

## CHAPTER 3 MEDICAL SIGNAL CODE

	<i>PAGE</i>
SECTION 1: EXPLANATION AND INSTRUCTIONS .....	107
INSTRUCTIONS TO MASTERS .....	107
INSTRUCTIONS TO DOCTORS .....	107
EXAMPLES .....	108
CASE ONE .....	108
CASE TWO .....	108
SECTION 2: REQUEST FOR MEDICAL ASSISTANCE .....	109
REQUEST—GENERAL INFORMATION .....	109
DESCRIPTION OF PATIENT .....	109
PREVIOUS HEALTH .....	110
LOCALIZATION OF SYMPTOMS, DISEASES, OR INJURIES .....	110
GENERAL SYMPTOMS .....	110
PARTICULAR SYMPTOMS .....	114
PROGRESS REPORT .....	123
SECTION 3: MEDICAL ADVICE .....	125
REQUEST FOR ADDITIONAL INFORMATION .....	125
DIAGNOSIS .....	125
SPECIAL TREATMENT .....	125
TREATMENT BY MEDICAMENTS .....	127
DIET .....	128
CHILDBIRTH .....	128
VACCINATION AGAINST SMALLPOX .....	129
GENERAL INSTRUCTIONS .....	129
SECTION 4: TABLES OF COMPLEMENTS .....	130
TABLE M-1—REGIONS OF THE BODY .....	130
TABLE M-2—LIST OF COMMON DISEASES .....	133
TABLE M-3—LIST OF MEDICAMENTS .....	134

# CHAPTER 3

## SECTION 1: EXPLANATION AND INSTRUCTIONS

### General

1. Medical advice should be sought and given in plain language whenever it is possible but, if language difficulties are encountered, this Code should be used.
2. Even when plain language is used, the text of the Code and the instructions should be followed as far as possible.
3. Reference is made to the procedure signals “C”, “N”, or “NO” and “RQ” which, when used after the main signal, change its meaning into affirmative, negative and interrogative, respectively. (See Chapter 1, Section 6, Paragraph 3.(j), Page 11.)

*Example:*

“MFE N” = “Bleeding is not severe”.

“MFE RQ” = “Is bleeding severe?”

### INSTRUCTIONS TO MASTERS

#### Standard method of case description

1. The master should make a careful examination of the patient and should try to collect, as far as possible, information covering the following subjects:
  - (a) Description of the patient (Chapter 3, Section 2., Page 109);
  - (b) Previous health (Chapter 3, Section 2., Page 110);
  - (c) Localization of symptoms, diseases, or injuries (Chapter 3, Section 2., Page 110);
  - (d) General symptoms (Chapter 3, Section 2., Page 110);
  - (e) Particular symptoms (Chapter 3, Section 2., Page 114);
  - (f) \*Diagnosis (Chapter 3, Section 3., Page 125).
2. Such information should be coded by choosing the appropriate groups from the corresponding sections of this chapter. It would help the recipients of the signal if the information is transmitted in the order stated in Paragraph 1.
3. Chapter 3, Section 2., Page 109, contains signals which can be used independently, i.e. with or without the description of the case.
4. After a reply from the doctor has been received and the instructions therein followed, the master can give a progress report by using signals from Chapter 3, Section 2., Page 123.

### INSTRUCTIONS TO DOCTORS

1. Additional information can be requested by using Chapter 3, Section 3, Page 125.

*Example:*

“MQB” = “I cannot understand your signal, please use standard method of case description”.

2. For diagnosis\*, Chapter 3, Section 3., Page 125, should be used.

*Example:*

“MQE 26” = “My probable diagnosis is cystitis”.

3. Prescribing should be limited to the “List of Medicaments” which comprises Table M-3 in Chapter 3, Section 4, Pages 134 and 135, of the Code.
4. For special treatment, signals from Chapter 3, Section 3., Pages 125 through 127, should be used.

*Example:*

“MRP 4” = “Apply ice-cold compress and renew every 4 hours”.

5. When prescribing a medicament (Chapter 3, Section 3., page 127) three signals should be used as follows:
  - (a) the first (Chapter 3, Section 3., Page 127, and Table M-3 in Chapter 3, Section 4, Pages 134 and 135) to signify the medicament itself.

---

\* Chapter 3, Section 3, Page 125, “Diagnosis”, can be used by both the master (“request for medical assistance”) and the doctor (“medical advice”).

## CHAPTER 3.—MEDICAL SIGNAL CODE

*Example:*

**“MTD 32”** = “You should give aspirin tablets”.

(b) the second (Chapter 3, Section 3, Page 127) to signify the method of administration and dose.

*Example:*

**“MTI 2”** = “You should give by mouth 2 tablets/capsules”.

(c) the third (Chapter 3, Section 3, Page 127) to signify the frequency of the dose.

*Example:*

**“MTQ 8”** = “You should repeat every 8 hours”.

6. The frequency of external applications is coded in Chapter 3, Section 3, Page 128.

*Example:*

**“MTU 4”** = “You should apply every 4 hours”.

7. Advice concerning diet can be given by using signals from Chapter 3, Section 3, Page 128.

*Example:*

**“MUC”** = “Give water only in small quantities”.

### EXAMPLES

As an example, two cases of request for assistance and the corresponding replies are drafted below:

#### CASE ONE

##### Request for medical assistance

“I have a male age (44) years. Patient has been ill for (2) days. Patient has suffered from (bronchitis acute). Onset was sudden. Patient is delirious. Patient has fits of shivering. Temperature taken in mouth is (40). Pulse rate per minute is (110). The rate of breathing per minute is (30). Patient is in pain (chest). Part of the body affected is right (chest). Pain is increased on breathing. Patient has severe cough. Patient has blood-stained sputum. Patient has been given (penicillin injection) without effect. Patient has received treatment by medicaments in last (18) hours. My probable diagnosis is (pneumonia).”

##### Medical advice

“Your diagnosis is probably right. You should continue giving (penicillin injection). You should repeat every (12) hours. Put patient to bed lying down at absolute rest. Keep patient warm. Give fluid diet, milk, fruit juice, tea, mineral water. Give water very freely. Refer back to me in (24) hours or before if patient worsens.”

#### CASE TWO

##### Request for medical assistance

“I have a male aged (31) years. Patient has been ill for (3) hours. Patient has had no serious previous illness. Pulse rate per minute is (95). Pulse is weak. Patient is sweating. Patient is in pain in lumbar (kidney) region. The part affected is left lumbar (kidney) region. Pain is severe. Pain is increased by hand pressure. Bowels are regular.”

##### Request for additional information

“I cannot make a diagnosis. Please answer the following question(s). Temperature taken in the mouth is (number). Pain radiates to groin and testicle. Patient has pain on passing water. Urinary functions normal. Vomiting is present.”

##### Additional information

“Temperature taken in mouth is (37). Pain radiates to groin and testicle. Patient has pain on passing water. Patient is passing small quantities of urine frequently. Vomiting is absent. Patient has nausea.”

##### Medical advice

“My probable diagnosis is kidney stone (renal colic). You should give morphine injection. You should give by subcutaneous injection (15) milligrams. Give water freely. Apply hot water bottle to lumbar (kidney) region. Patient should be seen by doctor when next in port.”

# CHAPTER 3

## SECTION 2: REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>REQUEST—GENERAL INFORMATION</b>		
<b>MAA</b>	I request urgent medical advice.	
<b>MAB</b>	I request you to make rendezvous in position indicated.	
<b>MAC</b>	I request you to arrange hospital admission.	
<b>MAD</b>	I am . . . (indicate number) hours from the nearest port.	
<b>MAE</b>	I am converging on nearest port.	
<b>MAF</b>	I am moving away from nearest port.	
	I require medical assistance . . . . .	<b>W</b>
	I have a doctor on board. . . . .	<b>AL</b>
	Have you a doctor?. . . . .	<b>AM</b>
	I need a doctor . . . . .	<b>AN</b>
	I need a doctor; I have severe burns . . . . .	<b>AN 1</b>
	I need a doctor; I have radiation casualties . . . . .	<b>AN 2</b>
	I require a helicopter urgently with a doctor . . . . .	<b>BR 2</b>
	I require a helicopter urgently to pick up injured/sick person . . . . .	<b>BR 3</b>
	Helicopter is coming to you now (or at time indicated) with a doctor . . . . .	<b>BT 2</b>
	Helicopter is coming to you now (or at time indicated) to pick up injured/sick person . . . . .	<b>BT 3</b>
	I have injured/sick person (or number of persons indicated) to be taken off urgently. . . . .	<b>AQ</b>
	You should send a helicopter/boat with a stretcher . . . . .	<b>BS</b>
	A helicopter/boat is coming to take injured/sick . . . . .	<b>BU</b>
	You should send injured/sick persons to me . . . . .	<b>AT</b>

### DESCRIPTION OF PATIENT

<b>MAJ</b>	I have a male aged . . . (number) years.
<b>MAK</b>	I have a female aged . . . (number) years.
<b>MAL</b>	I have a female . . . (number) months pregnant.
<b>MAM</b>	Patient has been ill for . . . (number) days.
<b>MAN</b>	Patient has been ill for . . . (number) hours.
<b>MAO</b>	General condition of the patient is good.
<b>MAP</b>	General condition of the patient is serious.

## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>MAQ</b>	General condition of the patient is unchanged.	
<b>MAR</b>	General condition of the patient has worsened.	
<b>MAS</b>	Patient has been given . . . (Table M-3 in Chapter 3, Section 4, Pages 134 and 135) with effect.	
<b>MAT</b>	Patient has been given . . . (Table M-3 in Chapter 3, Section 4, Pages 134 and 135) without effect.	
<b>MAU</b>	Patient has received treatment by medicaments in last . . . (indicate number) hours.	

### PREVIOUS HEALTH

<b>MBA</b>	Patient has suffered from . . . (Table M-2 in Chapter 3, Section 4, Page 133).
<b>MBB</b>	Patient has had previous operation . . . (Table M-2 in Chapter 3, Section 4, Page 133).
<b>MBC</b>	Patient has had no serious previous illness.
<b>MBD</b>	Patient has had no relevant previous injury.

### LOCALIZATION OF SYMPTOMS, DISEASES, OR INJURIES

<b>MBE</b>	The whole body is affected.
<b>MBF</b>	The part of the body affected is . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>*MBG</b>	The part of the body affected is right . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>*MBH</b>	The part of the body affected is left . . . (Table M-1 in Chapter 3, Section 4, Page 130).

\* To be used when right and left side of the body or limb need to be differentiated.

### GENERAL SYMPTOMS

<b>MBP</b>	Onset was sudden.
<b>MBQ</b>	Onset was gradual.

#### Temperature

<b>MBR</b>	Temperature taken in mouth is . . . (number).
<b>MBS</b>	Temperature taken in rectum is . . . (number).
<b>MBT</b>	Temperature in the morning is . . . (number).
<b>MBU</b>	Temperature in the evening is . . . (number).

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Temperature</b>		
<b>MBV</b>	Temperature is rising.	
<b>MBW</b>	Temperature is falling.	
<b>Pulse</b>		
<b>MBX</b>	The pulse rate per minute is . . . (number).	
<b>MBY</b>	The pulse rate is irregular.	
<b>MBZ</b>	The pulse rate is rising.	
<b>MCA</b>	The pulse rate is falling.	
<b>MCB</b>	The pulse is weak.	
<b>MCC</b>	The pulse is too weak to count.	
<b>MCD</b>	The pulse is too rapid to count.	
<b>Breathing</b>		
<b>MCE</b>	The rate of breathing per minute is . . . (number) (in and out being counted as one breath).	
<b>MCF</b>	The breathing is weak.	
<b>MCG</b>	The breathing is wheezing.	
<b>MCH</b>	The breathing is regular.	
<b>MCI</b>	The breathing is irregular.	
<b>MCJ</b>	The breathing is strenuous (noisy).	
<b>Sweating</b>		
<b>MCL</b>	Patient is sweating.	
<b>MCM</b>	Patient has fits of shivering (chills).	
<b>MCN</b>	Patient has night sweats.	
<b>MCO</b>	Patient's skin is hot and dry.	
<b>MCP</b>	Patient is cold and clammy.	
<b>Mental State and Consciousness</b>		
<b>MCR</b>	Patient is conscious.	
<b>MCT</b>	Patient is semiconscious but can be roused.	

## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Mental State and Consciousness</b>		
<b>MCU</b>	Patient is unconscious.	
<b>MCV</b>	Patient found unconscious.	
<b>MCW</b>	Patient appears to be in a state of shock.	
<b>MCX</b>	Patient is delirious.	
<b>MCY</b>	Patient has mental symptoms.	
<b>MCZ</b>	Patient is paralyzed . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MDC</b>	Patient is restless.	
<b>MDD</b>	Patient is unable to sleep.	

### Pain

<b>MDF</b>	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MDG</b>	Pain is a dull ache.
<b>MDJ</b>	Pain is slight.
<b>MDL</b>	Pain is severe.
<b>MDM</b>	Pain is intermittent.
<b>MDN</b>	Pain is continuous.
<b>MDO</b>	Pain is increased by hand pressure.
<b>MDP</b>	Pain radiates to . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MDQ</b>	Pain is increased on breathing.
<b>MDR</b>	Pain is increased by action of bowels.
<b>MDT</b>	Pain is increased on passing water.
<b>MDU</b>	Pain occurs after taking food.
<b>MDV</b>	Pain is relieved by taking food.
<b>MDW</b>	Pain has no relation to taking food.
<b>MDX</b>	Pain is relieved by heat.
<b>MDY</b>	Pain has ceased.

### Cough

<b>MED</b>	Cough is present.
<b>MEF</b>	Cough is absent.

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Bowels</b>		
<b>MEG</b>	Bowels are regular.	
<b>MEJ</b>	Patient is constipated and bowels last opened . . . (indicate number of days).	
<b>MEL</b>	Patient has diarrhea . . . (indicate number of times daily).	
<b>Vomiting</b>		
<b>MEM</b>	Vomiting is present.	
<b>MEN</b>	Vomiting is absent.	
<b>MEO</b>	Patient has nausea.	
<b>Urine</b>		
<b>MEP</b>	Urinary functions normal.	
<b>MEQ</b>	Urinary functions abnormal.	
<b>Bleeding</b>		
<b>MER</b>	Bleeding is present . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MET</b>	Bleeding is absent.	
<b>Rash</b>		
<b>MEU</b>	A rash is present . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MEV</b>	A rash is absent.	
<b>Swelling</b>		
<b>MEW</b>	Patient has a swelling . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MEX</b>	Swelling is hard.	
<b>MEY</b>	Swelling is soft.	
<b>MEZ</b>	Swelling is hot and red.	
<b>MFA</b>	Swelling is painful on hand pressure.	
<b>MFB</b>	Swelling is discharging.	
<b>MFC</b>	Patient has an abscess . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFD</b>	Patient has a carbuncle . . . (Table M-1 in Chapter 3, Section 4, Page 130).	



## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>PARTICULAR SYMPTOMS</b>		
<b>Accidents, Injuries, Fractures, Suicide, and Poisons</b>		
	Bleeding is present . . . (Table M-1 in Chapter 3, Section 4, Page 130). . . . .	<b>MER</b>
<b>MFE</b>	Bleeding is severe.	
<b>MFF</b>	Bleeding is slight.	
<b>MFG</b>	Bleeding has been stopped by pad(s) and bandaging.	
<b>MFH</b>	Bleeding has been stopped by tourniquet.	
<b>MFI</b>	Bleeding has stopped.	
<b>MFJ</b>	Bleeding cannot be stopped.	
<b>MFK</b>	Patient has a superficial wound . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFL</b>	Patient has a deep wound . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFM</b>	Patient has penetrating wound . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFN</b>	Patient has a clean-cut wound . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFO</b>	Patient has a wound with ragged edges . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFP</b>	Patient has a discharging wound . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFQ</b>	Patient has contusion (bruising) . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFR</b>	Wound is due to blow.	
<b>MFS</b>	Wound is due to crushing.	
<b>MFT</b>	Wound is due to explosion.	
<b>MFU</b>	Wound is due to fall.	
<b>MFV</b>	Wound is due to gunshot.	
<b>MFW</b>	Patient has a foreign body in wound.	
<b>MFX</b>	Patient is suffering from concussion.	
<b>MFY</b>	Patient cannot move the arm . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MFZ</b>	Patient cannot move the leg . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGA</b>	Patient has dislocation . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGB</b>	Patient has simple fracture . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGC</b>	Patient has compound fracture . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGD</b>	Patient has comminuted fracture . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGE</b>	Patient has attempted suicide.	

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Accidents, Injuries, Fractures, Suicide, and Poisons</b>		
<b>MGF</b>	Patient has cut throat.	
<b>MGG</b>	Patient has superficial burn . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGH</b>	Patient has severe burn . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGI</b>	Patient is suffering from noncorrosive poisoning (no staining and burning of mouth and lips).	
<b>MGJ</b>	Patient has swallowed corrosive (staining and burning of mouth and lips).	
<b>MGK</b>	Patient has swallowed unknown poison.	
<b>MGL</b>	Patient has swallowed a foreign body.	
<b>MGM</b>	Emetic has been given with good results.	
<b>MGN</b>	Emetic has been given without good results.	
<b>MGO</b>	No emetic has been given.	
<b>MGP</b>	Patient has had corrosive thrown on him . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGQ</b>	Patient has inhaled poisonous gases, vapors, dust.	
<b>MGR</b>	Patient is suffering from animal bite . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGS</b>	Patient is suffering from snake bite . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MGT</b>	Patient is suffering from gangrene . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>Diseases of Nose and Throat</b>		
<b>MGU</b>	Patient has nasal discharge.	
<b>MGV</b>	Patient has foreign body in nose.	
<b>MHA</b>	Lips are swollen.	
<b>MHB</b>	Tongue is dry.	
<b>MHC</b>	Tongue is coated.	
<b>MHD</b>	Tongue is glazed and red.	
<b>MHF</b>	Tongue is swollen.	
<b>MHG</b>	Patient has ulcer on tongue.	
<b>MHJ</b>	Patient has ulcer in mouth.	
<b>MHK</b>	Gums are sore and bleeding.	
<b>MHL</b>	Throat is sore and red.	
<b>MHM</b>	Throat has pinpoint white spots on tonsils.	

# CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of Nose and Throat</b>		
<b>MHN</b>	Throat has gray white patches on tonsils.	
<b>MHO</b>	Throat hurts and is swollen on one side.	
<b>MHP</b>	Throat hurts and is swollen on both sides.	
<b>MHQ</b>	Swallowing is painful.	
<b>MHR</b>	Patient cannot swallow.	
<b>MHT</b>	Patient has hoarseness of voice.	
	Patient has swallowed a foreign body . . . . .	<b>MGL</b>
<b>MHV</b>	Patient has severe toothache.	

## **Diseases of Respiratory System**

<b>MHY</b>	Patient has pain in chest on breathing . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
	Breathing is wheezing . . . . .	<b>MCG</b>
<b>MHZ</b>	Breathing is deep.	
<b>MIA</b>	Patient has severe shortness of breath.	
<b>MIB</b>	Patient has asthmatical attack.	
	Cough is absent . . . . .	<b>MEF</b>
<b>MIC</b>	Patient has severe cough.	
<b>MID</b>	Cough is longstanding.	
<b>MIF</b>	Patient is coughing up blood.	
<b>MIG</b>	Patient has no sputum.	
<b>MIJ</b>	Patient has abundant sputum.	
<b>MIK</b>	Sputum is offensive.	
<b>MIL</b>	Patient has bloodstained sputum.	
<b>MIM</b>	Patient has blueness of face.	

## **Diseases of the Digestive System**

<b>MIN</b>	Patient has tarry stool.	
<b>MIO</b>	Patient has clay-colored stool.	
	Patient has diarrhea . . . (indicate number of times daily) . . . . .	<b>MEL</b>
<b>MIP</b>	Patient has diarrhea with frequent stools like rice water.	

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of the Digestive System</b>		
<b>MIQ</b>	Patient is passing blood with stools.	
<b>MIR</b>	Patient is passing mucus with stools.	
	Patient has nausea . . . . .	<b>MEO</b>
<b>MIT</b>	Patient has persistent hiccough.	
<b>MIU</b>	Patient has cramp pains and vomiting.	
	Vomiting is present. . . . .	<b>MEM</b>
	Vomiting is absent . . . . .	<b>MEN</b>
<b>MIV</b>	Vomiting has stopped.	
<b>MIW</b>	Vomiting is persistent.	
<b>MIX</b>	Vomit is streaked with blood.	
<b>MIY</b>	Patient vomiting much blood.	
<b>MIZ</b>	Vomit is dark (like coffee grounds).	
<b>MJA</b>	Patient vomits any food and liquid given.	
<b>MJB</b>	Amount of vomit is . . . (indicate in deciliters: 1 deciliter equals one-sixth of a pint).	
<b>MJC</b>	Frequency of vomiting is . . . (indicate number) daily.	
<b>MJD</b>	Patient has flatulence.	
<b>MJE</b>	Wind has not been passed per anus for . . . (indicate number of hours).	
<b>MJF</b>	Wind is being passed per anus.	
<b>MJG</b>	Abdomen is distended.	
<b>MJH</b>	Abdominal wall is soft (normal).	
<b>MJI</b>	Abdominal wall is hard and rigid.	
<b>MJJ</b>	Abdominal wall is tender . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDF</b>
	Patient has a swelling . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MEW</b>
<b>MJK</b>	Hernia is present.	
<b>MJM</b>	Hernia cannot be replaced.	
<b>MJN</b>	Hernia is painful and tender.	
<b>MJO</b>	Patient has bleeding hemorrhoids.	
<b>MJP</b>	Hemorrhoids cannot be reduced (put back in place).	

## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of the Genitourinary System</b>		
	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDF</b>
<b>MJS</b>	Patient has pain on passing water.	
<b>MJT</b>	Patient has pain in penis at end of passing water.	
<b>MJU</b>	Patient has pain spreading from abdomen to penis, testicles, or thigh.	
<b>MJV</b>	Patient is unable to hold urine (incontinent).	
<b>MJW</b>	Patient is unable to pass urine.	
<b>MJX</b>	Patient is passing small quantities of urine frequently.	
<b>MJY</b>	Amount of urine passed in 24 hours . . . (indicate number in deciliters: 1 deciliter equals one-sixth of a pint).	
	Urinary functions normal . . . . .	<b>MEP</b>
<b>MKA</b>	Urine contains albumen.	
<b>MKB</b>	Urine contains sugar.	
<b>MKC</b>	Urine contains blood.	
<b>MKD</b>	Urine is very dark brown.	
<b>MKE</b>	Urine is offensive and may contain pus.	
<b>MKF</b>	Penis is swollen.	
<b>MKH</b>	Foreskin will not go back to normal position.	
<b>MKI</b>	Patient has swelling of testicles.	
<b>MKJ</b>	Shall I pass a catheter?	
<b>MKK</b>	I have passed a catheter.	
<b>MKL</b>	I am unable to pass a catheter.	
<b>Diseases of the Nervous System and Mental Diseases</b>		
<b>MKP</b>	Patient has headache . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MKQ</b>	Headache is throbbing.	
<b>MKR</b>	Headache is very severe.	
<b>MKS</b>	Head cannot be moved forwards to touch chest.	
<b>MKT</b>	Patient cannot feel pinprick . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MKU</b>	Patient is unable to speak properly.	

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of the Nervous System and Mental Diseases</b>		
<b>MKV</b>	Giddiness (vertigo) is present.	
	Patient is paralyzed . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MCZ</b>
	Patient is conscious . . . . .	<b>MCR</b>
	Patient is semiconscious but can be roused . . . . .	<b>MCT</b>
	Patient is unconscious . . . . .	<b>MCU</b>
<b>MKW</b>	Pupils are equal in size.	
<b>MKX</b>	Pupils are unequal in size.	
<b>MKY</b>	Pupils do not contract in a bright light.	
<b>MKZ</b>	Patient has no control over his bowels.	
<b>MLA</b>	Patient has fits associated with rigidity of muscles and jerking of limbs—indicate number of fits per 24 hours.	
	Patient has mental symptoms . . . . .	<b>MCY</b>
<b>MLB</b>	Patient has delusions.	
<b>MLC</b>	Patient is depressed.	
	Patient is delirious . . . . .	<b>MCX</b>
<b>MLD</b>	Patient is uncontrollable.	
	Patient has attempted suicide . . . . .	<b>MGE</b>
<b>MLE</b>	Patient has had much alcohol.	
<b>MLF</b>	Patient has delirium tremens.	
<b>MLG</b>	Patient has bedsores . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>Diseases of the Heart and Circulatory System</b>		
	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDF</b>
<b>MLH</b>	Pain has been present for . . . (indicate number of minutes).	
<b>MLI</b>	Pain in chest is constricting in character.	
<b>MLJ</b>	Pain is behind the breastbone.	
	Pain radiates to . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDP</b>
	Patient has blueness of face . . . . .	<b>MIM</b>
<b>MLK</b>	Patient has pallor.	

# CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of the Heart and Circulatory System</b>		
	The rate of breathing per minute is . . . (number) (in and out being counted as one breath). . . . .	<b>MCE</b>
	The pulse is weak . . . . .	<b>MCB</b>
	The pulse rate is irregular . . . . .	<b>MBY</b>
	The pulse is too weak to count . . . . .	<b>MCC</b>
	The pulse is too rapid to count . . . . .	<b>MCD</b>
<b>MLL</b>	Breathing is difficult when lying down.	
<b>MLM</b>	Swelling of legs that pits on pressure.	
<b>MLN</b>	Patient has varicose ulcer.	
<b>Infectious and Parasitic Diseases</b>		
<b>MLR</b>	Rash has been present for . . . (indicate number of hours).	
<b>MLS</b>	Rash first appeared on . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MLT</b>	Rash is spreading to . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MLU</b>	Rash is fading.	
<b>MLV</b>	Rash is itchy.	
<b>MLW</b>	Rash is not itchy.	
<b>MLX</b>	Rash looks like general redness.	
<b>MLY</b>	Rash looks like blotches.	
<b>MLZ</b>	Rash looks like small blisters containing clear fluid.	
<b>MMA</b>	Rash looks like larger blisters containing pus.	
<b>MMB</b>	Rash is weeping (oozing).	
<b>MMC</b>	Rash looks like weals.	
<b>MMD</b>	Rash consists of rose-colored spots that do not blench on pressure.	
<b>MME</b>	Skin is yellow.	
	Patient has an abscess . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MFC</b>
<b>MMF</b>	Patient has buboes . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MMJ</b>	Patient has been isolated.	
<b>MMK</b>	Should patient be isolated?	
<b>MML</b>	I have had (indicate number) similar cases.	

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Infectious and Parasitic Diseases</b>		
	Patient has diarrhea with frequent stools like rice water . . . . .	<b>MIP</b>
	Patient has never been successfully vaccinated against smallpox . . . . .	<b>MUT</b>
	Patient was last vaccinated . . . (date indicated). . . . .	<b>MUU</b>
	Patient has vaccination marks . . . . .	<b>MUV</b>
<b>Venereal Diseases (See also Diseases of Genitourinary System.)</b>		
<b>MMP</b>	Patient has discharge from penis.	
<b>MMQ</b>	Patient has previous history of gonorrhea.	
<b>MMR</b>	Patient has single hard sore on penis.	
<b>MMS</b>	Patient has multiple sores on penis.	
	Patient has buboes . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MMF</b>
<b>MMT</b>	Patient has swollen glands in the groin.	
<b>MMU</b>	End of penis is inflamed and swollen.	
<b>Diseases of the Ear</b>		
	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDF</b>
<b>MMW</b>	Patient has boil in ear(s).	
<b>MMX</b>	Patient has discharge of blood from ear(s).	
<b>MMY</b>	Patient has discharge of clear fluid from ear(s).	
<b>MMZ</b>	Patient has discharge of pus from ear(s).	
<b>MNA</b>	Patient has hearing impaired.	
<b>MNB</b>	Patient has foreign body in ear.	
	Giddiness (vertigo) is present . . . . .	<b>MKV</b>
<b>MNC</b>	Patient has constant noises in ear(s).	
<b>Diseases of the Eye</b>		
	Patient is in pain . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MDF</b>
<b>MNG</b>	Patient has inflammation of eye(s).	
<b>MNH</b>	Patient has discharge from eye(s).	
<b>MNI</b>	Patient has foreign body embedded in the pupil area of the eye.	



## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Diseases of the Eye</b>		
<b>MNJ</b>	Eyelids are swollen.	
<b>MNK</b>	Patient cannot open eyes (raise eyelids).	
<b>MNL</b>	Patient has foreign body embedded in the white of the eye.	
<b>MNM</b>	Patient has double vision when looking at objects with both eyes open.	
<b>MNN</b>	Patient has sudden blindness in one eye.	
<b>MNO</b>	Patient has sudden blindness in both eyes.	
	Pupils are equal in size . . . . .	<b>MKW</b>
	Pupils are unequal in size . . . . .	<b>MKX</b>
	Pupils do not contract in a bright light . . . . .	<b>MKY</b>
	Patient has a penetrating wound . . . (Table M-1 in Chapter 3, Section 4, Page 130) . . . . .	<b>MFM</b>
<b>MNP</b>	Eyeball is yellow in color.	
<b>Diseases of the Skin</b>		
	See Infectious and Parasitic Diseases in Chapter 3, Section 2, Page 120.	
<b>Diseases of Muscles and Joints</b>		
<b>MNT</b>	Patient has pain in muscles of . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MNU</b>	Patient has pain in joint(s) . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MNV</b>	Patient has redness and swelling of joint(s) . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MNW</b>	There is history of recent injury.	
<b>MNX</b>	There is no history of injury.	
<b>Miscellaneous Illnesses</b>		
	Patient has had much alcohol . . . . .	<b>MLE</b>
<b>MOA</b>	Patient is suffering from heat exhaustion.	
<b>MOB</b>	Patient is suffering from heat stroke.	
<b>MOC</b>	Patient is suffering from seasickness.	
<b>MOD</b>	Patient is suffering from exposure in lifeboat—indicate length of exposure (number) hours.	
<b>MOE</b>	Patient is suffering from frostbite . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MOF</b>	Patient has been exposed to radioactive hazard.	

## SECTION 2.—REQUEST FOR MEDICAL ASSISTANCE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Childbirth</b>		
<b>MOK</b>	I have a patient in childbirth aged . . . (number years).	
<b>MOL</b>	Patient states she has had . . . (number) children.	
<b>MOM</b>	Patient states child is due in . . . (number) weeks.	
<b>MON</b>	Pains began . . . (number) hours ago.	
<b>MOO</b>	Pains are feeble and produce no effect.	
<b>MOP</b>	Pains are strong and effective.	
<b>MOQ</b>	Pains are occurring every . . . (number) minutes.	
<b>MOR</b>	The bag of membranes broke . . . (number) hours ago.	
<b>MOS</b>	There is severe bleeding from the womb.	
<b>MOT</b>	The head is coming first.	
<b>MOU</b>	The buttocks are coming first.	
<b>MOV</b>	A foot has appeared first.	
<b>MOW</b>	An arm has appeared first.	
<b>MOX</b>	The child has been born.	
<b>MOY</b>	The child will not breathe.	
<b>MOZ</b>	The placenta has been passed.	
<b>MPA</b>	The placenta has not been passed.	
<b>MPB</b>	I have a nonpregnant woman who is bleeding from the womb.	

## PROGRESS REPORT

<b>MPE</b>	I am carrying out prescribed instructions.
<b>MPF</b>	Patient is improving.
<b>MPG</b>	Patient is not improving.
<b>MPH</b>	Patient is relieved of pain.
<b>MPI</b>	Patient still has pain.
<b>MPJ</b>	Patient is restless.
<b>MPK</b>	Patient is calm.

### CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>MPL</b>	Symptoms have cleared.	
<b>MPM</b>	Symptoms have not cleared.	
<b>MPN</b>	Symptoms have increased.	
<b>MPO</b>	Symptoms have decreased.	
<b>MPP</b>	Treatment has been effective.	
<b>MPQ</b>	Treatment has been ineffective.	
<b>MPR</b>	Patient has died.	

# CHAPTER 3

## SECTION 3: MEDICAL ADVICE

*Code*

*Meaning*

*Cross  
Reference*

### REQUEST FOR ADDITIONAL INFORMATION

<b>MQB</b>	I cannot understand your signal; please use standard method of case description.
<b>MQC</b>	Please answer the following question(s).

### DIAGNOSIS

<b>MQE</b>	My probable diagnosis is . . . (Table M-2 in Chapter 3, Section 4, Page 133).
<b>MQF</b>	My alternative diagnosis is . . . (Table M-2 in Chapter 3, Section 4, Page 133).
<b>MQG</b>	My probable diagnosis is infection or inflammation . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQH</b>	My probable diagnosis is perforation of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQI</b>	My probable diagnosis is tumor of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQJ</b>	My probable diagnosis is obstruction of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQK</b>	My probable diagnosis is hemorrhage of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>ML</b>	My probable diagnosis is foreign body in . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQM</b>	My probable diagnosis is fracture of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQN</b>	My probable diagnosis is dislocation of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQO</b>	My probable diagnosis is sprain of . . . (Table M-1 in Chapter 3, Section 4, Page 130).
<b>MQP</b>	I cannot make a diagnosis.
<b>MQT</b>	Your diagnosis is probably right.
<b>MQU</b>	I am not sure about your diagnosis.

### SPECIAL TREATMENT

<b>MRI</b>	You should refer to your International Ship's Medical Guide if available or its equivalent.
<b>MRJ</b>	You should follow treatment in your own medical guide.
<b>MRK</b>	You should follow the instructions for this procedure outlined in your own medical guide.
<b>MRL</b>	Commence artificial respiration immediately.
<b>MRM</b>	Pass catheter into bladder.

### CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>MRN</b>	Pass catheter again after . . . (number) hours.	
<b>MRO</b>	Pass catheter and retain it in bladder.	
<b>MRP</b>	Apply ice-cold compress and renew every . . . (number) hours.	
<b>MRQ</b>	Apply hot compress and renew every . . . (number) hours.	
<b>MRR</b>	Apply hot-water bottle to . . . (Table M-1 in Chapter 3, Section 4, Page 130).	
<b>MRS</b>	Insert ear drops . . . (number) times daily.	
<b>MRT</b>	Insert antiseptic eye drops . . . (number) times daily.	
<b>MRU</b>	Insert anesthetic eye drops . . . (number) times daily.	
<b>MRV</b>	Bathe eye frequently with hot water.	
<b>MRW</b>	Give frequent gargles one teaspoonful of salt in a tumblerful of water.	
<b>MRX</b>	Give enema.	
<b>MRY</b>	Do not give enema or laxative.	
<b>MRZ</b>	Was the result of the enema satisfactory?	
<b>MSA</b>	Give rectal saline slowly to replace fluid loss.	
<b>MSB</b>	Give subcutaneous saline to replace fluid loss.	
<b>MSC</b>	Apply well-padded splint(s) to immobilize limb. Watch circulation by inspection of color of fingers or toes.	
<b>MSD</b>	Apply cotton wool to armpit and bandage arm to side.	
<b>MSF</b>	Apply a sling and/or rest the part.	
<b>MSG</b>	Give light movements and massage daily.	
<b>MSJ</b>	Place patient in hot bath.	
<b>MSK</b>	To induce sleep give two sedative tablets.	
<b>MSL</b>	Reduce temperature of patient as indicated in general nursing chapter of Medical Guide.	
<b>MSM</b>	The swelling should be incised and drained.	
<b>MSN</b>	Dress wound with sterile gauze, cotton wool, and bandage.	
<b>MSO</b>	Dress wound with sterile gauze, cotton wool, and apply well-padded splint.	
<b>MSP</b>	Apply burn and wound dressing and bandage lightly.	
<b>MSQ</b>	Dress wound and bring edges together with adhesive plaster.	
<b>MSR</b>	The wound should be stitched.	

### SECTION 3.—MEDICAL ADVICE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>MST</b>	The wound should not be stitched.	
<b>MSU</b>	Stop bleeding by applying more cotton wool, firm bandaging, and elevation of the limb.	
<b>MSV</b>	Stop bleeding by manual pressure.	
<b>MSW</b>	Apply tourniquet for not more than fifteen minutes.	
<b>MSX</b>	Induce vomiting by giving an emetic.	
<b>MSY</b>	You should pass a stomach tube.	
<b>MSZ</b>	Do not try to empty stomach by any method.	

### TREATMENT BY MEDICAMENTS

#### Prescribing

<b>MTD</b>	You should give . . . (Table M-3 in Chapter 3, Section 4, Page 134 and 135).
<b>MTE</b>	You must not give . . . (Table M-3 in Chapter 3, Section 4, Page 134 and 135).

#### Method of Administration and Dose

<b>MTF</b>	You should give one tablespoon (15 ml or $\frac{1}{2}$ oz.).
<b>MTG</b>	You should give one dessertspoonful (7.5 ml or $\frac{1}{4}$ oz.).
<b>MTH</b>	You should give one teaspoonful (4 ml or 1 drachm).
<b>MTI</b>	You should give by mouth . . . (number) tablets/capsules.
<b>MTJ</b>	You should give a tumblerful of water with each dose.
<b>MTK</b>	You should give by intramuscular injection . . . (number) milligrams.
<b>MTL</b>	You should give by subcutaneous injection . . . (number) milligrams.
<b>MTM</b>	You should give by intramuscular injection . . . (number) ampoule(s).
<b>MTN</b>	You should give by subcutaneous injection . . . (number) ampoule(s).

#### Frequency of Dose

<b>MTO</b>	You should give once only.
<b>MTP</b>	You should repeat after . . . (number) hours.
<b>MTQ</b>	You should repeat every . . . (number) hours.
<b>MTR</b>	You should continue for . . . (number) hours.

## CHAPTER 3.—MEDICAL SIGNAL CODE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>Frequency of External Application</b>		
<b>MTT</b>	You should apply once only.	
<b>MTU</b>	You should apply every . . . (number) hours.	
<b>MTV</b>	You should cease to apply.	
<b>MTW</b>	You should apply for . . . (number) minutes.	

### DIET

<b>MUA</b>	Give nothing by mouth.
<b>MUB</b>	Give water very freely.
<b>MUC</b>	Give water only in small quantities.
<b>MUD</b>	Give water only as much as possible without causing the patient to vomit.
<b>MUE</b>	Give ice to suck.
<b>MUF</b>	Give fluid diet, milk, fruit, juices, tea, mineral water.
<b>MUG</b>	Give light diet such as vegetable soup, steamed fish, stewed fruit, milk puddings, or equivalent.
<b>MUH</b>	Give normal diet as tolerated.

### CHILDBIRTH

<b>MUI</b>	Has she had previous children?	
<b>MUJ</b>	How many months pregnant is she?	
<b>MUK</b>	When did labor pains start?	
	Give enema . . . . .	<b>MRX</b>
<b>MUL</b>	Encourage her to rest between pains.	
<b>MUM</b>	Encourage her to strain down during pains.	
<b>MUN</b>	What is the frequency of pains (indicate in minutes).	
	To induce sleep give two sedative tablets . . . . .	<b>MSK</b>
<b>MUO</b>	Patient should strain down and you exert steady but gentle pressure on lower part of the abdomen but not on the womb to help expulsion of the placenta.	
<b>MUP</b>	You should apply tight wide binder around lower part of abdomen and hips.	
<b>MUQ</b>	You should apply artificial respiration gently by mouth technique on infant.	

## SECTION 3.—MEDICAL ADVICE

<i>Code</i>	<i>Meaning</i>	<i>Cross Reference</i>
<b>VACCINATION AGAINST SMALLPOX</b>		
<b>MUR</b>	Has the patient been successfully vaccinated?	
<b>MUS</b>	Has the patient been vaccinated during the past three years?	
<b>MUT</b>	Patient has never been successfully vaccinated against smallpox.	
<b>MUU</b>	Patient was last vaccinated . . . (indicate date).	
<b>MUV</b>	Patient has vaccination marks.	

## GENERAL INSTRUCTIONS

<b>MVA</b>	I consider the case serious and urgent.
<b>MVB</b>	I do not consider the case serious or urgent.
<b>MVC</b>	Put patient to bed lying down at absolute rest.
<b>MVD</b>	Put patient to bed sitting up.
<b>MVE</b>	Raise head of bed.
<b>MVF</b>	Raise foot of bed.
<b>MVG</b>	Keep patient warm.
<b>MVH</b>	Keep patient cool.
<b>MVI</b>	You should continue your local treatment.
<b>MVJ</b>	You should continue your special treatment.
<b>MVK</b>	You should continue giving . . . (Table M-3 in Chapter 3, Section 4, Pages 134 and 135).
<b>MVL</b>	You should suspend your local treatment.
<b>MVM</b>	You should suspend your special treatment.
<b>MVN</b>	You should cease giving . . . (Table M-3 in Chapter 3, Section 4, Pages 134 and 135).
<b>MVO</b>	You should isolate the patient and disinfect his cabin.
<b>MVP</b>	You should land your patient at the earliest opportunity.
<b>MVQ</b>	Patient should be seen by a doctor when next in port.
<b>MVR</b>	I will arrange for hospital admission.
<b>MVS</b>	I think I should come on board and examine the case.
<b>MVT</b>	No treatment advised.
<b>MVU</b>	Refer back to me in . . . (number) hours or before if patient worsens.



# CHAPTER 3

## SECTION 4: TABLES OF COMPLEMENTS

**TABLE M-1—REGIONS OF THE BODY**

**Side of body or limb affected should be clearly indicated—right, left**

**FIGURE 1 (Front)**

1. Frontal region of head	13. Arm upper	25. Scrotum
2. Side of head	14. Forearm	26. Testicles
3. Top of head	15. Wrist	27. Penis
4. Face	16. Palm of hand	28. Upper thigh
5. Jaw	17. Fingers	29. Middle thigh
6. Neck front	18. Thumb	30. Lower thigh
7. Shoulder	19. Central upper abdomen	31. Knee
8. Clavicle	20. Central lower abdomen	32. Patella
*9. Chest	*21. Upper abdomen	33. Front of leg
10. Chest, mid	*22. Lower abdomen	34. Ankle
11. Heart	*23. Lateral abdomen	35. Foot
12. Armpit	*24. Groin	36. Toes

**FIGURE 2 (Back)**

37. Back of head	44. Back of hand	51. Buttock
38. Back of neck	*45. Lower chest region	52. Anus
39. Back of shoulder	46. Spinal column upper	53. Back of thigh
40. Scapula region	47. Spinal column middle	54. Back of knee
41. Elbow	48. Spinal column lower	55. Calf
42. Back upper arm	*49. Lumbar (kidney) region	56. Heel
43. Back lower arm	50. Sacral region	

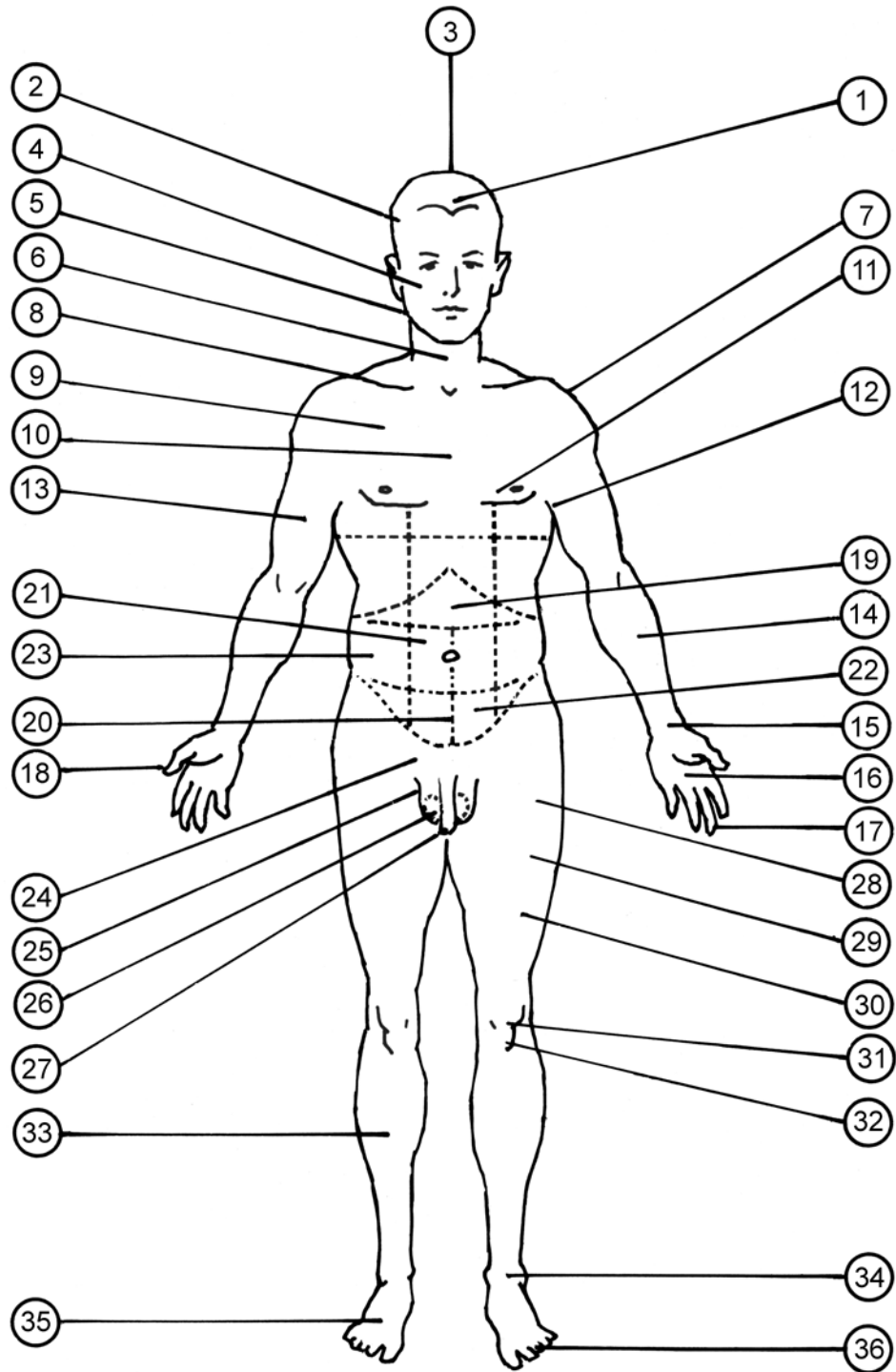
### OTHER ORGANS OF THE BODY

57. Artery	69. Lip, lower	81. Tongue
58. Bladder	70. Lip, upper	82. Tonsils
59. Brain	71. Liver	83. Tooth, teeth
60. Breast	72. Lungs	84. Urethra
61. Ear(s)	73. Mouth	85. Uterus, womb
62. Eye(s)	74. Nose	86. Vein
63. Eyelid(s)	75. Pancreas	87. Voice box (larynx)
64. Gall bladder	76. Prostate	88. Whole abdomen
65. Gullet (esophagus)	77. Rib(s)	89. Whole arm
66. Gums	78. Spleen	90. Whole back
67. Intestine	79. Stomach	91. Whole chest
68. Kidney	80. Throat	92. Whole leg

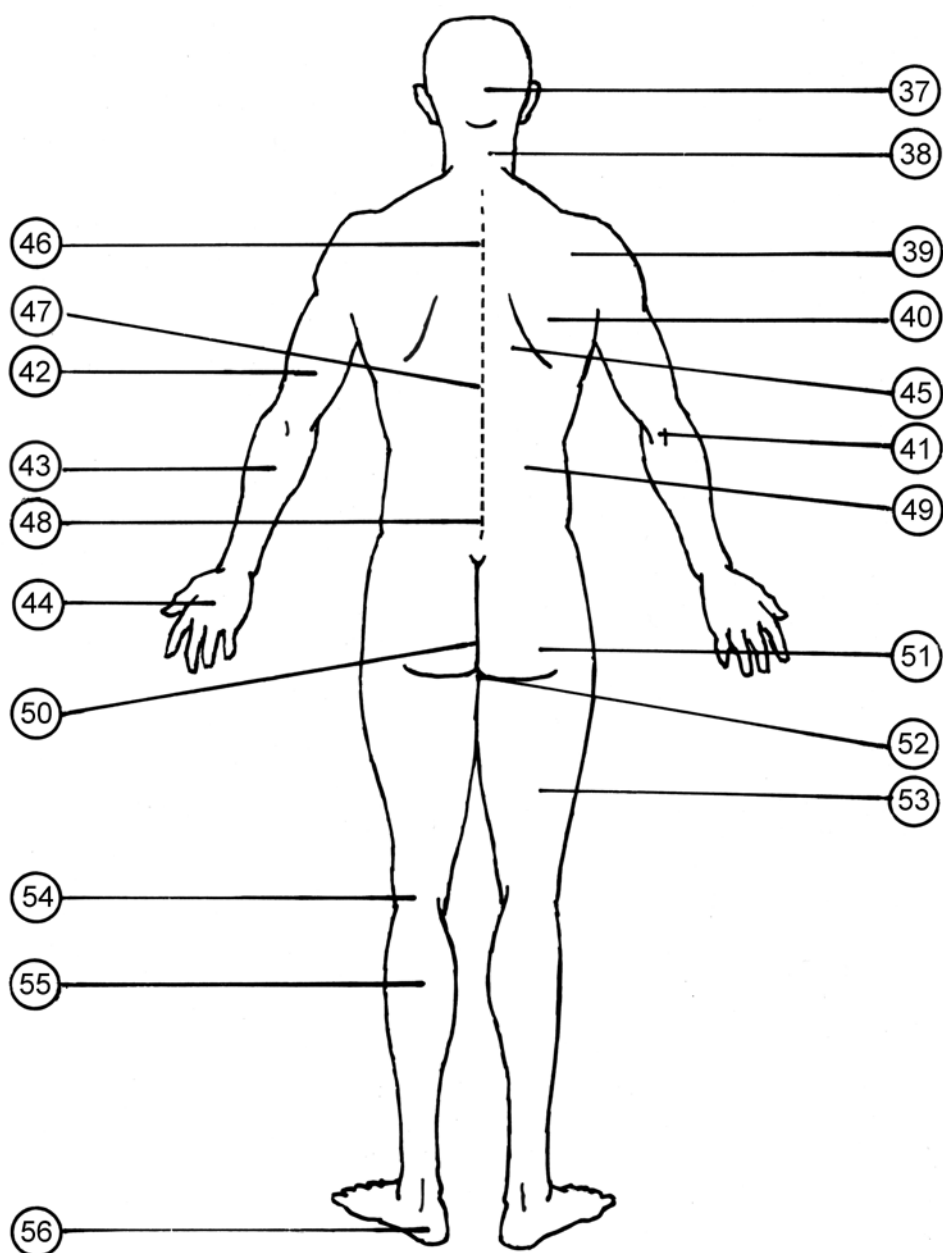
\* Indicate side as required.

SECTION 4.—TABLES OF COMPLEMENTS

FIGURE 1



**FIGURE 2**



SECTION 4.—TABLES OF COMPLEMENTS

**TABLE M-2—LIST OF COMMON DISEASES**

1. Abscess	32. Duodenal ulcer	64. Phlebitis
2. Alcoholism	33. Eczema	65. Piles
3. Allergic reaction	34. Erysipelas	66. Plague
4. Amoebic dysentery	35. Fits	67. Pleurisy
5. Angina pectoris	36. Gangrene	68. Pneumonia
6. Anthrax	37. Gastric ulcer	69. Poisoning (corrosive)
7. Apoplexy (stroke)	38. Gastroenteritis	70. Poisoning (noncorrosive)
8. Appendicitis	39. Gonorrhea	71. Poisoning (barbiturates)
9. Asthma	40. Gout	72. Poisoning (methyl alcohol)
10. Bacillary dysentery	41. Heat cramps	73. Poisoning (gases)
11. Boils	42. Heat exhaustion	74. Poliomyelitis
12. Bronchitis (acute)	43. Heat stroke	75. Prolapsed intervertebral disc (slipped disc)
13. Bronchitis (chronic)	44. Hepatitis	76. Pulmonary tuberculosis
14. Brucellosis	45. Hernia	77. Quinsy
15. Carbuncle	46. Hernia (irreducible)	78. Rheumatism
16. Cellulitis	47. Hernia (strangulated)	79. Rheumatic fever
17. Chancroid	48. Immersion foot	80. Scarlet fever
18. Chicken pox	49. Impetigo	81. Sciatica
19. Cholera	50. Insulin overdose	82. Shingles (herpes zoster)
20. Cirrhosis of the liver	51. Indigestion	83. Sinusitis
21. Concussion	52. Influenza	84. Shock
22. Compression of brain	53. Intestinal obstruction	85. Smallpox
23. Congestive heart failure	54. Kidney stone (renal colic)	86. Syphilis
24. Constipation	55. Laryngitis	87. Tetanus
25. Coronary thrombosis	56. Malaria	88. Tonsillitis
26. Cystitis (bladder inflammation)	57. Measles	89. Typhoid
27. Dengue	58. Meningitis	90. Typhus
28. Diabetes	59. Mental illness	91. Urethritis
29. Diabetic coma	60. Migraine	92. Urticaria (nettle rash)
30. Diphtheria	61. Mumps	93. Whooping cough
31. Drug reaction	62. Orchitis	94. Yellow fever
	63. Peritonitis	

**TABLE M-3—LIST OF MEDICAMENTS\*****FOR EXTERNAL USE**

- |   |   |
|---|---|
| 1. Auristillae Glyceris<br>Glycerin ear drops<br>EAR DROPS                              | 7. Naristillae Ephedrine<br>Norephedrine hydrochloride drops<br>NASAL DROPS                                   |
| 2. Guttae Sulfacetamidi<br>Sulfacetamide eye drops<br>ANTISEPTIC EYE DROPS              | 8. Paraffinum Molle Flavum<br>Yellow soft paraffin<br>SOFT PARAFFIN   |
| 3. Guttae Tetracainae<br>Tetracaine eye drops<br>ANAESTHETIC EYE DROPS                  | 9. Paraffinum Molle Flavum Carbasi Absorbentis<br>Tulle gras dressing (Paraffin gauze)<br>BURN/WOUND DRESSING |
| 4. Linimentum Methylis Salicylatis<br>Methyl salicylate liniment<br>SALICYLATE LINIMENT | 10. Unguentum Bacitracini<br>Bacitracin ointment<br>ANTIBIOTIC OINTMENT                                       |
| 5. Lotio Calaminae<br>Calamine Lotion<br>CALAMINE LOTION                                | 11. Unguentum Benzocaini Compositum<br>Compound benzocaine ointment<br>PILE OINTMENT                          |
| 6. Lotio Cetrimidi<br>Cetrimide lotion<br>ANTISEPTIC LOTION                             | 12. Unguentum Xylocaini Hydrochloridi<br>Mylocaine ointment<br>LOCAL ANAESTHETIC OINTMENT                     |

**FOR INTERNAL USE****Allergic Conditions**

13. Compressi Promethazini Hydrochloridi  
Promethazine hydrochloride tablets  
ANTI-HISTAMINE TABLETS  
(25 mg per tablet)
14. Injectio Adrenalini  
Adrenaline injection  
ADRENALINE (1 mg in "Ampins")

**CAUTION:** THIS INJECTION NO. 14 TO BE USED ONLY ON MEDICAL ADVICE BY RADIO EXCEPT IN CASE OF ANAPHYLACTIC SHOCK DUE TO PENICILLIN INJECTION.

**Antibiotics**

15. Capsulae Tetracyclini Hydrochloridi  
Tetracycline hydrochloride capsules  
TETRACYCLINE CAPSULES  
(250 mg per capsule)
16. Compressi Phenoxymethylpenicillini  
Phenoxymethylpenicillin

PENICILLIN TABLETS  
(125 mg per tablet)

17. Compressi Sulfadimidini  
Sulfadimidine tablets  
SULFONAMIDE TABLETS  
(500 mg per tablet)
18. Injectio Benzylpenicillini  
Procaine penicillin G  
PENICILLIN INJECTION  
(600,000 units per ampoule)
19. Injectio Streptomycini Sulfatis  
Streptomycin sulfate injection  
STREPTOMYCIN INJECTION  
(1,000 mg per ampoule)
20. Injectio Tetracyclini hydrochloridi  
Tetracycline hydrochloride  
TETRACYCLINE INJECTION  
(100 mg per ampoule)

---

\* Preparations listed may have been substituted by equivalent preparations in the ship's medicine chest. For the sake of uniformity, medicaments are indicated in the first place by their Latin denominations so that a correct translation can be found in each language.

## SECTION 4.—TABLES OF COMPLEMENTS

### Asthma

21. Compressi Aminophyllini  
Aminophylline tablets  
ASTHMA RELIEF TABLETS  
(300 mg per tablet)

**CAUTION:** THIS TABLET NO. 21 TO BE USED ONLY  
ON MEDICAL ADVICE BY RADIO.

22. Compressi Ephedrini Hydrochloridi  
Ephedrine Hydrochloride tablets  
EPHEDRINE TABLETS  
(30 mg per tablet)

23. Tinctura Benzoini Composita  
Tincture of benzoin compound  
INHALATION MIXTURE

### Cough

24. Compressi Codeini Phosphatis  
Codein phosphate tablets  
CODEIN TABLETS  
(15 mg per tablet)

25. Linctus Scillae Opiata  
Linctus of squill, opiate  
COUGH LINCTUS

### Diarrhea

26. Mistura Kaolini et Morphinae  
Kaolin and morphine mixture  
DIARRHEA MIXTURE

### Heart

27. Compressi Glycerylis Trinitratis  
Glycerin Trinitrate tablets  
HEART TABLETS  
(0.5 mg per tablet)

*NOTE: For congestive heart failure the following preparations are available on board ship, but they should be used only on medical advice transmitted in plain language and not by Code:*

Compressi Chlorothiazidi (Chlorothiazide) or equivalent (500 mg per tablet)  
Compressi Digoxin (Digoxin tablets) or equivalent (0.25 mg per tablet)

### Indigestion

28. Compressi Magnesii Trisilicas  
Magnesium trisilicate  
STOMACH TABLETS

### Laxatives

29. Compressi Colocyntidis et Jalapae Compositae

Counpound Colocynth and Jalap tablets  
VEGETABLE LAXATIVE TABLETS

30. Magnesii Hydroxidum  
Magnesium hydroxide mixture  
LIQUID LAXATIVE—"Milk of Magnesia"

### Malaria

31. Compressi Chloroquini Sulfatis  
Chloroquine sulfate tablets  
MALARIA TABLETS  
(200 mg per tablet)

### Pain

32. Compressi Acidi Acetylasalicylici  
Acetylsalicylic acid tablets  
ASPIRIN TABLETS  
(300 mg per tablet)

33. Injectio Morphini  
Morphine sulfate injection  
MORPHINE INJECTION  
(15 mg per ampoule)

### Sedation

34. Compressi Butobarbitali  
Butobarbitone tablets  
SEDATIVE TABLETS  
(100 mg per tablet)

35. Compressi Phenobarbitali  
Phenobarbitone tablets  
PHENOBARBITONE TABLETS  
(30 mg per tablet)

36. Compressi Chlorpromazini Hydrochloridi  
Chlorpromazine hydrochloride tablets  
TRANQUILLIZER TABLETS (LARGACTIL)  
(50 mg per tablet)

**CAUTION:** THIS TABLET NO. 36 TO BE USED ONLY  
ON MEDICAL ADVICE BY RADIO.

### Salt Depletion or Heat Cramps

37. Compressi Natrii Chloridi Solv  
Sodium chloride tablets  
SALT TABLETS  
(500 mg per tablet)

### Seasickness

38. Compressi Hyoscini Hydrobromidi  
Hysocine Hydrobromide tablets  
SEASICKNESS TABLETS  
(0.3 mg per tablet)