THE CAMBRIDGE MILITARY HOSPITAL

A Short History

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FOREWORD

A HISTORY such as this is fascinating to write but omissions are inevitable and apologies for them are submitted in advance, similarly I must apologise to the many helpful people to whom I have spoken on this subject and have not acknowledged. Several false trails are pursued in work of this type; a casual remark is passed "oh! are you doing that; did you know . . .". For example did Queen Victoria plant the oak tree in Cambridge House, and if she did where is the weeping willow she planted in the area when Prince Albert died. Did a German spy ever use the clock tower in the hospital to guide bombers in to attack London? How does one sort fact from fiction when a member of the staff seriously relates the story of the ghost in The Cambridge Hospital? Apparently an officer of the Q.A.I.M.N.S. mistakenly gave a fatal overdose of a prescribed drug to a patient, and subsequently committed suicide by throwing herself from the hospital balcony. She is reputed to have been seen and sometimes only heard doing ward rounds by both patients and staff. Her last recorded visit was in 1969 when she was seen by a night orderly sergeant.

On the other hand, Mr. David Strong, a diligent and enthusiastic student of military history prior to 1914, of the National Westminster Bank in Aldershot, did have copies of the original parliamentary documents relating to the building of the hospital. Sylvia Nash, a freelance reporter in Aldershot, was able to provide much useful information from both her own reports and other newspaper cuttings she has retained over the years. Mr. Darling, the hairdresser, who now has his salon in the Old Union Hospital gave me the map from which Figure 4 is taken. It originally belonged to his father.

To Colonel Howard Cole I am most deeply indebted for the many enjoyable and helpful discussions I have had with him. His book "The Story of Aldershot" has proved a treasure chest of information and from him I obtained a copy of Standing Orders Aldershot Command 1910. Mr. C. R. McCash, F.R.C.S. advised me of Gillies early work on plastic surgery in The Cambridge and drew my attention to sources of information on this subject. Lieutenant-Colonel J. A. R. Worthy, R.A.M.C. gave me the original laboratory report signed by 'Major' Leishman. Corporal A. R. Colman, R.A.D.C., the R.A.D.C. Unit Photographer, took the majority of the photographs shown in the history. The Royal College of Surgeons kindly permitted me to use the photograph of Professor Tonk's sketch of Gillies at work and Mr. C. H. Redman, of the photographic department of the college, gave me the actual photograph. Mr. Brown of the library of the House of Commons was helpful with advice concerning maps related to the original plans of the hospital, and finally I am grateful to the many people who helped me in innumerable small ways without which a work like this is never completed.

THE CAMBRIDGE MILITARY HOSPITAL, ALDERSHOT

It is perhaps a matter of surprise and maybe regret that one walks a path many times and often does not pause to reflect on the history of one's surroundings. A pity.

Having worked in The Cambridge Military Hospital for four years, I felt perhaps I should at least not add to my many omissions in this respect in the past and with this in mind my thoughts turned to the writing of this History.

It was with some surprise I learnt it had not been written previously and it is particularly apt now as the centenary of its building approaches, and further, in June 1973 the Freedom of the Borough of Aldershot was granted to the Army Medical Services—this being in no small measure due to the services rendered by the hospital to the civic population.

The following is a copy of a report of a Board of Medical Officers ordered to assemble by the Director-General of the Army Medical Department in 1856, to report upon the plans of a Proposed Hospital for Aldershot was presented to the House of Commons on 11 May 1858:—

Proceedings of a Board of Medical Officers held by Order of the Director-General, Army Medical Department, to examine and report on Block Plans for a Building to constitute a series of Regimental Hospitals, proposed to be erected at Aldershot, for the Accommodation of the Sick of the Force to be quartered in the permanent Barracks of the Station.

President: Inspector-General of Hospitals, Sir John Hall, K.C.B.

Members: Deputy Inspector-General, Dr. Dumbreck, C.B. Deputy Inspector-General, Dr. Forrest, C.B. Staff Surgeon, 1st Class, H. Pilleau, Esq. Staff Surgeon, 1st Class, J. MacGrigor, Esq. Surgeon Mapleton, M.D., 15th Hussars. Staff Surgeon of the 2nd Class, Dr. Reid.

The Board having met on the 17th instant, proceeded to examine most carefully the plans submitted for consideration by Mr. Stent, the architect of the projected work, who, as well as Dr. Mapleton, specially employed in regard to the subject, afforded all the requisite verbal information in elucidation of the drawings.

The Board approved unanimously of the general principle proposed to be adopted in the construction of the future building, which, consisting of a series of detached structures (each a separate hospital, connected by an open corridor running along the ground storey), will effectually prevent anything like an undue accumulation of the miasms unavoidably generated, more or less, in all hospitals; but more particularly when large numbers of sick are congregated under the same roof.

The Board, then, after having minutely examined the details of appropriation of the individual hospitals, and the accommodation to be provided for the general service of the future establishment, proposed various modifications of these plans, which it is hoped will be considered improvements, tending to render the contemplated establishment in every way suitable and appropriate for its destined purpose.

Mr. Stent, the architect, having in accordance with the suggestions referred to, prepared fresh plans embodying the modifications proposed, the supplementary drawings were taken into consideration by the Board on the 20th instant, and, after a painstaking and careful examination, they were finally approved of.

The Board therefore begs to recommend—

1st. That the accompanying block plan, marked No. 1, may be favourably considered and adopted, as that possessing all the features of hospital accommodation of most material import to the health, comfort, and convenience of the sick.

It having, however, been accidentally ascertained that the apothecaries' stores have been inadvertently placed on the basement storey, in the above plan, it is considered not inappropriate here to recommend that all apothecaries' stores, of whatever description, whether medicines, materials or instruments, should be kept in rooms above the basement floor, which latter part of the building must be considered as quite unsuitable for the reception of such articles.

2nd. That the plan marked No. 2 may be that adopted for the residence of the principal medical officer of the above station.

As supplemental to the above approval of the distribution and general arrangements of the future Hospital, there are certain subjects in connection therewith on which the Board desires to place on record its views and opinions.

Among these, that which most prominently deserves attention is

Ventilation

The proposition of the architect, with modifications and additions for securing this, seems well calculated to effect the object; the Board accordingly recommends its adoption.

The method is as follows: it is proposed that the bricks of the arched roof of the wards shall be perforated, and in connexion with flues, through which outlets the heated or ventilated air of the wards shall escape; and the introduction of the external air is provided for by a series of perforated plates of zinc running round the base of the skirting board; and that, moreover, a series of them should likewise run up the centre of the floor, for the admission of fresh air into that part of the chamber; and in order to prevent the apertures in these horizontal plates being obstructed by dust, as well as to guard against fluid, during the washing of the ward, finding its way into the air passage in connexion with the plates, it was suggested that they should be raised, say two inches, above the level of the floor. The Board, while deferentially offering these opinions as to the manner of ventilating, trusts that all the appliances which modern science has brought forward in aid of the most important process in question may be introduced into the building under consideration.

Plastering the walls

It having been stated to the Board that the interior walls of the wards are to be faced with brick, with a mere coating of whitewash, it is earnestly hoped that this plan may not be adhered to, nothing more unseemly or more cellar-like than would be presented by such an imperfect finish to the wards being approved of; no comforts in the rooms, and no arrangements, could ever compensate for the chilling feature of an uncovered surface of brick wall for the sick man's eye to rest on.

It is proposed at Netley to give due finish to the wards by plastering, or covering with a plaster-like substance, or cement, these interior walls, and the Board cannot too strongly urge that the like process may be extended to the wards of the Hospital at Aldershot.

Airing grounds

It is strongly recommended that the piece of ground interposed between each hospital should be laid out in the centre with grass, or as a flower-plot, and that its

walks should be covered with the description of brick, tile, or stone composition usually employed for this purpose, as suggested by Mr. Stent.

Interior fittings and utensils

With respect to these, and the furniture generally, it is strongly recommended that the prospective arrangements made in these respects with regard to the great General Hospital Establishment, now in process of erection at Netley, shall be extended to that about to be built at Aldershot.

Washing establishment

The Board considers it is very desirable that this, as well as the foul-linen store, should be quite apart and detached from the Hospital block; and it is suggested that, in any building assigned for the object, barrack accommodation might be provided, if necessary, for men of the Medical Staff Corps.

Enceinte of hospital grounds

It is considered that this should consist of a low wall surmounted by an iron railing, of the description submitted by Mr. Stent, this is deemed much preferable to a cheerless-looking high dead wall, which, besides obstructing the passage of free currents of air around the Hospital, would prove quite as expensive as the lighter description of boundary proposed.

Dead house

The Board recommends that the details proposed for the construction of the dead-house and dissecting-room at Netley should be applied to that to be provided for the Hospital at Aldershot, and that the building should be detached from the main block, if possible, near the Washing Establishment, on the site indicated by Mr. Stent.

(Signed) H. HALL et al

The Hospital (Fig. 1) was built by Messrs Martin Wills & Co. of Aldershot, at a cost of £45,758 and it was opened for admission of patients on Friday, 18 July 1879. The hospital was named after H.R.H. The Duke of Cambridge (1819-1904) who was the only son of the seventh son of H.M. George III. He was made Field Marshal in 1862 and was Commander-in-Chief of the army from 1856-1895.

First some notes on the history of the town itself; Aldershot is first mentioned in the will of King Alfred A.D.845 in the description of the Crondall Lands bequeathed to his nephew Ethelm. The earliest registers of the parish church date from 1571, but history goes further back as is shown by the existence of earth works dating from earlier times on and around Bricksbury Hill (Caesar's Camp).

The origin of the name "Aldershot" has also some interest. In Anglo Saxon times cultivated land around communities was divided into acres, and one acre was a days ploughing and "shotts" were groups of 12 to 13 acres. Place names having a tree or plant as the first part of the word developed into meaning a piece of untitled land, parkland or woodland—hence the first hamlets of Aldershot of today were probably erected on an unploughed area of land near Alder trees. In 1725 the population was 135, in 1841 it was 685, today it is 33,111 (1971 census).

Fig. 1. A picture of a plaque of the hospital probably when it was opened. This plaque now hangs in the office of the Commanding Officer, and was presented to the hospital by Mrs. E. G. Cherry whose uncle, Thomas Alexander, was employed in the building of the hospital.

The first military association with the Aldershot area was in the nature of Army manoeuvres which took place in the district, and being the first of their kind were to set the pattern for future military training. One of these in 1792 based on Bagshot was particularly successful, as was also the establishment of the training camp at "Chobham" in 1852 and this undoubtedly led to the selection of Aldershot as a military centre. Prince Albert, remembered in Aldershot in the Prince Consort's Library was instrumental in this decision. The British Army owes a great deal to that much underestimated man of English History. In 1852 there was a military reconnaissance, in 1853 it was decided to establish "The Camp" and 25,000 acres were sold to the War Department by Samuel Eggar a land owner, and in 1854 the first loads of building material arrived for construction of the camp. Samuel Eggar's name is remembered by Eggar's Hill in Aldershot today.

This small village off the main London to Winchester Turnpike Road, one time the haunt of the famous (or infamous) Dick Turpin and "Spring Heel Jack", was to become the greatest military centre of the greatest Army the world has known, which in turn served the greatest Empire of history.

Some notes on the early military hospitals in the United Kingdom might here be relevant. Prior to the Crimean War small regimental hospitals existed in established garrisons. The Royal Victoria Hospital at Netley (on the east side of Southampton Water) set the pattern for later military hospitals. The foundation stone of the Netley hospital was laid by Queen Victoria in 1856, and a pier was built so that hospital ships from overseas could transfer patients direct into hospital. The Army Medical School

established at Fort Pitt (part of the early Chatham defences) in 1860 in what was then the Chatham Garrison Military Hospital moved to Netley in 1863. The Headquarters and Depot of the Army Hospital Corps (originally at Chatham) also moved to Netley about the same time, but in 1875 the latter moved to Aldershot. In 1866 the second large General Military Hospital (The Herbert Hospital) was opened at Woolwich by Queen Victoria.

In 1873 all regimental hospitals with the exception of the Foot Guards and Household Cavalry (in Rochester Row, Westminster) were abolished and replaced by Garrison Establishments. At the same time all medical officers ceased to be regimental officers (with the exception of the Household Cavalry) and came under the Army Medical Department. This led to the building of the third large military hospital, The Cambridge. Aldershot was of course a natural choice at this time for a hospital of this size, for by this time the "Camp at Aldershot", established in 1854, and become a permanency as the primary garrison and training centre for the Army in the United Kingdom. Permanent barracks had been erected (1856-1859) for a Brigade of Cavalry, two Brigades of Infantry, and two Brigades of Artillery, together with permanent buildings for supporting services. As the years passed military Aldershot increased in importance and with the establishment of the Aldershot Command in 1904, it enjoyed a military status as "The" training centre, a position it held until 1939.

The following are extracts from a description of the Hospital in the eighteenthies by one William Sheldrake, who served as a Colour Sergeant in the Coldstream Guards in the Crimea, set up a business in the town as a printer and stationer, and published Aldershot's first Newspaper "Sheldrake's Aldershot and Sandhurst Military Gazette":—

"The Cambridge Hospital stands without rival in extent and architectural effect, and forms, from its lofty position, a very striking object to the traveller on the London and South Western Railway, with its many projecting wards in light and shade . . . the building is faced with white brick, the base adorned with diaper rustic work . . . from the centre block projects a bold bay window above which rises a massive tower 109 feet high, with conical roof pierced with round holes and surmounted by a clock turret. The clock dial is nearly 8 feet in diameter and illuminated by gas at night".

"At each end of this block is a projecting wing, the upper storey having four pilasters supporting a heavy cornice and pediment. Right and left is a corridor, its front divided by a series of dwarf palisters carrying arches, the panels being pierced with large windows. Two wards project from this front with octagonal ends, the whole being furnished at the top with a cornice and blocked course on which are fixed ornamental iron railings forming a fine promenade".

"There are two entrances to the executive or centre block of three storeys approached by broad flights of steps, the basement being arranged for bedding, pack equipment and other stores, with engine and boiler room and an N.C.O's quarters. In the rear are the kitchens and offices, stores and a wine and coal cellar".

"All the patient's meals are raised to the floor above by a lift and conveyed thence to the various wards". "Here" it was recorded "the strictest order, cleanliness and punctuality are observed in all details of the cuisine".

"On the ground floor are the medical officers' room in the centre, and the rooms allotted to the Principal Medical Officer, the Secretary and "The Captain of Orderlies". In the wings, right and left are the dispensary and rooms for the Principal Medical Officers' clerks; the surgeon on duty, the medical officer in charge, the wardmasters room and a waiting room".

"On the first floor is accommodation for 32 orderlies (16 in each wing), quarters for the steward, wardmaster and "compounder", with lavatories etc. in the rear".

"On the ground floor communication is obtained by covered ways with the principal corridor 528 feet long and 11 feet wide—terminating at each end with an entrance porch."

"From the corridor branch 6 large wards (the 7th or middle one having been devoted to a library and dining room for officers). Each ward is 92 feet long by 24 feet wide and 14 feet high, with "scullery" adjoining".

"Ventilation is obtained by extracting shafts in the ceiling for foul air, terminating in cowls on the roof, fresh air is introduced by louvred ventilators in the side walls. The temperature of each ward is carefully regulated by two large stoves. Abundance of light is supplied by six large windows at each side and one at the end—the aspect being such, as is at once bright and cheerful. The rear windows look out onto the terraced slope and the hill "tastefully arranged with flower beds and plantations"—"where patients can take sheltered exercise".

"At the end of the wards are two annexes fitted with baths, lavatories, W.Cs etc., of the latest improved designs, hot and cold water laid on and warmed by coils of hot water pipes which run the whole length of the corridor. Four of the wards have a storey above fitted in the same manner and reached by a flight of stone steps".

"There is an operating room at the west wing of the corridor, the opposite wing being appropriated to officers' wards and there are also ophthalmic and prisoners' wards in the front. A mortuary and dissecting room are in a small building adjoining the hospital and "a nearby cottage provides accommodation for the engineer in charge of the machinery".

This then was The Cambridge Military Hospital as it was one hundred years ago, and indeed it is not difficult to recognise the present building from that description as shown by a photograph of the hospital in 1973 (Fig. 2).

The actual day and date of the opening of the hospital can be established from "Sheldrake's Military Gazette" of 26 July 1879, which gives a brief description of the hospital, saying it was built for the accommodation of 254 soldiers and 4 officers, and states "The New Military Hospital" was opened for the admission of patients on Friday, 18th July, and goes on to say "one of the first officers to be admitted as a patient was Major F. T. Townsend, 2nd Life Guards who fractured one of his legs at the Field Day on Tuesday. We are pleased to announce that the Major is doing well and will be removed this day (Saturday) to London".

On the same day as the above report, there was also a report of the "Divisional Field Day Conducted by General Sir Thomas Steele" which was witnessed by Field Marshal, The Commander-in-Chief, H.R.H. The Duke of Cambridge and the Grand Duke of Baden. The Field Day was held in the Ash-Fox Hills-Pirbright Area during which, so it is reported:—

Fig. 2. A picture of the hospital about 1973.

“Major Townsend, 2nd Life Guards, whilst riding at the head of his troops during the field operations met with a severe accident by which he broke one of his legs through his horse falling. He was at once attended by a medical officer on the ground who ordered his removal to the new permanent hospital at the South Camp”.

An extract from “Sheldrake’s Military Gazette” of 30 August 1879 reads:—

“The Secretary of State for War has approved the new hospital in the South Camp being named “The Cambridge Hospital”.

Prior to the opening of The Cambridge in 1879, the Division at Aldershot or military formations stationed there consisted of Cavalry, Artillery, Engineers, Infantry, Commissariat and Transport Corps, Military Provost and Army Hospital Corps. The Establishment totalled:—

62 Field Officers (17 Commanding).	11,416 N.C.O's and Privates.*
549 Other Officers.	1,093 Married Soldiers (* Not
209 Warrant Officers and Staff	included in total).
Sergeants.	4,849 Horses
436 Sergeants.	

For medical purposes the division was divided into three Station Hospitals. The first station hospital was a wooden hatted hospital located in ‘V’ and ‘Z’ lines near the wooden Garrison Church which today faces The Cambridge and Louise Margaret Maternity Hospitals. The site of them is shown on the map at Figure 3, as well as lunatic and infectious diseases wards the first station hospital included a hospital which catered for the treatment of soldier’s wives and children (in huts in Z lines and provided accommodation for 33 patients). A Sister of Mercy acted as matron in the latter and a committee of officers administered a charitable fund for providing extra articles as comforts. At a later date this part of the hospital was replaced by the Louise Margaret

Fig. 3. An extract from a map found in Standing Orders Aldershot Command 1910 which shows the location of The Cambridge, The Louise Margaret and the Isolation Hospital.

Hospital named after H.R.H. The Duchess of Connaught who laid the foundation stone on the 1st March 1897. The Duke of Connaught was Commander of Aldershot District at the time. An extension was added and opened by H.M. Queen Mary, and named after her, in 1926. When the infectious diseases and lunatic wards were demolished an isolation hospital was established and this probably became the Thorn Hill Isolation Hospital of a later time. The demolition probably took place about 1894 and the lines of wooden huts were replaced by the McGrigor Barracks shown at Figure 3 which were built as accommodation for the staff of the New Hospital. They were named after the Director-General of Army Medical Services who served in that post from 1815 to 1851. These barracks became the station for No. 1 Company R.A.M.C.

The second station or Union Hospital took its name from being the old Union Poor House and was later a school for pauper children. Originally, about the year 1680, it was a private residence, and was the only brick building on the heathland on which South Camp was built in 1854-1855 (Fig. 4).

The school was closed and moved to Crondall when the land was purchased by the War Department (to establish the permanent camp at Aldershot), but being the only brick building available it became Aldershot's first military hospital. The building is now occupied by a hairdresser and is situated on the west side of Hospital Hill and is the reason for the naming of that hill, whereas Gun Hill which does lead to the hospital today takes its name from the position of the Time Gun which stood on a site at the top of that hill. Today that site is by the entrance to the Q.A.R.A.N.C. Officers Mess, which is called Gun Hill Mess. The Gun was fired at midday as a time signal and at 21-30 hours as a signal to troops to return to quarters.

X The original Union Hospital i.e. The School which was Union Poop House. Originally a Private Residence (Circa 1680).

Fig. 4. An extract from a map about 1870 to 1880 showing the location of the second station hospital on the west side of Hospital Hill. The reason for naming the huts on the east side of Hospital Hill the third station hospital is not understood. It may have been a temporary change in nomenclature relating to the closing of the actual third station hospital in North Camp and the building of the Connaught Hospital.

The Union Hospital was behind Centre Infantry Barracks (later named Salamanca Barracks and demolished in the early nineteen sixties). An extension of this hospital was on the opposite side of the road where there were five huts behind the East Infantry Barracks (later Talavera Barracks—also demolished in the early nineteen sixties). Each hut had two wards capable of accommodating sixteen patients. The wards were described as “spacious, airy, well ventilated and lighted with gas and fitted with baths, W.C’s and lavatories complete”. Near the huts were the office of the Principal Medical Officer and quarters for the Apothecary, Steward and six hospital sergeants.

The third station hospital was called the United Hospital and was located in ‘P’ and ‘Q’ lines in North Camp. This was subsequently replaced by the building of the Connaught Hospital.

These hospitals had existed since 1855-1856 and provided accommodation for about 800 patients.

The second station (Union) hospital was closed shortly after the opening of The Cambridge and patients were transferred to the ‘new’ hospital. Those patients who could do so, walked from the Union Hospital, and those who could not walk were taken by horse ambulance.

A copy of the Medical Section of The Standing Orders, Aldershot Command 1910 is given below. It makes interesting reading and gives some indication of the work done by the hospitals. Paragraph 148 suggests that the incidence of Venereal Disease was high at the time:—

Medical

147. The sick and men for medical inspection for any purpose will first be seen at inspection rooms as under (Table I), and those requiring admission sent to hospital:—

Table I
Hospitals relative to corps and inspection rooms

Hospital	Corps	Inspection room
Connaught	R.F.A., Battalion occupying Tournay Barracks, and Details M.L. 1st Infantry Brigade. Troops of Deepcut and Blackdown.	Lille Barracks, M.L. Blenheim Barracks. Detention Hospital, Deepcut.
Cambridge	5th Infantry Brigade. 6th Infantry Brigade and A.V.C. 1st Cavalry Brigade. R.H.A. and R.F.A., W.L. R.E., A.S.C., R.A.M.C., A.O.C., M.M. and M.F. Police, Fire Brigade, Stanhope Lines. Command Staff. Troops at Ewshott. Troops at Bordon. Troops at Longmoor.	“ I ” Block Corunna Barracks. Talavera Barracks. No. 17 Room West Cavalry Barracks. No. 7 Room R.H.A. Barracks. Wooden Hut (old R.E. Office), Transport Road. Nearest of above. Detention Hospital, Ewshott. Reception Hospital, Bordon. Reception Hospital, Longmoor.
Military Hospital, Woking.	Troops at Woking	Military Hospital.

N.B. All cases of Venereal Disease for admission at Aldershot are sent to the Connaught Hospital.

148. The admission (venereal) to the Connaught Hospital from the Cavalry Barracks and Stanhope Lines will be carried out daily by ambulance, which will call at Inspection Rooms, in the following order:—

Cavalry Inspection room 9-00 a.m. 6th Infantry Brigade Inspection Room 9-10 a.m. Royal Horse and Field Artillery Inspection 9-20 a.m. 5th Infantry Brigade Inspection Room 9-30 a.m. R.E., A.S.C. and R.A.M.C. Inspection Room 9-40 a.m. arriving at the Connaught Hospital at 10 a.m.

149. The sick of Special Reserve and Territorial Units will, if there is no medical officer with the unit, be seen by a medical officer detailed for the duty. They will be treated at the nearest military hospital.

150. Orderly medical officers are on duty day and night at the Cambridge and Connaught Hospitals. They will attend urgent cases when the medical officer in charge of the brigade or corps cannot be found.

151. Medicine for officers, women and children will be dispensed between 2 and 4.45 p.m., unless the prescriptions are marked urgent, in which case they will be at once attended to. Children under ten years old should not be sent to fetch medicine from the dispensaries.

152. Officers may visit their men in hospital at any time between 2 and 5 p.m. Patients will, as far as possible, be arranged in the wards by corps.

153. Soldiers remanded for trial or under sentence of court martial, or admitted from the detention barracks or military prison, will be treated in hospital in the detention ward, and their names are to be inserted under the head "Court Martial" in Army Form B 256. Other soldiers in detention awaiting disposal will be treated in hospital in the ordinary ward, except in those cases in which the Commanding Officer especially desires they should be kept in the detention ward when the medical officer is to be informed in writing.

154. Accidents so serious as to appear likely to prove speedily fatal are to be at once reported by the medical officers in charge of hospitals to commanding officers, who will communicate with the police without delay.

155. The names of medical officers in charge of brigades and corps will be published in brigade and corps orders. They will see the sick and accused soldiers at the brigade inspection rooms, visit guard detention rooms, attend parades when required, and perform all sanitary duties of the brigade.

156. Serious accidents and cases of sickness too serious to be sent to inspection rooms will be sent to the nearest hospital.

157. Officers in charge of hospitals will daily, after the morning sick have been seen by them, telephone to the officer in charge Supply Depot not later than 11 a.m., the number of rations required for "admitted" and "detained" men. These rations will be dispatched from the Supply Depot so as to reach the hospital not later than 12 noon.

The officers in charge of hospitals will keep a record of rations so received, and account for them by passing Army Form P 1950 to the accountant of the unit concerned if stationed in this command, or, in the case of men belonging to units stationed elsewhere, to the accountant of the unit in this command to which they were attached for rations, etc., when sent to hospital.

158. The monthly assessment of all personal charges against corps for losses and damages to hospital equipment and stores will be rendered by medical officers in charge of hospitals on the 25th, and will include all charges on Army Book 51 up to and inclusive of the 24th of each month.

Medical attendance and inspections

159. Medical officers are appointed to the charge of officers and their families and soldiers' families in Marlborough, Stanhope and Wellington Lines respectively. The names and addresses of these officers are published in Command Orders and the Official Directory.

The Inspection rooms are as follows:—

Marlborough Lines—101, West Square, Malplaquet Barracks.

Stanhope Lines—No. 2 Room, I block, Maida Barracks.

Wellington Lines—Inspection Room, Talavera Barracks.

160. Officers who require medical attendance for themselves or for their families will, except in urgent cases, apply in writing to the medical officer in charge at the inspection room before 11-00 a.m. In urgent cases a note should be sent to the medical officer at his quarters, with directions to the messenger to proceed to the orderly officer of the hospital to which the corps is attached, should the medical officer be absent. The orderly officer will be responsible for attendance till he hands the patient over to the medical officer in charge.

161. When an officer is placed on the sick list or removed from it, intimation will be sent immediately by the medical officer in charge, to the officer commanding the corps.

162. The names of women and children requiring medical attendance will be entered on a sick report and sent to the medical inspection room by 9 a.m. daily. The names of those unable to attend will be sent at the same time, but with the words "unable to attend" and the address (stating the barracks and number of the room) written on the sick reports in order that they may be visited at their own quarters. In all cases of emergency a medical officer will attend without the sick report being furnished, but it must be subsequently forwarded.

163. The Louise Margaret Hospital, situated at the east end of the Cambridge Hospital, is maintained primarily for the treatment of the families on the married establishment.

Authority for the admission of the families of men married off the strength, of male children over ten years of age and officers' female servants must be obtained from the P.M.O.

164. Soldiers are forbidden to employ civil practitioners to attend on themselves, but can do so for their families. The attention of all ranks is invited to para. 1099, King's Regulations.

165. Regiments, detachments, recruits joining the command, and men returning from furlough or from absence from Aldershot exceeding seven days, will be inspected by the medical officer of the brigade or corps, if possible, on the day of arrival.

166. Telephonic communication is established between Ash Ranges and the Connaught Hospital and between Caesar's Camp and the Cambridge Hospital. The constant attendance of the medical officer at the ranges is not therefore necessary. The orderly medical officer at the above hospitals will attend cases arising from accidents at musketry.

Infectious disease

167. No case of notifiable infectious disease or case of measles amongst the troops will be treated in quarters if it can be accommodated in the Isolation Hospital.

168. All cases of infectious disease will be at once reported by medical officers in charge to the P.M.O., the brigade commander, and to the officer commanding the corps, in order that the required precautions may be immediately carried out. Reports are to specify the barrack room or quarter in which the disease has occurred. Cases of infectious disease in quarters occupied by more than one corps will be reported to all commanding officers concerned.

169. In the cases referred to in paras. 165-6 the precautions laid down in Regulations Army Medical Services, paras. 149 to 165, will be carried out.

170. Infected and purified articles of bedding, clothing etc., will be received and issued at the disinfecting chamber, Isolation Hospital, from 11 a.m. to noon and from 3 to 4 p.m. daily except on Saturdays and Sundays, when it will be open from 11 a.m. till noon only.

171. Cabs must not be used for the Conveyance of infectious cases to hospital. An ambulance wagon will be furnished on requisition to the medical officer in charge, Cambridge Hospital; the application should state the nature of the disease. A red cart, which must be horsed regimentally, has been provided to carry infected linen from quarters to the disinfector, and a white cart for its return. They can be obtained on application at the Cambridge Hospital.

172. As a matter of courtesy "notifiable" diseases will be made known to the medical officers of health of Aldershot and Farnborough respectively. Cases admitted to the Isolation Hospital will be thus notified by the medical officer in charge, others by the medical officer who attends the case.

173. The unvaccinated wife or family of a soldier is not to be allowed to live in barracks. End of Orders.

"The Cambridge" is steeped in history, its birth was indirectly due to the influence of Florence Nightingale who after her experience in the Crimean War (1854-1855) set about reforming the medical services of the Army through the influence she brought to bear on the Secretary of State for War, Lord Herbert. "That demure exterior concealed the character of an inflexible and ruthless reformer".

The hospital has a further link with the Crimea, reference has been made to the clock tower of the hospital, This once housed a large bell and two smaller bells, but they are no longer there as I learnt when at risk to life and limb I climbed into the tower one day. I have been unable to trace the small bells, but the large bell stands outside Headquarters Aldershot (now South East District) facing Queen's Avenue and on the corner of Steele's Road. Figure 5 shows a picture of the bell as it is today.

The large bell has a twin and they are known as the Sevastopol Bells. They were brought home along with other captured Russian trophies from the Crimea in 1856. They came from the clock tower of the Church of the Twelve Apostles at Sevastopol and were cast by Nicholas Samtoun of Moscow. Each weighed 17cwt 1qr 21 lb and they were laid on show at the Royal Arsenal Woolwich in February 1856. One bell went to Windsor Castle and the other to Aldershot. The latter was erected on a wooden stand near the headquarters office huts, and the hours were rung on the bell (gong style) by a sentry.

The headquarters office huts stood between Gun Hill and Middle Hill of today (on the site of the present day Garrison Officers Mess). When the Cambridge was built the bell was erected on the clock tower. The smaller bells were put there during the construction of the hospital and they bore the inscription "cast by Gillet Bland & Co., clock makers to Her Majesty, Croydon 1878 London". The large bell rang the hours and the smaller bells rang the quarters until 1914 when a senior officer decided they should be silenced as they disturbed the patients. The large bell was removed in 1961 on the instructions of the then G.O.C. Major-General R. A. Bramwell-Davis, who unveiled it at its present site in March 1961.

Fig. 5. The Sevastopol Bell at its present site outside South East District, Aldershot.

On the 15th May 1895 the hospital was inspected by The Empress Frederick of Prussia whilst she was on a visit to Aldershot.

The "Visitors Book" which resides in a locked cupboard in the office of the Commanding Officer bears many famous signatures including those of many members, past and present, of the Royal Family. Amongst the first signatures in The Book are those of "George RI" and "Mary R" and "Edward P". The first two signatures together with a picture of George V and Queen Mary leaving the hospital after visiting a Mr. Wilson who was injured in 'an aeroplane mishap the other day' are shown in Figure 6. The visit took place in May 1914. The most recent royal signature is that of the present Queen, made when she visited the hospital in 1963.

There is also a link with the South African War and in 1905, on the 24th May the Royal Army Medical Corps War Memorial to the fallen in the South African War (1899-1902) was unveiled by H.M. King Edward VII. The memorial stands at the top of Gun Hill on the opposite side of the road to the old site of the Time Gun.

The Cambridge was probably the first base hospital in the history of the Army to receive battle casualties direct from the battle front. The Battle of Mons took place on August 20th 1914. An extract from the Aldershot News of Friday, 4th September 1914 states "The first batches of wounded men arrived at the Cambridge and Connaught Hospitals from Southampton on Sunday. Most of those sent on to Aldershot met with their injuries during the battle of Mons—they were moved to their respective hospitals

Fig. 6. The King and Queen motored to the Cambridge Hospital where they had a talk with Mr. Wilson, who was injured in an aeroplane mishap the other day, but was able to stand up and talk. The King and Queen are shown leaving the hospital after the visit. Below is a photograph of their signatures in the Visitors Book.

with the utmost care and solicitude. All tell a terrible story of the desperate character of the fighting at Mons ”.

Perhaps even more exciting is the fact that The Cambridge was virtually the birth place of Plastic Surgery in the British Empire. Captain Gillies (later Sir Harold) on leave in Paris in June 1915 met Morestin who was doing wonderful work in reconstruction of faces in the Val-de-Grace Hospital in Paris. In his own words Gillies “ stood spellbound as Morestin removed half a face distorted with cancer ”. He fell in love with the work on the spot. At the end of 1915 he was sent back from France to start a Plastic Unit in The Cambridge Hospital at Aldershot. His suggestions to the War Office that all wounded face and jaw patients should be labelled for Aldershot was received without enthusiasm. Nevertheless, he bought £10 worth of labels in a local bookshop and sent them to the War Office for labelling of face and jaw patients for Aldershot. He had little hope of ever seeing them again. However, following the Battle of the Somme, facial wounds arrived in Britain “ not only with my labels but with official ones issued by the War Office, neatly made out for me ”. They prepared for 200 patients but 2,000 arrived at Southampton. The Unit was established under Sir W. Arthbutnot Lane and “ Captain Gillies ”. The dental side of the work was done by Kelsey Fry (later Sir William) and the artist was

Professor Tonks (Professor of the Slade Art School). Tonks was at this time retired and when Gillies found him he was working as a secretary in an adjutant's office having volunteered to do "his bit". Figure 7 is a sketch by Professor Tonks showing the team

(Photograph by Medical Illustration Unit, Royal College of Surgeons of England)

Fig. 7. Gillies at work in The Cambridge. Sketch by Henry Tonks, F.R.C.S.

at work in The Cambridge. Strangely the wheel has now taken a full turn in the immediate future a new plastic surgery and burns unit is to be opened in The Cambridge.

The hospital has not changed greatly since it was built and as noted earlier it is easily recognisable from the description of nearly one hundred years ago. The original long central corridor is famous and whereas there was once an entrance at each end, the Leishman Laboratory is now situated at the east end. The Laboratory was opened by Lady Leishman in 1932 and Major A. Hood was the first Commanding Officer. Leishman himself worked in the laboratory which served The Cambridge and Figure 8 is a photograph of a report signed by the great man. The criticism on the report is familiar enough to clinicians of today.

During the Second World War The Cambridge was greatly expanded since Aldershot was a large military centre. Many men bearing names now well known in medicine walked the long corridor feeling perhaps on occasion a little uncomfortable in their new uniform. The hospital still retains its links with the past one of which, perhaps

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or surgical emergency; the hospital is also the official Road Accident Centre for North East Hampshire. The unit was much admired by a leading London Consultant when he visited it in January 1973.

During recent years civilians have been admitted to the hospital. They are accepted on a bed availability basis, priority being given to those with military connections and the esteem in which the hospital is held can be judged from the number of people who try to gain admission. One such lady advancing her claim, when asked what her military connections were announced that her grandfather was killed in the Boer War. It is well known throughout the district and should you feel unwell in the streets of Aldershot and ask to be taken to "the hospital" it is to The Cambridge you will go. Indeed a civil engineer on a business visit to the district felt unwell with his first coronary, he called a taxi and asked to go to "the hospital", on hearing he was going to a military hospital he protested, but was told by the driver not to worry he was going to the best hospital in the South of England. When he left hospital some four weeks later, in saying goodbye he remarked "you know I think that taxi driver was right".

A list of Commanding Officers of the hospital since it was opened is given below:—

(1879) Surgeon Major W. J. Wilson. (1880) Brigade Major W. H. Muschamp. (1882) Surgeon Lieutenant-Colonel W. Johnston. (1884) Brigade Surgeon E. C. Markey. (1885) Brigade Surgeon S. Fuller. (1886) Brigade Surgeon E. G. McDowell, C.B. (1887) Brigade Surgeon H. S. Muir. (1888) Brigade Surgeon A. S. K. Prescott. (1889) Brigade Surgeon C. A. M. Maunsell. (1891) Brigade Surgeon Lieutenant-Colonel W. Keir. (1893) Brigade Surgeon Lieutenant-Colonel H. W. A. MacKinnon, D.S.O. (1895) Brigade Surgeon Lieutenant-Colonel M. Knox. (1897) Lieutenant-Colonel J. Martin. (1902) Lieutenant-Colonel H. W. Hubbard. (1908) Lieutenant-Colonel H. N. Thompson, D.S.O. (1909) Major-General Sir F. H. Treherne, K.C.M.G. (1912) Brevet Colonel S. Hickson, K.H.S. (1914) Colonel M. P. Holt, D.S.O. (1914) Lieutenant-Colonel H. Simpson, O.B.E. (1915) Lieutenant-Colonel G. Wilson. (1917) Lieutenant-Colonel J. G. McNaught. (1918) Brevet Colonel F. Smith. (1919) Lieutenant-Colonel H. C. R. Hime, D.S.O. (1922) Lieutenant-Colonel J. J. W. Prescott, D.S.O., O.B.E. (1926) Colonel S. F. Irvine, C.M.G., D.S.O. (1927) Lieutenant-Colonel P. Davidson, C.M.G., D.S.O. (1929) Lieutenant-Colonel E. V. Aylen, D.S.O. (1930) Lieutenant-Colonel O. Ievers, D.S.O. (1931) Lieutenant-Colonel A. E. S. Irvine, D.S.O. (1934) Colonel T. C. C. Leslie, O.B.E. (1936) Colonel T. H. Scott, D.S.O., M.C. (1939) Colonel C. M. Drew, D.S.O. (1941) Colonel W. H. O'Riordan, M.C. (1945) Colonel C. D. M. Buckley, M.C. (1946) Colonel G. Moulson. (1947) Colonel J. A. Crawford. (1948) Colonel L. Handy. (1951) Colonel V. C. Verbi, O.B.E. (1953) Colonel A. N. B. Odbert, O.B.E. (1955) Colonel W. R. M. Drew, C.B.E. (1957) Colonel J. C. Reed, C.B.E. (1958) Colonel P. L. E. Wood, D.S.O., M.B.E. (1961) Colonel J. J. Sullivan, O.B.E. (1965) Colonel A. F. H. Keatinge, M.C. (1966) Colonel N. G. G. Talbot, O.B.E., T.D. (1967) Colonel J. Irvine, O.B.E. (1968) Colonel H. Pozner, M.C. (1969) Colonel I. A. Walsh (1917). Colonel R. P. Bradshaw (1973).

As it moves towards its centenary with its fate in the balance, to be rebuilt, replaced or just extended, The Cambridge has done a good job, it has contributed greatly to the prestige of the medical and nursing services, and it is hoped it will live on, but whatever its fate the name will not die, as the hospital has earned its place in the annals of the history of Her Majesty's Armed Forces.

*PRESENT
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Order of St. John of Jerusalem

Those recently appointed to, or promoted in, the Most Venerable Order of the Hospital of St. John of Jerusalem include:

As Officer (Brother)

Lieutenant-Colonel D. C. Weeks, M.B., Ch.B., M.F.C.M. Lieutenant-Colonel H. Q. Hutchings, M.B., Ch.B., F.R.C.S. Lieutenant-Colonel N. Peters, M.B., B.S., F.R.C.S. Lieutenant-Colonel J. Quinn, M.B., Ch.B., M.F.C.M., D.P.H., D.I.H., D.T.M.&H. Lieutenant-Colonel (N.M.) K. Wilson, M.B.E.

Colonel W. S. Y. Mackie, O.B.E., L.D.S., R.F.P.S., Late R.A.D.C. Lieutenant-Colonel F. E. Ashenhurst, B.D.S., R.A.D.C.

Colonel R. Price, T.D., M.B., Ch.B., (T.A.V.R.). Lieutenant-Colonel P. A. Henderson, T.D., M.B., B.S., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G. (T.A.V.R.).

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F.R.C.S.(Edin.)	MAJOR K. M. STEPHENS, M.B., B.S., R.A.M.C.
F.F.C.M.	COLONEL J. P. CROWDY, M.B., Ch.B., M.F.C.M., D.I.H., D.P.H., LATE R.A.M.C.
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