

employed on general-practitioner duties and later may assume command of medical units or administrative appointments.

**Professional Training.**—Great attention is paid to advancement of professional knowledge during service. An outline to the professional training facilities available is given below.

**Specialist Officers.**—All permanent commissioned officers attend, within a few months of joining, the junior officers' course, which covers purely professional subjects. This course, which lasts 10 weeks, is followed by an examination on the result of which depends an officer's selection for training in a specialty. After a probationary period selected officers become trainees and their advance to senior specialist is through the following phases: (a) Gain experience under the guidance of a senior specialist at recognized military hospitals. (b) Attend the basic sciences course at the Royal College of Surgeons for primary F.R.C.S. or at a selected institution for M.R.C.P. (c) An overseas tour follows during which, having practised his specialty under supervision for two years, the officer may be classified as a junior specialist. (d) On return to Britain the senior officer's course follows. This covers a period of 17 months, when instruction and further postgraduate experience may be by one or both of the following methods: (1) attending courses at recognized civilian institutions preparatory to sitting for higher qualifications; and (2) attachment to a civilian hospital in an appointment of the senior registrar status. The officer, having obtained his higher qualification and the necessary experience, is eligible for classification as a senior specialist.

**Non-specialist Officers.**—After attending the junior officers' course, and having served for approximately five years, the officer is selected for the senior course. This takes the form of a 5½-months refresher course at the Royal Army Medical College and selected civilian institutions. The subjects taught are military surgery, tropical medicine, preventive medicine, pathology, and psychiatry.

**Conditions of Service.**—Officers are required to serve in any part of the world. The normal tour of duty is three years at home and three years overseas. The situation regarding married quarters is improving. In the U.K. the chances of obtaining quarters are good. In some overseas stations a period of waiting is necessary before they can be obtained. Officers are eligible for 42 days' leave a year. They receive full pay and allowances whilst on leave and three free railway warrants a year. Members of their family are entitled to railway tickets at concessional rates. In addition, special embarkation and disembarkation leave is allowed before and after a foreign tour.

**Applications for Commissions.**—Fully registered practitioners who are British subjects or citizens of the Irish Republic are eligible to apply for regular commissions. The normal upper age limit is 35 years of age, but allowances may be made for those over this age who have previous commissioned service in the armed Forces or in other special cases. Credit is given for civilian medical experience, which counts for purposes of seniority, pay, and promotion. Former full-time commissioned service in the armed Forces is recognized as follows: (a) As a medical officer; in full for seniority, pay, promotion, and pension. (b) Other than as a medical officer; in full as regards pension but half as regards seniority, pay, and promotion.

The total annual income for each rank is as follows:

Rank and Service	Single			Married		
	Non-specialist	Junior Specialist	Senior Specialist	Non-specialist	Junior Specialist	Senior Specialist
Lieutenant	£ 762	£ —	£ —	£ 900	£ —	£ —
Captain	872	—	—	1,009	—	—
Captain after 2 years	926	999	—	1,064	1,137	—
Major	1,282	1,355	1,501	1,420	1,493	1,639
Lieutenant-colonel	1,666	1,739	1,885	1,794	1,887	2,013
Colonel	2,067	2,067	2,177	2,196	2,196	2,305
Brigadier	2,396	2,396	2,396	2,515	2,515	2,515
Major-general	2,634	2,634	2,634	2,743	2,743	2,743
Lieutenant-general	3,181	3,181	3,181	3,291	3,291	3,291

These rates have been increased by £3 due to increased ration allowance.

Increments of pay are given at two-year intervals. The total income is based on the assumption that single officers are not accommodated in a military mess nor receiving rations of any kind and that married officers are not accommodated in Government quarters or Government-hired accommodation, are over 25 years of age, and are not receiving rations.

Further information may be had from the Assistant Director General (A.M.D. 2), the War Office, London, S.W.1.

#### The Medical Branch of the R.A.F.

The Royal Air Force offers an attractive career to fully registered men and women medical practitioners who are British subjects or citizens of the Irish Republic. Normally, the upper age limit for applicants is 33, but older applicants may be considered. Appointment is usually to short-service commissions for three, four, or five years in the first instance, each of which may be extended to complete a maximum period of eight years. Exceptionally, suitable candidates may be appointed to permanent commissions direct from civil life. Short-service officers may apply for permanent commissions at any time during their service.

The Air Council attach great importance to attracting to the Royal Air Force the right type of medical officer, since the safety and efficiency of the Air Force depend to a peculiar degree on its Medical Service. Medical practice in the Service brings officers into contact with flying, parachuting, mountain rescue, and air evacuation of sick and wounded, as well as with the clinical specialties and the treatment of Service families. There are, in addition, opportunities in aviation medicine, physiology, hygiene, and industrial medicine.

Officers serving on permanent commissions may be allowed to proceed on study leave, with full pay and allowances, in order to take approved postgraduate courses, for which tuition fees on an approved scale may be granted. A full career is possible in the clinical specialties, and accelerated promotion can be earned by professional or scientific distinction. Officers having experience or aptitude in a specialty may be employed on specialist duties and subsequently earn recognition as Royal Air Force specialists.

The antedating of seniority up to a maximum of seven years may be admissible for recognized civil experience. This antedating counts towards pay, seniority, and promotion. The normal rank on appointment is flying officer, with promotion to flight lieutenant after one year's reckonable service, to squadron leader after eight years' reckonable service, and to higher ranks by selection. Officers with more than a year of civil experience since full registration will be promoted to the appropriate higher rank, with retrospective respect to the date of entry, immediately they have completed a short introductory course.

Officers appointed to permanent commissions will receive a grant of £1,500 (subject to income tax) after one year's satisfactory service, and they will be entitled to retired pay and other benefits after completion of service.

Short-service officers will, on completion of their commission, be paid a tax-free gratuity at the rate of £150 for each year of satisfactory service. Arrangements exist to preserve their superannuation rights under the National Health Service (Superannuation) Regulations, 1950.

Further information can be obtained from the Under-Secretary of State for Air, Air Ministry, M.A.1(P), 2-8, Richmond Terrace, Whitehall, S.W.1. (Tel.: TRAFalgar 8811, Extn. 6674.)

For postgraduate facilities available to members of the Armed Forces, see p. 554.

#### SAFEGUARDS FOR THE DOCTOR AGAINST LITIGATION

One of the duties impressed upon the young practitioner immediately on qualification is to join a defence society. The increasing number of actions against doctors since the coming of the National Health Service gives added point

to this precaution. It is not only the general practitioner who should thus safeguard himself, but also the member of a hospital staff. However careful a practitioner may be, he is never immune from the chance or accident which may involve him in litigation or the threat of it, and damages and costs are awarded on such a scale that a single successful action may ruin him financially; even an unsuccessful action may cause him heavy expense, anxiety, and perhaps some loss of reputation.

The Medical Defence Union (Tavistock House South, Tavistock Square, London, W.C.1) has a membership of over 41,000 practitioners. The Union accepts as members medical and dental practitioners, including provisionally registered practitioners, and there is special provision for the protection of overseas practitioners practising in any part of the world, with the exception of America. Since October, 1953, newly elected members pay their second and subsequent subscriptions on the anniversary date of application for membership, whilst members elected previously continue as heretofore to pay their subscriptions on January 1 in each year. The volume of work of the Union has increased materially during the past year. It provides advice and financial indemnity for any member concerned with or involved in medical litigation raising questions of professional skill or, more commonly, based upon an allegation of professional negligence. The accumulated funds are £161,490. The cost of litigation and settlements in court is increasing yearly. Since its foundation the Union has spent half a million pounds in the payment of damages and costs incurred in protecting members.

The Medical Protection Society (Victory House, Leicester Square, London, W.C.2) has a membership of over 29,000. Membership is open to registered medical and dental practitioners, including those practitioners who are provisionally registered under the Medical Act, 1950. There are special provisions for members practising overseas and also for practitioners who visit the United Kingdom for postgraduate work. Members are afforded advice and assistance in all matters of professional difficulty, with unlimited indemnity against legal expenses incurred in defending and conducting cases on their behalf, and also against costs and damages in those cases in which adverse verdicts result. This indemnity is secured by financial resources exceeding £180,000 and a reinsurance with Lloyd's underwriters. From year to year the work of the Society increases steadily, and larger amounts of costs and damages are paid on behalf of members.

The Medical and Dental Defence Union of Scotland (105, St. Vincent Street, Glasgow, C.2) has a membership of about 7,950. As with all other defence unions, there has been a considerable increase in the number of claims, although it has been possible in some of these to make a successful defence. The policy of the council has always been to give careful consideration to the interests of its members who have claims made against them for negligence, and to advise when requested regarding any business, legal, and professional matters arising from their practice.

## PUBLIC HEALTH AND TROPICAL MEDICINE

### London School of Hygiene and Tropical Medicine

The work of the London School of Hygiene and Tropical Medicine (Keppel Street, Gower Street, W.C.1) is organized in ten main departments—namely, applied physiology, bacteriology and immunology, biochemistry, clinical tropical medicine, entomology, human nutrition, medical statistics and epidemiology, parasitology, public health, and the Ross Institute of Tropical Hygiene. The course for the University of London's postgraduate Certificate and Diploma in Public Health, designed primarily for practitioners who intend to enter the public health service in Great Britain, begins in October each year and lasts for nine months. The examination for the certificate is held at the end of three months.

In addition to the subjects covered by the D.P.H. syllabus the students are entitled to choose for special study occupational health; tropical hygiene; child health; medical statistics and epidemiology; environmental control. The industrial health lectures and practical work are recognized both by the Conjoint Board and by the Society of Apothecaries as fulfilling in part the requirements for entry to the D.I.H. examination. Arrangements are made with the co-operation of various departments in the School and a number of outside agencies to cover the remaining part of the D.I.H. syllabus.

The course for the University of London postgraduate Diploma in Bacteriology provides advanced instruction for graduates in medicine, science, and pharmacy who intend to follow a career in bacteriology. The course begins in October and lasts for nine months. The course for the Conjoint Board's D.T.M.&H. is of five months' duration and is held twice a year. The course for the University of London academic postgraduate C. and D.T.M.&H. is designed to give advanced training. There is a preliminary course of approximately five months, commencing at about the beginning of October each year. The final course of not less than four months consists of advanced study in one of two fields—clinical tropical medicine and tropical hygiene.

A course for the newly instituted University of London postgraduate Certificate and Diploma in Applied Parasitology and Entomology, planned mainly for those wishing to take up research or laboratory appointments abroad, will be held annually commencing in October, 1955. Graduates in medicine, veterinary medicine, veterinary science, and science, and those with approved non-graduate qualifications in medicine and veterinary medicine, are eligible. The full course lasts for nine months and the preliminary certificate course for approximately five.

A course in statistical methods applied to medicine and epidemiology is held annually on two days a week from approximately the beginning of March to approximately the end of June. Students without a medical qualification can be accepted.

A ten-weeks course in environmental control is held twice a year commencing at approximately the beginning of March and October. Although intended primarily for health inspectors from abroad, the course is so planned as to be of value to medical officers and others interested in the health aspects of environmental control both at home and abroad.

### Liverpool School of Tropical Medicine

Men and women students of any nationality who hold a medical qualification approved by the University are admitted at the Liverpool School of Tropical Medicine (Pembroke Place, Liverpool) to examination for the D.T.M.&H. Other students are also admitted to special courses in parasitology and entomology. For the diploma two complete courses of instruction, each lasting about three months, are given. The examination is held twice a year, in December and April, and consists of two papers on tropical medicine (including pathology and bacteriology), one on parasitology, one on entomology, two on tropical hygiene and related subjects; and practical and oral examinations in tropical medicine, parasitology and entomology, and tropical hygiene. The dates of the courses are September to December, 1955, and January to April, 1956. The School also gives courses in parasitology and entomology for students taking the D.P.H.

### The Royal Institute of Public Health and Hygiene

The Royal Institute of Public Health and Hygiene offers courses for the examination of the Conjoint Board of the Royal College of Physicians of London and of the Royal College of Surgeons of England for the Certificate in Public Health, starting annually in March and October. This leads to the courses for both the Diploma in Public Health (in