

DISQUALIFICATIONS FOR MILITARY SERVICE IN THE UNITED STATES.

MENTAL AND MORAL INFIRMITIES.

Manifest imbecility; dementia; dipsomania.
 Conviction for felony.
 Desertion, as evidenced by branding.
 Obstinate malingering, (prevents re-enlistment.)

GENERAL PHYSICAL DISQUALIFICATIONS.

Feebleness of constitution.
 Scrofulous diathesis.
 Syphilis which has resisted treatment and has severely injured the health.
 Cancer, or the cancerous diathesis.
 Habitual drunkenness.

SPECIAL DISQUALIFICATIONS.

FIRST CLASS.

ORGANS OF SPECIAL SENSE AND ACCESSORY APPARATUS.

A.—Affections of the auditory apparatus.

Deafness.
 Inveterate chronic purulent otorrhœa.
 Tumors, malignant disease or caries of mastoid cells, labyrinth, or tympanum.
 Perforation of the membrana tympani.
 Obliteration or imperforation of the auditory canal.
 Malformation or loss of external ear.

B.—Affections of the eye and its appendages.

Total loss of sight; loss of an eye, or loss of sight of right eye; cataract; loss of crystalline lens of right eye.
 Ophthalmia, when chronic, purulent, gonorrhœal, or likely to be destructive in its results.
 Encanthis, if malignant; pterygium, if extensive.
 Conicity of the cornea.
 Opacity of the cornea; nebula, albugo, and leucoma, if upon the right eye and interfering with vision.
 Congenital defects of iris of right eye; rheumatic or syphilitic iritis; adhesions of iris to the capsule of the lens; staphyloma scleroticæ; glaucoma.
 Myopia.
 Strabismus of the right eye, if decided.
 Hydrophthalmia; exophthalmia.

Fistula lachrymalis; epiphora; closure of duct or distention of sac.
 Ptosis of right eye-lid; incessant spasmodic motion of lids; adhesions of eye-lids;
 trichiasis of long standing; large encysted tumors.
 Chronic abscess of the orbit.

C.—Affections of the olfactory apparatus.

Cancer of the integument; noli me tangere; erosive ulcers of the follicles.
 Deformities of the nose greatly disfiguring the face, altering the voice, and impeding
 respiration; loss of the whole or part of the nose.
 Affections of the septum, permanent or chronic, sufficient to close the nasal fossæ;
 polypus, if large enough to produce great deformity and embarrassment of
 respiration.
 Ozæna; purulent and fetid discharge from old intractable ulcerations.

D.—Affections of the mouth and gustatory apparatus.

Hare-lip, simple, compound, or complicated.
 Loss of the whole or part of either lip; unsightly mutilations of the lips from wounds,
 burns, or disease.
 Loss of the whole or part of either maxilla; un-united fracture; ankylosis.
 Deformities of either jaw, interfering with mastication, speech, or the tearing of the
 cartridge.
 Loss of the incisor and canine teeth of both jaws.
 Cancerous or erectile tumors; cicatrices producing deformity.
 Mutism.
 Hypertrophy or atrophy of the tongue.
 Stammering or stuttering, if inveterate.
 Mutilation or partial or total loss of tongue.
 Adhesion of tongue to parietes of mouth, or other adhesions preventing free motion.
 Malignant disease of tongue; chronic and inveterate ulceration.
 Congenital fissure of bones of the palate, or fissure produced by disease.
 Salivary fistula; bucco-nasal fistula.
 Chronic engorgement of the tonsils, sufficient to interfere with deglutition or phonation.
 Great deformities of the face and loss of substance of the cheeks.

SECOND CLASS.

A.—Head and spinal column.

Imperfect ossification of the bones of the cranium, evidenced by the persistence of
 the fontanelles, and sometimes separation and mobility of the sutures.
 Monstrosity in size of the head; considerable deformity, the consequence of fracture.
 Serious lesions of the skull, the consequence of complicated wounds, considerable
 fractures, or the operation of trephining; caries and exfoliation involving the
 whole thickness of the bone.
 Injuries of cranial nerves affecting their functions.

Fungous tumors of the dura mater.

Caries of the spine; spina bifida; curvature in the cervical, dorsal, or lumbar region; lumbar abscess; rickets; fracture and dislocation of the vertebræ.

Angular deformity, including gibbosity of the anterior and posterior part of the thorax.

B.—Affections of the cerebro-spinal nervous system.

Epilepsy; chorea.

Paralysis agitans; paraplegia; hemiplegia; paralysis of any part of the body.

Neuralgia, if intractable.

THIRD CLASS.

NECK AND CONTAINED ORGANS.

Chronic laryngitis; induration and scirrhous of epiglottis; polypus of the larynx; aphonia due to any of these causes.

Dysphagia due to stricture of the œsophagus.

Goitre, if large enough to impede respiration.

Engorgement, scrofulous enlargement, and ulceration or abscess of the lymphatic glands.

Cicatrices producing deformity, retraction of jaw, and rigidity.

Fistula of larynx or trachea.

Wry-neck, if permanent in character.

Osseous degeneration of thyroid gland.

FOURTH CLASS.

CHEST AND THORACIC ORGANS.

Malformation of chest or badly united fracture of ribs or sternum sufficient to interfere with respiration; caries or necrosis of ribs; deficiency in extent of expansive mobility; greatly diminished vital capacity; evident predisposition to phthisis.

Phthisis pulmonalis; chronic pneumonia; chronic pleurisy and emphysema; chronic bronchitis; asthma; hæmoptysis.

Organic disease of the heart and large arteries; hypertrophy; valvular insufficiency; aneurism; serious and protracted functional derangement; dropsy dependent on disease of heart.

FIFTH CLASS.

ABDOMEN AND DIGESTIVE APPARATUS.

Chronic gastritis; chronic gastro-enteritis; chronic disease of liver or spleen; engorgement or tubercular infiltration of mesentery, (marasmus;) chronic diarrhœa; chronic dysentery; tænia; chronic peritonitis, with or without effusion; ascites; obesity.

Dyspepsia, if of long standing and accompanied by general emaciation, vomiting, &c. Hæmorrhoids, if large, internal, bleeding, ulcerated, and painful.

Malformation or stricture of the rectum; prolapsus ani; fistula in ano; considerable fissure of the anus; artificial anus.

Hernia in all situations.

Extensive cicatrices from incised wounds.

SIXTH CLASS.

GENITO-URINARY APPARATUS.

- Loss of the penis ; permanent stricture of the urethra.
- Loss of both testicles from any cause ; permanent retraction of one or both testicles within the external ring.
- Malignant disease of testicle ; scrofulous or syphilitic sarcocele ; hydrocele, if large ; atrophy of testicle ; varicocele and cirsocele, if large enough to impede walking, or if it have produced atrophy of the corresponding testicle.
- Epispadia and hypospasia, when not farther from the root of the penis than the middle.
- Incontinence of urine ; urinary fistula ; discharge of urine by the umbilicus ; hæmaturia, if evidence of organic disease.
- Eversion of the bladder ; loss of substance of the hypogastric region.
- Chronic enlargement of the prostate ; stone in the bladder ; chronic cystitis of long standing.
- Abscess of kidney ; fatty degeneration of kidney ; closure of ureter by a calculus ; renal dropsy ; diabetes.
- Hermaphroditism.
- Spermatorrhœa, if it have impaired the general health.

SEVENTH CLASS.

UPPER AND LOWER EXTREMITIES.

A.—Disqualifications common to both upper and lower extremities.

- Chronic rheumatism, with swelling of the joints, enlargement of the surrounding tissues, earthy deposits, contraction of the tendons, and wasting and loss of motion.
- Chronic diseases of the joints.
- Old or irreducible dislocations or false joints.
- Severe sprains, resulting in impaired mobility.
- Relaxation of the capsules or other ligaments of the joints ; voluntary or involuntary dislocation of the bones.
- Complete or partial ankylosis of an important articulation.
- Sinuses communicating with the osseous cavities, the articulations, and with the thickness of spongy bones.
- Dropsy of a joint.
- Badly united fractures.
- Defective or excessive curvature of long bones ; rickets ; caries ; necrosis ; exostosis.
- Atrophy of a limb ; paralysis of a limb.
- Extensive, deep, and adherent cicatrices.
- Aneurism.
- Contraction or permanent retraction of a limb or of a portion of a limb.
- Loss of a limb or of an essential part thereof.

B.—Disqualifications proper to upper extremities.

- Extraordinary size of the hands, proceeding from a natural lymphatic engorgement, or a general varicose state of the venous capillaries, or from habitually ulcerated chilblains.
- Fingers adherent or united, supernumerary, double, or branched; permanent flexion or extension of one or more fingers, except the little finger, and irremediable loss of motion of these parts.
- Loss of the first phalanx of the thumb of the right hand.
- Total loss of either thumb.
- Total or partial loss of the index-finger of the right hand.
- Loss of the first and second phalanges of the fingers of the right hand.
- Total loss of any two fingers of same hand.
- Mutilation of the last phalanges of the fingers of either hand.

C.—Disqualifications proper to inferior extremities.

- Varicose veins, voluminous and multiplied.
- Chronic ulcers, if of long standing, not easily curable, and likely to be aggravated by motion.
- Extensive adherent cicatrices, if dark-colored and the result of former ulceration.
- Lameness.
- Badly united fracture, producing much shortening.
- Knock-knees, if the deformity be excessive.
- Club-feet; splay-feet, where no arch exists, the tuberosity of the scaphoid bone touching the ground.
- Ingrowth of the nail of the great toe, if deep and accompanied with inflammation or ulceration.
- The toes joined together, double, or branching.
- That deformity in which the great toe crosses the other toes, and in which there is great prominence of the articulation of the great toe and first metatarsal bone.
- Over-riding and superposition of all the toes.
- Loss of a great toe; loss of three toes of same foot.
- Mutilation of the last phalanges of the toes of either foot.
- The retraction or inflexion of all the toes of the same foot or of two toes.
- The permanent retraction of the last phalanx of a toe in which the free border of the nail bears upon the ground, or flexion at a right angle of the second phalanx of the second toe upon the first, with ankylosis of the articulation.
- Fetid sweat of the feet.

EIGHTH CLASS.

SKIN AND APPENDAGES.

- Chronic ekzema.
- Herpes circinnatus; herpes capitis, when chronic.
- Chronic pemphigus; scabies, when of long standing and herpetic in character.
- Leprosy; psoriasis; pityriasis; ichthyosis.
- Lupus serpiginosus; l. devorans; cheloid tumors.

Porrigo; syçosis; the syphilides.

Alopæcia, if total.

Nævi; large, livid, hairy, and unsightly spots on the face.

When the imperious need of obtaining men to fill up the dwindling regiments of the national forces resulted in the passage of the enrollment-law, a concise code of instructions to medical officers, for their guidance in examining recruits, formed a part of the official regulations issued by the Provost-Marshal-General for the governance of the conscription. Although the more copious rules just given form the present official standard, the instructions to enrolling surgeons are well worthy of preservation for their own merit and for their pertinence to the history of the draft. In the supplementary part of this volume will be found the expressed opinions of a large number of the surgeons entrusted with the onerous duty of examining men drafted or offered for service, as to the sufficiency and equitable adaptedness of this code for the purpose intended. It met, for the most part, with their emphatic approval, the alterations recommended being chiefly technical or comparatively unimportant.

INSTRUCTIONS FOR THE PHYSICAL EXAMINATION OF DRAFTED MEN AND SUBSTITUTES,
AND GENERAL REGULATIONS CONCERNING.¹

The duty of inspecting men and of determining whether they are fit or unfit for the military service of the country requires the utmost impartiality, skill, and circumspection on the part of the examining surgeon and board of enrollment; for upon the manner in which this duty is performed will depend, in a very great degree, the efficiency of the Army.

In the examination, the examining surgeons will bear in mind that the object of the Government is to secure the services of men who are effective, able-bodied, sober, and free from disqualifying diseases.

The examining surgeons will also remember that the object of the drafted men, in claiming exemption, may be to escape from service by pretended, simulated, or factitious diseases, or by exaggerating or aggravating those that really exist, and that the design of substitutes frequently is to conceal disqualifying infirmities.

The examination by the examining surgeon is to be conducted in the day-time, in the presence of the board of enrollment only, and in a room well lighted and sufficiently large for the drafted man to walk about and exercise his limbs, which he must be required to do briskly.

The man is to be examined stripped.

The surgeon will habitually conduct his examination of a man in the following order, to ascertain:

1. Whether his limbs are well formed and sufficiently muscular; whether they are ulcerated or extensively cicatrized; whether he has free motion of all his joints; and whether there are any varicose veins, tumors, wounds, fractures, dislocations, or sprains that would impede his marching, or prevent continuous muscular exertion.

2. Whether the thumbs and fingers are complete in number, are well formed, and their motion unimpaired.

¹ Revised regulations for the government of the Bureau of the Provost-Marshal-General. Washington, April 1, 1864.