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THE ENGLISH MILITARY SURGEON
1603 - 1641

BY
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Late Royal Army Medical Corps

James VI and I was an extremely stupid man, but he did his country this service, that he kept it out of wars for a long period. His reasons for doing this may often have been foolish ones, but the result was that commercial life was able to develop without the interruptions of foreign wars and the country grew steadily wealthier. His son Charles at first reversed his father's policy, but his campaigns were so badly conceived and so poorly executed that they left him extremely short of money; and for the next ten years of his reign he made no further attempts to achieve military distinction. England from 1603 and 1639, with few interruptions enjoyed a period of peace, and little occurred that is of interest to the general military historian, but his medical brother is more fortunate, because several alterations were made in the status of the medical officers which were of fundamental importance in the future development of the medical service of the army.

In an earlier paper (JOURNAL OF THE ROYAL ARMY MEDICAL CORPS, 88, 231-47) I have described the condition of the medical officers in the army in Ireland, the one permanent army that England possessed during the sixteenth century. This force continued to exist during the period that we are now discussing, but its strength was radically reduced. Regiments disappeared and the army in Ireland came once more to consist of a number of independent companies. There were no regimental surgeons and not even all the companies were entitled to have surgeons. These officers were confined to foot companies only, and, by 1610, troops of horse and garrisons of castles had no surgeons on their establishment (CSPI, 1608-10, pp. 508-10).

During the reign of James I the company surgeons in Ireland continued to draw their old rate of pay of one shilling a day; but, in 1628, the reign of Charles I, an extraordinary alteration was made in the wages of the company non-commissioned officers, including the surgeons; instead of receiving one shilling a day, as they had done for many years, their pay was suddenly cut to ninepence, while that of the private soldier was reduced to sixpence (CSPI, 1625-32, p. 342). How it was thought to be possible to obtain professional men
of any attainments for this miserable pittance it is difficult to imagine; nevertheless this rate of pay continued up to at least December 6, 1641 (CSPI, 1633-47, p. 765), and possibly for longer.

In my earlier paper I mentioned that William Kelly was for many years principal surgeon in Ireland, and that after his death in 1597 he was succeeded by Walter Newton. Newton was no longer in office in 1607, for in that year the position of surgeon to the State—as it was then called—was held by Edmond Cullon (CSPI, 1608-10, pp. 79 and 507), who still retained it in 1615 (CSPI, 1615-25, p. 11). In 1623 James Weaver was surgeon to the State (CSPI, 1615-25, p. 406).

Somewhere about 1625 the name of Dickson appears in the list of captains as Chief Surgeon in Ireland at a salary of 6s. 8d. a day (CSPI, 1625-32, p. 172). It is possible that this was a new appointment designed to give the soldiers better surgical treatment than they had previously received, but I am of the opinion that this is improbable. I am more inclined to believe that it was found to be impossible to get a man with adequate qualifications to take the appointment of surgeon to the State at the salary of two shillings a day, and that it became necessary to make a new appointment with a higher rate of pay, to attract a properly qualified surgeon to treat the civil officials should they require surgical attention.

I pointed out in my earlier paper, that, after the death of Dr. Turner, the stipend of the physician to the State in Ireland was given to the Master and Fellows of Trinity College, Dublin. This arrangement can only have lasted for a few years, because, in 1610, Dr. Metcalfe's name appears as physician to the State (CSPI, 1608-10, p. 507). He held that appointment until his death in 1633. At the time of his death he was a wealthy man; he left two children, a daughter who had married but "meanly," and a son of weak intellect. Unfortunately he had made no will, and his children were not in a position to look after their own interests. This gave the unscrupulous Lord Chancellor of Ireland an opportunity of laying his claws upon the estate and he appointed one of his gang of toadies as administrator, to rob the children of Metcalfe of their patrimony (CSPI, 1633-47, pp. 9, 14, 101, 192-3).

Let us now leave Ireland and its impoverished ragtime army, and return to England to see how military affairs were being managed in that country. As in the previous reign, there was except for a few weak garrisons no permanent army. When war broke out a force had to be raised and troops recruited in a hurry. In 1620 James resolved to go to war in support of the Elector of the Palatinate, and decided to do this in a big way by raising a force of over 30,000 men. As frequently happened with this monarch, this grandiose scheme was more than his financial resources would allow, and ultimately, all that he was able to send overseas was a paltry force of some 2,000 men.

Notwithstanding the fact that it never materialized, the authorized establishment for the proposed army is of considerable interest. It indicates the strength of the medical service that was then considered to be necessary for a
large force. Furthermore this establishment was to be the pattern, with certain modification, of the medical service of the army during the whole of Civil War.

The force of 30,000 men was made up of 25,000 infantry, 5,000 cavalry, and an unspecified number of artillerymen and pioneers; and for this force the following medical establishment was authorized:

<table>
<thead>
<tr>
<th>Establishment</th>
<th>Persons</th>
<th>Rate of Pay</th>
</tr>
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<tbody>
<tr>
<td>The General's Train</td>
<td>2 Physicians</td>
<td>each at 6s. 8d. a day</td>
</tr>
<tr>
<td></td>
<td>2 Apothecaries</td>
<td>each at 3s. 4d. a day</td>
</tr>
<tr>
<td></td>
<td>2 Surgeons</td>
<td>each at 6s. 8d. a day</td>
</tr>
<tr>
<td>Infantry Regiment</td>
<td>1 Chief Surgeon</td>
<td>at 4s. 0d. a day</td>
</tr>
<tr>
<td></td>
<td>12 Surgeons (1 per company: of 150 men)</td>
<td>each at 1s. 0d. a day</td>
</tr>
<tr>
<td>General of Horse</td>
<td>1 Chief Surgeon</td>
<td>at 4s. 0d. a day</td>
</tr>
<tr>
<td>Troop of Horse of 100 men</td>
<td>1 Surgeon</td>
<td>at 2s. 6d. a day</td>
</tr>
<tr>
<td>Ordnance and Pioneers</td>
<td>1 Barber Surgeon</td>
<td>at 2s. 6d. a day</td>
</tr>
<tr>
<td></td>
<td>2 Under Barber Surgeons</td>
<td>each at 0s. 6d. a day</td>
</tr>
<tr>
<td>The Camp</td>
<td>1 Surgeon Major</td>
<td>at 5s. 0d. a day</td>
</tr>
<tr>
<td></td>
<td>2 Mates</td>
<td>each at 4s. 0d. a day</td>
</tr>
</tbody>
</table>

(H. A. L. Howell, *Journal of the Royal Army Medical Corps*, 2, 738)

It will be observed that here we have a regular hierarchy of medical officers, with the two physicians to the train at the top, descending to the two under barber surgeons of the Ordnance at the bottom. It would be necessary to go back to 1482, to the army of the Duke of Gloucester, to find a medical establishment that would compare in any way to this in gradation of ranks.

The number of medical men attached to the train of the general appears to be very generous for the small number of men that they must have had under their care. Yet this part of the establishment remained unaltered for many years, and one wonders whether or not these officers did not have some administrative control over the rest of the medical officers of the army. Unfortunately there is no evidence which would shed any light on this matter. The presence of apothecaries with the army is an innovation. Although there had been casual references earlier to members of this branch of the medical profession being associated with the army, this is the first occasion on which they appear in an official establishment. This probably arose from the fact, that James, in 1617, with an unexpected sagacity, and against considerable opposition, split the apothecaries off from the Grocers Company and incorporated them as a separate company called the Society of Apothecaries.

The regiments were given an allotment of surgeons that appears to be more than generous. An attempt was made to combine the old company system with the new regimental one, of which we saw the first rudiments in the last years of the reign of Queen Elizabeth. This combination of company and regimental medical officers was probably only used once, in 1624, and for the very good reason, that it was far too extravagant in medical officers.

It is interesting to see that the medical officers of the ordnance are called barber surgeons. Up to the time of their union by Henry VIII, there had been
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two companies of surgeons in England, one was the Surgeons Guild, and the other the Company of Barbers. Prior to this union it had been the custom to refer to the members of the guild as surgeons, and to those of the company as barber surgeons. After the union these distinctive names gradually dropped out of use and the surgical members of the united company were known simply as surgeons. One can only suggest that it is used in this establishment to describe a man who was not so well qualified as those in the other branches of the army. Undoubtedly this would appear to be the correct explanation in regard to the junior medical officers of the ordnance, because one would hardly expect to find men with any qualifications being content with sixpence a day, the pay of a common soldier.

The appointment of a staff of surgeons for camp duty was an innovation and was not repeated. The title of surgeon's mate for the junior officers of this department is, as far as I know, the first time that this rank occurs in the army. It was to remain in use right up to the end of the eighteenth century as the title of the assistants of the regimental officer. These junior regimental medical officers were only warrant officers, and the surgeons' mates of the camp, judging by their rate of pay, must have been equivalent to commissioned officers.

Finally, it will be seen that the regimental system was confined to the infantry; the cavalry still consisted of independent troops, each with its own troop surgeon. These officers were much better off financially than their opposite numbers in the infantry; but it must be remembered that they probably had to provide and maintain their own horses.

The next establishment of which we have a record is that for the army for the first Bishops War of 1639. This is preserved in a document in Rushworth's "Historical Collections," II, pp. 1046-50, which gives a detailed account of the constitution of the English army in this campaign. From this I have extracted the following details of the medical branch of that force:

The Lord General's Train
2 Physicians
2 Apothecaries
2 Surgeons
(2 Mates)
1 Surgeon

Regiment of Foot
1 Surgeon

General of Horse
1 Surgeon

Troop of Horse
1 Surgeon

Train of Artillery
1 Surgeon
1 Servant

each at 6s. 8d. a day
each at 3s. 4d. a day
each at 4s. 0d. a day

When we compare this establishment with that for the force intended for service with the Elector of the Palatinate, it will be seen that the general outline is the same, nevertheless, there are several important changes. In the first place the pay of the senior surgeons has been standardized at four shillings a day. This was to the disadvantage of the surgeons of the Train, but the senior Surgeon of the Ordnance benefited to the extent of two shillings a day, and was no longer known by the somewhat invidious title of barber surgeon. He
also had only one assistant, who was merely called his servant. This title was probably commensurate with that worthy’s qualifications, for although his pay was double that of his predecessors, it was still only a shilling a day, which implies that he was a man of no professional standing. It will be noticed that the interesting experiment of having a surgical staff for camp duties was not repeated.

The most significant change in the medical establishment is in the infantry regiments. Although this change is not indicated in the paper preserved in the Rushworth Collection, we know from another source (CSPD, 1639-40, p. 594) that the company surgeons had been abolished, and had been replaced by regimental surgeons mates. How many of these officers were allotted to each regiment during this campaign is uncertain, but the document states that in the Second Bishops war the number was two, and infers that this was the number of mates allowed to a regiment during the First Bishops war.

This was not the first time that regimental surgeons mates had been employed in the English army. In the expedition under Count Mansfield in 1624, each regiment had a master surgeon and three assistants (APC, 1623-5, p. 396), but it would appear that the regiment also had its quota of company surgeons (APC, 1623-5, p. 427). If such was the case, it was the establishment of 1620 all over again, but upon an even more generous scale. In 1627, however, when five regiments were raised for the expedition to the island of Ré, the Privy Council sanctioned the employment of the following officers for each of these units—a chaplain, a provost-marshal, a quartermaster, and a surgeon. The Council appears to have been uncertain how much they should pay these officers, and requested the Lord Treasurer and the Chancellor of the Exchequer to ascertain what had been the remuneration of these ranks in earlier expeditions. These two officials duly reported, and in regard to the regimental surgeon said, that previously he had received five shillings a day, but as there was now only one surgeon sanctioned for each regiment, he must have three servants to assist him. The Council agreed to this suggestion, and decided, that over and above his own pay, the regimental surgeon should be allowed two shillings and sixpence a day for each of his assistants (APC, 1627-8, p. 175).

1627, therefore, is a very important date in the history of the medical service of the English army, because it was in this year that the infantry company surgeon ceased to exist, and his place was taken by new junior regimental officers, shortly to be called surgeons mates. This important change in the medical establishment of the infantry regiment was to continue in force, practically unchanged, for over two hundred years.

The observations in the last paragraph do not apply to Ireland, where the company surgeon lingered on for many years. Neither did it apply to the cavalry, which continued to have troop surgeons for a number of years; but, in 1642, at the outbreak of the Civil War, regimental surgeons were also appointed in this branch of the service, and from that time troop surgeons also ceased to exist in the English army.
Besides the temporary armies raised for continental expeditions, there were small permanent garrisons in one or two places within the kingdom. In an earlier paper, I referred to the garrison of Berwick, but, during the sixteenth century, there was no indication that this, or any other garrison, had a surgeon on its establishment. The first record of a garrison surgeon is in February 1627. In the Acts of the Privy Council for that year, there is a list of the garrison of the Scilly Isles. From this we learn that it possessed a surgeon; and that his pay was one shilling a day, which was the same as that of the two serjeants and the drummer. The private soldiers, who numbered 81, received eightpence a day per man; and there were also a dozen gunners at tenpence a day (APC, 1627, p. 63). From these facts it is obvious that the garrison consisted of one company, and that the surgeon ranked as a company surgeon, and received the old established pay of that rank.

In July of the same year there is a similar list for the garrison of the Isle of Jersey. This consisted of a double company under the command of a captain, with a lieutenant and an ensign to assist him. The strength was two hundred rank and file, with double the number of non-commissioned found in an ordinary company. There were, therefore, two surgeons, and each of them received the normal pay of a shilling a day (APC, 1627, p. 439).

It would appear that there was always a garrison at Berwick, but there is no evidence that it normally had a surgeon. In 1640, however, at the time of the second Bishops War, both a physician and a surgeon were appointed to that station; doubtless on account of an increase in the strength of the garrison. The pay of these medical officers is not mentioned, but it was laid down that they should be given “the like entertainment as in the army,” which presumably was six shillings and eightpence for the physician, and four shillings for the surgeon (CSPD, 1639-40, p. 576).

At least during one period, on account of a sudden influx of casualties from the Continent, it became necessary to engage a number of surgeons at very short notice. This was on November 20, 1627, when the news reached London that the wounded from Buckingham’s army had been landed on the south coast. The company of Surgeons received immediate instructions from Sir Edward Conway to send five or six good surgeons at once to Portsmouth, with the necessary drugs and equipment to treat these wounded men (CSPD, 1627-8, p. 442). The Company took prompt action, and on the same day selected some of their most distinguished members for this work. These included Woodall, one of the wardens of the company. He was the author of several well-known surgical textbooks, principal surgeon to the East India Company, and was the man who had been mainly responsible for recruiting the surgeons for this expedition. Another of the surgeons who went to Portsmouth was Peter Thorney, who, in the following year, was appointed Surgeon-General of the Expeditionary Force that was sent to Rochelle (S. Young, Annals of the Barber Surgeons, 1890, p. 334).

On November 22 Conway wrote to inform the Duke of Buckingham that
these six surgeons had been *impressed*, and asked that the Duke should decide how many of them should go to Portsmouth and Plymouth respectively (CSPD, 1627–8, p. 444).

I have placed the word impressed in italics, because I believe that the word is here being used to indicate that these distinguished members of the Surgeons Company received an imprest, or advance of pay, when they were appointed for this duty. There is no indication that they had been pressed or forced into this service.

It would appear that they remained at Portsmouth till about December 2, because on that date Captain Mason records that he had handed over a sum of money to the surgeons sent from London, to cover the expenses of the sick and wounded men, who were being removed to the capital, for further treatment in the hospitals of Saint Thomas and Saint Bartholomew (CSPD, 1627–8, p. 455).

We have next to consider how the surgeons for the army were recruited during this period, and we shall find that they were pressed in the same rigorous way as was done in the previous century. It will be recollected that in the sixteenth century, the responsibility for recruiting surgeons was sometimes delegated to the officials of the Barber Surgeons Company, and at other times to the officers of the regiments who were in need of surgeons. This practice was continued in the seventeenth century. In December 1624 the Master and Wardens of the Company were ordered by the Privy Council to press and take up

> "sixe sufficient master chirurgians with three servantes apiece to serve under them in the exercise of chirurgerie, to goe along with the sise regimentes of foote to serve under Count Mansfield, to every regiment one, and these parties to be at Dover by the twenty fourth of this moneth, to goe along with the troupes from thence" (APC, 1623–5, p. 396).

So much for the regimental medical officers for this force; but it would appear that the company surgeons were recruited by the company commanders. My reason for saying this is that in January of the following year the Privy Council complained to the colonels of the regiments, that

> "diverse of your captains have contracted with sundry of the surgeons, and thereupon discharged them, regarding more their private ends than His Majesty's service" (APC, 1623–5, p. 427).

These remarks of the Privy Council show that the ethical standard of company commanders had not improved since the days of Queen Elizabeth, and that they were still as eager as ever to line their own pockets at the expense of both the Crown and the private soldier.

In February 1625 the Company of Barber Surgeons was called upon to press a number of company surgeons for service in Ireland (APC, 1623–5, pp. 485–6). But in August of the same year warrants were given to ten colonels to impress the surgeons required for their regiments (APC, 1625–6, p. 127).
Therefore within a period of twelve months, the Company of Surgeons and the regimental officers were both twice authorized to recruit surgeons for military service. So it went on throughout the period, sometimes it was the colonels of the regiments who were empowered to recruit his own surgeons, and at other times this was done by the Surgeons Company.

The results of these methods of recruitment were sometimes curious, and often unfair. In 1625 William Goodridge of New Sarum was pressed for service as a military surgeon; and, if there is any truth the certificate issued by the Mayor and Justices of that town, nobody less suitable could have been selected for the job. They said that Goodridge was about 60 years old, that he suffered from gout and stone, and was not sufficiently skilled in surgery to serve in the King's service (CSPD, 1625-6, p. 97). Goodridge was an alderman and ex-mayor of New Sarum, so it is possible that his brother magistrates, in trying to assist him, were none too accurate in their statements, but, even so, one can hardly believe that they would have gone so far as to disparage his professional ability.

A curious effect of this method of recruiting surgeons occurred in 1627. The Mayor and Commonality of Plymouth petitioned the Privy Council for the exemption of Frederick Christian and John Davies from military service so long as they should be employed as surgeons for the town and the hospital at Plymouth. The grounds for this petition were that there was a shortage of surgeons in the town on account of the recent expedition to Cadiz, and the late high mortality in the town (CSPD, 1627-8, p. 143). Presumably the mortality had hit the surgeons severely, but the main trouble was that surgeons were frightened of setting up in practice there, because Plymouth was the place from which so many expeditions sailed, and captains of ships and colonels of regiments took the last opportunity, while at this place, of making up their complement of medical officers by conscripting the local practitioners.

Goodridge and the two surgeons of Plymouth had no influential patrons to help them, otherwise their position might have been much happier. William Giddens pressed by the Master and Wardens of the Barber Surgeons Company in 1627 had such a friend in the Earl Rivers. That peer took action on his behalf, and the Privy Council wrote to the Surgeons Company ordering them to release Giddens from the press, because he was a servant of that nobleman

"who is aged and hath daily occasion to use the service of the said Giddens in some matter concerning his bodily health which can not well be performed by any other" (APC, 1626-7, p. 318).

It is necessary to add a few observations on the subject of pay. We have seen that by the end of the period this had been standardized at 6s. 8d. a day for physicians, 4s. for surgeons, and 3s. 4d. for apothecaries. But this was by no means the whole of their salaries; these officers were also in receipt of other sums.

In 1640, three physicians, Drs. Denton, Sheafe and Caddeman were engaged
to serve in the army, and over and above their pay they each received a lump sum of £150; which, when one considers the value of money in those days, appears to have been a fairly generous allowance. However, these officers thought differently, for they complained that this grant was too small, and asked for more. The Council of War discussed the matter, and decided to leave it to the General of the Army, to give the doctors an increase if he thought that their services deserved it (CSPD, 1640, p. 459). There is no evidence as to what the General decided, but it is known that Dr. Caddeman, in 1641, got a warrant for £160 from the General, and Dr. Denton was also trying to get one for £100 (CSPD, 1640–1, p. 546). Whether Caddeman ever managed to cash his warrant is another matter; for he had to deal with a couple of sharks in Sir William Uvedale, the Treasurer at War, and his assistant Matthew Bradley. These two worthies were busy misappropriating as much as they could of the money that had been set aside for the prosecution of the war.

The surgeons also had sources of income other than their pay. In the reign of Queen Elizabeth the scheme of giving the surgeon twopence a month for every soldier under his care was introduced. This money was stopped from the pay of the individual soldier, and was given to the surgeon to enable him to provide drugs and dressings. In 1627, while he still continued to draw his twopences, he was also given a sum of £30 by the government for this purpose, £25 for the supply of drugs, and £5 for linen (APC, 1627, p. 275). This payment of 1627 became a precedent, and afterwards it became the practice to give the regimental surgeon an allowance to enable him to furnish his chest. The actual sum varied from time to time.

As to the apothecaries, there is no evidence to show that they received any money over and above their pay of 3s. 4d. a day. But there is little doubt that the apothecaries on military service supplied the medical stores that were required by the army, and made their usual commercial profit on these transactions. This was certainly the custom during the Civil War, and was probably also the practice at this period. The apothecaries were not conscripted, and a salary of 3s. 4d. a day would have been of little inducement to them to volunteer to serve in the army unless there had been an opportunity to augment it in some way.

In my earlier paper on the medical officers of the English Army in the sixteenth century, it was pointed out that the number of physicians provided for the army was always quite inadequate to deal with the vast number of sick that invariably occurred on active service. It was suggested, very tentatively, that possibly the surgeons treated medical cases as well as surgical ones. At the same time it mentioned, that during that century there is no evidence to support this hypothesis.

In the earlier part of the seventeenth century the situation is rather different. John Woodall in the preface in his book entitled "Military and Domestic Surgery," published in 1639, strongly advocated that military and naval surgeons should be allowed to treat medical cases, because, frequently, they
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were so situated that it was impossible for them to consult a physician or even an apothecary, and must of necessity treat these diseases themselves. From this it is clear that it was coming to be appreciated that military surgeons should be allowed to extend their practice, and doubtless they frequently did so.

In regard to status, the physician still maintained his pre-eminence as a man of culture and a gentleman, and the position of the surgeon was improving; the introduction of the rank of regimental surgeon, with greater pay, attracted men with better qualifications. They do not appear to have been graded as commissioned officers, but that was coming and in the Civil War this important alteration was made, which resulted in a great advance in the social standing of the army surgeon.

As in the earlier paper I have included in an appendix a list of all the army medical officers of this period whose names I have been able to find.

AUSTIN, JOHN (1640) Surgeon to Sir Jacob Ashley's Regiment (Rushworth, II, pp. 1243–52).
BENNETT, —— (1640) Surgeon to Sir Charles Vavasor's Regiment (Rushworth, II, pp. 1243–52).
CADYMAN, JOHN, Also spelt Cademan. He was a London physician and M.D. of Bonn. He was admitted an extra-licentiate of the College of Physicians of London on May 1, 1640. On June 22, 1640, was recommended by the college for the appointment to the office of physician to the army (Munk's Role, I, p. 228). He received the appointment (CSPD, 1640, p. 459).
COQUINX, ANTHONY (1640) Surgeon to Lord Conway's Regiment (Rushworth, II, pp. 1243–52).
CULLEN, EDMOND, Also spelt Cullon. In 1607 was surgeon to the State in Ireland, and was still in office on February 8, 1615 (CSPD, 1608–10, pp. 79 and 507; 1615–25, p. 11).
DENTON, WILLIAM. Youngest son of Sir Thomas Denton, Hisden, Bucks. He was educated at Magdalen Hall, Oxford, M.D. October 10, 1634. In 1640 was a physician to the army (Munk, I, pp. 127–8 and CSPD, 1640, p. 459).
DICKSON, —— November 6, 1622, Chief Surgeon of the Army in Ireland (CSPI, 1625–32, p. 172).
EARNLESSE, JOHN. Surgeon to Viscount Grandison's Regiment (Rushworth, II, pp. 1243–52).
LOWE, LAWRENCE (1640) Surgeon to the Captain General's Regiments (Rushworth, II, pp. 1243–52). Was senior surgeon to the Parliamentary army in early stages of the Civil War.
METCALFE, —— Was physician to the State in Ireland in 1610, and held this appointment until his death in 1633. He left a large estate, and was survived by a son and a daughter (CSPD, 1608–10, p. 507; 1615–25, p. 11; 1633–47, p. 9).
MOORE, —— (1627) Physician to the Island of Re expedition, and personal physician to the Duke of Buckingham (CSPD, 1627–8, p. 400).
OXENBRIDGE, CHARLES (1640) Surgeon to the Earl of Barrimore's Regiment (Rushworth, II, pp. 1243–52).

PRIEST, WALTER (1627) Surgeon to the Duke of Buckingham, Island of Ré expedition. He died after his return to England, left a widow, Abigail, and two children in reduced circumstances (CSPD, 1628–9, p. 90).

RAYNE, GEORGE. An old army surgeon; in 1615 had difficulties in obtaining a pension from the City of Norwich (APC, 1615–6, p. 237).

SHEAFE, ——— (1640) Physician to the Army (CSPD, 1640, p. 457).

SMITH, RICHARD (1640) Surgeon to the Marquis of Hamilton’s Regiment (Rushworth II, pp. 1243–52).

THORNEY, PETER, July 8, 1628, appointed surgeon-general to the Rochelle expedition (Young, p. 334).

WEAVER, JAMES. In April 1623 was surgeon to the State in Ireland (CSPI, 1615–25, p. 406).

WOODALL, JOHN. The well-known surgical author. Born about 1569, son of Richard Woodall of Warwick. Served in France as surgeon to Lord Willoughby’s Regiment in 1591, later lived abroad. Returned to England, and was admitted to the Barber Surgeons’ Company in 1599. Appointed warden of the company in 1627, and master in 1633. Spent some time in Holland and Poland. He was appointed surgeon to St. Bartholomew’s Hospital in 1616 and was also principal surgeon to the East India Company; he held the latter position for nearly thirty years, and was in office at the time of his death in 1643. He was survived by his wife, Sarah Henchpole, three sons and one daughter. Most of the responsibility for the recruitment of surgeons for the Army and the Navy during the wars at the beginning of the reign of Charles I was delegated to him by the Surgeons Company (Norman Moore, D.N.B., lixii, pp. 282–3; J. Jenkinson, Journal of the Royal Naval Medical Service, 26, 107–9).

KEY TO REFERENCES

CSPD — Calendar of State Papers: Domestic.
CSPI — Calendar of State-Papers: Ireland.

SIR JAMES McGRIGOR
SOME NOTES AND CORRESPONDENCE
By Kind Permission of D. G. McGRIGOR, Esq.

My Grandfather described his experience in the disastrous Walcheren campaign in which he succeeded Sir John Webb as Chief Medical Officer. That he acquitted himself well is proved by the words quoted from the despatch from Sir Eyre Coote the Younger to Lord Castlereagh: “The attention of the Medical Officers under the able superintendence of Mr. McGrigor, Inspector of Hospitals, has been most unremitting and praiseworthy.”

Sir James, while in charge of the medical supervision of the South-Western District, had to deal with the troopers returning from Corunna, carrying fever with them wherever they went. So appalling was the state of affairs that he