

GENERAL ORDERS, }
No. 212.

WAR DEPARTMENT,
ADJUTANT GENERAL'S OFFICE,
Washington, July 9, 1863.

I..The Invalid Corps will be organized in Companies of two classes or Battalions.

II..Those men enlisted in, or transferred to, the Invalid Corps, who are most efficient and able-bodied, capable of using the musket, performing guard duty, making light marches, &c., &c., will be assigned to Companies of the First Battalion. Those of a minor degree of physical efficiency, or who possess special qualifications as cooks, nurses, or clerks, and whose services are required in hospitals, will be assigned to Companies of the Second Battalion.

III..Companies of the First Battalion will be employed mainly as provost guards, and guards in cities, &c. They will be armed with muskets, and will not be liable to active campaigns with the field armies.

IV..Companies of the Second Battalion will be armed with side arms only, and will be employed in hospitals as cooks, nurses, clerks, orderlies, &c., and as guards to hospitals or other public buildings.

V..The rolls of men for the Invalid Corps required by General Orders, Nos. 105 and 173, current series, from this Department, will state in each case the nature of the disability, and the Battalion for which the man is qualified.

VI..In all general hospitals and convalescent camps these rolls will be prepared and sent direct to the Provost Marshal General, immediately after each regular muster. Convalescents will be required to perform such hospital or military duty as they are capable of, until such time as the medical officer in charge can decide, finally, whether they are fit for duty with their regiments, for transfer to the First or Second Battalion of the Invalid Corps, or proper subjects for discharge on Surgeon's certificate.

VII..The physical examination of men for the Invalid Corps must be made by the Surgeon in charge before they are reported to the Provost Marshal General.

VIII.. Officers of the Invalid Corps on duty in hospitals will be subordinate to the Surgeon in charge, and shall aid him in the performance of his administrative and executive duties, under the following and such other regulations as may hereafter be established :

1. The senior officer of the Invalid Corps on duty in a hospital shall have, under the direction of the Surgeon in charge, the immediate supervision of all matters connected with the police and discipline of the hospital.

2. He will have the clothing, arms, equipments, and descriptive rolls of patients carefully preserved, and will note on the descriptive rolls all payments made, or clothing issued while in hospital.

3. When a soldier is received into the hospital without his descriptive list, he will immediately report the fact to the soldier's Company Commander, who is hereby required to furnish, without delay, the descriptive roll and accounts of pay and clothing.

4. He will supervise the preparation of muster and pay rolls, descriptive rolls, and clothing accounts; of final statements of pay and clothing, and of the inventories and reports required by General Regulations concerning soldiers who die absent from their Companies.

5. He will keep a record of deaths and interments, and will see that the dead are properly buried, and that each grave is designated by a registered headboard. In the absence of a Chaplain, he will keep the Chaplain's register.

6. He will conduct all correspondence in relation to the descriptive rolls, clothing, arms, equipments, and personal effects of soldiers.

7. He should reside within the hospital precincts, and shall visit every part of it daily.

IX.. In executing the provisions of General Orders, No. 105, from this Department, in regard to the selection of men for the Invalid Corps, Medical Inspectors, Surgeons in charge of Hospitals, Camps, Regiments, or of Boards of Enrollment, Military Commanders, and all others required to make the physical examination of men for the Invalid Corps, will be governed in their decisions by the following lists of qualifications and disqualifications for admission into this Corps :

Physical infirmities that incapacitate Enlisted Men for Field Service, but do not disqualify them for service in the Invalid Corps.

1. Epilepsy, if the seizures do not occur more frequently than once a month, and have not impaired the mental faculties.
2. Paralysis, if confined to one upper extremity.
3. Hypertrophy of the heart, unaccompanied with valvular lesion. Confirmed nervous debility or excitability of the heart, with palpitation, great frequency of the pulse, and loss of strength.
4. Impeded respiration following injuries of the chest, pneumonia, or pleurisy. Incipient consumption.
5. Chronic dyspepsia or chronic diarrhoea, which has long resisted treatment. Simple enlargement of the liver or spleen, with tender or tumid abdomen.
6. Chronic disorders of the kidneys or bladder, without manifest organic disease, and which have not yielded to treatment. Incontinence of urine; mere frequency of micturition does not exempt.
7. Decided feebleness of constitution, whether natural or acquired. Soldiers over fifty and under eighteen years of age, are proper subjects for the Invalid Corps.
8. Chronic rheumatism, if manifested by positive change of structure, wasting or contraction of the muscles of the affected limb, or puffiness or distortion of the joints.
9. Pain, if accompanied with manifest derangement of the general health, wasting of a limb, or other positive sign of disease.
10. Loss of sight of right eye; partial loss of sight of both eyes, or permanent diseases of either eye, affecting the integrity or use of the other eye, vision being impaired to such a degree as clearly to incapacitate for field service. Loss of sight of left eye, or incurable diseases or imperfections of that eye, not affecting the use of the right eye, nor requiring medical treatment, do not disqualify for field service.
11. Myopia, if very decided or depending upon structural change of the eye. Hemeralopia, if confirmed.
12. Purulent otorrhoea; partial deafness, if in degree sufficient to prevent hearing words of command as usually given.
13. Stammering, unless excessive and confirmed.

14. Chronic aphonia, which has long resisted treatment, the voice remaining too feeble to give an order or an alarm, but yet sufficiently distinct for intelligible conversation.

15. Incurable deformities of either jaw, sufficient to impede but not to prevent mastication or deglutition. Loss of a sufficient number of teeth to prevent proper mastication of food.

16. Torticollis, if of long standing and well marked.

17. Hernia; abdomen grossly protuberant; excessive obesity.

18. Internal hemorrhoids. Fistula in ano, if extensive or complicated, with visceral disease. Prolapsus ani.

19. Stricture of the urethra.

20. Loss or complete atrophy of both testicles from any cause; permanent retraction of one or both testicles within the inguinal canal.

21. Varicocele and cirsocele, if excessive or painful; simple sarcocele, if not excessive nor painful.

22. Loss of an arm, forearm, hand, thigh, leg, or foot.

23. Wounds or injuries of the head, neck, chest, abdomen, or back, that have impaired the health, strength, or efficiency of the soldier.

24. Wounds, fractures, injuries, tumors, atrophy of a limb, or chronic diseases of the joints or bones that would impede marching, or prevent continuous muscular exertion.

25. Anchylosis of the shoulder, elbow, wrist, knee, or ankle joint.

26. Irreducible dislocation of the shoulder, elbow, wrist, or ankle joint, in which the bones have accommodated themselves to their new relations.

27. Muscular or cutaneous contractions from wounds or burns, in a degree sufficient to prevent useful motion of a limb.

28. Total loss of a thumb, loss of ungual phalanx of right thumb; permanent contraction or extension of either thumb.

29. Total loss of any two fingers of the same hand.

30. Total loss of index finger of right hand; loss of second and third phalanges of index finger of right hand, if the stump is tender or the motion of the first phalanx is impaired. Loss of the third phalanx does not incapacitate for field service.

31. Loss of the second and third phalanges of all the fingers of either hand.

32. Permanent extension or permanent contraction of any finger, except the little finger; all the fingers adherent or united.

33. Total loss of either great toe; loss of any three toes on the same foot; all the toes joined together.

34. Deformities of the toes, if sufficient to prevent marching.

35. Large, flat, ill-shaped feet that do not come within the designation of talipes valgus, but are sufficiently malformed to prevent marching.

36. Varicose veins of inferior extremities, if large and numerous, having clusters of knots, and accompanied with chronic swellings.

37. Extensive, deep, and adherent cicatrices of lower extremities.

X..Soldiers having nervous debility or excitability of the heart, impeded respiration from curable causes, chronic dyspepsia, chronic diarrhoea, chronic disorders of the kidneys or bladder, incontinence of urine, aphonia, hemeralopia, or other disease or infirmity not incurable, are not to be recommended for the Invalid Corps until they have been under medical treatment or observation a sufficient length of time to make it extremely probable, if not certain, that they will not be fit for active field service during any considerable portion of their period of enlistment.

XI..Soldiers who have lost an arm, forearm, hand, thigh, leg, or foot, may be discharged from the army on Surgeon's certificate, if they so elect.

XII..None of the foregoing disabilities disqualify officers for service in the Invalid Corps, but some of them may be so aggravated or complicated as to unfit for any service. All such cases should be discharged.

XIII..In all cases where the physical infirmities of officers or enlisted men come within the provisions of the above list, they will be recommended for transfer to, or enlistment in, the Invalid Corps; but no one will be admitted into this Corps whose previous record does not show that he is meritorious and deserving, and that he has complied with the provisions of General Orders, No. 105, War Department, Adjutant General's Office, 1863, authorizing an Invalid Corps.

Physical infirmities that disqualify enlisted men for service in the Invalid Corps.

1. Manifest imbecility or insanity.
2. Epilepsy, if the seizures occur more frequently than once a month, and have obviously impaired the mental faculties.
3. Paralysis or chorea.
4. Organic diseases of the brain or spinal chord; of the heart or lungs; of the stomach or intestines; of the liver or spleen; of the kidneys or bladder, so extensive and long continued as to have seriously impaired the general health, or so well marked as to leave no reasonable doubt of the man's incapacity for service in the Invalid Corps.
5. Confirmed consumption, cancer, aneurism of important arteries.
6. Inveterate and extensive disease of the skin.
7. Scrofula, or constitutional syphilis, which has resisted treatment and seriously impaired the general health.
8. Habitual or confirmed intemperance, or solitary vice, sufficient in degree to have materially enfeebled the constitution.
9. Great injuries or diseases of the skull, occasioning impairment of the intellectual faculties, epilepsy, or other serious nervous or spasmodic symptoms.
10. Total loss of sight, partial loss of sight of both eyes, and permanent diseases of either eye affecting the integrity and use of the other eye, vision being so greatly impaired as to leave no reasonable doubt of the man's incapacity for service in the Invalid Corps.
11. Loss of nose, or deformity of nose, if sufficient seriously to obstruct respiration; ozæna, if dependent upon caries.
12. Deafness.
13. Dumbness, permanent loss of voice.
14. Total loss of tongue, partial loss, and hypertrophy or atrophy of tongue, if sufficient to make the speech unintelligible and prevent mastication or deglutition.
15. Incurable deformities of either jaw, whether congenital or produced by accident, which would prevent mastication or greatly injure the speech.
16. Tumors of the neck, impeding respiration or deglutition; fistula of larynx or trachea.
17. Deformity of the chest, sufficient to impede respiration or to prevent the carrying of arms and military equipments; caries of the ribs.

18. Artificial anus; severe stricture of the rectum.

19. Total loss, or nearly total loss, of penis; epispadia or hypospasia at the middle or nearer the root of the penis; stone in the bladder.

20. Incurable permanent organic stricture of the urethra, in which the urine is passed drop by drop, or which is complicated by disease of the bladder; urinary fistula.

21. Confirmed or malignant sarcocele; hydrocele, if complicated with organic disease of the testis.

22. Excessive anterior or posterior curvature of the spine; caries of the spine; lumbar abscess.

23. Anchylosis of the hip joint.

24. Irreducible dislocation of hip or knee joint.

25. Large chronic ulcers of lower extremities.

XIV..In all cases where the physical infirmities of an officer or enlisted man come within the provisions of this list, or where his previous record shows that he is not entitled to be received into the Invalid Corps, he will, if in service, be discharged; and if an applicant to re-enter, his application will be disapproved.

XV..All orders or parts of orders inconsistent with the foregoing are revoked.

BY ORDER OF THE SECRETARY OF WAR:

E. D. TOWNSEND,
Assistant Adjutant General.

