

2870. Do you think, with the surroundings of our Hospital, that the students who are turned out here will be likely to prove a credit to themselves and to us?—No, I do not.

2871. Do you agree with the authorities that have been quoted during the course of this inquiry that especial care should be taken with all the details of a hospital that has a medical school attached to it?—I certainly think so.

2872. Is the state of affairs which exists in our Hospital one that should pass muster, or do you think that it should be condemned?—I certainly think that it should be condemned.

2873. *The Chairman.*] That the Hospital in its present state should be at once condemned?—I think so.

2874. *Mr. Solomon.*] I may tell you that our Hospital has been in existence for over twenty-four years, in very much the same condition that it is in now. Would you consider after that lapse of time that with the state of affairs in the Hospital existing now it could be in anything like a healthy condition?—The Hospital at present is certainly in an unhealthy condition.

2875. Would the evils which at present affect the condition of the Hospital be likely to increase year by year, or remain much as they are now?—Be inclined to increase. I do not know that the life of a hospital ought to be so short as some people think. What I mean to say is that a hospital in a proper condition can live a much longer life than some people think.

2876. The objection to hospitals is not so much on account of the length of life as to the danger of their becoming impregnated with dangerous organisms. That is so, is it not?—So far as that goes there is very little to be feared if the surroundings are satisfactory.

2877. That is the reason which is suggested by authorities. Then you do not agree that so much force as some people attach should be given where the surroundings are unhealthy? Suppose that the surroundings are not healthy, or are such as you found in this Hospital, do you think that the remarks of the authorities which have been quoted to us would apply?—No, I do not.

2878. Do you think that it would be safe to have a long life in this Hospital?—No, I do not.

2879. *The Chairman.*] What I understand you to mean is this: that when a hospital becomes infected, then its life is done?—I do not exactly mean that. I think that a hospital that is infected can be purified to a very great extent. I know of the existence of hospitals at Home that have been condemned, but which are now in a thorough healthy condition.

2880. *Mr. Solomon.*] Do you think it is practicable, seeing the state of affairs which you found there to-day, to make a satisfactory hospital out of ours now?—I hardly think so.

2881. In the Christchurch Hospital are there special wards for special cases?—There are.

2882. For what classes of cases?—For abdominal sections there is always special wards reserved.

2883. Do you think that that is desirable?—It is highly desirable. In our Hospital there is a ward reserved for ophthalmic cases.

2884. Do you think it desirable to have special wards for special classes of cases?—I think it is certainly very desirable.

2885. You do not think that they should be treated in the same ward as ordinary surgical cases?—Certainly not.

2886. Nor do you think that gynecological cases should be treated in the same wards as ordinary surgical cases?—Certain gynecological cases I do not think will hurt much in the wards; but others ought certainly to have special rooms.

2887. Ovariectomy, for instance?—Certainly.

2888. Do you not think it safe to treat these cases in a general ward?—I do not think it safe or desirable.

2889. We have been told of severe operations being performed in the Dunedin Hospital in which there was danger of a secondary operation becoming necessary; and we were told of one case in which hemorrhage set in, and of a second operation being necessary to stop that hemorrhage. We have also been told that there is no provision made for a patient being removed from the operating-room into an adjoining room where the secondary operation might be satisfactorily performed. Do you think that it is wise that a patient should, after a severe operation like this—in this particular instance it was a "Tait"—be carried along a corridor, up a flight of stairs, and taken to her bed in a ward a long distance off?—I think that it is very undesirable. The patient's bed should be brought alongside the operating-table; and immediately after the operation she should be transferred to it, and be kept perfectly quiet, and not be shaken in any way.

2890. Do you agree that the wards should be so fitted that, if a secondary operation becomes necessary, the patient should not have to be taken back to the operating-room?—It does not make much matter to take the patient back to the operating-room: there is no danger in that.

2891. If, a primary operation having been performed, it becomes necessary to perform a secondary operation, the patient being in an extremely critical condition, would it not be absolutely necessary to perform that secondary operation as expeditiously as possible?—Yes.

2892. Does or does it not follow that the surroundings of the place in which a secondary operation is performed should be of the best; and that the operator should have the best means near at hand?—They should certainly be close at hand, without having to remove the patient.

2893. You were asked a question about a light, and you referred to an incandescent lamp?—It is a Wenham lamp that we have in our operating-room.

2894. *The Chairman.*] It is a fixed light?—Yes.

2895. *Mr. Solomon.*] Suppose a patient in your hospital were to undergo a severe operation: is there any room into which he or she would be taken?—To a room adjoining the operating-room. It has folding-doors. The patient is transferred from the operating-table to the bed, that is brought alongside the table, and then taken into this adjoining room.

2896. Is there any danger from exposure during the process of removal?—None at all. The temperature is regulated.