

ary to 17 medical officers, 7 dental officers, and 132 hospital corpsmen in June. The increase was more rapid after September, so that in December there were 40 medical and 14 dental officers, and 176 hospital corpsmen.

The observation ward consists of six units, with separate toilet and shower for each. This building has a capacity of 24 beds, and has been used from time to time for the segregation of communicable diseases until transfer to the hospital was practicable. The second observation building has been taken over by the clinics.

A clinic for the treatment of nose, throat, and allied conditions was established under the direction of Lieutenant J. A. MacIsaac, Medical Corps, United States Navy, where 2,450 cases have been treated, and 298 minor operations performed.

A clinic for the diagnosis and treatment of venereal, urologic, and dermatological conditions was developed under the supervision of Lieutenant O. S. Lowsley, Medical Corps, United States Navy. The acute venereal cases were transferred to the United States Naval Hospital, New York, until the arrival of cases from overseas reduced the hospital's facilities for handling these cases. It became evident that this class of patients must be treated on the station, so recently they have been transferred to the camp hospital under the supervision of the urologic clinic.

In recruiting at the receiving station 4,092 recruits were examined, of whom 2,156 were accepted and 1,936 were rejected. Twenty thousand seven hundred and forty-six men reporting for duty from civil life were examined, of which number 153 men were referred to the board of medical survey and recommended for immediate discharge. There were 17,406 antityphoid inoculations given. Of 15,564 cowpox vaccinations given 13,467 were positive. There were 16,854 identification tags and 4,170 sets of finger prints made.

The camp hospital was established in December, due to the fact that an unusually large draft was received from overseas and that the United States Naval Hospital, New York, was filled to capacity. This consists of six barracks in the isolation camp. Each barrack has two sick bays accommodating 20 men, with a galley and latrine for each section. This arrangement makes it very convenient to group similar classes of cases. The barracks have been equipped with cots and each man uses his own mattress and bedding. This organization is being maintained for the purpose, first, of handling any overload that may arise and secondly, to segregate venereal and parasitic skin cases.

Early in the year a sanitary division was instituted, with Lieutenant (Junior Grade) George R. Irving, Medical Corps, United States Naval Reserve Force, in charge. Under his able direction this department has been in a large way responsible for the excellent health generally maintained in this camp.

A board of medical survey composed of Lieutenants F. P. Field, G. G. Hart, and Lieutenant (Junior Grade) G. R. Irving, Medical Corps, United States Navy, has examined between 600 and 700 men and recommended that 249 be invalided from the service for disease and 12 for injuries. The larger proportion of these conditions existed prior to enlistment. Attention is invited to the fact that this board, so constituted as to be convened at any time, was able to dis-

charge 153 men found physically unfit on reporting for duty from civil life before outfits had been issued. This board also acts in an advisory capacity on reserve-force men whose physical condition is doubtful when examined for release from active service.

During December an unusually large draft, 5,000 men, arrived in the camp from overseas. They brought in a second but small epidemic of influenza. There were 303 cases admitted in four weeks. The pneumonia complicating these cases was fulminating and due, in a majority of instances, to infection with hemolytic streptococci. This draft also brought in a number of parasitic skin diseases: scabies, 120 cases; body lice, 9 cases, and the usual percentage of pubic lice. One building was immediately equipped for delousing in case any large number of infested men should be received.

Throughout the year the sanitary condition of the camp has been excellent. The personnel has been generally happy and contented, well clothed, well fed, and well housed. Athletics have been fostered, under careful supervision, not only affording the healthiest type of mental and bodily recreation, but also high-grade amusement for the men and their guests and bringing great credit to the service and the camp. Very rarely, and for but short spaces of time, has the question of overcrowding become serious. Only since the men have begun to return from overseas have the care of barracks and gear, the policing of grounds, and the elimination of body parasites required attention. Epidemics have been unknown, with the single exception of influenza, and preventable diseases, including the venereal group, have been kept at a minimum.

The sanitary division of the medical department was organized in April, 1918, with the assignment of one commissioned officer, Lieutenant G. R. Irving, Medical Corps, United States Naval Reserve Force, and of two hospital corpsmen, to be the nucleus of a working detail. This assignment included sanitary inspections of the camp, with additional duty to cover matters in the vicinity and incident to the construction of the new camp. Formerly, the inspections were part of the duty of the regimental medical officer, with report to the senior medical officer via the brigade surgeon. The reports of the regimental medical officers are not dispensed with, but are used to supplement the work of this office.

It has been the policy to take up directly with the responsible parties such matters as require regulation, straightening out the difficulties as inspections revealed the needs and as new developments presented. Often, in this way correction of conditions was secured before report could be made, and the turning in of a report became unnecessary. Recommendations have been made and action obtained on the major features, establishing permanent sanitary detail with equipment; screened-in garbage areas in connection with galleys; installation of bubbling drinking fountains in barracks; requirements for the airing of bedding and equipment; plans for the rearrangement of liberty and billeting to lessen overcrowding; an inspection system covering all phases of food handling; extension of sewers from main camp, brig, power house and boathouse; drains for isolation parade ground, service court and northeast corner of extension camp; extensive mosquito control work outside fences; frequent inspections of civilian camps near hospital; police supervision