dr. Cumberland, in his *Stray Leaves*, states that he submitted a report upon Puri, but it does not appear to have been published.

The *India Journal of Medical and Physical Science* for 1836 contains an article on the constitution of the Medical Department, probably by the editor, Frederick Corby, and makes various suggestions for the improvement of the Service. Among others, the writer proposes the amalgamation of the three Medical
Services, Bengal, Madras, and Bombay, under a Director General, instead of a Medical Board, assisted by twenty I.G.'s and twenty D.I.G.'s. These suggestions have since been carried out, sixty years after they were made, except that the number of Surgeon Generals is very much less than the twenty proposed. Apart from considerations of cost, it is hard to imagine how work could be found for twenty Surgeon Generals. The writer, unlike the authors of the works described above, takes a very pessimistic view of the prospects of the Service. Among other miscellaneous statements, he tells us that few regiments of the Indian Army keep up a mess; that the Assistant Surgeon's outfit and passage will cost him £200, as well as another £150 for outfit in India, uniform, tent, horse, furniture, etc.; and that an Assistant Surgeon may expect to be permanently posted to a regiment after about five years' service.

The Bengal Medical Code was first published in 1838, as notified in Bengal G.O. of 26th March, 1838. It was compiled by the Secretary to the Medical Board, Surgeon James Hutchinson; who was also the author of a Report on the Medical Management of Native Jails, published in 1835.

A letter from Court, dated 11th April, 1839, published in Bengal G.O. of 22nd July, 1839, directs that Members of the Medical Board and S.S.'s shall wear uniform similar to that prescribed for I.G.'s and D.I.G.'s, respectively, of Her Majesty's forces.

The publication of this order was the cause of an amusing difference of opinion in the Calcutta Medical Board, which is thus described in the Asiatic Journal, Vol. XXXII, New Series, Aug., 1840, p. 305.

"There is a somewhat novel state of things, regarding the members of the Medical Board, at present under the consideration of the higher authorities, and which, immediately relating to the question of military uniform, involves the higher one of military authority. We shall relate one of several accounts (not substantially varying) which we believe to be the most correct. Not very long since, an order came out from the Court of Directors, decreeing that the relative rank of Members of the Medical Board should be that of Brigadier Generals in the army. Soon after this, the senior member, Dr Sawers, considered that, as there was a uniform for the medical staff, that uniform should be worn at all meetings of the board, and he mentioned this desire to the other two members, Dr Smith and Campbell, and said that, at the end of a fortnight (allowing that time for the uniform to be prepared) they should appear accordingly.
They, considering this as a proposition rather than as an order, voted against it, and intimated to Dr Sawers that his motion was negatived by the majority of votes. He made no remark whatever upon this result, and such meetings as next ensued were attended in the old way.—plain cloth coat, or white jacket, according to the 'warm feelings' of the respective members,—until the first meeting occurred after the expiration of the fortnight's law, when, on Dr Campbell's entering the office in a white jacket, Dr Sawers, who was himself in undress uniform, ordered him to go home and consider himself in arrest for disobedience of orders. Home he went accordingly, and there he has remained in arrest ever since, and charges have been sent in against him by Dr Sawers grounded on his recusancy. Those charges are before Government and the Commander-in-Chief, and we believe it is not found to be easy to decide how they should be dealt with. Englishman, May 5th."

As regards the original matter in dispute, there can be no doubt that Dr. Sawers was in the right, and the other two members of the Board in the wrong. The Medical Board was a military board, a special uniform had recently been prescribed for them, and official meetings of the Board were undoubtedly an occasion when uniform should be worn, as is plainly shown by the orders passed upon the dispute. It must be remembered also that uniform was worn much more, seventy years ago, than it is now. As regards the action of Dr. Sawers, however, it appears to have been unnecessarily strong. The administration of the Medical Service was entrusted to the Board, as a Board, and not to the senior of the three officers who composed it. Whether Dr. Sawers had any power to order into arrest one of the other members of the Board would appear to have been, to say the least of it, very doubtful. To justify such strong action on the part of the senior member, some grave offence on the part of the junior would seem necessary; not a difference of opinion on what was, in fact, a mere trifle. No serious results ensued to any of the three, Sawers retired a few months later, on 3rd Oct., 1840, on the expiration of his five years' tour of office; Smith and Campbell each, in turn, succeeded to the post of senior member. The final orders of Government on the subject, while supporting Sawers' views as regards the wearing of uniform, do not mention the arrest directly, but the last clause supports Sawers. These orders run as follows:—*

"Headquarters, Calcutta, May 7th, 1840. The Commander-in-Chief is pleased, in consequence of appeals made to his authority by the members of the Medical Board, to direct, that they shall hereafter, at all public

places, and on all occasions of ceremony, wear the uniform prescribed for
them by the Govt. G.O. of the 22nd July, 1839, so well suited to their
relative rank, and merited by their long and valued services.

"At church, at the levees, or entertainments at Government House,
or at the residence of the Commander-in-Chief, and at great public enter-
tainments, the full dress is to be worn.

"At the meetings of the board, or other professional duties, and
generally, when out of their own houses, the blue frock, with a forage cap,
is the fit costume, and His Excellency has no objection to the lightest
materials being used.

"The Commander-in-Chief directs, that all other boards connected
with the army will conform to these rules; and he takes the opportunity
of reminding officers, that all presidents of military courts, boards, or
committees, are responsible to him for their correct assembly, dress, and
proceedings."

New dress regulations for the Medical Service were laid down
in the same year, and are published at length in the Asiatic
Journal.* The full dress comprised a scarlet double-breasted coat,
with white lining and turnbacks; epaulettes of gold, corresponding
to rank; a plain cocked hat; trousers of blue cloth or white
linen, according to the season; a black leather waistbelt; and
 crimson and gold swordknot. Undress uniform included a blue
frock coat, single-breasted; a blue cloth cloak; shoulder straps;
a blue cloth forage cap, with gold-edged peak; trousers, sword,
etc., the same as in full dress.

The following orders on the medical administration of the
Nizam's army were published in Jan., 1840. Incidentally these
orders show that a medical school was in existence at Haidarabad,
earlier than is generally supposed.

"General Order by Major-General Fraser, Resident at Hyderabad.

"With the sanction of the Right Hon. the Governor General of India,
the following arrangements will have effect from the 1st Jan., 1840:—

"Mr Staff Surgeon Young to be Superintending Surgeon of the Nizam's
army, upon a salary of Rs.1600 per month, viz. personal pay 800, staff
allowance 700, and office allowance 100, to cover all charges for writer,
stationery, &c.

"Mr Surgeon Key to be medical storekeeper and superintendent of
the Medical School at Bolarum, on a staff salary of Rs.500 per mensem
in addition to the pay and allowance of his rank.

"The Senior Surgeon of each division will, as such, draw an allowance
of Rs.100 per month, in addition to his regimental pay and allowances
for the charge of the details; but, in the event of another corps becoming
temporarily vacant, the medical charge thereof will devolve on the next
senior medical officer, without a separate charge.

"The Superintending Surgeon is placed under the immediate orders of the Resident, and will be responsible to him for the general efficiency of the Medical establishment."

In 1844 the Royal College of Surgeons, England, established the new grade of Fellows, 227 of the most distinguished members of the College being elected to the new honour. Full particulars are published in the *Lancet* of 19th Oct., 1844. The senior of the new Fellows, Caleb Woodyer, of Guildford, also the second, L. Leese, of Norwood, had taken their diplomas fifty-five years earlier, in 1789. Sixteen others had done so before the end of the eighteenth century. The junior, W. Hill, of Wootton-under-Edge, had got the M.R.C.S. only two years before, in 1842; and the last but one is Thomas Spencer Wells, Navy, 1841. Among well-known names in the list are the following:—

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas Chavasse, Birmingham</td>
<td></td>
<td>1833.</td>
</tr>
<tr>
<td>Joseph Toynbee, London</td>
<td></td>
<td>1838.</td>
</tr>
<tr>
<td>Thomas Wharton Jones, London</td>
<td></td>
<td>1841.</td>
</tr>
<tr>
<td>George Murray Humphrey, Cambridge</td>
<td></td>
<td>1841.</td>
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</tbody>
</table>

Out of the total of 227, no less than eighty-three were officers of the Services, five in the Guards, twenty-three others in the A.M.D., twenty-six in the Royal Navy, and the following twenty-nine in the I.M.S. The first year, in brackets, is that of entry to the I.M.S., the second that of taking the M.R.C.S.

<table>
<thead>
<tr>
<th>Name</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>James Mellis, (B. 1806)</td>
<td>1802.</td>
</tr>
<tr>
<td>Simon Nicolson, (B. 1807)</td>
<td>1802.</td>
</tr>
<tr>
<td>Henry Hough, (B. 1805)</td>
<td>1803.</td>
</tr>
<tr>
<td>J. T. Conran, (M. 1807)</td>
<td>1804.</td>
</tr>
<tr>
<td>James Ranken, (B. 1809)</td>
<td>1808.</td>
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<tr>
<td>William Darby, (B. 1813)</td>
<td>1810.</td>
</tr>
<tr>
<td>William Watson, (B. 1813)</td>
<td>1812.</td>
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<tr>
<td>James Lawder, (M. 1822)</td>
<td>1812.</td>
</tr>
<tr>
<td>John Wylie, (M. 1807)</td>
<td>1812.</td>
</tr>
<tr>
<td>Alexander Garden, (B. 1815)</td>
<td>1813.</td>
</tr>
<tr>
<td>Christopher Kane, (Bo. 1819)</td>
<td>1813.</td>
</tr>
<tr>
<td>William Jackson, (B. 1813)</td>
<td>1814.</td>
</tr>
<tr>
<td>Robert Pinhey, (Bo. 1816)</td>
<td>1814.</td>
</tr>
<tr>
<td>G. B. Macdonnell, (M. 1819)</td>
<td>1815.</td>
</tr>
<tr>
<td>Benjamin Williams, (M. 1816)</td>
<td>1815.</td>
</tr>
<tr>
<td>James Bird, (Bo. 1818)</td>
<td>1816.</td>
</tr>
</tbody>
</table>
T. M. Lane, (M. 1822) . . . " 1820.
M. T. Kays, (Bo. 1823) . . . " 1822.
Samuel Rogers, (M. 1827) . . . " 1826.

In the middle of the nineteenth century, Colesworthy Grant published a work entitled *Lithographic Sketches of the Public Characters of Calcutta, 1838-185—*, which includes five members of the I.M.S., E. W. W. Raleigh, F. P. Strong, Jas. Burnes, (Bombay), Frederick Corbyn, and Charles Bonnor Chalmers. The last-named was the subject of one of the most remarkable recoveries from injury on record. He entered the Bengal Medical Service on 4th Dec., 1840, at the age of twenty-two, and spent several years of his early service as Civil Assistant Surgeon of Sinhbum, stationed at Chaibasa. He was a noted and successful shikari. In these days, it must be remembered, breechloading rifles had not been invented; in the pursuit of big game men had to rely on ball fired from a smoothbore. On one occasion, he was following up a wounded wild buffalo in thick jungle, when the animal turned on him, threw him down, and gored him, one horn penetrating into his lung, from behind, another ripping up his abdomen, causing the intestines to protrude, after which the buffalo thrust one horn through the large muscles of one of his thighs, carried him some distance, then dropped and left him. His native followers picked him up and carried him to his tent. While twisting himself about, trying to get a view of the wound in his back in a looking-glass, the intestines, which must themselves have been uninjured, went back through the wound in the abdominal wall. In spite of these injuries, and of the entire absence of any treatment other than his own, he made a perfect recovery, and served for nearly thirty years more. He became Surgeon on 28th Sept., 1854, served with the Gurkha force in the Mutiny, became Surgeon Major on 4th Dec., 1860, and D.I.G. on 23rd Dec., 1866, retiring on 30th Sept., 1871. I met Dr. Chalmers in Scotland in 1880, nine years after his retirement. He was then, at the age
of sixty-one, a hale strong man, and looked very young for his age. He died at Brisbane on 24th June, 1889.

Another instance of a remarkable escape was that of John McCosh, who entered the Bengal Service on 2nd Feb., 1831. When serving on the South-East Frontier, in operations against the Kols, in 1832–33, he contracted severe jungle fever, and was granted sick leave to Van Diemen's Land. The vessel in which he sailed, the barque Lady Munro, was wrecked on the island of Amsterdam, on the night of 11th Oct., 1833. An account of the wreck is given in the Calcutta Courier of 18th, 20th and 22nd Jan., 1834. Out of a total of 96 on board, 75 lives were lost; the Captain, his wife and child; the second and third officers; twenty-eight passengers; nine European convicts; nine native servants, and twenty-four lascars. The twenty-one who escaped were, one passenger, McCosh; the chief officer; one European convict, and eighteen lascars. The ship was shortening sail when she struck, which accounts for the large proportion of lascars saved. The passengers, who were chiefly Army officers with their families, were asleep below in their cabins when she struck. The survivors were taken off the island by an American schooner, the General Jackson, and might consider themselves very fortunate in being rescued so soon.

McCosh's experiences may be related in his own words.*

"I have already alluded to my having suffered severely from a jungle fever, contracted on field service. While proceeding to Van Diemen's Land, for the recovery of my health, the vessel was cast away, about one in the morning, upon the desolate island of Amsterdam, with the loss of twenty-six lives. I swam ashore, almost naked, a few minutes after the ship struck; sat on the bare rocks, under heavy rain, till daylight; clothed myself in various pieces of dress, as they lay on the shore, and let them dry on my person; subsisted upon putrid rice, and brackish water, and half-roasted seabirds; and, for fourteen days, underwent all the concomitant hardships inseparable from such a state of uncertainty and destitution, yet I never caught so much as a cold."

He does not say where he was when the ship struck. On his return to Calcutta, the unexpired portion of his furlough was cancelled in Bengal G.O. of 6th Feb., 1834. He subsequently served in the Gwalior war, and was present at the battle of Maharajpur; in the Punjab war, at Sadullapur, Chilianwala, and Gujrat; and in the second Burmese war, at the capture of Rangoon and

Bassein. He became Surgeon on 31st Dec., 1847, retired on 31st Jan., 1856, and died in London on 16th Jan., 1885.

In 1856 Sir Ranald Martin submitted to Government a Memorandum on the status of the Army Medical Officer, which is quoted as follows by Sir Joseph Fayrer, in his *Life of Inspector General Sir James Ranald Martin.*

"The present Commander-in-Chief of the Austrian Army in Italy, Marshal Radetsky, has said—'The difference between officers as combatants and surgeons as non-combatants must cease. I see everywhere military officers and surgeons equally exposed to the fire, and therefore the surgeons shall enjoy advantages and distinctions in every respect equal to those of the officers.'

"The great Napoleon acted on this principle, and bestowed, on the field of battle at Wagram, the highest class of the Legion of Honour on Barons Larrey, Desgenettes, and Percy, declaring that such an act was a necessity in any plan which should pretend to give consistence to the system of recompenses granted by the State to its servants. He did not deem the question one which had need of discussion or of proof, the exclusions of former days, which banished hope and emulation from the minds of public servants, having been the results of the injustice of feudalism and of after-ignorance.

"The late Dr Robert Jackson, the greatest physician that ever served in the British Army, declared, on his experience of half a century of the most distinguished service, that, 'as the Medical Staff shares the fatigues and dangers of war, so in just reason it is entitled to a share of advantages.' In this he represented the feelings and deeply rooted sentiments of the whole Medical Department, and of the entire medical profession, of which he was so pre-eminent a member.

"The Duke of Wellington said of officers generally—'That those who do the duty of the army ought to be promoted, and ought also to enjoy its benefits and advantages.'

"The quotations here presented appear to me to impress a just view of an interesting and very important public question, and one which, if fairly carried out in practice, by the removal of all inequalities and distinctions, would put an end to heart-burnings, chronic discontents, and feelings of depression, injurious alike to individuals and to the service at large; for whatever has a tendency to disappoint or repress a just and honourable ambition in public men, is sure in the end to prove injurious to the public interests.

"It will not be contended that anywhere, even on the field of battle, the surgeon is of less importance than the captain or the major; in truth, the regimental Surgeon is here of far more individual importance than either. As regards personal hazards too, hardships, fatigue, privation, and death come by more ways to the surgeon than to the captain, and the surgeon knows it. 'In just reason,' then, there should be no distinction or difference whatever. For the good of the public service, I am quite assured that there ought to be none such, and to render the medical corps an establishment.

* A. D. Innes and Co., London, 1897, Chap. VIII, pp. 150-152.
of reliance for all purposes, it must be raised to the position in the army which it deserves—it must be made a contented service.

"Lastly, the attempt on the part of governments to lead educated men to the highest point of excellence and of exertion by money alone is impossible of success.

"Even in a matter so trifling as uniform, a proper consideration should be shown to the surgeon, for matters of this kind are noticed by the soldier. It has been justly observed that costume everywhere ' aids at least the formation of first impressions; and it has already been found in more than one instance, that the introduction of a distinguished uniform has conduced to the general elevation of the class to which it was assigned. If the coat is an honourable one, a man is careful not to disgrace it, and a respect for his profession becomes added to his respect for himself. A mean dress is, on the other hand, held to be a reproach, if not a disgrace.' An appropriate uniform everywhere fosters esprit de corps and a sense of responsibility.

"The grant of the military division of the Order of the Bath and that of the Victoria Cross to medical officers, would appear to settle their status in the army, but their actual position ought not to rest upon chance, or upon the mere occasional circumstances of a decoration. It should be ordered and fixed by a royal ordinance, as one of the permanent scientific corps of the army. I think that the Medical Corps should rank with the corps of Royal Engineers, and stand next after it in the Army List. The uncertainties which surround the medical officer have at all times proved prejudicial to the interests of the public service, by occasioning depression and discontent.

"Nov. 12, 1856. (Signed) J. R. Martin."

No account of this period would be complete without some reference to Simon Nicolson, the most successful, possibly, according to the lights of his time, the best physician who ever practised in India. He was born on 5th July, 1779, in the manse at Kiltarlity, in Inverness-shire, of which parish his father was minister, and educated at St. George's, where he was House Surgeon and Assistant to Sir Everard Home. He was appointed to the Madras Medical Service in a Mily. Letter from Court to Madras, dated 30th July, 1806, paras. 643-645, but never joined that Presidency, being gazetted to the Bengal Medical Service as Assistant Surgeon on 2nd Feb., 1807, and on arrival was posted as Assistant in the General Hospital, Calcutta. Except for one period of leave to the Cape, in Calcutta he spent the rest of his service and of his life. He reached the rank of Surgeon on 8th Jan., 1820. From 1807 to 1820 he served in the Calcutta General Hospital, and from 1820 to Nov., 1832, held the post of Surgeon to the Calcutta Native Hospital, resigning the appointment then on account of ill health, and going on two
years' leave to the Cape early in 1833. On his return to India in 1835 he was appointed Surgeon to the General Hospital, and held that post until his death, twenty years later. In 1839 he was gazetted S.S., but was allowed to decline promotion, and to retain his appointment in Calcutta. He retired from 1st Aug., 1855, and died in Calcutta a week later, on 8th Aug., 1855.

It was Nicolson who first brought James Ranald Martin into notice, recommending him, in 1823, to the Governor General, Lord Amherst, to be sent to Haidarabad to treat Sir Charles Metcalfe, the Resident there, who was seriously ill. Ten years later, Martin succeeded Nicolson as Surgeon to the Native Hospital; he also took charge of Nicolson's practice while he was at the Cape.

Nicolson left no published works, and nowadays he is almost forgotten, a mere name. But no officer in the I.M.S. ever stood higher in the public and private estimation of his contemporaries. Sir John Kaye has described him, under the name of Nicholas FitzSimon, in a long-forgotten novel, Peregrine Pulleney. A retired Bengal civilian in the novel speaks of him as follows:—

"Nicholas FitzSimon, everybody knows him in India—finest fellow in the world—kind, generous, trump of a fellow. Now I'll tell you; go to him—give you breakfast, tiffin, dinner, shelter, advice, everything. If you are sick, go to him, sure to cure you—sure to be kind to you—saved more lives than the invention of the lifeboat—a most excellent fellow—good Samaritan—sure to love him." *

Nicolson's personal appearance is thus described in the same work, Vol. III, Chap. III, p. 46.

"He was a tall, rather upright man, dressed according to the season, all in white, and there was something about him well calculated to attract the attention of even an indifferent observer. Apparently rather more than half a century old, his hair was quite grey, cut rather short, and brushed straight off his forehead, which was high, but not very broad, with rather projecting brows, and an aspect certainly of superior wisdom. He wore spectacles, which rested upon a nose very well calculated to support them, being no insignificant feature in his face, and his mouth was one which was not easy to understand at first glance. When Peregrine first saw him, he thought that it was a severe one—indeed that the whole expression of the stranger's face was rather severe than otherwise, but . . . when Dr. FitzSimon held out his hand to Peregrine, and said that he was sorry to see him for the first time under such unfavourable circumstances . . ." *

our hero thought that he had never seen a face so full of genuine benevolence, nor a mouth that relaxed itself into a smile of such kindliness as the good doctor's."

A picture of Nicolson, seated in a chair, hangs in the rooms of the Calcutta Asiatic Society. The late C. R. Wilson, in his Descriptive Catalogue of Paintings in the possession of the Asiatic Society of Bengal, quotes two other references to Nicolson which should be reproduced here.

"His practice was only limited by the impossibility of performing more than a certain amount of work within a certain space of time. One carriage was always kept ready waiting, day and night, to enable him to attend to any call without delay."

In accepting his resignation, the Governor General, Lord Dalhousie, wrote to him as having long possessed—

"In a measure rarely equalled, the confidence and reverence of your professional brethren, the universal respect and esteem of the community among whom you have passed your days, and the approbation and gratitude of the Government, to whose service you devoted a long course of valuable and distinguished labours."
CHAPTER XXXVI

THE MUTINY

"Was it storm? Our fathers faced it and a wilder never blew;
Earth that waited for the wreckage watched the galley struggle through."
R. Kipling, Departmental Duties; The Galleyslave.

FIFTY-SIX years have come and gone since the Mutiny in 1857 shook the British power in India to its foundations. As is well known, the Mutiny was practically confined to the Bengal army, including the irregular corps in Rajputana and Central India. We would naturally expect, therefore, that the medical officers who lost their lives in the struggle belonged for the most part to the Bengal service. As a matter of fact, all the I.M.S. officers who were killed were Bengal men. They numbered twenty-eight, of whom no less than nine, one-third of the whole, perished at Cawnpore. It is not known with certainty how all of these nine died. For instance, acting S.S. ChristopherGarbett is stated, in an obituary notice in the Lancet of 14th Nov., 1859, to have died of wounds; in the list of casualties in the East India Register he is said to have died of fever in Wheeler's entrenchedment, before the final surrender. Of the other 27, two were killed in action, Assistant Surgeon T. H. Woodward before Delhi on 31st Aug., 1857, and Assistant Surgeon R. H. Bartrum * in the advance on Lucknow on 26th Sept.; one died of wounds, Assistant Surgeon E. Darby, in Lucknow Residency, on 27th Oct.

The twenty-eight medical officers killed were the following. The dates in brackets after their names are the dates of entering the Service:—

S. S. James Graham, (9th Jan., 1820), killed by mutineers at Sialkot, 9th July.

* Mrs. Bartrum was in the Lucknow Residency throughout the siege. Her husband, who was with the relieving force, was shot through the head on 26th Sept., 1857, the day after the first of that force had entered the Residency. She subsequently published her experiences under the title, A Widow's Reminiscences of the Siege of Lucknow. 12mo., Nisbet and Co., London, 1858.
THE MUTINY

Acting S.S. Christopher Garbett, (23rd May, 1828), died in Wheeler’s entrenchment, Cawnpur, June.

Surgeon Thomas Smith, Invalid establishment, (2nd Oct., 1831), killed by mutineers at Meerut, 10th May.

Surgeon Henry Hawkins Bowling, (1st March, 1838), killed by mutineers at Shahjahanpur, 31st May.

Surgeon Kinloch Winlaw Kirk, (2nd Oct., 1838), killed by mutineers at Gwalior, 13th June.

Surgeon Nathaniel Collyer, (1st Nov., 1838), killed at Cawnpur, 27th June.


Surgeon Thomas Godfrey Heathcote, (12th Aug., 1842), killed at Cawnpur, 15th July.

Surgeon Samuel Maltby, (31st Oct., 1843), killed at Cawnpur, 15th July.

Assistant Surgeon John Macdowall Hay, (29th May, 1843), killed by mutineers at Bareli, 31st May.

Assistant Surgeon John Colin Graham, (16th Jan., 1844), killed by mutineers at Sialkot, 9th July.

Assistant Surgeon Hartwell Samuel Garner, (11th Feb., 1845), killed by mutineers at Sigauli, 23rd July.

Assistant Surgeon Robert Dallas Dove Allan, (20th March, 1845), killed at Cawnpur, 27th June.

Assistant Surgeon Thomas Moore, (20th Jan., 1847), killed by mutineers on road from Cuttack to Sambalpur, 17th Nov.

Assistant Surgeon William Barker MacEgan, (9th March, 1847), killed by mutineers at Jhansi, 7th June.

Assistant Surgeon Robert Lyell, (25th Sept., 1847), killed in a riot at Patna, 3rd July.

Assistant Surgeon Horatio Philip Harris, (7th April, 1848), killed at Cawnpur, 12th June.

Assistant Surgeon George Hansbrow, (4th Feb., 1849), killed by mutineers at Bareli, 31st May.

Assistant Surgeon John Pierce Bowling, (20th Dec., 1851), killed at Cawnpur, 27th June.

Assistant Surgeon Anthony Dopping, (4th April, 1854), killed by mutineers, Delhi, 11th May.

Assistant Surgeon Robert Henry Bartrum, (11th Jan., 1855), killed in action, in advance on Lucknow, 26th Sept.

Assistant Surgeon Marcus George Hill, (24th Jan., 1855), killed by mutineers, Sitapur, 2nd June.


Assistant Surgeon Edmund Darby, (20th Feb., 1856), died of wounds in Residency, Lucknow, 27th Oct.

Assistant Surgeon William Henry James, (20th Feb., 1857), killed by mutineers, Agar, Central India, 4th July.

Assistant Surgeon Thomas Hewlett Woodward, (20th Feb., 1856), killed in action, Delhi, 31st August.

Assistant Surgeon Henry Thomas Cary, (4th Dec., 1856), killed by mutineers, Mehidpur, 8th Nov.
In addition to those actually killed, many other officers succumbed to disease and to the hardships of the campaign. At least ten men of the Bengal service thus lost their lives.

Surgeon Thomas Christopher Hunter, (24th July, 1834), died at Cawnpur, 28th March, 1858.
Surgeon James Anderson Nisbet, (2nd April, 1844), died at Multan, 9th March, 1858.
Assistant Surgeon Thomas Mawe, (4th March, 1844), died of fatigue and exposure at Manipur, Banda, after escape from the massacre at Jhansi, 28th June, 1857.
Assistant Surgeon William Sutherland Stiven, (10th Sept., 1846), died at Allahabad, 27th Feb., 1858.
Assistant Surgeon William Gardiner Morris, (20th Nov., 1848), died at Delhi, 13th Jan., 1858.
Assistant Surgeon William Boyle Chavasse, (20th Feb., 1856), died at Meerut, 2nd Nov., 1857.
Assistant Surgeon Frederick Christian Bushman, (4th Dec., 1856), died at Barkata, 20th Jan., 1858.

Others, who survived the actual campaigns, contracted disease which proved fatal before long. As one of such may be mentioned John James Halls, (10th June, 1854), Civil Surgeon of Shahabad, who was one of the defenders of Arrah. He died on board the Ceylon on his way home on 6th Nov., 1860.*

No officer of the Bombay Service seems to have lost his life in the Mutiny. Of the Madras Service, though none were actually killed, four died during the Mutiny in the disturbed area.

Surgeon William Henry Sceales, (25th Jan., 1841), died at Dinapur on 24th June, 1858, of dysentery brought on by fatigue and exposure while serving in Sir E. Lugard's division.
Assistant Surgeon George Dunman, (24th Jan., 1855), died at Camp Kirwer, 14th June, 1858.

* Dr. Halls wrote a short account of the Siege, *Two Months in Arrah in 1857*.
The first accounts of the outbreak of the Mutiny which reached England were partly fact and partly rumour. Many officers were reported as killed, who had in fact survived, and lived for long afterwards. In the Lancet of 26th Sept., 1857, is a list of medical officers killed in the Mutiny, which includes the names of Assistant Surgeon Joseph Fayrer, (29th June, 1850), who was fated to live for nearly half a century longer, and died so recently as 21st May, 1907; and of Surgeon Richard Henry Oakley, (8th Jan., 1842), who lived till 11th Dec., 1900.

Such mistakes, in the early reports received from India, were natural enough; and indeed inevitable. But in the East India Register for 1858, an official publication, issued several months after the event, the name of Assistant Surgeon William Wotherspoon Ireland, (4th Aug., 1856), is shown among the Bengal casualties, as "killed before Delhi, 26th July, 1857." His injuries are thus described in the Lancet of 7th Nov., 1857—

"A ball had entered the eye, and passed below the brain, coming out near the ear. . . . He had a second wound, though of a less serious character, a ball having entered the shoulder, which was found lodged in his back."

(The action at Najafgarh, in which Dr. Ireland was wounded, was fought on 25th Aug., 1857, not July.) It is not to be wondered at that such wounds were supposed to be mortal. Dr. Ireland, however, recovered more or less, but had to take sick leave in 1858, which was extended up to three years, at the end of which, being still unfit to rejoin duty, he resigned the Service, from 1st Aug., 1861. He died at Musselburgh, on 17th May, 1909.

Many medical officers were wounded during the campaigns. The following cases have been collected from "war services" and other sources:—

Surgeon William Abbot Green, (B. 6th June, 1830), shot through the thigh at the disarmament of the Sepoys at Dakka, 17th Nov., 1857.

Surgeon William Brydon, (B. 9th July, 1835), the sole survivor of the Kabul massacre in January, 1842, shot through the loins while sitting at dinner in Gubbins' house in the Lucknow Residency, 21st July, 1857, (Fayrer's Reminiscences, page 179).

Assistant Surgeon Nathaniel James Grant, (B. 18th Dec., 1853), dangerously wounded in action with rebel cavalry at Rohini, June, 1857.


Assistant Surgeon William Henry Hayes, (B. 4th Aug., 1855), wounded near Chaibasa, in a rising in the Kol country, 14th Jan., 1858.
Assistant Surgeon Archibald Hamilton Hilson, (B. 29th Jan., 1857), wounded severely in face by a musket ball.
Assistant Surgeon James Lumsdaine, (Bo. 10th Nov., 1852), wounded at battle of Kunch, Central India.
Assistant Surgeon William Ashton Shepherd, (Bo. 9th Dec., 1852), slightly wounded in action at Ambapani, while serving with the Satpura Field Force.
Assistant Surgeon John Cruickshank, (Bo. 20th Feb., 1856), severely wounded in the storm of Jhansi, where he accompanied the storming party.
Assistant Surgeon Thomas Miller, (Bo. 19th Nov., 1856), severely wounded in the storm of Jhansi.

The Army Medical Department lost many killed and wounded during the campaign. Amongst their casualties were the following:—

Assistant Surgeon S. Moore, 6th Dragoon Guards, died at Meerut, 2nd June, 1857, of wounds received in action at Ghaziudinnagar on 31st May.
Surgeon Stack, 86th Foot, killed in the storm of Jhansi, while attending a wounded soldier.
Surgeon J. H. Ker-Innes, 60th Rifles, wounded at Delhi.
Assistant Surgeon S. A. Lithgow, 75th Foot, wounded at Delhi.
D.I.G. William Cruickshank, died at Simla, from the effects of service in the field, 5th Nov., 1858.
Assistant Surgeon Paterson Allen, F. Troop, Horse Artillery, died at Jaipur, Bundelkand, of fever brought on by heat and exposure, 23rd Dec., 1858.
Surgeon R. Dowse, 70th Foot, died of fever, on the march to Multan, 4th Feb., 1859.

In Holmes' History of the Indian Mutiny, (pp. 254-57), Surgeon Major Morton is mentioned as one of the victims of the Mutiny at Sitapur. Morton was not a medical officer, but a Sergeant Major.

Sub-Assistant Surgeon Chimmun Lall, of the Delhi hospital, a Christian, who had been baptised on 11th July, 1852, was killed in the Massacre at Delhi on 11th May, 1857. On the other hand, Sub-Assistant Surgeon Wazir Khan, teacher of Materia Medica in the Agra Medical School, became prominent among the rebels.

Among the officers mentioned in General Wilson's despatch, reporting the capture of Delhi, are the following medical officers:—

S.S. Edmund Tritton, (Bengal, 4th Dec., 1825).
Ofig. S.S. Campbell Mackinnon, (Bengal, 30th March, 1830).
Surgeon J. H. Ker-Innes, 60th Rifles, (A.M.D.).
Surgeon Edward Hare, 2nd Fusiliers, (Bengal, 24th Feb., 1839).
Surgeon James Peter Brougham, First Fusiliers (Bengal, 8th March, 1840).
Surgeon David Scott, Medical Storekeeper, (Bengal, 20th Dec., 1845).
Assistant Surgeon J. J. Clifford, 9th Lancers, (A.M.D.).
Assistant Surgeon W. F. Macintyre, Commander-in-Chief’s Staff, (A.M.D.).

The G.O. issued by the Governor General in Council, Lord Canning, No. 1383, dated Fort William, 5th Nov., 1857, on the siege of Delhi, includes the following tribute to the medical officers:

"The arrangements made by Superintending Surgeon E. Tritton, for the care and comfort of the numerous patients in hospital, have been most satisfactory, and the Governor General in Council has pleasure in offering to that officer, as well as to the regimental and staff officers of the Medical Department by whom he was supported, this acknowledgment of their good service."

Brigadier Inglis mentions the names of the following medical officers in his despatch on the siege of Lucknow:

Surgeon William Brydon, 71st Native Infantry, (Bengal, 9th July, 1835).
Surgeon John Campbell, 7th Light Cavalry, (Bengal, 22nd Dec., 1840).
Surgeon George Mathieson Ogilvie, Sanitary Commissioner, (Bombay, 9th March, 1841).
Assistant Surgeon Boyd, 32nd Foot, (A.M.D.).
Assistant Surgeon Joseph Fayrer, Civil Surgeon, (Bengal, 29th June, 1850).
Assistant Surgeon Samuel Bowen Partridge, 2nd Oudh Irregular Cavalry, (Bengal, 12th Oct., 1852).
Assistant Surgeon Henry Martineau Greenhow, (Bengal, 20th Jan., 1854).
Assistant Surgeon Edmund Darby, (Bengal, 20th Feb., 1856).

Brydon, Campbell, and Ogilvie, got the C.B.; Fayrer, Partridge, Bird, and Greenhow, were promoted to Brevet Surgeoncies. The first three also, soon after, received important civil appointments; Fayrer the Professorship of Surgery, and Partridge that of Anatomy, in the Calcutta Medical College, and Bird the Civil Surgeoncy of Howrah. All four survived for over thirty years. Bird died at Cobham, Virginia, on 31st Oct., 1890; Partridge at Anerley, Kent, on 7th May, 1898; Fayrer at Falmouth on 21st May, 1907; while Greenhow, the last survivor, died at Esher, in Surrey, so recently as 26th Nov., 1912, more than fifty years after his service in Lucknow. Darby, as stated above, was killed during the siege.

Sir Hugh Rose, in his despatch on the Central India Campaign,
mentions the following medical officers, confirming a report of S.S. Francis Shortt Arnott, (Bombay, 19th Feb., 1829):

Surgeon William Mackenzie, 3rd Hyderabad Cavalry, (Madras, 14th Jan., 1835).
Surgeon John Deas, 3rd Cavalry, (Bombay, 20th March, 1837).
Surgeon James Vaughan, (Bombay, 2nd Feb., 1842).
Surgeon Stack, 86th Foot, shot dead at storm of Jhansi, (A.M.D.).
Surgeon Stuart, 14th Light Dragoons, (A.M.D.).
Assistant Surgeon George Nayler, (Bombay, 20th Oct., 1852).

Lord Clyde, (Sir Colin Campbell), in his despatch, dated 21st Feb., 1859, announcing the final recapture of Lucknow, which brought the Mutiny to an end, as far as large operations were concerned, though much still remained to be done in the way of hunting down scattered parties and bringing into subjection rebellious tracts of country, acknowledges the services of the Medical Department as follows:

"To His Excellency the Right Honourable the Governor General, Head Quarters Camp, Lucknow, February 21st, 1859.

"My Lord,—The military operations in the Presidency of Bengal, which ensued on the great Mutiny of 1857, having happily been now brought to a close, I have the greatest satisfaction in recommending warmly to your Excellency's protection two great departments of the military administration, to which the troops and the officers who have commanded them in their long campaigns are under real and great obligations. I allude to the medical and commissariat departments.

"The former, being composed of officers belonging to the two services, has shone equally in the matters of general organisation and of regimental arrangements. The Director-General, Dr. Forsyth, and the Inspector-General of Her Majesty's Forces, Dr. Linton, C.B., in Calcutta, have worked successfully to meet the great requirements made on them; and the staff and regimental medical officers have well maintained the credit of their noble profession, and the reputation for self-sacrifice which belongs to the Surgeons of Her Majesty's Armies,—a reputation which is maintained in the field on all occasions, as well as in the most trying circumstances of the hospital.

"Clyde, General, Commander-in-Chief, East Indies."

A number of medical officers received the Companionship of the Bath, for their services in the Mutiny.

19th Jan., 1858.—S.S. Edmund Tritton, (Bengal, 4th Dec., 1825), Delhi.
24th March, 1858.—Surgeon John Campbell Brown, (Bengal, 5th July, 1836), Delhi.
16th Nov., 1858.—Surgeon John Campbell, (Bengal, 22nd Dec., 1840), Lucknow.
16th Nov., 1858.—Surgeon William Brydon, (Bengal, 9th July, 1835), Lucknow.
16th Nov., 1858.—Surgeon John Henry Orr, (Madras, 22nd Feb., 1837), Central India.
16th Nov., 1858.—Surgeon G. M. Ogilvie, (Bombay 9th March, 1841), Lucknow.
22nd March, 1859.—S.S. F. S. Arnott, (Bombay, 19th Feb., 1829), Central India.
22nd March, 1859.—Surgeon William Mackenzie, (Madras, 14th Jan., 1835), Central India.
May, 1859.—D.I.G. John Fraser, (A.M.D.).
May, 1859.—Surgeon Charles Alexander Gordon, 10th Foot, (A.M.D.).
May, 1859.—Surgeon James Gordon Inglis, 64th Foot, (A.M.D.).
May, 1859.—Surgeon Joseph Jee, 78th Foot, (A.M.D.).

The Army Medical Department, which had already won three Victoria Crosses in the Crimea,* gained three more in the Mutiny, as follows:—


Retired members of the Service will remember Sir Anthony Home as P.M.O., H.M.'s Forces in India, in the early eighties. He got his K.C.B. as P.M.O. in Ashanti.

The Honours given in celebration of the King's birthday on 28th June, 1907, included thirty-seven C.B.'s given to Mutiny veterans, in celebration of the fiftieth anniversary of the campaign. Among them were S.G. T. Tarrant and D.S.G.'s E. M. Sinclair and A. Eteson, the two former of the A.M.D., the last of the Bengal Medical Service. All three, of course, had long since retired from the Army.

Five Assistant Surgeons of the Bengal Service received brevet promotion to Surgeon, viz., J. Fayrer, H. M. Greenhow, S. B. Partridge, and R. Bird, all for the defence of Lucknow; and Joseph Walter Raleigh Amesbury, (11th Jan., 1851); the first four dated 7th Sept., 1858, the last 14th Aug., 1860. The

Mutiny services of the last-named include commanding a troop of the third Oudh Irregular Cavalry, and raising a troop of volunteer cavalry which served under Generals Neill and Havelock. Assistant Surgeon Henry Mills Cannon, (Bengal, 1st June, 1846), was also recommended for a brevet of Surgeon, but in the meantime got his step in the ordinary way, by seniority, from 16th Sept., 1859.

In 1907, half a century after the Mutiny, more than ninety members of the I.M.S. who had entered the Service before May, 1857, were still alive. During the past six years, the numbers have sadly diminished. But even now, in May, 1913, fifty-six years after the Mutiny began, over forty still survive. Their names are given below; those who actually served in the campaigns of 1857–58 being marked with an asterisk. The senior survivor, Surgeon Major H. B. Hinton, has now completed his century. He did not see service in the Mutiny, but went to China with the 70th N.I., now the 11th Rajputs. Both Hinton and Mactier served in both the Sikh wars, the Sutlej campaign of 1845 and the Panjib campaign of 1849; Hinton also served in the Gwalior war. W. H. Harris served also in the Crimea. And Surgeon Major R. Bonstead, who entered the Bombay Service on 23rd July, 1858, more than a year after the beginning of the Mutiny, served in both the Crimea and Mutiny; also in the second China war, in the Abyssinian war, and in the Soudan in 1885.†

Pre-Mutiny Officers of the I.M.S. still surviving, May, 1913.

**BENGAL.**

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<tr>
<th>Name</th>
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<tr>
<td>H. B. Hinton</td>
<td>(14th Jan., 1839)</td>
<td>N. C. Macnamara</td>
<td>(4th Nov., 1854)</td>
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<tr>
<td>*W. F. Mactier.</td>
<td>(3rd Dec., 1844)</td>
<td>*J. H. Loch.</td>
<td>(20th Dec., 1854)</td>
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<td>D. H. Small.</td>
<td>(21st Nov., 1846)</td>
<td>S. C. Amesbury.</td>
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<td>A. J. Payne.</td>
<td>(20th Dec., 1848)</td>
<td>G. K. Poole.</td>
<td>(14th Mar., 1855)</td>
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<td>*N. J. Grant.</td>
<td>(18th Dec., 1853)</td>
<td>*W. H. Hayes.</td>
<td>(4th Aug., 1855)</td>
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<tr>
<td>J. J. T. Lawrence.</td>
<td>(30th Jan., 1854)</td>
<td>*J. H. Thornton.</td>
<td>(9th Jan., 1856)</td>
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<td>T. B. Farncombe.</td>
<td>(20th Feb., 1854)</td>
<td>*W. S. Caldwell.</td>
<td>(29th Jan., 1857)</td>
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<td>*P. W. Sutherland.</td>
<td>(6th May, 1854)</td>
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† Before the end of 1913, four of these officers died: W. S. Caldwell at Stranraer on 21st Sept.; R. Dick on 14th Oct.; R. Byramji at Ravenscourt Park, London, on 3rd Nov.; and Sir John James Trevor Lawrence at Burford House, Dorking, on 22nd December.
THE MUTINY

MADRAS.

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<th>Name</th>
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<tr>
<td>*A. C. Macleod.</td>
<td>(8th Mar., 1841)</td>
<td>B. Williamson.</td>
<td>(11th Jan., 1856)</td>
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<td>*W. H. Harris.</td>
<td>(13th Feb., 1853)</td>
<td>J. Henderson.</td>
<td>(20th Feb., 1856)</td>
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<td>C. Cooper.</td>
<td>(20th Nov., 1853)</td>
<td>A. C. Gamack.</td>
<td>(4th Aug., 1856)</td>
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<td>*A. H. Beaman.</td>
<td>(10th June, 1854)</td>
<td>*W. A. Smith-Wynne.</td>
<td>(29th Jan., 1857)</td>
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BOMBAY.

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<td>G. Birdwood.</td>
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<td>C. K. Colston</td>
<td>(20th Feb., 1856)</td>
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<td>R. Dick.</td>
<td>(24th Jan., 1855)</td>
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CHAPTER XXXVII

THE CROWN SUCCEEDS THE COMPANY

"The Mutiny sealed the fate of the East India Company, after a life of more than two and a half centuries."

Sir W. W. Hunter, The Indian Empire, Chap. XXV, p. 494.

The Government of India was transferred from the Company to the Crown by Acts 21 and 22 Victoria, caput 106, An Act for the better Government of India, dated 2nd Aug., 1858. This momentous change was published in India by Her Majesty's proclamation at Allahabad on 1st Nov., 1858.

By this Act the Military and Naval Services of the East India Company became those of the Crown. The Indian Army was amalgamated with the British Army by a G.O. dated 10th April, 1861, when Royal commissions were conferred upon the combatant officers of the Company's Army. By clause 44 of the Warrant of 7th Nov., 1864, the officers of the I.M.S. also received Royal commissions.

The subject matter of this chapter may conveniently, however, begin a little earlier, with the Minute on the I.M.S. written by the great Governor General, Lord Dalhousie, and dated 1st Feb., 1856, shortly before he left India. This minute, in Dalhousie's own handwriting, is preserved in the Calcutta Record Office. Extracts from it are given in Dr. George Smith's Life of Surgeon Major Alexander Grant, Dalhousie's personal physician, entitled Physician and Friend, (p. 89). Dr. Smith states that the minute was founded upon a paper drawn up by Grant. A short summary is also given in Fayrer's Life of Sir Ranald Martin, (pp. 135–8).

The minute is long, but is most interesting, and is of great importance in the history of the Service. Almost all the changes and improvements which Dalhousie advocated have since been carried out, some sooner, others later. The most important modifications in the administration of the Service therein advocated, are as follows:—
Paras. 4–11. Administration by Medical Board objectionable and inefficient; one officer should be appointed, after careful selection, as head of the Service, with the title of Director General. This reform was carried out in the following year, with effect from 12th Nov., 1857, a Director General being appointed, in place of the Medical Board, for each of the three Services, Bengal, Madras, and Bombay.

Para. 13. The Director General of the Bengal Service should be assisted by two I.G.'s, one Civil, the other Military. These appointments were also made from 12th Nov., 1857. But the division of duties, between the two I.G.'s, as fixed, was not that of Civil and Military administration respectively; but, as advocated by Sir Barnes Peacock and Mr. J. P. Grant, geographical, one being placed over the Upper, the other over the Lower Provinces.

Para. 16. Introduction of a new rank, that of Staff Surgeon, intermediate between Superintending Surgeon and Surgeon; one officer of this new rank being posted to each circle, as Deputy and Assistant to the Superintending Surgeon. These appointments were not made, and, with increased facility of communication and inspection, have not been found necessary. As far as rank goes, an equivalent was found in the institution, from 1870, of the new rank of Brigade Surgeon, now represented by that of Lieut.-Colonel on the selected list.

Paras. 27 and 28. Assistant Surgeons to be divided into two grades, first and second class. This was practically granted in clause 9 of the Warrant of 1st Feb., 1859, when Assistant Surgeons were given the rank of Captain, with increased pay, on completion of six years' service.

Paras. 34–38. Medical officers should not be considered as non-combatants, and should receive substantive rank. Such rank was conferred in 1898, more than forty years after Dalhousie had advocated the concession.

Para. 41. Recapitulation and summary.

"Minute on the Indian Medical Service. By the Governor General, Lord Dalhousie. Dated 1st February, 1856.

"Original Consultations—Military Department, 28th Feb., 1856.

"There still remain departments in the several branches of administration, which I should have been glad to have had time to review and amend, before resigning the Government of India. But the constant pressure of business requiring immediate attention has rendered it impossible
for me to find time for everything; and the near approach of the day of
my departure almost forbids any further attempt to propose reforms.
There is, however, one department which calls for improvement so loudly,
which calls for it so justly, which is so easily susceptible of full improvement,
which is so worthy of it, and will so completely and amply repay it, that I
cannot be content to leave India without submitting my views regarding
that portion of the service to the Honourable Court, and earnestly soliciting
their favourable consideration of what I shall propose. I allude to the
Medical Department of the three Presidencies.

"2. It is impossible for me now to work out the subject in its lesser
details. Indeed it is inexpedient that I should attempt to do so. It is
far preferable that these details should be left to the management of the
government hereafter, if the Honourable Court should be pleased to approve
of the general outline of what I am about to propose. It is that general
outline only which I now desire to submit.

"3. The Indian Medical Service has been the subject of enquiry, dis-
cussion, and representation for many years past. The Honble Court have
full information at their command regarding its condition, its deficiencies,
and all the various means of improving the one and repairing the other.
The records of enquiries held in this country by direction of the Govt. of
India, the evidence which has been given before the Committees of Parlia-
ment, and the numerous memorials which have from time to time been
presented to the Honble Court by members of the medical service of name
and note in the several presidencies, all furnish a body of important facts
which cannot be controverted and have never even been disputed.

"It is therefore unnecessary for me to burden this minute by setting
forth in it facts which are already so fully on record; and which will at
once be present to the memory of the Honble Court, and familiar to it, on
my referring to them.

"4. The first great fault in the organisation of the Indian Medical
Service,—the beginning, middle, and end of its imperfections,—is the
vicious principle upon which the direction and control of the Department
is based. It is governed by a Board consisting of three members, those
three Members having been, systematically, the three oldest officers on
the medical list. Recently the Honble Court permitted a modification
of this system of rigid seniority to be made, so far as to allow that one of
the three members should be appointed by selection. When I proceeded
to act on this permission I met with the utmost opposition, and although
I selected a medical officer of the most eminent ability, of distinguished
service, and moreover among the three seniors of the Superintending
Surgeons, I was compelled to insist upon his appointment, before I could
overcome the resistance which, by repeated remonstrance and representa-
tion on behalf of the two seniors, was made to the measure from Army
Head Quarters.

"5. When the medical service has been for so long subjected to the
Government of a Board; when that board has been uninterruptedly
filled by a rigid system of seniority, and when that system of seniority
has been thus inflexibly sustained by the military authorities and counte-
nanced by the Government, the Honble Court can have no doubt of the ill
effects which must have ensued.

"6. I say that 'the Honble Court can have no doubt of the ill effects
which must have ensued' from such an organisation, because the Honble
Court have already recognised the viciousness of the principle on which it is based, in the case of another controlling authority of a similar constitution,—viz. the Military Board. That Board was not in its constitution so radically bad as the Medical Board, because it had not been fixed like the latter in all its grades by absolute seniority. But it was largely subject to objections of the same character. The Honble Court acknowledged the inherent faultiness of its constitution. They even outstripped me in proposals for rescuing different departments from its influence; which I had made gradually and cautiously in order that alarm might not be created by any appearance of wholesale innovation. Finally the Honble Court readily consented last year to the total abolition of the Military Board.

"7. I strongly recommend and earnestly hope that the Honble Court will in like manner consent to the total abolition of the Medical Boards.

"8. The one true, right, sound principle for the Government of the Indian Medical Service in India is that which the Court have permitted the Government of India to act upon, providing a substitute for the collective control of the Military Board, namely, unity of authority coupled with direct responsibility.

"9. Let this principle be strictly observed in framing the direction of the department:—let the principle which is to govern all other appointments in it be, not succession but selection. Let the responsibility of causing effect to be given to these two principles be placed, not indirectly as it is at present, but directly upon the shoulders of the Government: and I will make answer for it, that the Medical service of the East India Company will be surpassed by none in the world, either in its Civil or its Military branch.

"10. Already in many respects the Indian Medical Service is superior to the Royal service, especially in the organisation of the inferior grades. There have already been found in its ranks many men of the highest capacity and value, who elsewhere would have won an European reputation. On the other hand there have too often been tolerated in it many who were dulls, sluggards, or reprobates. But if the directing authority of the Department were what it ought to be, the number of those who do it honour would be still more increased, while it would become the fault of the Government itself if those who are a reproach to the Department continue to discredit it.

"11. I therefore advise that the Medical Board at the several Presidencies should be abolished; and that in each Presidency the entire direction and control of the Medical Department, subject to the authority of the Government, should be vested in a Director General.

"12. I recommend that the Director General should be selected by the Government from among the Superintending Surgeons or Staff Surgeons, who will be mentioned hereafter; that his tour of duty should be for five years, renewable by the Government if it should think proper, and that his salary should be 3500 Rs per mensem.

"The Director General should perform all the duties which the Medical Board is now expected to perform, and he should have the services of a Secretary.

"13. The extent of the Bengal Presidency is now so great,—the new provinces, subsidiary to it are so numerous and still increasing,—the Civil and Military Establishments connected with it are so immense,—that the
Director General would be unable to perform the onerous functions of his office, unless he had either a very large and costly establishment, or assistance of a high class immediately subordinate to his office.

"As the more effective measure, and also in order that the opportunities of advancement and reward for medical officers, which are already much curtailed, should not be unduly diminished, I would advise that two officers be appointed under the Director General, one to be the Inspector General of Military Hospitals, the other to be the Inspector General of Civil Hospitals and Dispensaries.

"The names of these officers indicate their respective duties. Their salary should be 2500 Rs per mensem. They should each have an assistant or secretary. They should be liable to be deputed on special duty by the Director General, and his place should be taken by one of them if he should be temporarily absent.

"14. The Superintending Surgeons should correspond with the Inspectors General, and they with the Director General; but all ultimate decision and responsibility within the Department will rest with the Director General.

"Present members of the Medical Board, who may not be employed as Director General or as Inspector General, should be allowed to retire, retaining their allowances for so long as their tour on the Board would have lasted.

"15. The next grade in the Department should be, as at present, the Superintending Surgeon.

"This office is an efficient part of the system, if it be filled by efficient men. But the promotion to it, as to the Medical Board, has been hitherto regulated by the recommendations of the Commander in Chief, proceeding invariably and exclusively by strict seniority.

"It is manifestly impossible that the twelve senior officers on the Medical list, next after the members of the Board, can be the twelve fittest men for the performance of the important and responsible duty of superintending the whole executive of the department. It is certain that, although some are, the Superintending Surgeons as a body are not, the fittest men to superintend others, and thereby at once to protect the interests of the Government, and to promote the welfare of the community. Yet they ought to be so.

"The only means by which the Honble Court can ensure that they shall be so, is by directing that the appointment to the office of Superintending Surgeon shall in all cases be by selection of the fittest man for each vacancy that may occur.

"I beg to recommend that the Honble Court should issue such instructions accordingly.

"The substitution of the twelve best men in the medical service for the twelve oldest men (next after the Director and Inspectors General) as Superintending Surgeons, will have a great and wholesome effect. But it will still leave a deficiency to be supplied.

"16. The Superintending Surgeon cannot, unassisted, perform fully the duties that belong to his office, even if he be thoroughly efficient. The proper discharge of the duties which require his almost constant presence at Divisional Head Quarters is incompatible with those frequent inspections of all his stations, in which consists the very essence of superintendence.

"17. The consequence now is, that in most circles the duty cannot be
said to be done at all. Where it is done, the duty left at Head Quarters is naturally neglected by the senior officer, into whose hands it falls, and who gets neither credit nor advancement nor emolument by it.

18. The consequence hereafter will be, when efficient Superintending Surgeons shall be appointed, that the duty generally will be vastly better done, but it must still be imperfectly done, either at head quarters or in the mofussil.

19. To remedy this deficiency I beg to advise that a new grade of Medical Officers shall be created, who shall be called 'Staff Surgeons.' In number they should be one for each circle in which there is a Superintending Surgeon, and one for general duties at the Presidency.

Their salary should be 1000 Rs a month. They should be appointed by selection from among officers of the rank of Surgeon. They should do the duties of Superintending Surgeon, if that officer leave Head Quarters, they should do his duties in the mofussil if he should depute them for that purpose.

20. The addition of one 'Staff Assistant Surgeon' for each Staff Surgeon would render the system complete. But at present I urge only the appointment of Staff Surgeons.

21. By these means the function of Superintendence would be properly performed, which it has never yet been. All duties would be carried on in each circle without arrears or irregularities. Great economy as well as greatly increased efficiency would be the certain result in time of peace; and in time of war Government would have ten or twelve of their best men ready to their hand for employment in the field, without stripping regiments or establishments, and without most seriously deranging the whole working of the department throughout the Presidency, as is now the case on any sudden call.

22. Moreover a great boon, and most desirable encouragement would be given to the large body of full Surgeons, who have now very many years to wait after their promotion without any increase of allowance, which they can only obtain by reaching step by step the grade of Superintending Surgeon; while even under the system of selection to that grade which has now been recommended, the existence of an intermediate step would greatly quicken professional zeal and ambition, and by its cheering effect would repay the Government a hundredfold for the inconsiderable extra expense which the measure would involve.

23. The initiation of the nomination to all the principal appointments in the Medical Service has hitherto rested with the Commander-in-Chief, the real power of appointment being in the Governor General in Council, whose confirmation was necessary to His Excellency's nomination.

I recommend that this apparently divided responsibility should be set aside, and that the appointment of the high medical officers should rest directly, as it hitherto has practically, with the Governor General in Council.

The medical service is not exclusively military in its composition, although all its members hold military Commissions. On the contrary the Civil appointments of all kinds are much more numerous than the Military. All military appointments should be made by the Commander in Chief, all Civil appointments by the Governor General in Council, the Governors in Council, and the Lieutenant Governors.

The Director General should be appointed by the Governor General
in Council. The Inspectors General, Superintending Surgeons and Staff Surgeons by the Governor General in Council.

"But in every appointment, whether by the Governor General in Council, the Governors in Council, or the Lieutenant Governors, the Director General should recommend.* And altho' it would not be expedient that the nomination of the Director General should be declared to be binding or final, (because some appointments are personal, and in the Foreign Department medical officers from other Presidencies might be desired), still his recommendation should never be set aside except upon very strong grounds, which should be placed upon record.

"24. No doubt this measure would limit the patronage of all the high functionaries I have named. But it is very fitting that their patronage should be so limited in regard to medical officers, of whose qualities and professional capacities it is not possible for them to form a correct judgment.

"25. The principle of the measure, however, is no novelty, for the power which I propose to give to the Director General in India has always been exercised by the Director General in the Royal Service.

"26. By adopting these measures the mistakes which we all occasionally commit, however unconsciously, in the administration of patronage will be avoided. The right men will be chosen. The profession will get fair play. The rise of an officer of merit will no longer be doubtful; and the service will recover the popularity it formerly had among men devoting themselves in youth to the medical profession.

"27. The Assistant Surgeons of the Company's service are sufficiently well paid on their first entrance into it. But many years elapse before they are promoted to the rank of Surgeon, and immediately there is no increase of emoluments for the main body of the Assistant Surgeons, or for any but those who obtain detached employment.

"28. A great stimulus to exertion would be given, and great benefit would result, if the Honourable Court would consent to allow to the Assistant Surgeons, as such, some increase of emoluments on certain first conditions. At present an Assistant Surgeon, who is in charge of a regiment, receives only half the staff salary which is drawn by a Surgeon holding a similar charge. I would propose that any Assistant Surgeon in charge of a regiment who after seven years service shall be recommended by the Director General as in every respect deserving of reward, should receive the same staff salary as would be drawn by a Surgeon in the same position.

"29. The Assistant Surgeons might thus be divided into first and second class Assistant Surgeons.

"30. It certainly seems that something is required to restore the attractions which the medical service of the Honourable Company possessed in former years, but which general testimony and obvious facts unite to shew it has now lost.

"I remember that when twenty years ago I asked for a medical appointment from one of the Directors, I was told that it was as difficult to obtain an appointment in the medical service as in the Civil service, and in point of fact if was only obtained for me on that occasion by an exchange.

"The medical service of the Honourable Company is now open to everybody; yet the public journals show that there are hardly more candidates than vacancies.

"31. There must be a reason for this change in estimation in which the

* Italics in original.
Indian Medical Service is held. Those of the profession whom I have consulted attribute it to the fact that there are fewer prizes for Assistant Surgeons in India now than formerly, and to the increased inducements which the Royal Service now holds out.

"It is in order to counterbalance these drawbacks, as well as offer an encouragement which seems just and wise in itself, that I make these proposals in favour of Assistant Surgeons, which I beg to recommend to the favour of the Honourable Court.

"32. There are several particulars in which the Medical Service as a body lies under great disadvantages, and which they regard, justly in my opinion, as grievances that ought to be removed. I refer to the inequality which now prevails between the position of a medical officer and that of his brother officers, in respect of pension, honours, and rank.

"I respectfully submit that such irregularities are founded on no sound grounds of justice, expediency, or policy. No valid reason ever has been, or can be, alleged for maintaining them. Their effect is to depress the spirits of the medical officer;—to depreciate a profession and class of service which ought to be held in the utmost respect, and supported equally from motives of prudence and gratitude.

"All such irregularities should be at once removed; and the medical officer, in respect of real rank, dress, honours, and promotion, should be placed on a footing with his brother officers, who hold the Honourable Company's commission like himself.

"33. As the first step towards the removal of these irregularities, and one which it is in the Company's own power to take, I respectfully advise the Honourable Court to lend an ear to the memorials which have been addressed to them respecting the retiring pension; and to permit their medical officers to retire upon pensions under the same regulations as all other military officers.

"34. Whenevery the opportunity may be open to it, I beg to urge upon the Honourable Court the justice of representing strongly and perseveringly to Her Majesty's Ministers the claims of their medical officers to share reasonably and in a far larger proportion than they do at present, in the military honours and decorations which are granted for services in the field.

"The absurdity of regarding a medical officer as a noncombatant is, I believe, abandoned. The medical officer comes constantly under fire like other men. Every campaign which is fought exhibits the names of medical officers in the lists of killed and wounded; and the returns invariably show that they still more often fall victims to their own exertions on behalf of their suffering comrades.

"Proof can hardly be required of such well known facts. If it be, the fatal record of the service which our countrymen have been performing during the last year and a half in Turkey and the south of Russia will more than bear out the statement I have made.

"35. But the most galling, the most unmeaning, and purposeless regulation by which a sense of inferiority is imposed upon medical officers, is by the refusal to them of substantive rank.

"The Surgeon and Assistant Surgeon rank nominally with the Captain and Lieutenant; but the rank is only nominal. Wherever medical officers and others are brought together on public duty the former has * no rank at

* Has in original, a slip for have.
all; and the oldest Surgeon on the list must in such case range himself below the youngest Ensign last posted to a Corps.

36. It is impossible to conceive how such a system as this could have been maintained so long on the strength of no better argument than that 'it has been, therefore it ought to be.'

It is impossible to imagine what serious justification can be offered for a system which, in respect of external position, postpones service to inexperience, learning to ignorance, age to youth, a system which gives a Subaltern who is hardly free from his drill precedence over his elder who, perhaps, has served through every campaign for thirty years; a system which treats a member of a learned profession, a man of ability, skill, and experience, as inferior in position to a Cornet of Cavalry, just entering on the study of the Pay and Audit regulations; a system in fine which thrusts down grey-headed veterans below beardless boys.

37. It is not necessary to refer to Parliamentary evidence or to memorials for testimony to the reality of this grievance. Its occurrence is notorious. It has happened frequently, it has happened within my own knowledge, and not three months ago.

38. I trust that the Honourable Court will put forth all their energies to obtain from Her Majesty's Government (from which I presume it must proceed) an abrogation of this regulation, so humiliating to medical officers, and therefore injurious to the service.

39. I have only now to add a few words regarding the numerical strength of the medical establishment.

The Honourable Court have been pleased not long since to sanction an augmentation of the Medical Establishment. But demands are perpetually increasing. The new furlough rules have the effect of augmenting largely the number of temporary absentees. The requisitions for medical officers are so constant and so urgent that it is still found impossible to detain young officers at the Presidency for that training, which is wisely enjoined by the regulations, and which all authorities concur in regarding as essential to the usefulness of the young Assistant Surgeon.

I beg therefore to recommend that the Medical Establishment should be revised annually; that it should be kept up to its full strength; and that either a reserve should be added to it, or that supernumeraries should always be maintained, to the extent of at least ten per cent. on the regular strength of the Establishment.

40. Lastly, I have to observe with respect to the financial part of the question, that I do not pretend that the improvements now suggested and recommended can be effected without additional expense. Undoubtedly additional charge will be involved in these proposals. But I do not for that reason shrink from recommending them. I believe that the ordinary revenue of the country will be found amply sufficient to bear any such small additional charge, and I sincerely trust that the Honourable Court will not be deterred by such a consideration from introducing into the system of its medical service the great amendment of which it is susceptible and which it so much needs.

41. I will now close this minute by recapitulating the several suggestions and recommendations which have been made them, regarding the Medical Service of the East India Company.

I. That the several Medical Boards should be abolished.

II. That the control and management of the medical department in
each Presidency should be placed in the hands of a single officer, who shall
be called the Director General. That this officer should be selected from
among the Superintending Surgeons, or Staff Surgeons, and that his tenure
of office should be for five years.

"III. That the Director General should be assisted by two officers,
to be called the Inspector General of Military Hospitals, and the Inspector
General of Civil Hospitals and dispensaries; and that they should be
selected in the same manner as the Director General.

"IV. That the Superintending Surgeons should henceforth be appointed
invariably by selection, not by Seniority.

"V. That a grade of 'Staff Surgeons' should be created, one in each
circle and one at the Presidency, who should be appointed by selection
from the Surgeons.

"VI. That Assistant Surgeons, after seven years' service, and on the
recommendation of the Director General, should if they are in charge of a
regiment receive the same staff salary as a Surgeon holding a similar charge.

"VII. That the injurious inequalities which are now maintained
between medical and other officers should be removed.

"VIII. Especially that medical officers should be permitted to have
the same option regarding retiring pension as all other officers of the Army.

"IX. That medical officers should receive a fair proportionate share of
military honours and decorations.

"X. Above all that the relative rank allotted to medical officers should
no longer be nominal but substantive and real; and that medical officers
should thus be relieved from the humiliations to which they are now
habitually subjected.

"XI. That the medical department should not only be kept up to
its full strength at all times, but that a reserve or supernumeraries should
be maintained; in order that young medical officers may be certain to enjoy
those opportunities of gaining, on their first arrival, experience, which the
Government is enjoined to provide for them, and which is essential to
their efficiency, but which they do not now obtain.

"42. I have now the honour to commend this important subject to the
careful and the early consideration of the Honourable Court.

"(Signed) DALHOUSIE. 1st February, 1856.

"(Signed) GEORGE ANSON."

The Commander-in-Chief, General Anson, signed Dalhousie’s
minute without comment. Two other members of Council, Mr.
J. Dorin and Genl. Low, wrote short notes of concurrence. A
fourth, Mr. John Peter Grant, wrote a long minute, dated 14th
Feb., 1856, concurring on the whole with the Governor General’s
recommendations, but suggesting that, on account of the vast
extent of the Bengal Presidency, the two I.G.’s, instead of
inspecting military and civil hospitals respectively, should each
inspect half of the Presidency. The fifth member, Sir Barnes
Peacock, the Legal Member, wrote a short note, approving of the
Governor General’s minute, but agreeing with Mr. Grant that
the two I.G.’s should each inspect half the Presidency.
The Governor General made a further note on the subject, dated 19th Feb., in which he said that the points raised by Mr. Grant were matters of detail, and open to further consideration.

A new warrant for the I.M.S. was issued on 1st Feb., 1859. The chief changes introduced were—

Clause 3: Examination for promotion to Surgeon.
Clause 8: Retirement at 55 and 65.
Clause 9: Title of Surgeon Major and rank of Lieut.-Colonel granted at twenty years' service; Surgeons to rank as Majors; Assistant Surgeons after six years' service to rank as Captains.

Clause 15: Honorary step to senior officers on retirement.
Clause 15: Appointment of Honorary Physicians and Surgeons to the Queen.

The Stanley who signs this warrant was Edward Henry Stanley, afterwards fifteenth Earl of Derby. When his father, the fourteenth Earl, became Premier in 1858, he was appointed, on 5th June, 1858, President of the Board of Control, and was the last to hold that office; and also, from 2nd Sept., 1858, the first Secretary of State for India. Subsequently he was Foreign Secretary under Disraeli, from 1874 to 1878, when he resigned; and afterwards Colonial Secretary under Gladstone from 1880 to 1885, when he joined the new Liberal Unionist party. He died on 21st April, 1893. A curious episode in his life was that, after Otho of Bavaria, in 1862, had abdicated the throne of Greece, and after the Duke of Edinburgh had declined the offer of the crown, Lord Stanley was suggested for the vacant throne, but he declined to be nominated as a candidate.

"I.M.S. Warrant of 1st February, 1859.

1. The grades of medical officers in our Indian Military forces shall be four in number; * namely
1. Inspector General of Hospitals.
2. Deputy Inspector General of Hospitals, 1st Class.
2. Deputy Inspector General of Hospitals, 2nd Class.
3. Staff or Regimental Surgeon, who, after twenty years service in India in any rank, shall be styled Surgeon Major.
4. Staff or Regimental Assistant Surgeon.

* Footnote in original.—In substitution for the existing grades, namely,
Inspector General of Hospitals . . . . . for Director General of the
Deputy Inspector General, 1st Class . . for Inspector General.
Deputy Inspector General, 2nd Class . . for Superintending Surgeon.
Surgeon Major . . . . . . . . . . . . . . . . . . . . . for Senior Surgeon.
Staff or Regimental Surgeon . . . . . . . . . . . . . . . . . . . . . . as at present.
"2. No candidate shall be admitted to the competitive examination for a commission in the Medical Department of our army who does not possess such a certificate or certificates as would qualify a civilian to practise medicine and surgery.

"3. No Assistant Surgeon shall be eligible for promotion to the rank of Surgeon until he shall have passed such examination as our principal Secretary of State for India in Council may require, and shall have served in India with the commission of Assistant Surgeon for five years, of which two shall have been passed in or with a regiment.

"4. A Surgeon, whether on the staff or attached to regiments, must have served ten years in India, of which two must have been passed, with the rank of surgeon, in or with a regiment, before he will be eligible for promotion to the rank of Deputy Inspector General of Hospitals.

"5. A Deputy Inspector General of Hospitals must have served three years in India in the first or second grade of that rank before he shall be eligible for promotion to the rank of Inspector General.

"In cases, however, of emergency, or when the good of the service renders such alteration desirable, it shall be competent for the Governor General in Council to shorten the several periods of service above mentioned, in such manner as he shall deem fit and expedient.

"6. Assistant Surgeons shall, as a general rule, be promoted to the rank of Surgeon in the order of their seniority in the service, unless unfit for the discharge of their duties from physical or professional incompetence or misconduct. In cases of distinguished service, however, an Assistant Surgeon may be promoted by brevet, without reference to seniority; and in such cases, with a view to ensure the responsibility attaching to an appointment made out of the regular course of promotion, the recommendation in which the services of the officer shall be detailed shall be published in the General Orders of our Indian military forces, and in the Gazette in which his promotion appears.

"7. All promotion from the rank of Surgeon to that of Deputy Inspector, and from the rank of Deputy Inspector to that of Inspector, shall be given by selection for ability and merit; and the grounds of such selection shall be stated to us in writing, and recorded in the office of the Secretary of State for India in Council, the selection for the grades of Deputy Inspector being made from the whole rank of Surgeons, whether styled Surgeons or Surgeons Major.

"8. With a view to maintain the efficiency of the service, all medical officers of the rank of Surgeon Major, Surgeon, or Assistant Surgeon, shall be placed on the retired list when they shall have attained the age of fifty-five years, and all Inspectors General and Deputy Inspectors General when they shall have attained the age of sixty-five years.

"9. The relative rank of the medical officers of our Indian military forces shall be as follows:—

"Staff or regimental Assistant Surgeon as a Lieutenant, according to the date of his commission; and after six years service in India, as Captain, according to the date of the completion of such service.

"Staff or regimental Surgeon as Major, according to the date of his commission; and Surgeon Major as Lieutenant-Colonel, but junior of that rank.

"Deputy Inspector General of the 2nd Class as Lieutenant-Colonel, and Deputy Inspector General of the 1st Class as Colonel, according to the dates of their appointments respectively."
Inspector General of Hospitals as Brigadier General, according to the
date of his appointment; if with an Army in the field, or after three years
service in India as Inspector General, as a Major General, from the date of
his joining such army in the field, or according to the date of completion
of such service.

10. Such relative rank shall carry with it all precedence and advan-
tages attaching to the rank with which it corresponds, (except as regards
the presidency of courts martial, where our will and pleasure is, that the
senior combatant officer be always president), and shall regulate the choice
of quarters, forage, and prizemoney. But when a medical officer is serving
with a regiment or detachment, the officer commanding, though he be
junior in rank to such medical officer, is entitled to a preference in the choice
of quarters.

11. Medical officers shall be entitled to all the allowances granted to
our Indian military forces, on account of wounds and injuries received in
action, as combatant officers holding the same relative ranks.

12. Their families shall, in like manner, be entitled to all the allow-
cances granted, under existing regulations, to the families of combatant
officers holding the same relative ranks.

13. Medical officers shall be held entitled to the same honours as other
officers of our army of equal relative rank.*

14. A medical officer, retiring after a service in India of twenty-five
years and upwards, may, if recommended for the same by the head of his
department, receive a step of honorary rank, but without any consequent
increase of pay.

15. Six of the most meritorious medical officers of the army shall be
named My Honorary Physicians, and six, My Honorary Surgeons.

Given at our court at Windsor, this 1st day of February, 1859, in the
twenty-second year of our reign. By Her Majesty's command. STANLEY.

This Warrant remained in practical force for a very short time. The I.M.S. was soon afterwards closed to competition, for four
and a half years, the last admissions being made on 1st Oct., 1860.
For the next four years the amalgamation of the I.M.S. with the
A.M.D. was under the consideration of Government, in India
and in England. The following extracts, about the I.M.S.,
from a Minute on the Indian Army by Sir James Outram, Military
Member of Council, dated 2nd Jan., 1860, are taken from Physician
and Friend, pp. 203-7. The name "Dr. McLaren" is a mistake,
either in writing or in copying. There was no officer of that
name high in rank in any of the Medical Services. It should be
John McLennan, who entered the Bombay Medical Service on
7th May, 1821, became Physician General on 1st Jan., 1849,
retired on 26th Jan., 1855, and died in London on 5th April, 1874.

* Footnote in original.—"This clause does not extend to the compliments
to be paid by garrison or regimental guards, as laid down in pages 29 and 30 of the
Queen's Regulations for the Army."
Extracts (about I.M.S.) from the Minute on Indian Army by Sir James Outram, dated 2nd January, 1860.

"67. There is one class of officers in respect of whom I would fain make a special appeal on this score, as they are a class which, to our disgrace be it said, has been treated with singular harshness and illiberality alike by their military and civil superiors. I allude to the officers of the Medical Department, a body of men who not only are unsurpassed by any other body in the Service for professional zeal and skill, gallantry and devotion to their duties, but have especially distinguished themselves by the success with which they have cultivated general science, and the earnestness with which they have applied themselves to the promotion of education and other philanthropic objects. These men, especially those of the Bombay establishment, have been treated by us with such unfairness that a late Physician General of that Presidency, a man whose name is held in honour both in and out of his profession—I allude to Dr McLaren*—felt himself authorized to assure the late Lord Frederick Fitz-Clarence that, had any officer treated his dogboy in the manner in which the Court of Directors and Board of Control have treated the Medical Service, he would have been brought to a Court-Martial, and cashiered for dishonourable breach of faith. The Physician General's illustration was a strong one; but after explanation, its justice was admitted by that Commander-in-Chief, who thenceforth felt as warmly on the subject as the head of the Medical Department.

"68. In behalf of this noble and illustrious Service Lord Dalhousie made a generous interposition; and, though His Lordship's efforts were at the time unsuccessful, his appeal was so forcible, and his general views have been so earnestly and ably supported by Lord Canning, that justice cannot long be denied them if the Army of India be kept a Local one; but to the Medical Service amalgamation would be ruinous.

"69. Than Dr Alexander, the Director-General of Her Majesty's Military Medical Service, I am assured that no worthier or more honourable man exists; but he is only a man—of finite knowledge and human feelings. He knows the officers of his own Service; he knows that many of them are eminently deserving of that promotion which at present it is not in his power to bestow, but for which amalgamation would afford an opportunity. And, not knowing the men in the Local Army, his partialities would needs be in favour of the men of his own Service, to an extent that would prove ruinous to the just claims of the medical officers of the Local Service. And even if he should deem it his duty, on the first opportunity, to promote to the higher grades those medical officers, the seniority rules of whose Service prevented their obtaining promotion for the same services as secured promotion for their more fortunate brethren of the Royal Army, the very number of promotions that have recently been made to the grade of Deputy-Inspector in the Royal Service would for a considerable length of time prevent him from doing justice to those of the Local Service, whose names had been honourably mentioned by the various Generals commanding in the Field; and ere these arrears of promotion were disposed of, the claims of those in whom as members of his own Service he naturally feels more interested, would have again accumulated and pressed for favourable notice."

* Should be McLennan.
A long and interesting extract from the Appendix to this Minute of Sir James Outram has been given in Chap. XXVIII, Surgeons as Civil and Political Officers.

For the next four years, 1860 to 1864, the amalgamation of the I.M.S. with the A.M.D., in the near future, seemed to be almost a certainty. Notifications in the Gazettes and General Orders during this period show officers of the two Services relieving each other indiscriminately of charges with British and Native troops, and of Civil Surgeoncies. And, though the proposed amalgamation had been negatived by the Warrant of 7th Nov., 1864, officers of the A.M.D. continued to be eligible for Civil Surgeoncies for over a year more. Letters from the Secretary to the Govt. of India, Mily. Dept., to the Civil Governments, Nos. 207 to 211, of 7th Feb., 1866, quoted in I.M.D. Circ. No. 26, of 11th July, 1866, rule—

"Except in cases where no officers of the Indian Medical Service are available or within reach, officers of the British Medical Service are not to be considered eligible for appointment to any Civil charge."

The Lancet of 27th June, 1863, published proposals for the amalgamation, quoted from the Times of India, and pointed out that the proposed changes would benefit the senior officers of the I.M.S. very little, but that the juniors would get a great acceleration of promotion. These proposals may be summarised as follows:—

"(1) The I.M.S. is to form part of the British Medical Service, and all officers in it are to be eligible to serve everywhere in India, but not to be liable to serve out of India, unless they have accepted general service.

"(2) All Medical Officers to be allowed to volunteer for general service, and the new line regiments to be officered from those who do so.

"(3) The names of those who volunteer to be retained on the list, and all are to retain their claim on the funds.

"(4) All Medical Officers to be allowed the choice of Indian or British pension rules.

"(5) Promotion to D.I.G. to be made according to the practice of the British Army.

"(6) Those officers who do not volunteer for general service to remain on their present footing, and to have a prior claim to civil appointments, and to the charge of native regiments.

"(7) Promotions to be made immediately, to make the proportion of Surgeons to Asst. Surgeons the same in the Indian as in the British Service.

"(8) Retrospective effect to be given to the I.M.S. Warrant of Jan., 1860,* that, it may confer the same advantages as the A.M.D. Warrant of Oct., 1858.

* Apparently the I.M.S. Warrant of 1st Feb., 1859, is meant.
"(9) The rank of Surgeon Major in the Army to be given after twenty years service, without reference to absence on leave.

"(10) Pay to be consolidated, and headmoney abolished.

"(11) Furlough pay for Surgeons to be eighteen shillings a day, for Asst. Surgeons seven shillings and tenpence.

"(12) The Medical Staff for Bombay to consist of one Principal I.G., one I.G., and six D.I.G.'s.

"(13) There are to be one I.G. and six D.I.G.'s for the whole of India, selected from the British Service; the proportion for each Presidency not defined.

"(14) The Medical Fund to be guaranteed according to the rules existing on 20th August, 1860."

The above proposals embody a scheme not so much for the amalgamation of the two Services, as for the absorption of the I.M.S. into the A.M.D. Provision is made for the future of all existing officers of the I.M.S. But the scheme does not seem to contemplate the continuance of that Service; nor does it show how the Medical Service of India is to be provided in future, whether by volunteers from the A.M.D., or by officers of that department deputed for a tour of service in India, or otherwise.

The proposals for amalgamation were finally negatived by the I.M.S. Warrant of 7th Nov., 1864, embodied in Mily. Letter No. 340 of 7th Nov., 1864, from Sir Charles Wood, Secretary of State for India, to the Indian Government. Earl de Grey and Ripon, mentioned in paras. 5 and 6, was at that date, from 1863 to 1866, Secretary of State for War. He succeeded Sir Charles Wood as Secretary of State for India in 1866, was Viceroy of India from 1880 to 1884, and died so recently as 9th July, 1909. The Governor General who, as mentioned in para. 2, recommended the amalgamation of the two Services, was Lord Canning. Lord Elgin succeeded him as Governor General on 12th March, 1862.

Para. 8 states that it had been proposed to replace the I.M.S. by a Medical Staff Corps, for service in India, recruited by volunteers from the A.M.D., in the same way as the Indian Staff Corps were recruited from the British Army. To do this, it was necessary to obtain sanction from Parliament to repeal that part of Act 16 and 17 Victoria, which provided that all appointments to the I.M.S. should be made by open competition. This sanction the Government failed to obtain, the motion being defeated in the House of Commons, in 1864, by two votes.*

The formation of such a Medical Staff Corps, in place of the

I.M.S., or, in other words, the future recruitment of the I.M.S. altogether by volunteers from the A.M.D., would probably have been the best solution of the problem, both for India and for the Service. It would have brought the Medical Service into line with the Indian Staff Corps, as regards the manner of its recruiting, and would have officered the I.M.S. with men who had already served in the A.M.D., and who volunteered for continuous service in India with a knowledge of what they undertook, and of the special advantages and disadvantages of such service. But there were two great objections to this proposal, one from the Indian, and one from the British point of view; objections which proved insuperable, when amalgamation was again under consideration in 1880-1. Admission to the A.M.D. being restricted to men of unmixed European extraction, such a system of recruiting would have debarred natives of India from entering the Service. Admission to the I.M.S. had been thrown open, ten years before, to all British subjects, without distinction of race, and some natives of India had already entered the I.M.S., and were serving therein with credit. The Indian Government could not consent to the complete exclusion of Indians from the Service in future. And, on the other hand, under such a system of recruiting by volunteers from the A.M.D., the superior attractions of the I.M.S. would have drawn off the majority of the more energetic and ambitious members of the British Service, a result which would have been most unsatisfactory to the British Army.

The statement, in para. 13, that "the indiscriminate employment of officers from either Service in the supervision of both" is impracticable, reads curiously now, half a century later, when such a system has been in force for over thirty years. What was found impracticable in 1864 was found quite practicable sixteen years later, in 1880. It is true that strong objections were made, especially by the I.M.S., to the introduction of this unified system of administration. But these objections were made, not so much to the system itself, as to the reduction in the number of administrative posts, and to the consequent loss of prospects of promotion, which necessarily accompanied the change.

After the issue of this Warrant, the I.M.S. was again thrown open to competition, the commissions of the candidates who passed the first examination being dated 1st April, 1865. On this occasion the first place was taken by Kenneth McLeod,
afterwards Professor of Surgery in Calcutta; while James Cleghorn and Robert Harvey, both of whom had already passed through Netley as candidates for the A.M.D., and both of whom later on in succession filled the post of Director General, stood second and third.

The chief alterations made by the Warrant of 7th Nov., 1864; were the following:—

\[ \text{Para. 18; Strength of the I.M.S., 861, to be diminished.} \]
\[ \text{Para. 22, 23; Promotion to Surgeon to be made on completion of twelve years' service.} \]
\[ \text{Para. 27; All executive appointments to be tenable equally by officers of all executive ranks.} \]
\[ \text{Para. 31; Limitation of tenure of office of D.I.G. to five years.} \]
\[ \text{Para. 35; Grant of increased pensions.} \]
\[ \text{Para. 36, 37; Grant of higher pensions to I.G.'s and D.I.G.'s.} \]
\[ \text{Para. 44; Royal commissions conferred on all officers of I.M.S.} \]

This new Warrant, as set forth in Mily. Letter No. 340, of 7th Nov., 1864, from the Secretary of State for India to the Governor General of India in Council, was published in India as G.G.O. No. 1060, of 23rd Dec., 1864. It is given in full below.

"India Office, London, 7th November 1864. To His Excellency the Right Honourable the Governor General of India in Council.

"Sir,—Para. 1. In continuation of my despatch, No. 152, dated 16th May 1864, and with reference to your reply thereto, No. 242, of the 29th June 1864, I have now the honour to communicate to your Excellency the decision at which Her Majesty's Government has arrived regarding the future establishment of medical officers for service in India.

"2. In a despatch, No. 82, dated 12th March, 1862, the late Governor General in Council recommended the formation of an amalgamated medical service for the United army of Great Britain and India, and expressed his concurrence generally in a scheme for carrying out such a measure, embodied in a memorandum by Colonel Norman which accompanied that despatch.

"3. A very important feature in the working of that scheme was the unavoidable removal of medical officers from employment in India after a limited number of years service in that country, whatever their employment might be.

"4. I was apprehensive that this might be attended with serious inconvenience, but, after much and careful consideration of the subject, I resolved to submit the proposal, with some slight modifications, for the concurrence of the Secretary of State for War.

"5. I forward for your information the correspondence which has taken place upon the subject, by which your Excellency will perceive that Earl de Grey objects to the scheme mainly on the following grounds:—

"1st. That the employment of British Medical Officers for limited
periods in Civil stations in India would put a stop to the continuous military training secured under the present system of the Army Medical Department, and considered by him to be essential to the efficiency of the service; that officers so employed might acquire habits of independence inconsistent with a due performance of regemental duties, and would have to return to a regiment at an age when men in general do not easily bend themselves to the practice of subordination required from a regemental officer of inferior rank.

"2nd. His time, it is stated, would have been spent in treating diseases different to a great extent from those of soldiers, and he would have acquired no experience, and have had no occasion to practise that most important part of his duty as an Army Medical Officer, the prevention of disease. He would, in short, not be the officer whom the existing organisation of the Medical Department of the British Army contemplated, and whom it is the object of the costly and elaborate system recently established to provide for the Army.

"3rd. Earl de Grey further objects, that 'regemental duties with native troops are at present of a very different nature from those required in British regiments, and would not afford Medical Officers the training and experience which the new organisation has rendered essential'; and lastly, his Lordship mentions, that if the amalgamation were once carried out on these principles, it would be extremely difficult, if not impossible, to abandon them hereafter, whatever might be the result.

"6. In my reply, I explained to Earl de Grey and Ripon my reasons for not being able to concur in the objections offered by his Lordship; but as I felt satisfied that these objections had not been lightly entertained, I felt that it would be useless to press a reconsideration of the subject.

"7. It was further obvious from the correspondence that any plan involving the withdrawal for a time from their regular duty of the officers of the Army Medical Department, would be liable to objection on similar grounds, and Her Majesty’s Government directed their attention therefore to the possibility of providing for the future demands of the Government of India by the formation of Medical Staff Corps for each Presidency.

"8. In order to obtain for the Medical Service in India the advantage of having its officers drawn from the same source, and having passed the same examination as those of the British Army, and with a view of placing them on a footing of perfect equality, by obliterating as much as possible all distinction between the bodies of officers so employed and those of the British Army, it was proposed to form the several Staff Corps by means of Medical Officers of Her Majesty’s Service volunteering to join them.

"9. With this view, however, it became necessary to obtain the sanction of Parliament to the repeal of that part of the Act of the 16 and 17 of Victoria, cap. xcvi, sect. 37, which prescribes the manner in which Medical Officers shall be provided for employment under the Government of India.

"10. Her Majesty’s Government having failed to obtain the consent of Parliament to a measure proposed with this view, it became necessary to give up the scheme of a Medical Staff Corps, as proposed, and to revert again to the system of an entirely separate service as heretofore.

"11. The changes which have been recently made in the amount and composition of the military force in India, the transfer of the whole of the European troops to the British Army, and the reduction of the native force,
render necessary a corresponding reduction in the establishment of Medical Officers serving under the local Governments, as well as some change in the nature of their employment.

"12. One of the objects aimed at in the contemplated union of the British and Indian Medical Service was the abolition of the double administrative staff in India. This advantage would have been unattainable on the formation of Medical Staff Corps, and is equally so in the continuance of a separate service as now proposed.

"13. It is obvious that a single medical staff for all India is only compatible with one amalgamated medical service, and that the objections advanced by the Secretary of State for War, and which have proved fatal to the scheme of amalgamation, must apply with even greater force to any plan that would involve the indiscriminate employment of officers from either service in the supervision of both.

"14. The evils that have resulted up to the present time from the employment of a double staff will, it is believed, disappear when the duties of the officers of the two services shall have been entirely separated. The sole objection to such double staff will then consist in its expense. This, I apprehend, will, on a readjustment of the local department of inspection, with a view of meeting the altered condition of the service, be found susceptible of considerable reduction.

"15. Her Majesty's Government have therefore determined that the duties of the Medical Officers of the British Army serving in India shall in future be kept wholly distinct from those of the Medical Officers of the Indian Establishment, and that there shall be a separate administrative establishment for each.

"16. Under these circumstances, it will be necessary that the administrative establishments in the several Presidencies should be revised, and the duties of the several medical officers of the higher grades redistributed, and I request that you will take the subject into early consideration, with a view of determining the number of Inspectors General and Deputy Inspectors General of each service that will be required to conduct the administrative duties of the respective services in each Presidency.

"17. In my despatch No. 152, I authorized your augmenting the number of officers above the rank of Assistant Surgeon in Bengal to 152, Madras to 86, Bombay to 69, leaving the aggregate establishment of Medical Officers in each Presidency the same as before.

"18. That establishment is at present as follows:—Bengal, 425; Madras, 243; Bombay, 193.

"19. You were informed, in my despatch, No. 291, dated 8th August, 1863, that the War Office would take measures for relieving, as soon as possible, the Assistant Surgeons of the Indian Army from the brigades of Artillery and new Line Regiments, and the same course will hereafter be adopted as a necessary consequence of the transfer of those regiments to the British Army, in regard to the Surgeons. A reduction in the establishment of Medical Officers required for service in India will necessarily follow, and I request that the subject of the number likely to be required henceforward in the several Presidencies may receive your early consideration.

"20. In making this calculation, you will, of course, take into account the several situations which may be properly filled up by Uncovenanted members of the medical profession.
21. It is believed that, in consequence of all appointments to the local service having ceased during the last three years, the aggregate number of Medical Officers at present borne on the strength of the several Presidencies will be, if anything, below the prospective wants of the service, but I shall make arrangements without delay for filling up vacancies as they may occur on your revised establishment.

22. The promotion of Assistant Surgeons who may hereafter enter the Indian Army will be regulated by length of service, and not, as heretofore, by succession to vacancies in a fixed establishment of officers of the higher grades.

23. Assistant Surgeons of twelve years service from the date of first commission, (of which two years shall have been passed in charge of a Native Regiment), who shall have passed the prescribed examination in professional subjects, will be promoted to the rank of Surgeon.

24. The benefit of this rule is to be extended to all Assistant Surgeons now in the Indian service, but officers now in the service who may be so promoted will be considered supernumeraries to the establishment of Surgeons as recently laid down, so that no promotion by seniority will take place until such supernumeraries are absorbed.

25. You will make the promotions consequent upon this concession from the date of the receipt of this despatch.

26. In the despatch above referred to, I informed you that you were authorized to introduce certain changes in the mode of payment of Officers of the Medical Department serving in India, and you were informed that, pending a further communication upon the subject, Officers of the British or Indian Medical Service, holding staff appointments, the salaries of which are consolidated, will continue to draw their salaries as at present; and all officers of the Indian Medical Department, in the receipt of staff salaries, including such as are in medical charge of native regiments, will continue to draw the aggregate amount of pay and staff allowances they now receive, provided it be not less than the rate of pay laid down in the above table for officers of their rank and standing in the service.

27. I have now to inform you that it has been determined that in future all employment on the part of Medical Officers of the Indian Service involving the receipt of special staff salary shall be considered as staff employment, the salaries being in all cases consolidated; and that all appointments, whether Civil or Military, held in future by Officers of the present Indian Medical Service below the rank of Deputy Inspector General, will be alike tenable by Surgeon Majors, Surgeons and Assistant Surgeons.

28. The salaries of the principal Administrative and Military appointments are fixed at the following consolidated sums:—Inspector General, 2500 Rs; Deputy Inspector General, 1800 Rs, whether of the British or Indian Medical Service; Surgeon Major in charge of Native Regiments, 1000 Rs, with 90 Rs for horse allowance in Cavalry Regiments; Surgeon in charge of ditto, 800 Rs, with 90 Rs ditto; Assistant Surgeon above five years full pay service, ditto, 600 Rs, with 60 Rs ditto; Assistant Surgeon under five years ditto, 450 Rs, with 60 Rs ditto. But officers now in the Indian Service will receive the pay due to their rank as laid down in para. 10 of my despatch No. 152 of 16th May 1864. when such pay is in excess of the consolidated salaries above-mentioned.
29. Officers who may hereafter be appointed to the Indian Medical Service will receive pay when unemployed in India according to the following scale:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Years Service</th>
<th>Unemployed Pay Rs. a. p.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon Major</td>
<td>25</td>
<td>888 12 0</td>
</tr>
<tr>
<td>Ditto</td>
<td>20</td>
<td>852 3 7</td>
</tr>
<tr>
<td>Surgeon</td>
<td>15</td>
<td>677 6 11</td>
</tr>
<tr>
<td>Ditto</td>
<td>12</td>
<td>640 14 6</td>
</tr>
<tr>
<td>Assistant Surgeon</td>
<td>10</td>
<td>410 9 5</td>
</tr>
<tr>
<td>Ditto</td>
<td>6</td>
<td>392 5 2</td>
</tr>
<tr>
<td>Ditto</td>
<td>5</td>
<td>394 14 2</td>
</tr>
<tr>
<td>Ditto</td>
<td>Under 5</td>
<td>280 10 0</td>
</tr>
</tbody>
</table>

30. The salaries of other medical appointments in the Civil and Military Departments will be revised with reference to the above, and fixed at a consolidated sum; and I request that a report may be made to me upon the subject with as little delay as possible. In the meantime, the aggregate sums at present received in each case will continue to be drawn.

31. With a view of promoting the efficiency of the service, it has been further determined that the tenure of office by a Deputy Inspector General of the Indian Service shall, as in the case of Inspectors General, be limited to five years; officers being, however, if not disqualified by age, eligible either for employment for a second tour of duty in the same grade, or for employment in the higher grade of Inspector General by promotion thereto.

32. You will follow, in the case of Officers now holding the office of Deputy Inspector General, the same course which your Government adopted in 1861, in regard to combatant officers holding certain staff appointments, and permit all such to hold their offices for two years longer, irrespective of the periods they may severally have served in them. Should any Officer have served up to the present time less than five years, he will be allowed to complete a full period of seven years.

33. The rank of Inspector General and Deputy Inspector General conferred upon officers of the Indian Medical Service under the Royal Warrant of the 13th January 1860, is to be considered as substantive rank. These officers, on vacating office at the expiration of the five years tour of duty, will be permitted in future to draw respectively an unemployed salary of 1200 rupees per mensem in the former and 900 rupees in the latter case for a period of six months from the date of their vacating office; after which they will be placed, when unemployed, on the rate of pay laid down in my despatch of the 16th May, 1864, for Officers of corresponding rank in Europe. These sums, deducted from the consolidated salary, will regulate the moiety of Staff salary to be drawn by Officers of those grades during absence on sick certificate. The decision reported in the third paragraph of your letter, No. 242 of 1864 will cease to operate from the date of publication of the present despatch.

34. With a view to improving the position and prospects of Officers of the Indian Medical Service, it has been resolved to introduce prospectively the following revised pension rules.
35. Officers of the Indian Medical Service will be allowed to retire on the following scale of pension, on completion of the required periods of service.

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Pension</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>£550</td>
</tr>
<tr>
<td>27</td>
<td>456</td>
</tr>
<tr>
<td>24</td>
<td>365</td>
</tr>
<tr>
<td>21</td>
<td>292</td>
</tr>
<tr>
<td>17</td>
<td>220</td>
</tr>
</tbody>
</table>

36. An Inspector General, after five years active employment in India in that grade, will be entitled to retire upon a pension of £350 per annum, in addition to that to which he may be entitled under the above scale.

37. A Deputy Inspector General will, after five years active employment in India in that grade, be entitled to retire upon a pension of £250 per annum, in addition to the pension to which he may be entitled under the above scale.

38. In each of the above cases, six months absence on medical certificate will be allowed to count towards actual service in these grades.

39. Officers now in the Indian Medical Service will, on retirement, have the option of pension according to the above rules, or according to those now in force.

40. My attention has been directed on this occasion to the rule regarding the qualification of an Assistant Surgeon for promotion to the rank of Surgeon required under Clause 3 of the Royal Warrant dated 13th January 1860. There can be no doubt that this rule, which has been again brought to notice by a recent despatch from your Government, requiring a service of two years in or with a regiment, bears very hardly on many officers, the nature of whose employment precludes their showing the required qualifications, and who on entering the service had no reason to suppose that such a regulation would be adopted.

41. These considerations have induced me to consent to exempt from the operation of the clause of the Royal Warrant all the Assistant Surgeons who entered the service prior to its date. It is to be understood, however, that the rule is to be strictly enforced in the case of all Medical Officers who entered the service after January, 1860.

42. In my despatch, No. 152, of 16th May, 1864, para. 7, I informed you that Her Majesty's Government had determined to modify the instructions given in my despatches of the 31st October, 1860, and 30th September, 1861, and to permit the period of service qualifying Surgeons for the rank of Surgeon Major, under that Warrant, to be calculated from date of first Commission, including all leave of absence of whatever kind.

43. I have now to inform you that the same principle is to be observed with respect to the grant of Honorary Rank on retirement, under Clause 14 of the Royal Warrant, and that the twenty-five years service qualifying for a step of Honorary Rank, the requirements of the clause in other respects being fulfilled, shall be inclusive of all leave of absence.

44. I have further to inform you that it has been determined, as in the case of combatant Officers of the Indian Army, to confer upon the Medical Officers of that Service Royal Commissions in substitution for those which they now hold, conferring rank in Her Majesty's service in any part of the world. The Medical Officers of Her Majesty's Indian Service will not, however, be required to serve out of India, except with their own consent.
"45. I have, lastly, to inform your Excellency that Assistant Surgeons appointed to Her Majesty's Indian Service in future will not be called upon to become subscribers to any Military or Medical Funds, and that Her Majesty's Government have determined to guarantee to prevent incumbents on and subscribers to the several Medical Funds the annuities and pensions to which they are, or to which they, their widows and children may become entitled from those funds, according to the regulations now in force, and at the present rates of subscription. But this guarantee must be regarded as conditional on the absolute transfer of the assets of the Fund to the Government, and must not be construed as conveying to any Fund, or to any member of it, benefits which are not actually provided for in the regulations as at present in force.

"46. The widows and children of Medical Officers hereafter appointed to Her Majesty's Indian Service will be granted pensions not less than those to which they would be entitled under the provisions of the Royal Warrant of June 15th 1855.

"47. The above measures, which obviously tend greatly to improve the condition and prospects of the Medical Service in India, cannot be carried out, as your Government will at once perceive, without a heavy expense to the State. It is hoped, however, that the result will be at once to diffuse a spirit of satisfaction and contentment among the officers now in the service, and to secure for the future a certain supply of Medical Officers of good social position, liberal education, and professional ability, for Her Majesty's service in India.

"I have the honour to be, Sir, your most obedient, humble servant,

"(Signed) CHARLES WOOD."

The new Warrant is published at full length in the *Lancet* of 26th Nov., 1864, pp. 617–19, and is discussed in a leading article in the same issue, p. 611, which points out the great advantages which the Warrant confers on the Service as regards the three great points of promotion, pay, and pension.

As regards promotion, the grant of the step from Assistant Surgeon to Surgeon on completion of twelve years' service gave promotion at once to no less than fifty-eight officers, nine in Bengal, twenty in Madras, and twenty-nine in Bombay, besides ensuring a steady flow of promotion for the future. The pay fixed in paras. 28 and 29 of the Warrant also gave an increase all round. In this connection a table is drawn up showing the various scales of pay, as formerly existing, as fixed in May, 1864, and as now laid down, in the latter case both employed and unemployed pay being included in the table; and it is pointed out that the new scale of unemployed pay will be a great boon to all medical officers employed on detached duty, away from their corps. Formerly the oldest Regimental medical officer, in such circumstances, drew no more than Rs.415.
The table given is as follows:

<table>
<thead>
<tr>
<th>Ranks</th>
<th>Years Service</th>
<th>Old Scale.</th>
<th>Present Scale.</th>
<th>New Scale.</th>
<th>Extra with Cavalry.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon Major</td>
<td>25</td>
<td>674</td>
<td>888</td>
<td>1000</td>
<td>90</td>
</tr>
<tr>
<td>Ditto</td>
<td>20</td>
<td>&quot;</td>
<td>852</td>
<td>..</td>
<td>..</td>
</tr>
<tr>
<td>Surgeon</td>
<td>15</td>
<td>&quot;</td>
<td>677</td>
<td>800</td>
<td>..</td>
</tr>
<tr>
<td>Ditto</td>
<td>10</td>
<td>&quot;</td>
<td>640</td>
<td>..</td>
<td>..</td>
</tr>
<tr>
<td>Assist. Surgeon</td>
<td>10</td>
<td>&quot;</td>
<td>410</td>
<td>600</td>
<td>60</td>
</tr>
<tr>
<td>Ditto</td>
<td>6</td>
<td>390</td>
<td>392</td>
<td>..</td>
<td>..</td>
</tr>
<tr>
<td>Ditto</td>
<td>5</td>
<td>&quot;</td>
<td>394</td>
<td>..</td>
<td>..</td>
</tr>
<tr>
<td>Ditto, Under 5</td>
<td></td>
<td>280</td>
<td>450</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The pensions given by the new warrant are also, it is pointed out, a considerable increase on those formerly in force, and on those granted for similar periods of service in the Royal Army. They will, however, have to be earned by actual service in India, while officers of the A.M.D. put in part of their service at home. It also appeared from the original wording of the Warrant, as if the periods of service for pension were periods of actual service in India, without allowing any deduction for furlough. This, however, was not intended; and a despatch from the Secretary of State for India, dated 24th March, 1865, and quoted in the *Lancet* for 24th June, 1865, (p. 681), lays down that—

"the aggregate period of service in India, noted in para. 35 of my despatch dated 7th November last, No. 36, is to include the periods of leave hitherto allowed to reckon under the new furlough rules as service for pensions."

The amount of leave thus allowed to reckon as service for pension was four years’ furlough in thirty years’ service.
CHAPTER XXXVIII

1865 to 1896

"One generation passeth away, and another generation cometh, but the earth abideth for ever."

_Ecclesiastes_, chap. i., verse 4.

With the numerous appointments made on 1st April, 1865, the Service entered upon what may be called the final stage in the history of the old I.M.S., with its three "Establishments," Bengal, Madras, and Bombay. This stage lasted for thirty-one years, or just about a generation; and came to an end when the last appointments were made, on 29th July, 1896, to these three establishments, the place of which was taken, from 28th Jan., 1897, by the new combined or general Service.

This stage saw many changes of importance, the abolition in 1873 of the rank of Assistant Surgeon, and the alteration at the same time of the administrative titles from I.G. and D.I.G. to S.G. and D.S.G.; the abolition, in 1880, of the rank of Lieutenant for junior Surgeons; the introduction in the same year of closer relations between the A.M.D. and the military branch of the I.M.S., with a practical amalgamation in the administrative grades; the grant of military command in hospitals in 1889; and the introduction in 1891 of the compound titles, including that of Surgeon Lieutenant. The grant of military titles, in 1898, falls in date under the next chapter, though, of course, the great majority of those on whom those titles were conferred belonged to the old Service.

In 1867 the appointments of Presidency Surgeon were abolished, by G.G.O. No. 370 of 4th April, 1867, with effect from the date when they should be vacated by the officers then holding them. There were three Presidency Surgeons in Calcutta. The officers who held equivalent posts in Madras and Bombay were known as District Surgeons; there were four in Madras and three in Bombay. The men holding certain medical appointments,
chiefly Professorships, in the three Presidency towns, still carry on the duties formerly performed by the Presidency Surgeons, and are still sometimes called by that name. But they all carry on these duties in addition to those of their regular appointments, whereas, prior to 1867, the Presidency Surgeons were appointed for these duties, attendance on official patients, only. The pay of the Presidency Surgeons was not large, but they usually held other minor appointments, with attached allowances, in addition to their Surgeoncies; and, their official duties being light, they were able to find time for large private practices.

In 1868–69 the executive charge of district jails was made over to Civil Surgeons, who had, of course, performed the medical duties ever since jails were first established. This charge was first given in Bengal, by Bengal Govt. Resolution of 24th Nov., 1868, republished in I.M.D. Circ. No. 75 of 8th Dec., 1868. With the appointment of the Civil Surgeon as Supt. as well as Medical Officer of the district jail, a frequent source of friction was removed, and a marked improvement in administration effected.

In 1868 also new furlough rules were introduced. Twice again during the period covered by this chapter, in 1875 and in 1886, were new and improved furlough rules brought in. These have all been fully considered in Chap. XIX, *Furlough and Leave.*

In 1869, G.O.G.G. No. 392 of 2nd April, ordered that no extension of service should be granted to any medical officer, under the rank of D.I.G., after he had attained the age of 58. The Company's medical officers, as a matter of course, all got an extension of service from the age of fifty-five to that of fifty-eight, if they wished for it, and were physically fit. After they had died out, extensions after the age of fifty-five were very sparingly granted, and only in cases where the services of individuals were specially required, not more than some four cases in all,* until by para. 12 of the Royal Warrant of 13th March, 1908, Lieut.-Colonels on the selected list, who attained the age of fifty-five before they had completed thirty years' service for pension, were allowed, if physically fit, extensions of service to complete thirty

* Sir George King, (B. 1865), 12th April, 1895 to 28th February, 1898; F. A. Smyth., (B. 1869), 27th July, 1897, to 27th July, 1898; J. Young, (B. 1872), 5th August, 1900, to 31st March, 1902; J. Duke, (B. 1872), 14th June, 1902, to 31st October, 1902.
years, and so earn the full pension. This concession has been withdrawn, being no longer necessary, as regards all future entries, after the grant of pensions, graduated by yearly increases, in June, 1911.

In 1870 admission to the Service was again closed for two years, no new commissions being granted between 1st April, 1870, and 30th March, 1872. On the reopening of the Service to competition, a large number of vacancies were filled up, no less than forty successful candidates receiving commissions, twenty-eight in Bengal and twelve in Madras. Bombay got none. The list was headed by Alexander Crombie, an officer of the highest professional merit and distinction, who had previously served in the A.M.D., and who, after holding for some ten years the post of Civil Surgeon of Dakka, and for ten years more that of Surgeon Supt. of the Presidency European General Hospital in Calcutta, retired from the Service on 7th April, 1898, before his turn for promotion had come. He died in London on 29th Sept., 1906, having, since his retirement, filled the posts of Lecturer on Tropical Diseases at Middlesex Hospital, and member of the Medical Board of the India Office from 1900 to 1902, and having received the C.B. on 22nd August, 1902. An analysis of the careers of the men of this batch is made in some remarks on longevity, in Chap. XL, General Remarks.

By the Royal Warrant of 10th May, 1873, the rank of Assistant Surgeon was abolished, though Surgeons still retained the relative rank of Lieutenant for their first six years' service; the rank of Surgeon Major was given at twelve years' service; and the titles of S.G. and D.S.G. substituted for those of I.G. and D.I.G. This warrant was published in India as G.O.G.G. No. 673 of 1st July, 1873, and in the I.M.D. Circs. for that year. It is given in full below. A similar warrant for the A.M.D. had been published on 1st March, 1873.

G.O.G.G. No. 673 of 1st July, 1873.—" In pursuance of G.G.O. No. 671 of this date, the Governor General in Council is pleased to direct the publication, for general information, of the Royal Warrant, dated the 10th May, 1873, regulating the promotion, relative rank, &c., of the Indian Medical Service.

"'Victoria R.

"Whereas We have been pleased to approve of the reorganisation of Our Indian Medical Service, Our will and pleasure is that Our Warrant of 13th January 1860 be cancelled, and that from and after the date of this
warrant, the following rules shall be established for the future promotion and relative rank and allowances of the medical Officers of our Indian Military Forces, and that by these rules Our Viceroy and Governor General in Council, and the Governors in Council of Madras and Bombay respectively, shall be governed:—

"1. The grades of medical officers in our Indian Military Forces shall be four in number, viz.:—

2. Deputy Surgeon General.
4. Surgeon.

"2. A Surgeon shall be promoted to Surgeon Major on completion of twelve years' service from date of first Commission, subject to his passing such examination as our Principal Secretary of State for India in Council may require.

"3. In cases, however, of emergency, or when the good of the Service renders such alteration desirable, it shall be competent for the Secretary of State for India, on the recommendation of Our Viceroy and Governor General of India in Council, to shorten the period of service above mentioned, in such manner as he shall deem fit and expedient.

"4. All promotion from the rank of Surgeon Major to that of Deputy Surgeon General, and from the rank of Deputy Surgeon General to that of Surgeon General shall be given by selection for ability and merit; and the grounds of such selection shall be stated to us in writing, and recorded in the office of the Secretary of State for India in Council.

"5. With a view to maintain the efficiency of the service, all medical officers of the rank of Surgeon Major shall be placed on the retired list when they shall have attained the age of 55 years, and all Surgeons General and Deputy Surgeons General when they shall have attained the age of 65 years; but as respects Surgeons Major, who entered the service prior to the 13th January 1860, this rule shall be relaxed, and an officer who has attained the age of 55 years without having obtained the rank of Deputy Surgeon General shall be permitted to remain in the Service for three years more, on his perfect competency and fitness being certified in such manner as Our Secretary of State for India may direct. In any special case where it would appear to be for the good of Our Service that the officer should continue in employment, he may be so continued, subject in each case to the sanction of Our Secretary of State for India in Council.

"6. The relative rank of the medical officers of Our Indian Military Forces shall be as follows:—

"Surgeon as a Lieutenant, according to the date of his Commission; and after six years' service as Captain, according to the date of the completion of such service.

"Surgeon Major as Major, according to the date of his commission; and after 20 years' service as Surgeon and Surgeon Major, as Lieutenant Colonel, but junior of that rank except for choice of quarters.

"Deputy Surgeon General as Lieutenant Colonel, according to the date of his commission; and after five years' service as Deputy Surgeon General, as Colonel, according to the date of the completion of such service.

"Surgeon General as Brigadier General, according to the date of his commission; if with an army in the field, or after three years' service as
Surgeon General, as a Major General from the date of his joining such army in the field, or according to the date of the completion of such service.

7. Such relative rank shall carry with it all precedence and advantages attaching to the rank with which it corresponds (except as regards the presidency of courts martial, where Our will and pleasure is, that the senior combatant officer be always president), and shall regulate the choice of quarters and the rates of prizemoney.

8. Medical officers shall be entitled to all the allowances granted to our Indian Military Forces on account of wounds and injuries received in action as combatant officers holding the same relative ranks.

9. Their families shall in like manner be entitled to all the allowances granted, under existing regulations, to the families of combatant officers holding the same relative ranks.

10. A medical officer, retiring after a service of 25 years and upwards, may, if recommended for the same by the Government of his Presidency, receive a step of honorary rank, but without any consequent increase of pay.

11. Six of the most meritorious medical officers of the service shall be named Our Honorary Physicians, and six Our Honorary Surgeons.

'Given at Our Court at Windsor, the 10th day of May 1873, in the Thirty Sixth year of Our Reign.'"

G.O.G.G. No. 674 of 1st July, 1873.—"In accordance with paragraph 1 of the Royal Warrant, published in the foregoing General Order (No. 673, dated 1st July 1873), officers of the Indian Medical Service will from this date bear the following designations:—

"Inspectors General and Deputy Inspectors General of Hospitals will be styled Surgeons General and Deputy Surgeons General respectively. All Surgeons will be styled Surgeons Major, and all Assistant Surgeons, Surgeons, respectively.

"Future appointments and promotions in the Indian Medical Department will be made in accordance with the above designations."

G.G.O. No. 671 of 1st July, 1873, above-mentioned, intimates the receipt of the Royal Warrant of 10th May, 1873, and states (clause 3)—

"3. The rates of pay and allowances drawn in India by officers of the two services respectively are not in any way affected by these warrants."

The rank of Major General was given to Surgeon Generals, from the date of their appointment, by the Royal Warrant of 14th Sept., 1876, published in India as G.O.G.G. No. 1117 of 1st Nov., 1876, and republished in I.M.D. Cirs. for that year.

From 1st April, 1879, Civil A.M.O.'s, D.S.G.'s with the local rank and title of S.G., were appointed for Bengal, the N.W.P. (now the U.P.), and the Panjab; and the civil duties, chiefly inspection, of the military D.S.G.'s in those provinces came to an end.
In 1879–80 the question of the amalgamation of the I.M.S. with the A.M.D. was again the subject of long and deliberate consideration. The *Lancet* of 22nd Oct., 1881, republished from the *Bombay Gazette* a précis of a despatch sent home by the Indian Government, regarding this proposed amalgamation.

"(1). The whole of the I.M.S. to be united with the A.M.D. into one Imperial Service, to be styled the Royal Medical Service.

"(2). Officers of the present Indian Service to be eligible for service everywhere, but not out of India except at their own request.

"(3). All new appointments to be made to the Royal Service, so as to maintain the whole Medical Service at its full strength.

"(4). Officers to be eligible for civil situations, but to return to military employment, as a rule, after five years in Civil employ.

"(5). One staff to be formed for the medical duties of all India, to be composed of officers of both Services, and to be equal in strength to the present Indian Medical Staff.

"(6). All medical officers of the Indian Service to have the option of Indian or British retiring allowances, but this in no way to interfere with the claim to retiring allowances from the medical funds."

After the consideration of the subject had been concluded, and some of the proposed changes had been made, papers on the subject were printed by order of the House of Commons. These papers and proposals were discussed in an Editorial article in the *Lancet* of 7th March, 1885, (pages 444, 445), which runs as follows:—

"In the papers on the subject of Indian Army Reorganisation, printed by order of the House of Commons, there is an interesting document on the Medical Service in India. The Reorganisation Commission pointed out the importance of abolishing the costly system of maintaining a double staff, and submitted their views of the mode in which this change should be effected. The Government of India were fully impressed with the necessity for a radical reform of the Medical Service, and were satisfied 'that the needful improvement, both economical and administrative, is to be found only in some measure of unification.' They were not, however, satisfied with the scheme proposed by the Commission, and invited the two heads of the Medical Service in India, Dr. Crawford, Surgeon General, Her Majesty's Forces (now Director General of the Army Medical Department), and Dr. Cuninghain, Surgeon General with the Government of India, to prepare a memorandum on the subject, based upon two conditions, which were deemed essential. 'First, that there should be only one Medical Service for India; and, secondly, that complete authority over the Medical Service serving in India, as to employment, distribution, and remuneration, shall rest with the Government of India.' A joint memorandum, prepared by these two officers, and dated Simla, 12th August, 1881, was submitted to the Government, and considered by them 'to satisfy all the essential conditions of the case, and to provide a
satisfactory solution of the difficulty.' It is a document of some length, and bears evidence of careful consideration, having regard to efficient and economical administration, and to respect for the rights and privileges of the existing forces. The memorandum recommends that there should be but one Medical Department, to be styled the Royal Medical Service, and to be divided into two branches, one for general and the other for Indian service, but that in any national emergency the Indian branch should be available, with the sanction of the Indian Government, for service in any part of Her Majesty's dominions; and the general branch, with the sanction of the Home Government, for service in India. It proposed that the Indian branch should be recruited by volunteers from the general list of officers under three years' service, that they should form one service for all India, primarily military, but also civil; the first two years to be spent in strictly military duty; after that period officers to be eligible for civil employ if they have passed the language test, but liable at all times to be recalled for military service if wanted. After ten years continuous civil service, if they do not return to military duty, they must look for promotion to the administrative grade in the civil branch only. It is recommended that exchanges should be freely allowed between the general and the Indian branches, but no Brigade Surgeon of the Indian branch to be eligible for promotion to Deputy Surgeon General of that branch unless he has had five years' Indian service above the rank of Surgeon, and no Deputy Surgeon General to be allowed to exchange into the Indian branch who has not had this qualifying service. Transfer also should be permitted from one branch to the other, when required in the interests of the service, and subject to the concurrent approval of both Secretaries of State. The memorandum proposes one administrative head, with the Government of India, for the whole Indian Medical Service, with a special rate of pay, who should recommend for all departmental promotions, and distribute officers to the several sections requiring them, civil, military, and sanitary; transferring medical officers from military to civil service and vice versa, as may be necessary, but not interfering with the employment of any officer after being so posted, which would rest with the Administrative Medical Officer immediately concerned. The Indian Director General ' would communicate with the Director General of the Royal Medical Service in all matters regarding recruiting, exchanges and transfers, and would report all casualties by death, retirement, etc.; he would also, as Sanitary Commissioner, prepare, as at present, an annual Sanitary Report for the whole of India.' Under the Director General there would be a Surgeon General for the Army, on the Staff of the Commander-in-Chief, charged with the medical administration, and having the control of the medical staff of the forces, and provided with the necessary administrative staff. The Civil medical administration would continue much as at present, but without the local rank of Surgeon General, the chief in each Local Government and Administration being designated simply as ' Principal Medical Officer.' Such are the most important of the recommendations for the reorganisation of the Royal Medical Service. For the subordinate Civil Service, it is proposed to constitute an ' Indian Medical Service ' consisting of two classes,—Assistant Surgeons and Civil Medical Officers, recruited from natives of India who are licentiates or graduates of medicine of an Indian College, the admission to be by competitive examination, and the promotion by seniority on passing an
examination test, but with power to promote specially Assistant Surgeons who have distinguished themselves, or for the Governor General to appoint direct to the higher grade should he think fit. The officers of this branch of the service to be liable to be called upon, on emergency, to perform work in military hospitals within their own province, or with troops of their own province serving elsewhere.

"The reporters have fully considered and reported the mode in which this proposed system may be carried out with greatest advantage to the service and without inflicting any injustice upon the officers now serving, but it does not appear necessary here to enter upon such details. They also have discussed the question of pay and allowances, and recommended the abolition of the distinction of unemployed pay,—a recommendation which has already been acted upon. We are glad to find also that they call attention to the injustice so frequently inflicted on officers who are required to pay their own expenses on being removed to a new charge. "An officer so moved from a doing-duty, or a so-called "unemployed" position to an officiating medical charge, which may not bring him more than one hundred rupees a month, but who, in consequence of the increased rate of pay he will draw, is obliged to join at his own expense, is frequently involved in expenses which months of such allowances will not cover.' We trust that this regulation, against which we have so frequently protested, will soon be abolished, and one of the causes of justifiable discontent on the part of the Indian medical officers be thus removed. They also recommend a revision of the regulations by which charge pay is drawn by officers going on furlough or accepting Civil appointments, while the officer who actually discharges the duty receives only a modified allowance; the rule adopted in the Army Medical Staff should be followed, that charge money be drawn by the officer on whom the duty and responsibility devolve.

"A letter from the Under Secretary of State for War reviews these recommendations, and states that Mr. Childers, who was then Secretary of State, did not concur in the views of the reporters. The principal grounds of dissent were that he thought the proposed change would have the effect of diminishing the supply of candidates, as 'the attraction of Indian service as an inducement held before the whole body of candidates would be seriously diminished'; that the least eligible of the candidates would be left for the British branch of the service; that both India and Great Britain would be losers in the matter of varied experience on the part of medical officers; and that the proposed scheme would be more expensive to India than a simple unification. Mr. Childers approved, however, of the proposal for the amalgamation of the two services, and suggested that, as the number of appointments to be supplied by the Army Medical Department would be increased, the term of five years for service in India should be raised to seven, and that an officer selected for a civil appointment should be allowed to volunteer for another term of seven years.

"We have endeavoured to summarize as briefly as possible the recommendations contained in the memorandum. It gives the carefully considered opinions of two officers of long and varied service, representing the two branches of the existing Medical Service. The dual service in India has already been considerably modified, and it appears desirable in the interests alike of the public and of the officers of the Medical Service,
that still further improvements should be introduced. The form which
these should take is clearly laid down in the memorandum now published,
as well as the objections to it from a War Office point of view. It is
obvious that the present system of two distinct and independent services
working together in India is open to very serious objection, and that
measures must be adopted to remedy the inconvenience and reduce the
expense arising from such an arrangement. The principles laid down by
Dr Crawford and Dr Cuningham appear well calculated to effect these
objects, and at the same time to preserve intact the rights of officers in
accordance with the conditions of the warrants under which they joined
the service. Whatever form of departmental organisation may be adopted,
we trust the Government will give due effect to the recommendations
bearing upon the existing system of charge pay and of travelling
expenses."

These proposals for amalgamation were found unsatisfactory
on both sides, on the British, because it was feared that the
superior attractions of Indian service would draw off most of
the best men, from that of India, because they prevented the
admission of Indians to the superior Medical Service.

The changes actually carried out fell far short of these pro-
posals. They amounted practically to a partial amalgamation
of the military medical administration of the two Services. They
are detailed in G.G.O. No. 13 of 2nd Jan., 1880, republished in
I.M.D. Circs. for that year, pages 1 to 4.

"Changes in the organisation of the Medical Administrative Staff of the
Army in India.
"G.G.O. No. 13, dated 2nd Jan., 1880.
"Under instructions from the Secretary of State for India, the Right
Hon'ble the Governor General in Council is pleased to direct the following
changes in the organisation of the Medical Administrative Staff for the
Army in India.

"From the 31st March, 1880, the British Army Medical Department
and the Indian Medical Department will form one department for the
medical administration of the Army in the three presidencies.

"2. The establishment for the Bengal Army will consist of—

1 Surgeon General, A.M.D.
1 Secretary to Surgeon General, A.M.D. 1 Secretary to Surgeon General, I.M.D.

a. The statistical duties for the Army, British and Native, will be
performed by the Statistical Officer attached to the Sanitary
Commissioner with the Government of India.

b. The eleven circles of medical superintendence will be dis-
tributed as follows, each being held by a Deputy Surgeon
General:

—
3. For the Madras Army—
   1 Surgeon General, A.M.D.  
   1 Secretary to the Surgeon General, I.M.D.  
   at Headquarters.

a. The six circles of medical superintendence will be distributed as follows, each being held by a Deputy Surgeon General.

   A.M.D.  I.M.D.

   1. {Centre District  }   . . . .  I  -
   2. {Northern District }   . . . .  -  1
   3. {Southern District }   . . . .  -  1
   4. {Malabar and Canara District}   . . . .  -  1
   5. {Mysore Division }   . . . .  -  1
   6. {Ceded Districts}   . . . .  -  1
   7. {Hyderabad Subsidiary Force}   . . . .  -  1
   8. {Hyderabad Contingent}   . . . .  -  1
   9. {Nagpore Force}   . . . .  -  1
   10. {Central India Regiments}   . . . .  -  1
   11. British Burma Division . . . .  -  1

4. For the Bombay Army—
   1 Surgeon General, A.M.D.  
   1 Secretary to Surgeon General, I.M.D.  
   at Headquarters.

a. The four circles of medical superintendence will be distributed as follows, each being held by a Deputy Surgeon General.

   A.M.D.  I.M.D.

   1. Presidency District  
   2. Belgaum  
   3. Aden  
   4. Poona Division  
   5. Northern Division  
   6. Mhow Division  
   7. Sind District . . . .  I
5. With the exceptions which are named below, all these officers will be relieved from any civil administrative duties they may have hitherto performed.

6. The Deputy Surgeons General of the Eastern Frontier District and of the British Burma Division will, in addition to their military duties, exercise the civil medical administration of their respective provinces, and will also perform the duties of Sanitary Commissioner in them.

7. The Deputy Surgeons General of the Panjab Frontier Force and of the Sind District will exercise the civil medical administration of these provinces.

8. After making provision for the civil medical administration of the remaining provinces of British India, the establishment for which will be duly notified in the proper department, there will remain, below the rank of Surgeon General, in excess of the establishment to be maintained for all duties—

Army Medical Department.

2 Deputy Surgeons General.
3 Superintending Surgeons Major.
2 Secretaries to Surgeons General.
1 Statistical Officer to Surgeon General.

Indian Medical Department.

6 Deputy Surgeons General.

9. Orders have already been issued by Her Majesty's Government for the withdrawal of the surplus administrative officers of the Army Medical Department.

10. With a view to provide for the retirement, on favourable terms, of the surplus officers of the Indian Medical Service, the Right Hon'ble the Governor General in Council is pleased to offer to the Surgeons General and Deputy Surgeons General of the three armies, their retirement on the extra pension of their grade with an honorary step in rank, notwithstanding that they may not have completed the qualifying service or these pensions.

11. The number of retirements in each army will be restricted to two.

12. The option of retirement will be given in order of seniority, but applications to retire, which must be made to the Military Department of the Government to which the officer belongs, cannot be accepted after the 31st March, 1880."

Clause II of I.A.C. for Jan., 1880, reprinted in I.M.D. Circes. for that year, page 7, states—

"Instructions. With reference to the foregoing (G.G.O. No. 13 dated 2nd January 1880), it is to be understood that, though the Surgeons General of the three armies will ordinarily be taken from the British Medical Department, the Government of India reserve the power of appointing specially qualified Officers of either Service to any of those positions."

As a matter of fact, during the fifteen years the above scheme of medical administration was in force, no officer of the I.M.S. ever was appointed to one of these posts of Surgeon General.
In 1905, by Indian Army Order No. 492 of that year, this administrative amalgamation was carried a step farther; circles of superintendence were no longer reserved, some for the A.M.D. and some for the I.M.S., but officers of both Services were made equally eligible, in equal numbers, for all these appointments. These orders are given in the next chapter, *The New Combined or General Service*.

After the issue of the above orders, G.G.O. No. 13 of 2nd Jan., 1880, the Civil Administrative Medical appointments throughout India were also reorganised, by Govt. of India, Home Dept. Not. No. 150 of 15th March, 1880, republished in *I.M.D. Circes* for that year, pages 10 to 13. These orders are as follows:

"*Changes in the Administrative Staff of the Indian Medical Department in the several provinces of India.*

*Home Dept. Notification No. 150, dated 15 March 1880.*

1. In continuation of General Order No. 13, dated Jan. 2nd, 1880, in the Military Department, and subject to such modifications as may hereafter be deemed necessary, the Governor General in Council is pleased, with the sanction of Her Majesty's Secretary of State, to issue the following orders regarding the Administrative Staff of the Indian Medical Department in the several provinces of India.

2. From the 31st March, 1880, the following administrative appointments will be made:

<table>
<thead>
<tr>
<th>Position</th>
<th>Monthly Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Surgeon General with the Government of India</td>
<td>2700</td>
</tr>
<tr>
<td>One Deputy Surgeon General, with local rank of Surgeon General, for Civil Medical Administration in Bengal</td>
<td>2250</td>
</tr>
<tr>
<td>One Deputy Surgeon General, with local rank of Surgeon General, in the North Western Provinces and Oudh</td>
<td>2250</td>
</tr>
<tr>
<td>One Deputy Surgeon General, with local rank of Surgeon General, in the Panjab</td>
<td>1800</td>
</tr>
<tr>
<td>One Deputy Surgeon General for Civil Medical Administration in the Central Provinces</td>
<td>1800</td>
</tr>
<tr>
<td>One Surgeon General for Civil Medical Administration in Madras</td>
<td>2500</td>
</tr>
<tr>
<td>One Secretary to the Surgeon General, Madras, (consolidated)</td>
<td>800</td>
</tr>
<tr>
<td>One Surgeon General for Civil Medical Administration in Bombay</td>
<td>2500</td>
</tr>
<tr>
<td>One Secretary to the Surgeon General, Bombay, (consolidated)</td>
<td>800</td>
</tr>
</tbody>
</table>

3. The Surgeons General with the Government of India and with the Governments of Madras and Bombay will, in addition to performing Civil Administrative duties, be heads of the Indian Medical Departments in their respective Presidencies. It will be their duty, among other matters, to propose transfers between the Military and Civil Departments; to
recommend for promotion to the Administrative Grades, and to advise the Government on all questions relating to the admission of officers and subordinates to the Indian Service, to the conduct and services of Indian Medical officers of all grades, and to the supply of medicines and hospital stores. The Surgeon General with the Government of India will be entitled to receive any information he desires from the Surgeons General and Deputy Surgeons General attached to the Local Governments and Administrations, but he will exercise no direct authority over them. These officers will be solely under the orders of the Local Government or Administration to which each belongs.

"4. Officers will be selected for the above-named administrative offices by the Government of India for the Bengal Presidency and by the Governments of Madras and Bombay for their Presidencies respectively. Selections will be made in each Presidency from the whole Indian Medical Service of that Presidency; and the principles of selection hitherto followed in making such appointments, will be observed. Surgeons General and all Deputy Surgeons General, including those who may have the local rank of Surgeon General, will count their five years term of office from the date of their first entering on the duties of their rank, whether in the Military or Civil branch of the service.

"5. The Deputy Surgeon General for the Central Provinces will also be Sanitary Commissioner for those Provinces. As already notified in the Military Department Order above quoted 'the Deputy Surgeons General of the Eastern Frontier District and of the British Burma Division will, in addition to their military duties, exercise the Civil Medical Administration of their respective Provinces, and will also perform the duties of Sanitary Commissioners in them.' The Deputy Surgeons General of the Panjab Frontier Force, and of the Sind District, will also exercise the Civil Medical administration of those Circles. In respect of these Civil duties they will be subject to the orders of the provincial Surgeon General.

"6. In all Provinces for which a separate Sanitary Commissioner is sanctioned the Sanitary Department will remain distinct from, and not subordinate to, the Medical Department. The Sanitary Commissioner of Madras and of Bombay will, in future, have the rank and privileges of a Deputy Surgeon General, as soon as he attains twenty-six years service, or as soon as any officer below him on the list is promoted to the administrative grade; and, subject to the same conditions and limitations, the Sanitary Commissioner of Bengal, the North West Provinces, and the Panjab, will have the rank, pay, and privileges of a Deputy Surgeon General. This rule will apply to officers now holding the appointment of Sanitary Commissioner in these Provinces. The five years tenure of office by a Sanitary Commissioner in each province will reckon from the date of his attaining the rank and privileges of a Deputy Surgeon General. In the appointment of officers to be Sanitary Commissioners the same principles and procedure will be adopted as in the promotion to Deputy Surgeon General in the Military and Civil Administration; but in the selection for such posts knowledge and experience as a Sanitary Officer will be specially considered.

"7. The supervision of the Vaccination Department will form an important part of the duties of the Sanitary Commissioner in each province.

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The separate appointment of Superintendent General of Vaccination, where it still exists, will be abolished, and this officer as well as the Superintendents of Vaccination will become a Deputy Sanitary Commissioner, under the orders of the Sanitary Commissioner, who will utilize not only them, but also the whole vaccination staff and the Civil Surgeons as far as possible in Sanitary work.

"8. Although the administration of the Indian Medical Department is divided into two branches,—Civil and Military,—Indian Medical Officers will remain as now, Military Officers, those in Civil employ being only lent to the Civil Department, and liable to be called on for military duty in the event of their services being required.

"9. Officers holding appointments which are abolished under these orders—viz. the Superintendent General of Vaccination, Panjab, and the Sanitary Commissioners for the Central Provinces and British Burma—will receive a personal allowance, making the emoluments of their future offices equal to the pay they now draw."

By Govt. of India, Home Dept., Medical, Order No. 7–336–42, of 30th July, 1880, republished in *I.M.D. Circs.* for that year, page 27, it was laid down that certain minor Administrative Medical appointments should be filled as follows:—

Central India; by the Residency Surgeon, Indore.

Andamans; by the Senior Medical Officer, who should be inspected by the D.S.G., Burma Division, but otherwise independent.

Berar; by the Sanitary Commissioner, Berar.

Rajputana; by the Supt. General of Vaccination and Dispensaries, Rajputana.

This last appointment was abolished by Govt. of India, Foreign Dept., Order No. 699 G. of 25th April, 1895, published in *I.M.D. Circs.* for 1895, page 17, and the duties imposed as an extra charge on the senior Residency Surgeon, who was given an allowance of Rs.300 a month for doing them. The appointment, however, was revived in 1901, and again abolished in 1913, the duties being handed over to the Civil Surgeon, Ajmir, with an allowance of Rs.250 a month.

In the *Proceedings* of the Govt. of India, Mily. Dept., No. 2106 S.C. of 19th Oct., 1880, republished in *I.M.D. Circs.* for that year, pages 49 to 52, were laid down rules for the relations of officers of the I.M.S. to the S.G. with the Government of India, the head of the I.M.S., and the S.G., Her Majesty’s Forces, the Head of the A.M.D. in India, respectively.
"Relation of officers of the Indian Medical Service to the Surgeon General with the Government of India and the Surgeon General, Her Majesty's Forces.

Extract from the proceedings of the Govt. of India, Mily. Dept., No. 2106 S.C., dated Simla, 19th Oct. 1880.

It being desirable that the relative authority of the Surgeon General with the Government of India and the Surgeon General, Her Majesty's Forces, over the officers of the Indian Medical Service shall be defined, the Government of India direct—

1. That surgeons of the Indian Medical Service appointed to Bengal, on arrival at Bombay, shall in accordance with the 'instructions' (copy of which will then be furnished to them) send their letters of appointment to the office of the Surgeon General with the Government of India, by whom they will be at once forwarded to the Military Department. Thereon the officers will be gazetted as having come on a given date on the Bengal Establishment, and will be formally placed at the disposal of the Commander-in-Chief in India for military duty. Meanwhile, and in anticipation of this formal notification, the officers, in the absence of any order to the contrary, will proceed at once to Allahabad, and on arrival there, will report themselves to the Deputy Surgeon General of that Circle for military duty.

2. Thenceforward, and until the officer may be withdrawn for other employment, he will be under the authority of the Surgeon General, Her Majesty's Forces, from whom he will receive all orders of His Excellency the Commander-in-Chief in India for his employment, postings, transfers, &c.

The withdrawal of an officer for Civil employment will not be permitted until he has completed two years actual military duty, and then only provided his services can be spared. Should the interests of the public service, however, very urgently demand his withdrawal before the completion of his two years course of military duty, an exception may, under the orders of the Governor General in Council, be made, as a very rare and special case, in the above general rule.

2. All officers of the Indian Medical Service are, subject to the above restriction, eligible for civil duties; yet, however employed, they remain liable at any time to be recalled for military duty. Such recall can only be made by the Government of India in the Military Department. During the whole period of an officer's employment on any other than military duty under the Commander-in-Chief, and until he is formally replaced at His Excellency's disposal, he will be under the authority of the Surgeon General with the Government of India or of the Local Government under which he may be serving.

3. A minimum establishment for the requirements of the army and for all other sanctioned appointments will always be maintained. This will include the prescribed margin for absentees on furlough or sick leave. Lists of the appointments controlled by the two Surgeon Generals are annexed; but it will be considered that the army has the first claim on the medical service, and that any officer whose services are required with the army may be placed at the disposal of the Commander-in-Chief.

*Footnote in original.—"Instructions referred to in paragraph 1. Para. 11, Surgeons are allowed to count their service for furlough and pension, as well as to draw Indian pay and allowances, from date of arrival in India. The period of service at the Army Medical School at Netley will reckon as service for the full pay pension only."
4. All applications for medical officers required for Civil employment should be addressed by Local Governments to the Government of India in the Home Department.

5. As the Surgeon General with the Government of India is the actual administrative head of the Indian Medical Service, and should, therefore, have the means of keeping an accurate record of the services of all officers belonging to it, such returns and reports, including confidential reports, furlough statements, &c., as are considered necessary for this purpose by the Military Department will, as regards officers under the orders of the Commander-in-Chief, be furnished to the Head of the Department by the Surgeon General Her Majesty’s Forces.

Applications for furlough of officers under the Commander-in-Chief will be forwarded by the Surgeon General, Her Majesty’s Forces, through the Surgeon General with the Government of India, so that all such applications may be dealt with for the Service as a whole; and all such officers while on furlough or leave will remain on the list of the Surgeon General Her Majesty’s Forces.

Appendix—
List of appointments referred to in paragraph 3.

Under Surgeon General with the Government of India:
- All Medical Officers in civil employ;
- Surgeon to His Excellency the Viceroy;
- Principal Medical Storekeeper;
- Medical Storekeepers;
- Medical officer, Lawrence Military Asylum, Sanawar.

Under Surgeon General, Her Majesty’s Forces:
- Deputy Surgeons General in military employ...5
- Secretary to Surgeon General...1
- Surgeon to His Excellency the Commander-in-Chief...1
- Garrison Surgeons...3
- Sappers and Miners...1
- Nineteen Bengal Cavalry Regiments...19
- Forty-five Native Infantry Regiments...45
- Four Gurkha Regiments...4
- Panjib Frontier Force, 17 (viz. 5 Cavalry; Guides 1; Sikhs 4; 6 Infantry, Panjib Infantry 5, Gurkhas 1) ...17
- Doaba Outposts...1
- Central India Horse (a)...2
- Malwa Bhil Corps (a)...1
- Bhopal Battalion (a)...1
- Deoli Irregular Force (b)...1
- Erinpura Irregular Force (b)...1
- Meywar Bhil Corps (b)...1
- Mhairwara Battalion (b, c)...1

(a). Civil Corps, Administered by Deputy Surgeon General, Kampti Circle of Madras Presidency.

(b). Civil Corps—Will be administered by the Superintendent General of Dispensaries, Rajputana.

(c). Under medical charge of the Civil Surgeon, Ajmere."
The changes made by the orders of 13th Jan., 1880, were very unpopular in the Service, which lost six military administrative appointments. Now, when more than thirty years have elapsed, looking back on these changes, we may admit that the I.M.S., as a whole, gained rather than lost. While six administrative posts, as Military D.S.G.'s, had been abolished, three new civil administrative appointments of the same rank had been made just before, and five appointments as Sanitary Commissioner were now made to carry administrative rank, from the date when their holders completed twenty-six years' service. But that individuals suffered severely from these changes is certain. To many of the senior Brigade Surgeons in military employment, who, by the abolition of the six posts of D.S.G., lost all chance of attaining to administrative rank, which they might otherwise reasonably have expected, it was small consolation that their juniors in the Sanitary Department got that rank, with its advantages in the way of higher pay and pension, and went over their heads, at a period much earlier than they could have expected such promotion, if they had been serving in the regular line. Indeed, so unpopular was the change, that it lasted for only six years. In 1886 the orders by which the Sanitary Commissionerships carried the rank of D.S.G. were cancelled, and the "extra compensation pensions" given instead. The grant of these extra pensions, which again are only available to officers who entered the Service before the end of 1889, might be considered a fair compensation to the Service as a whole for the lost administrative appointments. But this grant was made too late to compensate the chief sufferers by the change, who had all retired uncompensated some years before.*

For some years prior to 1879 recruiting for the A.M.D. had been difficult, and the supply of candidates had almost ceased. On 27th Nov., 1879, a new Royal Warrant for the A.M.D. was issued, giving improved terms, which brought forward a plentiful supply of applicants for admission to the Department. These improved terms were extended to the I.M.S. by a Royal Warrant dated 16th Nov., 1880, issued in India as G.G.O. No. 13 of 7th Jan., 1881, and republished on page 2 of I.M.D. Circs. for that year. Under this Warrant the examination for promotion was

* See also Chap. XVII, Rank, and Chap. XX, Pensions, Vol. I, pp. 348–9; 450–1.
abolished by omission, (clause 4), the rank of Brigade Surgeon was introduced, with effect from 27th Nov., 1879, the date on which this new rank had been given to the A.M.D.; and the rank of Captain was bestowed on newly appointed Surgeons from date of commission. This last change was found to be a mistake, and was very unpopular with the Army in general. Senior subalterns, of six to twelve years' service, many of whom had seen much active service, were naturally aggrieved at finding newly joined medical officers made their seniors in rank. Ten years later, the rank of Lieutenant was again introduced, both in the A.M.D. and in the I.M.S., for medical officers under three years' service. What would probably have been the fairest treatment, as regards rank, to all concerned, would have been to have given to medical officers, who usually enter the Army from four to eight years older than subalterns, the rank of Lieutenant on first joining, but with five or six years' seniority in that rank, and to have assimilated their future promotion to that of the Indian Staff Corps, giving each step at the same length of service as in the Staff Corps, with the advantage to the Medical Department of the extra years of service, as suggested, on entry.

The Royal Warrant of 16th Nov., 1880, is given below, with G.G.O.'s No. 375 and 376 of 8th July, 1881, republishing the short Royal Warrant of 20th May, 1881, on the precedence of Brigade Surgeons; and the Royal Warrant of 6th July, 1881, published as G.G.O. No. 459 of 19th Aug., 1881, giving the rank of Lieutenant to the Surgeons on probation at the Army Medical School. These Warrants are also republished in *I.M.D. Circs.* for 1881, pages 36, 37, and 44.

"G.G.O. No. 13, dated 7th January, 1881.

"His Excellency the Governor General in Council is pleased to direct the publication of the following Warrant, dated the 16th November, 1880, regulating the promotions, relative rank, &c., of the Indian Medical Service:—

"'Victoria, by the Grace of God of the United Kingdom of Great Britain and Ireland, Queen, Defender of the Faith, Empress of India.

"'Whereas We deem it expedient to revise the rules for the promotion and relative rank and allowances of Our Indian Medical Service, Our will and pleasure is that Our Warrants of 10th May, 1873, and 14th September, 1876, be cancelled and that from and after the date of this Warrant the following rules shall be established, and that by these rules our Viceroy and Governor General in Council, and the Governors in Council of Madras and Bombay respectively, shall be governed."
1. The grades of Medical Officers in our Indian Military Forces shall be five in number, viz.—
   2. Deputy Surgeon General.
   4. Surgeon Major.
   5. Surgeon.

2. The relative rank of the Medical Officers of our Indian Military Forces shall be as follows:—

   Surgeon General, as Major General, according to the date of his commission.
   Deputy Surgeon General, as Colonel, according to the date of his commission.
   Brigade Surgeon, as Lieutenant Colonel, according to the date of his commission, or according to the date upon which he completed 20 years service as Surgeon and Surgeon Major.
   Surgeon Major, as Major, according to the date of his commission; and after 20 years service as Surgeon and Surgeon Major, as Lieutenant Colonel.
   Surgeon, as Captain, according to the date of his commission.

3. Such relative rank shall carry with it all precedence and advantage attaching to the rank with which it corresponds, (except as regards the presidency of courts martial, where care will and pleasure is that the senior combatant officer be always president), and shall regulate the choice of quarters and the rates of prizemoney.

4. A Surgeon shall be promoted to Surgeon Major on completion of 12 years service from date of first commission.

5. In cases, however, of emergency, or when the good of the service renders such alteration desirable, it shall be competent for the Secretary of State for India, on the recommendation of our Viceroy and Governor General of India in Council, to shorten the period of service above mentioned in such manner as he shall deem fit and expedient.

6. All promotion from the rank of Surgeon Major to that of Brigade Surgeon shall be given by selection for ability and merit.

7. All promotion from the rank of Brigade Surgeon to that of Deputy Surgeon General, and from the rank of Deputy Surgeon General to that of Surgeon General, shall be given by selection for ability and merit, and the grounds of such selection shall be stated to us in writing, and recorded in the office of the Secretary of State for India in Council.

8. With a view to maintain the efficiency of the service, all medical officers of the ranks of Surgeon Major and Brigade Surgeon shall be placed on the retired list when they shall have attained the age of 55 years, and all Surgeons General and Deputy Surgeons General when they shall have attained the age of 60 years; but as respects Surgeons Major, and Brigade Surgeons who entered the service prior to the 13th January, 1860, this rule shall be relaxed, and an officer who has attained the age of 55 years without having obtained the rank of Deputy Surgeon General, shall be permitted to remain in the service for three years more, on his perfect competency and fitness being certified in such manner as our Secretary of State for India may direct. In any special case where it may appear to be for the good of our service that the officer should continue in employment, he may be so continued, subject in each case to the sanction of Our Secretary of State for India in Council.
9. Medical officers shall be entitled to all the allowances granted to Our Indian Military Forces on account of wounds and injuries received in action, as combatant officers holding the same relative ranks.

10. Their families shall in like manner be entitled to all the allowances granted, under existing regulations, to the families of combatant officers holding the same relative ranks.

A medical officer, retiring on a pension after a service of 20 years and upwards, may, if recommended for the same by the Government of his Presidency, receive a step of honorary rank, but without any consequent increase of pay.


Whereas by article 2 of our Warrant of the 16th November, 1880, revising the rules for the promotion and relative rank and allowances of our Indian Medical Service, we did, amongst other things, direct that Brigade Surgeons and Surgeons Major after 20 years service should have the relative rank of Lieutenant Colonel.

Our Will and Pleasure is, and We do hereby direct, that a Surgeon Major of our Indian Medical Service who, on promotion to the rank of Brigade Surgeon, is granted under the provisions of our said warrant the relative rank of Lieutenant Colonel, shall take precedence of all Surgeons Major who may be holding such relative rank.

"(Given at Windsor, 20th May, 1881)."

"G.G.O. No. 376, dated 8th July, 1881.

With reference to the Royal Warrants published in G.G.O.'s Nos. 374 and 375 of this date, it has been laid down by Her Majesty's Government that the precedence of Brigade Surgeons over Surgeons Major established by these Warrants is intended to take effect only amongst themselves, and that the precedence of Brigade Surgeons with respect to combatant officers will continue to be governed by the rules laid down in the Royal Warrants of the 27th November, 1879, and 16th November, 1880, respectively."


Whereas We deem it expedient, with a view to the assimilation of the grades of Our Indian Medical Service to those of Our Army Medical Department, to provide for the appointments to Our Indian Medical Service being in the first instance made on probation.

Our Will and Pleasure is that from and after the date of this Our Warrant—

1. The grades of Medical Officers in Our Indian Military Forces shall be six in number, the under-mentioned grade being added to those enumerated in article one of Our Warrant of 16th November, 1880, viz.—


2. A Surgeon on Probation shall have the relative rank of Lieutenant.

"(Given at Windsor, 6th July, 1881)."

In 1881 the system of station hospitals for British troops in India was introduced, in the place of the former regimental hospitals, by Clause 147, I.A.C., July, 1881, republished in I.M.D. Cirs. for 1881, page 41. The regimental hospital
system, though often threatened, is still maintained in the Indian Army up to date, (1913).

In 1882–83 occurred the agitation about "unemployed pay," which, though long ago forgotten, created a good deal of stir at the time. The I.M.S. had been recruited to its full strength during the Afghan war, and, when the army returned to its cantonments in India, there were more junior medical officers available for duty than the number for which employment could be found. On top of this came the disbandment, in 1882, of some thirty regiments of the Indian Army, throwing out of employ an equivalent number of medical officers, for whom, of course, other posts had to be found, before any of the juniors, who had not yet obtained them, could get permanent appointments. Most of the men of four or six years' service, who were officiating in medical charge of regiments, were thus debarred from obtaining permanent appointments till a large number of their seniors, displaced from the disbanded regiments, could be provided for in the vacancies caused by death and retirement. Similarly the juniors were unable to obtain officiating appointments, and remained on unemployed pay. In the summer of 1883 there were a very large number of junior medical officers on unemployed pay, Rupees 286, annas 10 per month. It may be admitted that, small as the pay was, the work was even less, many of them were doing absolutely nothing. But all were ready and eager to work, if work could be found for them, and all were disappointed in not being able to obtain at least officiating appointments.

The junior medical officers, both those officiating and those unemployed, sent in memorials to Government, and the subject was brought up in the House of Commons, their cause being championed by Mr. Gibson, M.P. for Dublin University, afterwards Lord Ashbourne, Lord Chancellor of Ireland. It was answered that the Surgeons on Rs.286 unemployed pay had little cause of complaint, while the unemployed pay of a Lieutenant was only Rs.217; but this argument lost its force when it was pointed out that unemployed Surgeons were numerous, while such a thing as an unemployed Lieutenant was unknown, the most junior Lieutenants in the Indian Army receiving Rs.100 acting allowance as officiating Wing Officers, in addition to their unemployed pay. This agitation had some effect, the rate of unemployed pay was raised in 1885 to Rs.317, and subsequently,
in 1897, the lowest rate of pay drawn on joining was raised to Rs.350.* But most, if not all, of those who had taken part in the struggle, had obtained, some permanent and some officiating appointments, before even the first of these increases was given.

Coupled with the unemployed pay grievance was another, caused by the rule enforced by the Mily. Accounts Dept., which of course had no choice in the matter, that an officer transferred from one appointment to another on higher pay, should make the move at his own expense. Under this rule a Surgeon might have to travel at his own expense from one end of India to another, say from Calcutta to Peshawur, or vice versa, and then draw the officiating allowance at his new station for a few months only. Had this occurred to each individual only once, it would not have been so hard. But a Surgeon, officiating in a regiment, when relieved, reverted at once to unemployed pay, and his next move, even if ordered only a few days later, was again a transfer to a better paid billet, necessitating his paying his own travelling expenses again, and so on, time after time, until he at last got a permanent appointment.

The Memorandum issued at this time by the India Office to intending candidates, stated that no officer could draw any higher rate than unemployed pay until he had passed the Lower Standard examination in Hindustani. It was not unnatural that this stipulation should be taken to mean that an officer would be entitled to higher pay as soon as he had passed the L.S., though certainly this was not expressly promised. The L.S. was then a very easy examination, the standard has since been greatly raised. The Memoranda issued by the India Office now, and for many years past, distinctly state that the passing of this examination in itself gives no claim to a higher rate of pay.

There is much in a name, in spite of the proverb, and the very phrase, "unemployed pay," was in itself a grievance. While most of the men on this rate of pay had little to do, some of them were from time to time doing very hard and trying work. A Surgeon who had no permanent appointment, placed on special duty in a cholera epidemic, remained technically unemployed, and was reasonably aggrieved when he found himself drawing only unemployed pay for doing much harder and more trying

* See Chap. XVIII., Pay. In 1903 the unemployed pay of a Lieutenant was raised to Rs.420. See also footnote at end of this chapter.
work than his seniors or contemporaries who had the good fortune to hold permanent or officiating appointments.

Had the phrase "general duty pay" been used instead of that of "unemployed pay"; and had the rule requiring transfer at his own expense been enforced once only upon each individual, it is probable that this grievance would never have been much heard of or felt.

About this time the abbreviation I.M.D., which for some years had been used for the I.M.S., probably on the analogy of the A.M.D., gradually dropped out of use, and the proper abbreviation, I.M.S., came into general employment. The I.M.S. is, and always has been, a Service, not a Department. The abbreviation I.M.D. now survives in only one connection, the title of the *I.M.D. Circs.*, where it is used as including the Sub-Medical Services, as well as the Commissioned Service, the I.M.S.

**GENERAL ABSTRACT FOR THE BENGAL PRESIDENCY.**

<table>
<thead>
<tr>
<th></th>
<th>Appointments for Covenanted Medical Officers</th>
<th>Madras or Bombay officers serving in Bengal</th>
<th>Total</th>
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<tr>
<td></td>
<td>In List No. 1</td>
<td>In List No. 1</td>
<td>Total</td>
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<td>Government of India</td>
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<td>A. Home Department</td>
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<td>B. Military Department</td>
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<td>C. Foreign Department</td>
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<td>27</td>
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<td>D. Financial Department</td>
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<td>2</td>
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<tr>
<td>Total</td>
<td>140</td>
<td>140</td>
<td>119</td>
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</table>

| Under the Government of Bengal |       |       |       |       |       |
| Ditto N.W.P. and Oudh |  42    |  40   |  40   |  21   |  55   |
| Ditto the Panjab      |  27    |  46   |  46   |  31   |  40   |
| Total                |  147   |  168  |  154  |  14   |  168  |

| Under the Administration of the Central Provinces |       |       |       |       |       |
| Ditto Assam |  7    |  8    |  8    |  7    |  15   |
| Ditto British Burma |  6    |  5    |  5    |  6    |  10   |
| Ditto Coorg |  3    |  3    |  3    |  2    |  3    |
| Total |  147   |  168  |  154  |  14   |  168  |

| Grand Total |  287   |  308  |  273  |  35   |  308  |

| Reserve at 25 per cent. |       |       |       |       | 68    |

Total Bengal officers required |  341   |  —    |  341  |  —    |  341  |

* List No. 1, for Commissioned or Covenanted officers only; List No. 2, for either Covenanted or Uncovenanted officers.
In 1884 the Government of India, in Home Dept., Medical, Order No. 17-48194 of 31st Oct., 1884, published a list of medical appointments in India, to be held by Commissioned and Uncovenanted Medical Officers respectively. This list is too long to quote here. It may be found in *I.M.D. Circs.* for 1884, pages 69 to 81. An abstract for the Presidency of Bengal is given on p. 315.

Government of India, Home Dept., Order No. 361 of 30th July, 1886, published in *I.M.D. Circs.* for that year, page 60, revised to some extent the civil administrative appointments of the I.M.S. Except for the discontinuance of the administrative rank, granted to Sanitary Commissioners, six years before, and the grant, in lieu thereof, of the extra compensation pensions, no great change was made. This order is as follows:—

"Revised Orders regarding the Administrative Staff of the Indian Medical Service in the several Provinces of India."

"Copy of Not. by the Govt. of India, Home Dept., No. 361, dated Simla, the 30th July, 1886."


"In modification of the orders marginally noted, the Governor General in Council is pleased, with the sanction of Her Majesty’s Secretary of State, to issue the following orders regarding the administrative staff of the Indian Medical Service in the several Provinces of India."

"2. The administrative appointments are the following:—"

<table>
<thead>
<tr>
<th>Position</th>
<th>Monthly salary.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon General and Sanitary Commissioner with the Government of India</td>
<td>Rs. 2700</td>
</tr>
<tr>
<td>Secretary to the Surgeon General and Special Assistant to the Sanitary Commissioner with the Government of India</td>
<td>Rs. 1200–1400</td>
</tr>
<tr>
<td>Deputy Surgeon General with title of Inspector General of Civil Hospitals for civil medical administration in Bengal</td>
<td>Rs. 2250</td>
</tr>
<tr>
<td>Ditto. Ditto for North West Provinces and Oudh</td>
<td>Rs. 2250</td>
</tr>
<tr>
<td>Ditto. Ditto for Panjab</td>
<td>Rs. 2000</td>
</tr>
<tr>
<td>Deputy Surgeon General for civil medical administration in the Central Provinces</td>
<td>Rs. 1800</td>
</tr>
<tr>
<td>Surgeon General with the Government of Madras</td>
<td>Rs. 2500</td>
</tr>
<tr>
<td>Secretary to Surgeon General with the Govt. of Madras</td>
<td>Rs. 800</td>
</tr>
<tr>
<td>Surgeon General with the Government of Bombay</td>
<td>Rs. 2500</td>
</tr>
<tr>
<td>Secretary to Surgeon General with the Govt. of Bombay</td>
<td>Rs. 800</td>
</tr>
</tbody>
</table>
3. The Surgeons General with the Government of India and with the Governments of Madras and Bombay will, in addition to performing civil administrative duties, be Heads of the Indian Medical Departments in their respective Presidencies. It will be their duty, among other matters, to propose transfers between the Military and Civil Departments, to recommend for promotion to the administrative grades, and to advise the Government on all questions relating to the admission of officers and subordinates to the Indian Medical Service, to the conduct and services of Indian Medical Officers of all grades, and to the supply of medicines and hospital stores. The Surgeon General with the Government of India will be entitled to receive any information he desires from the Deputy Surgeons General attached to the Local Governments and Administrations, and to communicate with these officers in regard to the operation of departmental rules and orders; but he will exercise no direct authority over these officers, who will be solely under the orders of the Local Government or Administration to which each belongs.

4. Officers will be selected for the above-named administrative offices by the Government of India for the Bengal Presidency, and by the Governments of Madras and Bombay for those Presidencies respectively. Selections will be made in each Presidency from the whole Indian Medical Service of that Presidency; and the principles of selection hitherto followed in all other respects in making such appointments will be observed.

5. The Deputy Surgeon General for the Central Provinces will also be Sanitary Commissioner for those Provinces. As already notified in the Military Department order of the 2nd January, 1880, above quoted, the Deputy Surgeon General of the Eastern Frontier District will, in addition to his military duties, carry on the civil medical administration of Assam, and will also perform the duties of Sanitary Commissioner in that Province. The Deputy Surgeon General of the Panjab Frontier Force will also exercise the civil medical administration of that circle; and in respect of these civil duties, he will be subject to the orders of the Provincial Deputy Surgeon General, styled Inspector General of Civil Hospitals.

6. In Central India, the Residency Surgeon at Indore will perform the duties of an administrative medical officer as regards all civil medical officers and subordinates employed under the orders of the Agent to the Governor General for Central India. He will exercise a general supervision over these officers, and advise the Agent to the Governor General on all civil medical arrangements.

7. In Berar, the Sanitary Commissioner will be entrusted with the medical administrative duties of the Province, instead of the Deputy Surgeon General at Hyderabad, who is now a purely military officer.

8. The administrative medical and sanitary duties, including vaccination, will, for the Province of Burma, be performed by the Inspector General of Jails, in addition to his other duties.

9. In the Andamans, the Senior Medical Officer will be entrusted with the medical administrative duties of the Settlement, including the Nicobars.

10. In Rajputana, the Superintendent General of Dispensaries and
Vaccination will exercise the functions of an administrative medical officer in respect of all civil medical duties.

"11. In Baluchistan, the Residency Surgeon, Quetta, will exercise the functions of an administrative medical officer in respect of the civil medical duties in Baluchistan, at Sibi, and on the Bolan and Sind Pishin State Railways.

"12. In minor matters, such as the submission of periodical returns and furnishing information, the officers above-named,—viz. the Residency Surgeon, Indore; the Sanitary Commissioner, Berar; the Inspector General of Jails, Burma; the Senior Medical Officer of the Andamans; the Superintendent General of Dispensaries, Rajputana; and the Residency Surgeon, Quetta—will communicate direct with the Surgeon General with the Government of India; but all matters of importance should be submitted to the Government of India by the Agent to the Governor General for Central India, the Resident at Hyderabad, the Chief Commissioner of Burma, the Superintendent of Port Blair, or the Agent to the Governor General for Rajputana or Baluchistan, as the case may be.

"13. In all provinces for which a separate Sanitary Commissioner is sanctioned, the Sanitary Department will, except in regard to leave, pensions, and such questions, remain distinct from, and not subordinate to, the Medical Department; and in selection for such posts, knowledge and experience as a sanitary officer will be specially considered. The Sanitary Commissioners of such Provinces shall no longer, in virtue of their appointments as such, have the rank and privileges of a Deputy Surgeon General. This rule will apply to all officers appointed as Sanitary Commissioners after the 19th March 1886, the date of receipt of the Secretary of State's Despatch No. 37 (Military), dated London, 25th February 1886. As a compensation for the withdrawal from Sanitary Commissioners of the rank and privileges of a Deputy Surgeon General, Her Majesty's Government have sanctioned the annual grant of four extra pensions of £100 each to senior officers of the Indian Medical Department in the proportion of two for the Bengal and one each for the Madras and Bombay Medical Services. The conditions attaching to the grant of these pensions are embodied in India Army Circulars of 1886, clause 91, issued by the Military Department.

"14. The superintendence of the Vaccination Department will form an important part of the duties of the Sanitary Commissioner in each Province. The Superintendents of Vaccination are Deputy Sanitary Commissioners, under the orders of the Sanitary Commissioner, who will utilize not only them, but also the whole vaccination staff, on sanitary work. Civil Surgeons will also assist the Sanitary Department, as far as practicable, in that important duty.

"15. Although the administration of the Indian Medical Service is divided into two branches, Civil and Military, Indian Medical Officers will remain, as now, military officers, those in civil employment being only lent to the Civil Department, and being liable to be called on for military duty in the event of their services being required."

A new Royal Warrant, dated 30th April, 1887, revised the rules for promotion and precedence in the I.M.S., cancelling
the warrants of 16th Nov., 1880, and 6th July, 1881. This warrant, on the whole, differed little from that of 1880. It is published in *I.M.D. Circs.* for 1887, page 37. The following summary shows the alterations made:

1. Six grades; adds Surgeon on probation.

2. Precedence; much the same as para. 2 of Warrant of 16th Nov., 1880, adds Surgeon on probation ranking as Lieutenant.

3. "Such precedence shall not entitle the holder to military command of any kind, to the presidency of Courts martial, Courts of Inquiry, Committees, or Boards of Survey."

4. 5, 6, 7. The same as before.

8. "On appointment as Honorary Physician or Surgeon to Her Majesty, under Article 12, an officer below the rank of Deputy Surgeon General shall be promoted to that rank, remaining supernumerary of his rank until he would have been promoted in ordinary course."

9. "In case of distinguished service in the field, an officer of the Indian Medical Service may be promoted from any rank to that next above it, remaining supernumerary in the higher rank until he would have been promoted in ordinary course, or a Surgeon Major ranking as Major may be advanced to rank as Lieutenant Colonel."

10. Same as para. 8 of previous warrant.

Paras. 9 and 10 of former warrant omitted.

11. "A medical officer retiring, not later than the 31st December, 1887, on a pension after a service of 20 years and upwards, may, if recommended for the same by the Government of his Presidency, receive a step of Honorary rank, but without any consequent increase of pay."

12. "Six of the most meritorious Medical Officers of the Service shall be named our Honorary Physicians, and six our Honorary Surgeons."

"Note.—Under instructions from the Secretary of State for India it is notified that an officer promoted to the rank of Deputy Surgeon General under Article 8 or Article 9 of the above Warrant, will not reckon his service in that rank as service for the additional pension of £250 per annum, until he has been absorbed into the establishment of the grade, except any period during which he may have officiated as an Administrative Officer."

In 1888 a change was made in the appointment and tenure of office of Sanitary Commissioners, who had lost their administrative rank in 1886, two years before. Govt. of India, Home Dept., Medical, Order No. 4 of 7th June, 1888, published in *I.M.D. Circs.* for 1888, page 49, laid down that Sanitary Commissioners were in future to be appointed for a term of seven years, which might be extended to ten years.

The Royal Warrant of 8th Feb., 1889, published on page 3 of *I.M.D. Circs.* for that year, gave the power of command in military hospitals to Officers of the I.M.S.
"Royal Warrant, dated 8th Feb., 1889, providing for the exercise by officers of the Indian Medical Service of Command, similar to that exercised by officers of the Medical Staff.

"Copy of a letter from the Right Hon'ble Her Majesty's Secretary of State for India, to His Excellency the Most Honourable the Governor General of India in Council, Military Department—No. 40, dated India Office, London, the 21st February, 1889.

"Having considered in Council your Military Despatch No. 210 of the 5th November, 1888, with the concurrence of the Secretary of State for War and of His Royal Highness the Commander-in-Chief, I submitted to Her Majesty a draft warrant, providing for the exercise by officers of the Indian Medical Service of command, similar to that exercised by the officers of the Medical Staff.

"2. Her Majesty having been pleased to approve of the issue of the Royal Warrant, which bears date the 8th February, 1889, copies of it are forwarded herewith."

"Victoria R. and I.

"Whereas We deem it expedient to amend in certain respects Our Royal Warrant of the 30th April 1887, Our Will and Pleasure is—

"1. That the words ' (except as provided in Article 3a) ' shall be inserted after the words ' military command of any kind ' in Article 3.

"2. That the following Article shall be inserted after Article 3.

"' 3a. The officers of the Indian Medical Service shall command the medical officers, and subordinates, the Army Hospital Native Corps, the Hospital attendants, and others doing duty in Military Hospitals, as well as all patients in Military Hospitals; and shall command the Medical Staff Corps when doing duty therewith, in the same manner as officers of the Medical Staff, as well as such officers, noncommissioned officers, and men, as may be attached for duty to the Medical Staff Corps, but otherwise they shall not hold any military command.'

"Given at Our Court at Osborne, this eighth day of February 1889, in the fifty-second year of Our Reign."

In 1890 orders were issued by the Govt. of India, Mily. Dept., No. 14075 D., of 16th Oct., 1890, republished in I.M.D. Circs. for 1890, page 47, by which all officers entering the I.M.S. after that date were made liable to be recalled from the pension list to duty, in case of emergency, up to the age of fifty-five.

The Royal Warrant of 10th Aug., 1891, altered the title of the A.M.D. to Medical Staff, introduced the compound titles, and reintroduced the rank of Lieutenant for junior Surgeons on first appointment. These compound titles were unpopular, especially the lengthy and cumbersome Brigade-Surgeon-Lieutenant-Colonel,
and remained in force only seven years. The same titles, including that of Surgeon Lieutenant, were given to the I.M.S. by the Royal Warrant of 14th Dec., 1891.

"I.M.S. Warrant of 1891.

" India Office, December 14th, 1891.
" Victoria, R.I.
" Whereas we deem it expedient to revise the Rules for the promotion and precedence of our Indian Medical Service.
" Our will and pleasure is that our warrants of April 30th, 1887, and February 8th, 1889, be cancelled, and that from and after August 7th, 1891, the following rules shall be established, and that by these rules our Viceroy and Governor General in Council, and our Governors in Council of Madras and Bombay respectively, shall be governed.

" 1. The substantive ranks of medical officers in our Indian military forces shall be as follows:

Surgeon Major General.
Surgeon Colonel.
Brigade Surgeon Lieutenant Colonel.
Surgeon Lieutenant Colonel.
Surgeon Major.
Surgeon Captain.
Surgeon Lieutenant.

" These ranks shall carry precedence and other advantages attaching to the rank indicated by the military portion of the title, but shall not, (except as provided in Article 2), entitle the officer to military command, or to the Presidency of Courts-Martial, Courts of Enquiry, Committees, or Boards of Survey.

" 2. The officers of our Indian Medical Service shall command the medical officers and subordinates, the Army Hospital Native Corps, the hospital attendants, and others doing duty in military hospitals, as well as all patients in military hospitals; and shall command the Medical Staff Corps, when doing duty therewith, in the same manner as officers of the Medical Staff, as well as such officers, non-commissioned officers, and men, as may be attached for duty to the Medical Staff Corps; but otherwise they shall not hold any military command.

" 3. A Surgeon-Lieutenant shall be promoted to the rank of Surgeon-Captain on completing three years' full pay service.

" 4. A Surgeon-Captain shall be promoted to the rank of Surgeon-Major on completing twelve years' full pay service.

" 5. A Surgeon-Major shall be promoted to the rank of Surgeon-Lieutenant-Colonel on completing twenty years' full-pay service.

" 6. All promotion from the rank of Surgeon-Lieutenant-Colonel to that of Brigade-Surgeon-Lieutenant-Colonel shall be given by selection for ability and merit.

" 7. All promotion from the rank of Brigade-Surgeon-Lieutenant-Colonel to that of Surgeon-Colonel, and from the rank of Surgeon-Colonel to that of Surgeon-Major-General, shall be given by selection for ability and merit, and the grounds of such selection shall be stated to us in writing, and recorded in the office of our Secretary of State for India.

H.I.M.S.—VOL. II.
“8. On appointment as our Honorary Physician or Surgeon under Article 11, an officer below the rank of Surgeon-Colonel shall be promoted to that rank, remaining supernumerary of his rank until he would have attained the rank of Surgeon-Colonel in ordinary course.

“9. In case of distinguished service in the field, an officer of our Indian Medical Service may be promoted from any rank to that next above it, remaining supernumerary in the higher rank until he would have been promoted in ordinary course, or until selected for further promotion for which he shall be eligible according to his standing in the higher rank.

“10. With a view to maintain the efficiency of the Service, medical officers shall be placed on the Retired List when they attain the following ages:—

<table>
<thead>
<tr>
<th>Rank</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon Major General</td>
<td>60</td>
</tr>
<tr>
<td>Surgeon Colonel</td>
<td></td>
</tr>
<tr>
<td>Brigade Surgeon Lieutenant Colonel</td>
<td></td>
</tr>
<tr>
<td>Surgeon Lieutenant Colonel</td>
<td>55</td>
</tr>
<tr>
<td>Surgeon Major</td>
<td></td>
</tr>
</tbody>
</table>

“But as respects officers below the rank of Surgeon-Colonel who entered the Service prior to January 13th, 1860, this rule shall be relaxed, and an officer who has attained the age of fifty-five years without having attained the rank of Surgeon-Colonel shall be permitted to remain in the Service for three years more, on his perfect competency and fitness being certified in such manner as our Secretary of State for India in Council may direct. In any special case where it would appear to be for the good of our Service that the officer should be continued in employment, he may be so continued, subject in each case to the sanction of our Secretary of State for India in Council.

“11. Six of the most meritorious medical officers of the Service shall be named our Honorary Physicians, and six our Honorary Surgeons.

“Given at our Court at Windsor, this seventh day of December, in the fifty-fifth year of our Reign.—By Her Majesty’s Command, — Cross.”

The last of the Company’s medical officers, S.G. William Roche Rice, retired on 29th March, 1895. He was born on 6th Jan., 1833, educated at Queen’s College, Cork, the Richmond Hospital, Dublin, and Charing Cross Hospital; took the degree of M.D. in the long defunct Queen’s University of Ireland, and the diploma of M.R.C.S. in 1856, and entered the Bengal Medical Service as Assistant Surgeon on 20th Nov., 1856. He became Surgeon on 20th Nov., 1868, Surgeon Major on 1st July, 1873, Brigade Surgeon on 10th April, 1884, D.S.G. on 9th Dec., 1887, and S.G. with the Govt. of India on 29th March, 1890. He received a Good Service Pension on 26th July, 1891, the C.S.I. on 25th May, 1892, and was nominated Honorary Physician to the Queen on 22nd April, 1896. During the Mutiny he served at Indore, and received the medal for that campaign. He died at Brighton on 27th March, 1903.
From 1st April, 1895, the three separate armies of the three Presidencies, Bengal, Madras, and Bombay, were abolished, the whole being combined into one force, the Indian Army, which was divided into four Commands or Army Corps, the Panjab, Bengal, Madras, and Bombay. By clause 35, *I.A.C.* of 1895, republished in *I.M.D. Circs.* for 1895, pages 7 to 9, the distribution of Principal Medical Officers was fixed as follows:—

"Distribution of Principal Medical Officers of Commands and Districts between the Army Medical Staff and the Indian Medical Service under the new Army Reorganisation scheme which takes effect from 1st April, 1895."


To each of the four Commands a Principal Medical Officer will be appointed; two will be taken from the Army Medical Staff, and two from the Indian Medical Service. Officers of either service will be eligible for any Command; but for either the Bengal or the Panjab Command a Principal Medical Officer belonging to the Indian Medical Service will ordinarily be nominated.

2. The districts of Medical Superintendence of Surgeon-Colonels will be distributed as follows:—

<table>
<thead>
<tr>
<th>Army Medical Staff</th>
<th>Indian Medical Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Panjab Command</td>
<td>Lahore</td>
</tr>
<tr>
<td>Rawal Pindi</td>
<td>Panjab Frontier Force</td>
</tr>
<tr>
<td>Sirhind</td>
<td>Assam</td>
</tr>
<tr>
<td>Bengal Command</td>
<td>Presidency</td>
</tr>
<tr>
<td>Allahabad and Nerbudda</td>
<td></td>
</tr>
<tr>
<td>Meerut and Bundelkund</td>
<td></td>
</tr>
<tr>
<td>Oudh and Rohilkand</td>
<td></td>
</tr>
<tr>
<td>Madras Command</td>
<td>Bangalore and Southern</td>
</tr>
<tr>
<td>Secunderabad and Belgaum</td>
<td></td>
</tr>
<tr>
<td>Mandalay and Chin Hills</td>
<td></td>
</tr>
<tr>
<td>Bombay Command</td>
<td>Rangoon</td>
</tr>
<tr>
<td>Poona</td>
<td>Madras</td>
</tr>
<tr>
<td>Mhow and Deesa</td>
<td>Bombay</td>
</tr>
<tr>
<td>Quetta</td>
<td>Karachi</td>
</tr>
<tr>
<td></td>
<td>Kampti</td>
</tr>
</tbody>
</table>

3. The administrative medical charge of the Peshawar District will be held alternately by a Brigade Surgeon Lieutenant Colonel of the Army Medical Staff and of the Indian Medical Service."

By clause 56, *I.A.C.* for 1895, the salary of the P.M.O. of each Command was fixed at Rs.2200 a month, while clause 63 granted them the rank of Surgeon-Major-General. (*I.M.D. Circs.*, 1895, p. 13.)

Subsequently, in 1904, the Madras command was abolished, as a separate Army Corps, and the Burma Division separated from it. The rank of Lieut.-General, and the right of corresponding direct with Army Headquarters, were still left to the
Commander of the Sikanderabad Division. The separate Commands were abolished later on, from 1st June, 1907, and the Indian Army reorganized in nine Divisions, divided into two Armies, the Northern and the Southern, plus a tenth Division for Burma.

The Royal Warrant of 21st Oct., 1895, published in I.A.C. for 1895, clause 195, and in I.M.D. Circs., for 1895, page 59, provides for exchanges and transfers between officers of the I.M.S. and of the Army Medical Staff.

"Royal Warrant, dated 21st Oct., 1895, providing for exchanges and transfers between officers of the Army Medical Staff and of the Indian Medical Service.

"Clause 195, I.A.C., 1895.

"The Governor General in Council is pleased to direct the publication of the following extracts of a Military letter from the Right Honourable the Secretary of State for India, No. 104, dated 14th November 1895, paragraph 1, and of the Royal Warrant, dated 21st October 1895, providing for exchanges and transfers between officers of the Army Medical Staff and of the Indian Medical Service:—

"I forward, for your information, copies of a Royal Warrant to which I have obtained Her Majesty's approval, providing for exchanges and transfers between officers of the Army Medical Staff and of the Indian Medical Service.

"Whereas we deem it expedient to provide for exchanges and transfers between Officers of Our Indian Medical Service and Officers of Our Army Medical Staff.

"Our will and pleasure is that additions as under shall be made to Our Warrant regulating the promotion and precedence of our Indian Medical Service, dated 7th December 1891.

"I. The following shall be inserted at the beginning of Articles 3, 4, and 5:—

"'Except as provided in Article 9A.'

"II. The following shall be inserted after Article 9:—

"'9A. Exchanges between officers of our Indian Medical Service and officers of Our Army Medical Staff, below the rank of Surgeon Major, and transfers of such officers from either of the above Services to the other, shall be permitted subject to the approval of Our Secretary of State for War and of Our Secretary of State for India in Council and on the following conditions:

"'1. That the officers shall have less than seven years' service.

"'2. That the senior officer exchanging shall take the place of the junior on the Departmental list, and shall not be promoted under Article 3, 4, or 5, until the officer next above him shall have been so promoted.

"'3. That the junior officer exchanging shall be placed for seniority next below all medical officers whose commissions have the same date as his own.
"4. That an officer transferred shall be placed for seniority below all medical officers holding the same rank at the time of his transfer, and shall not be promoted under Article 3, 4, or 5, until the officer next above him shall have been promoted."

"Given at our Court at Balmoral, this 21st day of October, in the fifty-ninth year of our reign.

"By Her Majesty's Command, George Hamilton."

By Govt. of India, Home Dept., Order No. 255 of 21st March, 1896, published in I.M.D. Circes., for 1896, page 17, the appointments of Professors in the Medical Colleges, and of Supt. of the General Hospitals, were limited in tenure to five years, with power to the Local Governments to extend tenure for similar periods of five years at a time.

The amalgamation of the three Presidency Medical Services, Bengal, Madras, and Bombay, as far as men subsequently entering the Service were concerned, was ordered in G.G.O. No. 260 of 6th March, 1896. But this order may more fittingly begin the next chapter, practically the last in the history of the Service.

Note.—While it is easy to see, looking back over thirty years—a generation—that the unemployed pay grievance had no lasting ill effect upon the Service as a whole, yet at the time it was very hard upon those who suffered from it, especially upon the more senior among them.

The following rhymes were written in 1883 by two young Surgeons, both of whom had been on unemployed pay ever since they entered the Service, considerably over a year before; and both of whom were destined to remain in that condition for some time to come. Both, it will be noticed, use the abbreviation I.M.D., not I.M.S., for the name of the Service. They take what may be called a pessimistic and an optimistic view, respectively, of the state of affairs. It is hardly necessary to say that a student of the type described in the second would have had no chance of passing the examination for the I.M.S., competition for which, at the time, was severe. It is to be hoped that the writer of the first lines, should he ever read this note, will pardon the resuscitation of his early effort.

"De Profundis.

"Through his student's life he has worked with a will,
To acquire his share of a doctor's skill;
Morning and night within hospital walls
And all day long in the lecture halls.
He has learnt to read a sick man's look
As a scholar scans a page of his book.
He has trained his mind to its careful task,
And work to do is all he would ask.
He longs for a path with obstacles spread
Ere his mental vigour is drugged and dead.
Sure of his creed, he longs to strive,
Knowing the fittest will still survive.
Behold him then, in India's land,
Anxiously waiting to turn his hand
To the well-loved task, but he waits in vain
Till dull grows the mind and torpid the brain;
For the field's over-stocked and the work's too small;
There's not enough for the hands of all.
And Babu's work and reports to fill
Requires not the least professional skill.
He thinks of home, but he dare not face
His compeers, once, in the vital race,
Where men succeed by the force of brain
And hearty effort is not in vain,
And those, whose course is fairly run,
Look back on an honest life work done.
So he shakes his head, and sticks to his post,
And sighs for his grand profession lost;
And grimly thinks of the lying scheme
That cruelly marred his life's young dream,
And pities the men who still will be
Duped and lost in the I.M.D."

"In Excelsis.
'To a medical school he was early sent
And nine long years as a student spent.
University, College, and Hall,
He tried each one, and he failed in all.
Seven examiners he had faced,
Seven times failed, defeated, disgraced;
Yet again he toed the mark, and at last
He found, to his own surprise, he had passed,
And proudly could to his friends display
The glorious title of L.S.A.
To comply with the rules of the I.M.D.
He added the L.R.C.S.E.
The exam was stiff, but he crammed with Cooke,
And scraped through last, by a lucky fluke.
So he left an ungrateful native land
For service on India's coral strand.
On general duty he sailed forth
To the East, and the West, and the South, and the North.
From Bombay to Peshawar he was quickly sent,
From Peshawar to Shillong he speedily went,
From Shillong to Quetta, from Quetta to Prome,
And thus he wrote to his friends at home
'If you want a good berth, with a decent screw,
And nothing at all as your work to do,
Then all you've to do is to do like me,
And boldly to enter the I.M.D.'"
About this time the Madras Staff Corps was very short-handed, and was said, with pardonable exaggeration, to be officered entirely by Colonels on the verge of retirement, and by newly-joined probationers. A song used to be current, the singer of which, supposed to be a Surgeon in a Madras regiment, relates how, one by one, the other officers go away, handing over their duties to him. The chorus, adapted from one of Gilbert's Bab Ballads, ran—

"Oh! I am a Sub, and an Adjutant bold,
And a Colonel commanding high;
And my duties are large in the medical charge
Of the ninety-ninth N.I."
CHAPTER XXXIX
THE NEW COMBINED OR GENERAL SERVICE; 1896 TO 1913

"The old order changeth, yielding place to new."

TENNYSON, Morte d'Arthur.

The amalgamation of the three Presidential Armies in 1895 was followed by that of the three Establishments of the I.M.S., Bengal, Madras, and Bombay, from 1st April, 1896, as far as all future admissions to the Service were concerned. The commissions of the last batch of admissions to the old Service, who were on probation at the date of this amalgamation, date from 29th July, 1896. Those of the first admissions to the new general Service are dated 28th Jan., 1897. For ten years more the members of the old Service were shown, in the Indian Army Lists, on three separate lists, one for each Presidency. They were combined in one list for the first time in the Army List of 1st Oct., 1906. But, in spite of their being all shown on one list, the three separate cadres for promotion are still maintained; and presumably will be maintained until the last members of the old Services have been promoted, or have disappeared from the active list, which will probably not occur until about 1925. The combination of the names on one list showed up most effectively how rapidly the senior officers on the Bombay list were superseding those in Bengal and Madras.*

The orders for the amalgamation of the I.M.S. were issued in G.G.O. No. 260 of 6th March, 1896, republished in I.M.D. Circs. for 1896, p. 9.


"With the sanction of the Secretary of State for India, the Governor General in Council is pleased to notify that, from the 1st April 1896, the following changes in the organization of the Indian Medical Service will have effect.

"2. The Medical Services of Bengal, Madras, and Bombay will be

* Seven years later, at the end of 1913, promotion is fairly equalized in the three services. Up to 1910, it was most rapid in Bombay, and slowest in Madras, which now stands first in that respect, Bengal being still a little behind Bombay.
amalgamated into one service under the direct administrative control of the Government of India.

"3. The Surgeon General with the Government of India will be the head of the amalgamated Indian Medical Service, and his designation will be Director General of the Indian Medical Service.

"4. No change will be made in the conditions under which officers of the Bengal, Madras, and Bombay Medical Services, appointed before the second examination in 1896, are serving; promotion will continue to run on their respective lists, and the sphere of their employment will remain as at present, except in cases of emergency, when it may be desirable to employ them temporarily beyond it. In time of war all officers who can be spared from civil duties will be employed as the exigencies of the service may demand.

"5. From the date of the second examination in 1896, Surgeon-Lieutenants will be recruited for the amalgamated Indian Medical Service, and the appointments will be made on one general list. Subject to the requirements of the service, officers will be allowed choice of commands according to their position on the list as determined by the combined results of the preliminary and final examinations. The officers appointed to this list, although ordinarily employed within the commands to which they may be posted, will be liable to employment in any part of India according to the exigencies of the service. The subsequent transfers to civil duties will ordinarily be allotted, so far as the requirements of the service will allow, to the provinces within the limits of the command to which the officers were originally posted.

"6. The present Surgeon Generals with the Governments of Madras and Bombay will retain their claim to rank, pay, and pensions under existing rules. The question of the continuance of these privileges to their successors in office will be reserved for future consideration.

"7. The Surgeon Generals will be restricted to the exercise of the functions of Administrative Medical Officers and Civil Inspector Generals of Hospitals in respect to the Civil Medical Staff and Civil Medical Institutions in the Presidencies of Madras and Bombay respectively. They will cease to exercise any control over those sections of the existing medical establishments of Madras and Bombay which are composed of officers employed with the army, or over the reserve of 25 per cent. for leave and casualties, the administration of which will be conducted directly under the orders of the Government of India.

"8. The post of Secretary to the Surgeon General with the Government of Madras or Bombay will be retained for the present incumbents of the office of Surgeon General with these Governments. On a vacancy occurring in the post of Secretary to the Surgeon General, Madras or Bombay, it will only be filled by an officiating officer, and when the present Surgeon Generals vacate their appointments, their successors will not have Secretaries, but only Personal Assistants."

The first officer to enter the new General Service I.M.S., i.e. who headed the list at the first competitive examination under the new conditions, was Andrew Augustin Frayne Macardle, M.B., R.U.I., 1895. He died of cholera in Calcutta on 11th Oct., 1902, while acting as Supt. of the Calcutta Museum. Since then, the
first man in the new Service has been Jasper Maxwell Woolley, M.B., Cantab., 1896.

In 1896 a change was made in the classification of Civil Surgeoncies, into first and second class. In Bengal there were formerly six first-class Civil Surgeoncies, Patna, Dakka, Murshidabad, Cuttack, the 24-Parganas, and Bardwan. Howrah was substituted for Bardwan by Govt. of India, Home Dept., Order No. 658 of 16th Sept., 1895, (I.M.D. Circs., 1895, p. 40). In the N.W.P. and Oudh there were only four first-class Civil Surgeoncies, Allahabad, Agra, Lucknow, and Benares. In the Panjab the Civil Surgeons were classified, by Govt. of India, Mily. Dept., Letter No. 1148 of 30th March, 1867, into five first-class, Lahore, Delhi, Multan, Amritsar, and Ambala, and twelve second class. Subsequently Peshawar was substituted for Amritsar. By Home Dept. Resolution No. 2575 of 12th July, 1879, quoted in I.M.D. Circs. for that year, p. 87, the appointments of first-class Civil Surgeon in the Panjab were made personal, tenable by the holders in whatever stations they happened to be posted.

This change was carried out in 1896 by Govt. of India, Home Dept., Orders, No. 725 of 27th Aug., 1896, for the N.W.P. and Oudh, No. 910 of 19th Oct., 1896, for Bengal. (I.M.D. Circs. for 1896, pp. 10 and 19.)

In Burma a similar change was made twelve years later, the first-class Civil Surgeoncies being de-localized, and increased from two (Rangoon and Moulmein) to five, by Govt. of India, Home Dept., Order No. 631, Medical, of 11th June, 1908, quoted in I.M.D. Circs. for that year, p. 25.

Govt. of India, Home Dept., Order No. 901 of 2nd Nov., 1896, published in I.M.D. Circs. for 1896, p. 25, established one cadre of medical officers, posted after that date to Lower Bengal and Assam. This order affected only a few men, and nine years later, when Bengal was partitioned on 15th Oct., 1905, became of no effect.

By the Royal Warrant of 10th Aug., 1898, military titles were granted to the officers of the I.M.S. This warrant was published in I.A.C. for 1898, clause 185, and in I.M.D. Circs. for that year, p. 61. It has been given at full length in Chap. XVII, Rank (Vol. I, pp. 338–9).

A revised list of superior civil medical appointments in India,
correcting and bringing up to date that published in the Resolution of 31st Oct., 1884, quoted in the preceding chapter, was issued with Govt. of India, Home Dept., Resolution No. 988-1003 Medical, of 6th June, 1890, republished in I.M.D. Circs. for 1899, p. 11. This list is too long to quote, covering thirty-six pages. It ends with the following abstract:—

"Abstract statement showing the number of Indian Medical Service Officers required to fill sanctioned Civil Medical appointments under the Government of India in the Home, Foreign, Finance, and the Public Works Departments and under the several Local Governments and Administrations in the three Presidencies.

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Govt. of India, Home Dept.</td>
<td>5</td>
<td>——</td>
<td>——</td>
<td>5</td>
</tr>
<tr>
<td>do. Foreign Dept.</td>
<td>20</td>
<td>5</td>
<td>5</td>
<td>30</td>
</tr>
<tr>
<td>do. Finance Dept.</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>do. P.W.D. Dept.</td>
<td>1</td>
<td>——</td>
<td>——</td>
<td>1</td>
</tr>
<tr>
<td>Bengal Govt.</td>
<td>62</td>
<td>——</td>
<td>——</td>
<td>62</td>
</tr>
<tr>
<td>N.W.P. do.</td>
<td>4</td>
<td>——</td>
<td>——</td>
<td>4</td>
</tr>
<tr>
<td>Panjab do.</td>
<td>32</td>
<td>——</td>
<td>——</td>
<td>32</td>
</tr>
<tr>
<td>Burma do.</td>
<td>10</td>
<td>11</td>
<td>——</td>
<td>21</td>
</tr>
<tr>
<td>C. P. Administration</td>
<td>9</td>
<td>7</td>
<td>——</td>
<td>16</td>
</tr>
<tr>
<td>Assam do.</td>
<td>9</td>
<td>——</td>
<td>——</td>
<td>9</td>
</tr>
<tr>
<td>Haidarabad Residency</td>
<td>4</td>
<td>2</td>
<td>——</td>
<td>6</td>
</tr>
<tr>
<td>Coorg Administration</td>
<td>1</td>
<td>——</td>
<td>——</td>
<td>1</td>
</tr>
<tr>
<td>Madras Govt.</td>
<td>——</td>
<td>49</td>
<td>——</td>
<td>49</td>
</tr>
<tr>
<td>Bombay do.</td>
<td>——</td>
<td>——</td>
<td>49</td>
<td>49</td>
</tr>
</tbody>
</table>

Total Civil Appointments 107 76 55 328
Add 20 per cnt. for furlough and 5 per cent. for casualties 49 10 14 82
Grand Total 246 86 69 410”

By Mily. Dept. Order No. 4644 D of 16th Oct., 1899, republished in I.M.D. Circs. for 1899, p. 58, the appointments of P.M.O. at Quetta and Bombay were reserved for officers of the R.A.M.C. and of the I.M.S. respectively. This order, like all the others reserving different appointments as P.M.O. to members of the two Services, was cancelled by Indian Army Order No. 492 of 1905, given further on.

A Despatch from the Secretary of State, No. 3 Judicial, of 25th Jan., 1900, published in an order of the Govt. of India, Finance and Commerce Dept., dated 19th Feb., 1900, and in I.M.D. Circs. for 1900, p. 12, reorganized the Civil Medical Administration of Burma. Instead of an I.G. of Jails with Civil Medical Administration, on Rs.2000, with a Secretary on Rs.750,
were allowed an I.G. of Hospitals and Sanitary Commissioner on Rs.2000, an I.G. of Jails on Rs.1800, and a Deputy Sanitary Commissioner on Rs.600 rising to Rs.1000. Seven years later, by Order No. 5541 G of the Mily. and Supply Dept., dated 12th Sept., 1907, republished in I.M.D. Circs. for 1907, p. 56, a separate Sanitary Commissioner was allowed for Burma.

By Mily. Dept. Order No. 5857 D of 28th Sept., 1900, (I.M.D. Circs. for 1900, p. 40), a special Sanitary Officer was allowed for each of the four Army Commands. The number of Sanitary Officers was raised in 1907 to ten, one for each of the ten Divisions. These posts, however, are reserved for officers of the R.A.M.C.

The list of Civil Medical Administrative appointments in India was revised by Home Dept. Order No. 1992 of 10th Oct., 1900, republished in I.A.C. for 1900, clause 143, and in I.M.D. Circs. for that year, p. 43.

"Clause 143, I.A.C., of 1900.

"In modification of clause 122, Indian Army Circulars, 1886, the following notification by the Government of India, in the Home Department, No. 1992, dated the 19th October, 1900, is republished for information:—

"The Governor General in Council is pleased to direct the substitution of the following for paragraphs 2, 3, and 4, of Home Department Medical Notification, No. 361, dated the 30th July, 1886, regarding the Administrative Staff of the Indian Medical Service in the several provinces in India.

"2. The Administrative appointments are the following:—

<table>
<thead>
<tr>
<th>Post Description</th>
<th>Monthly salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Director General of the Indian Medical Service and Sanitary Commissioner with the Government of India</td>
<td>Rs. 2700</td>
</tr>
<tr>
<td>1 Secretary to the Director General of the Indian Medical Service and Sanitary Commissioner with the Government of India</td>
<td>1200–1400</td>
</tr>
<tr>
<td>1 Surgeon General with the Government of Madras</td>
<td>2500</td>
</tr>
<tr>
<td>1 Personal Assistant to Surgeon General with the Government of Madras</td>
<td>600</td>
</tr>
<tr>
<td>1 Surgeon General with the Government of Bombay</td>
<td>2500</td>
</tr>
<tr>
<td>1 Personal Assistant to Surgeon General with the Government of Bombay</td>
<td>600</td>
</tr>
<tr>
<td>1 Colonel with the title of Inspector General of Civil Hospitals, Bengal</td>
<td>2250</td>
</tr>
<tr>
<td>1 Colonel with the title of Inspector General of Civil Hospitals, for the North Western Provinces and Oudh</td>
<td>2250</td>
</tr>
<tr>
<td>1 Colonel with the title of Inspector General of Civil Hospitals for the Panjub</td>
<td>2000</td>
</tr>
<tr>
<td>1 Colonel with the title of Inspector General of Civil Hospitals and Sanitary Commissioner for Burma</td>
<td>2000</td>
</tr>
<tr>
<td>1 Colonel for Civil Medical Administration in the Central Provinces</td>
<td>1800</td>
</tr>
</tbody>
</table>
"3. The Director General of the Indian Medical Service will be the head of the amalgamated Indian Medical Services in India. It will be his duty, among other matters, to propose transfers between the Military and Civil Departments, to recommend for promotion to the administrative grades and to advise the Government on all questions relating to the admission of officers and subordinates to the Indian Medical Service, to the conduct and services of Indian Medical Officers of all grades, and to the supply of medical and surgical stores. The Director General of the Indian Medical Service and Sanitary Commissioner with the Government of India will be entitled to receive any information he desires from the Surgeon Generals, Inspector Generals of Civil Hospitals, Administrative Medical Officers and Sanitary Commissioners attached to the Local Governments and Administrations, and to communicate with these officers in regard to the operation of departmental rules and orders; but he will exercise no direct authority over these officers, who will be solely under the orders of the Local Government or Administration to which each belongs.

"4. Officers will be selected for the above-named Administrative offices by the Government of India for the Bengal Presidency and by the Governments of Madras and Bombay for these Presidencies respectively. Selections will be made in each Presidency from the whole Indian Medical Service of that Presidency, and the principles of selection hitherto followed in all other respects in making such appointments will be observed. The nominations by the Governments of Madras and Bombay, respectively, will, however, be subject to the approval of the Government of India.

"The Surgeon Generals with the Governments of Madras and Bombay will be restricted to the exercise of the functions of Administrative Medical Officers and Civil Inspector Generals of Hospitals in respect to the Civil Medical Staff and Civil Medical Institutions in their respective Presidencies. They will exercise no control over those sections of the existing medical establishments of Madras and Bombay which are composed of officers employed with the army or over the reserve of 25 per cent. for leave and casualties, the administration of which will be conducted directly under the orders of the Government of India.""
"(2). The appointment of Principal Medical Officer, Mandalay District, now held by a Colonel of the Royal Army Medical Corps, will be abolished, and the administrative medical charge now embracing the Rangoon and Southern Shan States command will be extended to the whole of Burma, the appointment being held alternately by an officer of the Royal Army Medical Corps and by an officer of the Indian Medical Service, with headquarters at Rangoon.

"(3). The appointment of Principal Medical Officer, Peshawar District, will be reserved for a Lieutenant Colonel of the Royal Army Medical Corps."

By clause 15, I.A.C. of 1903, republished in I.M.D. Circs. for 1903, p. 1, several improvements were made in the conditions of service of officers of the I.M.S. on first joining, the most important of which was the dating of their commissions from the beginning, instead of from the end, of their course of instruction in England. The first batch of new entries to get the benefit of this change were those commissioned from 1st Sept., 1902, only two months after their predecessors, whose commissions bear date 26th July, 1902.

The chief changes made by these orders were—

(1). Title changed from Surgeon on probation to Lieutenant on probation.

(2). Pay while under instruction raised to fourteen shillings a day.

(3). Commissions to bear date from the day on which the course of instruction in England begins.

(4). Permission to be seconded for a year in order to hold a resident appointment in a hospital. While seconded to receive no pay, but service to count towards promotion, increase of pay, and pension.

By clause 50 of I.A.C. for 1903, republished in I.M.D. Circs. for 1903, p. 11, the appointments of A.M.O. on the North West Frontier were allotted as follows—

Peshawar District, first class, to be held by a Colonel, R.A.M.C.
Kohat District, second class, to be held by a Colonel, I.M.S.
Derajat District, second class, to be held by a Lt. Colonel, I.M.S.

By clause 57 of I.A.C. for 1903, the appointment of P.M.O. of the Burma District was reserved for a Colonel of the I.M.S. By clause 59 of I.A.C. for 1903, the Burma District was separated from Madras and made independent as the Burma Command. These orders are republished in I.M.D. Circs. for 1903, pp. 19 and 20.

Revised rules regarding the appointment, pay, promotion, retirement, pension, leave, etc., of officers of the I.M.S. were
published in Govt. of India, Mly Dept., Not. No. 1047, dated 23rd Oct., 1903, republished in I.M.D. Circs. for 1903, pp. 35 to 38. These regulations gave an increase of pay to a large number of officers in military employment, both senior and junior. Among other changes the unemployed pay of a Lieutenant was raised to Rs.420. The pensions obtainable after seventeen and after twenty years' service were raised, and a new extra pension for Colonels introduced, £125 after three years' service in the rank. The period of service for the extra pension of a Surgeon General was reduced from five to three years.


With the approval of the Right Honble. the Secretary of State for India, the following changes in the rules governing the appointment, pay, promotion, retirement, pension, leave, etc., of officers of the Indian Medical Service are sanctioned, and, except where otherwise stated, will have effect from the 13th August, 1903.

1. The commissions of officers admitted into the Service on and after the 1st September, 1902, will reckon from the date on which their course of instruction in England begins, and all time from that date will count for increase of pay and for promotion and pension.

2. The pay sanctioned for the Director General, Indian Medical Service, in G.G.O. No. 379, dated the 4th April 1897, is raised from Rs.2700 to Rs.3000 per mensem.

3. The following scales of pay are substituted for those at present sanctioned in Articles 7 D, 312 B, 312 C, and 534, India Army Regulations, Volume I, Part 1.

MEDICAL CHARGE OF A REGIMENT, GRADE PAY, AND UNEMPLOYED PAY.

<table>
<thead>
<tr>
<th>Medical charge of a Native Regiment (Consolidated)</th>
<th>Grade Pay (for any month)</th>
<th>Unemployed pay (for any month)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colonel</td>
<td>1400</td>
<td>1000</td>
</tr>
<tr>
<td>Lieutenant Colonel (specially selected for increased pay)</td>
<td>1400</td>
<td>1000</td>
</tr>
<tr>
<td>Lieutenant Colonel, after 25 years' service</td>
<td>1250</td>
<td>900</td>
</tr>
<tr>
<td>Lieutenant Colonel</td>
<td>1250</td>
<td>900</td>
</tr>
<tr>
<td>Major, after 3 years' service</td>
<td>800</td>
<td>650</td>
</tr>
<tr>
<td>Major</td>
<td>800</td>
<td>650</td>
</tr>
<tr>
<td>Captain, after 10 years' service</td>
<td>700</td>
<td>550</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>550</td>
</tr>
<tr>
<td></td>
<td>600</td>
<td>450</td>
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<tr>
<td></td>
<td>650</td>
<td>475</td>
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<td></td>
<td>5</td>
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<td></td>
<td>5</td>
<td>475</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>420</td>
</tr>
<tr>
<td>Captain</td>
<td>550</td>
<td>450</td>
</tr>
<tr>
<td>Lieutenant</td>
<td>500</td>
<td>350</td>
</tr>
</tbody>
</table>

Note.—Staff pay is the difference between consolidated pay and grade pay.

4. Officers after completing 18 months' service will be required to pass an examination in military law and military medical organization.
5. Specialist pay at the rate of Rs. 60 a month will be granted to officers below the rank of Lieutenant Colonel who may be appointed to certain posts.

6. Lieutenant-Colonels specially selected for increased pay, if physically fit and reported to be efficient, will be permitted to remain in service beyond the age of 55 until they complete thirty years' service. Such officers, however, will not be eligible for promotion to the administrative grade nor for the special extra pension of £100 per annum.

7. The following rates of retired full pay are substituted for those at present sanctioned by Article 1461, India Army Regulations, Volume I, Part 1:

<table>
<thead>
<tr>
<th>Years' Service</th>
<th>Rate per Annum</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>400</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>500</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>700</td>
<td></td>
</tr>
</tbody>
</table>

8. The following scale of extra pensions for officers of the administrative grade is substituted for that at present sanctioned by Article 1465, India Army Regulations, Volume I, Part 1.

Surgeon General after three years' active service as such £350.
Colonel after three years' active service as such, £125.
Colonel after five years' active service as such, £250.

9. On the recommendation of the Director General, Indian Medical Service, and with the approval of the Government of India, officers will be granted study leave to the extent of one month for each complete year's service up to a maximum of twelve months. The leave will be treated as extra furlough and will count as service in India. Officers on study leave will receive ordinary furlough pay with lodging allowances of 4s., 6s., and 8s. a day in addition for Lieutenants, Captains, and Field Officers, respectively, and they will be allowed to retain a lien on their Indian appointments.

These revised rates of pay were extended to Medical Officers in civil employ a year and half later, by Govt. of India, Home Dept., Resolution No. 361-375 Medical, dated 17th April, 1905, republished in I.M.D. Circs. for 1905, pp. 6-11. As this increase, however, was given with over a year's retrospective effect, from 1st April, 1904, officers in civil employ really got it only six months later than those serving in the Army. Revised rates of pay for the Jail Dept. were issued in Govt. of India, Home Dept., Resolution No. 180-192 Jails of 22nd Sept., 1905, republished in I.M.D. Circs. for 1905, pp. 27, 28. Both of these orders have been given at full length in Chap. XVIII, Pay. Some further alterations in the terms and conditions of service in the Jail Dept. were notified in Circ. No. 3 C of 16th Oct., 1908, from the Director General, I.M.S., published in I.M.D. Circs. for 1908, pp. 38-40.
The Royal Warrant of 28th Nov., 1903, was issued in Govt. of India, Mily Dept., Order No. 117 of 5th Feb., 1904, republished in *I.M.D. Circs.* for 1904, p. 6.

"Royal Warrant, dated 28th Nov., 1903, to regulate the promotion and precedence of officers of the Indian Medical Service."

*Not. No. 117, dated 5th Feb., 1904, by the Govt. of India, Mily. Dept.*

The Governor General in Council is pleased to direct the publication of the following Royal Warrant, dated 28th November, 1903, revising the rules for the promotion and precedence of officers of the Indian Medical Service.

"Royal Warrant."

"Edward R. and I."

"Whereas we deem it expedient to revise the rules for the promotion and precedence of Our Indian Medical Service."

"Our Will and Pleasure Is that the Warrants of our late Royal Mother of 7th December 1891, 21st October 1895, and so much of the Warrant of 10th August 1898, as applies to Our Indian Medical Service be cancelled, and that from after this date the following rules shall be established, and that by these rules Our Viceroy and Governor General in Council shall be governed:—"

"The substantive ranks of Medical Officers in Our Indian Military Forces shall be as follows:—

- Surgeon General (ranking as Major General).
- Colonel.
- Lieutenant-Colonel.
- Major.
- Captain.
- Lieutenant.

"2. Except as otherwise herein provided, a Lieutenant shall be promoted to the rank of Captain on completing three years' full-pay service.

"3. Except as otherwise herein provided, a Captain shall be promoted to the rank of Major on completing 12 years' full-pay service.

"4. Except as otherwise herein provided, a Major shall be promoted to the rank of Lieutenant-Colonel on completing 20 years' full-pay service.

"5. Time on half-pay, not exceeding one year, shall be allowed to reckon as service for promotion under Articles 2, 3, and 4, where removal to half-pay has been the consequence of ill health caused by Military Service.

"6. A Captain, after at least six years' service, a Major, or a Lieutenant-Colonel, may be promoted to the next higher rank by brevet for distinguished service in the field or for distinguished service of an exceptional nature other than in the field.

"7. A certain number of Lieutenant-Colonels may be specially selected for increased pay for ability and merit.

"8. Promotion from the rank of Lieutenant-Colonel with increased pay to that of Colonel, and from the rank of Colonel to that of Surgeon General, shall be given by selection for ability and merit, and the grounds of such selection shall be stated to us in writing, and recorded in the office of our Secretary of State for India.

"9. A Lieutenant-Colonel may also be promoted to the rank of Colonel,
and a Colonel to the rank of Surgeon General, for distinguished service in the field. In any such case the officer shall remain supernumerary in the higher rank until the vacancy to which, in the ordinary course, he would have been promoted, or in the case of an officer promoted to the rank of Colonel, until selection for the rank of Surgeon General.

"'10. On appointment as Our Honorary Physician or Surgeon under Article 13,* an officer below the rank of Colonel shall be promoted to that rank, remaining supernumerary of his rank until he would have attained the rank of Colonel in ordinary course.

"'11. Exchanges between officers of Our Indian Medical Service and officers of Our Royal Army Medical Corps, below the rank of Major, and transfers of such officers from either of the above services to the other, shall be permitted subject to the approval of Our Secretary of State for War and of Our Secretary of State for India in Council, and on the following conditions:—

(1) that the officers shall have less than seven years' service;
(2) that the senior officer exchanging shall take the place of the junior on the Departmental List, and shall not be promoted under Article 3, 4, or 5 until the officer next above him shall have been so promoted;
(3) that the junior officer exchanging shall be placed for seniority next below all medical officers whose commissions have the same date as his own;
(4) that the officer transferred shall be placed for Seniority below all medical officers holding the same rank at the time of his transfer, and shall not be promoted under Article 3, 4, or 5 until the officer next above him shall have been promoted.

"'12. With a view to maintain the efficiency of the Service, medical officers shall be placed on the Retired List when they attain the following ages:—

<table>
<thead>
<tr>
<th>Rank</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon General</td>
<td>60</td>
</tr>
<tr>
<td>Colonel</td>
<td></td>
</tr>
<tr>
<td>Lieutenant-Colonel</td>
<td></td>
</tr>
<tr>
<td>Major</td>
<td>55</td>
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</table>

*But a Lieutenant-Colonel, who has been specially selected for increased pay, if he attains the age of 55 years before he becomes entitled to the pension for 30 years' service, may be retained until completion of such service; and in any special case where it would appear to be for the good of Our Service that an officer should be continued in employment, he may be so continued, subject in each case to the sanction of Our Secretary of State for India in Council.*

"'13. An officer appointed on and after the 11th September 1890, who may retire on pension before completing 30 years' service, shall be liable, till he completes 55 years of age, to be recalled to duty in case of emergency.

"'14. Six of the most meritorious medical officers of the service shall be named Our Honorary Physicians and six Our Honorary Surgeons.

"*Given at Our Court at Sandringham, this twenty-eighth day of November 1903, in the Third year of Our Reign.'*

* Printed 13 in I.M.D. Circ., should be 14.
By Govt. of India, Home Dept., Not. No. 300–307 Medical, of 19th March, 1904, republished in \textit{I.M.D. Circs.} for 1904, p. 9, the amount of leave allowable to officers of the I.M.S. holding administrative appointments was increased, as noted in Chap. XIX, \textit{Furlough and Leave} (Vol. I, p. 433).

Govt. of India, Mily. Dept., Not. No. 139, dated 17th Feb., 1905, republished in \textit{I.M.D. Circs.} for 1905, p. 3, sanctioned accelerated promotion to the rank of Major.

"\textit{Mily. Dept. Not. No. 139, dated 17th Feb., 1905.}

"With the approval of the Right Honble. the Secretary of State for India, the Governor General in Council is pleased to notify that the promotion of an officer of the Indian Medical Service to the rank of Major may be accelerated if he produces, while in the rank of Captain, satisfactory evidence of progress in any branch of knowledge which is likely to increase his efficiency, such as obtaining a higher degree or special qualification of repute or by furnishing proof of having pursued with diligence and advantage the serious study of an approved subject.

"2. The period of acceleration that may be granted is fixed at six months provisionally.

"3. Recommendations for acceleration of promotion under this order should be submitted through the usual channels to the Director General, Indian Medical Service, for the orders of the Government of India."

The means by which such accelerated promotion can be obtained were detailed, at considerable length, in Circ. No. 1 C of 14th Feb., 1906, from the Director General, I.M.S., published in \textit{I.M.D. Circs.} for 1906, p. 9. These orders lay down that the period of twelve years' service, necessary to attain the rank of Major, may be reduced by six months, in cases of an officer producing evidence of—

"(a) having passed while in the rank of Captain, a professional examination for a higher degree than any already possessed, or for a special qualification of repute, or

"(b) of having pursued a course of serious study in approved subjects for a minimum period of nine months."

This concession was further extended in 1911 by Secretary of State's Mily. Despatch No. 108 of 2nd Dec., 1910, to cases in which an officer who had been unable to take furlough and qualify for such promotion, before completing twelve years' service, might do so at any time up to the end of his sixteenth year's service. His promotion to Major is then antedated for six months, but without any claim to increase of pay for that period.
Govt. of India, Mily. Dept., Not. No. 179 of 3rd March, 1905, republished in *I.M.D. Circs.* for 1905, p. 4, introduced increased scales of leave pay for officers of the I.M.S. under the furlough rules of 1886. By these rules the furlough pay of the senior officers on military duty became considerably higher than that of those in civil employ. This order has been given in Chap. XIX, *Furlough and Leave* (Vol. I, p. 427).

The appointment of specialists in various subjects, with specialist pay at the rate of Rupees sixty per month, was ordered in India Army Order No. 433 of 1905, published in *I.M.D. Circs.* for 1905, pp. 18–20. This order has been given in Chap. XVIII, *Pay* (Vol. I, p. 302). Only officers in military employ, and only those below the rank of Lieut.-Colonel, are eligible for these appointments. Further orders on this subject were published in Letter No. 1933a, dated 8th June, 1907, from the Govt. of India, Army Dept., to the P.M.O., H.M.'s Forces in India, republished in *I.M.D. Circs.* for 1907, pp. 30–32.

The Royal Warrant of 28th June, 1905, was published in Mily. Dept. Not. No. 694 of 11th Aug., 1905, and will be found in *I.M.D. Circs.* for 1905, p. 23. In this Warrant were included the regulations for accelerated promotion to the rank of Major. It was also laid down that the Director General, I.M.S., shall have the substantive rank of Surgeon General, but may have that of Lieutenant-General, if approved by the Secretary of State.

"Royal Warrant, dated 28th June, 1905, to regulate the promotion and precedence of Officers of the Indian Medical Service.


"The Governor General in Council is pleased to direct the publication of the following Royal Warrant, dated 28th June 1905, amending the rules for promotion, &c., of officers of the Indian Medical Service, which were published in Military Department Notification No. 117 of 1904:—

"Edward R. and I.

"Whereas We deem it expedient to amend the rules for the promotion and precedence of Our Indian Medical Service.

"Our Will and Pleasure is that Our Warrant of the 28th November, 1903, shall be amended in accordance with the following provisions.

"1. The following shall be added to Article 1:

"The Director General of Our Indian Medical Service shall hold the substantive rank of Surgeon-General, but may rank as Lieutenant-General when approved by Our Secretary of State for India in Council."

"2. The following shall be substituted for Articles 3 and 4:

"(3) Except as otherwise herein provided, a Captain shall be promoted to the rank of Major on completing twelve years' full-pay service, but this period may be reduced by six months in the case of an
officer who produces satisfactory evidence of progress in any branch of knowledge which is likely to increase his efficiency.

"(4) Except as otherwise herein provided, a Major shall be promoted to the rank of Lieutenant-Colonel on completing eight years' full-pay service in the rank of Major."

"3. The following shall be added to Article 10:

"An officer below the rank of Colonel, who may be appointed as Our Honorary Physician or Surgeon after retirement from the Service, shall be granted the honorary rank of Colonel."

"4. The following shall be inserted in Article 12 at the head of the Table of Ages at which officers shall be placed on the retired list:"

"Director General —- 62."

"Given at Our Court of St. James' this twenty-eighth day of June, 1905, in the Fifth year of Our Reign."

"By His Majesty's Command, (Signed) St. John Brodrick."

A redistribution of military administrative medical appointments was made by Indian Army Order No. 492 of 1905, republished in *I.M.D. Circs.* for 1905, pp. 24, 25. This order introduced one change of much importance, viz., that in future all such appointments should be tenable by officers of either the R.A.M.C. or of the I.M.S., none being reserved for either Service, except that of P.M.O. of the Derajat Brigade, to be held by a Lieut.-Colonel of the I.M.S. The number, however, of officers of each Service who may hold such appointments is fixed, as is also the number of appointments tenable by officers of the Bengal, Madras, and Bombay Services respectively.

"*India Army Order No. 492 of 1905.*

The Governor General in Council has approved the following redistribution of administrative charges of principal Medical Officers, under the rank of Surgeon General, consequent on the redistribution of the Army.

<table>
<thead>
<tr>
<th>Commands</th>
<th>Divisions and Brigades</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northern Command</td>
<td>1st (Peshawar) Division</td>
<td>The Divisional Principal Medical Officer to administer the Nowshera and Mardan Brigades direct</td>
</tr>
<tr>
<td></td>
<td>2nd (Rawal Pindi) Division</td>
<td>Abbottabad and Sialkot Brigades</td>
</tr>
<tr>
<td></td>
<td>3rd Lahore Division</td>
<td>The Divisional Principal Medical Officer to administer the Multan and Ferozepore Brigades direct</td>
</tr>
<tr>
<td></td>
<td>Sirhind and Jullander Brigades</td>
<td>Kohat Brigade</td>
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<tr>
<td></td>
<td></td>
<td>Derajat and Bannu Brigades</td>
</tr>
<tr>
<td>Commands</td>
<td>Brigades and Divisions</td>
<td>Remarks</td>
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<tr>
<td>Western</td>
<td>4th (Quetta) Division&lt;br&gt;Karachi Brigade</td>
<td>Includes civil medical administration of Sind</td>
</tr>
<tr>
<td>Command</td>
<td>5th (Mhow) Division</td>
<td>The Divisional Principal Medical Officer to administer the Nasirabad Brigade direct</td>
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<tr>
<td></td>
<td>Jubbulpore and Jhansi Brigades</td>
<td></td>
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<tr>
<td></td>
<td>6th (Poona) Division</td>
<td>The Divisional Principal Medical Officer to administer the Ahmednagar and Belgaum Brigades direct</td>
</tr>
<tr>
<td>Eastern</td>
<td>Bonnay Brigade</td>
<td></td>
</tr>
<tr>
<td>Command</td>
<td>Aden Brigade</td>
<td></td>
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<tr>
<td></td>
<td>7th (Meerut) Division&lt;br&gt;Bareilly and Garhwal Brigades</td>
<td>The Divisional Principal Medical Officer to administer the Allahabad and Fyzabad Brigades direct</td>
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<tr>
<td></td>
<td>8th (Lucknow) Division</td>
<td>The Civil and Sanitary Commissioners’ duties hitherto performed by the Principal Medical Officer, Assam, to be now arranged for by the Civil Authorities</td>
</tr>
<tr>
<td></td>
<td>Presidency and Assam Brigades</td>
<td></td>
</tr>
<tr>
<td>Secunderabad</td>
<td>9th (Secunderabad) Division</td>
<td>The Divisional Principal Medical Officer to administer the Secunderabad and Madras Brigades direct</td>
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<tr>
<td>Division</td>
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<tr>
<td></td>
<td>Bangalore and Southern Brigades</td>
<td></td>
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<tr>
<td>Burma</td>
<td>Burma Division</td>
<td>The Divisional Principal Medical Officer to administer the Rangoon and Mandalay Brigades direct</td>
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<tr>
<td>Division</td>
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"Note. (1) With the exception of the administrative charge of the Deraqat and Danno Brigades, which is reserved for a Lieutenant-Colonel of the Indian Medical Service, all the above are Colonels’ appointments, to be divided equally between the Royal Army Medical Corps and Indian Medical Service, but no particular appointment will be reserved for either Service.

"(2) The revised arrangement will not affect the rule laid down in the footnote to paragraph 37, Army Regulations, India, Volume VI, (1904 edition). The Principal Medical Officers concerned will continue to be, as heretofore, visitors to lunatic asylums in their respective administrative areas."

Some changes have since been made in the distribution of these appointments, when the four Commands were abolished from 1st June, 1907, and the Indian Army reorganized in ten Divisions. The four appointments as P.M.O. of the four Commands were necessarily abolished. Two new appointments as P.M.O. were made, one for the Allahabad and Faizabad Brigades,
and one for the Sikandarabad Brigade; and a third as Deputy P.M.O., H.M.’s Forces in India. These changes were laid down in Army Order No. 247 of 30th May, 1907, republished in *I.M.D. Circs.* for 1907, p. 25.

"Extract from India Army Order No. 247, dated 30th May, 1907.

247. The Secretary of State having sanctioned the introduction of temporary and provisional arrangements in the Administrative Services, in consequence of the abolition of the Commands, the following temporary changes in those services will be made with effect from 1st June, 1907.

The permanent arrangement for the conduct of the duties in these services and for the remuneration of officers including those immediately affected by the abolition of the Commands will be notified hereafter when the details have received the approval of the Secretary of State.

"III—Medical.

(a) The appointments of Principal Medical Officer, Personal Assistant to the Principal Medical Officer, Sanitary Officer and Staff Officer, Army Bearer Corps, in each Command, and of Sanitary Officer and Staff Officer, Army Bearer Corps, in the Secunderabad Division and Burma will be abolished.

(b) The Principal Medical Officers of three of the Divisions will be Surgeon Generals, their pay being fixed at Rs.2,200 per mensem consolidated.

(c) Two temporary administrative posts will be created, each to be held by a Colonel, viz.—one for the Allahabad and Fyzabad Brigades, and the second for the Secunderabad Brigades (Infantry and Cavalry).

(d) A Colonel will be appointed Deputy to the Principal Medical Officer, His Majesty’s Forces in India, his pay being fixed at Rs.1800 a month consolidated.

(e) A Sanitary Officer will be appointed in each of the nine divisions and Burma, his staff pay being fixed at Rs.300 per mensem.

(f) A Staff Officer for Medical Mobilization Stores will be appointed in each of the nine divisions (excluding Burma), his staff pay being fixed at Rs.300 per mensem.

(g) Owing to the above changes the establishments of the Medical Services will be reduced by the number of officers corresponding to the number of cadre appointments abolished."

In 1911 a further change was made, a P.M.O. of the rank of Colonel being allotted to the Derajat and Bannu Brigades, while the post of P.M.O. of the Aden Brigade was fixed as that to be held by a Lieut. Colonel of the I.M.S.

Not. No. 74 of 13th July, 1906, by the Govt. of India, Mily. Supply Dept., (*I.M.D. Circs.* for 1906, pp. 24–26), made a change in the rules for the allotment of I.M.S. officers to commands. All officers entering the Service in future, at and after the second examination in 1906, became liable for military duty in any part
of India. For the purpose of civil employ, however, they were still allotted, as far as possible at their own choice, to four different areas, Madras, (including Burma); Bombay, (with Aden); Upper Provinces, (the Panjub, U.P. and C.P.); and Lower Provinces, (the two Bengals and Assam).

"Not. No. 74, dated the 13th July, 1906, by the Govt. of India, Dept. of Mily. Supply.

With the approval of the Secretary of State for India, the Governor General in Council is pleased to notify the following changes in the organization of the Indian Medical Service.

2. Prior to the date of the second examination in 1896, officers were appointed to one or other of the three presidential cadres, namely, Bengal, Madras, or Bombay. Under the present system, which was sanctioned in G.G.O. No. 260, dated the 6th March, 1896, officers were allotted to a military area, and while borne on one general list and liable in cases of emergency to serve anywhere, are ordinarily employed in the area to which they happen to be posted according to the choice exercised by them at the time of their passing into the service as determined by their position on the list with reference to the combined results of the preliminary and final examinations. This system of territorial allotment results in administrative difficulty and entails unnecessary expense when postings to regiments, transfers from military to civil employment, grant of leave and provision of substitutes have to be arranged for, and more recently the inconvenience has been accentuated owing to the liability of regiments to be moved in relief to any part of the country.

3. The three presidential and the general lists of officers of the Indian Medical Service will therefore be amalgamated, and while it will no longer be possible to allow officers already in the service to retain the lien on the military areas of their choice that they have hitherto possessed, they will retain the right to employment in a civil capacity, should they be candidates for such employment, within the civil areas for which they are at present eligible. They will also remain eligible for promotion to the administrative appointments, military and civil, carrying the rank of Surgeon General or Colonel, at present open to them in the lists on which their names have hitherto been respectively borne, and the distribution of the sanctioned number of selected Lieutenants-Colonels under paragraph 7 of the Royal Warrant of the 28th November 1903, among the officers on those lists will be maintained.

4. Officers admitted to the service with effect from the date of the second examination in 1906 will be borne on the amalgamated list and will be liable for military employment in any part of India. For the purpose of civil employment, however, they will be allowed, subject to the requirements of the service and according to their positions on the list as determined by the combined results of the preliminary and final examinations in London, a choice of the following civil areas:—

1. Madras.—To include Madras and Burma.
2. Bombay.—To include Bombay and Aden.
3. Upper Provinces.—To include the United Provinces of Agra and Oudh, the Panjub, and the Central Provinces.
4. Lower Provinces.—To include Bengal and Eastern Bengal and Assam.

"5. So far as civil employment is concerned, officers will ordinarily be employed in the areas to which they have been allotted as explained in paragraph 4 above, but in emergency will be liable for service in any part of India. They will, on first arrival in India, be posted as far as may be possible to the military Commands or Divisions within the civil areas of their choice, to enable them to become acquainted from the first with the language and people of the part of India in which they will in many cases serve ultimately in civil capacities.

"6. After arrival in India officers desirous of entering civil employment should as heretofore apply through the prescribed channel to the Director General, Indian Medical Service, to have their names registered for such employment within the areas to which they have been allotted."

In accordance with the above order, the names of all officers in the Bengal, Madras, and Bombay Medical Services were entered on one list, in order of seniority, in the Indian Army List of 1st Oct., 1906, and subsequent issues.

These orders were practically repeated in Govt. of India, Mily. Supply Dept., Not. No. 23 of 19th April, 1907, republished in I.M.D. Circs. for that year, p. 17. The chief difference made in this latter order was that choice of area for civil employ was no longer given.

The Royal Warrant of 13th March, 1908, was issued in Not. No. 27, dated 24th April, 1908, by the Govt. of India, Mily. Supply Dept., and republished in I.M.D. Circs. for 1908, pp. 13-16. It embodied all orders up to date, including the permission of exchanges with the R.A.M.C., (clause 11), from the warrant of 28th Nov., 1903; the optional grant of the rank of Lieut.-General to the Director General, (clause 1), the extension of the age for compulsory retirement, in the case of the Director General, to sixty-two (clause 12), and the grant of accelerated promotion, (clause 3), from the warrant of 28th June, 1905. It has now been superseded by the warrant of 3rd June, 1913.

In 1908 a pension of £600, after twenty-seven and a half years' service, was granted by Govt. of India, Mily. Supply Dept. Not. No. 82, dated 18th Sept. 1908, republished in I.M.D. Circs. for 1908, p. 35. This pension, intermediate between the £500 given at twenty-five years' and £700 at thirty years' service, was a valuable concession to the I.M.S., at the time. Subsequently, however, from 1st April, 1911, a graduated scale of pension was introduced rising by regular annual steps from £300 at seventeen years' to
£700 at thirty years’ service. These orders have been given in Chap. XX, Pensions (Vol. I, p. 448).

The publication in 1909 of the Secretary of State’s Despatch No. 225 of 11th Dec., 1908, advocating the restriction in numbers of the I.M.S., and the substitution of non-official private practitioners in their place, aroused considerable discussion. The consideration of this subject, however, may more suitably be taken up in Chap. XLII, The Future.

In 1912 the designations of the Military Administrative Medical appointments were changed. By Army Dept. letter No. 3980–1, (C.G.S.), of 23rd March, 1912, the following alterations were made.

The P.M.O., H.M.’s Forces in India, to be Director, Medical Services, Army Head Quarters, India; the Deputy P.M.O. to be Deputy Director; and the two Secretaries to the P.M.O. and the Sanitary Officers of Divisions to be Asst. Directors.

Army Dept. letter No. 2181–1, (D.M.S.), of 27th June, 1912, added the following:—P.M.O.’s of Divisions, with the rank of Surgeon General, to be Deputy Directors; other P.M.O.’s of Divisions and Brigades to be Asst. Directors; Sanitary Officers of Divisions and Staff Officers for Medical Mobilization Stores to be Deputy Asst. Directors.

Two subjects of considerable importance to the I.M.S., on which repeated orders were published from time to time during the period covered by this chapter, are, the grant of study leave, and the question of medical attendance upon Indian chiefs and noblemen, with the fees which may be accepted in such cases. These subjects have been discussed in Chap. XIX, Furlough and Leave, and in Chap. XVIII, Pay, respectively.

A new warrant for the I.M.S., dated 3rd June, 1913, was issued in the London Gazette of that date, and is given at full length below. It differs little from that of 13th March, 1908, the most important changes being the addition of a new clause, the second, under which an officer may be removed from the Service, if, during his first three years, his retention is considered undesirable; and the alteration in the wording of Clauses 3, 4, and 5, in which it is stated that officers after certain periods of service shall be eligible for promotion, not, as in former warrants, that they shall be promoted. Both changes are for the better, bringing the I.M.S. into line with the rest of the Army. Clause 14 of
this warrant also embodies the orders of 8th Aug., 1911, by which
the distinction of Honorary Physician and Surgeon to the King is
confined to officers on the active list. This change also involves
the omission of clause 10 of the warrant of 13th March, 1908,
which is partly cancelled, and partly transferred to clause 14 of
the new warrant.

"India Office, June 3rd, 1913.

"George R. and I.

"Whereas We deem it expedient to revise the rules for the promotion
and precedence of Our Indian Medical Service:

"Our Will and Pleasure is that the Warrant of Our late Royal Father
of the 13th March, 1908, and Our Warrant of the 8th August, 1911, be
cancelled, and that from and after this date the following rules shall be
established, and that by these rules our Viceroy and Governor-General
in Council shall be governed.

"1. The substantive ranks of Medical Officers in Our Indian Military
Forces shall be as follows:—

Surgeon General (ranking as Major-General).
Colonel.
Lieutenant-Colonel.
Major.
Captain.
Lieutenant.

"The Director General of our Indian Medical Service shall hold the
substantive rank of Surgeon-General, but may rank as Lieutenant-General
when approved by Our Secretary of State for India in Council.

"2. An officer will not be permitted to remain in the Service if at any
time during the first three years from the date of his first commission his
retention therein is, in the opinion of Our Secretary of State for India in
Council, undesirable.

"3. Except as otherwise herein provided, a Lieutenant shall be eligible
for promotion to the rank of Captain on completing three years' full pay
service, if he has previously passed such examinations as may be prescribed
by Our Secretary of State for India in Council, and is in all other respects
qualified and recommended. An officer who has not passed the prescribed
examinations may be provisionally promoted, if, in the opinion of Our
Governor-General of India in Council, he has not had a reasonable oppor-
tunity of passing. Such provisional promotion may be cancelled as soon
as he has had such opportunity and has not passed.

"4. Except as otherwise herein provided, a Captain shall be eligible,
if in all respects qualified and recommended, for promotion to the rank
of Major on completing nine years' full pay service in the rank of Captain.
This period may be reduced by six months in the case of an officer who
produces satisfactory evidence of progress in any branch of knowledge
which is likely to increase his efficiency. A Captain who may be prevented
by exigencies of the Service from obtaining an opportunity of qualifying
for such accelerated promotion shall have the concession open to him
or a period of four years after his promotion to the rank of Major in
ordinary course, but any antedate of promotion which may be granted shall be without adjustment of pay.

“5. Except as otherwise herein provided, a Major shall be eligible, it in all respects qualified and recommended, for promotion to the rank of Lieutenant-Colonel on completing eight years’ full pay service in the rank of Major, including any period covered by antedated promotion without adjustment of pay.

“6. Time on half-pay, not exceeding one year, shall be allowed to reckon as service for promotion under Articles 3, 4, and 5, if removal to half-pay has been the consequence of medical unfitness caused by duty, military or civil.

“7. A Captain after at least six years’ service, a Major or a Lieutenant-Colonel may be promoted to the next higher rank by brevet for distinguished service in the field or for meritorious or distinguished service of an exceptional nature other than in the field.

“8. A certain number of Lieutenant-Colonels may be specially selected for increased pay for ability and merit.

“9. Promotion from the rank of Lieutenant-Colonel with increased pay to that of Colonel, and from the rank of Colonel to that of Surgeon-General, shall be given by selection for ability and merit, and the grounds of such selection shall be stated to Us in writing, and recorded in the Office of Our Secretary of State for India.

“10. A Lieutenant-Colonel may also be promoted to the rank of Colonel, and a Colonel to the rank of Surgeon-General, for distinguished service in the field. In any such case the Officer shall remain supernumerary in the higher rank until the vacancy to which, in the ordinary course, he would have been promoted, or in the case of an Officer promoted to the rank of Colonel, until selection for the rank of Surgeon-General.

“11. Exchanges between Officers of Our Indian Medical Service and Officers of Our Royal Army Medical Corps, being of the same rank and below the rank of Major, and transfers of Officers below the rank of Major from either of the above-mentioned Services to the other, shall be permitted with the approval of Our Army Council and of Our Secretary of State for India in Council, and on the following conditions:—

“1. That the Officers have less than seven years’ service.

“2. That in the case of Captains their seniority for the purpose of exchange shall be determined as if they had been promoted after the period of service required for promotion to that rank in the Service into which they exchange, but that any alteration of date of rank made in pursuance of this provision shall be without adjustment of pay.

“3. Subject to (2) that the senior Officer exchanging takes the place of the junior on the list to which he exchanges, and shall not be promoted until the Officer next above him has been promoted or has been refused promotion in consequence of failure to qualify for it.

“4. Subject to (2) that the junior Officer exchanging is placed for seniority next below all Officers on the list to which he exchanges whose commissions have the same date as his own.

“5. That the Officer transferred is placed for seniority below all Officers holding the same rank at the time of his transfer, and shall not be promoted until the Officer next above him has been
promoted or has been refused promotion in consequence of failure to qualify for it.

12. With a view to maintaining the efficiency of the service, Medical Officers shall be placed on the Retired List when they attain the following ages:

- Director-General . . . . . . . . 62
- Surgeon-General . . . . . . . . 60
- Colonel . . . . . . . . 55
- Lieutenant-Colonel . . . . . . . . 55
- Major . . . . . . . . 55

"But a Lieutenant-Colonel who entered the service before the 1st April, 1911, and who has been specially selected for increased pay under Article 8 may, if he attains the age of 55 years before he becomes entitled to the pension for 30 years' service, be retained until the completion of such service, and in any special case where it would appear to be for the good of Our Service that an Officer should be continued in employment, he may be so continued, subject in each case to the sanction of Our Secretary of State for India in Council.

13. An Officer appointed after the 11th September, 1890, who may retire on pension before completing 30 years' service, shall be liable, till he completes 55 years of age, to be recalled to duty in case of emergency.

14. Six of the most meritorious Officers of Our Indian Medical Service on the Active List shall be named Our Honorary Physicians and six Our Honorary Surgeons, and they shall relinquish such appointment on retirement. On appointment as one of Our Honorary Physicians or Honorary Surgeons an Officer under the rank of Colonel in Our Indian Medical Service may be promoted to the brevet rank of Colonel.

"Given at Our Court at St. James's this twenty-eighth day of May, 1913, in the fourth year of Our Reign.

"By His Majesty's Command,—Crewe."
CHAPTER XL

GENERAL REMARKS

"If you've heard the East a-calling, you won't never heed naught else."

Kipling, Barrackroom Ballads, Mandalay.

Before concluding this account of the Indian Medical Service, it may be of interest to give some description of what life in that Service is like at the present time; or rather, perhaps, what it has been during the past thirty years. It is necessary, however, to mention that there are differences in the nature of the work in the dozen different provinces which make up British India, and that no general description can be accurate for all. The more exact it is for one province, the less so it must be for the others. The account given is based on experience almost confined to Bengal and Bihar.

Every officer of the I.M.S. is posted to military duty on first entering the service, and must do two years' military duty before he is eligible for civil employ. The majority apply for civil employment sooner or later, but some officers spend their whole service doing regimental duty; and others, after a longer or shorter trial of civil work, revert of their own choice to military employment.

The advantages of military employ are obvious, and are especially attractive to the younger members of the service. The work is usually not hard, except in times of war or epidemic; the pay is somewhat higher than in civil employ; there is always congenial society. For the regimental medical system is still in force in the Indian Army, the medical officer is one of the officers of the regiment to which he is posted, as much as any other officer in it, not a member of a separate department of his own, standing entirely outside regimental life. And, while there may be two opinions as to the relative efficiency of the departmental and the regimental system of medical administration, there can be only one as to which is socially the most pleasant for the
officers concerned. Against these advantages, however, various drawbacks must be set. The military medical officer is not likely to get anything more than his pay. In some cases, it is true, he may get charge of a cantonment hospital or of a small civil surgery or jail, in addition to his military duties, with extra pay for the extra work; but he cannot count upon such with any certainty. And, when such extra charges are to be had, they are usually given to the senior officer available. Again, the work in the hospital of a native regiment, while light, is often very uninteresting. There is next to no surgery, and the whole professional work sometimes resolves itself into the treatment of a few cases of fever, dysentery, blistered feet, or rheumatism. In such cases the medical officer is apt to become rusty and to lose interest in his profession. And even in regimental employment, life may be deadly dull, if stationed in a small outpost, with only one or two other European officers. Such duty usually falls upon junior officers. A few extra-regimental appointments are held by men in military employ; two Secretaryships to Surgeon Generals, four appointments as Staff Officer, and four Medical Store-keeperships.

On first entering civil employment, the disadvantages, to a young officer, are probably more in evidence than the advantages. It is necessary to begin at the bottom, and it is likely that the station to which a man who has just entered civil employ is first posted, is anything but a paradise. Naturally, the junior men get the least important stations, those in which the hospital is poorest and worst equipped, the allowances and the practice smallest, the social advantages least, and life most dull. And how dull and wearisome life may be in such a station, where his work is perhaps the only thing in which an officer can take an interest, only those who have experienced it can understand. Some such stations may afford an alleviation by fair sport, but by no means all. Such work falls heaviest on the junior officers, who are most likely to get it, and who feel it more than their seniors. Bengal, and especially Eastern Bengal, are the provinces in which these "penal settlements," as they are sometimes called, are most numerous and most unpleasant; on the other hand, civil employ in Bengal is probably more lucrative all round than in any other province, even the smallest stations affording some private practice. And the medical officer sees
less of such stations than officers of the other Services, the Civil Service and the Police; for the Civil Surgeoncies of a number of such stations are usually held by Military or Civil Assistant Surgeons. Nor is it likely that a doctor, as sometimes happens to men of the other Services, will be the only European in his station. Having related the disadvantages, it is necessary to display also the other side of the shield. The smallest stations are not necessarily the least healthy; some of them are fairly pleasant places to live in, if only there were a few more residents, and there may be good shooting. Moreover, an officer may expect before long to be removed to a better station, one pleasanter to live in or more lucrative. Appointments of very varied nature are held by men in civil employ, but the majority are doing the work of the ordinary District Civil Surgeon, in the regular line; the seniors and the men most highly thought of in the better stations, the juniors and those less highly considered in the worse stations. The ordinary Civil Surgeon’s work is extensive and varied, but not as a rule oppressive in amount, except in a few stations, or temporarily for exceptional reasons, such as a cholera epidemic in the jail. It is always much heavier than that of a military medical officer, under ordinary circumstances, and the pay is somewhat less; but the total income is greater, and the variety of the work lends interest to it; a man must be very indifferent to his work who cannot take an interest in some one or more branches thereof.

The Civil Surgeon’s first duty, when he begins his morning’s work, will probably be to visit his jail, of which he is Supt., as well as Medical Officer. Every civil station has a jail. But in some, about one out of every ten, the jail is a central jail, receiving the long-term prisoners from eight or ten other districts, as well as the ordinary crop of convicted criminals from its own district. Most central jails are too onerous a charge to be placed on a Civil Surgeon, in addition to his own work. Except a few of the smaller ones, each has therefore a medical officer as “whole time” Supt. In such cases the Civil Surgeon has nothing to do with the jail, no allowance, and no work nor responsibility. The ordinary district jail contains from 50 to 400 prisoners, usually over 200, and the jail allowance varies from Rs. 50 to Rs. 100 a month, according to the number of prisoners in the jail. The larger ones have, under the Supt., a staff of three native officials,
a jailor or darogha, an assistant jailor or naib darogha, and a Sub-Assistant Surgeon in subordinate charge of the jail hospital. Some of the smaller jails have no jailor, only the two other native officials. The warder guard, which also is under the orders of the Supt., varies in strength with the size of the jail. The jail will usually give the Civil Surgeon from one to two hours’ work a day, according to circumstances. A few of the smaller central jails are held by Civil Surgeons, in addition to their own duties, with a jail allowance of Rs. 300 a month.

From the jail the Civil Surgeon will probably go on to the hospital, where he will most likely have another hour’s work at the least, it may be two or three hours; sometimes, in times of pressure, even more. The time spent in hospital, however, depends a good deal on a man’s own enthusiasm and fondness for the work. In subordinate charge of the hospital he will usually find a Civil Assistant Surgeon, a graduate of one of the Indian Universities, a highly trained and educated officer, speaking English fluently, and generally quite competent to take charge of the hospital, and the other medical duties of the station, during the Civil Surgeon’s frequent absence on inspection duty. In some of the smaller hospitals the officer in subordinate charge is a Sub-Assistant Surgeon, a diplomate of one of the vernacular medical schools. Men of this class vary very much in their work and in their professional attainments; the best of them are very good, and it is usually the best who are serving in stations where there is no Assistant Surgeon. Almost all of them have enough knowledge of English to understand it and to make themselves understood. At the hospital the Civil Surgeon will probably do most of the operative surgery, though it is advisable to let the Assistant Surgeon also have a fair share of this, the most interesting part of the work, to keep up his interest and knowledge. The amount of operative surgery varies greatly in different places, with the locality, (e.g. stone is very common in some parts, almost unknown in others); with the equipment of the hospital, which must chiefly depend upon its income; with the skill and popularity of the Civil Surgeon and the Assistant Surgeon; and with the accessibility of a larger or more popular hospital.

Another daily duty of the Civil Surgeon is his office, where, with a native clerk to assist him, he will have to deal daily with a pile of correspondence, from the I.G. of Hospitals and Sanitary
Commissioner, from the Magistrate, from the dispensaries under him, from neighbouring Civil Surgeons, etc. Office work is seldom very urgent; it can usually be done, if preferred, in the afternoon. It occupies about an hour a day, sometimes more, but often less. The clerk is, as a rule, competent to prepare the numerous returns, which form the bane of the lives of most officers of all Services.

There will also be a police hospital in the station, which has to be visited daily. This seldom takes much time. A Sub-Assistant Surgeon is in subordinate charge, there are seldom many patients, and those sometimes not seriously ill. This can be fitted in when most convenient, according as it is near the jail, the hospital, etc.

A very important part of a Civil Surgeon's duties is the performance of medico-legal post-mortems. These, however, are not nearly so numerous as they were twenty years ago, though even now the majority never get the length of requiring evidence in court. A post-mortem should, as a rule, be done as soon as possible after the body has reached the mortuary, and the papers have been received by the Civil Surgeon from the police; though the time this work is done will depend more or less upon the locality of the mortuary, etc. If possible one will naturally prefer to do it after the hospital visit, rather than before. The Civil Surgeon always has the help of a dom or Sweeper in cutting up the body.

The time for visits to patients, official or private, will necessarily depend on various circumstances, such as the urgency of the case, the locality of the patient's residence, etc. Civil Surgeons have to attend gratuitously, at their own homes, as part of their duties, all civil officers at the headquarters of the district, European or native, whose pay is over Rs.250 a month. Attendance on wives and families is not gratuitous, but private practice, the usual arrangement being for a civil officer, whose wife and family are living with him, to pay the Civil Surgeon one week's pay in the year for medical attendance on them. Military officers are entitled to free medical attendance on their wives and families, as well as on themselves. In both cases medicines, such as are available, are supplied free by Government.

The Civil Surgeon is also ex-officio Supt. of Vaccination and Inspector of Factories in his district. As Supt. of Vaccination, he will have from 20 to 50 vaccinators, and from two to six native inspectors of vaccination under him. Vaccination work is done
almost entirely in the cold weather, between October and March. For the inspection of factories fees are paid by Government to the Civil Surgeon, Rs. 16 for each inspection, if the factory employs less than 200 hands, Rs. 32 if it employs over 200, as most of them do, the number in some running up to five or six thousand. In many, indeed in most districts, there are no factories, hence no factory inspection and no fees; in some few, the amount of fees averages Rs. 100 or even more monthly throughout the year. Factories should be inspected at least twice yearly. In some cases whole-time medical factory inspectors have now been appointed, under the new Factory Act of 1912. Probably, sooner or later, all factory inspection will be done by whole-time men.

In a very few districts the Civil Surgeon is Supt. of a Lunatic Asylum or of a vernacular Medical School, the allowance being usually Rs. 200 or Rs. 250 a month for each.

Every Civil Surgeon has to do a certain amount of touring and inspection work during the year, inspecting dispensaries and vaccination. The number of outlying dispensaries in a district varies from two or three up to about forty; it is usually from twelve to twenty; the more dispensaries, the heavier the office work. Theoretically he is supposed to inspect each dispensary four times a year, but where there are over twenty dispensaries this becomes an absolute impossibility, having due regard to work at headquarters. Practically, the amount of inspection work, so long as each dispensary is visited at least twice a year, is left very much to the Civil Surgeon's own energy and discretion. Vaccination inspection is done while visiting dispensaries in the cold weather. To inspect 3000 or 4000 cases of vaccination in the season is fair work; few do as much as 10,000. When travelling on duty, the Civil Surgeon receives travelling allowances at the same rates as other civil officers; double first-class fare by rail; by road eight annas a mile if he covers more than twenty miles in a day, five rupees a day when he does less, or when halting. The military officer, travelling on duty, receives a warrant, entitling him, and his family if he has one, to travel first class; he also is allowed to take with him, free of expense, several servants, a quantity of luggage, and, if he is a mounted officer, one or more horses.

The majority of the medical officers in civil employ are Civil
Surgeons of districts, but there are many other branches of civil medical work.

Some forty men are employed as Residency Surgeons under the Foreign Office, Surgeons to the Residents at Native Courts, etc. Some of these appointments are among the pleasantest open to the Service, some are also lucrative. Others are in desolate and distant places, "remote, unfriended, melancholy, slow." Naturally the seniors usually hold the best appointments. Either as a Civil Surgeon or as a Residency Surgeon, it may happen that a man never sees a bad station, but such a case is exceptional. An officer who retired ten years ago, with 33 years' service, got one of the pleasantest and most favourite Residency Surgeoncies at three years' service, held it for 25 years, and then put in his last five years as an I.G. of Civil Hospitals.

The Jail Department employs a considerable number of men. Its advantages are, higher pay than the regular line, a free house, service in fairly good stations, and the chance of becoming an I.G. of Jails, of whom there is one in each province, highly paid appointments, usually filled from the Jail Department. The disadvantages are monotony of work, and separation from professional, especially from surgical work.

The Professorships in the Medical Colleges are perhaps the appointments most sought after. They are by no means well paid, considering that they are supposed to attract the very best men in the Service, but lead to professional reputation, and usually carry with them a large, sometimes a very large, private practice. At the same time, the expenses of living in the Presidency towns are great, and the work of a man, who runs a large private practice, as well as holding a University Chair, and does his duty by both, is very hard indeed; while the amount earned is usually much exaggerated, as no doubt is also the case with the most successful men at home.

There are several junior appointments, in connection with the medical colleges and hospitals in the Presidency towns, which are well paid for the standing of the junior men who hold them, and give great opportunities for professional work, sometimes for professional reputation.

The Scientific appointments are few in number, but are usually well paid. The appointment of Supt. of the Calcutta Botanical Gardens is about the best, the officer holding it is also Government
Quinologist, and Professor of Botany in the Calcutta Medical College, and receives an extra Rs. 200 a month, as well as a good house, rent-free, in the Botanical Gardens at Sibpur, on the Hugli, opposite Calcutta. There is also a junior Botanical appointment, that of Curator of the Herbarium, the holder of which receives only grade pay and a house, but usually succeeds in turn to the higher appointment. There is a second Botanical Garden, at Saharanpur, in the United Provinces, the charge of which has been held by some of the most distinguished Botanists in the Service, Royle, Falconer, and Jameson, but for many years past the Supt. has not been a Service man.

Two appointments in the Natural History line are open, those of Supt. of the Calcutta Museum, with a good house in the Museum grounds, and Surgeon Naturalist to the Indian Marine Survey, serving on the Royal Indian Marine Steamer Investigator. These scientific appointments are sometimes, but not necessarily, held by men in the I.M.S. They have the great advantage that a man draws his pay, and that good pay, for pursuing his own tastes and hobbies; also that they are very independent positions, much more free from criticism than any appointment in the regular line of any Service.

The Chemical Department furnishes Professors of Chemistry and Chemical Examiners, one to each province. The appointments are congenial to those who have a taste for chemistry, but not highly paid.

There are a few Bacteriological appointments. Each medical college has a Professor of Pathology, who pursues this subject, and there are a few other appointments outside the colleges in the Research laboratories and in the Pasteur Institutes. Some of these appointments are held by men who do not belong to the I.M.S.

The Sanitary Department employs a good many officers, one Sanitary Commissioner for each province, with from one to three Deputy Sanitary Commissioners. The Sanitary Commissioners are usually officers of from twelve years' service upwards, and are well paid. The Deputy Sanitary Commissionships are neither very well paid nor very popular; men are generally ready to leave them for fair Civil Surgeoncies. The Sanitary Department requires better pay in the junior appointments to attract, and keep, good men. A few of the largest cities have special
Health officers, fairly well paid, who may or may not be Service men.

There are four appointments in the Mint, which have been usually held by I.M.S. men, those of Assay Master and Deputy Assay Master in the two mints, Calcutta and Bombay. The Assay Masterships are about the best paid appointments open to men in the I.M.S. They are always filled by the promotion of the Deputy Assay Masters, and these appointments require a special training, which few men entering the Service have undergone. These posts will probably, in future, be filled, not by officers of the I.M.S., but by specially qualified men, appointed from England.

During last century a good many men drifted off into employment in the "Commissions" of the non-regulation provinces, as Magistrates or Deputy Commissioners, but for the last thirty-five years no man in the I.M.S. has been thus employed. Several also served as Political Agents and Residents in the Political Department, but no I.M.S. man is so serving now; the last who did so was Sir George Robertson, of Chitral fame.

The length of service after which an officer may hope to obtain the substantive medical charge of a regiment varies from time to time, with the rates of retirement and promotion, but roughly may be taken as about four to five years. In the Indian Army List of 1st Jan., 1913, the senior officer shown as officiating in a regiment has six years' service, the most junior holding a permanent charge five years. These rates are rather slower than those which prevailed a few years ago; but much quicker than those of thirty years ago. In the cold weather of 1882-83 over fifty junior medical officers were on unemployed pay drawing the munificent sum of Rs.286 a month.

A medical officer, on entering civil employment, begins as an officiating Civil Surgeon, taking the place of a substantive Civil Surgeon absent on leave or deputation. The period during which he remains officiating before getting a substantive civil appointment varies greatly from time to time, but is seldom less than one year, or more than three years. Necessarily, it depends entirely upon the number of vacancies, by death, promotion, or retirement, which may occur among the Civil Surgeons of the province in which he is serving. An officer who has the substantive medical charge of a regiment, before he enters civil employ, may retain
a lien on his substantive regimental appointment for three years, if not confirmed in civil employ before the expiration of that time. On being so confirmed, or on completing three years' absence from his regiment, he is struck off his military appointment.

The number of first-class Civil Surgeoncies is not large. In Bengal, before the partition, there were six to some forty-five Civil Surgeoncies. In the U.P. and Oudh there are four out of about thirty-five, in the Panjab six out of about twenty-five. They are given by seniority and merit. Except in the Panjab, an officer can hardly hope to attain a first-class Civil Surgeoncy under twenty years' service. But while the pay of a second class Civil Surgeon is less than that of an officer of the same length of service in medical charge of a native regiment, the income of the former is almost always larger, sometimes much larger, than that of his contemporary in military employ. Almost every Civil Surgeoncy carries with it some allowance from Government, the charge of a jail at least, if nothing more. And there is always the chance of private practice; some at least in every station; while in each province there are several stations which may still be considered lucrative appointments.

Mortality and Longevity.—In former times the mortality of Europeans in India, of all services and of all ranks, was very high indeed, but it has now sunk to what may be called a normal level, and officers serving in India incur little more risk to life and health than at home. Though cholera, dysentery, malarial fever, or rather its sequelæ, and among the young especially enteric fever, still take their toll of life, the doctor in India escapes many risks which he has to take as a matter of course, at home; those of the ordinary infectious diseases of Europe, scarlet fever, diphtheria, etc., none of which can be called common, though most do occur, in India; and risks due to exposure, especially at night, in a cold climate.

Even in early times, however, many men put in long periods of Indian service, and survived to enjoy a prolonged period of retirement at home. Holwell, after nearly thirty years of hard service in India, with only one long and one short spell of absence in England, lived in retirement for over thirty-eight years. And his was by no means a solitary instance.

The table on p. 361 shows the names of twenty-five officers of the Bengal Medical Service, who entered between the years
1770 and 1846, all of whom put in at least seventeen years' service in India, and then lived for over thirty years in retirement. Some had spent much more than seventeen years in India. John Swiney served over thirty-six years, and then lived for thirty-three years more. John Bowron actually put in thirty-eight years, twelve in the Sub-Medical Department, and twenty-six as a commissioned officer, and then drew his pension for over forty-seven years. Instances could be quoted of men who lived for even a longer time after retirement. William Miller Buchanan was born on 22nd Jan., 1801, became Assistant Surgeon on 15th Dec., 1826, retired on 20th July, 1839, and died in London on 1st Jan., 1863, more than fifty-three years afterwards. Even men invalided have lived for a fair lifetime after they had been pensioned as unfit for further service. Two other men who entered in the same year, 1826, may be quoted as instances. David Brown Wardlaw was born in Jan., 1803, entered on 15th April, 1826, was pensioned on Lord Clive's Fund on 10th Dec., 1831, and died on 10th Aug., 1867. William Warlow was born on 18th May, 1803, entered on 22nd May, 1826, retired on Lord Clive's Fund on 31st Jan., 1835, and died on 22nd May, 1865. And the most singular case of all is that of William Woolley, who entered on 3rd Sept., 1799, was invalided on 1st June, 1813, settled at Serampur, a station now considered far from being a sanatorium, and died there more than half a century later, on 6th Nov., 1863.

Three members of the Bengal Medical Service have, within recent years, lived to over the age of one hundred. John Bowron, mentioned above, was born in Feb., 1799, entered the Sub-Medical Department as a medical pupil on 1st July, 1813, became Apothecary on 7th Sept., 1816, was promoted to a commission as Assistant Surgeon on 20th Dec., 1825, became Surgeon on 16th Dec., 1840, retired on 31st Dec., 1851, and died at Hove, having just completed his century, on 5th March, 1899. He served with his regiment, the 37th N.I., in the Panjab War of 1849.

Thomas Lambert Hinton was born on 1st May, 1808, the son of William Hinton of Daglingworth, Cirencester, entered as Assistant Surgeon on 30th Jan., 1842, resigned on 24th Oct., 1845, and settled in practice in England, where he was for many years Surgeon to Reading dispensary. He died at St. Leonards on 14th June, 1908. The careers of these two officers were, however, widely different. Hinton spent less than four years in
India; Bowron certainly about forty, and probably over fifty years.

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>Date of Entry</th>
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<tbody>
<tr>
<td>William Blanc, r.n.</td>
<td>22 Sept., 1770</td>
<td>4 Feb., 1793</td>
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<td>William Anderson</td>
<td>2 June, 1783</td>
<td>18 Dec., 1802</td>
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<td>David Nisbett</td>
<td>26 Sept., 1791</td>
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<td>William Mansell</td>
<td>20 Aug., 1801</td>
<td>8 Aug., 1826</td>
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<td>John Swiney</td>
<td>21 July, 1783</td>
<td>24 Aug., 1801</td>
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<td>John Crawford, r.n.</td>
<td>14 July, 1783</td>
<td>24 May, 1801</td>
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<td>James Watson</td>
<td>11 Sept., 1792</td>
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<td>Thomas Inglis</td>
<td>31 Mar., 1790</td>
<td>14 Mar., 1818</td>
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<td>Peter Carruthers</td>
<td>6 Dec., 1797</td>
<td>1 Jan., 1819</td>
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<tr>
<td>John Bowron</td>
<td>1 Feb., 1799</td>
<td>20 Dec., 1823</td>
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<tr>
<td>Francis Thompson</td>
<td>2 Nov., 1798</td>
<td>18 Aug., 1813</td>
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<td>James Al Junior</td>
<td>20 Oct., 1813</td>
<td>12 Dec., 1837</td>
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<td>William Shillito</td>
<td>3 Mar., 1816</td>
<td>2 July, 1834</td>
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<td>21 Dec., 1810</td>
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<td>Duncan Macar</td>
<td>8 Oct., 1819</td>
<td>24 Jan., 1839</td>
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<td>Warrock W. Wells, r.n.</td>
<td>21 July, 1810</td>
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<td>Charles Douglas</td>
<td>10 May, 1818</td>
<td>6 Oct., 1839</td>
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<td>Alex, Grant, r.n.</td>
<td>4 July, 1818</td>
<td>6 Oct., 1839</td>
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<td>Richard H. Ockley</td>
<td>4 July, 1818</td>
<td>4 July, 1839</td>
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<td>Hugh M. Macpherson</td>
<td>30 Aug., 1820</td>
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<td>Charles Hatherway</td>
<td>27 Mar., 1817</td>
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<td>Charles F. Warmeord</td>
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<td>John Squire</td>
<td>6 Nov., 1823</td>
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<tr>
<td>Thomas Maxwell</td>
<td>5 Nov., 1823</td>
<td>23 Jan., 1846</td>
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The senior officer now living, on the retired list of the I.M.S., is Surgeon Major Henry Benjamin Hinton. He was born on 7th March, 1813, the son of Benjamin Hudson Hinton, cashier in a Bank at Portsmouth. He took the M.R.C.S. in 1835, and got his commission as Assistant Surgeon, Bengal, on 14th Jan., 1839, becoming Surgeon on 31st Dec., 1852, and Surgeon Major on 14th Jan., 1859, and retiring on 7th March, 1868. After he left the Service he settled in Australia. He was serving in India at the time of the first Afghan war, though he did not himself take part in that campaign. His war services include Gwalior, 1843-44; the Sutlej campaign of 1845-46, when he was present in the actions of Badiwal, Aliwal, and Sobraon, receiving the medal and clasp; the Panjab campaign of 1848-49; and the second China war of 1858-60. He did not serve in the Mutiny.

It is curious that these two Hintons, the only two officers of that name who have served in the I.M.S., were almost exactly contemporary with each other; both lived to over one hundred years; yet they were not related to, nor even acquainted with each other.
Six other officers of the I.M.S. are still (Dec., 1913) shown as living, in the Indian Army List, who entered the Service prior to 1850, more than sixty years ago. In Chap. XXXVI, The Mutiny, a list is given of forty-two retired officers of the I.M.S. who entered the Service before Feb., 1858, and still survive. Twenty-six more who joined between May, 1858, and Oct., 1860, are also still shown on the retired list, making sixty-eight in all who entered before recruiting was temporarily suspended for five years in 1860, more than half a century ago.*

As the number of vacancies for the I.M.S. is seldom large, it is not easy to make a fair comparison as to the longevity of any considerable numbers. Before competitive examination was introduced, in 1855, the largest number of admissions to the Bengal Medical Service in any one year was fifty-nine, in 1826. Since 1855, the largest number of admissions to that Service at one examination has been twenty-eight, who entered on 30th March, 1872. These two groups may be taken as the subject of analysis. The men of 1826 have all long since died, those of 1872 have all retired. A period of nearly half a century divides the two groups. A glance will show how far the later group surpasses the earlier one, in longevity. Of the men of 1826, over one-half died while serving; of the men of 1872, under one-fourth.

As stated above, fifty-nine men were appointed in 1826. Of these, three never joined, and three left the service within the first ten years. These six may be left out of consideration, which leaves fifty-three available for comparative purposes. One man was transferred to Madras, but, as his career can easily be followed, he is included among the fifty-three. Wardlaw, Warlow, and Buchanan, who are mentioned above as instances of longevity, all entered in 1826. Wardlaw is one of the six left out of consideration; Warlow and Buchanan are included among the fifty-three.

Of these fifty-three men, no less than thirty-one died while serving, mostly in India, a few while on leave; twenty-two retired on pension.

Of the thirty-one who died, eight died with under five years'  

* Since the above was written, six of these officers have died: E. Sexton, on 25th June, 1913; J. Richardson, 13th Aug., 1913; W. S. Caldwell, 21st Sept., 1913; R. Byramji, 3rd Nov., 1913; Sir J. J. T. Lawrence, 22nd Dec., 1913; and W. Fry, 30th Dec., 1913.
service, including one killed in action and one drowned; eight with between five and ten years' service; eleven with between ten and twenty years'; and four with over twenty years' service.

Of the twenty-two who retired, three had between ten and fifteen years' service; fifteen from twenty to thirty years'; and four over thirty years', one of whom served for over forty years. These twenty-two men, of course, are all now dead. Five of them could not be traced. Of the remaining seventeen, one lived twenty-seven years after entering the Service, six from thirty to forty years, seven from forty to fifty years, and three over fifty years; the last survivor, W. M. Buchanan, sixty-seven years.

Curiously, not a single man of 1826 rose to the rank of S.S. or D.I.G. Two held professorships in the Calcutta Medical College.

We may now consider the twenty-eight men who entered on 30th March, 1872. Five of these twenty-eight were natives of India. Of the whole number, six died while serving, with one, one and a half, eight, fifteen, twenty, and twenty-five years' service respectively; the fourth and fifth being Indians. Twenty-two retired, one (an Indian) with seventeen years' service, four with twenty to twenty-five years', ten with twenty-five to thirty years', and seven with over thirty years' service. Of these twenty-two retired officers, eight have since died, and the Indian Army List of Jan., 1913, shows fourteen as still living, or exactly one half, more than forty years after they entered the Service. In the cases of the eight who have died since retirement, the periods which had elapsed since their admission to the Service were twenty-five years (in two cases), thirty-two, thirty-four (in two), thirty-five, thirty-nine, and forty years respectively.

One of these twenty-eight officers rose to be Surgeon-General, and four others to be Colonels; while two more officiated in the administrative grade for some time. Among the important posts held by some of these twenty-eight officers were those of Assay Master of the Calcutta Mint, Supt. of the Presidency General Hospital in Calcutta, Professor of Midwifery, Professor of Materia Medica, I.G. of Prisons in the U.P., Residency Surgeon of Haidarabad, and Civil Surgeon of Lucknow. Among them they have received one K.C.B., three C.B.'s, one D.S.O., and two Good Service Pensions, shared by four individuals.

Twelve men commissioned on the same date were posted to
Madras, none to Bombay. Of the twelve in Madras, six died while serving, with four, seven, fifteen, eighteen, twenty-six, and twenty-eight years' service respectively. Six have retired, of whom two have died since retirement, thirty-six and forty years respectively after entry. Four of the twelve rose to be Colonel, and one of them, Surgeon-General Sir Arthur Mudge Branfoot, to be K.C.I.E., and President of the India Office Medical Board.

The I.M.S. contrasted with other medical careers.—How do the prospects of a man entering the I.M.S. compare with those of his contemporaries who adopt other branches of the medical profession? The R.A.M.C. offers about as much pay; the chance of serving in other parts of the world, South Africa, the Mediterranean, the West Indies, etc., and varying periods of home service; as against the liberal furlough granted to the I.M.S. On the other hand, the I.M.S. offers many interesting and many lucrative appointments in the Civil Departments, and considerably better chances of earning both money and professional distinction, as well as higher pensions.

There can be no question that, as regards pay and pension, the I.M.S. offers a better career than the Colonial Surgeoncies; and while the climate of some of the Colonies is better than that of most parts of India, that of others is worse than India at its worst.

The pay and pensions of the I.M.S. are also better than those of the Medical Department of the Royal Navy, the chief advantage of which is the great opportunity it affords of seeing the world. On the other hand, medical, like executive officers of the Royal Navy, are liable to be placed on half pay when the "commission" of the ship in which they are serving comes to an end, and discipline afloat is much stricter and more severe than in the land forces.

As regards the public medical services in England, the Prison Service, the Lunacy Service, etc., the I.M.S. offers better pay, prospects, and pension; coupled, of course, with service in India instead of at home.

But, after all, the great majority of newly qualified medical men embark upon private practice at home; and the chief question for the man who is thinking of entering the I.M.S. must be—how do his prospects in England compare with those of the Service? Well, the I.M.S. does not offer the great prizes which
lie open to the most successful men at home. But how many men attain these prizes? Not one in a hundred; and even in the case of those who do grasp the highest prizes, the fullest success, open to the medical profession, "These men begin to earn late, and their earning years are short. Sir Thomas Watson never earned £500 in fees till he was fifty, Sir James Paget never took £400 till he was forty-seven. Their work was personal, and their harvest time short." [Sir Constantine Holman's speech at the Festival dinner of the Royal Medical Benevolent College, Epsom, June 10th, 1903, quoted in British Medical Journal of 13th June, 1903, pp. 1461-2.] In short, the men who attain the highest prizes in England begin to earn a living at an age little earlier than that at which a man in the I.M.S. may be thinking of retiring on a fair pension.

Setting aside the few who attain to the most brilliant success, at least as much money may be earned, and more professional reputation achieved at home than in India. But even those who reach what may be called the second rank in England are comparatively few in number. And a man may achieve considerable distinction in his profession, as a member of the staff of a hospital, before he is earning a fair income. No doubt, the latter will come, if he lives long enough. But who can guarantee that? And if his earning days do not come before his death, he leaves little provision for his family.

It seems clear that the great majority of men in private practice can never hope to achieve much professional distinction, or any considerable fortune. A comfortable income, and a moderate provision for those they leave behind, is the most which can be expected, even by the comparatively successful. And for them there is no early retirement in middle life; that comes only to the fortunate few; most medical men die in harness, a very large proportion at an age earlier than that at which they would even wish to retire.

What about the bulk of the profession? A writer in the British Medical Journal some time ago calculated the average income of the medical practitioner at home as £150 a year, tending to decrease. This really seems too bad to be true. For, if it includes on one hand the large number of young men who are working for next to nothing, for board only as Residents, or for small salaries as Assistants, it also includes those who have
reached the fullest success. But even if the above statement be an exaggeration, as it is to be hoped it is, the facts are unpleasant enough. For years past the medical journals have teemed with reports upon "contract practice," in which the medical officer of a club attends its members for a penny a week, four shillings and fourpence a year, sometimes even less; struggling, often without success, to raise the amount to five or six shillings. And, to judge from these reports, in many places the majority of the medical men do more or less of such club work. The miserable payment for poor law work in England is well known. The Irish dispensary doctors were recently trying to get certain terms from their employers, not less than £200 a year for a dispensary district, £120 for a workhouse, or £300 for the two together, with a small superannuation pension at the age of 65. (British Medical Journal, 27th June, 1903, p. 1518). Many of these appointments are to districts in which private practice is nil, a few pounds as medical officer of health or in vaccination fees is all that the dispensary doctor can hope to earn over and above his regular salary; possibly, if he has a workhouse, £350 in all. In other words, he hopes to get as a permanency, about the amount on which the newly joined officer of the I.M.S. begins. In the British Medical Journal of 27th June, 1903, Dr. J. Fletcher Little, L.C.C., speaks forcibly of the present condition of the average general practitioner in England as follows:

"The long and costly training; the arduous nature of the work, by night as well as by day; the inevitable and heavy expenses; the few prizes, and the small average net incomes; the strictly personal and precarious character of the work, which causes all earnings to cease during illness or incapacity; the short average of life, which is less than that of other professions, such as the clerical and the legal; the warning increase of insanity from the intolerable strain." . . . &c.

Surely the I.M.S., with all risks, offers a better prospect than this.

The terms offered by Government under the National Insurance Act of 1911 appear to be only a little better than those of the old contract practice. And, to judge from the correspondence in the medical journals, this is the opinion of the majority of those affected. The man who depended entirely or chiefly upon club practice has gained considerably; the other general practitioners have lost. On the other hand, the pecuniary value of
the newly qualified medical man, i.e. the salary which such a man may expect to earn, has fully doubled during the past generation.

Some men start under more favourable circumstances, sons or nephews of men in good practice, which they may hope, when qualified, to share, and to which they will probably eventually succeed. To such men the Services, as a rule, do not appeal. Yet the eldest sons of three medical Baronets, all leaders of the profession, have entered the Services, the sons of Sir Robert Christison and Sir William Lawrence in the I.M.S., the son of Sir Andrew Clark in the R.A.M.C. Only the first of the three, however, put in the full period of service.

In the preceding pages an endeavour has been made to set forth fairly the prospects which the I.M.S. offers to those who join its ranks; not concealing its disadvantages, which are many; while setting forth its advantages, which are more. Service in the I.M.S. means work; man earns his living by the sweat of his brow, nowhere more literally so than in India. Of course, it involves a long residence, to use the harshest word, "exile," in India; but exile tempered by a liberal allowance of fairly paid furlough. No man need enter the I.M.S. now-a-days expecting to make his fortune; though, using the word fortune in a moderate sense, even in recent times some few men may be said to have done so. The days of great fortunes to be made in Indian service, such as Joseph Hume's £40,000 in twelve years as an Assistant Surgeon, have gone long ago, and gone for ever. Even a century ago, fortunes were usually made, not by practice, but by trade and contracts. A man who enters the I.M.S. should do so with a mind made up not to waste his time and his energies in futile regrets that the career he has deliberately chosen involves service abroad instead of at home; nor grudgingly to compare his own position and prospects with those of the most successful of his contemporaries in England, while he forgets those who have failed to attain success, or who have hopelessly gone under; but to take the rough with the smooth; to worry through hard times in hope of the better times which are sure to come, sooner or later; and to do his best for the country, for its inhabitants, and for the Government, as well as for himself. He will find open to him a career with plenty of interesting work, not always hard work; pay at once sufficient to maintain him as a bachelor, and
sufficient in a few years to enable him to marry *; pay steadily increasing as his length of service, and, if married, his necessary expenses increase; some provision for his family if he falls by the way; and finally a pension, in its earlier stages sufficient to live upon while he gets his footing, if he makes up his mind to retire early, before he is too old to start on a new career; in its later stages, if he prefers to hold on in the Service, sufficient to maintain him in comfort after retirement.

Many, it is to be hoped the majority, of those who have served in the I.M.S. in recent years, will endorse the opinions expressed above. Many, on the other hand, will not do so. Every profession has its share of discontented men, and the Indian Army is no exception to the rule. Unfortunately, many of those who serve in India never have "heard the East a-calling."

This book does not profess to describe the development of medicine and surgery under British rule. But it is impossible to avoid mentioning a few important advances. Edward Hare, in 1847-50, introduced the practice of giving quinine in fevers, without waiting for remission, and the adoption of this treatment saved many lives, and put an end to the custom of bleeding in fevers. Hare was one of the most distinguished medical officers of the past generation. He was born on 26th Dec., 1812, educated at King's College, London, and at Middlesex Hospital, took the M.R.C.S. and L.S.A. in 1837, and received a commission as Assistant Surgeon, Bengal, on 24th Feb., 1839. He became Surgeon on 15th March, 1853. Surgeon Major on 24th Feb., 1859, and D.I.G. on 23rd March, 1864, retiring on 10th Dec., 1866. He received the C.S.I. on 16th Sept., 1867, and died at Bath on 13th Feb., 1897. He had a fine record of war service, beginning with the first Afghan War in 1840-42, when he served at Kabul in 1840, at Jalgah and Parwandarra in the Kohistan campaign under General Sale in the same year, in Sale's defence of Jalalabad, and on Sir George Pollock's staff at the reoccupation of Kabul, was mentioned in despatches in the London Gazette of 9th Aug., 1842, received the thanks of Government, and the Afghan and Jalalabad medals. In the second Burmese War in 1852 he served in medical charge of the First European Bengal Fusiliers, was present at

* It is possible for a man to marry on his pay when he first joins, but usually to do so, without private means, involves a struggle, and considerable discomfort. In what other profession would a man ever expect to get pay or income sufficient to justify him in marrying on first starting?
the recapture of Pegu, and received the medal. In the Mutiny he served in medical charge of the Second European Bengal Fusiliers throughout the siege of Delhi, including the action of Badli-ka-Sarai, and the final assault and capture of the city; was mentioned in despatches in G.O. of 5th Nov., 1857, and in the *London Gazette* of 15th Dec., 1857, and received the medal. Hare's life has been written by his son, Lieut.-Colonel E. C. Hare, I.M.S., in a little volume, *Memoirs of Edward Hare, C.S.I.*, published in 1900.

Henry Vandyke Carter, (Bo. 27th Jan., 1858), who, before he entered the I.M.S., while Demonstrator of Anatomy at St. George's, had, jointly with the author, made the dissections for Gray's *Anatomy*, and drawn the woodcuts which illustrate that work; when in India worked out the origin and development of the disease known as famine fever, relapsing fever, or spirillum fever. He also did important work on Leprosy, Elephantiasis, and Mycetoma. He retired on 31st Aug., 1888, was appointed Honorary Surgeon to the Queen on 8th Nov., 1890, and died at Scarborough on 4th May, 1897.

The work of Sir Ronald Ross on the origin of malarial fever, and that of Lieut.-Colonel P. J. Freyer in the development of the operations of litholapaxy and prostatectomy, have been noted in Chap. XXXI, *After Retirement*. In connection with litholapaxy the names of D. F. Keegan, (B. 31st March, 1866), and of J. F. Keith, (B. 30th Sept., 1867), should also be mentioned; and, indeed, many others.

Lastly must be mentioned the important work done in Calcutta by Lieut.-Colonel Leonard Rogers, C.I.E., on cholera, dysentery, and liver abscess, by the introduction of improved methods of treatment of these diseases which have notably lowered their mortality. In 1905, when he had barely twelve years' service, Rogers was elected a Fellow of the Royal College of Physicians, London, a distinction which few members of the I.M.S. have obtained, and none at so early an age.

A few remarks may be made, in conclusion, on the subject of medical men in India, other than officers of the I.M.S. For the first century and a half after the establishment of the East India Company, from 1600 to 1754, the only European medical men in India, besides the Company's servants, were the medical officers of the other East India Companies, French, Dutch, and Danish.
and a few stray individuals, of various nationalities, in the service of native princes.

Medical officers of the British Army made their first appearance in India in 1754, when for the first time a British regiment of the line was employed under the Company. This regiment was that now known as the first battalion of the Dorsetshire regiment, formerly the 39th Foot, which has as its motto *Primi in Indis*. This regiment was raised by General Richard Coote in 1702, and in its first half-century of existence, before it came to India, served in the Peninsula from 1709 to 1712, in the war of the Spanish Succession, and in 1727 took part in the defence of Gibraltar. The regiment also served in the more famous defence of Gibraltar in 1778, where it earned its crest, a castle and key. During this second siege the 39th became the East Middlesex regiment, and in 1807 the Dorsetshire regiment. When it came to India its Commanding Officer, Colonel John Adlereon, after whom it was often known as Adlereon's regiment, was appointed Commander-in-Chief of the Company's troops, superseding one of India's famous soldiers, Major Stringer Lawrence. In 1757 it took part in the Battle of Plassey. Since that time, a century and a half ago, officers of the A.M.D., now the R.A.M.C., have served in India side by side with those of the I.M.S., and have done their full share of the medical work of the Army in India, in peace and in war.

During the last half-century a good many medical men have been employed by Government, in special appointments, who were members neither of the I.M.S. nor of the Uncovenanted Medical Service. As instances may be mentioned Sir Joseph Hooker, Dr. John Anderson, Sir George Watt, and Dr. Haffkine.

Sir Joseph Hooker, when in 1848–50 he carried out the explorations which are described in his *Himalayan Journals*, was in the service of Government, in so far that he held a commission in the Navy, and received a salary which covered about one half of his expenses in the journey. He was born in 1817, and graduated as M.D. at Glasgow in 1839, and in the same year received a commission as Assistant Surgeon in the Royal Navy, to serve with the Antarctic Expedition of 1839–43, under Sir James Ross, in the *Erebus* and *Terror*. He became Assistant Director of the Royal Botanical Gardens at Kew in 1855, and succeeded his father as Director in 1865, holding the post until 1885. In 1877 he received
the K.C.S.I.; and from 1873 to 1878 he was President of the Royal Society. He died on 10th Dec., 1911.*

Dr. John Anderson, who took the M.D. at Edinburgh in 1862, was appointed Supt. of the Indian Museum in Calcutta in 1864. He accompanied Colonel Sladen's expedition to Upper Burma in 1867, reaching Momein in Yunnan. His experiences in this journey were described in a book, *Mandalay to Momein*, 1876. He was also the author of a work entitled *A History of English Intercourse with Siam in the Seventeenth Century*, in Trübner's Oriental Series. He was elected F.R.S. in 1870, received the degree of L.L.D. Edinburgh in 1885, retired in 1886, and died at Matlock on 15th Aug., 1900.

Sir George Watt, M.D., entered the Bengal Educational Department in 1873, and served as Professor in the Presidency, Hugli, and Patna Colleges. In 1884 he was posted to the Revenue and Agricultural Department, and in 1887 was appointed Reporter on Economic Products. While holding that post he compiled the *Dictionary of Indian Economic Products*. He received the C.I.E. in June, 1886, was knighted on 1st Jan., 1903, and retired in April, 1906.

European medical men, not in the service of Government, but practising their profession on their own account, seem to have been found in the Presidency towns since about the first half of the eighteenth century. Until a much later period, however, most of these private practitioners were men hoping to get appointments in the Company's service; and most of them, sooner or later, appear to have succeeded in so doing. It is only within the last half-century that the services of private practitioners of established reputation have been available to the public, even in the chief cities. During that period several such practitioners have met with much success, in the acquisition both of reputation, and, presumably, of a competence.

During the last half-century also many Indian medical men have earned considerable reputation and met with much success in practice, especially in the Presidency towns. All had received their medical education in Indian Colleges, though some have also visited England, and added European diplomas to their original Indian qualifications.

There are two special branches of medical work in the East, which must not pass without notice; Medical Missions and the work of lady doctors. Whatever may be thought of the utility or efficacy of general missionary effort in India, none can deny the success of Medical Missions; both in the benefits conferred upon their patients by their professional work, and in the opening made by that work for the other aims of their missions. The development of Medical Missions in India dates from the second quarter of the nineteenth century, though a few individuals had combined medical with missionary work at an earlier date. Probably the first to do so was John Thomas, who made two voyages to India as Surgeon of the Indiaman Earl of Oxford in 1783-84 and in 1786-87. He worked as a missionary in Malda for three years, and translated part of the New Testament into Bengali. Returning to England in 1792, he joined the newly formed Baptist Missionary Society, and went back to India with Carey in 1793. Subsequently he managed indigo factories in Malda and Dinajpur, carrying on both medical and missionary work at the same time. He died in Dinajpur in Oct., 1801.

Another very early medical missionary was John Taylor, who took the degree of M.D. at Edinburgh in 1804, and went out to Madras in the London Missionary Society in 1805. He was appointed to act as an Assistant Surgeon in the Bombay Service from 20th Feb., 1808, and confirmed from 26th March, 1809. He died at Shiraz on 6th Dec., 1821.

The first regular Medical Missions seem to have been those founded and supported by citizens of the United States in Southern India between 1830 and 1840. Since then the work has prospered and increased. Medical Missions in India for Jan., 1917, gives a list of 332 medical missionaries serving in India and Ceylon at that date, including those on furlough and those holding Indian University qualifications. Workers of many nationalities and of both sexes go to make up the total; no less than 195, considerably over one half of the whole number, are women.

Where hundreds have done good work, it is almost superfluous to mention any individual by name. But it is impossible to omit to name the late Dr. Theodore Leighton Penuell of Bannu.*

* For much of the above information about Medical Missions in India I am indebted to the Indian Medical Missionary Handbook; to Dr. A. Macnicol, of Leven, Fife, formerly of the United Free Church Rural Bengal Mission at Kalna; and to Dr. J. M. Macphail, of Bamdeh, Chakai, of the Sontal Mission of the same Church.
Lady doctors are a more modern development. It was in connection with Medical Missions that they first made their appearance in India. The earliest appears to have been Miss C. Swain, M.D., who joined the American Methodist Episcopal Mission in Northern India in 1860, and worked for some time at Bareli, and subsequently at Khetri, in Jaipur. The employment of medical women in India, however, received a great impetus from the foundation of the Dufferin Fund, by the wife of the Viceroy, in 1885. The great majority of lady doctors in India are working either under the Dufferin Fund, or in Medical Missions, though there are a few private practitioners in the large towns.
CHAPTER XLI

THE FUTURE

Τῶνα θέων ὑπὸ γυναικῶν κτίσαν


Lord Morley, then Secretary of State for India, in his despatch No. 137, dated 9th Aug., 1907, to the Government of India, suggested that the time had come to promote the growth of an independent medical profession in India by throwing open to the profession in general some of the various civil appointments now held by members of the Indian Medical Service. The Indian Government, in their letter No. 20, of 20th Aug., 1908, accepted in principle the recommendations of the Secretary of State, but pointed out difficulties in the way, and stated that progress in this direction must be slow and tentative. The Secretary of State, in his despatch No. 225 of 11th Dec., 1908, decided that the time had come when no further increase in the cadre of the civil branch of the Service could be allowed, and when a strong effort must be made to reduce the numbers of the Service by the employment of Indian private practitioners in their place.

These papers were published in 1909, and gave rise to considerable discussion and difference of opinion. The Government of India referred the question to the various Provincial Administrations for their opinions, which were strongly against the proposed changes. As the matter is one of considerable importance to the country and to the Government, as well as to the Service, the correspondence is quoted below at length.

"Despatch from the Secretary of State for India to the Governor-General of India in Council, No. 137, dated 9th Aug., 1907.

(Extract.)

"I desire to invite the attention of Your Excellency's Government to Lord George Hamilton's Despatches, Military, No. 5, 18th January, 1900, and Public, No. 157, 13th December, 1900. In the closing paragraph of the last Dispatch my Predecessor observed: 'It would be of such great
benefit to India generally that medical men should establish themselves in private practice in the country in the same way as they do in other parts of Her Majesty's Empire without entering the medical service connected with the Army, that I am unwilling to accept proposals based upon the assumption that sufficient medical qualifications will never be found in India or elsewhere outside the Indian Medical Service. I am not aware that this part of my Predecessor's Despatch has ever formed the subject of a communication from the Government of India, but I am confident that the policy indicated in it will generally have the hearty support of Your Excellency as it has mine. I shall be glad to be informed whether any steps have yet been taken to give effect to that policy, and whether any further measures are in contemplation for promoting the growth of an independent medical profession in India."

"Letter from the Government of India in the Home Department to the Right Honourable the Secretary of State for India, No. 29, dated 20th Aug., 1908.

(Extract.)

"We have the honour to refer to Your Lordship's Despatch No. 137 (Military), dated the 9th August, 1907, regarding the measures which have been taken or are in contemplation for promoting the growth of an independent medical profession in India. We desire, in the first place, to explain why we have not replied at an earlier date. Last year we addressed local Governments on the subject of creating appointments of medical officers of health in both urban and rural areas, and we suggested that these posts should, whenever possible, be filled by Indian medical men outside the Indian Medical Service. We felt that the reception given to this proposal would assist us in replying to the despatch, but as only one local Government has as yet favoured us with its opinion, and as we learn that Your Lordship desires an early expression of our views, we proceed to state the general conclusions at which we have arrived. We are in entire sympathy with the desire to promote the growth of an independent medical profession in India, and we recognise the important bearing upon this question of Lord George Hamilton's suggestion that advantage should be taken of the creation of new medical appointments to provide for the admission of independent practitioners either to the new appointments or to some of the posts which are regarded as reserved for members of the Indian Medical Service. One essential restriction, however, upon any reduction of the numbers of that service is that its strength must always be sufficient to meet the medical requirements of the Indian Army. In order that it may do this effectually it is necessary that it should include a large reserve of officers whose services would be available on the outbreak of war; and, as a measure of economy, these reserve officers must in peace time be employed on civil duties. It appears, however, from inquiries we have made, that about one-third of the officers holding these civil posts could not be spared for military duty even in the event of an emergency so grave as to require a general mobilisation of the army in India. To the extent of about one-third, therefore, the officers in civil employ do not form any part of the real war reserve, and there would be no military objections to the transfer to independent practitioners of the civil appointments held by them. We have accordingly to consider whether there are objections on other grounds to such a transfer. The posts referred to include certain
administrative offices which must continue to be held by senior members of the Indian Medical Service. They also include some of the more important of the civil surgeoncies, superintendencies of lunatic asylums, appointments in the Assay department, the Chemical Analyst's department, and the Bacteriological department, and about half the professorial appointments in the various medical colleges. With regard to the last-mentioned appointments it has been urged that any large reduction in the number of such posts reserved for members of the Indian Medical Service would seriously diminish the attractiveness of that service and produce a deterioration in the quality of the candidates. We admit that this argument would have considerable force if it were contemplated to deprive the Indian Medical Service of the full number of these appointments at one stroke, but there is no possibility of qualified candidates being forthcoming at present for more than a very small proportion of them, and we do not anticipate that the exclusion of these few posts will have any appreciable effect upon recruitment. By the time that a larger number of qualified candidates is forthcoming it is probable that the number of medical schools and professional chairs will also have increased, and there will, therefore, be no difficulty in retaining for the Indian Medical Service a proportion of prize appointments sufficient to maintain its attractiveness. The attainment of the object which Your Lordship and ourselves alike have in view depends, then, upon the possibility of finding in this country medical practitioners qualified to hold the appointments which could be thrown open to them. There would undoubtedly be no difficulty in securing the services of private practitioners who are qualified to fill the less important civil surgeoncies, but unfortunately these are just the appointments in which the war-reserve officers of the Indian Medical Service can most suitably be employed, and the transfer of these surgeoncies from that Service might, therefore, cause some embarrassment and lead to increased expenditure. For the more important appointments of civil surgeon, the bacteriological and other special posts, and the professional chairs, very few qualified candidates could at present be found. It is in our opinion of the highest importance and essential to the growth of a really efficient independent medical profession that the present high character of the instruction given in the medical colleges in India should be maintained unimpaired. Any diminution of efficiency in that direction would go far to defeat the object in view, and would most certainly retard the more general employment of independent practitioners. Subject, however, to this essential condition of efficiency, we are quite willing to appoint such practitioners to professional posts whenever fully qualified candidates are forthcoming. We shall also be prepared to appoint qualified medical gentlemen outside the ranks of the Indian Medical Service to other posts which are not required for the employment of the war-reserve of medical officers. We desire to impress upon Your Lordship the excellent work which has been and is being done by the medical schools in India. The majority of the students who pass through those schools do already take to private practice, and in this way an independent medical profession is gradually being created. The general average of attainments of these men is not, it is true, equal to that of the officers of the Indian Medical Service, but each generation of students is better than its predecessor, and provided nothing is done to lower in any way the standard of instruction given in the medical colleges, there is every reason to hope that this progressive
improvement will be maintained. Your Lordship will observe that in the preceding paragraphs we have considered the question only with reference to the general medical profession in India. We have done so because we consider that it is an essential condition of the introduction of any scheme for the gradual opening of civil medical appointments now reserved for the Indian Medical Service to the general medical profession that qualified candidates should be available among the natives of this country or the domiciled community. The appointment of English medical men recruited in England would lead to serious practical difficulties, as these gentlemen would require leave to England in the same way as members of the Indian Medical Service, and, if we did not form a leave reserve of men similarly recruited, we should find ourselves in an embarrassing position when they were granted leave. Further, to recruit medical practitioners in England and form a leave reserve would in effect be to create a second medical service, which would doubtless put forward claims to be treated in precisely the same way as the Indian Medical Service, and which would do nothing to promote the growth of an independent medical profession in this country. If European medical officers are required for any particular appointment or class of appointments they can, in our opinion, most advantageously be supplied by the Indian Medical Service. We desire to remark incidentally that we anticipate that difficulties may arise from the appointment of independent medical practitioners to particular posts, such as civil surgeons. Owing to the multiplicity of gratuitous services which are demanded of civil surgeons, it is quite possible that, if private practitioners are appointed, patients entitled to such services may not infrequently complain of neglect. At present it is comparatively easy to deal with such complaints, but when the civil surgeon is not a member of a particular service, and so liable to transfer, but an independent practitioner permanently resident in the station, it will be difficult if the complaints prove to be well-founded, to provide any adequate remedy short of his removal from office, and his replacement either by another independent practitioner, if one is available, or by an officer of the Indian Medical Service. These difficulties, however, are not, we believe, insuperable, and they will tend to diminish with the increase in the number of practitioners who are qualified to hold such appointments and anxious to obtain them. In conclusion, we desire to repeat the considerations which, in our opinion, must govern any advance in the direction indicated in Your Lordship's despatch, viz., (1) that the advance should be very gradual and tentative and in the main, though not exclusively, from the bottom, (2) that it should be made only as really qualified candidates become available in India, (3) that nothing should be done to lower the efficiency of the medical schools and their hospitals, (4) that a sufficient number of civil appointments be reserved to provide for the economical employment of the war-reserve of the Indian Medical Service, and (5) that, in determining what these appointments should be, the necessity of maintaining the attractiveness of the Indian Medical Service should be borne in mind. When Your Lordship has placed us in possession of your views upon our proposals we shall address local Governments upon the whole subject, and in due course communicate to you the result of our further consideration of the points discussed with them."
Despatch from the Secretary of State for India to the Governor General of India in Council, No. 225, dated 11th Dec., 1908.

My Lord,—In connection with Your Excellency's despatch in the Home Department, No. 20, dated 20th August, 1908, I have given consideration in Council to the question whether further steps can be taken to promote the growth of an independent medical profession in India by throwing open to the profession in general some of the various civil appointments now held by officers of the Indian Medical Service and other similar appointments which may be created in future.

2. I observe with satisfaction that your Government are in accord with the object I have in view. As regards the means to be adopted for attaining that object, I concur generally in the principles laid down at the end of your despatch, and shall be glad to learn, after you have received and considered the opinions of the Local Governments, what measures you can propose in order to give effect to them.

3. Since 1899 successive Secretaries of State have drawn attention to the objections to indefinite extension of the cadre of the Indian Medical Service for the purpose of providing for miscellaneous appointments for which that Service, though it may offer well-qualified candidates, is not the only, and may not be the most economical, source of supply. Notwithstanding the necessity for restriction, the cadre of the Indian Medical Service has in recent years continued to increase, and, apart from other objections, its further increase will be likely to cause serious difficulties in the matter of recruiting. I have consequently decided that the time has now arrived when no further increase of the civil side of the service can be allowed, and when a strong effort should be made to reduce it by gradually extending the employment of civil medical practitioners recruited in India.

4. Your Excellency's Government will consider what appointments can best be filled in this way. If there should be any particular posts requiring special qualifications, for which suitable persons, whether trained in Indian colleges or holding European medical degrees, be they European, Eurasian, or Indian, cannot be obtained in India, it will be necessary to seek candidates from this country.

5. When it is found impossible to obtain a man from outside the Indian Medical Service to fill a particular new civil appointment, or one which has not previously been so filled, I will not object to the present to that Service being drawn upon; but the vacancy so caused must be filled from outside it, i.e., no appointment must be made in succession which would involve an addition to the cadre of the Indian Medical Service.—I have, &c.,

(Signed) Morley of Blackburn.

It appears that two different questions are more or less combined in these proposals; first, the employment of medical officers of Indian instead of those of European extraction; and, second, the employment of independent practitioners in the place of members of a regular graded service. As it is unlikely that independent practitioners will in future be recruited from Europe, except perhaps for a few highly specialised appointments, the
second involves the first. But the first need not, and should not, involve the second.

It is admitted that the military branch of the I.M.S. cannot be replaced by an indigenous Service; also that it will be necessary, at least for a long time to come, to retain in the hands of the present Service numerous civil appointments of three descriptions. First, most of the more important teaching appointments in the different Medical Colleges. If an indigenous Service, or profession, is to take the place of the present (mainly) imported Service, it becomes all the more necessary that those who are to train the future holders of the posts now filled by the I.M.S., should be the best men who can be got for the purpose. And in this connection it must be remembered that Indian members of the I.M.S. have before now held professorships with credit and success, and no doubt will do so again. Second, the more important of the other civil appointments, whose holders could not be spared for military duty, even in time of war, without being replaced. Third, a certain number of the less important civil appointments, whose holders form a reserve for war. If these are deducted, what remains to be handed over to the non-official practitioner? Only a certain number of the less important Civil Surgeoncies, with some appointments in the Sanitary Department, and some of what are called the minor professorships in the Medical Colleges.

To a certain extent this policy has already been carried out. During the last ten or twelve years the number of posts of District Medical Officer in the hands of Civil Assistant Surgeons has been increased; by the reorganization of the Sanitary Department carried out in 1912 many of the posts in that department have been thrown open to qualified Indians, not in the I.M.S.; and a Civil Assistant Surgeon has recently been appointed to a professorship in Calcutta.

As most of the posts handed over will probably be Civil Surgeoncies, it may be useful to enumerate the regular ordinary duties of the Civil Surgeon.

(i). The superintendence of the chief, or sadr, dispensary at the headquarters of the district, the entire responsibility for its management, and the performance of a fair share of the professional work, especially of the major surgical operations. To this is added, in many stations, the superintendence of a female
hospital, whose medical officer is usually a female practitioner of the
the Sub-Assistant Surgeon class.
(ii). The superintendence, as well as the medical charge, of a
jail, which may be of considerable size, (400 or 500 prisoners),
and must take up a good deal of time.
(iii). Medical attendance on the other officials in the station,
and also on their wives and families, if any. The latter may
be called private work, but it is work which cannot be declined.
(iv). Post-mortem examinations, and other medico-legal work,
with the necessary evidence in Court entailed thereby.
(v). Charge of police hospital, including examination of
recruits, a light duty in some districts, fairly heavy in others.
(vi). The health officership, ex officio, of the headquarters
municipality.
(vii). Membership of the headquarters municipality.
(viii). Membership of the District Board, and of at least one
sub-committee.
(ix). Office, including returns, correspondence, and grant
of medical certificates of health, sickness, etc.; the latter an
important, and in some districts a frequent duty.
(x). Inspection of outlying dispensaries, from five or six up to
twenty or thirty; in most cases quarterly.
(xi). Inspection of vaccination, not only in the headquarters
station, but also throughout the district.
There are also various other duties in some districts, inspection
of factories, inspection of emigrants, superintendence of a lunatic
asylum or of a vernacular medical school; inspection of tea
gardens, (in Assam), etc. Of course in no district do all of these
extra duties occur, in most districts not more than one or two,
in many none.
As a general rule, the smaller the district, the less the work.
And for many years past members of both the Military and Civil
Sub-medical Services have held charge, as Civil Surgeons, of
some of the smaller districts in every, or in almost every province,
and have done so with credit to themselves and with satisfaction
to the Government. But these men have always been the pick
of their own Services, the best men chosen out of several hundreds
in these Services. It will be a very different matter to hand over
the numerous and important duties of the Civil Surgeon to a
casual private practitioner. Much of the Civil Surgeon's work
is only remotely connected with the practice of medicine and surgery, and all of these other duties will be quite new and strange to the private practitioner, however well qualified in his profession. Indeed, it is in the performance of these extra duties, more than in the actual professional work, that the outsider is likely to fail.

For this reason it would appear to be best that, if posts now held by members of the I.M.S. were handed over to local graduates, the men to hold them should be selected entirely, or almost entirely, from the existing Provincial Medical Services. Most of the members of these Services have had some experience of the duties of a Civil Surgeon, either at headquarters, during the Civil Surgeon's absence on tour, or on a smaller scale in a subdivision. As regards Indians who obtain European qualifications in Great Britain, they, if not too old for appointment in Government Service, have the opportunity of competing for the I.M.S.

The proposed change may be considered from four points of view; first, that of the Government; second, that of the country in general; third, that of the other Government Services; fourth, that of the I.M.S. itself.

As regards the first, that of Government, the interest of Government may be summed up in two words, efficiency and economy, of which the first is the more important. If the question is asked, whether the proposed changes will be conducive to efficiency, the answer must be emphatically in the negative. The work, though done more cheaply, would be less well done. This again applies less to the regular professional duties, those of the hospital and attendance on patients, than to the others. More especially would loss of efficiency be manifest in the management of jails, in medico-legal, and in certificate work.

It may be said that the new type of Civil Surgeon would not be appointed to the office of Supt., but only to that of Medical Officer, of the jail. This system has been tried already, both in central and in district jails, and has failed in both. Almost every feature in the management of a jail, diet, punishment, work, is a medical matter. The non-medical Supt. cannot move without the help of the medical officer, the medical officer is powerless without the Supt. Such a system of divided authority is a fruitful source of friction and delay.
The native of India, especially if he has not had the advantage of some training in Europe, is often wanting in a sense of duty; and is very subject to the tyranny of caste and to social influences. For this latter one cannot blame him. Few Englishmen realize how great these influences are, and how difficult, one might say how impossible it is, for any Indian, official or non-official, to defy or to thwart them. The boycott is a far more effective weapon in India than ever it was in Ireland.

As regards the question of economy, it may be admitted that the cost of an indigenous would be less than that of an imported Service. But economy consists, not simply in getting work done, in some fashion, more cheaply than before; but in getting it done more cheaply and not less well than before. It is false economy to pay a lower price, if one gets an inferior article.

It may be pointed out also that, if local graduates were substituted for the present Service, it would be better, both for Government and for the public, that the officers thus appointed should be formed into a regular graded service, than that they should be casual units, each man engaged to fill a particular post for as long as he chooses to hold it, and Government chooses to employ him. A regular service, with periodical increments of pay, is of course more expensive than the engagement of individuals, for it implies expense for leave pay and for pension, though a provident fund might be substituted for the latter. But over the men who form a graded service Government has a hold. Each man may hope by good work to get a better post, or may fear to lose by bad work what he has already got. But over the man casually employed his employer has little or no hold. He has little in the way of leave, and no pension, to lose. If it suits him to throw up his work without notice, he will probably do so, whatever the inconvenience to his employer.

The second point of view is that of the country in general, more important even than that of the Government. Here, even more than in the case of Government, the first consideration is efficiency. Economy is a poor second, for the amount saved would be a mere drop in the bucket in the cost of administration. That the change proposed would be welcomed by the men who might hope to get the appointments vacated, is obvious. But they are a very small factor in the population. Would such a change be in the interest of the great majority, of the dumb
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millions, whose voices are heard in no Boards or Councils, on no platforms? If the change is really to their advantage, *cadit quæstio*. If not, the reverse answer must be given.

From the third point of view, that of the members of the other Government Services, the new scheme looks worst of all. That the members of the European Services prefer a doctor of their own class for themselves, and still more for their wives and families, cannot be gainsaid. The preference may be sentimental, no doubt to a certain extent it is so, but it exists. And it has some reason, too, apart from sentiment. For the native practitioner, however skilled, is often apt to lose his head at a critical moment, rather than to rise to a sense of responsibility. The social side of the question will also affect the other Services, though Government can hardly be expected to take this into consideration. The withdrawal of one, out of two or three, officers in a small station, makes life much less pleasant to the one or two left.

The fourth and last point of view is that of the I.M.S. itself, the least important of the four, except to the members of that Service. And it seems that, out of all concerned, the members of the I.M.S. stand to lose least by such a change. The proposed changes would be introduced only by degrees, and mainly from the bottom. If the less attractive appointments are cut off, if fewer posts remain available, at least those which are left will be in every way better worth holding. The chief loss to the I.M.S. would be the somewhat diminished opportunity of gaining experience.

Whether such a change would affect recruiting, either for the I.M.S. or for the other Services, must remain to be seen. Opinions may well differ. It certainly seems, that there is no reason why it should affect recruiting for the I.M.S.; but that there is good reason why it should affect recruiting for the other European Services. In some provinces, Civil Officers have already, in many stations, little chance of obtaining European medical attendance for their families and for themselves. And it seems likely that this drawback to an Indian career will be in future increased in importance. Such is the logical conclusion. But, human nature being what it is, the actual effect may, not improbably, be exactly the reverse. Recruiting for the I.M.S. may be affected, because such a change would appear to diminish the prospects of that
Service; while the candidate for the other Services would probably never hear of the orders, or, if he did hear of them, never give a thought to how they might affect his own future career.*

The whole question of the "Morley scheme" appears, for the present, to have receded into the background. But it is bound to come to the front again, sooner or later. The Royal Commission on the Public Services in India, which began work in Dec., 1912, has taken the subject into consideration in 1913. And changes, in the direction pointed out in the Secretary of State's despatch, are certain to come in time. Whether these changes will be for good or for evil is a matter of opinion. The numbers of the I.M.S. may be somewhat reduced, in course of time. But it is practically certain that the prospects of the individuals in the Service will not be injured by any such changes.

Another change which is clearly foreshadowed as inevitable, is the substitution of the station hospital system for regimental hospitals in the Indian Army. A Committee, of which the P.M.O. of His Majesty's Forces in India and the Director General of the I.M.S. were both members, was appointed in 1910 to consider the question. This committee, it appears, reported in favour of the change; but little action has yet been taken, on account of the opposition of the Financial Department, as increased efficiency would probably involve increase of expenditure. The reform, however, is only postponed.

The chief argument in favour of the old regimental system is that it is one congenial to the Indian Army. Both officers and men prefer to have, as their medical attendant in sickness, an officer whom they know, and consider as one of themselves, rather than a stranger from an alien department or corps. And, in an army recruited by voluntary enlistment, the preferences of the soldier are a matter of considerable importance. On the other side are even more weighty arguments. First, that the station hospital system is the more efficient of the two, providing a more modern and up-to-date treatment than is possible in small independent regimental hospitals. Second, that the regimental

* Most of the above comments on the "Morley scheme" are taken from a paper contributed four years ago to the *Indian Medical Gazette*, and published as a leading article in that journal in Aug., 1909, pp. 300-303. The results of the entrance examination for the I.M.S. in July, 1913, seem to show that recruiting has been affected.
medical officer, unless his energy and zeal are more than common, is apt, in the course of years, to lose touch with his profession. As his age and length of service increase, his rank and his pay steadily rise, but his responsibilities do not grow, as do those of men of every other Service. The Lieutenant-Colonel finds his responsibilities and his duties exactly the same as they were twenty years before. Indeed he may, quite possibly, have had harder work and greater responsibility at five years' service than at twenty-five. If he goes on leave, he may hand over charge to a Lieutenant, who will do the same work that he has been doing, and will do it just as well.

Forty years ago, in 1874, the regimental medical system in the British Army passed away. It died regretted, but it died. And no one would now seriously suggest its revival. In the Indian Army also the regimental system is bound to go. Most of those who have served as Surgeons to a regiment will regret the passing of the old system, which has lasted over a century and a half, under which the Surgeon was an officer of a particular regiment, sharing in and proud of the regimental traditions and history, rather than a member of an independent Service. But modern progress, like the car of Jagannath, passes relentlessly over all that stands in the way of efficiency. The regimental hospital system has outlived its usefulness, and must before long pass away into the limbo of things that have been; while its epitaph must be, not Resurgam, but Requiesscat in pace.

A step in this direction has already been taken, in 1912, by the introduction of the combined hospital system in some fifty cantonments, including such important stations as Peshawar, Rawal Pindi, Lucknow, Sikandarabad, and Bangalore. The combined hospital is, however, far short of the station hospital in administration and equipment.

A closer and more intimate relationship between the two branches of the Service, military and civil, in the future, is desirable. How this is to be brought about is not yet apparent.

A scheme for such closer relationship might be sketched somewhat on the following lines. The chief desideratum is, that officers should not remain permanently, as they now do, either in civil or in military employment. Every officer, with only a few exceptions, should be transferred at intervals from one branch to the other, and back again. It would require an
actuarial calculation, probably of no great difficulty, to fix the relative lengths of these periods. Taking the total numbers of the Service as between 750 and 800, of whom a certain fixed number are required, in time of peace, for military duty, and another fixed number for civil employ, with about twenty-five per cent. as a reserve; it would be necessary to calculate what the respective number of years spent by each officer, during a term of thirty years, (or of twenty, or twenty-five, or of any other number of years), in military and in civil employ respectively, should be. Probably it would work out as about three years' military to four years' civil duty. An officer would begin his career, as he does now, with a tour of military duty. After a fixed tour of such duty he would be transferred, as a matter of course, to civil employ. After another fixed tour of civil employ, he would return to military duty; and so on.

Furlough, it may be objected, would create a difficulty. Not necessarily. It would, indeed, be necessary to equalize military and civil furlough pay. At present the medical officer in civil employ draws higher furlough pay, under civil rules, than his contemporary in military employ, for the first half of his service, or rather longer; while the military officer has much the best of it in his later years. It would be necessary that both should draw the same rates of furlough pay, according to length of service. As regards taking furlough, most men would probably try to take their leave at the end of a tour of duty, military or civil. Should an officer take leave in the middle of such a tour, he would simply have to complete that tour of duty, military or civil, on his return, before making his next change.

Some exceptions to the general rule would doubtless be necessary. Certain appointments require certain special qualifications. And to employ men, specially competent in certain lines, on work which could be done equally well by others without those qualifications, is to waste their special attainments. Such appointments as those of Supt. of the Botanical Gardens, or of the Museum, those in the Chemical and the Bacteriological Departments, possibly also Professorships in the Medical Colleges, should be held by specialists, doing their own special work continuously, and not liable to transfer to the regular line, either military or civil. But all such officers, holding special
appointments, should be seconded from the Service, and ineligible for promotion to the administrative ranks.

Officers over a certain length of service, say twenty or twenty-five years, might also be allowed to remain, for the rest of their service, in military or civil employ, as they might prefer, without affecting their eligibility for promotion.

Some such scheme of alternate military and civil employ could be worked without any great difficulty. But there is little doubt that it would be unpopular with the Service. It could not therefore be imposed; without hardship or injustice, on those already serving. But there would be no hardship and no difficulty involved, were such a scheme approved, in bringing it into force for all who should enter the Service after a certain date. True, it would take twenty years, perhaps rather longer, to bring all the members of the Service under the new scheme. But twenty years, while a long spell in the life of the individual, is but a short period in the history of the I.M.S. or of the Indian Army.

Another subject of interest, not so much to the I.M.S. as to the medical profession in India, which is now pressing on the public and on Government its claims for attention, is Registration. The first Medical Registration Act, under which the General Medical Council was formed, and a medical register instituted, was passed in England in 1858. A second Act was passed in 1886, under which direct representatives of the profession, elected by general vote, were added to the Medical Council, formerly entirely composed of delegates from the various licensing bodies, and of Crown nominees. A similar Registration Act, setting up a Medical Council, which would keep up a medical register of qualified practitioners, is much needed in India, and seems likely to become law within the next few years.

The first move in this direction was made by a private practitioner in Calcutta, the late Dr. J. R. Wallace, who, about 1898, published a medical directory of qualified medical men in India, in connection with the Indian Medical Record, of which he was proprietor and editor. This directory, of course, had no official standing, and it was very incomplete; still it contained much useful information. A few years later a Register of qualified practitioners in Bengal was published by the Inspector General of Civil Hospitals of that province, and has since been issued, at
first annually, and then triennially. This register was fuller than Wallace’s, but was still incomplete, and, having no legal authority, was for information only. Also it dealt with the province of Bengal only.*

In 1912 a Medical Registration Act was passed in Bombay, a Medical Council for that province has been formed, and held its first meeting on 24th Sept., 1912. A medical register for the province of Bombay will presumably be issued before long. Other provinces will perhaps wait and see how the Bombay Act works, before passing similar acts of their own.

It is to be hoped, however, that legislation in this direction will be Imperial, not provincial. The Dominion of Canada has lately afforded a useful object lesson of this necessity. In British North America the regulation of medical education and practice was among the subjects under provincial control; and difficulty was experienced in getting the consent of all the different provinces to the passing of a Registration Act applicable to the whole Dominion. This was not effected until 1912. Before that year a man, qualified to practise in one province, was not permitted to practise in another, until he had fulfilled the conditions required in that province. Each province might, or might not, recognize the qualifications given in another province; while none of them were in any way bound to recognize British degrees or diplomas. It is not to be desired that a similar condition of affairs should arise in India, under which perhaps Bengal and Bombay might refuse to recognize each other’s degrees; but might find a common ground for union in declining to recognize those given in Great Britain.

No medical registration act could possibly be passed in India which would prohibit practice by unqualified men. To begin with, it would be impossible either to recognize the followers of the indigenous systems of medicine, kobirajes, baidis, and hakims, as qualified men, or to prevent them from attending those who prefer their services. But it would be easy to limit to men on the register certain privileges, such as the power to sue for fees, to give certificates recognized in courts of law or by superior officers, and to fill posts in the service of Government or of local bodies.

* A new and more complete Medical Directory for India is now (1913) under preparation by Messrs. Thacker, Spink, & Co.
Lastly may be mentioned another medical development of importance to India, one for which a demand is now being made, a demand which, it is to be hoped, will be met in the near future. This is, a regular graded female medical Service, working under Government, on lines similar to those of the civil branch of the I.M.S. Such a Service would, of course, be purely civil, it would have no connection with military hospitals, in peace or in war. Medical women have effected much during the short time, barely forty years, for which they have worked in India. But so far only the fringe of the need of such work has been touched. The medical women in India belong chiefly to two special classes, serving either under the Dufferin Fund or in Medical Missions. Both classes treat chiefly, though not exclusively, women of the lower orders. Both the Dufferin Fund and the missions suffer from want of funds, and want of workers in sufficient numbers. At present the great majority of Indian women, to put it mildly, dislike male medical attendance. Except in the lower classes, the majority will either absolutely refuse such attendance, or will put it off until too late.

What is required is a regular graded Service of Lady Doctors, maintained and paid by the State, as the Civil Surgeons are maintained and paid. This want is not supplied, except very imperfectly, either by the Dufferin Fund or by Medical Missions. Missions have their own special aims, not exclusively professional.

The numbers serving under the Dufferin Fund are comparatively small, and those employed by that fund have little to look forward to in the way of future prospects. Pay which may be amply sufficient for a doctor, male or female, to start with, is not sufficient for the same individual ten or twenty years later. Prospects of regular promotion and increase of pay are necessary to induce capable practitioners to devote their lives to the work.

Such a Service might be divided into grades, with regular increase of pay, after five, ten, fifteen years' service, etc.; or the pay might be personal, fixed at rates rising by smaller increments each year, without the division into grades. The women admitted into such a Service should either have European diplomas, or in some cases those of Indian Universities might be accepted, certainly nothing lower. At present most of the female hospitals in India are officered by women trained, or supposed to be trained, up to the standard of Sub-Assistant Surgeons (formerly Hospital
Assistants) holding diplomas from the vernacular medical schools. These women, with few exceptions, are not equal to independent charge of a hospital. The female hospital, therefore, is under the superintendence of the Civil Surgeon. He must visit it regularly to see that the work goes on properly. But the fact that the Civil Surgeon, a man, visits the hospital regularly, is fatal to the very object with which female hospitals are kept up. Even so, his supervision is necessarily imperfect, for he is always liable to be told that any particular patient is a parda woman, who will not see him. Some pardanishins are treated in hospitals of this class, but the great majority of the patients are women of the lower orders, who do not profess to keep the parda. The above remarks, of course, do not apply to those hospitals, numerous, but still far too few, which are under the charge of properly qualified lady doctors.

If such a Service were started, there would be little difficulty in attracting recruits, at rates of pay, moderate to begin with, if regular increments at fixed periods were assured, with definite and reasonable prospects of furlough and pension. The senior and the more skilful members of the Service would naturally, as in the case of the I.M.S., rise to the charge of the more important hospitals. In each province there should be an administrative head of the Female Service, whose duty it should be to visit and inspect all the female hospitals in the province, and who should have no actual professional work, though she might be allowed to take consulting practice. This Inspector should work under the A.M.O. of the province. And the local female hospitals should be removed from the superintendence of the Civil Surgeon, who, while deprived of authority in them, should equally be freed from all responsibility in connection with these hospitals.

It has recently been announced that Government have decided against a State Medical Service of Lady Doctors, but have determined to subsidize the Dufferin Fund to the extent of £10,000 annually, to enable that body to give better terms of pay, leave, etc. This is a step in the right direction, but falls far short of what is required to make this Service really satisfactory and satisfied.
CHAPTER XLII

HOSPITALS IN INDIA

"And, above the packed and pestilential town, Death looked down."

Kipling, Departmental Duties, A Tale of Two Cities.

The first hospital in India appears to have been that at Goa, mentioned in Fryer's Travels. The first hospital at Madras was opened about 1664; the establishment of a hospital at Bombay was under discussion in 1670, but apparently it was not actually opened till 1676; the earliest hospital in Calcutta dates from 1707–08.

It will be most convenient to consider Indian hospitals geographically, taking each Presidency separately, in turn; the hospitals in each Presidency town being dealt with more or less in chronological order.

I. Bombay.

The first suggestion of a hospital in Bombay seems to have been made in 1670. In the Surat Diaries, Vol. III, 1669–75, is given a Commission of instructions, dated Bombay, 5th March, 1669–70, showing that it had been determined to build a hospital in the town.

"Commission of instructions, Bombay, 5th March, 1669/70. The necessary tender wee have for the health of our people hath put us on a resolution to build a small hospital for entertainment of the sick and weaker sorts rather because experience hath proved the natural disease of the Country to be infectious and therefore dangerous to the Garrison, whereas we have pitched on a convenient place for the 8th hospital and desire you to order it to be erected in a frugal way as may consist with prudence, but though the Compay are at your charge of building the hospital, yet those at your command receive the benefit thereof must bear their own expenses otherwise not to be admitted."

Apparently the project of opening a hospital hung fire for several years. The Minutes of the Bombay Council, dated 23rd Nov., 1675, contained in Bombay Diaries, Vol. II, 1674–81, direct that two models, apparently rather what would now be
called plans, of the proposed new hospital, should be sent for approval to the President and Council at Surat.

"Ordered that the two Modells or Draughts of an Hospitall now drawn out be sent up to the Presid[ent] and Councill desyryng their approuval, of wch they think most convenient, and their order for proceeding accordingly."

The receipt of these plans was acknowledged, and the plans were considered, in a letter from Surat to Bombay, dated 18th Dec., 1675; a second letter, dated 11th Jan., 1675/76, further discusses the plans and site; a third, dated 19th July, 1676, says: "Wee like well of your proposition of making the present Courte of Judicature an Hospitall"; and, six months later, a letter from Bombay to Surat, dated 24th Jan., 1676/77, reports that the new hospital has been opened and has proved of much service. Extracts from three of these letters are given below.*

*These three extracts have been printed in Selections from the Letters, Despatches, and other State Papers preserved in the Bombay Secretariat; Home Series, Vol. 1, Edited by G. W. Forrest, pp. 74, 78, 120.
†Their, probably miscopied; the word should be the.
Extract, Letter from Surat to Bombay, dated 11th Jan., 1675/76.

"The scitation of ye place whereon to erect ye Hospital all wee leave totally to ye judgment, to act therein as you shall think most convenient; and wee would have you see neere as possible you can comply with of desires in ye modell wee sent you downe; as to the length and breadth and all other dimensions; those openings out of ye wards and Chyrurgeon's lodgings are designing for windowes and not for doores, and ye Chymurgery rooms must be one story high; wee shall be mindful on all occasions to supply you with large quantities of Chynam, being sensible of your great expences thereof, and wee only want boats to carry it downe."

Extract, Letter from Bombay to Surat, dated 24th Jan., 1676/77.

"Our soldiers, thanks be to God, continue very healthfull, for whereas last yeare from October to Feb'y there died above 100 men, this yeare we have not lost 15, most of which of imposthunation in ye liver, much of which benefit wee must attribute to of new hospital; wee having taken ye old Court of Judicature for ye use, it being a thing so highly necessary, for the soldiers do not die by any such fatallty concomitant to ye climate as some vainly imagine, but by there irregularity & want of due attendance when sick. For to persons in a flux &c., &c., which is ye country diseases, strong drink and flesh is mortall, which to make an English soldier leave off is almost as difficult as to make him divest his nature, nay though present death be laid down before him as the reward of ye ill gratifying his palate. This is the true cause our Bombay bills of mortality have swelled so high, whereas in ye Hospital nothing can come in or out with out passing ye Doctor's eyes ye we have great confidence this Hospital will save ye Hon'ble some hundred pounds yearly with ye transport of soldiers exacts."

In 1668 John Fryer, one of the best known of the Company's early medical officers in Western India, published in London an account of his service in the East, between 1672 and 1681. He remarks (p. 67) that at Bombay there existed "neither church nor hospital, both which are mightily to be desired." On pages 149 and 150 he mentions that a hospital was in existence at Goa, which not only paid its way, but was a source of profit; rather an uncommon occurrence for a hospital.

"The Paulistines enjoy the biggest of all the Monasteries at St. Roch, in it is a Library, an Hospital, and an Apothecary's shop well furnished with Medicines, where Gasper Antonio, a Florentine, a Lay Brother of the Order, the author of the Goa Stones, bring them in 50,000 Xerophins by that invention annually. He is an Old Man, and almost Blind, being of great Esteem for his long practice in Physick."

Fryer was Surgeon at Bombay from Dec., 1673 to Sept., 1674, and from April, 1675 to March, 1677. During the intervening

* Goa Stone, called also Pedra de Gasper Antonio, an artificial stone, made at Goa, in great repute during the seventeenth century for its medical virtues. The Xeraphin was worth nearly eighteenpence (Hobson-Jobson).
seven months he was Surgeon at Surat. From March, 1677 to Jan., 1679, he served in Persia, after which he again held the post of Surgeon at Surat for three years, till he sailed for England on 19th Jan., 1681/82.*

It is evident, from the letter of 24th Jan., 1676/77, quoted above, that the hospital at Bombay had been opened before the end of 1676, i.e. shortly before Fryer left that city for Persia. From his statement that there was no hospital at Bombay, we may conclude that it had not been opened during his first stay there; and probably was started not long before he left Bombay. It seems probable, therefore, that this first hospital in Bombay was opened towards the end of 1676.

Another letter from Surat to Bombay, dated 24th Jan., 1675/76, shows one way in which money was raised for the hospital. Captain Minchin and Mr. Hornigold, of Bombay, had fought a duel, for which they had been suspended, placed under arrest, and reported to Surat. The President there ordered their release, on payment of a fine of something under £4 each.

"For their better remembrance sake wee doe req. y® they be fined 50 Xeraphius a piece towards y® building y® new Hospital w® wee require you to see performed."

During the siege of Bombay by the Siddhi, in 1680-90, a hospital ship was in use. An entry, dated 15th March, 1688/89, in the Bombay Diaries, Vol. III, 1684-90, states:—

"D'® Michill came ashoare from hospital ship with list of killed and wounded."

The use of hospital ships for the reception and treatment of the wounded in war is usually considered an important advance in the military medicine of our own time. But "there is nothing new under the sun."

A quarter of a century later, another modern development, female nursing in hospitals, seems to have been anticipated in Bombay. A Mrs. Pack had been sent out from England as matron for the Bombay hospital, and had married soon after her arrival. She does not seem to have vacated her post on marriage. Her husband, Nicholas Hatch, was the Company's Master Carpenter.

"Cons., 20th Feb., 1715-16. Mrs Pack, who was sent out from England on the Queen as Matron of the Hospital, and who has lately married Mr Hatch, allowed a salary of £30 per annum, and to have convenient rooms near the hospital."

A new hospital building was erected in 1733 near the Marine Yard, about the site of the modern Great Western Hotel.

In 1736 and 1737 considerable friction took place between the two Bombay Surgeons, John Neilson and Henry Compton, who made charges and countercharges against each other. Compton was exonerated, but resigned on account of ill health, and went home on 7th Oct., 1737.* One outcome of these disputes was the appointment, in Cons. of 3rd Sept., 1737, of a standing Committee, consisting of the Marine and Land Paymasters and the Captain Commandant, to inspect the hospital monthly, and report on it to the Council.

The Cons. of 30th June, 1738, contain a report by this Committee, and regulations for the hospital; also the existing staff, and a proposed re-arrangement thereof.† Patients admitted, it is directed, are to be divided between the two Surgeons, those admitted one week going to the first Surgeon, those of the next week to the second Surgeon. The pay of Hospital Assistants was fixed at six rupees, of outdoor Assistants at eight rupees per month.

Another report by the Standing Committee is contained in the Cons. of 14th March, 1745/46, also new regulations for the hospital, the chief of which are, that the Surgeons shall visit the hospital twice daily, at eight a.m. and four p.m.; that patients are to be divided equally between Mr. Neilson and Mr. Matthiason, that each shall keep charge of his own cases throughout, and that they shall consult each other in serious cases.

The same Cons. of 14th March, contain the first mention of a Lunatic Asylum, ordering a place, near the back of the hospital, to be fitted up for lunatics, at a cost of Rs.125.

Grose's Voyage to the East Indies contains a plan of Bombay, in which the hospital and doctor's house, No. 7 on the plan, are shown as a large building near the shore, on the west of the harbour. Grose went to India as a covenanted writer in 1750, and describes Bombay in that and the following years.

† This table is given in Chap. XXVII, The Uncovenanted and Subordinate Medical Services, Vol. II, p. 192.
The Cons. of 15th Oct., 1755 contain a report by the Hospital Committee, on which orders were passed that "a room for chirurgical operations" should be built.

The Cons. of 25th Aug., 1762, record another quarrel between the two Bombay Surgeons of that date, Richard Percival and James Wensley, as to their respective duties, Percival asserting that, as Senior Surgeon, Wensley was under his orders, while the latter claimed to be on a footing of equality. A Committee was appointed to inquire into the dispute, their report is entered and approved in the Cons. of 7th Sept. They supported Wensley's claim, that the two Surgeons were on an equal footing; and directed that they should receive patients for treatment on alternate weeks, a repetition of the orders of 1738. New hospital regulations were drawn up, and are given at length in the Cons. of 14th Sept. They contain nothing of importance.

A Bombay letter of 4th Feb., 1771 reports in para. 37 that another set of new regulations for the hospital has been drawn up, and in para. 38 that the erection of a "Chemical Laboratory" has been ordered.

The Cons. of 24th Dec., 1773, give the following subordinate staff, as serving in the hospital under the Surgeons: Messrs. March, Crozier, Fleeming, and King, each Rs.70 per month; Mr. Diderot, Rs.40; Messrs. Jenkins, Matthews, and Cabral, each Rs.30.*

On these officers the Hospital Committee report as follows:—

"From the representation of the Surgeons we find that Messrs. King, Jenkins, and Diderot, are of very little use to the hospital as they cannot be relied upon either for compounding or dispensing of medicines. Consequently they are an incumbrance upon the hospital, and incur unnecessary expense."

The Board's order upon this report was—

"It is ordered, as two of the Assistant Surgeons, mentioned in the report to be an incumbrance only, came from Madras, that they return thither by the first opportunity, and that they be discharged from the service."

Of the eight officers above-named, the only one whose name is given in Dodwell and Miles' East India Medical List is Francis Crozier, who entered the Bombay Service as Assistant Surgeon in

* This order is quoted in the Bombay Gazetteer, Vol. XXVI, Part III, p. 561, where the sixth name is given as Jenkins. In the copies of the Cons. preserved in MS. in the India Office Records, it is undoubtedly Jenkins.
Aug., 1773, became Head Surgeon on 10th Feb., 1784, and Member of the Medical Board on 15th Sept., 1789, only sixteen years after his first appointment, an instance of very rapid promotion. He died on board the Woodford on his way home on 23rd July, 1800. The names of five of the others appear in the Service Army Lists, Medical, Bombay, three large MS. volumes in the Military Record Department of the India Office. Two, Jenkins and King, have an identical note to their names, "Come from Madras, reported to be of very little use to the hospital, ordered to return to Madras"; evidently a summary of the order above. Diderot's name is entered in these lists as Didovcet, in the MS. Cons. the name might be read either way. He also is entered as "Discharged the service being of very little use to the hospital, 24th December 1773." William March was appointed on 1st Jan., 1766, and went home sick in Oct., 1778. William Fleming was appointed on 1st Feb., 1773; his further career is not recorded. The names of Cabral and Matthews do not appear at all, probably they were Sub-Assistant Surgeons. The names of Jenkins and King are not entered in the Service Army Lists, Medical, Madras. King, as related in Chap. XXXII, War Services, (Vol. II, p. 101), was afterwards one of the English officers taken prisoner in the second Mahrwar.

In 1769 an old hospital, formerly used as a hospital for men of the Royal Navy, was rebuilt, on Old Woman's Island. A Bombay General Letter, dated 21st Feb., 1769, reports, in para. 19, (Abstracts, Letters from Bombay, Vol. III, 1767 to 1783).

"Present Hospital too small, have appropriated one on Old Woman's Island used for the King's Service last war, and on 14th February, 1798, we determined to fit it up in a commodious manner, but other buildings then carrying on prevented our finishing it then, therefore on 7th instant determined to compleat it agreeable to an Estimate delivered in amounting to Rs.9234."

The Bombay Cons. of 28th Feb., 1769, order estimates for building a shed to be used as a hospital for sepoys. This hospital had only a short life, of some fifteen years. A General Letter from Bombay, dated 31st Dec., 1783, states in paras. 25 and 26, (Abstracts, Letters from Bombay, Vol. IV, 1782 to 1789)—

"The principal Surgeons of the Hospital having complained of an infringement of their Contract by the select Committee having abolished the Sepoy Hospitals, we issued orders countermanding that abolition, agreeably to the Surgeons' Request."
The sepoy hospital was, however, abolished by a G. O. of 1784. A Bombay General Letter of 5th Jan., 1785 reports in paras. 27 to 30, (Abstracts, Letters from Bombay, Vol. IV, 1782 to 1786).

"The Sepoy Hospital in its late form abolished, and the President’s Plan for establishing Battalion Hospitals adopted. The future mode of conducting the European Hospital will soon be considered."

The Cons. of 26th Sept., 1781, mention that the plans of the new hospital, prepared by the Principal Engineer, are to cost Rs.5,15,025; and that the scheme must be postponed as too expensive. This estimate amounts to more than double the cost of the Calcutta Medical College Hospital, in the middle of the nineteenth century; and is nearly as high as that of the present St. George’s Hospital, towards the end of that century.*

Forbes, in Oriental Memoirs, Vol. I, p. 152, states that when he left Bombay, in 1784, there then existed three large hospitals; one within the gates for Europeans, another on the Esplanade for sepoys, and a third for convalescents on the adjacent island, (Old Woman’s Island). The first of these three was the General Hospital of the day, the second and third were the two opened in 1764.

A letter from the Bombay Medical Board to the Council, dated 24th Aug., 1787,† complains that only two Surgeons are allowed, to attend the sick of these three hospitals, which are all at some distance from each other, and two of them outside the gates; that two men cannot cope with the work, in addition to all their other duties; and that hitherto four have been allowed. They further state that the number of sick in the garrison much exceeds that at Fort St. George, and is almost, if not quite, equal to that at Calcutta; and that on the morning of the day they write there were 325 in-patients, of whom 221 were Europeans, in the three hospitals.

A Bombay Military Letter of 25th March, 1801, reports in para. 60 that the hospital within the Fort has been completed.

* The reason why this estimate was so high, was that the Bombay Council, in the Cons. of 20th June, 1781, had required that the proposed new hospital should be bomb-proof, in case of a siege. In the Cons. of 20th Oct., 1781, the Surgeons approved of the plans, but objected to the proposed site, as too confined and too near the native town, and suggested that the requirement that the hospital should be bomb-proof might be dropped.

† This letter is given at full length in Chap. XXIII, Administration; the Medical Ponds.
In 1824 new buildings were erected for the hospital, in Hornby Road. It took in the sick both of the garrison and of the civil population. In 1861, the institution was moved to temporary quarters in the grounds of the Artillery barracks in Fort George, and in 1876 to a building called the Officers’ Quarters. The foundation stone of the present St. George’s Hospital was laid on 22nd Feb., 1880, on the site of old Fort George, and the buildings were completed in 1892, at an estimated cost of Rs.5,69,667, an estimate little higher than that of 1781.

Some sort of a native hospital was in use in 1800, and treated about twenty patients daily. It was supported by Government. The Bombay natives’ dispensary was opened in 1834, and the Girgaum dispensary in 1846. During the last half-century a number of large hospitals have been constructed and opened in Bombay, which owe their existence in great part to the charitable liberality of the wealthy inhabitants. It is impossible to avoid being struck by the great contrast which Bombay presents, in this respect, to the other Presidency towns. The chief hospitals in Bombay, besides St. George’s Hospital, are—

The Jamsetji Jijibhai Hospital, in Parel Road, Byculla, was founded in 1843, the foundation stone being laid by Sir James Burns, K.H., then Secretary of the Medical Board, on 3rd Jan., 1843. The building was erected at the joint expense of Sir Jamsetji Jijibhai and of the East India Company. It was formally opened, as a hospital for natives, in May, 1845. It contained an eye dispensary and obstetric wards. The former was subsequently transferred to the Sir Cowasji Jehangir Ophthalmic Hospital, opened on 21st July, 1866. The latter have since been replaced by the Bai Matlibai and Petit Obstetric Hospitals.

The Gokuldas Tejpal Hospital for natives was begun in May, 1870, and completed on 8th April, 1874, at a cost of three and three-quarter lakhs, of which Gokuldas Tejpal gave one and a half lakhs.

The Pestanji Hormusji Cama Hospital, for women and children, on the Esplanade, was founded on 23rd Nov., 1883, and opened in Aug., 1886, at a cost of Rs.1,71,722. It is worked by a female staff, the first head of which was Dr. Edith Pechey. The Bomanji Edalji Allbless Obstetric Hospital, in the same compound, and worked by the same staff, was opened in 1890, the trustees of the late B. E. Allbless contributing Rs.66,000.
The Bai Matlibai Wadia Obstetric Hospital was founded on 9th March, 1889, Bai Matlibai giving one and a half lakhs for construction, as well as the valuable site near the J.J. Hospital. The Sir Dinshaw Manekji Petit Hospital for women and children was founded in Jan., 1890, and cost Rs.1,19,351. Both were opened in March, 1892, and replaced the female wards of the J.J. Hospital.

A Bombay G. O. of 18th March, 1823, sanctioned the establishment of an ophthalmic institution in the city, and appointed Assistant Surgeon Richmond, of H.M.'s 4th Dragoons, as Superintendent. This institution was absorbed into the J.J. Hospital in 1845.

The first mention of a Lunatic Asylum in Bombay is that in the extract given above, from the Cons. of 14th March 1745/46. The Asylum at Colaba was established sixty years later, in 1826.

The Alibless Leper Home on Trombay island was founded on 25th March, 1860; the Leper Hospital at Parel was completed in June, 1891.


The Dutch founded a lazaretto, or leper hospital, in 1728, at Cochin, on the Malabar coast. In 1789, a small-pox hospital was sanctioned and established at Tellicherry, probably the first special hospital for infectious diseases in India; Anjengo is in the state of Travancore, Tellicherry in what is now the Malabar district. Both were officered from and subordinate to Bombay, but conducted most of their correspondence through Madras.

II.- Madras.‡

The first hospital at Madras was opened in 1664, as reported in a letter dated 10th Nov., 1664, from William Gyfford and Jeremy

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† M.P.L., No. 397 of 7th Feb., 1789; Tellicherry Cons.; Vol. XXXIX, pp. 74-75.
‡ Most of the history of the early hospitals in Madras, up to the end of the eighteenth century, is taken from Love's Vestiges of Old Madras, as well as from the original records; that of the next three-quarters of a century from Keess' History of the Madras Medical College and General Hospital. Many notes on Madras medical institutions have also been supplied by Captain C. A. F. Hingston, I.M.S.
Sambrooke, at Fort St. George, to the Agent, Sir Edward Winter, then on tour at Masulipatam. (Factory Records, Fort St. George, Vol. XV). This letter is also given in Love’s Vestiges of Old Madras, Vol. I, p. 216.

"The Soldiers in ye Fort since your worp absence hath been something strictly led to ye duty, and according to your Order they had noe free guard, so ye the fresh Soldiers which come forth ye yeare taking up their habitations in ye bleake windle in ye tall fell sick in ye tower of ye are dead, about ten more remains At ye time very sick and complain and it seems not without Reason that ye wages are not sufficient to supply them with what necessary now in ye time of their sickness see Rather ye to see English Men dropp away like dogges in ye Manner for want of Christian Charity towards ye we have thought it very convenient ye they might have an house on purpose for ye and people appointed to looke after ye and to see ye nothing comes in to them neither of meate nor drink but ye Doctor alloweth, and have for ye purpo s Rented Mr. Cogan’s house at 2 pagedas p. Moneth w h we hope you will so well approve of as to continue it for ye future, and in regard we are cumbered with people in a very quiet condition not fearing any Disturbances we thought good as formerly to appoint ye a free guard againe for ye encouragement, for it seems they were much Disheartened and have long prayed for your Worp coming."

"Free guard" means period off duty.

The first hospital was enlarged in 1670, when it was under the charge of Bezaleel Sherman.

The second hospital at Madras was built, between 1679 and 1688, by public subscription, at a cost of 838 pagedas, nearly Rs. 3000. It was a large two-storied building, the property of the Church and Vestry. It stood in the Fort, near the Church, and adjoined the Company’s sorting godown, a situation which was found inconvenient, in various ways. In 1688, during the Governorship of Elihu Yale, the Madras Council determined to acquire this hospital building, paying its full value to the vestry, and directed that a new hospital should be built near the river.

The third hospital seems to have been erected soon after the Company acquired the second, perhaps before that building was actually vacated. It was erected during Yale’s term of office, so must have been completed by 1692, and probably was in use by 1690. It stood in James’ Street, in the Fort, near the north end of the barracks, and, like the barracks, was a handsome building, in the Tuscan style. Its cost was about 2500 pagedas. Cons. of 2nd Aug., 1688, (Factory Records, Fort St. George, Vol. V, 1687-88), contain a list of the annual quitrents of all houses in Madras. In

H.I.M.S.—Vol. II. 2 D
this list appears the new hospital in James’ Street, with a quitrent of three-quarters of a pagoda per annum.

Yale’s name is well known at the present day as that of one of the two chief Universities in the United States. Elihu Yale was born at Boston, Massachusetts, on 5th April, 1648, the son of an Englishman, David Yale, who had emigrated to the New England colonies, settled at Newhaven, Connecticut, and afterwards removed to Boston. In 1652 David Yale returned to England with his family. Elihu was appointed a Writer on 24th Oct., 1671, and landed at Madras on 23rd June, 1672. In Feb., 1683, he became third in Council there, in July, 1684 second, and in July, 1687, he succeeded William Gwynford as Chief. In 1692 he was superseded by Nathaniel Higginson, whose name appears among the signatures on the survey of the hospital. Yale remained in Madras as a free inhabitant for nearly seven years more, and sailed for England on the Martha on 22nd Feb., 1698,99. After his return home he became a Director of the Company. He died in London on 8th July, 1721. In 1718 he gave a large donation to the school at Newhaven, which in 1745 developed into a University, named Yale, after its early benefactor.

The Fort St. George Cons. of 1688 contain the following papers on the acquisition of the hospital, (Factory Records, Fort St. George, Vol. V, 1687-88) :-

"Cons., 22d March, 1687 88. The withdrawing severall of our Factorys having brought Many of the R3 Honble Companys Servants hither, for whom having no accommodation, in the Fort, they are necessitated to lodge att publique houses, which has been the occasion of their too great expence, and disorder, and cannot well bee prevented, without some suitable Lodging bee built or hired for them. And there being a very commodious house, built by the contribution of the Town Inhabitants for a Hospitaill, to entertain Sick Souldiers and Seamen, which lying so near the R3 Honble Companys Godown, & the Church, and in the middle of the City, that ’tis very offensive, & inconveniently Situated for that use, & its Tarrass joyning to the Godown, & the great concourse of company that frequent the Hospitaill, renders the R3 Honble Companys goods in danger of being stolen, which sometimes must unavoidably lye open in the Godown yard, & the goods often lost thence, has been suspected to go that way, which cannot bee better prevented for the future, but by adding the Hospitaill to the Godown, which the many lower Rooms therein, will be of great conveniency and service for China, and other sorts of fine goods, and the upper Rooms for Lodging Chambers for Factors and Writers, upon which consideration, and of its being so many severall ways convenient & safe for the R3 Honble Companys service, ’tis agreed & order’d that itt bee bought of the Parish, for their accompt & that a new Hospitaill bee built with the
mony, att a more convenient place, near the River Side. And Mr Higginson, Mr Fraser, Cap't Bett and the Church Wardens, do make a due Survey and valuer of the said Hospital building, and that itt bee paid for accordingly, and that the Church Wardens, &c do begin with all expedition the new Hospital by the River."

"Cons., 13th April, 1688. Wee the Subscribers being appointed by order of the President & Councill, and of a Vestry of the Parish, to Surveigh and valuer the Hospital, do make our report as follows, viz. That the Hospital is very well and strong built, & requires little repair. And in consideration of the great dearness of all materials for building, more then att the time of building the Hospital, (which is like to continue) wee are of opinion, that the Hospital may bee now worth as much as the prime cost, which by the Church Books, wee find to amount to Eight hundred Thirtyeight Pag. Twenty seven Fanams. (Signed) Nath. Higginson, William Fraser, Richard Elliott, Henry Mose, James Bett, Charles Metcalfe, Peter Large."

"Cons., 16th April, 1688. Whereas the Parishioners of St. Mary Fort St. George in Vestry assembled, did unanimously agree to & with the Hon'ble Elinh Yale President & Governor of said Fort & Councill for the selling the old Hospital, to the R: Hon'ble East India Comp' Now know yee that wee the Minister & Church Wardens of the Parish aforesaid, for the time being, to & with the consent of the said Parishioners, have bargain & sold unto the said Hon'ble President & Councill for the use and behoof aforesaid, all & every part of the said Hospital, (the uterally thereunto belonging excepted) with the Yard, & all the outhouses & conveniences thereunto belonging; for & in consideration of the summe of Eight hundred Thirty Eight Pag. Twenty seven Fanams which mony wee receiue by these Presents to have reciue Witness our hands this 16th day of April, 1688. Richard Elliott, Henry Mose, Charles Metcalfe."

The Cons. of 13th Jan., 1697/98 contain a complaint of the increasing expense of the hospital.

"The Charges of the Hospital running very high, Dr Bulkley is desired to consider thereof and make a Report that they may be regulated particularly in dietting sick Soldiery for each of whom 3 fan. a day is allowed besides with the Steward's acct amounts monthly from ten to eighteen pag."

After Dr. Browne's dismissal, Dr. Bulkley submitted the following proposals for reform in hospital administration, embodied in the Cons. of 4th April, 1698, and quoted in Love's 'Vestiges of Old Madras, Vol. I, p. 565.

"To the Hon'ble Nathaniel Higginson, Lieutenant General, and Worshipfull Councill, By whom it is ordered that a remonstrance be given of what is needfull and convenient for the well carrying on the business relating to the Cure of the SICK and Lame belonging to this Garrison.

"Pursuant thereunto, I humbly propose that the Surgeon of the said Garrison be allowed (at least) one male and one assistant, with a Dublash,"
Conicoply, and 4 Coolies. Also a yearly supply of Europe Medicines to the amount of fifty Pounds, with allowance of as much for Drugs and medicines procurable in these parts; with Stillatories, Mortars, &c. Vessels and Utensils necessary for the preparation of Medicines. And because good and proper Diett is likewise necessary, there ought to be a steward and Servants belonging to the Hospital for providing and taking care of the Same; with Cotts, Bedding and Apparel, &c. And as to the charge of Diett for the said Sick and Lame, I think it might be supplied at the rate of four fanams per day for each person.—Edward Buckley.

"P.S. I hope it will not seem amiss or unreasonable that I also propose a convenient Dwelling House for the Surgeon of this Garrison (as customary in other places) or allowance for the same.—E.B."

Towards the end of the year, the Madras Council took over the charge of maintenance of the hospital from the Church and vestry.

"Cons., Thursday, 8th Dec., 1698. Ordered that an account in writing be demanded of Eblain Yale Esq. (formerly President of this place) of the building of y° new Hospital, and that Mr. Fraser go to him for the same.

"Upon consideration of the Petition delivered in by the Ministers, Churchwardens, &c. in Consultation the next Instant * representing to this board, the great Charge they are at in maintaining the Hospital wh. is wholly appropriated to the use of ye Soldiery &c. in the Company's service.

"Resolved for the future that they are discharged from contributing thereto and only to pay the Charge of such sick persons as they shall send thither, and that henceforward the Chirurgeon or Steward of the Hospital render a monthly acco. to ye Paymaster of the Charge of said Hospital.

"Resolved that that part of the petition in which they desire some consideration for the building the Hospital, which cost them Eight Hundred Pagodas, be referred to the Rt Honble. Company."

"Letter from Court, 21st Nov., 1699.† We are willing, for the reasons given, to excuse the Church Stock from paying fifty pagodas per annum, formerly allowed towards the charges of the Hospital, and to bear all the charges thereof ourselves; but to reimburse the first cost of the building in part or in whole. We cant find reasons cogent enough to persuade us thereunto. We are well informed there were publick Contributions, and freewill Offerings given by our Commanders, &c. for its first erection; and its, we think, sufficient that we now bear the whole burden of its repairs, salaries of Chirurgeon, &c. and that the doors are open for all truly necessit. as Patients, whether belonging to the Garrison or Town."

Captain Alexander Hamilton, in his New Account of the East Indies, published in 1727, mentions that, at the time of his visit

* The receipt of this petition is mentioned in the Cons. of 1st Dec., but it is not given at length.
to Madras, about 1708, there was "a very good hospital in the town."

The Madras Cons. of 25th Feb., 1711/12 mention a subscription submitted to the Council to build a new hospital for the English inhabitants of Madras. The Company contributed fifteen hundred pagodas, or about five thousand rupees. Those of 15th March of the same year contain an application from the Council of Fort St. David, to be allowed to build a hospital there. Madras Cons. of 22nd Jan., 1714/15 note that Elisha Ellill, gunner at Fort St. David, had been appointed youngest in Council at Fort York, in Sumatra; and that his house at Fort St. David had been bought for a hospital for four hundred pagodas, which was very cheap.* In 1728 this hospital at Fort St. David was reported to be ruinous by the Surgeon;† and two months later orders for rebuilding it were passed. In 1747 it is noted the hiring of a house at Kadalar to accommodate the sick of the garrison.‡ Ten years earlier, in 1737, the Court had ordered the construction of a new hospital, which seems to refer the existence of an older one, at Fort Marlborough, the Company’s headquarters in Sumatra, then a settlement subordinate to Madras.§

In 1726 the Madras Government complained that the hospital there was too expensive, and Mr. James Macrae, the President and Governor, drew up the following regulations for its management:—‡‡

"Cons., Saturday, 17th Sept., 1726. The President represents to the Board that, upon reading the particulars of the article of Hospital charges, he apprehends there are several of them too large, and others unnecessary, and ought to be reduced and discontinued; which being taken into consideration, and the several particulars again read and enquired into, it was represented that the Surgeon, who has the immediate direction of the Hospital, always insists that the present charge is necessary for entertaining and recovering the sick, and that no reduction can be made of it.

"Ordered, that whereas it has been for some time the custom for one of the Surgeons to have the immediate care of the Hospital solely, they do in

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* Ellill died at Bencoolen in 1719, or was killed in the capture of the place.
† M.P.L., No. 80 of 20th April, 1728; Fort St. David Cons., Vol. V, pp. 18-23.
‡ M.P.L., No. 1270 of 2nd Sept., 1747; Fort St. David Cons., Vol. XV, pp. 259-281. Kadalar was the civil city attached to Fort St. David, as Madras to Fort St. George, Calcutta to Fort William, and Bencoolen to Fort York, and afterwards to Fort Marlborough.
future act each six months by turns; that by their acting thus interchangeably, we may make the experiment whether the one cannot reduce the charge of the hospital lower than the other, which it is believed out of emulation to recommend themselves, they may do."

Andrew Pichier and Matthew Lindsay were the two Surgeons at Madras in 1726, with Andrew Munro as Mate. For these officers see Chap. X, The First Half of the Eighteenth Century.

In 1741 an order was passed—*

"The Captain of the Guards to visit the hospital once in twenty four hours, during the time of being on guard, and upon the decease of any of the Military, to acquaint the Governor therewith."

In 1742 orders were passed that the Surgeons should submit to the Court returns relating to deaths, medicines, etc.†

War against France was declared on 21st March, 1743/44, and in the Con. of 18th Jan., 1744/45 it was decided to open a special hospital for the Royal Navy at Madras.‡

"Con., 18th Jan., 1744/45. It being also considered that it will be much more convenient to have some place ready for the reception of the sick men that may come ashore from His Majesty's ships, than to mix them with those of the garrison; besides that the accommodations of an hospital are too confined even for our own people; it is agreed and ordered that the Paymaster, accompanied by the Surgeons, do survey the granary on the island, and report to the Board whether it may not be made to serve that purpose. Ordered also that the Paymaster get provided a quantity of hospital clothing, with cots, and other things necessary for the sick men."

"Con., 4th Feb., 1744/45. The Paymaster acquaints the Board that, pursuant to order of last Consultation, he has been with the Surgeons to survey the granary on the island, which they find may be made fit for the reception of the men-of-war's sick people, by opening a few windows for the benefit of air, and some other small alteration, which he computes will not cost above 200 pagodas. Ordered that he set about them forthwith."

This Naval Hospital, established at Madras in 1745, seems to have been used as such up to 1790. In 1784 the Madras Government ordered the erection of a new naval hospital, and a site was chosen, but no further steps were taken for twenty-four years. In 1790 the sailors were transferred to the garrison hospital, which continued to receive the sick from the fleet for eighteen years.

† M.P.L., No. 1850 of 20th July, 1742; Letters from Fort St. George, Vol. XXV, pp. 75, 76. The order is given in a letter to Fort St. David.
In 1808 a new naval hospital was built, on the site chosen in 1784, and this hospital was used up to 1831, when the buildings were turned into a gun-carriage factory, and the sick from the fleet, who were now too few in number to require a separate hospital, were finally transferred to the military hospital.

Madras surrendered to the French, under de la Bourdonnais, on 10th Sept., 1746. Peace between England and France was made by the treaty of Aix la Chapelle on 7th Oct., 1748, and the city was restored to the English on 21st Aug., 1749. The hospital appears to have been much overcrowded after the rendition, and on 2nd July, 1750, Surgeon Andrew Munro complained of the want of accommodation in it. In 1752 the hospital was converted into a barrack, and twelve houses were converted into a hospital. A list of the houses then taken up is given by Keess, p. 116.

The three following extracts refer to these changes:

"Cons., 29th June, 1752. As it is become necessary, by the encrease of our Military, to provide Barracks for their reception; and the Hospital being, by its Situation fronting the Parade, the only proper Place for that Purpose, which at the same time renders it very improper for its former use, Agreed that, for the present, it be converted into Barracks, and that the several houses, approved of by the Major and Surgeons to last whereof is now delivered in, read, and entered hereafter) be fitted up for an Hospital."}

The Surgeons of Madras at the above date were Andrew Munro and Robert Turying. The transfer was completed by May, 1753.

"Cons., 14th May, 1753. The houses, hir'd in the Pettah and intended for an Hospital being now refitted, Ordered that they be appropriated for that use, and the present Hospital on the Parade converted into Barracks; and that proper necessaries, such as cottas, Matts, &c., be provided for the Recruits expected shortly to arrive."

"Cons., 23rd Nov., 1751. Messrs. Robert Orme and Alexander Wynch report that they had visited the Hospital, and found that, by the defects of the Buildings, the Sick are greatly exposed, and had suffered much from the late Indecency of the Weather. That they complained of Cold, which can only be prevented by adding to the present Allowance of Bedding. That the Steward complained he could not restrain the Sick from taking their Victuals out of the Kitchen without waiting till it was regularly delivered to them. That the necessary directions had been given to remove all these Inconveniences except the want of Bedding and the defects of the Buildings, to which they are of opinion some advantageous Additions may be made at a moderate Expence."

* Keess, History of Madras Medical College and General Hospital, pp. 115-123.
† The three following extracts, as well as the other information on the subject, are taken from Love's Vestiges of Old Madras, Vol. II, pp. 455, 456.
Colonel Love (Vol. II, p. 455), writes about the hospital—

"A medallion on the wall of the present General Hospital, facing the road, bears the inscription, 'Hospital founded 1753.' The legend is misleading. It cannot apply to the Madras Hospital irrespective of situation, because the institution in the Fort was established nearly a century earlier. Nor can it serve for the present building or site, because the hospital of 1753 had its position on what is now the north-west Esplanade. Another structure, nearer the present site, was in use in 1758, but after the siege the institution was transferred to Mathialpetta, where it remained for several years."

The Court of Directors, in Jan., 1752, sent out the following instructions regarding the treatment of the sick in hospital *:—

"50. Complaints having been made to us that the Surgeons of our Hospital do not give due attendance on our sick and wounded Military, and that it is the custom for the Surgeons to take their pay during the time they are in the hospital.

"57. We direct that for the future the Surgeons give a due and regular attendance on the sick in the hospital, and not take the management thereof monthly as has been the practice.

"58. That nothing be stopt from the sick or wounded Military in the hospitals, but the charge for their provisions, that is to say, so much only as they usually give for their diet when in health.

"59. We also direct that one of the Council, by turns, do visit the hospital at least once in a week or oftener if you shall think it necessary, and report to the Board whether the Surgeons are regular in their attendance and give all the relief in their power to the sick; that they are kept clean and have the proper provisions.

"60. That the Major do also inspect the hospital in like manner, and make his report to the Governor, and that you annually send us an account of the Military who have been sent into the hospital, inserting the disorder of each man, when he was received, and when discharged.

"61. And we further direct that in case our Surgeons are remiss in their duty, or unequal to their employment, you are, without regard, to dismiss such person our service."

Munro died on 26th Oct., 1757, and was succeeded by James Wilson. In Dec., 1757, the Surgeons, Turing and Wilson, asked for the enlargement of the hospital. Their demand for "salivating rooms" is of interest.

"Cons., 26th Dec., 1757. In the first place, we are humbly of opinion that the Hospital should be made capable of Lodging two hundred or Two hundred and fifty Men; and that there should be Salivating Rooms fitted up for Thirty at least, not more than five or Ten in a Room. Likewise that a Place be fitted up for the reception of two or three hundred Seamen against the Arrival of the Fleet."

"Secondly, that the Floors of the several Wards should be raised a Foot at least above the Level of the Court Yard. . . .

"Fourthly, that there be a room fitted up for Operations, with Tables and Chairs for that purpose, and a Chest to keep Instruments and Bandages in ready prepared.

"Fifthly, that there be a room fitted up for a Shop, with Shelves and a Shopboard.—Robert Turing. James Wilson."

In 1757, Captain Brohier, the senior Engineer at Madras, wrote to Government advocating the demolition of the hospital.*

"Cons., 14th May, 1757. All the Buildings which compose the present Hospitals being on high Ground, and their Situation of great disadvantage to the Fortifications of the Place by overlooking them, and that Batteries Erected on that Spot by an Enemy would Embolse the greatest part of Our North front, and greatly perplex the Besieged; This being the Case, it is Absolutely necessary those Houses should come down immediately, the best Bricks of which may serve to Line Our Earthen Works, and the Rubbish and Ground on which they stand to fill the River, and finish the Glacie to the Westward. J. Brohier."

The hospital and surrounding buildings were pulled down during 1757, and the former transferred to some houses lying further south-west, near the site of the present General Hospital.

The Cons. of 30th May, 1758, note that the house of Coja Shaumur, and that adjoining it, in Charles' Street, next to the Admiralty house, had been purchased for 2600 pagodas, to be used as a dispensary, for keeping and dispensing medicines. In the Cons. of 8th Nov., 1758, the Surgeons were directed to put forward, in writing, a plan for the better regulation of the hospital. The regulations submitted by the Surgeons are contained in the Cons. of 28th Nov., 1758. They are long, filling eight folio pages. Paras. 18, 19, and 45 suggest—

18. That one of the Principal Surgeons attend hospital every morning to examine and treat the sick, and perform or see performed all capital operations.

19. That the Asst. Surgeons attend every morning, with the Surgeons, to dress wounds, &c., and that each Asst. Surgeon attend, and dress throughout the case, whichever patients he attends first.

45. That one of the Surgeons be appointed Storekeeper and Surgeon General.

In the Cons. of 1st Dec., 1758, the regulations proposed by the Surgeons were approved as a whole, with a few exceptions. In para. 45 one of the Surgeons is appointed Storekeeper General.

Madras was besieged by the French from 12th Sept., 1758, to 17 Feb., 1759, when the siege was raised, on the arrival of an English fleet, under Captain Kempenfelt, who was afterwards lost in the Royal George, at Spithead. During this siege, the hospital was necessarily transferred into the Fort. In February, 1759, it was moved to the site, in Armenian Street, occupied by the Capuchin and Armenian churches, and there remained for some thirteen years. This site was found unhealthy.*

"Cons., 28th Dec., 1762. The temporary Hospitals which have for some time past been used for the Reception of the Sick and Wounded have not only occasioned a constant Annual expense, but have been far from healthful. The Board therefore think a proper building ought as soon as possible to be erected, and accordingly order the Engineer to consult the Surgeons and lay before them with all convenient Expedition a Plan proper for receiving and accommodating 500 Men and thirty Officers."

The Cons. of 16th April, 1760, direct that one general hospital is to be kept up at Madras, and that the sick from Wandiwash, Chingleput, and Arcot, are to be sent down to Madras.

The hospital, however, remained in the churches for some thirteen years. In the Cons. of 23rd Feb., 1767, the Chief Engineer, Colonel Call, and the Surgeons, Briggs and Pasley, were directed to select a site for a new hospital. Call, shortly before he left India in 1770, made the following report to Government: —

"After surveying every Spot within the Walls or near the Town, I am still of opinion none is so proper for an Hospital as that where the Company's Garden house formerly stood, now called Hoghill; and according to the Dimensions of the Ground there, I leave with the Engineer a Plan calculated indeed with good Conveniences and Accommodations for 600 Men and about 20 officers, the whole to be terrassed and built in Chumam. It is true the Plan is expensive and large, but as one third or half of it may be built at once, to be augmented afterwards, I thought it best to project it as large as the Ground would permit."

The Cons. of 20th Dec., 1770, contain a letter from Surgeons Briggs and Pasley to the Council, urging the necessity for building the new hospital without further delay. This letter, as well as Call's report, are given at length in Love's Vestiges of Old Madras, (Vol. III, pp. 34, 35). Colonel Patrick Ross, who had lately arrived from England as Chief Engineer, was ordered to prepare a plan and estimate. In Cons. of 5th April, 1771,

he proposed to erect a double block of buildings, to cost, with out-offices, Pagodas 46,500. The Surgeons, Pasley and Scott, represented the necessity of having large and airy wards, but Ross stated that to enlarge the wards to twenty feet would raise the estimate to pagodas 55,500. On 12th April the Governor directed the Chief Engineer to proceed as quickly as possible with the new plan. Tenders were called for, and that submitted by John Sullivan, a young Writer of six years' service and twenty-three years of age, was accepted. It amounted to pagodas 42,000.

Stephen Briggs, Senior Surgeon of Madras, went home in Jan., 1771. Pasley became Senior Surgeon, and Samuel Scott second Surgeon. Scott died at Madras a year later, on 20th April, 1772, and Anderson was appointed to succeed him as second Surgeon.*

A Public Despatch to England, dated 15th Oct., 1772, reports that the new hospital has been completed, and occupied. It consisted of two blocks, perhaps the most westerly of the present buildings. They were of one story only, but were designed to carry another story above, when required.

From the hospital of 1772, the present Madras General Hospital has descended in a direct line. Orme's map of Madras shows a hospital battery, erected while the French besieged Madras in 1758-59, pretty nearly on the site of the present hospital. The actual buildings, however, have from time to time been renewed.

The Madras Mily. Cons. of 12th Nov., 1782, contain an order that two members of the Council are to visit the General Hospital every week, and report its condition to the Committee. The same Cons. of 20th June, 1783, contain new medical regulations, chiefly on superintendence of medical stores, indents, etc. These regulations are long, filling ten folio pages. They were approved and brought into force four days later, on 24th June.

In the Mily. Cons. of 28th Jan., 1704, it is laid down that the control of the management of the hospital is entrusted to the Head Surgeon at the Presidency, and that diaries must be kept by every Surgeon and Assistant Surgeon attending the hospital.

Orders issued in the Fort St. George Gazette, of 9th Dec., 1814, turned the General Hospital into a Garrison hospital.

* For Scott, see Chap. XVIII, Rank, Vol. I, p. 302.
"The appointments of Surgeon and Assistant Surgeon of the General Hospital are abolished, and that Institution becomes the Garrison Hospital of Fort St. George, containing as at present a receptacle for Patients not belonging to the Garrison, in conformity with existing Regulations.—The monthly allowance of fifty Pagodas for medical expenditure now drawn by the Garrison Surgeon, is discontinued.

"The Assistant Garrison Surgeon of Fort St. George will hereafter invariably have charge of the Dispensary, and will receive for that duty an increased allowance of fifty Pagodas monthly. He is removed from the control of the Medical Storekeeper, and will reside constantly in the Fort.

"The Assistant Surgeon of the Black Town will hereafter be an Assistant under the Garrison Surgeon. He will have charge of the Black Town, the Jails, and the Native Infirmary, and will reside constantly in the Black Town.

"The following appointments will take place:

"Mr. Surgeon S. Heward, to be Garrison Surgeon of Fort St. George.

"Mr. Assistant Surgeon R. H. Stuart to be Assistant Garrison Surgeon, and Superintendent of the Dispensary.

"Mr. Assistant Surgeon T. Sergeant, to be Black Town Assistant Surgeon, under the new arrangement.

"Mr. Assistant Surgeon Underwood will have medical charge of the Male and Female Asylums, and will reside in the vicinity of those Institutions."

In 1842 the Madras Medical Board describe the General Hospital as an institution for the reception of sick, both European and native, civil and military. The buildings occupied a space 185 yards long by 145 broad. The main hospital was a pukka one-story building, consisting of two parallel ranges connected by a third, in the form of a capital letter H, one half being reserved for the sick of the European regiment in Fort St. George, the second half for other sick Europeans. In the same enclosure, running its whole length, but detached from the hospital, was a range of tiled buildings, one half of which was set apart for European women and children, the other half for natives of both sexes, in separate wards. In 1850 the entire building was reconstructed, and not only doubled in size, resembling two capital letters HH side by side, but an upper story was added to both. The new buildings were occupied in 1861. The eastern H was assigned to British troops, the western used as a Civil General Hospital, of which the upper story was occupied by Europeans and Eurasians, the lower by native sick. Women and children were transferred to a building hired for the purpose in Vepery, and twenty years later, in 1881, to the Old Lying-in Hospital. Out-patients were first treated in 1862, a new out-patient
department was built in 1884. In 1879 a block was built for infectious diseases, which had been treated since 1861 in temporary sheds or in tents in the compound.

In 1893 new wards were built on the roof of the western wing, making a third story. In 1895 the western half of the eastern wing, or station hospital, was handed over to the civil authorities, and became part of the Civil General Hospital. The patients from the old hospital for women and children at Egmore were then transferred to the General Hospital. In 1899 the remaining portion of the Station hospital was handed over; and, for the first time in its history, the whole block of buildings became a purely civil institution.

From 1841 to 1865 the staff consisted of two officers only, the Surgeon and the Assistant Surgeon. In 1865 a third, called Senior Medical Officer, was added. In 1878 a fourth was sanctioned, and the staff became, Senior Medical Officer, Senior Surgeon, Assistant Physician, and Resident Surgeon. In 1882 a Second Surgeon was appointed, and in 1893 an additional medical officer. In 1895, when the women's and children's hospital was incorporated, the Surgeon of the Second District joined the staff. In 1899 the Staff, now seven in number, were named as follows—

- Senior Medical Officer.
- First Physician.
- Assistant Physician.
- Additional Medical Officer.
- Senior Surgeon.
- Second Surgeon.
- Resident Medical Officer.

In 1901 a further reorganization took place, and two more members were added to the staff, which was then constituted as—

- Senior Medical Officer.
- First Physician.
- Second "
- Third "
- Fourth "
- First Surgeon.
- Second "
- Third "
- Resident Medical Officer.

The Royal Victoria Caste and Gosha Hospital for women was founded in 1885, under the Presidency of Lady Grant Duff, patients being admitted for the first time on 15th Dec., 1885. The foundation stone of the hospital buildings was laid on 18th Sept., 1886, and the building opened in June, 1890, when the temporary quarters, hitherto used, were given up. The Raja of
Venkatagirin contributed a lakh, and the Maharaja of Vizianagram Rs. 62,000 towards the cost.

Native Hospital.—Surgeon William Gordon appears to have been the first to suggest the establishment of a hospital for natives at Madras. On 19th Nov., 1787, he submitted plans for this purpose to the Council, to the Governor, to the Medical Board, and to the Nawab of the Karnatak.* Nothing seems to have come of this proposal at the time, or till after a lapse of ten years. In March and September, 1797, Assistant Surgeon John Underwood applied for the grant of a piece of ground at Pursewakam, a suburb to the south of Madras, as a site for a hospital for indigent native sick. The Supt. of the Company’s lands objected to the site mentioned, whereupon Underwood applied for any piece of waste ground for a site. In 1798 is recorded a letter to Underwood from the Court of Directors, stating that all necessary assistance would be given to him in erecting and maintaining a hospital for native poor.† Finally, a Public Letter from Fort St. George, dated 19th Oct., 1799, reports in paras. 39-44.‡

"Hospital for the reception of Indigent Poor. M' Underwood, who erected it, allowed 150 Pags. per month in lieu of all demands for rent and expenses of Repairs, and as Attending Surgeon 100 Pagodas p. month. The Hospital placed under the immediate Control and Superintendence of the Medical Board."


"Paras. 132-137. Funds and Patients of Native Infirmary have been transferred to the Native Hospital and Poor Fund, to obviate inconvenience of a double establishment.

"Para. 138. M' Sherwood appointed Surgeon to consolidated institution, with a salary of one hundred pagodas a month.

"Paras. 139-141. M' John Underwood, late Surgeon and Proprietor of the Native Infirmary has been granted the difference between the estimated value of that building and what it originally cost, amounting to Pags 2000. A further claim, preferred on account of his public services, rejected."

Another Madras Public Letter, dated 15th March, 1811, states in para. 248 that the admissions to the Madras Infirmary and

* Mly. Cons., 1787, Miscellaneous Book.
Native Poor Asylum, during the preceding year, had numbered 610, of whom 530 had been relieved. In para. 249 it is reported that the grounds and buildings of the old Native Infirmary had been sold for two thousand pagodas to Mr. Harrington for a charitable purpose. (Abstracts, Letters from Madras, Vol. IX, 1806-12).

In 1809 this Native Infirmary was combined, as stated above, with the Native Hospital and Poor Fund, in the institution known as the Monegar Choultry. This institution now has an income of Rs. 14,000, of which Rs. 9,000 is contributed by Government. A Foundling Hospital is attached to it. In 1867 the Venkatagiri Raja built another Choultry to the east of the Monegar Choultry, which has a capital of Rs. 1,92,000; and an annual income of nearly Rs. 4,000.

A Madras G.O. of 3rd Dec., 1828, records the establishment at Madras of a new dispensary, under an apothecary, for native public servants.

A Madras Public Letter, dated 26th Sept., 1816, reports in para. 144 that a Hospital for Lepers had been completed at a cost of pagodas 683. This hospital has since developed into the Madras Government Leper Hospital, situated in Washermanpet, near the Monegar Choultry. It receives lepers of all races and of both sexes. Since 1889 leper convicts from jails in the Madras Presidency have been transferred to this hospital, under orders issued in Madras G.O. No. 1245 Judicial of 17th July, 1889.

The Lunatic Asylum.—In 1703, Assistant Surgeon V. Conolly put forward proposals for the establishment of a Lunatic Asylum at Madras. On 15th Nov., 1703, Government sanctioned the project, on 19th Nov., Conolly accepted the terms offered, and the establishment of the Asylum is ordered in a G.O. of the 25th Nov.* These facts were reported to Court in a Mily. Letter from Fort St. George, dated 18th Feb., 1704, paras. 88, 89. The Asylum was opened on 1st Oct., 1704. A Mily. Letter, dated 18th Oct., 1794, para. 3, states that the lunatic asylum is ready, and that Mr. Conolly is granted 250 pagodas a month for the charge thereof.† This asylum appears to have been built by Conolly,

† Abstracts, Letters from Madras, Vol. IV, 1796-97, p. 413. Regulations for the admission of lunatics to the Asylum are given in Madras G.O. of 20th Sept., 1794, which also notifies the facts that the Asylum is ready to be opened, and Conolly's appointment as Supt.
and to have remained his property until he sold it to Dalton, Government paying a rent of Rs. 825 a month for its use.

Valentine Conolly, who started this lunatic asylum, entered the Madras Service as Assistant Surgeon on 16th June, 1788, became Surgeon on 24th June, 1790, retired on 2nd Feb., 1803, and died in London on 2nd Dec., 1819. In 1791-93 he was Secretary to the Medical Board. He was the father of five sons, four of whom lost their lives in the service of their country; Edward Barry Conolly, Captain, 6th B.C., killed in action at Fort Tutamundara, north of Kabul, 20th Sept., 1840; Arthur Conolly, Captain, 6th B.C., murdered with Colonel Stoddart at Bokhara, on or about 17th June, 1842; John Balfour Conolly, Lieut., 20th B.I., died of fever in Bala Hissar, Kabul, while a hostage there, 7th Aug., 1842; and Henry Valentine Conolly, M.C.S., Magistrate of Mala-bar, murdered there by Mopla fanatics, 11th Sept., 1855.

Madras Mily. Cons. of 8th Oct., 1799, record the appointment of Surgeon Maurice Fitzgerald to the charge of the Lunatic Hospital. Fitzgerald went on furlough in 1802, and was succeeded by Surgeon John Goldie,* who held the post for about five years. In 1807 the Asylum passed into the hands of Surgeon James Dalton, who bought the property from Conolly for pagedas 26,000, and retained the appointment for about seven years, when John Underwood was gazetted to it, in the order of 9th Dec., 1814, quoted above. A Madras Mily. Letter of 15th June, 1810, reports in para. 350 that Surgeon Dalton’s application for renewal of the lease of the Lunatic Hospital had been refused.

Dalton rebuilt the whole asylum, enlarging the accommodation. This asylum was situated in Kilpaurk. The site is now occupied by College Park, the residence of the Principal and Staff of the Madras Christian College. It was for long known in Madras as Dalton’s Madhouse. The property appears to have remained in possession of Dalton’s heirs, being only rented by Government, till the new asylum was occupied, in 1871.

James Dalton entered the Madras Medical Service as Assistant Surgeon on 1st July, 1791, became Surgeon on 14th May, 1800, and S.S. in 1815. He died in England, on furlough, on 16th Sept., 1823. Dalton is connected with a curious bypath of English

* Entered 12th Jan., 1790, Surgeon, 9th Jan., 1798, Suptg. Surgeon, 16th July, 1812, member Medical Board, 15th May, 1819, retired 31st Dec., 1823, died in London 11th June, 1855.
history, through his wife, Catharine Augusta Ritso, who died at Madras in 1873. This lady was supposed to be a daughter of George III, by Hannah Lightfoot. The story, however, is improbable. Hannah Lightfoot was born in 1730, George III in 1738. His marriage to Hannah, if it ever took place, must have been carried out about 1754; certainly before 1760, when he came to the throne. Mrs. Dalton was thirty-two when she died, so must have been born about 1781, when Hannah Lightfoot was fifty, and when any connection with the King had long ceased. Mrs. Dalton might possibly, however, have been Hannah's granddaughter. Whether Hannah Lightfoot was actually married to George III, when Prince of Wales; or whether she was his mistress; or whether there was only some slight flirtation between them; or, lastly, whether the whole story of their relations is an invention, will probably never be known with certainty. All that is known on the subject will be found in a work called The Fair Quaker, Hannah Lightfoot, and her relations with George III, by Mary L. Pendered; London; Hurst and Blackett; 1910. Mrs. Dalton's alleged relationship is discussed on pp. 287 and 288. There were several other claimants to similar descent.

From 1841 to 1867 harmless idiots were kept in the Monegar Choultry, to avoid overcrowding the Asylum. Small asylums were also opened at Vizagapatam and Trichinopoly. The former is still in existence; the latter was closed in 1871, and the inmates transferred to the Madras Asylum.

In 1867 the Madras Government, in G.O. No. 20, Judicial of 7th Jan., 1867, sanctioned the construction of a new lunatic asylum, about a mile to the north-west of the old institution, at Lecock's gardens. The new buildings were occupied on 15th May, 1871, the cost being a little over two lakhs. Considerable additions have been made since that date. In 1802 the criminal lunatics of the Madras Presidency, who had up to that date been kept in jails, were transferred to the asylum.

The earliest mofussil hospitals in the Madras Presidency seem to have been established in the thirties of the nineteenth century. In the fourth volume of Wilson's History of the Madras Army it is stated that in 1842 there were only six civil hospitals in the Presidency outside Madras.
III.—Calcutta.*

The first hospital in Calcutta was opened towards the end of 1707 or early in 1708. Its construction was ordered in *Fort William Public Cons.* of 16th Oct., 1707.

"Having abundance of our Soldiers & Seamen yearly Sick, & this year more particularly our Soldiers, & the Doct* representing to us, that for want of an Hospital or Convenient Lodgeing for them is mostly the occasion of their Sickness, and such a place will be highly necessary as well for the Garrison and Sloops as Company's Charter party Shipping to keep the men in health, tis therefore agreed that a convenient spot of ground near the fort be pitch'd upon to build an Hospital on, & that the Casheirs pay out of ye Comp* Cash for the said occasion, towards perfecting it, the summe of two thousand Curr* Rupees & what more may be gathered in by Subscriptions from the Command* of the Europe and Country Shipping & the Inhabitants w*rb is to be forwarded & gathered in by Mr Abraham Addams who is to look after the building the same under the direction of the Councill."

Adams was *Bakshi*, or Paymaster, at the date of this order.

Captain Alexander Hamilton, in his *New Account of the East Indies*, thus describes the Calcutta hospital at the time of his stay in the town, about 1708.

"The Company has a pretty good hospital at Calcutta, where many go in to undergo the Penance of Physic, but few come out † give an Account of its Operation."

The *Bengal Cons.*, of 13th Feb., 1709/10, contain the following note on this hospital:—

"There being a great many Europe Soldiers in the Garrison who if they lodge about the town as Usally will create sickness and other inconveniences to themselves and others therefore tis

"Agreed the Hospital be walled round and that Barricks be made in it for the Soldiers to lodge in and that some of the Officers doe likewise lodge there and see a good Decorum kept amongst them."

Regulations for the Hospital are recorded in the *Cons.* of 20th Aug., 1713, and of 6th Dec., 1716.‡ The former were drawn up

* Much of the information here given about the first hospital in Calcutta, including the extracts from Cons. between 1700 and 1709, is taken from the late C. R. Wilson's works, *Early Annals of the English in Bengal*, and *Old Fort William in Bengal*. The spelling in these extracts by Wilson has been somewhat modernised. The history of the Calcutta General Hospital was also dealt with by the late Major D. M. Moir, M.S., in the *Indian Medical Gazette*, Jan. to March, 1903, these papers being re-published in *Bengal Past and Present*, No. 12, Vol. V. July to Sept., 1910.


by the Surgeons, and refer chiefly to discipline; the latter by the Council, and refer chiefly to the cost of maintenance, and to its apportionment between Government and the patients, who were chiefly soldiers in the Company’s service.

"Hospital Regulations, 20th Aug. 1713.
"The doctors belonging to this place delivered us the following articles for regulating the Hospital, viz.:
"1st. The Hon’ble United Company will supply the Hospital with 30 cots and bedding, 20 gowns, and 20 Pieces Gurrahs.*
"2nd. That all the soldiers unmarr’y’d be obliged to repair to the Hospital when sick.
"3rd. That every soldier pay 4 annœes per day whilst sick in the Hospital for his maintenance, every Corporall six, and a Sergeant half a rupee.
"4th. That a centry be kept to secure the sick from going abroad till admitted by the Surgeon and to hinder all Strong Liquors being brought in.
"5th. That the Steward have all the cloths under his charge and to supply them with all necessaries after the abovementioned gift, his wages 30 rupees per month out of which to pay for firewood, oyl, &c.
"6th. To provide 6 brass Potts, 6 Saucepans, 12 Porringers, a Conge off Pewter Plates with twenty spoons. — (Sd) Wm. Hamilton. (Sd) Richd Harvey."

"Hospital Regulations of 16th Dec., 1716.
"Regulations agreed on for the Hospital, at the Company’s charge.
"Medicines out of the stores bought in the Bazar; by Prescription of the Doctors.
"Cotts for the Sick.
"Cloths for Raggs.
"Wood, Charcoal, Potts and Pans, and what else shall be necessary.
"Six Harrys † during the sickly season, and four afterwards.
"Two washermen.
"Dyet of sick men, candles and oil to be made good to the Steward out of the soldier’s pay monthly at the Pay Table and no other deduction to be made before he is paid, which expense not to exceed four annœes a day for each man.
"All utensils and necessaries belonging to the Hospital to be under the Steward’s care, and he to be answerable for them.
"Agreed that Richard Warren be Steward upon likeinge and to lodge in the Hospital and be continued in case he behave himself well and diligent and honest in that office and that he be allowed ten rupees per month for his Dyent during his continuing in it besides the wages fifteen rupees per month already allowed for the service he does as Cooper."

Wilson also gives ‡ a series of accounts for the years 1716-17, in which appear many medical items. The repairs of the hospital

* Gurrahs, pharas, earthenware jars.
† Harrys, Haris, sweepers or scavengers.
and of the Doctors' quarters recur frequently, as well as a good deal of expenditure on drains. In one year the repairs of the Doctors' quarters cost Rs.494, and those of the "Doctors' Shop" or dispensary, Rs.757, large sums, considering the value of money then, to be spent in this way in a single year. One would have thought that it would have been cheaper to provide decent buildings once for all. The surgeons then drew £30, or 288 rupees, each, as a year's salary; so the repair of their quarters cost nearly as much as the pay of the two surgeons for the whole year.

In 1728 and 1730 the hospital again was greatly in need of repair.

"Pub. Cons., Fort William, 17th Dec. 1728. Mr Charles Hampton, Buxey, acquainting us that the Hospital is very much out of Repair.

"Ordered That Captain Thomas Snow, Master of Attendance, and John Aloffe, do take a careful Survey of the Same, and deliver their Report, in Writing, to this Board."

"Pub. Cons., Fort William, 11th May, 1730. Report of the Hospital. To the Honourable John Drane, Esq, &c. Honourable Sir and Sirs. Pursuant to an order of Council of the 4th Instant we have survey'd the Hospital and found all the Beams and most of the Window and Door frames rotten, insomuch that We apprehend that the Roof will be in danger of falling in next rains unless timely prevented by shoring all the Beams. We are &c.—Thomas Snow. John Aloffe."

In 1735 an order was passed that one of the Doctors should reside at the Hospital. In this order the word hospital is spelt in two different ways, within as many lines.

"Pub. Cons., Fort William, 26th March, 1735. It being necessary for one of the Doctors to reside at the Hospital for the Attendance of the Sick.

"Agreed that we build a Couple of Upper Rooms and a Shop for the Medicines at one of the Ends of the Hospital.""

In a General Letter from Bengal, dated 17th Feb., 1752, para. 100,* is noted an order that the Members of the Board, or Council, shall take it in turn to visit the hospital. A letter from Court, dated 3rd March, 1758, para. 85, repeats the order that each Member of Council shall in turn pay a weekly visit. The same order is again repeated in the Cons. of 10th March, 1760.†

In 1752 we find the Doctors applying for beds for the hospital. In the Cons. of 27th Oct., 1752, Mr. Plaisteed, Member of Council, visiting the hospital in rotation, reports :—

† Long. Selections, No. 300, p. 126; No. 419, p. 207.
"The Doctors are of opinion that Tuckposts for every room, made to take out at pleasure, will be a great preservation, as all lower rooms are very damp."

"Tuckpost," of course, is Takhtaposh, the ordinary quadrangular wooden bed, low but broad, in common use in native houses. The Hospital Regulations of 1713 show that cots were then provided for the sick. How these cots differed from the beds now wanted is not apparent; possibly the cot was a swung hammock, or a fixed bunk, like those on board ship. It can hardly be supposed that the sick slept on the damp floor. At this period, 1752, the hospital had two stories; the Surgeons' Mates lived in an unboarded room on the ground floor.

The hospital was again in great want of repairs in 1754. The Cons. of 25th July, 1754, contain the following report upon it.

"The Buxey delivers in a report of the Hospital put in want, to our orders.

"Ordered the said report be enter'd after this day's Consultation and

"To the Honourable Roger Drake, Esqf President and Governor, &c Council.

"Honourable Sir and Sirs. Agreeable to your Honours orders in pursuance of the Doctors report of the Hospital I have taken a careful survey thereof as follows. The Door Frames and Windows are almost all so bad that they must be chang'd, the South West and by West part of the Hospital especially that were the Lightning struck it is so very bad that Burgaces * having given way and the Beams and the Barbers gone that if new Battres-see is not speedily put that part will fall down. The Westernly Wall has belled out two feet notwithstanding the Beams and Burgages are supported with Latticains that there is an absolute Necessity to buttress them Immediately to keep the Wall standing, the North East End of the Hospital is crack'd in Number of Places and the Arches given way and several of the Burgages and Beams falling so that part must likewise be buttressed to keep it from falling, the whole Hospital must be speedily whitewash'd and Plastered as being entirely a Cutchia building should the Rains get into the Walls it will carry away all the mud from between the Bricks and in Danger of the whole. I am with Respect, Honourable Sir and Sirs, Your most Obedient Humble Servant, Paul Richard Pearkes, Buxey."†

This first Calcutta hospital, to which all the above entries refer, was destroyed at the capture of Calcutta in June, 1756.

* Burgaes, barqkas, small cross beams, of which a dozen or more may be required between each pair of the large beams supporting the roof. The word is spelt in four different ways in this extract.

† For Pearkes, see Chap. XI, Hillwall, and the Fall of Calcutta, Vol. I, pp. 158, 159.
A temporary hospital seems to have been occupied soon after the place was retaken by Clive in January, 1757. In the Cons. of 6th Sept., 1759, it is noted that the hospital is not large enough for the sick, and it is resolved to purchase Dr. Gray's house, to be used as a hospital, for Rs.15,000. In a valuation of public buildings in Calcutta, recorded in Cons. of 8th Oct., 1759, the hospital is valued at Rs.12,000.

In the Cons. of 21st Jan., 1762, the hospital is again reported to be ruinous.

"The Surveyor sends in a Letter representing that the Hospital and Salt Petre Godown are in great want of repair and that unless they are repair'd he imagines they must fall this year.

"Order'd he (be) directed to put the Hospital in repair."

Apparently some repairs were done, for the building seems to have survived the rains of 1762. In Cons. of 11th Oct., 1762, it was resolved to build a new hospital at Surman's, (Kidderpur).

"Finding great Inconvenience for Want of Room in our Hospital and from not having the Benefit of a free and open air.

"Agreed till such Time as the Hospitals can be built in the New Fort, that we build one near to Surman's with Fell Trees, and cover'd with Straw, under the Direction of Captain Green, upon the same Construction with those he has built at Ghyrotty, which are found to be extremely good and wholesome Lodgings."

The hospital at Ghireti was for sipahis. A similar hospital, more than twenty years earlier, is mentioned by Captain Fenwick * as suggested at Dean's Town, i.e. Dane's town, a place where the Danes had a thatched house on the west bank of the Hugli, south of its junction with the Rupnarayan, and opposite Hugli Point, about where the modern town of Giankhali now stands.

"I further put the Governor in mind of an Hospital on that spot, which stands high, and would not require more than two Subalterns, and thirty Soldiers, with the Peons and Inhabitants, to keep the Moratatoes at a proper distance. As the Hospital would be a receptacle for our sick soldiers, so it lies convenient for the ships anchoring either at Culpee, or Ingelee to send their sick Men to . . ."

The proposed hospital at Surman's was apparently never built, as a letter to Court dated 28th Nov., 1766, speaks of the

Hospital as "a temporary building in the Old Fort." The Cons. of 3rd March, 1766, contain a report from Mr. Fortnom, the Company's architect, stating that the old hospital is so much in want of repair as to be dangerous. In Cons. of 31st March, 1766, it was resolved to sell it.

"Extract from Mr. Fortnom's report in Cons., of 3rd March, 1766. "From the Nature of the Post I have the Honour to hold (tho' I have not been favored with particular Instructions) I look on it my Duty to Acquaint you, That the Old Hospital Adjoining to the Head Surgeon's House is in so ruinous a Situation that it appears necessary to take it down to prevent its doing mischief."

"Cons., 31st March, 1766. Letter from Mr. Fortnom the Civil Architect of the 10th Instant read, containing Estimates of the repairs of the several Buildings mentioned in his Letter to the Board of the 3rd Instant.

"Agreed that the Company's Old Hospital, the small House for the Assistant Surgeon, and the house lately occupied by Mr. Gray be sold."

A Letter to Court dated 2nd Feb., 1769, reports in para. 113 that the old hospital had been sold for Rs. 414, not quite one per cent. of its book value.

"The old Hospital was brought on ballance in the General Books at Current Rupees 41,554-1-3, but being almost destroy'd by a violent Storm the Remains of it sold only for Current Rupees 414 and the Ballance of this head we ordered also to be wrote off."

A new hospital, however, had been provided before the old one was sold. In Cons. of 29th Sept., 1766, it was resolved to remove the old hospital and burial ground, and to build a new hospital. The graveyard thus closed was the old one, where St. John's church now stands. It contained the bodies of all Europeans who had died in Calcutta since 1698, (probably about 12,000), except those who had perished in the Black Hole; their bodies were flung into the ditch of the Old Fort.*

"Cons., 26th Sept., 1769. The Board taking into Consideration the great Inconvenience attending the want of a proper Hospital for the Military the present one being only a Temporary Building in the Old Fort destitute of the proper accommodation It is judged Expedient that a commodious One be erected as soon as possible and the Civil Architect attending the Board on this Occasion he is Ordered to point out a proper Spot for a Hospital to be built upon, and at the same time to deliver in a Plan of One with an Estimate of the Ex pense.

"The present Burying Ground, situate in the middle of the Town is also very detrimental to the Healths of the Inhabitants and too much

confining the Civil Architect is therefore directed to point out a more convenient Situation for one to be made of proper Dimensions."

The Cons. of 16th Nov., 1767, record that Mr. Kiernander's garden house is to be surveyed by the Chief Engineer, the Surgeons and the Civil Architect, who will report if it will do for a hospital. A letter from Mr. Kiernander about the conversion of his house into a hospital is entered in Cons. of 4th April, 1768. On 25th April is recorded the payment of Rs. 98,900 to Mr. Kiernander for this house. Further discussion on the subject took place on 16th May.

A Letter to Court, dated 13th Sept., 1768, reports in para. 65 *:

"Hospital, Revd Mr. Kiernander's House purchased for one at Rs. 98,900 and have contracted with him for building the additional buildings thereto."

Mr. Kiernander reached Calcutta in 1758. His garden house had therefore probably been built between 1758 and 1767. He contracted to hand over his garden house in the suburbs, to be used as a hospital, and to build two large new wings, by the 13th June, 1770. The garden house was actually handed over to Government, and occupied as a hospital, on 26th June, 1769, the west wing on 2nd April, 1770, and the east wing on 2nd June, 1770; as stated by Kiernander in a letter dated 1st May, 1772, recorded in the Cons. of 4th May, 1772.

This may be said to have been the third hospital erected in Calcutta. The first was that of 1707-08, and the second the temporary makeshift in the Fort, from 1757 to 1769. All three were primarily intended for the Company's soldiers and sailors, but admitted all Europeans, of all classes and of all callings.† This third hospital, with considerable additions and alterations, lasted up to our own time, and has only recently, between 1902 and 1908, been replaced by the magnificent buildings of the new Presidency European General Hospital. The entire cost of construction and maintenance of this hospital has always, practically, been borne by Government. The Woodburn block, for paying patients, alone, cost over three and a half lakhs.

Native Hospitals.—The first hospital for the Native poor in Calcutta was opened about the end of 1792 or beginning of 1793.

* Abstracts, Letters Received from Bengal, Vol. I, 1760-70, p. 311.
† The Cons. of 12th Oct., 1792, contain an order to the Hospital Board, dated 5th Oct., that all destitute sick Europeans are to be received in the General Hospital.
The C.G. of 18th Oct., 1792, notifies that it is intended to institute a hospital for natives. The same paper, on 1st Nov., 1792, states that a meeting had been held, at which it was determined (1) to institute a hospital for natives; (2) to vest the management in an equal number of European and Native Governors, residents of Calcutta; (3) to appoint a Committee to raise subscriptions and prepare a plan. Government granted a subsidy of Rs.600 a month, on 6th July, 1793. Twelve Governors were appointed. The first hospital was opened in a house in the Chitpur Road, subsequently a house in Dharamtola was bought, and opened as a hospital on 1st Sept., 1794.*

The C.G. of 20th Sept., 1806, gives the accounts and returns of the hospital for the year 1805-06, the year running from 1st Sept. to 31st Aug. The income for the year was Rs.12,188, the expenditure Rs.10,626; the balance in hand, Rs.831 in cash, and Rs.49,282 in Company's paper; also the house and grounds, which cost Rs.43,808. During the year 220 in-patients and 2874 out-patients were treated, and 1286 vaccinations were performed. There were 53 deaths, 4265 were relieved and discharged; while 62 patients, 10 in and 43 out, remained under treatment at the close of the year.

The following statistics are given for twelve years, from 1st Sept., 1794, to 31st Aug., 1806. The figures seem small to our modern ideas, but on the whole show a fairly steady increase. It would be interesting to know what was the cause of the sudden rise in the number of out-patients, nearly treble that of the previous year, in 1800-01, and the great fall, of about forty per cent., in 1804-05.

<table>
<thead>
<tr>
<th>Year</th>
<th>In-patients</th>
<th>Out-patients</th>
<th>Vaccinations</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1794-95</td>
<td>145</td>
<td>101</td>
<td></td>
<td>246</td>
</tr>
<tr>
<td>1795-96</td>
<td>155</td>
<td>151</td>
<td></td>
<td>306</td>
</tr>
<tr>
<td>1796-97</td>
<td>228</td>
<td>207</td>
<td></td>
<td>435</td>
</tr>
<tr>
<td>1797-98</td>
<td>228</td>
<td>405</td>
<td></td>
<td>633</td>
</tr>
<tr>
<td>1798-99</td>
<td>202</td>
<td>471</td>
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<td>673</td>
</tr>
<tr>
<td>1799-1800</td>
<td>201</td>
<td>124</td>
<td></td>
<td>325</td>
</tr>
<tr>
<td>1800-01</td>
<td>232</td>
<td>1902</td>
<td></td>
<td>2134</td>
</tr>
<tr>
<td>1801-02</td>
<td>222</td>
<td>2223</td>
<td></td>
<td>2445</td>
</tr>
<tr>
<td>1802-03</td>
<td>198</td>
<td>3981</td>
<td></td>
<td>4179</td>
</tr>
<tr>
<td>1803-04</td>
<td>218</td>
<td>4113</td>
<td></td>
<td>4331</td>
</tr>
<tr>
<td>1804-05</td>
<td>226</td>
<td>2755</td>
<td></td>
<td>4997</td>
</tr>
<tr>
<td>1805-06</td>
<td>220</td>
<td>2874</td>
<td></td>
<td>3094</td>
</tr>
</tbody>
</table>

* The institution of the hospital, and the Government grant of Rs.600 a month, were approved in Para 31 of a Public Letter from Court, dated 3rd July, 1795.
The admissions to hospital, for the preceding year, from 1st Sept., 1805, to 31st Aug., 1806, are also given, classified as follows:—

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wounds</td>
<td>77</td>
</tr>
<tr>
<td>Fractures</td>
<td>34</td>
</tr>
<tr>
<td>Venereal</td>
<td>4</td>
</tr>
<tr>
<td>Contusions</td>
<td>18</td>
</tr>
<tr>
<td>Scalded and burnt</td>
<td>4</td>
</tr>
<tr>
<td>Dropsy</td>
<td>7</td>
</tr>
<tr>
<td>Abscess</td>
<td>8</td>
</tr>
<tr>
<td>Fever</td>
<td>15</td>
</tr>
<tr>
<td>Palsy</td>
<td>2</td>
</tr>
<tr>
<td>Dysentery</td>
<td>2</td>
</tr>
<tr>
<td>Fistula in ano</td>
<td>1</td>
</tr>
<tr>
<td>Strangury</td>
<td>5</td>
</tr>
<tr>
<td>Locked jaw</td>
<td>2</td>
</tr>
<tr>
<td>Spleen</td>
<td>3</td>
</tr>
<tr>
<td>Rheumatism</td>
<td>2</td>
</tr>
<tr>
<td>Cancers</td>
<td>2</td>
</tr>
<tr>
<td>Ulcers and sores</td>
<td>21</td>
</tr>
<tr>
<td>Excessive vomiting</td>
<td>1</td>
</tr>
<tr>
<td>Tumours</td>
<td>1</td>
</tr>
<tr>
<td>Dislocations</td>
<td>1</td>
</tr>
<tr>
<td>Concussion of brain</td>
<td>3</td>
</tr>
<tr>
<td>Mortifications</td>
<td>3</td>
</tr>
<tr>
<td>Cholic</td>
<td>2</td>
</tr>
<tr>
<td>Catarrh</td>
<td>1</td>
</tr>
<tr>
<td>Scurvy</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>229</td>
</tr>
</tbody>
</table>

The return is signed "Robert Wilson, Superintendent."*

The conditions for which patients were admitted remind one strongly of those which now cause admission to a small mofussil hospital, where destitute paupers sent in by the police, and cases of injury, form the bulk of the in-patients. The former class of cases may be represented by ulcers and sores, one-tenth of the whole, and by palsy, dropsy, and mortifications; while no less than 137, much over one-half, are cases of injury. The number of admissions for dysentery, fever, spleen, and venereal disease, is very small, while cholera is not mentioned at all. Operation cases are obviously few in number, but may be represented by strangury (stricture), fistula in ano, abscess, cancers, and tumour.

The first Supt. appointed was John Shoolbred, who served as Surgeon of the Indiaman General Goddard in 1780-90, got a commission as Assistant Surgeon on 27th Sept., 1794, became Surgeon on 27th July, 1807, retired on 17th Jan., 1821, and died 12th Oct., 1831. He held this appointment throughout his whole service, till he went on furlough prior to retirement in 1818, with two intervals, one of furlough, the other when he acted as Supt. General of Vaccination in 1806-07, and Wilson acted for him in the Native Hospital.

In 1825 two branch dispensaries were opened in connection with the Native Hospital, now known as the Chandni Hospital. The Mayo Native Hospital, so called because it received a grant of half a lakh from the Mayo Memorial Fund, was opened in Jorabagan, Calcutta, on the east bank of the Hugli, in 1874; and the accommodation in the Chandni Hospital reduced to twelve

* For Wilson, see Chap. XVII, Rank, Vol. I, p. 317.
beds, intended for accidents and emergency cases only. The out-
patient department, however, remained large; and in 1909 a new
out-patient block was opened, built at a total cost, including the
site, of about Rs.1,06,000. The Corporation of Calcutta gave
the site, valued at Rs.14,000; the Bengal Government made
a grant of Rs.17,500; a Bengali lady, Srimati Raj Rani Dasi,
gave Rs.10,000; and the balance was made up by public sub-
scriptions, chiefly from the European firms of Calcutta. The
Bengal Government makes an annual grant of Rs.34,000 towards
the upkeep of the Mayo and the Chandni hospitals.

The Calcutta Medical College Hospital had its first beginning
on 1st April, 1838, when a small clinical hospital, with thirty
beds, and an out-patient dispensary, were opened in connection
with the new College, for clinical instruction.

In the C.G. of 9th Sept., 1844, it is notified that Babu Mutty
Lal Seal had made a gift of a valuable piece of land, beside the
Medical College, for a hospital for the poor. On this ground the
Medical College Hospital was subsequently erected, the name of
the donor’s son being preserved in the out-patient department,
which was rebuilt on a much larger scale and with greatly improved
equipment in 1897-98. The foundation stone of the Medical
College Hospital was laid by the great Governor-General, Lord
Dalhousie, on 3rd Sept., 1848, and the hospital was completed,
at a cost of £20,000, early in 1853. It contained 500 beds, in
twenty-four wards, one being reserved for women and children,
and absorbed the old Eye Infirmary and Lying-in Hospital.
This hospital has always admitted both European and native
patients. The building was designed by Messrs. Burn and Co.,
and erected under the supervision of Major Hugh Frazer, Bengal
Engineers. The cost was met, partly by the endowments of the
old and the new fever hospitals, whose work was taken over by
the new hospital, amounting to Rs.1,248 and Rs.57,771 respec-
tively, partly by a donation of half a lakh from Partab Chand Sinh,
Raja of Bardwan.

The building has, of course, been greatly altered and added to
since 1853, and the original site given by Babu Mutty Lal Seal,
valuable as it then was, has been more than doubled in area, at
a price far more than double the value of the original site, at
the cost of Government. The chief additions have been the Eden
Hospital, opened in 1881–82, the Ezra Hospital in 1887, the
Shama Charan Laha Eye Hospital in 1891, and the Prince of Wales Surgical Block, opened in March, 1911, at a cost of over ten lakhs, out of which nearly two and a half lakhs were paid for the site.

The Campbell Hospital, Scalda, was opened by the Justices of the Peace for the town of Calcutta, the predecessors of the present Municipal Corporation, on 1st July, 1867, as a pauper hospital, and on 1st Dec., 1873, was transferred to Government as the hospital attached to the Campbell Medical School. This hospital was almost entirely rebuilt in 1908-10.

The South Suburban or Sambhu Nath Pandit Hospital, at Bhowanipore, was opened in 1897, being built at the cost, partly of Government, partly of the Corporation of Calcutta, and partly out of the funds of the old Sambhu Nath Pandit outdoor dispensary, which was absorbed into the new hospital.

The Lunatic Asylum.—Some sort of a Lunatic Asylum was in existence in Calcutta prior to 1787. The Proceedings of the Calcutta Medical Board of 3rd April, 1787, contain a memorial from Surgeon G. M. Kenderdine, in charge of the Insane Asylum. The same Proceedings, for 24th May, 1787, note that Mr. Kenderdine, in charge of the insane Europeans, died on 19th May. The Board recommended to Government, in a letter dated 7th May, 1787, the foundation of a regular asylum, and nominated Assistant Surgeon William Dick to its charge. This was approved in a letter from Government, dated 21st May, 1787, signed Jonathan Duncan, Asst.-Secy., Public Department. Dick was appointed on a salary of Rs.200 a month. A Bengal Mily. Letter, dated 16th Aug., 1787, reports in para. 108—

"Lunatic Hospital. Have accepted the proposals of Mr. Dick, an Asst Surgeon, for the erection of one. The House is to be built at his Expenсе, and rented by the Company at 400 Rupees p. Month." *

A General Letter from Bengal, dated 6th Nov., 1788, reports in para. 98 that sanction has been given to the erection of a Lunatic Hospital for females, for which a rent of 200 Rupees a month will be paid.

George Mainwaring Kenderdine entered the Service on 30th Dec., 1763. While serving as Surgeon to the First Brigade, in 1767, he was dismissed for neglect of duty. The Cons. of 1st Oct., 1767, contain a protest against his dismissal, and a request for a

* The establishment of the Lunatic Asylum was approved in para. 40 of a Mily. Letter from Court, dated 8th April, 1789.
public inquiry. Another petition is contained in Cons. of 23rd Nov., 1767, in which he states that he had been qualified seventeen years, was apprenticed for eight years at St. Thomas' Hospital under William Hunter, Hugh Smith, and Thomas Baker, that he is a Member of the Apothecary's Company, and that he had served for three years in the King's army in Germany. A Bengal Letter of 17th Oct., 1774, reports in para. 58, that he had been readmitted to the Service as "Youngest Surgeon, not to rise." William Dick went to India as Surgeon of the Queen Indianman in 1781, and was appointed Assistant Surgeon on 8th Nov., 1781. His career has been described in Chap. XXX, Medical Officers Employed in England.

The Proceedings of the Calcutta Medical Board for 20th April, 1795, contain a letter from the Sub-Secretary to Government, stating that it had been decided to build a hospital at Monghyr for insane sepoys. This asylum was closed from 1st Nov., 1831, as notified in Bengal G.O. of 5th Aug., 1831. Seventy years later, at the end of the nineteenth century, the remains of this asylum were still known as the bagalkhana (madhouse).

The Proceedings of the Calcutta Medical Board for 20th March, 1800, contain a letter from Assistant Surgeons Roger Keys and Michael Cheese, stating that a hospital for natives has been established in Calcutta, and suggesting that a hospital should be opened for non-official Europeans, especially sailors. The Medical Board did not approve of the project, considering that there was sufficient accommodation for seamen in the General Hospital, where they were kept quite apart from the soldiers.

An Eye Infirmary was established in Calcutta by G.O. No. 344 of 18th Nov., 1824. On the opening of the Medical College Hospital the Eye Infirmary was absorbed into it, and still remains a part of that institution, though since 1891 it has been accommodated in a separate building, the Shama Charan Laha Hospital, for the erection of which Babu Shama Charan Laha gave a donation of Rs.60,000.

A Lying-in Hospital was opened in Calcutta early in 1840, with an out-patient dispensary and a training class for dhais. This institution also was absorbed into the Medical College Hospital, but since 1881 has been worked in a separate building, the Eden Hospital, named after Sir Ashley Eden, Lieutenant-Governor of Bengal from 1877 to 1882.

Some hospitals, in the eighteenth century, seem to have been
built at a very cheap rate. A Mily. Letter from Bengal, dated 16th Aug., 1787, reports in para. 102, that the Purveyor has been directed to erect a General Hospital for the troops at Chunar, the cost not to exceed 5037 Sonaut rupees. On the other hand, the plans drawn up by Mr. Fortnom, the Civil Architect, for a new General Hospital in Calcutta, and laid before the Council on 26th Aug., 1767, as recorded in Cons. of that date, were estimated to cost 2,75,000 Arcot rupees for the hospital alone, with 1,57,000 more for staff quarters and out-officers. And the Bombay Cons. of 26th Feb., 1781, record that the plans of the proposed new hospital, drawn up by the Principal Engineer, involve a cost of Rs.5,15,025. The Calcutta estimates are considerably higher than, and the Bombay estimates more than double, the cost of the Calcutta Medical College Hospital, a little over two lakhs, in the middle of the nineteenth century. It is not surprising that both these plans were rejected as too expensive.

It was not until the beginning of the nineteenth century that hospitals for the general population were established in some of the chief mofussil towns. Military hospitals, for soldiers, had, of course, been in existence much earlier.

A Public Letter from Calcutta, dated 13th Jan., 1804, reports in paras. 255–58 that the benefits of the Native Hospital in Calcutta have been fully realized; and that the Governors of the hospital have been directed to communicate with the senior Civil Servants at Dakka, Patna, Murshidabad, and Benares, with a view to the opening of similar hospitals in these towns. The Proceedings of the Calcutta Medical Board, of 7th March, 1804, note that the Governor-General approves of the action of the British inhabitants of Dakka, in instituting there a hospital for natives, and appoints William Tutin *to its charge, also sanctioning the supply of European medicines from the Company’s stores. Thus was founded the hospital now known as the Mitford Hospital, after Mr. Mitford †Judge of Dakka, who left over a lakh and three-quarters to the hospital. The buildings were erected in 1854, but have been greatly added to since, especially during the last twenty years.

† Robert Mitford, entered the Bengal Civil Service as Writer, on 29th Aug., 1799, became fourth judge of the Provincial Court of Appeal and Circuit at Dakka in 1828, went on furlough the same year, retired on 1st May, 1831, and died on 21st April, 1836.
The same Proceedings, of 7th March, 1804, contain a memorial suggesting that similar native hospitals should be established at Patna, Murshidabad, Benares, and Bareli.

Some of the best known mofussil hospitals in Bengal were founded in the 'thirties of the nineteenth century, e.g. Muzafarpur, by Kenneth Mackinnon, Civil Surgeon of Tirhut, and the Imambbara Hospital at Hugli, which owes its origin to Thomas Wise,⁠* Civil Surgeon and Principal of Hugli College; it was opened in Aug., 1836. In an advertisement in the C.G. of 9th May, 1831, repeated in many subsequent issues, Mackinnon proposed the establishment of the hospital at Muzafarpur, which was opened soon after. In an article entitled Dispensaries in Bengal, in the Indian Annals of Medical Science for Oct., 1853, Mackinnon writes that there were then open and at work, fifty-five dispensaries, entirely or mainly supported by Government, in Bengal and the N.W.P., and that fifteen more had recently been sanctioned for the Panjab.

The duties of the Civil Surgeon, as Supt. of the dispensary, in the middle of last century, were very different from those he now performs. Letter No. 602, dated 30th June, 1841, from the Govt. of India, Genl. Dept., gives the following orders on the subject:

"Superintendents will understand it to be the desire of Government that Sub Assistant Surgeons † should receive from them all needful advice and encouragement, but that they should, as much as possible, be left to prescribe remedies themselves, and to perform all surgical operations that they may be considered competent to undertake."

By rule 31, Chap. XL of the Bengal Medical Regulations of 1851, the number of in-patients in a mofussal hospital was limited to eight.

"The number of indoor patients to be under treatment at any one time is to be limited, as far as practicable, to eight, and therefore only the most interesting medical cases should be admitted, and the accommodation chiefly reserved for the subjects of surgical operations and severe injuries."

I.M.D. Circ., No. 54 of 27th April, 1863, restates the duties of the Supt. of a Government dispensary as follows:

"The D.I.G. will explain to Surgeons and Asst Surgeons serving under him, who may be entrusted with such supervision, that Government holds them responsible for all that goes on in their dispensaries; and that though

* For Wise, see Chap. XXVIII, Surgeons as Civil and Political Officers, Vol. II, p. 137.
† The class of officers known, since 1873, as Civil Assistant Surgeons.
their assistants may be left to prescribe and operate, as directed in the
paras above quoted,* it is the imperative duty of Superintendents not only
to visit them with regularity, but themselves to know from what diseases
the various patients are suffering, and personally to ascertain that the
prescriptions and surgical treatment are what they ought to be."

IV. — Burma.

Not long after the annexation of Pegu, after the second
Burmese war, a dispensary was opened at Rangoon, in April,
1854. This dispensary gradually developed into a large indoor
hospital. In 1871 new hospital buildings were erected, including
a separate female hospital and lying-in ward. The new General
Hospital at Rangoon was sanctioned in 1904, begun in 1906, and
completed and opened in 1911. Its cost was nearly five lakhs.

The Friend of India of 21st Oct., 1852, contains an advertise-
ment asking for subscriptions towards the establishment of a
hospital for the indigent poor of Rangoon, and for seamen and
lascars, signed by John Dawson, M.D., Missionary Physician,
Supt. of the hospital. The advertisement distinctly states that
the hospital had been opened at that date, Oct., 1852. Dr. John
Dawson served in the American Baptist Mission at Rangoon from
1850 till 1861, when he resigned. Whether his hospital afterwards
was taken over by Government, or whether it was a separate
institution, is not clear.

* Paras. 23 and 24, Chap. XL. Bengal Medical Regulations of 1851. Para.
24 reproduces the extract from letter No. 602 of 30th June, 1841, quoted above.
CHAPTER XLIII

MEDICAL EDUCATION IN INDIA *

"And gladly wolde he lerne and gladly teche."
CHAUCER, Canterbury Tales, prologue, line 310.

The most ancient Indian work on medicine is the Ayur Veda, the age in which it was written is not known, and only fragments of the manuscript now exist. The nature of medicines and of diseases is treated in some of the Puranas, especially in the Agni Puran. The works of Charaka and Susruta are abridgments of the Ayur Veda. The former author is the better on medical, the latter on surgical subjects. Susruta's work is the oldest book on medicine which the Hindus now possess. Instruction in medicine, by the Hindu system, seems to have been given entirely by masters to pupils, individually, or in very small numbers. No system of instruction in medical schools or classes existed.

A mine of information on the subject of ancient Hindu medicine is contained in Dr. T. A. Wise's work, A Commentary on the Hindu System of Medicine, Thacker and Co., Calcutta, 1845.

The Musalman conquest of India brought into the country the Yunani, or Graeco-Arabian system of medicine, founded on the science of Greece and Egypt, and developed under the rule of the Khalifas of Bagdad. Medical schools to teach this system are said to have been established at Delhi, Agra, and Haidarabad, but no accounts of these schools appear to have survived.†

* The information about medical education in Bengal, given in this chapter, is derived chiefly from three sources, in addition to the notifications quoted from the C.G. (1) An anonymous pamphlet entitled, The Medical College of Bengal, undated, but printed in Calcutta in 1839 or 1840. (2) An introductory lecture on The Rise and Progress of Medical Education in Bengal, delivered on 15th June, 1869, at the opening of the twenty-fifth session of the Calcutta Medical College, by Surgeon W. C. B. Eatwell, the Principal. (3) History of the Medical Schools of the Bengal Presidency, by Assistant Surgeon K. McLeod, Secretary to the Inspector General, 1872.
† Medical Education in India, by K. McLeod, Caledonian Medical Journal, Jan., 1908.

H.I.M.S.—VOL. II.
Some accounts of the earliest attempts to train subordinate medical assistants have been given in Chap. XXVII, *The Uncovenanted and Subordinate Medical Services*. The earliest definite regulations on the subject are those issued in the G.O. of 15th June, 1812, published in the C.G. of 2nd July, 1812, directing the training of European and Eurasian boys to form a Sub-medical Service for the army. Natives of India, however, were not admitted to this class. A similar class was started in Madras about the same time.

Some sort of instruction in the Hindu and Yunani systems of medicine respectively, was given in Calcutta, early in the nineteenth century, in the Sanskrit College and in the Madrasa. This instruction, however, was given entirely by lectures and by reading, no attempt was made at dissection or practical work. The first real medical school in India was the school for training native doctors, established in Calcutta by G.O.G.G. of 21st June, 1822, published in the C.G. of 27th June, 1822. In Eatwell's introductory lecture it is stated that these classes were established in 1826. The actual date seems to have been earlier. The Court of Directors at first objected to the establishment of this school. The Indian Government remonstrated against the orders sent out for its abolition. A long debate on the subject of medical education in India took place at the East India House on 21st June, 1826, as a result of which the orders for the abolition of the school were cancelled, and its establishment approved by the Court. Similar medical schools were started in Bombay in 1826, by Bombay G.O. of 1st Jan., 1826, and in Madras in 1827, by Madras G.O. of 20th March, 1827. The Bombay school was kept up for only six years, and was abolished by Bombay G.O. of 20th June, 1832.

Medical education on a higher scale was initiated by Lord William Bentinck, Governor General, who in Oct., 1833, appointed a Committee for the purpose of "improving the constitution and extending the benefits of the Native Medical Institution, and digesting a system of management and education calculated to give effect in both of these respects to the wishes of Government." The members of this Committee were Surgeon John Grant, Apothecary (Medical Storekeeper) to the Company; J. C. C. Sutherland, Esq., Secretary to the Education Committee; C. E. Trevelyan, Esq., Deputy Secretary, Pol. Dept.; Assistant Surgeon
Spens of the Bodyguard; Assistant Surgeon M. J. Bramley, Assistant Marine Surgeon; and Babu Ram Komal Sen. The Committee submitted a lengthy report in Oct., 1834, in which, while they acknowledged the merits of the Native Medical Institution, they summarised its defects in the following terms:—

"(1) The absence of a proper qualifying standard of admission; (2) scantiness of means of tuition; (3) the entire omission of practical human anatomy in the course of instruction; * (4) want of regularity in the time of admitting students; (5) the shortness of the period of study; (6) the want of means and appliances for the convenience of private study; (7) the desultory character of the students' attendance on the practical means of instruction; (8) the inconclusive nature of the power and authority wherewith the Superintendent is vested; (9) the mode of conducting the final examination." Detailed recommendations were submitted to remedy these defects. On one important point the members of the Committee were divided in opinion, namely, whether instruction should be imparted in an Indian vernacular or in English. The Anglicists finally prevailed over the Orientalists, and it was emphatically laid down that "a knowledge of the English language we consider as a sine qua non, because that language combines with itself the circle of all the sciences and incalculable wealth of printed works and illustrations, circumstances which give it obvious advantages over Oriental languages, in which are only to be found the crudest elements of science, or the most irrational substitutes for it." †

The recommendations of the Committee were approved, and the foundation of the Medical College, from 1st Feb., 1835, was sanctioned in G.O. No. 28 of 28th Jan., 1835, the Native Medical Institution and the medical classes at the Madrasa and at the Sanskrit College being abolished.

"Gouv. G.O. No. 28 of 28th Jan., 1835.

"The Right Honourable the Governor General of India in Council is pleased to pass the following resolutions.

"1. That the Sanskrit College medical class, the medical class of the Madrissa, and the Native Medical Institution, be abolished from the 1st proximo.

"2. That such of the students of the native medical institution as are now capable of passing their final examination shall be appointed native doctors, and all the other students of that institution be transferred to the native corps of the Army, upon their present salaries, to become native doctors when represented to be duly qualified by a committee of medical officers, or, if not found qualified in two years, to be discharged.

* In the Native Medical Institution dissection was performed on the bodies of sheep.
† The above paragraph is taken bodily from K. McLeod's article, Medical Education in India, in the Caledonian Medical Journal for Jan., 1908, pp. 8, 9.
3. That a new college shall be formed for the instruction of a certain number of native youths in the various branches of medical science.

4. That this college shall be under the control of the education committee.

5. That the education committee shall have the assistance of the following medical officers, ex-officio. The Surgeon of the General Hospital, the Surgeon of the Native Hospital, the Garrison Surgeon of Fort William, the Superintendent of the Eye Infirmary, and the Apothecary to the Hon'ble Company.

6. That instruction be given through the medium of the English language.

7. That a certain number of native youths, whose ages shall not exceed twenty years, or be less than fourteen years, shall be entered upon the foundation as foundation pupils of the institution.

8. That all candidates for admission as foundation pupils shall be required to present respectability of connexions and conduct, shall be able to write and read English and Bengali or English and Hindustanee, and with these qualifications all natives between the age of fourteen and twenty shall be equally eligible without exception to creed or caste.

9. That the candidates shall be examined by the education committee and the superintendent of the institution, and that the selection of the pupils shall be determined by the extent of their acquirements.

10. That the number of the foundation pupils shall be limited to fifty.

11. That the foundation pupils shall each receive a monthly stipend from Government of Rs. 7, which may be increased according to the following scale.

12. That all foundation pupils be divided into three classes, each class having a different salary.

   The first class, Rs. 7 per month.
   second    9
   third     12

13. That the formation of these classes shall be entrusted to the management of the education committee and the superintendent of the institution, it being distinctly understood that the classification will depend upon the acquirements of the pupils, and not upon the period of their studies; excepting, that no pupil shall, during the first two years of being on the foundation, receive a higher salary than Rs. 7 per month, but that afterwards the increase will depend upon the classification.

14. That the foundation pupils shall be expected to remain at the institution for a period of not less than four years, and not exceeding six years.

15. That all foundation pupils be required to learn the principles and practice of the medical science in strict accordance with the mode adopted in Europe.

16. That all the pupils who shall have completed their studies according to the form prescribed, shall be entitled to have certificates signed by the superintendent to enable them to present themselves for final examination.

17. That the final examination for granting certificates of qualification to practise surgery and medicine, or for admission into the service, shall be publicly made by the committee of education, assisted by the medical officers above mentioned.
18. That such pupils as shall be deemed qualified to practise surgery and medicine shall receive certificates of qualification signed by the president of the committee of education and countersigned by the secretary of that committee and the superintendent of the institution.

19. That the public service shall be supplied with native doctors from the institution, and with a view to this object, whatever appointments may happen to fall vacant during the period which intervenes between two examinations shall be offered for the acceptance of the students who passed at the examination next ensuing. The selection shall be regulated by the extent of professional acquirements.

20. That as an inducement for pupils of a respectable class to enter the institution, the pay of the native doctors who shall have been educated at the college and have received the certificates of qualification, shall be Rs.30 per month; after seven years' service their pay shall be Rs.40 per month; and after fourteen years, Rs.50 per mensem. After twenty years' service they shall be entitled to retire upon a pension, regulated according to the proportions granted to native commissioned officers of the army, if no longer capable of performing duty from age, disease, or wounds.

21. That the education committee shall be charged with providing a suitable building for the college, a library, anatomical preparations, and all other objects of indispensable necessity to the education of the pupils, the expense being previously submitted for the sanction of the Council of India.

22. That the college shall be under the management of a European superintendent, who shall devote the whole of his time to the interests of the institution, and who shall not be permitted to enter into private practice, or to hold any situation that can in any way withdraw his attention from his duties at the institution.

23. That the superintendent shall be permitted to draw a staff allowance of _sonat_ Rs.1200 per month in addition to his regimental pay and allowances.

24. That the superintendent shall be aided in his duties by a European assistant, who shall draw a staff salary of Rs.600 per month in addition to his regimental pay and allowances.

25. That the European assistant shall devote the whole of his time to his duties at the institution, and that he shall not be permitted to enter into private practice or to hold any situation that can withdraw his attention from the interests of the institution.

26. That the European assistant shall exercise no control over the management of the institution, excepting by permission of the superintendent, but that he shall confine himself to the duty of assisting the superintendent in the work of educating the pupils.

27. That the whole management of the institution, the charge of the pupils, the mode of teaching, and all the arrangements, shall be entrusted to the judgment and guidance of the superintendent, under the control of the education committee.

28. That the superintendent shall make half yearly reports upon the state of the institution to the education committee, by whom these reports shall be forwarded with their sentiments to the Government of India.

29. That the division of duties of the superintendent and of the
assistant shall be made at the discretion of the former, subject to the control of the education committee.

"30. That the superintendent with the aid of his assistant shall be expected to instruct the pupils in anatomy, surgery, medicine, and pharmacy, and to qualify them for medical charges, either civil or military.

"31. That the pupils shall visit, to witness the practice, the General Hospital, the Native Hospital, the Hon'ble Company's dispensary, the Dispensaries for the poor, and the eye infirmary.

"32. That the superintendent shall be supplied, under the direction and management of the education committee, with a certain monthly allowance of stationery for the use of the institution.

"33. That the formation of a plan of medical education and the rules and discipline of the institution shall be entrusted to the education committee.

"34. That in addition to the pupils in the foundation, the benefits of this college shall be open to all classes of native youths between the age of fourteen and twenty, without exception to creed or caste, provided they possess respectable connexions and conduct, and can read and write English and Bengalee, or English and Hindoostanee, and that all thus qualified shall, at the discretion of the committee of education, be permitted to attend the instruction at the college, subject to its discipline and regulations.

"35. That the superintendent shall draw a pay bill for the establishment of the institution, which shall be countersigned by the secretary of the education committee, and shall annex to it a nominal roll of the youths on the foundation of, and establishments attached to, the native medical institution, and voucher for the payment of the house rent, both signed by the secretary of the education committee.

"His Lordship in Council is pleased to nominate Mr. Assistant Surgeon M. J. Bramley to the situation of Superintendent of the new medical college; Mr. Bramley's appointment to have effect from the 1st proximo."

The original staff of the Calcutta Medical College consisted of a Supt., Assistant Surgeon M. J. Bramley, with Assistant Surgeon H. H. Goodeve as his only assistant. These officers were granted staff salaries of Rs.1200 and Rs.600 respectively, in addition to the regimental pay and allowances of their rank; and had to devote their whole time to the College, not being allowed to practice. By G.O. No. 10 of 5th Aug., 1835, Bramley's official designation was changed from Supt. to Principal, that of Goodeve from Assistant to the Supt. to Professor of Medicine and Anatomy; while a Professor of Materia Medica and Chemistry was added to the staff, Assistant Surgeon W. B. O'Shaughnessy. Dissection of the human body was started on 10th Jan., 1836, the first native to handle the knife being Pandit Madhusudan Gupta, a Hindu of Vaidya caste, formerly teacher of medicine at the Sanskrit College.

Bramley died of fever in Calcutta on 19th Jan., 1837, aged 34. On his death the office of Principal was abolished, a non-medical
man being appointed instead as Secretary, and the staff increased and re-arranged, by Bengal Civil Order No. 33, of 1st Feb., 1837, which made the following appointments, Goodeve retaining the professorship of Medicine and Anatomy, and O'Shaughnessy that of Chemistry and Materia Medica.

Assistant Surgeon C. C. Egerton to be Professor of Surgery and Clinical Surgery.
Surgeon N. Wallich, Supt. Botanical Gardens, to be Professor of Botany.
Assistant Surgeon T. Chapman, to be Lecturer on Clinical Medicine.
Assistant Surgeon J. McCosh to officiate as Lecturer on Clinical Medicine.*

Mr. R. O'Shaughnessy to be Demonstrator of Anatomy.
Mr. David Hare to be Secretary.

The above formed a Council for the administration of the College. The office of Principal remained in abeyance for nearly twenty years, until revived on 1st Feb., 1856, when the title and office were conferred on Surgeon James Macrae, Professor of Medicine. David Hare, however, from 1837 to 1841, was the only non-medical Secretary; his successors being F. J. Monat, (1841-51), E. Goodeve, (1851-55), and F. N. Macnamara, (1855-56).

Richard O'Shaughnessy was an Unconvenanted Medical Officer. He was subsequently nominated Assistant Surgeon from 4th Dec., 1841, became Surgeon on 9th Oct., 1855, retired on 4th May, 1860, and died on 13th April, 1889. He held the Professorship of Surgery from 1845 to 1859, and was the author of a surgical work, On the Diseases of the Jaws, Calcutta, 1844.

Chapman never joined. McCosh resigned in the following year, 1838, when the lectureship on Clinical Medicine was abolished, and the salary saved devoted to the maintenance of a small clinical hospital, opened on 1st April, 1838, to which an out-patient department was attached.

Some further changes were made in the arrangements of the duties of the various chairs by Bengal G.O. of 3rd March, 1841, when H. H. Goodeve was appointed Professor of Midwifery and Anatomy, a combination which seems curious to a generation educated under modern ideas of sepsis; Medicine and Clinical Medicine became a separate chair under J. Jackson; and E. W. W. Raleigh became Professor of Surgery and Clinical Surgery, vice Egerton, who had gone on furlough.

Since that date, during the last seventy years, many changes have been made by the re-arrangement of the professional chairs, and by the addition of new ones.

Chemistry, separated from Materia Medica, March, 1842.
Ophthalmic Surgery, separated from Surgery, 1842.
Anatomy and Physiology, separated from Midwifery, Feb., 1845.
Medical Jurisprudence, instituted 1850.
Descriptive and Surgical Anatomy, a lectureship since 1837, became a full chair in 1855.
Dentistry, instituted May, 1861.
Hygiene, instituted Aug., 1864.
Zoology and Comparative Anatomy, separated from Anatomy, Jan., 1869.
Pathology, instituted Dec., 1871.
Clinical Surgery, instituted 1912.

From time to time there has been some doubling up of these chairs. The Professorship called above that of Anatomy and Physiology, was practically one of Physiology and Comparative Anatomy, as there was a separate lectureship up to 1855, and after that a Professorship of Descriptive and Surgical Anatomy; and on the institution of a separate Professorship of Zoology in 1869, it became a chair of Physiology alone. The Professorship of Pathology has, on more than one occasion, been combined with that of Physiology, until they were finally separated, and made two independent chairs, in 1897.

To return to the history of the College, other than that of the professorial chairs. In Jan., 1839, the first students passed out, after a medical course of three and a half years. Eleven students went up for the examination, two withdrew, five passed, and four failed. Of the whole eleven, one, James Pote, was a Christian; one, B. C. Chaudhri, was a Brahman; (these were the two who withdrew); five were Kayasths, and four Vaidyas, by caste. All, except one Kayasth from Delhi, were Calcutta men.

The five who passed were Uma Charan Sett, Dwarka Nath Gupta, Raj Kishan Deb, Nobin Chandra Mitra, and Shama Charan Datta. They were all without delay provided with appointments, as Sub-Assistant Surgeons, the first four in the hospitals of Dakka, Murshidabad, Patna, and Chittagong, respectively, the last in Patna Opium Agency.*

* This statement is taken from the pamphlet mentioned above, The Medical College of Bengal. In Bengal G.O. of 12th April, 1839 (C.G., 8th May, 1839), Uma Charan Sett is posted to Agra, Raj Kishan Deb (who is called Raj Kisto Dey) to Delhi, and Shama Charan Datta to Allahabad.
Badan Chandra Chaudhri, the Brahman student who withdrew from the first examination, passed in 1841, and was appointed Sub-Assistant Surgeon to the Imambara Hospital at Hugli, in August, 1842, being the first to hold that post. He retained it until 1857, when he retired, settled in Hugli, and lived there for another half century, dying so recently as 18th Aug., 1907, aged 97, leaving a large fortune.

In 1839 also for the first time were admitted "free students" without stipends or obligations; also students from Ceylon. When the Colombo Medical School was opened, on 1st June, 1870, students from Ceylon ceased to attend.

In 1839 also the Hindustani class for the instruction of native doctors for the army was instituted, with a staff of native teachers lecturing in the vernacular, with effect from 1st Oct., by G.O. No. 136 of 12th Aug., 1839. This class was a resuscitation of the School of the Native Medical Institution, which had been in abeyance for the four years, 1835 to 1839. Lectures were given in Urdu. With the opening of the vernacular medical schools up country, at Agra and Lahore, the training of native doctors for the army was gradually transferred to them. The Bengali class for native doctors was sanctioned on 23rd Jan., 1852, and opened in that year. It was transferred to Scaldan in 1873.

In 1845 the chairs were rearranged to some extent, as noted above, in order to meet the requirements of the examining bodies in London, the University, College of Surgeons, and Society of Apothecaries. In 1846 these bodies recognised the medical education given in Calcutta as qualifying for their examinations. The Medical College gave a diploma in medicine and surgery, until the Calcutta University was founded in 1857, and granted the degrees of M.D. and L.M.S., (Licentiate in Medicine and Surgery). The degree of M.B. was subsequently added.

In 1845 Assistant Surgeon H. H. Goodeve was deputed to England, taking with him four students, to complete their education at University College, London; S. C. Chuckerbutty, Dwarka Nath Bose, Bhoa Nath Bose, and Gopal Chandra Sil. D. N. Bose, B. N. Bose, and G. C. Sil passed the M.R.C.S. in 1846, and returned to India in 1847, when they were appointed to the Uncovenanted Medical Service. The two latter both served in the Panjab campaign of 1849. B. N. Bose served for over thirty years as an Uncovenanted Medical Officer in Bengal, where he was for long
Civil Surgeon of Faridpur. At his death, in 1885, he left his whole property to charitable purposes; from this bequest are maintained the Bhola Nath Bose dispensaries at Barrackpur, and at Mandalai, in the Hugli district. Cluckerbutty took the M.R.C.S. in 1848, the M.B. and M.D. of London in 1849, served as an Uncovenanted Medical Officer for a few years, then resigned, went to England, and at the first competitive examination for the I.M.S. in Jan., 1855, passed in first. He was gazetted Assistant Surgeon from 24th Jan., 1855, became Surgeon on 24th Jan., 1867, Surgeon Major on 1st July, 1873, went on furlough in that year, and died in London on 29th Sept., 1874. From 1864 till his death he held the chair of Materia Medica in the Medical College.

In 1845 also the course of tuition at the Medical College was extended from four to five years, a reform which was carried out in Great Britain forty-five years later.

By G.G.O. No. 200 of 25th June, 1847, were founded the classes at the Medical College for the Military Sub-Medical Department, the members of which were then known as Apothecaries, now as Military Assistant Surgeons. Hospital apprentices, after two years' service in military hospitals, were sent to the College for a two years' course of instruction. Forty years later, the preliminary military duty was abolished, and candidates for this Service, after passing an entrance examination, posted to the College direct, for a three years' course.

During the last twenty years, most of the class-rooms and laboratories of the Calcutta Medical College have been rebuilt on a larger and improved scale. This work was started, and much of it carried out, during the principalship of Lieut. Colonel G. Bomford, who held that post from 1893 to 1904; afterwards Surgeon-General Sir Gerald Bomford, Director General of the I.M.S. from 1905 to 1909.

Since the middle of the nineteenth century a number of other medical schools have been founded in the Bengal Presidency, and also one at Rangoon, in Burma. Of these schools the only ones which teach up to the standard of the Presidency towns, and are of University rank, are those at Lahore and Lucknow. It is probable, however, that the Dakka school will also, before long, give an education of the University standard for the first two years of the curriculum.

There is also a project now on foot to open, at Delhi, a female
hospital and a medical school for women only, to be called The Queen Mary Hospital and Medical School.

The following is a list of the medical schools now in existence in Northern India:

<table>
<thead>
<tr>
<th>City</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Agra</td>
<td>October, 1860</td>
</tr>
<tr>
<td>Lahore</td>
<td>November, 1873</td>
</tr>
<tr>
<td>Sealdia, (Calcutta)</td>
<td>23rd June, 1874</td>
</tr>
<tr>
<td>Patna</td>
<td>15th June, 1875</td>
</tr>
<tr>
<td>Dakka</td>
<td>15th February, 1876</td>
</tr>
<tr>
<td>Cuttack</td>
<td>1878</td>
</tr>
<tr>
<td>Indore</td>
<td>1895</td>
</tr>
<tr>
<td>Ludhiana, (Mission)</td>
<td>18th June, 1900</td>
</tr>
<tr>
<td>Dibrugarh</td>
<td>February, 1907</td>
</tr>
<tr>
<td>Rangoon</td>
<td>25th January, 1912</td>
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</tbody>
</table>

Agra.—The first medical school opened in the Bengal Presidency outside Calcutta was that at Agra, founded in 1853, the first Principal being Surgeon John Murray, who was succeeded in 1857 by Assistant Surgeon T. Farquhar. The school continued its work, with only a short interruption, throughout the Mutiny in 1857–58; although a member of its staff, Sub-Assistant Surgeon Wazir Khan, teacher of Materia Medica, became prominent among the rebels.

Lahore.—The Lahore medical school was opened in Oct. 1860, the first Principal being Assistant Surgeon J. B. Scriven, who held the post for over ten years, and was succeeded on 7th July, 1871, by Surgeon T. E. Burton-Brown. When the Panjab University was constituted by Act XIX of 1882, this school became its medical faculty.

Nagpur.—The Nagpur medical school was opened on 1st Oct., 1867. Its first Principal was Surgeon S. C. Townsend, who was succeeded in March, 1868, by Surgeon W. B. Beatson. Both these officers subsequently rose to the administrative grade; Beatson died so recently as 26th April, 1911. This school was closed about thirty years ago; but a scheme is now on foot for its resuscitation.

Sealdia, Patna, Dakka, and Cuttack.—The four medical schools in Bengal proper were all started within a period of three years. The first was the Campbell medical school at Sealdia, Calcutta, named after the Lieut. Governor, Sir George Campbell. It was opened in Nov., 1873, with the transfer to the Campbell Hospital
of the Bengali native doctor class from the Medical College. So it is the direct successor of that class; and also, one may say, of the Native Medical Institution of 1822. The second, the Temple medical school at Patna, named after the Lieut.-Governor, Sir Richard Temple, was opened on 23rd June, 1874, to serve the needs of the province of Bihar, instruction being given in Hindustani. Its first Principal was Surgeon Major D. B. Smith, then Civil Surgeon of Patna, afterwards, from 1885 to 1889, Professor of Military Medicine in the Army Medical School at Netley, till his death there on 3rd June, 1889. The third, at Dakka, for Eastern Bengal, was opened on 15th June, 1875, its first Principal being also D. B. Smith, who had recently been transferred from Patna to Dakka. The fourth, at Cuttack, for Orissa and the Uriya speaking districts of the province, was opened on 15th Feb., 1876, the Civil Surgeon of Cuttack, Surgeon W. D. Stewart, being its first Principal, a post which he held till his death at that station on 23rd Nov., 1890. The official title of the head of these vernacular medical schools is not Principal, however, but Superintendent.

By the recent administrative changes in India, two of these schools, Patna and Cuttack, are now included in the new province, Bihar and Orissa. In connection with the new University at Dakka, it has been proposed to affiliate the Dakka medical school, giving medical education up to the first M.B. exam., after which the University students would finish their course of instruction at Calcutta.

Indore.—The medical school at Indore was opened in 1878, to train native youths as medical subordinates for employment in Indore and the neighbouring native States; and owes its origin to Surgeon-Major Thomas Beaumont, then Residency Surgeon of Indore. It is supported by the Native States of Rajputana and Central India. The diploma given by this school was recognised by Government, under the orders conveyed in Govt. of India, Foreign Dept., No. 5429-1-B, of 30th Dec., 1905; (I.M.D. Circs. 1906, p. 7). In 1910 the Daly Chief’s College at Indore moved into new and enlarged buildings. The old buildings were handed over to the Indore hospital and medical school, the name of which was at the same time changed to the King Edward Hospital and Medical School. This school accommodates about one hundred students.
Rangoon.—The medical school at Rangoon was opened in February, 1907, for the education of Burmese students.

Ludhiana.—The North India School of Medicine for Christian women was opened in 1894 by Dr. Edith Brown. Its object is to train women for work in Zenana Medical Missions. The course is one of four years, the qualification at present is of the Sub-Assistant Surgeon grade; but it is intended to add a five years’ course for the Assistant Surgeon grade, and degree of the Panjab University.

Dibrugarh.—The Berry White Medical School at Dibrugarh was opened on 18th June, 1900, the first Supt. being Major E. A. W. Hall, Civil Surgeon of Dibrugarh. It owes its origin to a legacy of half a lakh from Surgeon Major J. B. White, who was for long Civil Surgeon of Dibrugarh, and was extensively interested in the tea industry of Assam. John Berry White was born on 5th June, 1834, and entered the I.M.S. as Assistant Surgeon on 23rd July, 1858, became Surgeon on 23rd July, 1870, and Surgeon Major on 1st July, 1873. After having spent his whole service of twenty-four years in Assam, he retired on 15th July, 1882, and died in London of heart disease on 19th Nov., 1896. The following reference to Dr. White appears on page 525 of Chevers’ work, A Commentary on the Diseases of India, published in 1886.

“A young medical officer, who arrived in Calcutta circa 1858, was attacked with haemoptysis almost immediately upon landing. When he was convalescent, the head of our department, Sir John Forsyth, whose secretary I was, said to me ‘What can we do with W——? We can neither send him home nor to the Upper Provinces. He shall go with that detachment to Dibroghur in Upper Assam. He will have a pleasant voyage of some days up the Bramapootra, and the climate is temperate.’ Dr. W—— had no return of his disease. Most of his service was at the above station, and he has lately retired with the appearance of a remarkably powerful and healthy man.”

Lucknow.—The King George’s Medical College at Lucknow is the latest addition to the list of medical schools in India. The foundation stone was laid on 26th Nov., 1905, by King George V., when visiting India as Prince of Wales, at Shahmina, overlooking the river Gumti, near Lucknow city. The College was formally opened by Sir John Hewett, the Lieutenant Governor, on 25th Jan., 1912. A magnificent new hospital is also in course of construction, in connection with this school. The estimated cost of the medical school is thirteen lakhs, and of the hospital twenty
The course is one of five years, for a University degree. The staff is as follows:—

Principal, Professor of Surgery, and First Surgeon.
Professor of Medicine, and First Physician.
Professor of Midwifery and Gynaecology.
Professor of Physiology.
Professor of Pathology and Bacteriology.
Professor of Anatomy.
Lecturer on Materia Medica and Therapeutics.
Lecturer on Forensic Medicine.
Demonstrator of Ophthalmology.

The first five chairs are held by officers of the I.M.S., the Professor of Midwifery being also Civil Surgeon of Lucknow. The chair of Anatomy and demonstratorship of Ophthalmology are held by Civil Assistant Surgeons; the two lectureships by Military Assistant Surgeons, the Assistant to the Civil Surgeon holding that of Forensic Medicine.

During the last twenty years several private medical schools have been started in Calcutta, which give medical education on European lines, and bestow diplomas upon the students who go through their curriculum. The diplomas given by these schools are not recognised as qualifying for Government or Local Fund service.

The Madras Medical College.—A Medical school was established at Madras by G. O. of 13th Feb., 1835, during the Governorship of Sir Frederick Adam. Classes began in July, 1835; the school buildings, erected at a cost of Rs.9861, were opened in July, 1836. Two different courses were given, one to medical apprentices for the apothecary branch, the other to medical pupils for the native branch of the Military Sub-Medical Department. The latter on leaving the school were appointed dressers. The students of this branch gradually developed into native doctors, then in 1868 military hospital assistants, and finally in 1910 became military Sub-Assistant Surgeons. The course for each branch lasted two years, Anatomy and Physiology being taught in the first year, Medicine and Surgery in the second. No civil

* The history of medical education in Madras is taken partly from a work entitled History of the Madras Medical College, from its foundation in 1835, and of the old General Hospital, published at Madras in 1885; partly from information kindly furnished by Captain C. A. F. Hingston, I.M.S., Personal Assistant to the Surgeon General, Madras. The History bears no name on the title page, but the author was Brigade-Surgeon J. Keess, Principal of the College in 1885.
or private students were admitted. The Madras Medical School was therefore, at first, on a level with the Calcutta Native Medical Institution, founded in 1822, rather than with the Calcutta Medical College, founded in 1835.

The staff at first consisted of a Supt., Surgeon William Mortimer, and an Asst. Supt., Assistant Surgeon George Harding. These two officers received a staff allowance of Rs.400 and Rs.300 respectively, in addition to their military pay.

Mortimer went on furlough in Jan., 1841, and never returned to India. Harding succeeded him as Supt., and James Shaw became Asst. Supt. Harding retired in 1850, when Shaw became Supt., and later on Principal, when that title was first given, in Nov., 1858. He remained in charge of the Medical College up till 1862, was promoted to D.I.G. on 1st March, 1863, to I.G. on 1st Aug., 1864, became Principal I.G. on 10th Aug., 1866, retired on 28th Feb., 1867, and died at Anerley on 1st Dec., 1889.

In 1846, a third chair, Chemistry and Materia Medica, was added, and in 1847 two more. In the same year the course for the apothecary class was lengthened to three years. The staff in 1847 were—

Professor of Anatomy and Physiology, Asst. Surg. T. L. Bell.
Professor of Chemistry and Materia Medica, Surgeon T. Key.
Professor of Surgery, Asst. Surg. J. Shaw.
Professor of Medicine, and Supt., Surgeon G. Harding.

By G.O. No. 92 of 23rd April, 1847, stipendiary civil students were admitted, to go through a course of five years, to qualify for the grade of Civil Sub-Assistant Surgeon. The Madras Medical School thus came on a level with those of Calcutta and Bombay, though the name was not changed to Medical College until 1st Oct., 1850. The first batch of these civil students qualified in 1852, and were the first to receive a diploma from the College.

In 1850 a chair of Botany was added, and with it was combined Materia Medica, instead of, as formerly, with Chemistry. In the same year the course was extended to three years for the native doctor class, and to four years for the apothecary class.

By G.O. of 12th Oct., 1857, the vernacular medical school was transferred to Vepery, and placed under the superintendence of the Surgeon of the second district, assisted by teachers from the
subordinate department. This change was not a success, and the school was transferred back to the Medical College in 1860.

In 1855–56 the course of instruction given at Madras was recognised by the Royal College of Surgeons, London. In 1863, the Madras University, which had been constituted by Act XXVII, of 1857, claimed the exclusive right to give medical degrees and diplomas, and the power of granting diplomas was withdrawn from the Medical College, except as regards the students already under instruction.

In 1867 the staff was reorganised, the number of major professorships being raised to eight; with five minor professorships, Botany, Hygiene, Dentistry, Medical Jurisprudence, and Comparative Anatomy. The eight major professorships then were—

Professor of Medicine, Principal and Physician, (Senior Medical Officer), General Hospital.
Professor of Surgery, and Surgeon, General Hospital.
Professor of Materia Medica, and Medical Storekeeper.
Professor of Chemistry, and Chemical Examiner.
Professor of Anatomy, and Port Surgeon.
Professor of Ophthalmology and Physiology, and Supt. Eye Infirmary.
Professor of Midwifery and Diseases of Women, and Supt. Lying-in Hospital.
Professor of Pathology, and Resident Surgeon, General Hospital.

By G.O. No. 6 of 11th Jan., 1875, female students were admitted for instruction. The first class of these students qualified in 1878, at their head standing Mrs. Scharrileb, now on the staff of the London School of Medicine for Women, and one of the leading gynaecologists in London.

In 1877, under the advice of S.G. George Smith, the senior department, for training Civil Assistant Surgeons, was closed, by Order No. 1240 of 4th May, 1877. This retrograde step was unpopular, and this order was in force for less than a year, the class being reopened by G.O. No. 65 of 14th Feb., 1878. The students of this class, however, who had hitherto received a free education, had for the future to pay fees for their instruction.

The following vernacular medical schools, for training Hospital Assistants, have been in existence, from time to time, in the Madras Presidency. In 1871, a scheme was put forward by I. G. Edward Balfour, for the establishment of five vernacular medical schools, two in the Telugu, two in the Tamil, and one in
the Malayalim-speaking districts of the Presidency, but nothing came of it at the time.

(1). Vepery, Madras; as mentioned above; transferred from the Medical College by G.O. of 12th Oct., 1857, retransferred to the Medical College in 1860.

(2). Rayapuram, Madras; transferred from the Medical College by Govt. Order No. 367, Education Dept., of 18th Nov., 1882; retransferred to the Medical College in Aug., 1887, and again transferred to Rayapuram in 1903.

(3). Nellore; opened 1876, closed 1897.
(4). Dindigul, opened 1874.
(5). Madura, transferred from Dindigul, 1885.
(7). Vizagapatam, opened 1st July, 1902.

Nellore.—The Nellore Medical school was opened in 1876 by Surgeon Major Aeneas Macleod Ross, then District Medical and Sanitary Officer of Nellore, to train medical subordinates for employment in the famine camps and dispensaries, during the great Madras famine of 1876-78. Twelve youths were at first appointed, and were sent out to duty after one month's training. After the famine they went through a further course of two years, and were then examined at the Madras medical school, ten out of the twelve passing. The school was subsequently taken over by the District Board. It was closed in 1897. During its twenty years' existence about 150 youths qualified from it.

Dindigul and Madura.—A medical school was opened at Dindigul in the Madura district, about 1874, by two American missionaries, Dr. Palmer and Dr. Chester. In Jan., 1885, the school was transferred to Madura; it was abolished on 1st March, 1887, and the students transferred to Tanjore.

Tanjore.—The Prince of Wales medical school at Tanjore was opened on 1st Oct., 1883, by the Tanjore District Board, and was taken over by Government in July, 1905.

The Grant Medical College, Bombay, is named after Sir Robert Grant, Governor of Bombay from 1835 to 1838. The foundation stone was laid on 30th March, 1843; it was opened in 1845. In 1860 it was affiliated to the Bombay University, constituted by

* This account of the Nellore medical school was supplied, through Captain C. A. F. Hingston, by Mr. N. P. Ramasawmy Naidu, retired Asst. Professor, Madras Medical College, who himself, as a Hospital Asst., helped Dr. Ross to found the school, and who held the post of Asst. Supt. for most of the twenty years the school was in existence.
Act XXII of 1857. In 1891 were opened the laboratories, the gift of Framji Dinshaw Petit.

Medical education of three grades was given, to Civil Sub-Assistant Surgeons, (Assistant Surgeons since 1873), to the Military Sub Medical Department, and, for the first thirty years, to native doctors and Hospital Assistants, Civil and Military. The classes of this grade were transferred to the vernacular medical schools when these were opened. The school was opened to women in 1884.

There are three vernacular medical schools in the Bombay Presidency for the training of the Hospital Assistant class, now called Sub-Assistant Surgeons.

1. The Byramji Jijibhai school at Poona, opened 1878.
2. The Byramji Jijibhai school at Ahmadabad, opened 1879.
3. The School at Haidarabad, Sind, opened 1881.

The medical school for native doctors, established at Bombay, in 1826, and abolished in 1832, has been mentioned above.

Haidarabad.* A G.O., dated Jan., 1840, by Major General Fraser, Resident at Haidarabad, quoted in Chap. XXXV, The First Half of the Nineteenth Century, shows that a medical school was then in existence at Bolarum. Some information about this school is given in the Friend of India, of 13th Aug., and 17th Sept., 1846. It was established in 1835, by Assistant Surgeons Thomas Key, Medical Storekeeper, and Simon Young, Staff Surgeon to the Haidarabad Contingent, to train medical subordinates for service in the Contingent; and was closed from 1st May, 1846, the demand for such subordinates having been sufficiently supplied.

The present Haidarabad medical school was opened on 1st Sept., 1846, under Assistant Surgeon W. C. Maclean,† then Residency Surgeon. Practically it may be said that the school was transferred from Bolarum to Haidarabad in 1846. Since that date the school has trained both Assistant Surgeons and Hospital Assts. (now Sub-Assistant Surgeons), the former chiefly for service in the Haidarabad state, the latter for Berar. Instruction was given in Urdu up to 1883, when Surgeon Major Thomas Beaumont, then Residency Surgeon, substituted English. The school is not

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* Some notes on the history of the Haidarabad Medical School, by Surgeon-Major Edward Lawrie, then Residency Surgeon of Haidarabad, and Supt. of the School, will be found in the Indian Medical Gazette for Jan., 1888, p. 21.
affiliated to any University in India, but its courses of lectures are accepted as qualifying for examination, by the University and Royal Colleges of Edinburgh.

Travancore and Ajmir. The Friend of India of 13th Aug., 1846, in its note on the Bolarum school, states that Major-General Fraser, when Resident at Travancore, had started a medical school there, about the same date as that of Bolarum, about 1835. And the same paper, in its issue of 17th Sept., 1846, reports that Lieut.-Colonel Sutherland, Agent of the Governor-General for Rajputana, had established a medical school at Ajmir. These medical schools probably trained compounders and dressers rather than native doctors, and appear to have had only a short life.
CHAPTER XLIV

MEDICAL SOCIETIES AND MEDICAL JOURNALISM IN INDIA *

"A child's among you taking notes."
Burns, *On the late Captain Grose's Peregrinations thro' Scotland.*

A.—Medical Societies.

The *Proceedings* of the Calcutta Medical Board of 24th April, 1788, less than two years after the Board had first come into existence, contain a letter, dated 16th April, 1788, from Assistant Surgeon John Peter Wade, suggesting the formation of medical libraries, one large library to be founded in Calcutta, with smaller ones at the headquarters of Brigades. The cost of maintenance was to be met by subscriptions of two rupees a month from each Surgeon, one rupee from each Assistant Surgeon. Wade was in advance of his time. The Medical Board did not take up the scheme, which fell to the ground. This was probably the first suggestion put forward in India of any combined action for professional improvement.

The first Medical Society established in India was started at Bombay, in 1790, or perhaps even earlier. A Public Letter from Court to Bombay, dated 15th Dec., 1790, in para. 54, permits the Agents of the Medical Society established at Bombay to send the books and apparatus required by the Society in the Company's ships.

More than thirty years later, the *Medical and Physical Society of Calcutta* was founded in March, 1823. The first President was

* Part of the information given on both these subjects is derived from two articles, the first entitled *Indian Medical Societies and Journals*, contributed to the *Caledonian Medical Journal* by Colonel Kenneth McLeod, and republished in that author's *Indian Medical Memories*; the second, *A Short Historical Note on Medical Societies and Medical Journalism in Calcutta*, by Major Leonard Rogers, 1.M.S., read at the first meeting of the Medical Branch of the Asiatic Society of Bengal, in Aug., 1906.
Surgeon James Hare, junior, one of the Presidency Surgeons, who entered as Assistant Surgeon on 4th Aug., 1802, retired on 6th June, 1827, and died in Edinburgh on 12th Feb., 1831. The first Secretary was Assistant Surgeon John Adam, Assistant Surgeon of the Presidency General Hospital, who entered on 14th Oct., 1816, and died in Calcutta on 29th July, 1830. This Society included among its members a number of men in the Madras and Bombay Services, as well as Bengal men. The Members of the Medical Board were Patrons of the Society. Government allowed the Society the privilege of forwarding copies of their Transactions to mofussil members post free for the first year. Meetings were held on the first Saturday of every month, in the rooms of the Asiatic Society of Bengal. The subscription was twelve rupees quarterly for Calcutta members, six rupees for those in the mofussil. The Society started both a library and a museum; the latter seems subsequently to have become the foundation of the museum of the Medical College. This Society published Transactions up to 1845. It seems to have died out gradually in that year or soon after.

The formation of a Medical Society at Madras, on 5th March, 1825, is reported in the Asiatic Journal, July to Dec., 1825, p. 715. How long this Society lasted cannot be stated.

In the same Journal, Jan. to April, 1832, p. 84, is mentioned the formation in Calcutta of a Native Medical Society, with the object of confining medical practice to members of the Vaidya caste, the caste of hereditary physicians. The date is three years anterior to that of the foundation of the Calcutta Medical College. At this time no natives of India had been educated in European medicine beyond the standard of native doctors, and those so educated were all employed in the army. This Society, therefore, must have been one of indigenous practitioners, or Baidys, as, indeed, might be presumed from its object. It seems to have had only a short life.

The Medical and Physical Society of Bombay was founded in 1838, so was of later origin than the similar Societies in Calcutta and Madras. On the other hand, the Bombay Society is still in existence, and is now three-quarters of a century old; whereas the other two died out after a comparatively short life. It is, of course, by far the oldest Medical Society now existing in India, having forty-five years the advantage of the next oldest, the
Southern India Branch of the British Medical Association. It has published *Transactions* ever since its formation, and has always been well supported by members of the profession, European and Indian, official and non-official, in the Western capital, always more distinguished for public spirit than the other two Presidency towns. It would be interesting to know whether this Society had any connection with that of 1790, nearly half a century earlier. Probably not; it is likely that the earlier Society had died and had been forgotten long before.

The *Lahore Medical Club* is mentioned in Honigberger's *Thirty-five Years in the East*, (p. xviii), as being in existence when he wrote that book, in 1852. No further information, as to its origin and cessation, is available.

The *Medical and Physical Society of Haidarabad* was founded by W. C. Maclean, in connection with the medical school at that city. The dates of its birth and death have not been ascertained. It was in existence in 1853.

In 1865 was founded the *Bengal Branch of the British Medical Association*, the first branch of that Association in India. This branch was at first well supported, both by members of the Service and by private practitioners, European and Indian. In 1867 one of the leading Indian members, Dr. Mahendra Lal Sarkar, M.D., read a paper advocating homœopathy, which caused so much dissension that it practically put an end to the life of the Branch, though it kept up a nominal existence for a few more years. In 1879 an attempt was made to resuscitate this Branch, but the project developed into an independent Society, the Calcutta Medical Society.

From time to time several other branches of the British Medical Association have been founded in India, eight at least, of which six appear to be in existence at present. Of these six the oldest is the *Southern India Branch*, founded in 1883. Two others, Bombay and Burma, have attained their majority. The other three are of recent formation. These Branches are as follows.

The *N.W.P. and Oudh Branch*, organised by the late Surgeon C. W. Shirley Deakin, junior Civil Surgeon of Allahabad, in 1882. This branch enlisted a fairly large membership, nearly two hundred, chiefly officers of the A.M.D. and of the I.M.S., but with a fair sprinkling of private practitioners. It also published monthly
Transactions, which were furnished to members for an annual subscription of twelve rupees, in addition to the subscription to the parent Association. Meetings were held at Allahabad. This branch came to grief in 1885, over a paper contributed in 1884 by the late Lt.-Colonel (then Surgeon) Andrew Duncan, entitled *The Insanitary Tendencies of State Sanitation*, the wording of which was insubordinate, though the views upheld, albeit opposed to the theories of the origin of cholera then in official favour, have been proved by time to be correct. Deakin went on furlough soon after, and on his return reverted to military duty. In the absence of its moving spirit the Branch died out.

The Panjab Branch was also organised by Deakin, in 1886, after his return to India. Most of the members of the now defunct N.W.P. and Oudh Branch were transferred to the new branch, which had a fitful existence of some four years. Deakin died of enteric fever at Jhilam on 17th Nov., 1889. After his death the branch ceased to exist.

The Southern India Branch was founded on 4th Oct., 1883, and recognised by the Association in 1884. It is the oldest branch now existing, and may be said to have been the most successful yet started in the East. It publishes Transactions.

The Bombay Branch, founded in 1889, and the Burma Branch, founded at Rangoon on 14th Oct., 1890, both have now well over twenty years’ useful life to their credit.

During the last few years three more Indian branches have come into existence, Assam in 1908, Biluchistan in 1910, and a new Panjab branch in 1911.

Three branches of the Association exist in the East, outside India; the Colombo, the Malaya, and the Hongkong and China branches.

The Madras Medical Book Society, of which W. R. Cornish was then Secretary, in 1870 offered a gift of twelve hundred volumes, with a sum of Rupees 1500 for the upkeep of the same, to the Medical College Library, on condition that existing members of the Society should have the privilege of access to the library. The offer was accepted. The Society must have been in existence for some time to have accumulated so large a library and so large a sum.

The Calcutta Medical Society was embodied in 1880, with Surgeon Major D. B. Smith, Principal of the Medical College, as
President, and Kenneth McLeod and Robert Harvey as Secretaries. Meetings were held monthly in the Medical College Hospital, and Transactions were regularly published. For many years this Society had a large membership, European and Indian. It lived for eighteen years; the last meeting was held on 14th Feb., 1898.

The Calcutta Medical Club was started in 1900, in Harrison Road, Calcutta, by Indian practitioners. It has club rooms there, and since 1906 has published the Calcutta Medical Journal.

The Medical Branch of the Asiatic Society of Bengal was started in Aug., 1906. It holds its meetings in the rooms of the Asiatic Society, and its proceedings are published as one series of that Society's Transactions.

The Association of Hospital Assistants was started in Jan., 1907, and publishes a monthly organ of its own. When the title of Hospital Assistant was changed, in 1910, to that of Sub Assistant Surgeon, the name of the Association of course underwent a similar change.

The Medical Missionary Association of India was established in 1905, ten years later than the journal, Medical Missions in India. Members must be graduates of recognised Medical Colleges, of any nationality, and members of a permanent missionary organisation.

The Association of Registered Medical Women in India was founded a few years ago. It issues a Journal.

The Jhansi Medical Society was started in March, 1913.

The Kathiawar Medical Society was started in April, 1913.

B.—Medical Journalism.

The first professional periodical started in India was The Transactions of the Medical and Physical Society of Calcutta. The first volume was issued in March, 1825, published by Messrs. Thacker and Co., St. Andrews Library, and printed by the Baptist Mission Press. Three yearly volumes were published, 1825, 1826, and 1827. For the next eight years volumes were issued every second year. In 1837 it took the name of Quarterly Journal of the Calcutta Medical and Physical Society, and six quarterly volumes, edited by H. H. Goodeve and W. B. O'Shaughnessy, the Secretaries of the Society, were distributed to members in 1837–38. No further issue took place till 1842, when a large volume was
edited by the Secretary, Allan Webb. One more volume, the last, was published in 1845.

The India Journal of Medical Science, the second in date of publication, was also a Calcutta venture. It was started by John Grant and J. T. Pearson in 1834. In 1836 Frederick Corbyn became the editor, and the title was changed to India Journal of Medical and Physical Science. Corbyn continued to edit the journal till the end of 1843, when it ceased to exist. It is sometimes referred to by later writers as Corbyn's Journal. This journal was published monthly. It was the first monthly medical periodical published in India; and also the first published on its own merits, not supported by a Society.

In 1835 appeared The Madras Journal of Literature and Science, "published under the auspices of the Madras Literary Society and auxiliary of the Royal Asiatic Society." This was a quarterly journal, edited by Robert Cole, of the Madras Medical Service, and printed by J. B. Pharaoh at the Athenaeum press. It was, of course, not a medical, and only in part a scientific journal. It ran up to 1840, at least.

The Transactions of the Medical and Physical Society of Bombay were first issued in 1838, the first year of that Society's existence. They are still regularly published, and are thus by far the oldest periodical of the kind now in existence in India, having the advantage by nearly thirty years over the Indian Medical Gazette, the next oldest.

The Madras Quarterly Medical Journal, edited by Samuel Rogers, one of the original Fellows of the Royal College of Surgeons, began in 1839, and ran at least till 1843. Three other periodicals with much the same title have since been published in Madras. The Madras Journal of Medical Science, edited by G. W. Flynn and D. Morton, was running in 1851-54. Flynn appears to have been the first medical editor in India who was not a member of the I.M.S. The Madras Quarterly Journal of Medical Science, edified by W. R. Cornish and G. B. Montgomery, was started in July, 1860, and ran up to 1869, when it developed into a monthly, the word Quarterly in the title being changed to Monthly. It was then edited by W. N. Chipperfield and Henry King, and was issued up to 1873. Chipperfield died of cerebral haemorrhage at Madras on 22nd May, 1873, and with the editor's death the journal came to an end.
The Calcutta Journal of Natural History, and Miscellany of the Arts and Sciences in India, edited by John McClelland, appeared in 1841, and ran up to 1847 at least.

In 1844 a Delhi Medical Journal was published at that city, but appears to have had only a brief career.

The India Register of Medical Science, owned and edited by Edward Edlin, appeared in Calcutta in Jan., 1848. Twelve monthly numbers were published. Edlin, who had served in the Sutlej campaign, and had been present at Sobraon, was deputed to the Panjab War, early in 1849, as Field Surgeon, and his journal came to an end. He thus records the cessation of publication.

"The uncertainty of the duration of the campaign in the Punjab, and other circumstances, induce the Proprietor and Editor very reluctantly to place the India Register of Medical Science in abeyance for one or two months, pending the inquiry, if any member of the profession will undertake for the profession that office of Chronicler for 1849, which it has been our pleasure to be able, however indifferently, to perform in 1848. The remoteness of the Chenab renders either literary responsibility, or literary proprietorship on the banks of the Hooghly, inadvisable."

No other member of the profession, apparently, was willing to take the responsibility, literary and financial, of continuing the journal, which accordingly came to an end. Edlin might himself have resuscitated it, had he lived longer. He died of consumption in Calcutta a year later, on 6th April, 1850, not long after his return from active service.

The following advertisement appears in the Friend of India of Nov. 14, 1850, p. 731.

"A New Medical Journal. The undersigned proposes to re-establish a Medical Journal, having the Title of The Bengal Medical Record, from the 1st of January, 1851. The journal will be issued on the 1st or 2nd of each succeeding month, and the subscription per annum in advance is 20 Rupees. Early intimations of approval and support are requested from all, who are of opinion, a Medical Journal in Bengal may be productive of good.—(Signed) T. Hastings, Civil Asst. Surgeon, East Burdwan.—N.B. All communications to be addressed, Postpaid, to the Editor, at Burdwan."

In the Friend of India of 1st May, 1851, appears an advertisement of a journal to be published on 1st Oct., 1851, under the title of The Indian Literary and Scientific Quarterly, edited by David O'Callaghan, Assistant Garrison Surgeon, Fort William.

Neither of these journals appears to have ever been published;
probably the projects did not meet with sufficient promise of support to justify the risk and expense of publication. In 1851–52 Assistant Surgeon O’Callaghan edited a Calcutta newspaper, the Calcutta Morning Chronicle. The Friend of India of 21st Oct., 1852, announces that he had resigned the editorial chair.

David James O’Callaghan served as Assistant Surgeon in the Royal Navy in 1839–41. He joined the Bengal Service on 8th Jan., 1842, served in the Sutlej campaign, in the Mutiny, including the siege and capture of Delhi, and in the second China war; became D.I.G. on 31st March, 1868, retired on 28th Oct., 1872, and died in London on 12th Aug., 1900.

The Indian Annals of Medical Science, a half yearly journal of Practical Medicine and Surgery, made its appearance in 1854. The first number is dated, on the title page, "October, 1853, and April, 1854." It was edited by Alexander Grant* and Norman Chevers; and printed by R. C. Lepage and Co., British Library, Calcutta. Grant continued to edit the Annals up to Oct., 1860. This journal ran for twenty-three years, up to 1877, the last editors being Joseph Ewart and J. G. French. The Annals may be said to have been the most successful and the longest lived purely medical and scientific journal, standing on its own merits, and not supported by any Society, ever published in India. The Indian Medical Gazette, of course, has had a longer life, and probably greater financial success. But the Gazette, containing, as it does, medical news and comments on current medical events and politics, is not solely a scientific publication.

The Indian Lancet made its first appearance at Lahore in 1850. It had but a brief life.

The first number of the Indian Medical Gazette is dated Jan., 1866, and was edited by D. B. Smith. It has appeared regularly every month ever since. The Gazette has been the most successful and the most important medical paper issued in India, and has also enjoyed a longer life than any other medical journal, except the Transactions of the Bombay Medical and Physical Society, has yet done. And now, after forty-seven years, it shows every sign of a vigorous future career. It was first published by Wyman and Co., Calcutta, and was taken over by Messrs. Thacker and Spink from Jan., 1885. A list is given below of its successive editors, all of whom have been officers of the Bengal Medical

Service, with the sole exception of Dr. W. J. Simpson, Health Officer of Calcutta. The success of the Gazette, however, has been mainly due to two men, Kenneth McLeod and W. J. Buchanan. McLeod became joint editor with N. C. Macnamara in 1871, and continued to edit it, with intervals of furlough, for over twenty years, till he retired on 16th April, 1892; and afterwards contributed a monthly London letter for another thirteen years, till 1905. Buchanan took over the editorship in 1899, and, with intervals of leave, has now held it for fourteen years.

List of Editors:

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<tr>
<td>D. B. Smith</td>
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<td>C. R. Francis</td>
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<td>J. T. Carter Ross</td>
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<td>N. C. Macnamara</td>
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<td>K. McLeod</td>
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<td>J. G. French</td>
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<td>L. A. Waddell</td>
<td>1884-85, and 1897-99</td>
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<td>W. J. Simpson</td>
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<td>A. Crombie</td>
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<td>D. M. Moir</td>
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<td>C. H. Bedford</td>
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<td>W. J. Buchanan</td>
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<td>D. McCay</td>
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The Journal of the Bengal Branch of the British Medical Association in its first appearance was almost contemporary with the Indian Medical Gazette, the first volume being that for 1865-66. Apparently the first volume was also the last.

The Calcutta Journal of Medicine was founded in 1868, as a monthly, by Dr. Mahendra Lall Sarkar, to advocate homeopathy. It lasted only a few years.

The Transactions of the Calcutta Medical Society were first issued in 1880. These Transactions were published in the Indian Medical Gazette, but were also issued separately, in small octavo fasciculi. They continued to appear for about eighteen years, till the Society came to an end in 1898.

The Calcutta Medical News was also started in 1880, but only lasted a short time. Eight monthly numbers were published, Jan. to Aug., 1880.

In 1882 the Transactions of the N.W.P. and Oudh Branch of the British Medical Association began to appear monthly. This
publication was not the property of the Branch, but was both owned and edited by the Secretary, Surgeon C. W. S. Deakin. From 1st Jan., 1884, it took the title of Indian Medical Journal. After Deakin's death in 1889 it ceased to exist.

In 1884 began the publication of Scientific Memoirs by Medical Officers of the Indian Army. This publication differs from most of the others enumerated in this chapter, in being official, issued by the Government of India. It consists, of course, of purely scientific papers, nearly all of them the results of original research, with no other matter of any kind. During the first seventeen years twelve annual volumes were published, the first being dated 1884, the twelfth 1901; no volume being issued for the years 1885, 1888, 1893, 1896, 1899, and 1900. Each volume bears the name, as editor, of the S.G., after 1895 the D.G., for the time being. In 1902 a change was made in the form of publication; each memoir being issued separately, when ready, instead of the work of a year being combined in an annual volume. From 1902 to 1913, sixty such memoirs have been published.

In 1884 also the Transactions of the Southern India Branch of the British Medical Association began to appear, and are still published.

A medical journal which, for a time at least, met with great success, was the Indian Medical Record, owned and edited by the late Dr. J. R. Wallace. It first appeared, as a monthly, in large octavo form, in Jan., 1890. From 1st Jan., 1893, it became a quarto fortnightly, and from 1st Jan., 1899, a weekly. After the death of Dr. Wallace its publication ceased, from the end of 1903; but it was revived, as a fortnightly, in April, 1904, and ran up to March, 1906. It then ceased publication for two years; but was again issued, as a monthly, under the editorship of E. S. Pushong, in March, 1908, and is still running. In connection with this journal was published in 1892 a Medical Register and Directory of the Indian Empire, a second edition following in 1898.

The Medical Reporter was started by Dr. Lawrence Fernandez, in Calcutta, in Jan., 1892. Its name was changed, in Nov., 1895, to that of The Indian Lancet. From Jan., 1892, to Dec., 1893, it was issued monthly, from Jan., 1894, to Dec., 1900, fortnightly, and since Jan., 1901, weekly. It is still running.

The Indian Medico-Chirurgical Review, edited by Dr. N. H.
Choksy, was issued in Bombay in Jan., 1893. It ran for three years, up to 1896.

*The Grant Medical College Magazine* was started at Bombay in 1898, as a monthly journal, and ran up to 1906, at least, subsequently becoming a quarterly.

*Practical Medicine* is the title of a monthly periodical started at Delhi by retired Assistant Surgeon Ram Narayan, L.M.S., in Jan., 1903. In 1910 this paper issued a *Medical Directory of India, Burma, and Ceylon*, in three parts; Part I being a list of qualified practitioners, including Civil Assistant and Sub Assistant Surgeons; Part II an Army List, including the R.A.M.C., I.M.S., and Military Assistant and Sub-Assistant Surgeons; Part III a list of medical colleges, hospitals, and dispensaries.

*The Indian Public Health and Municipal Journal* was founded by Dr. A. G. Newell, as editor, in 1904, and appeared monthly up to the end of 1911, when it ceased.

*Medical Missions in India* is an octavo quarterly journal, started in 1895 at the Mission Press, Ajmir, the first editor being the Revd. J. Husband, C.I.E., F.R.C.S., Ed., who was succeeded by the Revd. J. M. Macphail, M.D., in 1899, since when it has been published at the Sontal Mission Press, Pokhuria, Manbhum.

*The Calcutta Practitioner* was issued in Jan., 1904, as a monthly journal. Only five numbers appeared, the last being that of May, 1904.

*The Calcutta Medical Journal*, the organ of the Calcutta Medical Club, started as a monthly, in July, 1906, and still continues.

*The Transactions of the Medical Branch of the Asiatic Society of Bengal*, which was founded in Aug., 1906, have since that date been issued as one of the series of *Transactions* of that Society.

*The All India Hospital Assistants' Journal* was founded, as a monthly, in Jan., 1907. From Jan., 1910, it took the title of *Indian Medical Journal*.

*The Medico-Surgical Journal of the Tropics*, edited by Dr. S. K. Mullick, was first issued in Calcutta in Dec., 1908, and still continues.

*The Journal of the Association of Medical Women in India* was first issued in 1909.

*Food and Drugs* is the title of a quarterly journal, started in Calcutta in July, 1910, edited by Dr. Kartik Chandra Basu.
Paludism is the title of the Transactions of the Committee for the study of malaria in India. It was issued in large octavo form, at irregular intervals, more or less half-yearly, under the authority of the Government of India, by the Sanitary Commissioner. The first number was published in July, 1910, edited by Major S. P. James, I.M.S. It came to an end in 1913.

The Indian Journal of Medical Research was started as a quarterly in July, 1913. It is an official publication, being issued by the D.G. of the I.M.S. and by the Sanitary Commissioner with the Govt. of India, and is purely scientific. It has absorbed, and fills the place of, both Paludism and Scientific Memoirs.

The following are some other medical journals, which either are still published, or were so recently.

The Agra Medical Club Journal, monthly, Agra.
The Antiseptic, monthly, Madras.
Hikmat; (Knowledge), monthly, in Urdu, Lahore.
The Hospital Assistant, monthly, Kolhapur.
Intakhab al Hikmat; (Extracts of Knowledge), monthly, in Urdu, Lahore.
CHAPTER XLV

ADDENDA

"The end crowns all."

Shakespeare, Troilus and Cressida, Act IV, Scene V.

Chapter II.--European Surgeons in the Service of Oriental Potentates.—Surgeon Robert Adams, of the Bombay Service, was deputed in 1770 to attend Haidar Ali, and spent over five years, 1770–1775, in the service of the King of Mysur. Towards the end of 1769 two Bombay civilians, James Sibbald and Richard Church, were sent by the Bombay Government to negotiate a treaty of peace with Haidar, after the first Mysur war. The treaty is given in full in the Bombay Cons. of 10th April, 1770. The same Cons. of 19th Nov., 1770, contain a letter from Sibbald, in which he says that, on completion of the treaty, he left Seringapatam on 10th Oct. and proceeded to Onore, and continues—

"That at the Nawab's particular request he had left Mr Adams the Surgeon with him, who had also promised to write to the President for his permission."

Adams entered the Bombay Medical Service in October, 1768. He reported his return to Bombay, on 31st Dec., 1775, in a letter dated 5th Feb., 1776, which is entered in the Bombay Cons. of 6th Feb., with an order to pay Adams his salary for the past five years. Adams was then posted to Tellicherry, and in the Cons. of 29th Jan., 1777, was transferred to Thana. On 12th Oct., 1782, he succeeded by seniority to the post of fourth or junior Surgeon of Bombay, vice James Bond, gone home. By the successive departure of William Tennent, Samuel Richardson, and Robert Sproull, he rose to be first Surgeon on 16th Jan., 1785. He died at Bombay on 3rd March, 1786. A General Letter from Bombay, dated 20th March, 1786, states in para. 13, (Abstracts)—

"Mr Robert Adams Principal Surgeon is dead. Mr Richardson Harrison from Tellicherry succeeds as 4th Principal Surgeon here, and is replaced at Tellicherry by Mr Anthony Toomey."
A Portuguese officer, Eley José Correa Peixoto, who was in Haidar's service from about 1558 to 1570, recorded his experiences in a work which does not appear ever to have been published, but may be seen in the British Museum, Additional MSS., No. 19,287. In this work (folio 69a) he mentions that a Bombay Surgeon, who came with Sibbald and Church, had cured one of Haidar's officers, who had been attacked and dangerously wounded by a sipahi.*

It is a pity that Adams left no record of his long residence in Maisur. While there he evidently kept up a correspondence with the Bombay Government. Possibly his reports may still survive in the Bombay Record Office. His letter of 5th Feb., 1776, and the Council's orders thereon, run as follows:

"Honble Sir and Sirs,—I beg leave to inform you that I arrived here the 31st December last from Seringapatam, and immediately waited upon the Honble the President to acquaint him I was return'd to my Station as Surgeon.

"The Records of your Honble Board, I humbly presume, will show that I was Ordered by Messrs Church and Sibbald in the Month of October 1770 to remain in the Service of The Nabob Hyder Ally Cawn, at his particular request, 'till I should be recalled or thought proper to come away. But as I have taken the earliest Opportunity of returning to my Duty here, and ever considered myself in the Honble Company's Service, I humbly Request you will please to Order my Arrears of Pay to be made good to me, According to my Rank as Surgeon. Tho' I have every reason to hope Your Honor &c will not deem my request unreasonable, I beg leave to add the following Circumstances in favour of it.

"After being twenty Months in the Service of the Nabob, I wrote to Mr Townsend the Resident at Onore, that I intended to return to my Duty at Bombay when he desired me to remain at Seringapatam to forward the Company's Investment of Sandal Wood and Pepper, by attending Collection of the Mysore Sandal, and procuring the necessary Orders for the delivery of the Pepper and also the Bedimoore Sandal (from the Nabob) and other matters regarding the Factory at Onore, having been before employed by Mr James Sibbald, Mr Townsend's predecessor in the same manner. Your Honor &c are also sensible that I regularly transmitted you, through Mr Townsend, every Intelligence I thought was material to the Interest of the Honble Company on this side of India. But Mr Townsend having wrote me in the Month of November last, that my Service was no longer necessary at Seringapatam, I left it and returned to Onore, and from thence to Bombay as before mentioned. I therefore hope from these Circumstances that Your Honor &c C' will readily grant my Request, more particularly as my Situation in Hyders Country was very disagreeable and expensive, and had I been permitted to return to Bombay when I first intended it, I have reason to think it would have been

* This reference was given by Mr. S. C. Hill. Peixoto is also mentioned in Chap. XXXIV, Courts-martial, Vol. II, p. 240.

H.I.M.S.—VOL. II.
more for my Advantage in every respect—I have the Honour to be with the greatest Respect Honble Sir and Sirs, Your most obedient and most humble Servant, Robert Adams.—Bombay, 5th Feb, 1776."

"Read a Letter as entered hereafter from Mr Robert Adams Surgeon requesting his Arrears of Pay may be made good to him for the Time he was in Hyder Ally's Service. As he was left at Syringapatam by Messrs Church and Sibbald in the year 1770, at Hyder's particular Request, and was of Service to the Company by promoting the Investment of Pepper and Sandal Wood, and likewise by frequently transmitting useful Intelligence to this Settlement & Fort St George, and we have likewise reason to believe he was a sufferer by his Detention in Hyder's Country. It is Agreed for all these reasons that his Request be complied with and Onore Residency debted for the amount being Rupees 6541-1. 73."

Chapter X.—The First Half of the Eighteenth Century; pp. 151, 152. List of Surgeons, Bombay, 1720-1770. Add—

Richard Percival; died at Bombay on 20th Aug., 1768, aged 38.

William Walker; serving at Fort Augustus in April, 1765, appointed to Basra 29th Oct., 1765, to Surat 9th Feb., 1770, fourth Surgeon at Bombay 17th April, 1770, resigned Surgeoncy at Bombay to return to Surat, 26th Oct., 1770, went home early in 1778.

Samuel Richardson, appointed 5th April, 1765, third Surgeon, Bombay, 11th Oct., 1765, also appointed Surgeon Major to Garrison, 30th May, 1769, went home in Raymond, 1st Jan., 1784. The title of Surgeon Major was abolished on his departure.

George Birch, appointed Sept. 1776, posted to Basra 1767, succeeded Walker as fourth Surgeon, Bombay, 26th Oct., 1770, granted sick leave to Goa and Europe, 12th Dec., 1781, went home from Goa in April, 1782.

Chapter XIV.—Strength from time to time; page 312.

The Bombay Cons. of 20th Sept., 1768, order that a Surgeon shall be allowed to each Battalion.

The earliest list extant of the Bombay Medical Service appears to be one given in the Bombay Cons. of 16th June, 1779. It includes 27 names; four Principal Surgeons at Bombay, one of whom, Samuel Richardson, was also Surgeon Major of the garrison, or Military A.M.O.; three in charge of General Hospitals, at Surat, Thana, and Broach; two Battalion Surgeons, Infantry and Artillery; three in civil employ, at Tellicherry, Anjengo, and Basra; six Assistants in military employ; four assistants in the Bombay
hospitals, and one at Thana; and four employed afloat in the Marine.

The list of the Bombay Service next in date is entered in the Cons. of 19th Feb., 1784. It gives 28 names, 21 Surgeons and seven Assistants. Of the former, four were the Principal Surgeons at Bombay, five more in civil stations, seven on military duty, three assisting in the Bombay hospitals, and two serving afloat, both in the Bombay grab. Of the Assistants, two were serving in the Bombay General Hospital, one in civil employ, at Tellicherry, three on military duty, and one, J. Saunders, unemployed. An interesting point in this list is that three out of the 28, Surgeon Fred. Carmichael, and Assistant Surgeons C. M. Kehn and James Shields, are shown as prisoners in Maisur. They are included above among those on military duty.

Chapter XV.—The Double Commissions: page 244. In the Bombay Cons. of 20th and 21st May, 1765, is noted the appointment of Lieut. Patrick Cation to do duty temporarily as Surgeon to the troops at Rari. It was agreed—

"That Mr. Cation have the Allowance of a Surgeon while he acts in that capacity, exclusive of his Pay as an Officer, and that his being employed as a Surgeon (which is a case of Necessity) be no Prejudice to his Rank in the Military Service."

Cation appears to have acted as a Surgeon for only a short time, a few months. Bombay Cons. of 28th Oct., 1766, order him to be court-martialled, but he was pardoned on apologising. Dodwell and Miles do not give his name in their Bombay Army List.

Chapter XVI.—Military and Civil; Duties of Head Surgeon.—The Madras Mily. Cons. of 1791 record an interesting dispute between Colonel John Brathwaite, who was in command of the troops in the Circars, and George Binney, Head Surgeon of Masulipatam. On 15th Feb., 1791, is entered a long, but temperately worded, letter from Colonel Brathwaite, in which he states that he had ordered Binney to take medical charge of the troops at Ellore, but that Binney claimed that he was posted to Masulipatam, and could not be moved from that station except by the Madras Government. Brathwaite says that there are only a few invalids in the hospital at Masulipatam, but that the General Hospital there cannot be moved to Ellore, which is an open cantonnement, and may have to be evacuated at short notice;
and claims that Binney, as holding a commission in the Madras Army, must be entirely under his orders, as officer commanding the troops. Binney was also Surgeon to the Masulipatam Agency and Factory; and the Agent and Council there, while not taking any further part in the dispute, naturally did not wish to lose his services as their medical officer. The Madras Council referred the question to the Military Board. That Board’s opinion is entered in the Cons. of 18th Feb. They state that Binney, as a military officer, must necessarily be under Brathwaite’s orders; that his duty as a Superintending Surgeon requires rather that he should move about, wherever his services are wanted, and inspect the medical officers under him, than remain fixed at one station; and that a medical officer with no military duties should be posted to Masulipatam as Surgeon to the Factory and civil station there.

An interesting point in their letter is the employment of the term Superintending Surgeon for the Head Surgeon, probably the first use of this title, some ten years before it came into official and general use. On the same day, 18th Feb., the Madras Council gave their decision, to the effect that Binney, as a military officer, is under Brathwaite’s orders, and must obtain permission from Brathwaite, as commanding officer, for any of the medical officers under him to go on leave. The orders rather evade the point at issue. A letter to the Medical Board, from the Military Secretary to Government, dated 24th Dec., 1793, contained in the last volume of Miscellany Books for 1793, orders that the Head Surgeon of the Circars will in future reside at Ellore, and that a full Surgeon will be posted to Masulipatam as medical officer of that station.

Chapter XVI.—Military and Civil; p. 285, Service in Indian Navy.—Disputes about duty on board ship, a duty evidently unpopular, cropped up so early as 1785, and are recorded at length in the Bombay Cons. of that year. In a letter dated 25th Oct., 1785, Surgeons William Sandwith and Christopher Lawrence complained that they were kept serving on board ship, while other Surgeons junior to them were serving ashore as Assistants in the Bombay hospitals. On this letter the Bombay Council passed the following orders:

"Read a letter from Messrs William Sandwith and Christopher Lawrence, Surgeons, representing a Hardship as they conceive, being ordered to do Duty on board the Cruizers, when Juniors to them are employed
on Shore in the Hospital. On Consideration of this letter, It is Resolved that when it is necessary for the Service to send Gentlemen of the List of Surgeons on board the Cruizers, this Duty shall begin with the Youngest in that Rank, to which Rule the Principal Surgeons must be desired to conform."

On 1st Nov., 1785, is entered a long letter from the four Principal Surgeons, protesting against the above order, and claiming the right, which apparently had hitherto been allowed, of choosing their own Assistants from among the junior Surgeons. On 4th Nov. another letter from the Principal Surgeons is entered, in which they complain that Christopher Lawrence had refused to obey their orders, transferring him from the Intrepid to the Bombay grab, an order, they say, given in his own interest, the Bombay being the larger vessel of the two. The whole correspondence is given in the Cons. On the same date, 4th Nov., the Bombay Council recast their orders of 25th Oct., as follows:—

"Observing that our late Orders respecting Surgeons for the Cruizers are not properly understood, and are productive of Inconveniences, Resolved that the Order already sent the Surgeons be rescinded, and that the following Regulation be established.

"That when Surgeons are wanted for the Marine, the Secretary to the Marine Board shall by Letter inform the Honble the President thereof, who will order the Surgeon to whose Turn the Duty falls, beginning with the Youngest on the List.

"Resolved that the following Gentlemen be appointed to the Vessels now in Want of Surgeons.

Mr Price to the Scorpion | Mr Lawrence to the Drake
Mr Nevill " Intrepid | Mr James " Bombay grab

"Ordered that the Principal Surgeons be acquainted with the above Resolutions and of the later Order being rescinded.

"Resolved that the Assistants belonging to the Hospital now employed on board the Cruizers, be ordered on shore."

Chapter XVII, Rank; p. 208, Flogging.—No instance appears to have occurred in which a medical officer was flogged, or even threatened with flogging. In fact, as related in Chap. XXVII, The Uncovenanted and Subordinate Medical Services, p. 119, Bengal G.O. of 24th May, 1832, ordered that even native doctors must not be flogged. But a case is recorded in the Bombay Cons. of 18th and 25th July, 1781, in which an Assistant Surgeon was put in irons. Joseph Saunders, Surgeon of the Bombay grab, was placed in irons by Lieut. Twiney, who was in charge during the absence on shore of Captain Jonathan Twiss, the Commander. Both Twiss and Twiney were severely reprimanded. Twiss, in a
letter protesting against his reprimand, states that he came on board late at night, and heard that Twiney had brought a serious criminal charge against Saunders; and that he released Saunders early in the morning. The nature of the criminal charge is not stated. Twiss also sent in a letter from Saunders, admitting having behaved disrespectfully, and apologising for so doing.

Possibly Saunders deserved all he got. The Bombay Cons. of March, 1784, record an instance of gross insubordination on his part. The Principal Surgeons of Bombay, i.e. the four Surgeons employed at Bombay, who acted as an informal Medical Board, and to whom all questions concerning the Medical Department were referred by the Council, were directed, on 30th Jan., 1784, to compile a list of the Medical Service. This list is entered in the Cons. of 19th Feb. In it are shown twenty-one Surgeons and seven Assistants, Saunders' name standing fourth among the Assistants, as "unemployed." On 19th March the Council inquired why he was unemployed. On 29th March the Surgeons reported that, some months previously, they had ordered Saunders to assist Francis Crozier, Surgeon to the regiment at Thana, and that he had refused to obey, saying that he was a full Surgeon, and would not act as Assistant to any man. In this same list, of 19th Feb., 1784, no less than six of the full Surgeons are shown employed as Assistants to other Surgeons, senior to themselves. The Council apparently took no notice of this refusal to obey orders, beyond directing that Saunders should be entered as the senior Assistant, and employed as such. Discipline in the Company's Service seems hardly to have existed in these days, except under individual strong commanders.

Chapter XVII, Rank; pp. 304–307, Title of Surgeon General.—This title appears to have sometimes been given to the Senior Surgeon of a military force on active service, as the title of Principal Medical Officer has been used in later years. In the Bombay Cons. of 1784 and 1785 there are frequent references to two officers of the A.M.D., Robert Anderson and Thomas Farquharson, as successively holding the post of Surgeon General of the King's troops employed in the second Mysur war. The same Cons. of 18th Jan., 1785, speak of John Fleming as Surgeon General of the Bengal force sent to the Bombay Presidency in the first Maratha war. Fleming, however, in a petition quoted on that date, calls himself Senior Surgeon of the Bengal detachment,
The title of Surgeon General given to Stephen Briggs in Madras, in 1760–63, seems to have been similarly used. And in the third Miusur war John Laird, Colly Lucas, and A. G. Clugstone are in the same way spoken of as Surgeon Generals of the Bengal, Madras, and Bombay troops respectively serving in that war.

Chapter XVII, Rank; p. 308, Surgeon's Mates.—The Madras Mily. Cons. of 11th Jan., 1792, (Miscellany Book, 1st Jan. to 31st March, 1792), contain a return of non-commissioned officers and men of the 14th Hanoverian Regiment, embarking for England. At the head of the N.C.O.'s are shown the Surgeon's Mates of the regiment, four in number. They, of course, were Hanoverians, not Englishmen, and appear to have been considered of lower rank than the Assistant Surgeons in the King's regiments, and in the Company's service. The same Cons. of 16th Jan., 1792, contain a return of the pay of the 14th Hanover Regiment, which shows the Surgeon as paid only four shillings, and the Surgeon's Mates half a crown each per day. And the Mily. Cons. of 5th Nov., 1790, contain a petition from these Surgeon's Mates, asking to be allowed the same pay as Surgeon's Mates of King's regiments and, like them, the allowances of Lieutenants instead of those of Ensigns. Both requests were refused.

Chapter XVII, Rank; p. 308, Rank of Assistant Surgeons in Bombay.—The two ranks of Surgeon, and Surgeon's Mate, or Assistant Surgeon, were recognised in the order founding the Bengal Medical Service, from 1st Jan., 1764. And after that date only four officers appear to have been appointed in Bengal as Surgeons, without going through the grade of Assistant Surgeon. Two of these officers, Robert Knight and James Campbell, were appointed direct as Surgeons only one month later, from 1st Feb., 1764. The other two were Matthew Allen, transferred from the 96th Foot, in which he already held the rank of Surgeon, on 19th Feb., 1765, and John Laird, appointed 23rd Feb., 1771, who had served for six years in the Company's factory at Canton.

In Madras direct appointments as Surgeon were made for some years longer, up to 1770, as shown by the extract quoted on page 309, Vol. I. One direct appointment was made much later. Job Bulman, who had served for some years as Surgeon to the Nawab, was appointed to the Service as Surgeon on 28th Nov., 1780.
Till a considerably later date, however, in Bombay, most of the medical officers who joined were appointed directly as Surgeons. A list of the Bombay Service in the Bombay Cons. of 19th Feb., 1784, shows twenty-one Surgeons and seven Assistant Surgeons. All the Surgeons appear to have joined in that rank. The two junior, Joseph James and Christopher Lawrence, both ex-Surgeons of Indiamen, had been appointed to the Service as Surgeons barely a month before, on 15th Jan., 1784. At least seven of the Surgeons, however, were acting as Assistants to senior officers. The seven Assistant Surgeons had been appointed as such on various dates during the preceding twelve years, the Senior, C. M. Kelh or Kiln, having over eleven years' service. And only one of these seven ever reached the rank of Surgeon. The Assistant Surgeons in Bombay, in fact, formed a separate subordinate service rather than a separate rank, junior to the Surgeons, but still men of the same Service with the same prospects as their seniors. It was not till 1788 that the grade of Assistant Surgeon in the Bombay Service became a rank through which all newly appointed medical officers must pass.

Chapter XVIII, Pay: p. 362, Pay at Bombay.—The increase of pay to the four Principal Surgeons at Bombay is shown in the Bombay Cons. of 10th Jan., 1770, and they drew the enhanced rates from 27th Aug., 1769, the two seniors, Tennent and Bond, £150 a year, the two juniors, Richardson and Birch, £125. The statement that Birch also drew £150 in Sept., 1777, is founded on what seems to be a clerical error in the pay lists; he is shown as drawing £150 in that month, but only £125 in subsequent pay lists, up to his retirement on 31st March, 1782.

In the Bombay Cons. of 17th Dec., 1773, it is ordered that, as the Surgeons now make no profit on the hospital, the first and second Surgeons are to receive a yearly gratuity of Rs.4000, the third and fourth Rs.2000. The Cons. of 24th Dec. note that these gratuities are less than the profits which the Surgeons had previously made from the hospital contracts, and raise the gratuity to the two junior Surgeons to Rs.3000. Whether these gratuities were in addition to, or instead of, their Surgeon’s pay of £150 and £125 a year, is not clearly stated. The Cons. of 7th Jan., 1774, contain a petition from three of the Surgeons, signed by Bond, Richardson, and Birch, Tennent not signing, saying that all their hopes are now confined to receiving these
gratuities of Rs.4000 and 3000 a year, whereas formerly the first and second Surgeons held a contract for supplying the hospital, which gave them much larger profits. On the other hand, the salary lists for many years subsequent show the Surgeons as paid £150 and £125 a year, as before. Probably the gratuities were in addition to their pay.

On 2nd July, 1777, the contract for maintaining the hospital was again given to the Surgeons, and on the 14th July, 1779, the standing Hospital Committee reported that the saving thereby effected had amounted to Rs.120,131 in two years, over Rs.60,000 a year.

The Cons. of 17th Feb., 1769, contain a petition from the Surgeons of the three Battalions at Bombay, Charles Reily, first, Matthew Reily, second, and Peter Frazer, third Battalion, asking for an increase of pay. They state that Surgeons at Fort St. George get allowances of sixteen pagodas a month, at other places in Madras Presidency twenty-one pagodas, in addition to their pay. On 28th Oct., 1769, the Surgeons employed in the Marine also petitioned for increase of pay. This petition is signed by five surgeons: John Bennett, Robert Sproull, Francis Boyes, John Blakeman, and Richardson Harrison. On 16th March, 1773, orders were passed that the Surgeons of the Hospital and of the Battalions should receive house rent at Rs.40 per month, Assistant Surgeons Rs.20; but this allowance was not given to Surgeons in the Marine, even when on shore. On 11th Oct., 1775, Surgeons in the Marine were granted an addition to their pay of Rs.20 a month, when employed on shore as Assistants in the hospitals. On 16th March, 1778, A. G. Clugstone, Surgeon of the Infantry, and Andrew Durham, Surgeon of the Artillery, asked for an increase of pay, to the same rates as given at Madras. They state that they have now served ten years, and have succeeded to Battalions on promotion, but are still drawing the same pay as when they first joined. The Council resolved to write to Madras for information as to the rates of pay there, and in the meantime increased the pay of Battalion Surgeons to ten shillings per day exclusive of house rent.

The Bombay Cons. of 8th Dec., 1779, order that all Surgeons shall draw their pay from the Military Board, except the four Principal Surgeons, who are to be paid by the Land Paymaster, and those on cruizers, to be paid by the Marine Paymaster.
The Bombay Cons. of 20th July, 1778, contain a list of bondholders in Bombay, i.e. investors in Company’s paper, which includes a number of medical officers; George Birch, Rs.44,307; Samuel Richardson, Rs.37,856; estate of Jeremiah Farmer, Rs.16,401; William March, Rs.10,964; William Tennent, Rs.9941; Robert Adams, Rs.8935; Frederick Carmichael, Rs.6035. Another list in the Cons. of 18th June, 1784, of bond debts paid off, includes William Tennent, Rs.147,060; and James Bond, Rs.10,854. In the Cons. of 7th Aug., 1786, it is stated that the Company still owed Samuel Richardson a sum of Rs.1,78,000 for his hospital contract. The Cons. of 14th Sept. and 2nd Oct., 1786, contain lists of subscribers to a new loan floated by the Company, which includes the following names of medical officers:—Francis Crozier, £2000; Richardson Harrison, £4000; Samuel Richardson, £20,000; James Bond, £28,750; John Blakeman, £12,000; George Birch, £3517; estate of John Potter, £1789; estate of Robert Adams, £14,652; William Tennent, £20,338. The amounts are given both in sterling and in rupees, and show the rupee as worth a little less than two shillings. From these entries we see that some of the Bombay medical officers made a good deal of money.

Chapter XVIII, Pay; p. 363, Pay at Madras.—The Madras Mily. Cons. of 12th Oct., 1790, order that Surgeon Finlay Ferguson, while serving as Surgeon Major, or A.M.O., of the Centre Army, in the third Maisur war, is to receive £1000 a year pay, and Major’s batta.

Chapter XVIII, Pay; p. 364, Pay of French Medical Officers. The Madras Mily. Cons. of 3rd Sept., 1793, contain a list of French officers taken at Pondicherry, at its surrender to Colonel Brathwaite on 23rd Aug., 1793, which contains the names of no less than nine medical officers; Physician Calliaud, pay Rs.1600 a year; Surgeon Major Douzon, Rs.1000; two Assistant Surgeon Majors Rs.720 each; and five Assistant Surgeons, Rs.400 each. Low as these rates are, they are higher than the rates of 1778. The same Cons. of 14th May, 1795, contain a list of the officers of a captured French privateer, the Duguay Trouin, (formerly the Indiaman Princess Royal, taken by the French on 29th Sept., 1793), which includes a Surgeon, Terrier, and an Assistant Surgeon, Lorrin. Terrier drew Captain’s pay, 38 pagodas 31 fanams a month; Lorrin Ensign’s pay, 15 pagodas 21 fanams, rates much
higher than those of the medical officers on shore. It is stated that Terrier had been a private in the Artillery at Brest in 1787.

We have seen (Vol. II, p. 194) that J. F. Heynemann, the Dutch Surgeon's Mate at Negapatam in 1782, was drawing seven pagodas a month, about £38 a year. The Madras *Mily. Cons.* of 28th July, 1795, give a list of Dutch officers who had surrendered when Pulicat was taken over by the English, with their pay and allowances. Surgeon Pancratius Haringa Meppen drew 24 pagodas 12 *fanams* a month, Assistant Surgeon Henry Adolph Floyer, 6 pagodas 7 *fanams*, and Sub-Assistant Surgeon Jacob Hamer, 4 pagodas 28 *fanams*.

**Chapter XXII, Appointment:** pp. 491–494, *Commissions from the ranks*.—Another instance of promotion from the ranks to the Medical Service is recorded in the Bombay *Cons.* of 21st Jan., 1784, where is entered a petition from Thomas Sherwood, a recruit, saying that he had been "educated to the profession of surgery," and had been appointed Surgeon's Mate of the Indiaman *Belmont*, but had lost his passage, and had subsequently enlisted. The Bombay Surgeons examined him, and reported him as qualified, whereupon the Council appointed him an Assistant Surgeon.

**Chapter XXII, Appointment:** pp. 510, 511, *Commissions given through medical schools*.—Another medical officer to whom a commission was thus given was Walter Fry. In 1858 a nomination as Assistant Surgeon was placed at the disposal of the Council of King's College, London, who selected Fry as the best of the applicants among their students. He was nominated by Sir Richard Jenkins, G.C.B., as Assistant Surgeon, Madras, from 29th June, 1858. After spending twelve years in military employ, he was appointed in 1870 Residency Surgeon, Travancore, and held that post till he retired on 20th Nov., 1882. He died at Nice on 30th Dec., 1913.

**Chapter XXIII, Administration:** Vol. II, p. 25, *The Bombay Medical Board*.—In Bombay, prior to the establishment of the Medical Board, the Principal Surgeons, as the medical officers of the Bombay hospitals were called, constituted an informal Board, to which the Government referred all professional matters, including the posting of junior medical officers. Prior to 1765 there were two Surgeons at Bombay; on 11th Oct., 1765, a third was appointed, and on 7th Feb., 1770, a fourth. The
orders of Court for the establishment of Hospital Boards, dated 21st Sept., 1785, were not put in force at Bombay for nearly two years. The transition from a Board of four to one of only two members was eased off by Clugstone, the third Surgeon, going on furlough on 24th Feb., 1787, and John Blakeman, the senior Surgeon, dying on 1st Aug., 1787. Their places were not filled up, thus leaving only two, Durham and Harrison, to form the new Hospital Board from 16th Aug., 1787. The Bombay Board, however, seem to have had more professional, as opposed to administrative work, than the Boards in Bengal and Madras.

The system of medical administration in force at Bombay from about 1765 up to 1787, was thus the same as at Madras, where first Briggs and Pasley, afterwards Pasley and Anderson, and later Anderson and Lucas, the two Surgeons of Madras, acted as an informal Medical Board; and in contradistinction to that at Calcutta, where, from 1769 to 1786, administration was formally vested in a single officer, with the title of Surgeon General.

Chapter XXXII, War Services; Vol. II, p. 205, George Morrison Grant. In a very interesting work, lately published, on the first Afghan war, and especially on Major Eldred Pottinger's share therein, The Judgment of the Sword, by Maud Diver, (Constable, London, 1913), the authoress speaks of Grant as "a Eurasian doctor named Grant," (p. 27), and as "a half caste," (p. 153). The E.I.Co. insisted strongly that all their officers should be of unmixed European extraction, though apparently exceptions did sometimes occur, e.g. James Lumsdaine and R. S. Richardson, as described in Chap. XXII, Appointment, pp. 502-3. The Cadet Papers for 1838, in the India Office, contain a copy of Grant's baptismal certificate, which shows that he was born in Edinburgh on 30th Dec., 1815, the son of Robert Grant, quilldresser, and of Janet Sheaf, his spouse, of the parish of St. Cuthbert's, Edinburgh. Twenty-two years later, in 1838, in his application for appointment, Grant describes his father as Robert Grant, bookseller, of 82, Prince's Street, Edinburgh. There can be no doubt that Grant was a pure European and a Scotsman.
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# INDEX

The following place names occur so frequently that they have not been entered in the index on every occasion, only the more important references being included: Afghanistan, Agra, Allahabad, Anjengo, Assam, Benares, Bencoolen, Bengal, Bihar, Bombay, Calcutta, Cape of Good Hope, Cawnpore, China, Chittagong, Dakka, Delhi, Fort St. David, Fort St. George, Fort William, Haidarabad, Hugi, India, Kasimbazar, Lahore, London, Lucknow, Madras, Mansur, Malabar, Marathas, Masulipatam, Murshidabad, Netley, Oudh, Panjab, Patna, Persia, Peshawar, Rangoon, Sind, Sumatra, Surat, Tanjore, Tellicherry, Trichinopoly, Vizagapatam; also Mutiny.

Except in the case of a few medical men, with European qualifications, who have been indexed under their surnames, like Europeans, Indian personal names are indexed under the initial letter of their first word, e.g. Haidar Ali is indexed under H, not under A.

Names of ships, titles of books and journals, and vernacular words, are entered in italics.

The prefix Mac is spelt at full length, in all names which begin with it, in the index.

B = Bengal; Bo. = Bombay; M. = Madras.

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