

HISTORY OF THE ARMY MEDICAL CORPS

(From the A. M. C. Centre, of Lucknow)

The history of the IMS dates back to 1612 when on the formation of the East India Company into a joint stock business the Company appointed John Woodall as their first Surgeon General. Under him medical officers (mainly civilians) were recruited more or less on individual contracts. The Company's expanded activities in various parts of the country necessitated the formation and maintenance of regular bodies of troops in India. As a consequence, they commended employing Military Surgeons from 1745 onwards. It was not until 1764 that those Surgeons were made into a regular establishment of the Company's armies. Thus the Bengal Medical Service was formed in that year, the Madras Medical Service in 1767 and the Bombay Medical Service in 1779 for the three Presidency Armies of Bengal, Madras and Bombay. The heads of the Presidency Medical Services were called the Head Surgeons and they controlled both the civil and military needs. In 1825, the Post of Inspector General was created in Bombay and Madras. In Bengal Physician General was appointed in 1842. In 1857 this post was designated as Director General to the Government of India. This designation was later changed into the Director General Indian Medical Service. With the abolition of the three Presidency Armies and creation of four Army Commands in India in 1895, a P.M.O. Surgeon Major General was appointed for each Command. In 1907, when the four Army Commands were abolished and the Army was reorganised into 10 Divisions, the PMOs of three Divisions were granted the rank of Surgeon General. At the same time the office of PMO to His Majesty's Forces in India came into being. In 1913, the appointment was designated as the Director of Medical Services in India.

In the early days, the activities of the IMS officers were indeed many. They held the appointments of post master, cotton agent, superintendent of school of arts, naturalist, political agent, commissioner and conservator of forests. Members of the service played an important part in the organisation of both the Forest and Veterinary Departments. A Professor of Chemistry in Calcutta Medical College conducted the first experiments for the introduction of electrical telegraph in India and became the Director General of Telegraphs in 1852. A Physician General in Madras played a large part in the introduction of silk, sugarcane, coffee and American cotton. It was not until the latter part of the last century that the IMS Officers began to concentrate increasingly on medical work alone.

Until the First World War the IMS was predominantly civil in character, but gradually from 1912 onwards those employed in civil duties became less and less in number. India-

nisation of this service commenced from 1915 onwards on a limited scale though some of our Indian doctors had joined the service in the middle of the 19th century. Soorjoo Coomar Goodeve Chuckerbutty, was the first Indian to enter the service as Assistant Surgeon on 24 January 1855. Rajendra Chandra joined as Assistant Surgeon on 27 January 1858. He became Brigade Surgeon on 28th February, 1890. Omesh Chander Dutt joined as Assistant Surgeon on 1 October 1866. Until Burma was separated in 1935, the IMS was catering for the civil and military needs of Burma also. During this period, the Indian Medical Service was assisted by the members of the Indian Medical Department (IMD) and Indian Hospital Corps (IHC). The idea of reorganising the medical services into a separate Medical Corps exclusively for the Defence Services was first conceived in 1939 with the outbreak of World War II, and with the formation of the Indian Army Medical Corps in 1943 the extinction of the IMS as such was merely a matter of time; on 14th August 1947 the service was finally wound up. Thus, for nearly three centuries this service lasted. Their contribution to the development of medical sciences in our country needs no recounting. Suffice to say that they were the early pioneers and many of them have left their names to last for ever.

The history of the Indian Medical Department ranges from early 19th century. Its evolution was a gradual but eventful one. Initially starting as compounders and dressers in the three Presidency Medical Services, they became Sub-Asst Surgeons, Apothecaries and Assistant Surgeons of the Subordinate Medical Department. The Sub-Asst Surgeons of the IMD started as Indian Medical Assistants in Indian Regiments. They got a regular footing when the Indian Subordinate Medical Department in the three Presidencies was created. In 1868, they were redesignated as Hospital Assistants. In 1900 the Senior Hospital Assistants were granted the rank of Viceroy's Commissioned Officers and in 1910 the designation was finally changed to Sub-Asst Surgeons of the IMD. They were primarily for work with the Indian troops.

In the days of the East India Company there were no regular formations or units charged with the task of looking after the health of troops. Little is known of the Medical organisation that existed for the Indian sepoy even in the latter part of the 19th century. Although much is written and heard about the excellent work done by the Surgeons of the IMS, ably assisted by the Apothecaries and Sub-Asst Surgeons of the IMD, yet very little is known of the subordinate personnel. Prior to 1881, there is little on record. In 1881, the British Regimental Hospitals gave way to British Station Hospitals. They needed subordinate personnel. So in 1881 the Army Hospital Native Corps was formed of menials of the disbanded British Regimental Hospitals—compounders, dressers, ward coolies, barbers, shop coolies, cooks, bhisties and sweepers. The new designation of these subordinates in general was 'hospital attendants' and they were classified as 'ward servants, cooks, water carriers and sweepers'. Their pay varied from Rs. 4 to Rs. 9 p.m.

With the abolition of the Presidency Armies by the Government and the evolution of the Army into 10 Divisions, the Army Hospital Native Corps was reorganised into 10 Companies, as Army Hospital Corps each under a Divisional PMO. For ambulance duties,

i.e., carriage of the sick and wounded, the British Regiments had dooly bearers from the Commissariat Department (old name for the S & T Corps) of the Army. As far as Indian troops were concerned they had neither any system of station hospitals nor the services of the Army Hospital Native Corps. Their medical care was in a regimental hospital by a Regimental Medical Officer (IMS) and hospital assistants of the IMD with one or two sepoys from the Regiment, who were called ward orderlies. The Regimental Hospital was a tiny non-dieted one, usually ill-equipped and dependent on the Quartermaster for small services. Certain Indian regiments like the Frontier Force Rifles were provided bearers by the regimental banias for carrying the sick and wounded. They were known as Kahars and did not belong to any army department.

Quarters were provided for the hospital attendants, but free rations were only supplied when they were employed on foreign service or on board ship. Clothing provided for ward servants was of blue cloth, the long Achkan coat had scarlet piping on the sleeves and cuffs, with a blue and scarlet cotton puggri. In addition to clothing provided by Government each ward servant provided, at his own expense, a waistband (Kamarband) to match the puggri. Water-carriers and sweepers wore jackets of militia cloth. Grade distinctions were shown by two red cloth rings showing one blue space in between for first grade and one red ring for second grade personnel. These distinctions were worn three inches above the left cuff.

It was not until 1901 that the necessity for a proper Corps of Bearers was accepted by the Government and in that year dooly bearers and kahars were enlisted in the newly formed Army Bearer Corps which came under the Medical Department. The Army Hospital Corps personnel did the menial service in British Station Hospitals and the Army Bearer Corps provided personnel for the carriage of the sick and wounded. The Corps had Sirdars, Mates and Bearers. They were paid Rs. 9 Rs. 7 and Rs. 5 p.m. respectively. These men were really our early pioneers who, working under all adversity and stress gradually built up the reputation of our service that we proudly carry forward today.

The system of providing personnel for the British and Indian station hospitals had been far from satisfactory. The Army Bearer Corps provided the bearers. Followers for British Hospitals came from Army Hospital Corps. The hospital store keepers and their assistants were recruited from the supply and Transport Corps. Hospital writers, AB Corps Clerks, Hospital Store keepers (all civilians) were employed on different terms of service.

As a consequence, there was no uniformity and the need for organising a single Corps under the Medical Department was increasingly felt. Thus by combining the Army Hospital Corps., the Army Bearer Corps and the subordinate personnel of the Indian Station Hospitals on 1st June 1920, the Indian Hospital Corps was formed comprising personnel of categories then considered necessary for hospitals, field ambulances and other medical units. AI (I) No. 379 of 1920 is rightly called the Charter of the IHC just as AI (I) No. 114 of 1943 is the MAGNA CARTA for us now.

The IHC was then divided into 10 Divisional Companies corresponding to the 10 existing Military Divisions in India and Burma and they were located at Peshawar, Rawalpindi, Lahore, Quetta, Mhow, Poona, Meerut, Lucknow, Secunderabad and Rangoon. Each Company consisted of a Company HQ composed of clerks and storekeepers, a nursing section which included the existing ward orderlies of the Indian Station Hospitals, an ambulance section which embodied the ABC and the general section consisting of the existing establishment of cooks, ward servants, dhobies, etc., of the Indian and British Station Hospitals. Each Company was administered by an Asst Director of Medical Services of the Division but was actually commanded by an ADMS assisted by an Asst Surgeon. In 1925 an Ambulance Section Reserve of 1400 was created and in 1929 a similar Nursing Section Reserve of 1800 was sanctioned.

On separation of Burma in 1935, the No. 5 Company IHC was formed as Burma Hospital Corps. This left four companies of IHC one each at Rawalpindi, Lucknow, Poona and Quetta.

IHC Battalions were reorganised into Battalion Headquarters, Training Wing and Depot Wing in February 1942 and later in October 1942, the Battalions were redesignated as Training and Depot Centres IHC with Centre Headquarters, Training Battalion and Depot Battalion.

World War II was responsible for rapid developments. The idea of having a homogeneous Corps by amalgamating the Indian Medical Service, the Indian Medical Department and the Indian Hospital Corps gradually took shape and IAMC came into being on 3rd April 1943. This gave the personnel of the Corps the same status as in the rest of the Army. They now receive the same scale of pay and enjoy the same privileges as their compatriots in other Arms, Corps and Services. We are fortunate in that on the very formation of the Corps we inherited the distinctions and traditions of the Indian Medical Service, the Indian Medical Department and the Indian Hospital Corps.

On the formation of the IAMC, the IHC Headquarters at Poona became the Administrative Headquarters of the IAMC in May 1943.

After Independence of the country, the Corps has made a steady progress. The men enjoy combatant status. The creation of the Post of Director General, Armed Forces Medical Services in 1949 as coordinating head of the medical 'services of the Army, Navy and Air Force and the creation of the appointments of two Colonel Commandants of the Corps are indeed matters of pride for all the members of the Corps. The Armed Forces Medical College has become a citadel of learning and the hub of all professional training. Officers and men are constantly trained at the AFMC and AMC Centres.

IAMC was redesignated as Army Medical Corps (AMC) with effect from Republic Day i.e. 26th January 1950 (AO 6/S/50 refers).

However, due to the large scale invasion of the Indian territory by the Chinese during September 1962 and the decision of the Government of India to increase the strength of the Armed Forces the necessity arose for an additional Centre for AMC. Consequently AMC Centre (South) was established at Hyderabad in December 1962. The Centre at Lucknow was redesignated as AMC Centre (North). AMC Record Office is attached to AMC Centre (North).

Both the Centres at Lucknow and Hyderabad have been reorganised in January 1963 in that the Training Battalions have been split into Military Training and Technical Training Battalions. In 1967 Hyderabad Centre was amalgamated with LUCKNOW Centre and further AMC Centre LUKCNOW was redesignated as AMC Centre & School in 1969.

SUMMARY

The history of IMS commences from the year 1612 when East India Company appointed John Woodell as their first Surgeon-general, under whom civilian medical officers were recruited mainly on individual contracts. Subsequently with the expanding activities of the Company the Bengal Medical Service first came into existence in 1764. Madras Medical Service in 1767 and Bombay Medical Service in 1779. Although these medical services were formed for three presidency Armies, the civilian needs were also catered by them. In 1825, the post of Inspector-General was created in Bombay and Madras while in 1842 a physician General was appointed in Bengal, which in 1857 got designated as Director General. In 1895 three Presidency Armies were abolished and four Army commands were created with a PMO to his Majesty's Forces in India who in 1913 was designated as Director of Medical Services in India. The activities of the IMS Officers in the early days were indeed too many, such as Post-Master, Superintendent of Schools, Commissioner, Forest Officer and Political Agent etc. But subsequently, they began to concentrate on medical work alone. After the first world war the Indianisation of this service began with the joining of the Indian Doctors. With the outbreak of World War II the medical service for Defence was separately formed in the year 1943, under the name Army Medical Corps. Prior to it, IMS was catering for both the Civil and Military medical requirements. But on 14th August 1974 this service was finally wound-up.

After independence of India, a post of Director-General, Armed Forces Medical Services was created in 1949 to co-ordinate the services of Army, Navy and Airforce. On the First Republic Day i.e. 26th January 1950, IAMC was designated as AMC (Army Medical Corps). However, after the Chinese aggression in September 1962, an additional AMC (South) Centre, was established at Hyderabad, while the already existing centre at Lucknow was named as AMC (North) Centre. In 1969 Lucknow was redesignated as AMC Centre and School.

सन् १९१२ से IMS का इतिहास प्रारम्भ होता है, जब ईस्ट इण्डिया कम्पनी ने ज्ञान
 अधिकांसी मुख्यतः वैयक्तिक अर्थात् के आधार पर नियुक्त किये जाते थे। कालान्तर में
 कम्पनी के निरन्तर बढ़ते हुए कार्यकलापों के फलस्वरूप सर्वप्रथम सन् १७६४ में बंगाल
 मंडिकल सर्विस, १७६७ में मद्रास मंडिकल सर्विस तथा १७७९ में बम्बई मंडिकल सर्विस का
 गठन हुआ। यद्यपि ये विक्रमा सेवाएँ बंगाल, मद्रास और बम्बई स्थित तीन प्रेसिडेंसी
 सेवाओं के लिये थीं किन्तु आधिकारिक आवश्यकताओं की पूर्ति थी इनके द्वारा होती थी।
 १८२५ में बम्बई और मद्रास में इन्सपेक्टर जनरल के पद की सृष्टि की गई तथा बंगाल में १८४२
 में एक फिजीयन जनरल की नियुक्ति हुई जिसको १८५७ में इन्सपेक्टर जनरल के रूप में
 पदोन्नत कर दिया गया। १८९५ में तीन प्रेसिडेंसी सेवाओं की समाप्ति कर चार आर्मी
 कमाण्डों का गठन किया गया जिनमें से प्रत्येक कमाण्ड के लिये एक पी.एम.ओ. सर्वानु सेक्टर
 जनरल की नियुक्ति हुई। १९०७ में पी.एम.ओ. का एक पद सिडेन नरेश की भारत स्थित
 सेवाओं के लिये स्वीकृत हुआ जिसे १९१३ में भारत की विक्रमा सेवाओं का निदेशक बना
 दिया गया। प्रारम्भ में IMS के अधिकारियों की कम्पनर, पब्लिकल एजेंट, कार्टेस्ट
 आधिकार तथा पीएस्टमास्टर आदि अन्य अधिकारियों का कार्य भी करना पड़ता था किन्तु कालान्तर
 में इन्होंने विक्रमा कार्य में ही स्वयं को केंद्रित किया। प्रथम विस्वरूप के परभाव इस
 सेवा का भारतीयकरण, भारतीय डॉक्टरों के प्रवेश के कारण प्रारम्भ हुआ। द्वितीय विस्वरूप के बाद
 १९४३ में सैनिक विक्रमा सेवा के लिये आर्मी मंडिकल कोर का गठन हुआ। इसके पूर्व सैनिक
 तथा नागरिक आवश्यकताओं की पूर्ति IMS के द्वारा होती थी जिसे १९ अगस्त १९४७ की
 पूर्णतः समाप्ति कर दिया गया। भारत के स्वतंत्र होने के बाद १९४९ में स्थल, जल एवं वायु
 सेवाओं की विक्रमा सेवाओं को व्यवस्थित करने के लिये आर्टि फोर्स मंडिकल सर्विस का
 गठन किया गया। २६ जनवरी १९५० भारत का प्रथम गणतंत्र दिवस था जब IAMC की
 AMC के रूप में नामाङ्कित किया गया। सितम्बर १९६२ में भारत पर चीन के आक्रमण के
 बाद इंदिराबाद में एक अतिरिक्त AMC केंद्र (दक्षिण) स्थापित किया गया तथा लखनऊ
 केंद्र की AMC केंद्र (उत्तर) की सेवा भी हुई। १९६९ में लखनऊ केंद्र की AMC केंद्र
 और केंद्र के रूप में पुनः नामाङ्कित किया गया।

आर्मी मंडिकल कोर का इतिहास

सारांश