PART I AND PART II OF EXAMINATION OF MAJORS, R.A.M.C.,
FOR PROMOTION TO THE RANK OF LIEUTENANT-COLONEL.

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The examination may be taken any time after an officer's promotion
to the substantive rank of Major, and this article is written in the hope that
it may prove of use to those intending to present themselves for that test,
as it will endeavour to set forth the various regulations bearing on the
subject, and to put before the reader an epitome of what may be expected
in the examination.

The examination is held twice yearly, commencing on the last Monday
in March and the third Monday in October. In the event of Easter
Monday falling in the week in which the March examination would
normally be held, it will commence on the second Monday in that month.
Part I (written) consisting of one paper only, takes place on Monday,
afternoon from 14.00 hours to 17.30 hours, while Part II (practical) takes
place mostly in the open throughout the days of Wednesday, Thursday and
Friday, and may be prolonged into Saturday morning if required. Each
part may be taken separately, or both may be taken at one examination
(vide King's Regulations, para. 864, and Appendix X).

The books recommended for study are given in Appendix X of King's
Regulations. They are as follows and, needless to add, they must be
amended up to date:—

A. "Regulations for the Medical Services of the Army."
   "Royal Army Medical Corps Training."
   "Standing Orders for the Royal Army Medical Corps, Royal Army
      Medical Corps (T.A.), and the Army Dental Corps."
   "Army Manual of Sanitation."
   "Memoranda on Medical Diseases in the Tropical and Sub-Tropical
      Areas."
   "Regulations for Supply, Transport and Barrack Services."
   "King's Regulations."
   "Training and Manoeuvre Regulations."
   "Manual of Map Reading and Field Sketching."
   "Regulations for Mobilization."
   "War Establishments."

B. "Field Service Regulations," Vols. I and II.
   "Field Service Manual, Medical."
   "Official History of the Great War—Medical Services."
   International Treaties, e.g., Hague and Geneva Conferences—as
   far as they affect sick, wounded and property.

This array of books is somewhat terrifying, but a candidate is not
expected to know each of them from beginning to end. They have been scheduled by the writer of this article under A and B, as, roughly speaking, those under A are peace books, while those under B are war books.

Of the books under A, a candidate would naturally be familiar with the first three of them, as they, together with King’s Regulations, constitute the basic regulations of the branch of the Service to which he belongs, and, as such, he has been perpetually dealing with them during ordinary routine work. A thorough knowledge of Section 4 of R.A.M.C. Training is absolutely essential especially for the practical part of the examination. As the examination is not one on the subject of medicine, a detailed knowledge of the diseases of tropical and sub-tropical countries seems hardly necessary; it will probably suffice for the candidate to be in a position to state, apart from the usual field sanitary precautions, what special steps he would take to prevent an outbreak of one of them, or what steps he would take in the event of such an outbreak. The Regulations for Supply, Transport and Barrack Services do not demand any special study from the point of view of the examination.

Of the books scheduled under B the following parts are suggested for study:

(a) “Training and Manoeuvre Regulations,” Sections 13 and 25; the latter section is very important as it constitutes practically the only information to be found in regulations dealing with the crucial question of appreciations, and an important amendment to it was issued with Army Order 117 of 1926.

(b) “Manual of Map Reading and Field Sketching.” A good substitute for this book is “The Complete Guide to Military Map Reading” (price 3s. 6d., issued by Gale and Polden of Aldershot), and Chapters IV to VIII inclusive, together with Chapter XII, should be studied.

(c) “Field Service Regulations,” Vol. I, should be read through so as to obtain a general idea of organization and administration in the field. The following sections, etc., should be noted: Sections 13, 26 (1) (5), 27 (8) (9), 29, 30, 32, 33, 40, 41, 42, 42 (V); Chapter XIV as amended by Army Order 130 of March, 1927; Sections 107, 111, 139, 146, 152, 209, 210, and Chapter XXII.


(e) “War Establishments”—these are of use when it is necessary to obtain total strengths of units or formations, e.g., when the order of battle is cited in a scheme the total strength of the force can be arrived at on referring to these establishments.

(f) “Field Service Manual, Medical.” The last edition of this was issued in 1914, and last reprint in 1917; a new manual is under consideration. The following points regarding a field ambulance and a cavalry field
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ambulance should be at one’s fingers’ ends—total personnel, total officers, total M.T. vehicles including heavy and light ambulances, total H.T. vehicles including horse ambulances, road length of unit and time required to pass a given point.

(g) Mobilization Regulations: Read the “Explanation of Terms Used”; paras. 7, 11, 13, 14, 20, 22, 26, 27, 32 (ii), 35 to 38 inclusive, 43, 46, 48, 49, 53, 54, 56, 72, 73, 93, 101, 102, 110, 113, 118, 122; Sections 12 and 14; paras. 199 to 204.

(h) “Official History of the Great War—Medical Services.” Appendix X of K.R. states that one military campaign will be selected annually for study for Part II of the examination (practical), and will be notified in Army Orders. The records of this campaign, as contained in the “Official History of the Great War—Medical Services”—should therefore be studied.

(i) International Treaties regarding Sick, Wounded, etc.—The necessary information on these points is to be found in Section 6 of “Royal Army Medical Corps Training” and in Section 27, 193, 194, and 214 of “Field Service Regulations,” Vol. I.

K.R. Appendix X states that the “Regulations for the Medical Services of the Army,” “R.A.M.C. Training,” “Standing Orders R.A.M.C.,” the “Field Service Pocket Book,” “Regulations for Mobilization,” and “Regulations for Supply, Transport, and Barrack Services,” may be taken into the examination room for the purpose of answering the written paper which constitutes Part I of the examination; these books must not contain any addition other than amendments made by Army Orders. In Part II the candidate may consult any literature for the purpose of writing his appreciation or other paper work which he may be called upon to do over night, but during most of the remainder of the examination, i.e., during the practical work in the field, he will have access only to the “Field Service Pocket Book.” It is to be noted that important amendments to this Pocket Book have been notified in Army Orders for April, 1928, dealing with orders, instructions, reports, messages, abbreviated titles, addresses, distinguishing letters, and other abbreviations. It is essential for a candidate to be thoroughly familiar with his way about the four books cited at the beginning of this paragraph so as to be able to turn up rapidly points in each of them which may have reference to a particular question, as it is possible for a question to be set of such a nature that the answer to it may be embodied in one or more of these books.

In addition to the candidate’s own efforts to prepare himself for this examination, a grave responsibility for instructing him devolves upon his superior officers, as will be seen from the following:

(a) Paras. 6 and 7 of Chapter I of “Royal Army Medical Corps Training” state that D.D.’sM.S., A.D.’sM.S., and O.’sC. hospitals are responsible for the progressive instruction of all officers serving under them in the organization and administration of the Medical Service and, under the
authority of the G.O.C., the General Staff (with such assistance from other branches of the staff as may be required) give instructions to officers of the Corps in the principles of military science.

(b) "King's Regulations," para 864, lays down that a candidate must produce a certificate from a D.D.M.S. or an A.D.M.S. to the effect that he has received instruction in the subjects covered by the examination, and that he is considered fit to present himself for it. This certificate will accompany the officer's application to be examined. This paragraph furthermore states that, to assist officers in their preparation for the examination, D.D.'sM.S. and A.D.'sM.S. will make all necessary arrangements for the adequate instruction of Majors R.A.M.C. in army medical organization, administration, hygiene, and the employment of the medical services in peace and in war. This instruction will be carried out by means of lectures, followed by discussions, war games and field exercises, by the attachment of officers to the different departments in hospitals, and, where possible, to the office of administrative medical officers for instructional purposes.

The instruction for the purpose of this examination is not to commence before the officer's promotion to the substantive rank of Major.

(c) Chapter II of the "Royal Army Medical Corps Training" deals with the individual training of officers and directs D.D.'sM.S. and A.D.'sM.S. to arrange during the winter months to hold periodical discussions on army medical organization and administration in the field. They will also arrange through the G.O.C. for one or more lectures to be given by officers of the General Staff on the principles of strategical and tactical operations. Special Staff Tours for the instruction of officers of the Royal Army Medical Corps are to be arranged, and when other branches of the Service are holding Staff Tours, officers of the R.A.M.C. should, if possible, be detailed to attend them, so as to keep in close touch with new developments, and their bearing on the medical services in the field.

(d) Chapter III of the same Training Manual deals with collective training, and directs that, if possible, a camp of instruction should be formed each year with a view to familiarizing all ranks of the Corps with field training, and in commands where arrangements can be made, special exercises are to be conducted on a large scale, at which, with the assistance of other troops, the important problems of medical operations and work in the field may be studied practically.

(e) "Training and Manoeuvre Regulations," Section 27, states that administrative exercises will be carried out with troops dealing with problems of the R.A.M.C., R.A.S.C., and R.A.O.C., and those of other administrative services when funds permit.

PART I.

As already stated, this written part of the examination consists only of one paper, the subject being army medical administration in peace and in
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war. Three hours are allowed for answering this paper and the number of marks allotted is 100, of which fifty per cent. must be scored for a pass.

The paper consists of six questions, of which four only are to be answered and the number of marks allotted to each question is stated in brackets at the end of it. The questions will, as far as possible, take the form of problems with which an officer up to and including the rank of Colonel might have to deal. Of the four questions chosen by the candidate for answering not less than one will deal with peace and one with war.

The papers set in this part of the examination since its institution in 1925, may be obtained from H.M. Stationery Office, Adastral House, Kingsway, London, in the publication entitled "Examination of Officers for Promotion" (price 2s. 6d.).

This publication contains the papers set at the examinations for promotion for officers of all branches of the service, and appears twice yearly, i.e., after each examination. It also contains the answers to the questions and is a useful guide, as the perusal of a few papers together with their answers will prove of value to a candidate who may not be adept at attacking questions on paper.

In order to give the reader of this article a ready idea of the nature of the questions set, the following are a few chosen at random from several papers:

(1) State the privileges and duties of medical personnel captured by the enemy and describe any differentiation in treatment of medical material (excluding depots of medical stores). Mention in what respects the treatment of medical material of voluntary aid societies, although admitted to the privileges of the Geneva Convention, differs from that of the Army Medical Service. (20 marks.)

(2) Describe the theoretical zone of the medical organization in an overseas war, stating the areas to which each corresponds and enunciate the medical establishments and units functioning in each zone.

Trace the course of the following from the time they first came under medical care to their ultimate disposal:

(a) A severely wounded soldier able to travel lying down.
(b) A wounded soldier likely to be fit for general service in a month. (30 marks.)

(3) The task of clearing the line of a certain area and forming an advanced dressing station has been allotted to you as officer commanding a field ambulance. You have two companies of your field ambulance at your disposal, and an attack is to take place in forty-eight hours’ time.

Describe shortly the formation of your advanced dressing station and the steps you would take, or see taken, to organize the collection of casualties. (30 marks.)

(4) As the result of experience gained in the Great War, what is your opinion of the following:

(a) The rôle of the advanced operating centre?
(b) The procedure of evacuating casualties from advanced dressing station direct to casualty clearing stations? (30 marks.)

(5) (a) What are the regulations governing the issue of trusses to the following:
   (i) Serving soldiers?
   (ii) Wives of soldiers?

   In the case of (i) how is the issue recorded?

   (b) A recruit, otherwise medically fit and of good stamp, is found to have a dental standard below the eleven points required on enlistment and suffers from the deficiency. How should he be dealt with:
   (i) If still at the recruiting station?
   (ii) If already joined at his depot? (20 marks.)

(6) (a) Explain the general arrangements to be made by an officer commanding a company R.A.M.C. during peace to ensure the smooth and efficient mobilization of the various medical units detailed to mobilize at his headquarters.

   (b) How are the personnel to complete these units detailed?

   (c) Where is the war outfit generally stored? (30 marks.)

(7) (a) State the constitution of the board of final inspection of a transport. Where does the inspection take place in a transport embarking troops from more than one port?

   What officers accompany the board at the inspection?

   (b) You are S.M.O. in a transport returning to the United Kingdom with invalids and some troops. Enumerate the returns, documents and books, you will furnish to the embarkation medical officer on arrival at the port of disembarkation? (20 marks.)

(8) (a) How is it established that an article of medical equipment is unserviceable, and what is the procedure until it is finally struck off charge?

   (b) In witnessing the unpacking of medical stores, what are the points to be made note of?

   If discrepancies are merely trifling, what action is taken? (20 marks.)

PART II.

This examination is an extensive and searching one held with a view to testing the candidate's knowledge of Field Service Regulations in so far as they affect the medical services. Being a practical test it is held mostly in the field, and the time occupied must extend over three days, viz., Wednesday, Thursday and Friday and may be prolonged into Saturday morning, if necessary. It is conducted by a board of officers which is detailed from the War Office in home commands and by the G.O.C. in C. in commands abroad. This board consists of a President who will be a D.D.M.S. or an A.D.M.S., or failing these, a Lieutenant-Colonel R.A.M.C. One member of the board must be a staff officer not below the rank of
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Major, and the remaining members of the board will be R.A.M.C. officers not below the rank of Lieutenant-Colonel.

The test is founded on a scheme elaborated by the board, and having as its basis the military campaign, which, as already stated, has been duly notified for study in Army Orders. This scheme will be carried out by means of a Medical Staff Tour in which the following exercises will be included:

1. As the senior administrative medical officer of an independent force, writing an appreciation of a situation from its medical and hygienic aspects.

2. Drafting medical instructions and medical standing, operation and routine orders.

3. Reconnaissance of an area of operation in order to ascertain the nature of the prevailing diseases and other conditions likely to affect the health of the troops, the facilities for entraining and detraining casualties, and the medical resources of the areas as regards 
   (a) buildings suitable for hospitals, casualty clearing stations, field ambulances and medical stores; and 
   (b) stores, equipment, drugs, &c., for use in medical units.

4. Working out the medical arrangements required to meet various medical situations.

5. Making rough sketches and calculations in conjunction with the above exercises, and answering problems in map reading, march timings and the movement of troops.

In the initial phase of the examination (i.e., in Exercise 1 above) the candidate may be called upon to assume the appointment of the senior administrative medical officer of an independent force, e.g., the position of D.M.S., while in the remaining phases he will only be detailed to such appointment or appointments as he might be called upon to hold as a Lieutenant-Colonel R.A.M.C. or Colonel in the theatre of operations (K.R., Appendix X).

It will be seen, therefore, that the examination is initiated by the candidate being called upon to write an appreciation, and he is allowed one week to do so. On the Wednesday, therefore, of the week previous to that in which the examination is due to take place, he will probably receive a bundle of papers which looks somewhat formidable. These papers constitute the scheme which has been drawn up at great trouble by the examination board in accordance with the instructions contained in Chapter II of "Training and Manoeuvre Regulations." They should be carefully studied so as to grasp from them the general, and particularly the special idea, and obtain a clear understanding of the orders given, and of the object in view.

The candidate, having satisfied himself that he has mastered the scheme,

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1 Amendment No. 6 to King's Regulations issued under Army Orders for December, 1928, directs that this force is to consist of not more than one division. This article was written prior to this order.
should then proceed as senior administrative medical officer to write his appreciation of the situation from its medical and hygienic aspects. It will be convenient at this stage to draw attention to an important point brought out by Major Amy in an article contributed by him to the Journal of the Royal Army Medical Corps in May, 1927, in which he calls upon the candidate to exercise his imagination and visualize his position with regard to the examination board. He must realize that his appreciation is intended to be of practical value to someone who is waging war or is about to wage war, and that the staff officer of the board will read the appreciation as if he were the G.O.C. in C. in charge of the situation dealt with by the candidate as his senior administrative medical officer. The fact that the other members of the board belong to the medical branch of the Service does not affect his position as they merely help the staff officer to assess the value of the appreciation.

Section 25 of "Training and Manoeuvre Regulations" contains the chief article found in regulations dealing with the subject of appreciations, and, as such, merits careful perusal and study in conjunction with Section 13 of the same Manual, which deals with essays and military writing. The only available literature regarding the interpretation of these sections in their application to medical appreciations is that found in the numerous and conflicting articles which have appeared from time to time in the Journal of the Royal Army Medical Corps. So far as the author of this article can recollect, the first officer to shed any light upon this subject was Major-General Sir S. Guise-Moores in an article entitled "The Medical Appreciation of Campaigns" contributed by him to the Journal of the Royal Army Medical Corps of April, 1923.

These articles, though admirable in themselves, only express the personal opinions and experiences of the writers, as pointed out by Major Amy and Major J. E. M. Boyd. The latter officer in a letter published in July, 1928, pleads for the institution of a definite course of instruction for the whole of this examination—a plea which would appear to be justified by the very precise orders given in King's Regulations, para. 864, quoted above. In such a course, candidates would be afforded an opportunity of receiving clear instructions as to how to write an appreciation and what to embody in it.

The writer of this present article will now venture to tread the thorny path of this already much discussed subject (appreciations) and hopes that his views will not result in the confounded remaining more confounded.

It is best to commence a discussion on the subject by quoting word for word certain paragraphs from the aforementioned Section 25 of "Training and Manoeuvre Regulations"—as follows:

(1) "An appreciation is a military review of the actual situation culminating in a statement of the measures recommended to meet it."

(2) "A distinction must be drawn between (i) appreciations in connexion with subjects elaborated in peace time, such as plans of campaign,
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and (ii) appreciations of minor strategical or tactical problems in the field, which, in the case of minor tactical problems, may not even be committed to paper.

In the former rapidity in completion is immaterial, every known or surmised factor, however slightly it may bear on the situation, must be considered and recorded, since future developments may materially alter its importance.

In the latter rapidity is generally all-important and the time available will seldom admit of all the factors being recorded, though they should all receive consideration."

Para. 4 of this section as originally issued in 1923, commences as follows:—

"So long as the reasoning is logical and leads up to a definite plan, the actual form of the appreciation is of minor importance."

It is evident that the latitude allowed by these words (in italics) did not prove successful, as Army Order 117 of 1926 was brought out amending the whole of this paragraph and tying the writer of an appreciation down to a definite formula. The amended para. now reads as follows:—

"(4) The writing of appreciations in the accepted logical sequence is a necessity. The general headings and the necessary sequence are—

(i) Object.
(ii) Considerations which affect the attainment of this object.
(iii) Courses open to the two sides.
(iv) Plan.

Unless the object is clearly stated in the opening paragraph the appreciation is apt to become involved and the decision—which is the aim and object of all appreciations—shrouded in doubt.

From the plan, as given in the final paragraph, any staff officer should be able to write the necessary orders."

The above Army Order amending para. 4 has been discussed in several articles which have appeared in the JOURNAL OF THE ROYAL ARMY MEDICAL CORPS, viz., one in May, 1927, by Major A. C. Amy, D.S.O., a second in August, 1927, by A Staff Officer, and a third in July, 1928, by Colonel F. P. Sewell, C.M.G., D.S.O.

These articles are worthy of perusal and the first two appear to present two almost diametrically opposed opinions regarding the value of the instructions contained in this Army Order in their application to the writing of medical appreciations. The staff officer lays stress on the necessity of these appreciations being presented in the form dictated by that order, while Major Amy describes that formula as awkward, cumbersome, and in certain respects meaningless from our angle of view. The latter officer yields, however, to the necessity of adopting the formula, recognizing that a special scheme for writing medical appreciations is never likely to find a place in regulations—a remark applicable with equal force to appreciations which may have to be furnished by many of the
other services or "handmaidens" of the fighting troops. In its application to the writing of medical appreciations, heading (iii) "Courses open to both sides," can be omitted as it is obviously not applicable to our considerations, vide article by "Staff Officer." The presence of this heading would appear to justify Major Amy's remark to the effect that it is meaningless from our point of view, while Colonel Sewell states that it is evident that the headings, especially (iii), are not very suitable for medical appreciations but they will serve as a guide.

There would appear, therefore, to be no alternative to adopting the formula required by "Training and Maneuver Regulations," and candidates should therefore adhere to it, with the omission of heading (iii). The first heading is not difficult as it will remain for us almost invariably a constant, so to speak, namely, the preservation of the health of the troops and the rapid evacuation of sick and wounded from the area of operations combined with their efficient care and treatment.

It is evident, therefore, that headings (ii) and (iv) will constitute the chief items in a medical appreciation, and these will be considered later in this article. In the meantime we shall revert to a discussion of para. 2 of Section 25 of "Training and Maneuver Regulations."

Every military situation in which a G.O.C. in C. may call for a medical appreciation comes, broadly speaking, under one of three periods, viz.:

1. The pre-concentration period.
2. The concentration period.
3. The fighting period, i.e., from the time of first contact with the enemy to the "cease fire."

The bearing in mind of these three periods will throw much light upon the interpretation of this para. from the point of view of medical appreciations, as military situations coming under the pre-concentration period will demand from us appreciations of type (i), while those coming under the fighting period will demand type (ii), [for difference in these two types see the para. in question quoted word for word above]; situations dealing with the concentration period will call for appreciations tending towards type (ii) rather than type (i).

On referring to the exercises included in the Staff Tour which constitute the examination, it will be understood that the appreciation required at the commencement of the examination (i.e., the first exercise) must come almost invariably under type (i), as the regulations state that it has to be written by the candidate as the senior medical officer of an independent force.

Appreciations of type (ii) may be called for under exercise (4), i.e., while working out in the field the medical arrangements required to meet various military situations when quick decisions and rapid surveys of situations either in writing or verbally, are all important.

The importance of differentiating between these two types of appreciations is brought out by Colonel Sewell, who writes in his article as follows: "Appreciations written by officers of the Medical Services should
also be classified in the same manner. In Class (1) I would include not only the appreciations made in peace time, but also those made at the outset of a campaign, or at the outset of a new phase of a campaign, by the Administrative Medical Officer responsible for the provision of medical units and equipment, and for the medical policy of the campaign. This officer is generally the Director of Medical Services of the Force. Under certain circumstances it may conceivably be the Deputy Director of Medical Services of a smaller force located in some area remote from the main operations of the war. I cannot conceive, however, of any circumstance in which an A.D.M.S. is the officer responsible for the medical arrangements of a campaign from front to base. In Class (2) would be the appreciations of A.D.'s M.S. of divisions."

In appreciations of type (i) great latitude would appear to be allowed by the fact that the regulations state that every known factor, however slightly it may bear on the situation, must be considered and recorded, since future developments may materially alter its importance. It is possible that a false idea of this latitude on the part of some candidates may account for the gigantic and mammoth treatises produced from time to time as medical appreciations to which Major Amy takes exception, furnishing, as they frequently do, information which the G.O.C. does not want to know and repeating information already in his possession.1

It is suggested by the writer of this present article that when an appreciation (medical) is called for by a G.O.C. in C. the following visualizes the situation, namely, that the G.O.C. furnishes his senior administrative medical officer with certain information in his possession regarding a military situation, and requires in return deductions and inferences from that information in so far as they affect the medical and hygienic aspects of that situation. Use can be made of any other information which the senior administrative medical officer can bring to bear, but in weighing up all information, care must be taken to distinguish between established facts and assumptions, since on the accuracy of the latter the conclusions arrived at, and the recommendations made, will be largely dependent. In the event of its being impossible to avoid repeating information already in possession of the G.O.C., or of entering into detailed discussions, arguments

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1 Major Amy in his article of May, 1927, suggests that a G.O.C. in C. does not, require in an appreciation from his D.M.S.:—

Detailed composition of the whole force in accordance with war establishments.
Estimates of the enemy's strength.
Detailed description of the composition of all the units of the force.
Long descriptions of the topography of the scene of operations.
Learned monograph on prevalent diseases.
Scientific details regarding classes of wounds.
Commentary on the various methods of estimating casualties due to sickness or wounds.

Long discussion on medical units and their arrangements.
or mathematical calculations, it is advisable that these should be added as far as possible as appendices, and not included in the body of the appreciation, which must be concise and clear with all irrelevant matter and exaggeration avoided. In an article contributed by Colonel Crawford to the Journal of the Royal Army Medical Corps in August, 1927, that officer suggests that upon receipt of an appreciation by a G.O.C. he, being probably a very busy man, will turn immediately to the plan and if that meets with his approval—well and good—but if he deems there are difficulties in carrying out that plan, or that it does not fit in with his arrangements, he may read the rest of the appreciation to see how decisions have been arrived at, with a view, probably, to a subsequent verbal discussion regarding modifications.

Captain O. G. Body, D.S.O., R.A., writing recently in the United Service Institute (India) Journal states as follows: "An appreciation should never resolve itself into an intelligence summary, or a mere statement of information to hand. Each factor should include a definite deduction; it is no use merely stating facts; it is the deductions from the facts which are important."

Up to the present our discussion has merely dealt with the manner in which the subject matter is to be presented in a medical appreciation, and we shall now proceed to try to indicate what constitutes that subject matter, or in other words to try and answer the question, "What is one to write about in a medical appreciation?" Before proceeding to this it might be advisable to summarize the points regarding the method of presentation as they may have become obscure, if not actually lost in the foregoing somewhat long discussion.

(1) The form and sequence dictated by regulations must be employed.

(2) That form consists of four headings of which three only are to be cited, viz.:

   (i) Object.
   (ii) Considerations which may affect the attainment of this object.
   (iii) Plan.

(3) The object will be a constant as it will deal almost invariably with the preservation of the health of the troops, prevention of disease, rapid evacuation and care of the sick and wounded from the area of operations, or perhaps some special points associated with one or the other of these.

(4) All matter which might appear irrelevant to the G.O.C. should, if it has to be included, take the form of appendices, and not be placed in the body of the appreciation, which must be concise and to the point.

It will be understood, therefore, that the subject matter of an appreciation is to be marshalled chiefly under its second and third headings, and

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1 This para. is sometimes headed "Factors" for the sake of brevity, especially in appreciations of type (ii).
we shall now turn to Chapter XIX of "Royal Army Medical Corps Training," which deals very largely with that subject matter. It is proposed to take the various paragraphs of this chapter and place them under their respective headings in an appreciation, and for this purpose it will be necessary for the reader to have open before him page 150 of "Royal Army Medical Corps Training."

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<th>(ii) Considerations which affect the attainment of the object</th>
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<td>403 and 404. The appreciation will embody the scheme under the heading &quot;plan&quot; as directed by Training and Manoeuvre Regulations, Section 25</td>
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<td>7</td>
<td></td>
<td>406 less last sentence</td>
<td></td>
<td>407 and 408. Unless definitely called upon to do so it will probably be unnecessary to touch the points raised by these paragraphs: if discussed they should be dealt with briefly in the plan and further elaboration of the discussion carried on in an appendix</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>Last sentence of 406</td>
<td></td>
<td></td>
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<tr>
<td>9</td>
<td></td>
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<td>10</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>First sentence of 408</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>408—less first sentence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td>410, 412 and first part of 415</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>400, 414, last part of 416, and 416</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

These paragraphs refer to the siting of stationary medical units and should be read in conjunction with Serial 7 and Serial 15.

These paragraphs deal with the siting of the mobile medical units and their consideration would come more probably under appreciations of type (ii) (vide p. 342), i.e., appreciations dealing with the concentration and fighting periods rather than the pre-concentration period which demand type (1) appreciation.
The foregoing table gives practically all the points touched upon in our Training Manual, but needless to say other points may arise which would require consideration. In sizing up the points, however, the writer of an appreciation must exercise judgment; he should select points which have a definite bearing on the situation and from which deductions can be made.

(To be continued.)