

## The wounded in naval warfare

A retype of a May 1903 newspaper cutting of poor quality.

**Note – still no naval first aid training.**

At the Royal United Services Institute, Whitehall, on Tuesday Dr Philip Randall, [late R.N.] read a paper on “The disposal of the wounded in naval warfare.” Sir Henry Howse President of The Royal College of Surgeons was in the Chair, and there were present, among others, Admiral Lord Charles Scott, Admiral Sir. N. Bowden-Smith, Read Admiral H.J. May CB, and Lieutenant Colonel Holden [Secretary].

Dr Randall said that some attempts had recently been made to call attention to the subject of the disposal of the wounded in naval warfare, but there was an almost complete absence of all reference to it in the works of all the leading authorities on modern naval warfare. The importance of the subject could not be questioned from any point of view, and medical officers viewed with much foreboding and positive dismay the prospect of being called upon to deal with a large number of serious injuries. The conditions of naval warfare, he pointed out, had greatly changed since our navy was engaged in great wars. The sick-berth of the present day had gained light and air, but the situation selected for the sick-berth in all modern ships was absolutely untenable in actual warfare. With regards to the means which at present existed for the accommodation of the wounded, he said that a return to the cock-pit principle had been decided upon officially for some time past, but beyond the selection of a site nothing further has been done to make the place selected in any way fit for its important duties. The next point dealt with by the lecturer related to the state of things which would actually have to be dealt with during and after an action. It was necessary to determine as approximately as possible the number of wounded that would have to be dealt with as a result of an engagement. After giving figures of some of the battles of the last great wars, he said that the working average of seven per cent of the complement as the number of wounded to be expected in each ship in action, must be looked upon as the irreducible minimum. Dr Randall then spoke about the condition of the ship itself after an action, the accommodation provided by a naval hospital on land and the probable distances from such hospitals at which naval action might occur. The one conclusion which could be arrived at was that in the fighting line afloat, as in the case of that ashore, all treatment of the wounded beyond “first aid”, would be impracticable, and further that after treatment on board would, in justice to the wounded, be a practical impossibility. In conclusion, he said that the adoption of the principle of hospital-ships for the fleet would be quite practicable in nearly every respect, and would go far to meet the absolute needs and requirements. Every fleet of battleships should, therefore, have attached to it one or more ships entirely devoted to specifically fitted out for hospital duties. These fleet hospitals would cruise with the fleets, and after having first received all cases of the seriously wounded from the ships, would accompany them to the verge of safety when they went into action. Each hospital-ship must be provided with as many large and roomy boats as could possibly be carried. By means of these boats, endeavours could be made to maintain communications with the fighting line, seizing upon every opportunity that was offered to collect and transfer to the hospital-ships as many of the wounded as possible. This might, or might not be practicable, but the main use would be when the action was over. The hospital-ship, he thought should be specially built for the purpose and not adapted from existing mail steamers, and be in every respect in accordance the principles adopted in a shore hospital. [Hear hear].

In the discussion which followed, the Chairman said the subject was one of great importance not only to medical officers but also the crew on board ship. They remembered that during the war in South Africa odium was heaped on the medical officers owing to sufficient

precautions not having been taken, and they could imagine what an outbreak of public indignation would occur if in the case of a naval war such a conditions of things prevailed as would preclude them from furnishing proper treatment to the wounded.

He urged that sailors and marines should be trained to render "first aid" and thought that the suggestion of the hospital ship was a right one. He suggested that it would be an advantage to have a model hospital-ship constructed. [Hear, hear].

Votes of thanks to the Chairman and to Dr Randall closed the proceedings.