

acc

10000/120/6141

A/13 (5 BLU FILE) MEDICAL

Opened: Jan. 19, 1946. Closed: June 23, 1946  
From: Jan. 1946 - TO: July 1946

LE) MEDICAL

6857

6818

Jan. 19, 1946 - closed June 23, 1946  
Jan 1946 - TO July 1946

A/43

85

100

6

DIREZIONE

PROMEMORIA DI SERVIZIO PER IL SIG. CAPO UFFICIO PERSONALE  
DEL COMANDO MILITARE TERRITORIALE DI

U D I N E

In esito alla richiesta telefonica odierna comunico che  
il militare DONADONI Mario non figura né nella forza della  
Compagnia di Sanità né fra i ricoverati in ospedale.

Fra questi ultimi invece trovasi tale DONATONE Orlando  
di Amato, classe 1921, della 105 Comp. Serv. Genio di Udine, il  
quale é stato dimesso in data 24 corr. e fatto rientrare al  
Corpo con proposta di gg. 14 di licenza di convalescenza.

0078

Udine, 28 Gennaio 1946



Comandante Ufficio Personale  
Don. Donadoni  
*C. Amato*  
*File*

Subject: Medical Supplies

Land Forces Sub. Comm.  
A.C. (MIA)

ROME

M/4/68

19 Jan 46.

5 BLU

UDINE - ref this office letter M/4/31 of 9 Jan 46.

10 BLU

NAPLES - ref this office letter M/4/32 of 9 Jan 46.

Attached copy of Ministry of War letter ref 6/362/226/MT  
dated 15 Jan 46 is forwarded for information.

6887

/RSG

*A.A. Stephens*  
A.A. Stephens,  
Capt. R.A.M.C.  
for A.D.K.S.  
Land Forces Sub Comm. (MIA)

copy translation

MINISTRY OF WAR  
General Medical Directorate  
-----

Ref: 6/362/226/MR

15 January 1946.

To: Land Forces Sub Com. A.C. (MIA) - ref. W/4/36 of 10/1/46.

Subject: Deficiencies of Medicines at UDINE and TRIESTE.

Concerning the deficiencies reported in the letter to which we reply, we point out:

1. NAPLES  
report:  
(a)

Having examined the situation in that area on the 15.12.45, we

Alcohol stocks are as follows:

|                  |           |
|------------------|-----------|
| Alcohol denaturo | Kgs 1,569 |
| Alcohol refined  | " 1,044   |

(b) Diuretics - the most important diuretics (theobromine and diuretine) are lacking and this has been the case for the rest of Italy for a long time. On the other hand such products have never been available, not even from British sources. Therefore the shipment of a certain number of phials of 'marsalyli' (500) has been ordered from MACILLAN.

(c) Tonics - there is no scarcity either of cardiotonics (phials of caffeine, camphor etc.) or the main reconstituents (phials of arsenical compounds etc.).

(d) Expectorantes - 159,000 Dover powder tablets are available (103,000 of them at TRIESTE) and large amounts of terpine, potassium sulphaguiacol and sulphaguiacol carbonate. In any case a further shipment of cough and guiscol carb. tablets have been ordered as well as some polygala (roots and extract).

2. UDINE  
During October last a large supply of medicines was ordered for the UDINE area by the military Chemical-Pharmaceutical Institute at FLORENCE. The shipment also included large quantities of cotton wool etc. Said supply reached destination in time, as shown by the local return at the 15.12.45 in which are shown the following items:

|                                  |            |
|----------------------------------|------------|
| Gauze                            | Kgs 1,641  |
| Cotton Wool                      | " 1,107    |
| Muslin bandages of various sizes | No. 67,800 |

These quantities, bearing in mind consumption, ought to be sufficient for a long time.

we reply, we point out:

1. NAPLES  
report:

Having examined the situation in that area on the 15.12.45, we

(a) Alcohol stocks are as follows:

|                  |           |
|------------------|-----------|
| Alcohol denaturo | Kgs 1,569 |
| Alcohol refined  | " 1,014   |

(b) Diuretics - the most important diuretics (theobromine and diuretine) are lacking and this has been the case for the rest of Italy for a long time. On the other hand such products have never been available, not even from British sources. Therefore the shipment of a certain number of phials of 'marsalyli' (500) has been ordered from LUGLIANA.

(c) Tonics - there is no scarcity either of cardiatics (phials of caffeine, camphor etc.) or the main reconstituents (phials of arsenical compounds etc.).

(d) Expectorantes - 159,000 Dover powder tablets are available (103,000 of them at NAPLES) and large amounts of terpine, potassium sulphaguiacol and sulphaguiacol carbonates. In any case a further shipment of cough and guiacol carb. tablets have been ordered as well as some polygala (roots and extract).

2. UDINE During October last a large supply of medicines was ordered for the UDINE area by the Military Chemical-Pharmaceutical Institute at FLORENCE. The shipment also included large quantities of cotton wool etc. Said supply reached destination in time, as shown by the local return at the 15.12.45 in which are shown the following items:

|                                  |            |
|----------------------------------|------------|
| Gauze                            | Kgs 1,641  |
| Cotton Wool                      | " 1,107    |
| Muslin bandages of various sizes | No. 67,800 |

These quantities, bearing in mind consumption, ought to be sufficient for a long time.

(signed) p. IL MINISTRO  
S. Fadda

MBHF V LRUL NR 1737 QVR4 CA LROF 937D

FROM MMIA 211605A

TO MINISTRY OF WAR

INFO 13 CORPS 86 AREA 5 BLU

GR -- BT

SD 3129 (.) U/C (.) REF OUR SD/12/2 DATED

4 JAN (.) 86 STATE 291 EVAC HOSP WITHOUT INSTRS

FOR DISPOSAL PERSONNEL AND ITALIAN

EQUIPMENT PSE EXPEDITE

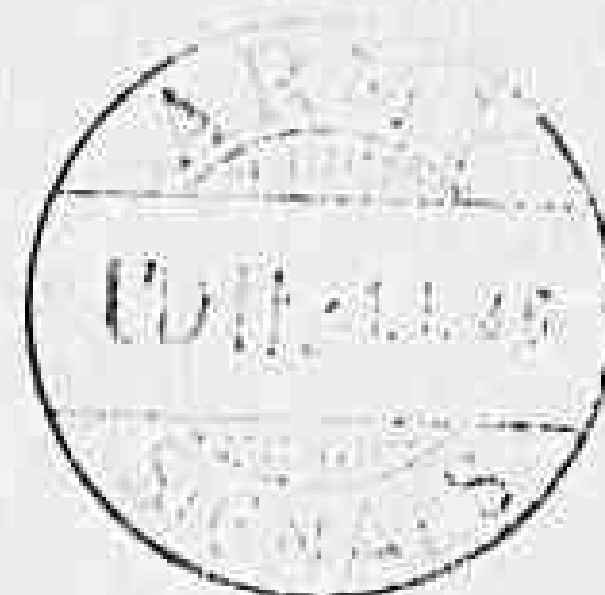
BT

REPTN 1737 QVR4 937 211605A 3// 13 86 5

SD 3129 SD/12/2 4

86 291

SENT NR 1737 GSV BB



*Handwritten:* SNA 22/1  
Ref 10

0083'

785020

S-11141 4050

SUBJECT 72 LAST

21 Dec 45

| Army No | Rank | Name | ASG | Unit | Nature of Casualty |
|---------|------|------|-----|------|--------------------|
|---------|------|------|-----|------|--------------------|

## 1. MEDICAL EXAMINATION - CLISS 'A' PENTWASY (COND)

The u/a of units indicated were medically examined on dates stated.

## A.O.A.E.

|         |       |                |      |           |
|---------|-------|----------------|------|-----------|
| 2550756 | W/Sgt | Elliot, S.G.   | (25) | 5 Dec 45  |
| 2070952 | W/Sgt | Ferny, R.C.    | (25) | 14 Dec 45 |
| 2111365 | Spr   | Froggatt, A.   | (25) | 14 Dec 45 |
| 3459440 | L/Cpl | Garner, C.A.   | (25) | 14 Dec 45 |
| 1899562 | A/WOL | Murray, P.     | (25) | 14 Dec 45 |
| 1866125 | Spr   | Nisbet, W.     | (25) | 14 Dec 45 |
| 6144948 | Spr   | Perryman, A.T. | (25) | 14 Dec 45 |
| 2935848 | W/Sgt | Shanks, T.     | (25) | 14 Dec 45 |
| 6024756 | Spr   | Smith, A.E.    | (25) | 14 Dec 45 |

## Y'(1) LIST

|          |       |                 |      |           |
|----------|-------|-----------------|------|-----------|
| 2126921  | W/Cpl | Eldridge, P.E.  | (25) | 5 Dec 45  |
| 2092795  | Spr   | Ford, F.V.      | (25) | 14 Dec 45 |
| 1916594  | A/Sgt | Garnach, G.D.   | (25) | 14 Dec 45 |
| 2160305  | L/Cpl | Garton, A.B.    | (25) | 20 Dec 45 |
| 2119012  | L/Cpl | Geoghegan, A.E. | (25) | 14 Dec 45 |
| 2076656  | W/Sgt | Oakley, J.E.    | (25) | 20 Dec 45 |
| 13033228 | Spr   | Parry, S.E.     | (25) | 20 Dec 45 |
| 13079602 | Dvr   | Pink, A.W.H.    | (25) | 17 Dec 45 |
| 216542   | W/Sgt | Ribelle, R.L.   | (25) | 14 Dec 45 |
| 2115957  | Dvr   | Rogers, J.A.V.  | (25) | 18 Dec 45 |
| 1924534  | Spr   | Smith, C.H.     | (25) | 10 Dec 45 |

## Y'(4a) LIST

|         |       |                |      |           |
|---------|-------|----------------|------|-----------|
| 1503536 | Spr   | Ridgway, L.    | (25) | 19 Dec 45 |
| 2193763 | Spr   | Foster, W.D.   | (25) | 15 Dec 45 |
| 2193557 | A/WOL | Osborne, H.R.  | (25) | 19 Dec 45 |
| 2120811 | W/Sgt | Pexton, F.R.O. | (25) | 18 Dec 45 |
| 7915664 | Spr   | Preston, H.    | (25) | 12 Dec 45 |

0084

(L. K. K. K.) Major  
Record Officer  
HQ and London

CJC

2003 3 5

5 Dec 45  
11 Dec 45  
11 Dec 45  
20 Dec 45  
11 Dec 45  
20 Dec 45  
17 Dec 45  
14 Dec 45  
18 Dec 45  
10 Dec 45  
3 Dec 45

19 Dec 45  
15 Dec 45  
19 Dec 45  
18 Dec 45  
12 Dec 45

- (25) HQ Liaison In LFG
- (25) AT CPT
- (25) HQ MM. MM(Greece)
- (25) CSO CPT
- (25) STN CPT
- (25) Pool of Interpreters(Austria)
- (25) STB CPT
- (25) HQ RE 6(Dr.) Armd Div
- (25) 5 MM CPT ✓
- (25) HQ 6 (Dr.) Armd Div
- (25) Allied Com Austria

(25) 4 GRV  
(25) att 54 Cor Ho n RAIG  
(25) att 179 GRV Was RD  
(25) att GRV GRV  
(25) att 2 FOR

Eldridge, F. E.  
Ford, F. J.  
Gernack, C. D.  
Gorton, A. E.  
Georgogian, A. E.  
Oakley, J. E.  
Farr, J. S. E.  
Fink, A. W. H.  
Riabello, E. L. A.  
Rogers, W. A. V.  
Smith, C. H.

Fiddes, L.  
Foster, W. Z.  
Osborne, R. R.  
Poxon, F. H. C.  
Preston, H.

## EX(1) LIST

|          |       |
|----------|-------|
| 2126921  | W/Cpl |
| 2092795  | Spr   |
| 1910694  | A/Sgt |
| 2160305  | I/Cpl |
| 2119012  | I/Cpl |
| 2076656  | W/Sgt |
| 13033228 | Spr   |
| 13076302 | Dvr   |
| 216542   | W/Sgt |
| 2115957  | Dvr   |
| 1924634  | Spr   |

$$\frac{1}{2} (4e) \text{ IISF}$$

|         |       |
|---------|-------|
| 1303536 | Spr   |
| 2193763 | Spr   |
| 2493557 | Woll  |
| 2120811 | W/Sgt |
| 7915664 | Spr   |

0.60

(L.A. 44-1571.)

1884

Subject:- Hospital charges.

5 British Liaison Unit  
G.M.F.

A/13/2

19 Jan 46.

A M G 13 Corps  
-----

Ref your 13 C/AMG/P.H./5 of 9 Jan.

The Slav pers referred to in your a/q letter were demobilised from the Italian Army under Allied arrangements as they had chosen to return to their homes in Jugo-Slavia. Owing to their state of health it was not possible for them to travel direct to their homes, consequently for the purpose of hospitalisation these men were considered civilians as they had been demobilised in Udine, and were no longer an Italian Military responsibility.

Udine  
FRS/rv

*[Signature]*  
Major,  
DAA & AMG.

6673 .

A13 1

# HEADQUARTERS ALLIED MILITARY GOVERNMENT 13 CORPS

PUBLIC HEALTH AND WELFARE DIVISION

Telephone No. 20794

|          |       |
|----------|-------|
| Health   | ex 46 |
| Clerks   | ex 30 |
| Welfare  | ex 36 |
| A. R. C. | ex 21 |

9 January 1946

Reference No.: 13C/A-M.G.(P.H.) 5

Subject: Hospital charges

To: 5. British Liaison Unit  
C.M.F.

1. Reference your memo AQ/49/35, dated 16 Dec/45, addressed Tenente SIMONETTI, Comando Territoriale di Udine, in reference to:

NARDIN Antonio  
SULIGOI Rodolfo  
COSSOVEL Francesco

2. Information has been received from the Ospedali Riuniti Trieste, that the above named have been admitted to hospital and that this admission was arranged between the A.M.G. Public Health Division-Trieste and the Yugoslav Military Mission. The hospital authorities have also requested that this division will confirm that A.M.G. will pay all hospital charges.

3. As this is somewhat irregular will you please give me some information in regard to these cases (i.e. as to who the personnel were whether military, or civilian, or displaced persons) and what circumstances necessitated their admission to hospital in Trieste and not in Udine.

I, personally, know nothing of the arrangement referred to above, in para 2 above.

*for the record*

*John*  
T. PARR

6872

COLONEL (C.A.)  
CHIEF PUBLIC HEALTH OFFICER

*Vigini*  
*Ask Mr Simonetti to explain this case to me*  
Copy to : Secretary Ospedali Riuniti - Trieste

1  
A/13

WATER CONTAMINATION

48

## MESSAGE OUT

FROM:- 1 AGHA

31 1700 B

TO:- Dist "A"

A 37 (.) UNCL (.) Following received from EMO (.) Quote (.) Request issue immediate instrs as follows all tps area RORDENONE and R MEDUNA (.) ONE (.) River bathing forbidden (.) TWO (.) all rpt all water for whatever use must be sterilised by chlorination (.) THREE (.) secure protection all rpt all food and drink from possible contamination rats (.) all info

IMPORTANT

  
 Cont.

2/9

6821

HQ 1 Army Gp TCA

A 37

22 Aug 46

List 'A'

Reference King's Regulations, 1940, para 34h.

The Pay Warrant, 1940, para 894 and footnote, as promulgated by amendments (No. 29), notified in Army Order 6 of 1944.

Regulations Medical Services of the Army, 1933, para 130 (c) as amended by amendment No 1 January 1939 and AOI 2140 dated 7 July 1942.

1. The situation as regards Post Orderlies in GMS is at the present time obscure and it is desired to review the position.
2. In order that this may be done, information on a number of points is required which can only be supplied by Infantry and other units who normally employ Post Orderlies.
3. The information required is set out on the attached proforma. Please return the completed proforma to this HQ by 1200 hrs 25 Aug 46.

FM  
RFB/vv

MAJ  
DAA & QMG

6870

SUBJECT : Foot Orderlies.

5 British Liaison Unit.  
Tel. : 1555  
A/13/46

24th Aug'46.

TO : "A" HQ 1 A.C.R.A.

Reference your A/37 of 22 Aug '46.

A NIL return is submitted in respect  
of the attached pro-forms.

  
Major,  
DAA & QMG.

6009

1/13  
45  
Subject: - VD - PACs and ET Rooms

HQ 1 Army Gp RA

A 37/5

12 Aug 46

Distribution as under.

The att notes on points to be observed by Commanding Officers responsible for the provision or inspection of PACs and ET Rooms are forwarded.

It has been found that many Officers charged with these responsibilities are not fully aware of what is required and it is hoped that these notes will be helpful to them.

Td  
N T/vv

Maj  
DA/2/947

#### DISTRIBUTION

HQ 1 AGRA (Camp)  
HQ 1 AGRA (Sigs)  
AGC UDINE  
2 Med Regt RA  
4 Med Regt RA  
3 Cvy Regt RA  
CH Staff 13 Corps  
654 AOP Sqn RAF  
288 Works Sec RE  
HQ 13 Corps Forestry Unit  
3 Airfield Constr Gp  
189 Rly Op Coy  
13 Corps Postal Unit  
13 Corps Tps RE  
10 Rly Op Coy RE  
1 Sqn 1 L of C Sigs Regt  
8 Air Rm Sigs

1 Air Sqn Sigs Sec  
378 Pet Pl  
534 Coy ASC  
57 DHD  
27 Coy RASC  
934 Tinner Coy RASC  
602 Ger CT Coy  
1789 Ind Pet Buck Tpt  
Pl RASC  
18 Veh Park  
8 GCR  
761 L of C Wkps  
668 Rly Rec Sec  
659 Inf Tps Wkps  
732 Service Sta  
625 RH Evac Sec  
13 Corps Tps Wkps

411 TSS  
419 TSS  
412 Pro Coy  
18 Gp Pnr Corps  
3 Town Major  
44 Town Major  
B6 Broadcasting Sta  
PT & Sports Centre  
Pl RASC  
193 Transit Camp  
205 AL Sec  
31 CC PMA  
3 BLU  
1 V & RCS  
6 Cav Mob Vet Sec  
RA CHD Leadership School

1100X

## PAO and ET ROOMS

### GENERAL

1. The following notes apply to the standards which should be attained in all PAO and ET Rooms.

### ET ROOMS

2. Accommodation:- The room or tent provided must be well lit, by day and by night.
3. Cleanliness:- The standard of cleanliness and general appearance to be insisted upon is that of a hospital and NOT that of a latrine.
4. Equipment:- The following equipment should be provided.
 

|                                               |                        |
|-----------------------------------------------|------------------------|
| (a) Soap                                      | In suitable containers |
| (b) Wool                                      |                        |
| (c) Tubes of Calomel Ointment                 |                        |
| (d) Water (hot if possible)                   |                        |
| (e) Basin on stand and water                  |                        |
| (f) Antiseptic solution                       |                        |
| (g) Bin or receptacle for discarded wool etc. |                        |
| (h) Urinal                                    |                        |
5. Instructions:- Printed or clearly legible instructions must be placed above each basin or ablution point. A copy is attached.
6. Records:- It is usually most convenient to have a locked box for the receipt of slips bearing the man's Army number. Have the slips collected weekly and kept for future reference under confidential cover.
7. Signposting:- Particular attention should be paid to signposting. Provide a clearly visible sign (illuminated by night) which can be read by all personnel entering the camp.
8. Staff:- Provided from unit. One orderly (part time) is sufficient and he should be made responsible for the cleanliness and efficiency of the ET Room. He must be of a high mental standard.

### CONDOMS AND ET PACKETS

9. (a) Condoms should NOT be issued alone. Each should be issued together with an ET Packet.  
(b) ET Packet consist of
 

|       |                                                           |
|-------|-----------------------------------------------------------|
| (i)   | Envelope bearing printed instructions                     |
| (ii)  | Small piece of wool                                       |
| (iii) | Soap                                                      |
| (iv)  | Calomel Ointment tube                                     |
| (v)   | Pin (for securing packet and later piercing seal of tube) |
10. ET Packet contents are obtainable on demand from Medical Units and the packets should be made up by the orderly i/c ET Room.

### PAOs

11. The instructions regarding ET Rooms are applicable in every respect to PAOs with the following exceptions.
12. Basins or Bidets:- Each basin or bidet should be provided with running water (hot if possible) and must be screened off individually.
13. Records:- (a) Treatments are recorded on OMF 18; and the form is handed to the soldier after treatment and a record made of his Army number in the register.

- (d) Water (hot if possible)
- (e) Basin on stand and water
- (f) Antiseptic solution
- (g) Pin or receptacle for discarded wool etc.
- (h) Urinal
- (i) Supply of Condom - ET packets (see para 9)

5. Instructions:- Printed or clearly legible instructions must be placed above each basin or ablation point. A copy is attached.

6. Records:- It is usually most convenient to have a locked box for the receipt of slips bearing the man's Army number. Have the slips collected weekly and kept for future reference under confidential cover.

7. Signposting:- Particular attention should be paid to signposting. Provide a clearly visible sign (illuminated by night) which can be read by all personnel entering the camp.

8. Staff:- Provided from unit. One orderly (next time) is sufficient and he should be made responsible for the cleanliness and efficiency of the ET Room. He must be of a high mental standard.

#### CONDOMES AND ET PACKETS

9. (a) Condoms should NOT be issued alone. Each should be issued together with an ET Packet.

(b) ET Packet consist of

- (i) Envelope bearing printed instructions
- (ii) Small piece of wool
- (iii) Soap
- (iv) Calomel Cream tube
- (v) Pin (for securing packet and later piercing seal of tube)

10. ET Packet contents are obtainable on demand from Medical Units and the packets should be made up by the orderly i/c ET Room.

#### PAOs

11. The instructions regarding ET Rooms are applicable in every respect to PAOs with the following exceptions.

12. Basins or Bidets:- Each basin or bidet should be provided with running water (hot if possible) and must be screened off individually.

13. Records:- (a) Treatments are recorded on OMF 10; and the form is handed to the soldier after treatment and a record made of his Army number in the register.

(b) These records on the register can be made available to OSG Units on application to ADMS.

14. Trained Staff:- These are essential for the supervision of treatment and for the maintenance of the PAO. A very high standard of turn out and bearing should be insisted upon. A careless and dirty orderly is not only a menace in himself, but also quickly causes lack of confidence among troops in the probable efficiency of the PAO.

15. Signposting:- PAOs should be well sign posted from all the main parts of the town. Illuminated night sign outside is essential.

*J. A. B. Smith*  
Lt-Col.  
SMO.

1 All Rans informed 11/3  
 File please *W*  
 Subject:- Medical Arrangements

HQ 1 Army Gp RA

A 37

23 Jul 46  
 -----

List 'A'  
 -----

The Central M.I. Room is CLOSED from 14.00 hrs Saturdays until 08.30 hrs Mondays. All new patients during this time and any patients previously instructed by the M.O. i/c to continue dressings or treatment over the week ends, will report to Reception at 8 (Br) C.C.S.

Fd  
 AB/wv

S. B. Rennie 10/11/46  
 DAA & DMG

6866



42..

SUBJECT: Analysis Reports.  
-----LAND FORCE SUB COMMISSION  
A.C. (M. M. I. A.) R O M N  
Q/1/17-211  
23 May 1946.  
-----TO : Ministry of War.  
-----

1. Attached hereto are Analysis Reports Nos. 479, 480, and 481 covering food found unfit for human consumption at your depot.
2. Credit will be given to the Italian Government as shown on the above mentioned reports.



K. ROBERT NELSON, Major  
for Major General  
M. M. I. A.

KID/rv

COPY to: 3 B.L.U. (attached hereto is report No. 481) your ltr Q/35/9 16-5-46 refers  
5 B.L.U. (attached hereto is report No. 480)  
6 B.L.U. (attached hereto is report No. 479) your ltr Q/2/4 16-5-46 refers

0004

PRO-2787MA

ANALYSIS REPORT

1. Location of Suspected Rations  
Depot or Unit concerned. 2 Mag. Viveri.  
UDINE

2. Date Supplies  
Examined. 17-4-46

'BRITISH'

APPENDIX 'B'

| 3. Commodity    | Unit        | Manufacturer<br>& Contract n° | Net weight Packing<br>in lbs. | Warrenty<br>Date |
|-----------------|-------------|-------------------------------|-------------------------------|------------------|
| a) P. Meat      | 8x6         | Various                       | 48. =                         | Unknown Unmarked |
| b) P. Meat      | 55x3/4lb    | "                             | 41.1/4                        | "                |
| c) Meat & Veg.  | 8x6.12      | "                             | 54. =                         | "                |
| d) Herrings     | 19x0.14     | "                             | 16.10                         | "                |
| e) Sardines     | 3xoz. 3 1/4 | "                             | 0.9 3/4                       | "                |
| f) Sardines     | 1x4. 6      | Unknown                       | 4.6                           | "                |
| g) Sardines     | 9xoz.12     | "                             | 6.12                          | "                |
| h) Cheese       | 3xoz.12     | Various                       | 2. 4                          | "                |
| i) Cheese       | 1x4.6       | Unknown                       | 4. 6                          | "                |
| j) Tomato Paste | 9x6.8       | Cirio                         | 58. 8                         | "                |
| k) Tomato Paste | 1x2         | "                             | 2. =                          | "                |
| l) Salmon       | 4x1         | Unknown                       | 4. =                          | "                |

4. Cause of damage.  
Probably age of stock or bad canning. -

5. Technical Analysis Findings. (Attach separate sheet if necessary).  
NIL

6. ~~General~~ Supplies as assessed by Commission.  
Tins rust. M punctured or blown: contents putrid. -

7. Responsibility and/or negligence attributed by Commission.  
NIL

8. Disposal action recommended by Commission.  
Immediate destruction by fire. -

9. Whether Credit to Italian Government recommended and reason why.  
Yes: goods were received very recently and were probably bad at time of receipt. -

0003

Signature of Commission

*Mag. Viveri*  
*Mag. Viveri*

M.M.I.A. L.O.  
Comissariato  
Analyst

Destruction Certificate

Foregoing commodities destroyed in our presence at  
Time 18.35 Date 17-4-46 Place Udine - 5 Mag. Viveri.

5 BRITISH

|   |              |         |         |         |
|---|--------------|---------|---------|---------|
| f | Sardines     | 1x4.6   | Unknown | 0.9 3/4 |
| g | Sardines     | 9xoz.12 | "       | 4.6     |
| h | Cheese       | 3xoz.12 | Various | 5.12    |
| i | Cheese       | 1x4.6   | Unknown | 2.4     |
| j | Tomato Paste | 9x6.8   | Cirio   | 4.6     |
| k | Tomato Paste | 1x2     | "       | 58.8    |
| l | Salmon       | 4x1     | Unknown | 2. =    |
|   |              |         |         | 4. =    |

4. Cause of damage.  
Probably age of stock or bad canning.--
5. Technical Analysis Findings. (Attach separate sheet if necessary).  
N I L
6. Disposal of Supplies as assessed by Commission.  
Tins rns. x punctured or blown: contents putrid.--
7. Responsibility and/or negligence attributed by Commission.  
N I L
8. Disposal action recommended by Commission.  
Immediate destruction by fire.--
9. Whether Credit to Italian Government recommended and reason why.  
Yes: goods were received very recently and were probably bad at time of receipt.--

## Signature of Commission

*Maglior Roberto Caputo*  
*Caputo Roberto Caputo*

M.M.I.A. I.O.  
Comissariato  
Analyst

## Destruction Certificate

Foregoing commodities destroyed in our presence at

Time 18.35  
Date 17-4-46

Place

Udine - 5 Mag. Viveri.--

Signed

Signed

Signed

HQ. MMIA Observations

The items listed hereon to be  
credited to the Italian Government.

K. ROBERT NISON, Major,  
Nations & Accounts,  
For Major General  
M. M. I. A.

Distributions - All units under contract I 1004 (133) Previous addresses of

## 2. Medial Zone

- ## Flow-Induced

三

*W. J. G. & W. J. G.*

All plans

1864

### National Zoning

D. Non-Alcoholic

111014-6882

**7-10**

19

SUBJECT:- Medical Supplies.

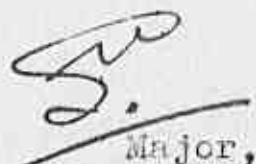
15  
5 British Liaison Unit,  
C.M.F.  
A/13/15  
27 Mar 46.

To: Land forces Sub Comm A.C.,  
(MMIA) Rome.

Reference your M/4/253 of 19 Mar 46.

Herewith attached please find 5 Territorial HQs,  
reply.

Udine  
FRS=fs

  
Major,  
DAA & QMG.

6861

MO/dg

COMANDO MILITARE TERRITORIALE DI UDINE  
- Ufficio Servizi

N. 4510/S/9/9/San.di prot.

Udine, li 25 marzo 1946

OGGETTO: Pifornimenti sanitari per il C.A.R. di Sacile.-

AL COMANDO DEL 5° B.L.U.

S E D E

\*\*\*\*\*

In risposta al foglio n° A/13/12 del 22 c.m., si comunica:

a) - I materiali sanitari per l'impianto di una infermeria di distaccamento con 25 posti-letto (non 20) sono stati regolarmente spediti e ricevuti dal C.A.R. di Sacile.- Oltre al materiale per l'infermeria è stato fornito al predetto C.A.R., quello occorrente per l'impianto di un posto di medicazione, e per una sala anticeltica.-

b) - Le medicine ed i materiali di medicazione di consumo per le necessità di un mese - compresi i vaccini e i mezzi di profilassi anticeltica - sono stati regolarmente inviati e ricevuti.-

Trattandosi di 1° impianto la richiesta non è stata fatta.- Ha invece provveduto di propria iniziativa la dipendente Direzione di Sanità Militare.-

c) - E' stato disposto che i successivi prelevamenti mensili siano effettuati presso la Farmacia dell'Ospedale Militare di Udine, mediante buoni da trasmettere il 5 di ogni mese alla Direzione di Sanità Militare per il visto di autorizzazione.-

In caso di bisogni urgenti può essere autorizzato prelevamento straordinario.-

La Farmacia è in grado di soddisfare le richieste.-

d'ordine

IL CAPO DI STATO MAGGIORE  
(Col.P.Pasquini)*Col. Pasquini*

6060



*Transmisibile  
for 14/11/46  
G 26/3*

1  
Subject :- First Aid Kit.

To :- DAA & JG.  
5 British Liaison Unit,  
C.M.F.

H.Q. 201 Sub-Area  
Tel: UDINE MIL 1331  
Ref: M/57

23 Mar 46

Reference your A/13/10 dated 21 March '46.

Arrangements have been made for G. (Br) General Hospital to supply first aid equipment. Collection may be made on or after Monday 25 March '46.

(At the Dispensary)

JDA

Ask Baswick to  
collect on 25 Mar

S 24/3

L. L. Green

Lieut., R.A.M.C.  
for A.D.M.S.

0859

121

SUBJECT: Medical Supplies - SAGILE CAR.

5 Territorial H.Q.  
U D I N H  
-----

5 British Liaison Unit  
C.H.F.

4/15/12

22 Mar 46

1. The following information is urgently required.

- (a) If the medical stores required for a 25 Bedded C.R.S. for SAGILE have now been received.
- (b) If any medicines and medical stores have been received.  
If they have not, will you please say if they have been indented for, to whom the indent was sent and the date.
- (c) What steps, if any, have been taken by your DMS to ensure that he has received a regular supply of medical stores.

2. The above information is required by Monday 25 March.

Uaine  
FRS/rv

  
Major,  
DAA & LMC.

0808

SUBJECT:- First Aid Kit.

5 British Liaison Unit,

C.M.F.

A/13/10 11

21 Mar 46.

To: ADs & MS,

201 Sub Area.

May this Unit please be supplied with one First Aid Kit or direction please be given where to draw the a/m kit.



Major,

DAA & QMG.

6857

A.

A/13

10

Subject: Radio Supplies

Land Forces Gen. Comm.

A.C. (MSEA)

RCEM

14/253

Mar 46

C.S.  
S.B.L.V.  
URINE  
-----

A report on the situation of the Regional Training Centre Detachment, SAILF, as at 28.2.46, contained the following remarks:-

1. "Stores required for a 25-bedded C.R.S. are being sent from Udine before the end of February."
2. "Medicines and medical stores - not in possession."

May I be informed please,

(a) If the stores mentioned in 1 above have now been received.

(b) If any medicines and medical stores have been received. If they have not, will you please ascertain if they have been indentured for, to whom the indent was sent and the date. It is also requested that I be informed of what steps - if any - have been taken by the DD IS Territorial Command and how taken to ensure that he receives a regular supply of medical stores.

Hawes

6856

Major,  
D.A.D.M.S.  
P.M.I.A.

/HWA

Copy to: AGMR.MSEA - for file Q.2253

*A/13*

DIRECTOR OF MEDICAL SERVICES

G.H.Q. C.M.F.

MEDICAL ADMINISTRATIVE INSTRUCTIONS

*9*

Serial No. 1, 1946.

1. CASUALTIES - NOTIFICATION TO G.H.Q. 2ND ECHOLON, AND NEXT OF KIN.

(1) Effective from the date of receipt of this instruction, all notifications of DANGEROUSLY ILL and SERIOUSLY ILL cases to G.H.Q. 2nd Echelon, C.M.F., will be made by IMMEDIATE signal.

(2) A letter may be written to the next of kin of the patient who is Dangerously Ill or Seriously Ill, but will not be posted direct until 96 hours have elapsed after the despatch of the message referred to in para 1 of this instruction.

(3) Alternatively, the letter may be sent direct to G.H.Q. 2nd Echelon as laid down in para 7 of G.R.O. 18/46.

(4) Should an enquiry be received from the next of kin of such a patient making it clear that official notification has been given, an informative reply may be sent at once direct to the next of kin.

(5) Unless a patient is Dangerously Ill or Seriously Ill neither the War Office nor the Records Office receives a Progress Report. However, frequent enquiries are received from next of kin of hospital patients asking for additional information as to their condition or progress. It is not possible for the War Office or Records to supply such information in other than exceptional cases, and O.C. medical units will therefore call the attention of all patients to the fact that, under the provisions of G.R.O. 1311/45, their next of kin will be notified on A.F. A.20/2A of their admission but that the relatives of a patient are normally dependent for information of his condition and progress on receiving a letter written by the patient or on his behalf.

(6) Attention is directed to G.R.O. 18/46.

2. SPECIALIST SURGICAL TREATMENT

The special centres of the C.M.F. have been disbanded, but specialists with necessary equipment have been retained at the following hospitals, to which appropriate cases should be sent.

The specialists may be sent to give opinions on cases too ill to travel if the Officer i/c the Division concerned considers it essential for the welfare of the patient.

# 1. CASUALTIES - NOTIFICATION TO G.R.O. 2ND ECHOLON, AND NEXT OF KIN.

(1) Effective from the date of receipt of this instruction, all notifications of DANGEROUSLY ILL and SERIOUSLY ILL cases to G.R.O. 2nd. Echelon, C.M.F., will be made by IMMEDIATE signal.

(2) A letter may be written to the next of kin of the patient who is Dangerously Ill or Seriously Ill, but will not be posted direct until 96 hours have elapsed after the despatch of the message referred to in para 1 of this instruction.

0855

(3) Alternatively, the letter may be sent direct to G.R.O. 2nd. Echelon as laid down in para 7 of G.R.O. 18/46.

(4) Should an enquiry be received from the next of kin of such a patient making it clear that official notification has been given, an informative reply may be sent at once direct to the next of kin.

(5) Unless a patient is Dangerously Ill or Seriously Ill neither the War Office nor the Records Office receives a Progress Report. However, frequent enquiries are received from next of kin of hospital patients asking for additional information as to their condition or progress. It is not possible for the War Office or Records to supply such information in other than exceptional cases, and C.S.O medical units will therefore call the attention of all patients to the fact that, under the provisions of G.R.O. 1311/45, their next of kin will be notified on A.F. A.2012A of their admission but that the relatives of a patient are normally dependent for information of his condition and progress on receiving a letter written by the patient or on his behalf.

(6) Attention is directed to G.R.O. 18/46.

M.3170

## 2. SPECIALIST SURGICAL TREATMENT

The special centres of the C.M.F. have been disbanded, but specialists with necessary equipment have been retained at the following hospitals, to which appropriate cases should be sent.

The specialists may be sent to give opinions on cases too ill to travel if the Officer i/c the Division concerned considers it essential for the welfare of the patient.

|                |                                                     |
|----------------|-----------------------------------------------------|
| Neurosurgical  | : 22 and 92 (Br) General Hospitals.                 |
| Orthopaedic    | : 45, 22, 64, 22, and 97 (Br) General Hospitals.    |
| Gynaecology    | : 31, 104 (Br) General Hospitals and 19 C.C.S.      |
| Maxillo-Facial | : 22 and 98 (Br) General Hospitals.                 |
| Genito-Urinary | : 22 (Br) General Hospital.                         |
| E.N.T.         | : 22, 31, 72, 22 and 98 (Br.) General Hospitals.    |
| Ophthalmic     | : 22, 43, 64, 92, 97 and 98 (Br) General Hospitals. |

M.3050/1

/3.

- 2 -

### 3. NON-GONOCOCCAL URETHRITIS, CLASSIFICATION OF

(1) Statistical returns of non-gonococcal urethritis show wide fluctuations in the relative incidence of urethritis (venereal) and urethritis (non-venereal). These fluctuations would seem to be due to the lack of uniformity in the criteria used by different diagnosticians in distinguishing cases of venereal origin from those of non-venereal origin.

(2) In order to obtain comparable figures of venereal disease incidence, urethritis (V) and urethritis (NV) will be defined as follows:-

#### Urethritis (NV)

1. All cases in which there is a non-venereal causal factor to which symptoms are considered attributable.
2. All other cases in which there is NO history of exposure to venereal infection within 6 weeks prior to first onset of symptoms.

#### Urethritis (V)

Cases in which there is a history of exposure to venereal infection within 6 weeks prior to first onset of symptoms, and in which there is no non-venereal causal factor to which symptoms are considered attributable.

M. 6013.

### 4. ACUTE ULCEMATIVE GINGIVITIS

The incidence of acute ulcerative gingivitis admitted to medical units is increasing in the Theatre. Equivalent annual ratios per 1,000 for British troops are as follows:-

|             |             |              |              |
|-------------|-------------|--------------|--------------|
| July - 7.17 | Aug. - 9.76 | Sep. - 10.84 | Oct. - 14.66 |
|-------------|-------------|--------------|--------------|

From the mass of evidence and opinion concerning the spread of this disease, certain factors appear to be of importance:

- (a) It is rarer in people whose dental hygiene is good.
- (b) A high unit incidence often coincides with unsatisfactory washing-up arrangements.
- (c) The disease can be transmitted by direct contact, i.e. kissing, wherever the "scil" is suitable.

Medical officers will ensure during unit inspections that:

- (1) The importance of dental hygiene is brought to the notice of all ranks.
- (2) The preventive measures given in G.R.O. 1058/45 are fully understood.

M. 6009/12

### 5. BLOOD TRANSFUSION SUPPLIES

On the disbandment of No. 5 Base Transfusion Unit, the following arrangements have been made for the supply of blood transfusion materials:-

1. All cases in which there is a non-venercal causal factor to which symptoms are considered attributable.
2. All other cases in which there is NO history of exposure to venercal infection within 6 weeks prior to first onset of symptoms.

#### Unsubstantiated (U)

Cases in which there is a history of exposure to venercal infection within 6 weeks prior to first onset of symptoms, and in which there is no non-venercal causal factor to which symptoms are considered attributable.

M. 6013.

#### 4. ACUTE ULCERATIVE GINGIVITIS

The incidence of acute ulcerative gingivitis admitted to medical units is increasing in the Theatre. Equivalent annual ratios per 1,000 for British troops are as follows:-

July - 7.17      Aug. - 9.76      Sep. - 10.34      Oct. - 14.66

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- (c) The disease can be transmitted by direct contact, i.e. kissing, wherever the "soil" is suitable.

Medical officers will ensure during unit inspections that:

- (1) The importance of dental hygiene is brought to the notice of all ranks.
- (2) The preventive measures given in G.R.O. 1058/45 are fully understood.

M. 6006/42

#### 5. BLOOD TRANSFUSION SUPPLIES

On the disbandment of No. 5 Base Transfusion Unit, the following arrangements have been made for the supply of blood transfusion materials:-

##### (a) Solutions

A large stock of solutions for intravenous use has been deposited as under, and is available, on request to C.G., P.T.U., for General Hospitals which are unable to produce their own or which have a genuine breakdown in production:

26 P.T.U. at 46 (Dr) General Hospital for all B.I.A. units.  
 25 P.T.U. at 64 (Dr) General Hospital for all 2 District and 13 Corps units.  
 33 P.T.U. at 104 (Dr) General Hospital for all 3 District, L.T. Greece, and  
 P.T.H.A. units.

/(b)

- 3 -

(b) Equipment for Solution Manufacture.

All electric and oil-burning stills, splintered glass filters, and bottle cleaning brushes have been issued to Os.C. F.T.U.s for then to distribute to General Hospitals in their areas according to the needs in they find on their first visit. Any subsequent difficulty in preparing solutions in the Transfusion Departments or in obtaining blood transfusion equipment from Depots of Medical Stores should be referred to the appropriate F.T.U. officer.

(c) Growing Serum, Fluid.

Hospitals will obtain their supply of this item by direct application to O.C., 33 F.T.U. Smaller units will draw from the nearest General Hospital.

M.4485.

6. TYPHUS VACCINE - DOSAGE

6854

Notwithstanding instructions recently issued by the manufacturers of typhus vaccine, the dose of this vaccine will remain unaltered within the British Army as laid down in A.C.I. 1495 of 1944 under II. SPECIAL PROCEDURES in para (b) - viz., an initial course of three injections of 1.0 c.cm. with an interval of one week between each injection. Reinoculation doses of 1.0 c.cm. will be given at 6 monthly intervals.

M.6006/12

7. RESPONSIBILITY FOR MEDICAL EQUIPMENT

Every Officer Commanding a medical or dental unit other than a Depot of Medical Stores will, at least once in every two months, satisfy himself of the correctness of the medical equipment held on his charge. He will take the necessary action for write-off of any items deficient, and will deal with breakages in the manner prescribed by Regulations.

Attention is directed to King's Regulations 1940, para 81

M.4650

8. DISPOSAL AND REPLACEMENT OF UNSERVICEABLE MEDICAL EQUIPMENT.

(1) DISPOSAL

(a) General Hospitals.

Equipment which becomes unserviceable will be brought before a Board of Survey. A.D.S.M.S. will convene such Boards in all General Hospitals not less than once in each quarter. Proceedings of such Boards of Survey will be passed to the D.D.M.S. District etc. for approval.

On receipt of D.D.M.S. approval of the proceedings, articles declared to be of no further military use will be vouchered in detail to the appropriate Salvage Unit on AB 108. The receipted AB 108 and approved Board proceedings will support the striding-off charge.

Articles found by the Board to be unserviceable but repairable will be vouchered to No.4 Advanced Depot of Medical Stores, India.

6. TYPHUS VACCINE - DOSAGE

6854

Notwithstanding instructions recently issued by the manufacturers of typhus vaccine, the dose of this vaccine will remain unaltered within the British Army as laid down in A.O.I. 1495 of 1944 under II. SPECIAL PROCEDURES in para (b) - viz., an initial course of three injections of 1.0 c.cm. with an interval of one week between each injection. Reinoculation doses of 1.0 c.cm. will be given at 6 monthly intervals.

M.6006/12

7. RESPONSIBILITY FOR MEDICAL EQUIPMENT

Every Officer Commanding a medical or dental unit other than a Depot of Medical Stores will, at least once in every two months, satisfy himself of the correctness of the medical equipment held on his charge. He will take the necessary action for write-off of any items deficient, and will deal with shortages in the manner prescribed by Regulations.

Attention is directed to King's Regulations 1940, para 81

M.4650

8. DISPOSAL AND REPLACEMENT OF UNSERVICEABLE MEDICAL EQUIPMENT.(1) DISPOSAL(c) General Hospitals.

Equipment which becomes unserviceable will be brought before a Board of Survey. A.D.S.M.S. will convene such Boards in all General Hospitals not less than once in each quarter. Proceedings of such Boards of Survey will be passed to the D.D.M.S. District etc. for approval.

On receipt of D.D.M.S. approval of the proceedings, articles declared to be of no further military use will be vouchered in detail to the appropriate Salvage Unit an AB 108. The receipted AB 108 and approved Board proceedings will support the striking-off charge.

Articles found by the Board to be unserviceable but repairable will be vouchered to No.4 Advanced Depot of Medical Stores, Naples.

(b) Medical Units other than General Hospitals.

Equipment which becomes unserviceable will be vouchered to the Depot of Medical Stores from which the unit draws medical stores. Boards of Survey will be convened by A.D.S.M.S. concerned not less than once in each quarter. The procedure for disposal of unserviceable and repairable equipment as classified by the Board will be as in (a) above.

(c) Regimental M.O.s, Pool M.O.s, etc.

Articles considered unserviceable will be despatched to the medical unit from which medical stores are normally drawn. That unit will dispose of the articles in accordance with para (c) or para (b) above.

(2) REPLACEMENT

Replacement of unserviceable equipment will be effected as soon as the need arises. Indents for replacements will bear in the remarks column a certificate that the article to be replaced

/ (a)

(c) has been vouchered to a medical unit (stating which unit) or that it will be brought before the next Unit Board of Survey, and  
(b) became unserviceable through fair wear and tear or, in case of accidental or culpable damage has been reported on M.F.I. 1229 or M.F.I. 1230.

(3) Medical Supplies Memorandum No. 9, issued 26 Aug 44, is cancelled.

M. 4292.

## 9. CLASSIFICATION AS SPECIALIST AND GRADED SPECIALIST - APPLICATIONS FOR

(1) Applications by officers for classification as Specialists and Graded Specialists will be submitted in triplicate to this Directorate through normal channels and will be accompanied by three copies of the pre-form record of service as at Appendix "D" to M.A.I. 84/45.

(2) Applications will also be accompanied by supporting recommendations in triplicate from :-

- (a) Specialist in the appropriate subject who has knowledge of the officer in question.
- (b) The Officer i/c of the Division in which the officer has worked.
- (c) The Officer Commanding the hospital.

(3) It is emphasized that the main attributes on which officers should be recommended for classification are:-

- (a) Experience.
- (b) Personality and initiative.
- (c) Academic qualifications.

Comment on these attributes should be included in the recommendations.

(4) Where an application is forwarded without the three supporting recommendations required in para 2 above, the reason will be stated in a covering letter.

(5) The importance of the correct submission of these applications is stressed. The return by this Headquarters, or by subordinate formations, of applications incorrectly submitted causes delay and consequent financial loss to the applicant if he is subsequently classified. Moreover, with the present shortage of Specialists, this Command can ill afford unnecessary delay in their classification.

M.A.I. 152/45 is cancelled.

M. 2100

as at Appendix "D" to M.A.I. 84/45.

(2) Applications will also be accompanied by supporting recommendations in triplicate from:-

- (a) Specialist in the appropriate subject who has knowledge of the officer in question.
- (b) The Officer i/c of the Division in which the officer has worked.
- (c) The Officer Commanding the hospital.

(3) It is emphasized that the main attributes on which officers should be recommended for classification are:-

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M.A.I. 152/45 is cancelled.

N.2100

C.M.F

18 January 1945

/KMT

*[Handwritten signature]*  
Major-General,  
D.M.S., G.H.Q.

785020

(Margin for filing purposes)

ARMY FORM W 2011A

SERIAL NO. 112

Number of Sheets to this return

Casualties (Other than Battle, Accidents and Sickness) - Other Ranks

| Army No. | Rank | Name and Initials                                   | Corps or Regt. | Casualty                                                                                           |           | Remarks               |
|----------|------|-----------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------|-----------|-----------------------|
|          |      |                                                     |                | Nature of Casualty                                                                                 | Date      |                       |
| 417187   | W/CP | REYNOLDS W.R.                                       | RASC           | SOS 5 BLD on<br>probing to<br>X 9 (2) lost and<br>despatched to<br>198 Transport<br>Company w.e.f. | 24 JAN 46 | Unit: -<br>GR 1139/45 |
|          |      | DISTRIBUTION: GDE. DET. ASSEMBLY CENTRE<br>VILLACH. |                | Release Group 25                                                                                   |           | 0853                  |
|          |      | 5 BR LIAISON UNIT                                   |                |                                                                                                    |           |                       |

(Date)

24 JAN. 1946

W. R. Reynolds Lt. Colonel

5. British Liaison

(Unit)

201 Sub Area.

PNS(B) 1408 (V) 100 (1-45)

(Signature and appointment of Officer)

(Bde., Div., Area, etc., with which Unit is serving)