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THE HOSPITAL WORLD

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No. 1

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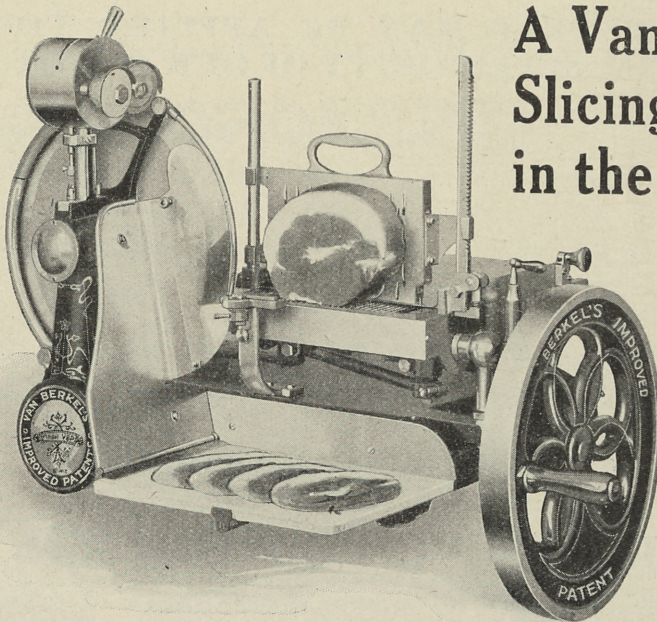
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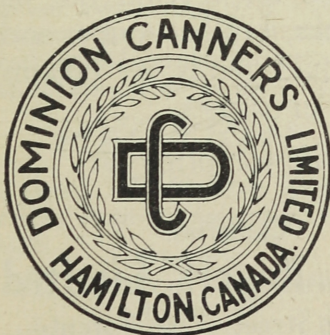
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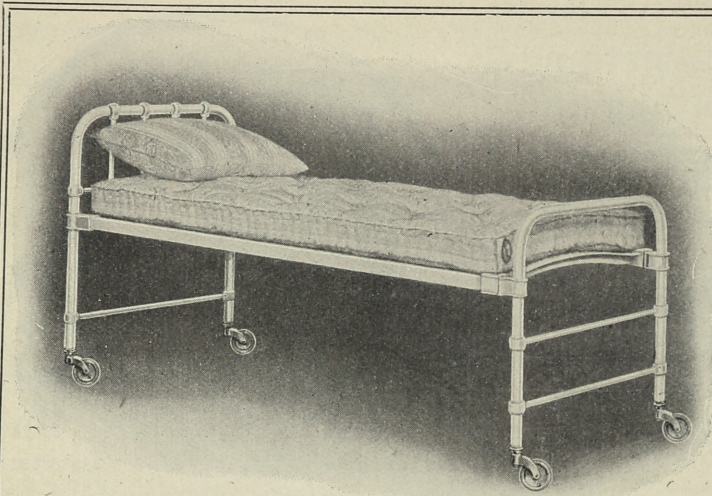
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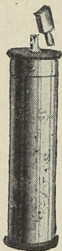
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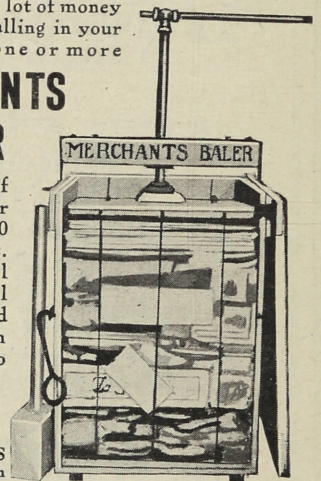
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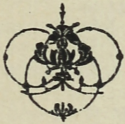
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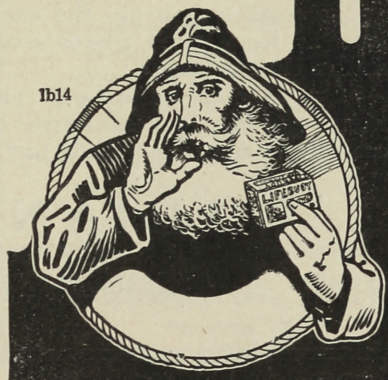
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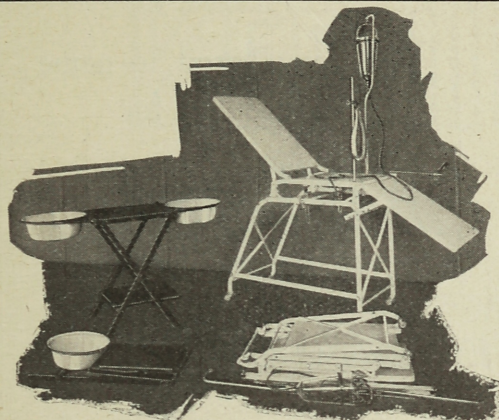
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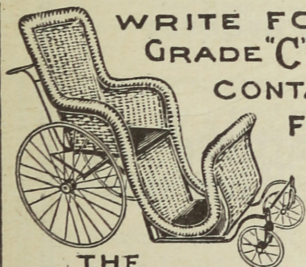
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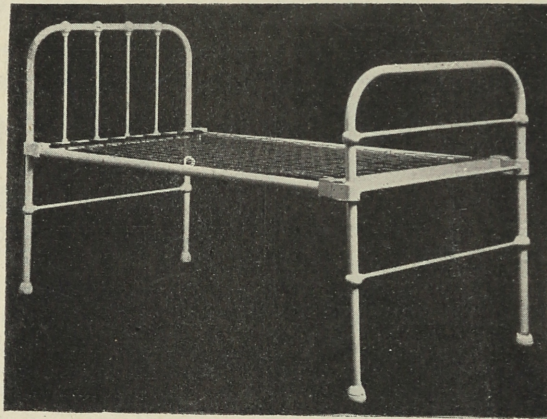


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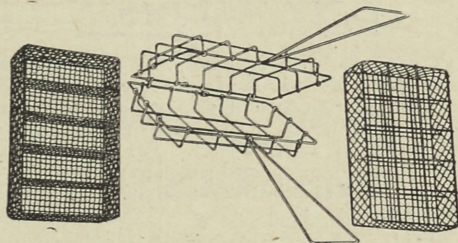
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HERBERT A. BRUCE, M.D., F.R.S.C., Surgeon, Toronto General Hospital, Toronto; H. A. BOYCE, M.D., Kingston, Ont.; H. E. WEBSTER, Esq., Superintendent the Royal Victoria Hospital, Montreal, P.Q.; W. A. YOUNG, M.D., L.R.C.P., London, Consultant, Toronto Hospital for Incurables, Toronto.

"Sociology"

J. T. GILMOUR, M.D., Warden, Central Prison, Guelph, Ont.

"Tuberculosis Sanatoria"

GEORGE D. PORTER, M.D., Toronto
J. H. HOLBROOK, M.B., Physician-in-Chief, Mountain Sanatorium, Hamilton, Ont.

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No. 1

Editorials

CHAIRMAN OF BOARD OF GOVERNORS OF TORONTO GENERAL HOSPITAL AND OTHERS KNIGHTED

AMONG the recipients of Birthday Honors in Canada recently conferred by His Majesty, appears the name of Mr. J. W. Flavelle, Chairman of the Imperial Mu-

nitions Board, who has had conferred upon him by His Majesty a Baronetcy. This will certainly meet with the approval of many Medical Men who have been in close touch with Sir Joseph Flavelle in his capacity as Chairman of the Board of Trustees of Toronto General Hospital.

Leaders in the Methodist Church of Canada claim him as a pillar of that denomination. He is one of its leading laymen, and takes a prominent part in the General Conference. The missionary interests of the Methodist Church have received a great deal of support from him.

A great deal of the success which characterized the reorganization and construction of the new General Hospital on College Street is due to his painstaking interest in the institution. It is declared that he, with his colleagues on the board, threw themselves into this work with so much energy and zeal that success was assured from the outset. The institution has passed through many trying periods, and but for the Board of Directors the city would probably not have possessed the magnificent pile of buildings it possesses to-day.

It was with pleasure that we noticed also the name of President R. A. Falconer, who has been made a Knight Commander of St. Michael and St. George. President Falconer has a large number of friends amongst Medical Men, who undoubtedly feel gratified that he has not been overlooked.

Robert Alexander Falconer, President of the University of Toronto, has occupied that position since 1907. He is one of the widest-known educationists in Canada, and since the beginning of the war has diligently given of his time in recruiting and other lines of patriotic work. While believing that the University has an important function to perform in training young Canadians in war time, he has given every assistance to the development of the military life among the students, announcing a few days ago that a military course will be part of

the work in the fall. This thought of service was uppermost in his mind when he said, in addressing the graduates at convocation a couple of weeks ago, "that you have learned that the educated man and woman serves his or her country in the highest and best sense when, with the education of what we may now call the lower grades, there goes an education in the conception of public service."

President Falconer was born at Charlottetown, P.E.I., on February 10, 1867, the son of Rev. Alex. F. Falconer, a Presbyterian clergyman. He has previously been honored by the King with the C.M.G. He studied in Scotland and Germany, and has been honored with the degree of Doctor of Laws by many universities. Prominent in Presbyterian Church work, he has served on many important committees. In addition, he has held office in the Lord's Day Alliance, the United Canadian Bible Society, and philanthropic organizations. He has become known as a writer on theological subjects.

Surgeon-General Eugene Fiset has also been honored by being made a Knight Bachelor.

He has occupied the position of Deputy Minister of Militia and Defence for Canada and Vice-President of the Militia Council. He was born in Rimouski, Que., in 1874, the son of Senator J. B. K. Fiset. He is a graduate of Laval University and was house surgeon in the London Throat Hospital. He joined the 89th Temiscouata and Rimouski Regiment as a Lieutenant in 1894 and transferred to the A.M.C. in 1899. In the South African War he was Assistant Surgeon of the 1st Canadian contingent and won honors. He was appointed Deputy Minister of Militia and Defence in 1906, and has been Hon. Surgeon to the Governor-General since 1904. He resides now in Ottawa. Sir Eugene Fiset had also conferred upon him recently by the French Government the Croix de Chevalier.

Lt.-Colonel W. B. Hendry, of Toronto, received the D. S. O. He went overseas with The University Base Hospital to Saloniki, and has been mentioned in despatches.

Canadian Hospitals

NURSES GRADUATE AT GENERAL HOSPITAL, TORONTO

THE nursing sisters, in their smart military uniforms, headed the almost numberless procession of trim figures that filed into the big hall at the General Hospital on May 18th for the graduating exercises. Next came the graduate nurses of the staff, all in white save for the black band on their caps; then the undergraduates in blue frocks with crisp white caps and aprons, the probationers in blue, too, but capless, and last of all, filling a block of seats by themselves, the new graduates, with new black bands on their white caps and bunches of red roses pinned to their aprons.

Mr. J. W. Flavelle, Chairman of the Board of Trustees, presided, and the Rev. G. C. Pidgeon offered the opening prayer.

Dr. J. A. Macdonald spoke for a few minutes on service and the motive which makes the service great. The profoundest motive, he said, and the only motive that can make the service great, is service for love. We never are great unless we love unselfishly and unless we serve by the grace and power of love.

Miss Jean I. Gunn, Superintendent of Nurses, gave the Thirty-fifth Annual Report of the Training School. Since it had been established, she said, 789 nurses had graduated. A number of these had married, some had died and others had been lost track of. Nine are now missionaries, 30 in public welfare work, 81 on active service overseas, 19 on military service at home, and two, Miss Annie Hartley, 1901, and Miss Grace Gray of 1907, have been decorated with the Royal Red Cross.

Miss Gunn expressed her satisfaction that the younger graduates were maintaining the interest in foreign missions that had been developed in Miss Snively's time.

In spite of difficult conditions, due to the war, the nurses had done excellent work and cheerfully put up with incon-

veniences, and the graduating class had stood high in their studies.

There had been 1,224 applications for entrance to the Training School during the year and 93 had been admitted on probation.

The following scholarships and prizes were presented by the donors: Scholarship of one year in the Social Service Department of the University, by the Board of Trustees of the Hospital and Mr. A. W. Austin, to Miss Elizabeth H. Moss, of Dundas; the Dr. James F. W. Ross scholarship for general proficiency, Miss Bessie Gordon McLean, Carleton Place; highest standing in examinations, Miss Helen M. Cartwright, Toronto; the Dr. K. C. McIlwraith prize in obstetrical nursing, Miss Evelyn Fraser, St. Anne's Bay, Jamaica; the Mrs. R. B. Hamilton prize for neatness in room, Miss Mary Keegan, of St. John's, Newfoundland; the Arthur McCollum Memorial Scholarship, given by Mrs. Chas. L. Kyle, for general proficiency in intermediate year, Miss Margaret Helen MacLennan, and in the same year the prize for highest standing in examinations was won by Miss Mildred J. Laschinger, of New Hamburg.

Mrs. J. W. Flavelle presented the school pins and diplomas to the graduates: Alda Marguerite Boland, Laura A. Beal, Margaret Bowman, Kathleen Baird, Irene Brayley, Mildred M. Browne, Irene Chiswell, Grace Agnes Campbell, Frances Carroll Coles, Isabel Mitchell Cartwright, Helen Marjorie Cartwright, Annie Grassie Creighton, Grace E. M. Cruise, Mabel Beatrice Crawford, E. Muriel Cresswell, Josephine Margaret Devins, Emily Mary Donald, Kate E. Deadman, Josie Christina Dymont, Gladys Elliott, Annie Edgar, Evelyn Fraser, Bertha M. Fife, Florence H. Glazier, Beatrice E. Green, Ruth Marie A. Hanna, Mabel Victoria Hicks, Maude R. Hurst, Elizabeth Jones, Mary Keegan, Marie M. Kastner, Elva M. Lavis, Kathleen F. Nevin Leslie, Florence G. Leadley, Maclena Lindsey, Jessie M. Livingstone, Vida B. Loughheed, Clara B. McBride, Mabel McKnight, Bessie Gordon Maclean, Kathleen McNamara, Mary Irene McNevin, Christine M. MacNain, Mary Christine MacCallum, Elizabeth Havergal Moss, Louise Gartside Moore, Katherine Meek, Mary Gwladys Peters, Irene

Reid, Margaret G. Small, Leslie Shearer, Eileen Mary Symons, Ethel A. Smithers, Ann Middleton Strang, E. Ethlene Scholey, Pearl Elizabeth Stephenson, Mary Ellen Steckley, Lillian Esther Thomas, Mary Olive Turner, Phyllis I. Temple, Edna Frances Veitch, Margaret Waters, Bertha C. Woolford, Flora M. Wilson, Gertrude J. Williams, Ethna Neil Wright, Mary Ann Wheeler, Gertrude I. Wellwood.

TORONTO WESTERN HOSPITAL DIPLOMAS

THE Toronto Western Hospital held their eighteenth graduating class of the Training School for Nurses in the board room on May 31st. Hon. W. D. McPherson presided.

A report of the school was given by the Superintendent of nurses, Miss Beatrice Ellis, and a short address by Major Dr. John McCullough, who spoke on the prevention of disease and the relation of the nurse thereto.

The diplomas and class pins were presented by Mrs. W. D. McPherson, the scholarships and prizes being presented by the donors.

A reception was held on the lawn for the relatives and friends of the graduates, which was followed by a dance in honor of the graduating class.

Among those to receive special award were Miss Mary Atkinson—scholarship for general proficiency—awarded by Dr. Albert MacDonald. Miss Isabel Shortreed, first prize for surgical technique, by Dr. Clouse; Miss Dorothy Prunner, second prize for surgical technique; Mrs. H. C. Tomlin, Miss Mary Atkinson, gold medal for general proficiency and obstetrics, presented by Dr. Stowe Gullen on behalf of the Ladies' Board. Miss Effie J. Smith, first prize for highest marks in anatomy, presented by Prof. John Ferguson. Miss Esther Barry, first prize, highest marks in surgery, presented by Dr. J. F. Hart; Miss Rebecca Bell, highest marks in medicine—Mrs. Thomas Findley, Miss Jessie J. Campbell, gold medal for general proficiency in the intermediate year by Dr. W. Custer Heggie. Miss Elgin L. Lough, prize for general proficiency in junior year, by Mrs. Thomas Crawford. Miss

Mary Atkinson, prize for highest marks in massage, by Miss Mary Dickson.

The following received diplomas: Miss Mary A. Atkinson, Holland Centre, Ont.; Miss Esther Baird Barrie, Toronto, Ont.; Miss Rebecca Bell, Pinkerton, Ont.; Miss Margaret M. Earls, Wroxeter, Ont.; Miss Ethel M. Kohler, Toronto; Miss Eva F. Linn, Belleville, Ont.; Miss Jean MacKenzie, Clarke, Ont.; Miss Estelle Norris, Goldstone, Ont.; Miss Mary Agnes Porter, Toronto; Miss Isabel M. Shortreed, Guelph, Ont.; Miss Elizabeth E. Shortreed, Guelph, Ont.; Miss Elina T. Johnson, Dartmoore, Ont.; Miss Minnie Steele, Toronto; Miss Dorothy C. Pruenner, Zurich, Ont.; Miss Lillian Turnstebel, Uxbridge, Ont.; Miss Effie J. Smith, Oshawa, Ont.

GRACE HOSPITAL, TORONTO, GRADUATES

THE Metropolitan Assembly Rooms were thronged on June 5th for the Graduating Exercises of Grace Hospital, Toronto, when, in the absence of Mr. E. R. Wood, Chairman of the Board of Governors, Mr. J. E. Atkinson occupied the chair.

There are thirty or more graduates of Grace Hospital serving with the colors, and some twenty of the staff doctors, while from seventy-five to eighty per cent. of the house surgeons are serving.

The address to the graduates was given by the Hon. W. D. McPherson, Provincial Secretary, who said it always afforded him pleasure to be at a function of this sort.

He paid a glowing tribute to nurses and their assiduity to their chosen profession. In his long practice in the courts, when cases came up in which nurses had to testify, their evidence always carried conviction to judge and jury, so clear and lucid was the manner in which it was given, with reticence where needed, and this invariably evoked congratulations from the judge. It proved, said the speaker, that nurses heeded the dignity of their calling.

Following the address, Miss Rowan administered the Florence Nightingale oath to the blue-uniformed, white-aproned nurses, "who are an extremely pretty bunch," to quote an

onlooking man. Mrs. W. H. Harris distributed the diplomas and school pins to the fourteen recipients, whose arms were filled with crimson roses presented by Mr. E. R. Wood, and the rest of the programme was as follows:

Presentation of staff's gold medal for highest standing in final examinations, to Miss Jessie Westwood, by Dr. R. C. Griffith; staff's silver medal for second place in final examinations, to Miss Zuliem E. Perrin, by Dr. J. H. McConnell; the Van der Smissen medal for general proficiency, to Miss Mary B. Cassie, by Dr. F. A. Cleland; Mr. R. B. Hamilton's prize for neatness to Miss Margaret McKinnon, by the donor; Dr. Herbert Holmes' prize for highest standing in anesthesia, to Miss Grace McQueen, by Dr. R. A. Stevenson; cases of instruments to the graduates from the Staff, by Dr. W. H. Harris; staff prize for highest standing in examination, second year, to Miss Lily Hall, by Dr. C. E. Treble; Staff's prize for highest standing in examinations, first year, to Miss Lula J. Dyer, by Dr. H. C. Wales; Dr. E. Rae's prize for skill in bandaging, to Miss Lucy Moors and Miss Winifred J. Boyes, by the donor; Dr. W. J. Defries' prize for highest standing in anatomy, first year, to Miss Lula J. Dyer, by Mrs. J. H. McConnell.

In the graduating class were: Mary Brown-Cassie, Shelburne; Zuliem Edwina Perrin, Bailieboro; Emma Dorothy McWilliams, Toronto; Jessie Louise Goodman, Toronto; Margaret McKinnon, Tiverton; Grace Kirkpatrick McQueen, Freerton; Jessie Westwood, Birmingham, England; Marjorie Maude Wilson, Toronto; Harriett E. Craig, Barrie; Mabel Beatrice McMaster, Cannington; Mabel Isabel Finlayson, Lorne; Jessie Rose MacLellan, Welland; Hannah Wilson, Wingham; Margaret Crosdale, Manchester, England.

NURSES GRADUATE AT K. AND W. HOSPITAL

ONE of the most successful graduation exercises ever held in connection with the Training School for Nurses of Kitchener-Waterloo Hospital was held on May 11th in Kitchener and Waterloo Collegiate Institute Assembly Hall. A large crowd was in attendance and the programme provided was of unusual

interest. The chair was occupied by J. B. Hughes, the veteran President of the Hospital Board, and the guest of honor was Hon. W. D. McPherson, Provincial Secretary, who delivered an eloquent address, during which he spoke of the increasing popularity of hospitals and their important relation to the war. The Provincial Secretary complimented Kitchener and Waterloo upon its excellent institution, which he had inspected during the afternoon. The address to the graduation class was delivered by Dr. T. H. Callahan, members of which were: Misses Katherine Cluthe, Doon; Nora Woolner, Kitchener; Jean L. Reynolds, Stayner; Emily V. Eames, Brantford; Margaret Murray, Galt; Corina Fleming, Stayner. The young ladies were recipients of books and prizes from the Hospital Board, the Ladies' Hospital Auxiliary, the Young Women's Auxiliary of Waterloo, and members of the medical staff. Miss F. Clement, Messrs. J. Ellis, W. Wegener, Oscar Rumpel and Dominion Rubber System Orchestra also took part in the programme.

NURSES GRADUATE AT THE GENERAL AND MARINE HOSPITAL, OWEN SOUND

THE graduating exercises in connection with the nurses' training class of the General and Marine Hospital, Owen Sound, took place in the Public Library on May 17th. The graduating class was composed of Misses Millie Evans, Owen Sound; Miss Hazel Falls, Rocklyn; Miss Isabel Henderson, Meady; Miss Lillian Thompson, Tara, and Misses Marie Smith and Harriet Warner, Cobourg. The Florence Nightingale pledge was administered to the graduates by Rev. W. J. Cadman.

COBOURG HOSPITAL GRADUATION

DR. N. A. POWELL, of Toronto, was the speaker at the graduation exercises of the Cobourg Hospital, which took place in the Opera House, Cobourg, on May 17th. Mr. J. D. Hayden, Chairman of the Hospital Board, presided. The hospital class pins were presented to the graduates: Miss Milligan, of Thes-

salon, and Miss Cole, of Plainville, by Mrs. Wm. Barnett and Mrs. J. T. Field. Dr. McNicholl presented them with their diplomas, and Col. Neil F. MacNachtan, C.V.O., presented them with surgical chatelaines in behalf of the Hospital Board. Miss Walsh is superintendent of the hospital.

SUIT AGAINST THE TORONTO WESTERN HOSPITAL

CLAIMING \$5,000.00 for the loss of his teeth, Henri Churni, an Austrian-Pole, entered suit last autumn against the Toronto Western Hospital, and the trial took place last month before Mr. Justice Latchford and a jury. On November 9th, 1916, the plaintiff was working in a munition factory at West Toronto and met with an injury to his eye. He had the eye dressed by a doctor for several days, but was finally admitted to the Western Hospital as a city patient. Whilst in the hospital, it was alleged, he was taken to the operating room and his teeth extracted under an anesthetic, without his consent being obtained. The defence put in by the hospital was that anything that was done to the plaintiff when in the hospital was with his consent and that the person who extracted the teeth was not an employee of the hospital and that the defendants, therefore, were not liable. Further, it was claimed that the Department of Public Health of the City of Toronto claims and exercises the right to examine, by a duly qualified dental surgeon, appointed by such Department, the teeth of all City-order patients admitted to the public wards of the hospitals, and to advise and consult with such patients with respect to the condition of their teeth.

The action was dismissed, the jury considering that sufficient evidence had been put in to prove that the plaintiff was aware that his teeth were to be removed, though he gave no written consent to this being done. Mr. Justice Latchford called the attention of the jury to the fact that the plaintiff had resided in Canada for twelve years, and had, therefore, sufficient knowledge of the English language to understand what was said to him.

Hospital Items

IT is the intention of the Army Medical authorities to move the staff of the Hamilton Hospital to Camp Borden, where they will be under the command of Capt. Macbeth. For the present the hospital duties at camp are being carried on by the Army Medical Training Corps; but when the new arrangement goes into effect they will be removed to headquarters.

TENT accommodation for 400 more patients is being erected at the camp hospital, and when the Toronto Base Hospital is taken over by the Military Hospitals Commission the intention is to send up to Camp Borden all the patients whose condition would permit their removal, leaving the remainder to be cared for by the Hospitals Commission.

THE appointment of the following officers to the Army Medical Corps Training Depot No. 2 has been approved provisionally: To be Captain, Lieut. A. E. Morgan, A.M.C.; to be Lieutenants, Frank Roy Smith, Harold John Irvine, Nicholson William Furey, Chas. R. McTavish, and Chas. Vincent Scott. The employment of Nursing Sisters Louise Montgomery, Mabel May Skinner, Georgina Mitchell and Olive Hatley at the Toronto Base Hospital has been approved.

THE plans have been prepared for a new St. Mary's Hospital which is to be built at Kitchener. It will consist of a main building of three storeys and a nurses' home for the Sisters, and, it is hoped, will be completed before the end of the present year.

ARRANGEMENTS have been made to increase the accommodation in the Galt Hospital by converting the present dining-room into a children's ward. It is also proposed to provide additional accommodation for the nurses, probably by building another cottage.

THE contracts have been let for the sanatorium at Fort Qu'Appelle, Sask., and building has been commenced. It will be remembered that it was the intention to build the Sanatorium in 1914 but the work was interrupted because of the war.

War Hospitals

HART HOUSE, TORONTO, TAKEN OVER BY THE MILITARY HOSPITALS COMMISSION

THROUGH the kindness of the trustees of the Massey estate, Hart House, on the University of Toronto site, is to be made available for work of the Military Hospitals Commission. With this building the Commission is enabled to undertake on a large scale the very important work of re-educating the men suffering from physical and mental disabilities. Mr. E. A. Bott of the Department of Psychology, University of Toronto, has been carrying on some of this work on a small scale in the Psychological Laboratory in the main University building. He and his three helpers will transfer their activities to Hart House, and work under the direction of the Military Hospitals Commission and the Army Medical Corps.

Captain E. Ryan, Chief Medical Officer for "D" unit, M.H.C. was engaged in work of this kind overseas, and when, at the request of Mr. S. A. Armstrong, Director of the M.H.C., he was recalled to Canada by the Army Medical Corps, one of the first requests he made was for the installation of work of this kind in Canada.

This work should not be confused with vocational re-education. This University re-education is for the purpose of instructing men with disability how to overcome it; for instance, if a man is partially paralyzed we have apparatus to ascertain the degree and area of insensitivity. We have also every apparatus by which a man is enabled to restore himself to normal. The laboratory showed great varieties of devices and objects which a soldier with an artificial leg, paralyzed arm or stiff finger works with. He is taught how to lift his artificial leg over hurdles, how to bring his finger and thumb together in a firm grip, and so on. Not until the soldier learns the use of his disabled member can he be taught how to apply it to a trade.

Hart House will be used in conjunction with the Orthopedic Hospital at North Toronto. The surgical phase of the crippled soldier's treatment will be carried on at North Toronto and the re-educational phase at Hart House. The Commission will arrange transportation facilities for moving men from building to building as may be found necessary.

Hart House was originally designed as a gift from the Massey estate to the University of Toronto for the use of the entire male student body. It was intended as a social centre where the informal education of the student would be carried on, the intention being to present the building completed, but when war broke out, during construction, the directors were slowed up, and the building has been used for military purposes ever since. The School of Musketry is in the north wing, and the re-education for crippled soldiers will be carried on in the south wing, where Mr. Bott says there are a number of individual rooms which ideally suit the work. Colonel Vincent Massey, one of the trustees who was moved to divert the building to the M.H.C. by his observation of some of its wonderful work at the University, states that the finishing of whatever portion of the works are required will be hastened.

NEW ORTHOPEDIC HOSPITAL, DAVISVILLE

THE first patients to occupy the new Orthopedic Military Hospital at North Toronto arrived in the city on May 25th, but owing to the seriousness of their condition were not tendered any civic reception. The patients numbered nineteen and were brought here in a special Hospital Car and removed from the station in ambulances. Capt. F. L. Thompson, formerly of Spadina Military Hospital, is the Medical Officer in charge, and with him are Capt. (Dr.) Leatherdale and Nursing Sister Powell. Dr. W. E. Gallie will direct the Orthopedic work, for which the institution is specially intended. Miss E. A. Sherwood is the organizing dietitian and will be succeeded by Miss Haslett. The Hospital is not yet fully equipped for a large number of patients, but the wards of the Booth Memorial Build-

ing are all ready and equipment is being installed as fast as the factories can deliver it. The artificial limb factory is on ground adjacent to the Hospital.

AMERICAN HOSPITAL UNIT ON WAY TO FRANCE

THE members of Northwestern University Hospital Unit No. 12, from Chicago, passing through Canada to France, were given a reception during their short stay in St. Thomas on May 17th. At noon the Daughters of the Empire served light refreshments, and the members of the convent presented each man with a British flag. Among the nurses in the party was Miss Eva Silcox, daughter of E. A. Silcox of Frome, near here, and whose brother, Trooper Hugh Silcox, fell at Vimy Ridge.

CANADIAN BASE HOSPITAL

A MAIN base hospital for Canadian troops probably will be established at Liverpool. It will provide accommodation for at least 1,500 convalescent Canadian soldiers. The site is now owned by church interests. It comprises sixteen acres.

THE number of men under the care of the Military Hospitals Commission increased from 5,952 to 6,515 in the first week of May.

The figures issued by the Commission show that on May 8th there were in the Convalescent Hospitals 2,155 men returned from overseas, and 435 camp men with 2,474 overseas and 1,140 camp men on the out-patients' lists, making a total of 5,504 convalescents.

In the Sanatoria for Tuberculosis on the same date there were 396 overseas and 212 camp men, besides six overseas and four camp men as out-patients, making a total of 618 under this heading.

At other institutions there were 307 overseas and 83 camp men, besides three overseas men as out-patients, a total of 393.

Military Hospital Notes

QUEEN ALEXANDRA attended the Canadian matinee at His Majesty's Théâtre, on May 11th, in aid of the Blinded Soldiers' Hospital. Four hundred wounded Canadians filled the pit. The remainder of the house was packed. Over \$2,000 was raised by auction of pictures.

ON Wednesday afternoon the Queen, with Princess Mary, visited the Haslar Royal Naval Hospital at Portsmouth, England, and opened a new block of buildings, a gift from the women of Canada to the navy. Her Majesty also opened an electro-therapeutic department, a war gift to the navy from the children of Johannesburg and the Rand.

THE beautiful home of the Returned Soldiers' Association at Kitchener, Ont., was formally opened on May 9th by Col. L. W. Shannon of No. 1 Military District, London, in the presence of a large and representative crowd.

To provide for the increasing number of returned soldiers desiring an agricultural training, the Government of Alberta has arranged to keep one of the Provincial Schools of Agriculture in operation throughout the year. In the ordinary course, these schools are closed from April 1st to November 1st.

The school chosen is situated at Olds, 58 miles north of Calgary, on the Edmonton line. There the men will receive twelve months' instruction, with the option of taking it either continuously for a summer and a winter, or in two winter courses separated by an interval which they can spend on a farm.

In Saskatchewan the Commission has made arrangements by which the returned men will be trained at the Agricultural College of the Provincial University at Saskatoon. Courses of instruction, shorter and more intensive than those provided for ordinary students, have been planned for the ex-soldiers.

In Manitoba the Military Hospitals Commission has taken over the old Agricultural College at Winnipeg. There soldiers will be able to get instruction and practice in many branches of land work.

MRS. W. A. A. KIP, JR., of South Orange, N.J., has offered her services to the Military Hospitals Commission, and her offer includes one of the Thousand Islands, half a dozen buildings suitable for a Convalescent Hospital, and a personal staff to conduct the institution. As the terms of the offer include the paying of all bills, it is likely that the Military Hospitals Commission will accept it.

THE trustees of Pickering College turned over the keys of the institution to the military authorities at Ottawa on May 21st, since which date Quartermaster Hill, a returned wounded soldier, has been in charge. Several alterations have been made in the building and several carloads of furniture have arrived. Fifty beds which were previously used in the college are being utilized by the military authorities, but the balance of the furniture has been stored in the attic. The premises will be used for wounded and invalided soldiers, and it is anticipated that the Newmarket people will provide entertainments for the patients from time to time.

THE United States, as distinguished from individual American citizens, commenced on May 25th their active participation in the war on the French front. The Star Spangled Banner has long been seen flying from ambulances admirably equipped and gallantly served within the zone of fire by ever-growing bands of young volunteers, and at the rear by some of the most skilled physicians in the New World: Now a larger national effort commences. It was small but good and characteristic—a convoy of American motor transport service consisting of five-ton waggons of the best type, driven by khaki-clad youths, most of them undergraduates of Cornell University. They left their Base Camp on May 24th under Capt. Tinkham, who won the French War Cross for his work with the Verdun ambulances. Other sections are now in training in France, in which Harvard, Yale, Chicago and other Universities will be specially represented, preparatory to the arrival of the regular army units.

Capt. C. A. Publow, C.A.M.C., of Picton, Ont., has been appointed Adjutant of the Bramshott Military Hospital.

Capt. (Dr.) M. M. Crawford of the Staff of the Orpington Hospital, Kent, England, has been promoted to the rank of Major.

It is reported that an offer of a Base Hospital for service in France has been made to the Government by the medical men of Winnipeg.

Lieut.-Col. Walter McKeown, Toronto, who was on the Pension Board in England for nearly two years, has been assigned to surgical duty at the Kitchener Hospital, Brighton, England.

Dr. W. T. Connell, Professor of Pathology, Bacteriology, and Sanitary Science in Queen's University, has been appointed to the command of the new Queen's Military Hospital at Kingston, Ont.

Organization of a Canadian Military Hospital at Basingstoke is authorized, with Col. J. A. Roberts, Toronto, as commandant. A Canadian Military Hospital at Broadstairs is authorized as a convalescent officers' hospital, with Lieut.-Col. Perry Goldsmith, Toronto, as commandant.

Lieut.-Col. T. P. Bradley, C.A.M.C., of Sarnia, Ont., who went overseas as medical officer of the 149th Battalion, is now second in command of the Convalescent Hospital at Buxton, Derbyshire, England.

Capt. John Thomson MacCurdy, B.A., a graduate of University College in 1908, has been given an important staff appointment at the Maida Vale Military Hospital, Hyde Park, London, England. Capt. MacCurdy is a son of Professor MacCurdy, who was formerly on the staff of Toronto University.

Personals

DR. J. G. WRIGHT has been appointed Medical Superintendent of the Kingston General Hospital. Dr. Wright was for some time on the staff of Rockwood Hospital for the Insane.

The Council of the College of Physicians and Surgeons of Ontario have announced the result of the May examinations, as follows:

Howard Ryerson Adams, R. R. No. 2, Freeman; Norman E. Betzner, 359 Fairford Street, Moose Jaw, Sask.; York Blayney, Toronto General Hospital; Arthur John Boyce, Goderich; Ernest Alfred Broughton, Whitby; William Elmer Brown, R. R. No. 3, Gananoque; Frederick John H. Campbell, 845 Queen's Avenue, London; Thomas Fitzroy Cartar, Queen's University, Kingston; Thomas Crossan Clark, 29 Cross Street, Dundas, Ont.; Robert Dennis Collier, Picton; Isaac Cohen, Sault Ste. Marie; Wilmer Lloyd Denney, 610 Dundas Street, London; John Ferguson Doyle, 398 Brock Street, Kingston; William Harold Ernest Vernon Duffett, Adolphustown; Duncan D. Ferguson, R. R. No. 6, St. Thomas; Hans Olding Foucar, 598 Princess Avenue, London; Nicholson William Furey, 71 Brooklyn Avenue, Toronto; George D. Gordon, 240 Alfred Street, Kingston; Malcolm Geo. Graham, Rodney; William Lindsay Graydon, 527 Brock Avenue, Toronto; Arnold Grisdale, 226 Victoria Avenue, Niagara Falls; James Harrison Howell, Welland; Leslie Melrose Jones, Chesley; James Albert Key, R. R. No. 2, Shanty Bay; George Franklin Laughlen, Point Anne; Patrick Leacy, Lanark; Frederick William Leech, Newboro'; Archibald Edward MacKenzie, 148 Westminster Avenue, Toronto; John William MacKenzie, 590 Indian Road, Toronto; Geo. Walter MacNeill, 1372 4th Avenue, Owen Sound; Thomas Nahum Marcellus, Finch; William Mervyn Martyn, North Bay; William Thos. Burton Mitchell, Watford; Clarence John Archibald McKillop, 20 East Street,

St. Thomas; William Charles O'Donoghue, Smith's Falls; Albert Phelps, 169 Gladstone Avenue, Windsor; Harry Albin Rawlings, 28 Dalton Road, Toronto; Joseph Whittier Reddick, 437 Crawford Street, Toronto; John Alexander Renwick, 568 Wellington Street, London; Percy Roy Shannon, 9 Elizabeth Street, St. Thomas; Frank Roy Smith, Box 226, Barrie; Donald Jabez Taitt, 814 Pacific Street, Brooklyn, New York; Charles Archibald Wells, 10 Alhambra Avenue, Toronto; Percival A. Williams, 4 Lamport Avenue, Toronto; James McStay Young, R. R. No. 2, London; Robert Stanley Murray, 35 Glenmorris Street, Galt.

At a recent meeting in New York of the American Section of the International Association of the Medical Museums, and which was largely attended, Dr. Oskar Klotz, Professor of Pathology and Bacteriology at Pittsburg, was elected President. The Association, through him as President, wired its services to Washington in the present emergency. Dr. Klotz expects to sail for France next month in charge of a Hospital Unit. He is a graduate of the University of Toronto; a son of Dr. Otto Klotz, Dominion Astronomer, of Ottawa, and grandson of the late Otto Klotz, well-known to a past generation as an ardent supporter of British traditions.

The Medical Alumnae of the University of Toronto gave a very enjoyable tea at the Sherbourne House Club on May 19th, in honor of the women students in Medicine at the University. Dr. Helen MacMurchy, the President, received, and Dr. Stowe Gullen poured coffee. Among those present were: Miss Bollert, Dr. Hume, Dr. Isabella Wood, Dr. Catherine Woodhouse, Dr. Skinner Gordon, Dr. Margaret Gordon, Dr. Jane Sproule, Dr. M. Calder, of Wingham; Dr. Jennie Smillie, Dr. Dorothea Orr, Dr. E. R. Gray, Dr. Burt-Sherratt, Mrs. Hudson, Mrs. Henderson, Mrs. George Biggs, Dr. McConnell, Dr. Cunningham, Dr. Ida Lynd.

Selected Articles

SOME HOSPITAL PROBLEMS

LAWRENCE W. LITTIG, A.M., M.D., M.R.C.S., DAVENPORT,
IOWA.

THE investigation and classification of hospitals, as now proposed by several agencies, is important, and promises good for both medicine and surgery.

Never have there been so many good surgeons as now, never has surgery been so well done, never have the results been more brilliant. It would be equally true to say that never has there been so much ill-advised operative interference, with such disastrous results, as now.

Of the factors which make for good surgery, the modern, well equipped, well managed hospital takes first rank. Here is found every aid and incentive to better and yet better work; but well equipped as it may be in things material, the hospital which places its wards and its operating rooms at the disposal of all alike is a menace to the community. I refer to the open hospital as usually conducted in communities of from 3,000 to 100,000 inhabitants. Any criticism or suggestion I may make will be confined to such hospitals and will not refer to large city hospitals or to hospitals connected with medical schools. The open hospitals permit any practitioner to assume the gravest responsibilities within their walls, place their facilities at his disposal, and even provide him with a camera obscura which protects both him and the hospital from criticism and, too often, from well-merited censure.

While it is true that the internist must face the most difficult and perplexing problems, yet there will always remain this difference between the internist and the surgeon: The internist's sins are those of omission, while the surgeon's sins

too often are the sins of commission. Of the good done by surgery, I shall say nothing. Of the harm done in the name of surgery, there is no need to say much. How often we have listened to the story of repeated operations, the first perhaps poorly done, or wide of the mark, with a progressive aggravation of symptoms! We have all heard of the young married woman whose pelvis has been "cleaned out" by some operator. The open hospital is responsible for most of such work done in the name of surgery. I know of such a hospital with fifty beds, to the wards and operating rooms of which a hundred general practitioners of medicine have the privilege of bringing their patients. My informant reported this particular hospital as a closed hospital. When asked to name one physician within a radius of 25 miles who is denied the privileges of the hospital, he was unable to do so. He compromised by insisting that the hospital is not wide open, although he did not explain how it could be opened wider. That all the physicians in a given community are doing good work, within or without a hospital, is not claimed by any one.

THE STAFF.

It has been said that "the staff makes the hospital," or, "as is the staff, so is the hospital." While practically true, these statements do not apply to the open hospital, because most open hospitals either have no staff at all, or have a nominal staff which meets "once in ten years," or "when a row is on." The great characteristic of the usual open hospital staff is an all pervading inertia, the most effective barrier to progress, and an utter failure to grasp the prime function of a hospital staff.

As I said in a former paper, written after investigating the hospital situation in a midwestern state: What is the chief function of a hospital staff, "The answer is very simple. The chief function of a hospital is to educate itself, individually and collectively, better to discharge the duties and obligations incurred by its members in accepting staff appointments. To serve its purpose, a staff must hold frequent meetings, at which not only hospital problems, but more especially medical problems must be discussed. Interesting cases must be presented

for consideration. As failures are often more instructive than successes, these should be reported for free discussion. It is especially important that the causes of 'accidents' be thoroughly investigated and the responsibility fixed. Staff members should make frequent visits to medical centres, and every member making such a visit should present whatever is worthy for the benefit of his fellows. The operating room should be open to staff members and assistants at all times, and all operations should be bulletined. A weekly staff conference should be the rule in every hospital. As many members as possible should be invited to study interesting cases in the wards. Necropsies should be bulletined, and pathologic specimens carefully studied. In this way the experience of each staff member will become larger. It might be well for the staff to organize itself into a current medical literature club, the better to keep abreast of the times, and also to have its members present synthetic reviews on various topics, thus taking an active part in medical society work. With the improvement of the staff individually and collectively as the prime motive in staff organization, increased staff and hospital efficiency, and better service to the patient will be sure to come."

All this may seem elementary to those connected with great teaching and research hospitals, yet I failed to find one open hospital in the Middle West in which the staff either realized its opportunities or profited by them, along the lines suggested. Real progress will not be possible in these hospitals until the staff members realize their delinquency, and become fired with a desire and an ambition to improve themselves. To feel the spirit of progress, and to feel the need of improvement are the all important first steps which will lead to better things. Unfortunately, this spirit is still unborn in the great majority of open hospitals in the Middle West.

ROENTGENOLOGIC AND LABORATORY SERVICE.

The introduction of a good Roentgen-ray apparatus, and the establishment of clinical laboratories have acted as soporifics rather than as stimulants. It matters not that the ambitious operator reads into roentgenograms, even in bone cases, whatever his fancy may suggest; or that the laboratory reports are

amateurish, or their interpretation anything but correct. Only recently I heard the president of a county medical society, in his retiring address, say: "With the X-ray and the laboratory, we are all equal; all of us can do our own work; consultants are no longer necessary."

Nothing can be hoped from men who blindly follow laboratory diagnoses instead of doing independent thinking. The day has not yet arrived, and never will arrive, when the Roentgen-ray and the laboratory will make all men equal.

THE PUBLIC AND THE OPEN HOSPITAL.

The evils of the open hospital of to-day do not appear to be self limited; there is no promise that they will be corrected from within; their eradication seems to demand some powerful influence from without. Publicity is the only efficient weapon. Once fully cognizant of the relative merit of different available hospitals, the public will make its influence sharply felt, to the advantage of the better hospital. If the hospitals of a given community are not high grade, the sick of that community, whenever possible, will seek relief in better hospitals, wherever they may be.

Evidence that the public is taking notice is furnished by the situation in one Middle West community: A religious organization built a hospital, accepting contributions from nearby practitioners, with the distinct understanding, it is said, that the hospital would be open to all physicians for the care and treatment of patients. One of the contributing practitioners, again, "it is said," made a contribution so much larger than any of the others that he was elected surgeon to the hospital. The surgical patients of the other practitioners were not accepted unless the hospital surgeon assisted at the operation, and received half of the fee. The hospital management, appealed to by the disconcerted practitioners, sustained the hospital surgeon. The courts will now be asked to decide whether a hospital board, after accepting contributions with the understanding that all practitioners be accorded equal privileges, may select one man to do all the surgery.

A successful hospital in one of the old middle states pays its surgeon a fixed salary; he resides in the hospital, and does all the general surgery.

THE RESTRICTED HOSPITAL.

These two instances are the antitheses of the open hospital. Closed hospitals may be undemocratic, they may not promise the best for either the profession at large or for the general public; but somewhere between them and the wide-open hospital there will be found a plan which will give every properly trained and right minded man an opportunity to work out his destiny, and which will protect the community. The open hospital must be transformed into a restricted hospital, and by a method that is fair—such a one as this: When a properly trained but untried licensed practitioner asks to use the operating room, the answer will be: "Yes, but like every other man operating in this house, you will bulletin your operation the evening before. The superintendent of the hospital and one or more staff members may be present. You are on trial, but so long as you have any privileges here, you will have all the privileges. You are welcome in the operating room when others operate, and at weekly staff conferences. If your work is satisfactory, you may come again, and after a few years you may be elected to staff membership. But if your work is not satisfactory, why, we shall regretfully inform you that we have no unoccupied beds. This is not a closed hospital, but it is a restricted hospital."

I believe that the remedy is in sight, and that the next few years will witness much better work done in the type of hospital under consideration. The agencies which will bring about the desired change are several. As stated above, publicity is the most efficient weapon. A hospital management or a hospital staff which fails to react to ordinary stimuli will promptly take notice when the standing of the hospital in the community is menaced. Investigation and classification of hospitals, as planned by the American College of Surgeons, promises splendid results. I know that even the possibility of such action by the college has been productive of good.

THE HOSPITAL FIFTH YEAR.

Another agency which cannot fail to make its influence felt, perhaps even more sharply than the American College of Surgeons, is the hospital fifth year, soon to be required by both medical schools and State examining boards. Minnesota, Penn-

sylvania, New Jersey, North Dakota, Illinois and Rhode Island have already taken definite action. The hospital fifth year not only will have a beneficent influence on the candidate for the degree and for the State license, but also will make it necessary for both medical schools and state boards to know whether or not the work done in a given hospital entitles it to recognition. The schools and the state boards must investigate the hospitals seeking internes. These keen-eyed young internes will report back to the medical school, and, possibly, to the state board. Their influence on the hospital will be most salutary.

THE NURSES' TRAINING SCHOOLS.

Many hospitals, however, do not employ internes, and these will not be influenced by the hospital fifth year, or by the medical schools. The American College of Surgeons can reach them, but there is one other opening which will enable state boards to investigate and largely control them. All of these hospitals have training schools, and every graduate of the training school must present herself before the state board for examination, to secure her certificate of registration. This gives the board the opportunity and the right to acquaint itself with the work done in the school, to know whether the young women seeking recognition have been properly instructed, or whether they have been chiefly useful as revenue producers, by being assigned as special nurses to private patients, at 15 or 20 dollars per week, and this while still on probation. I have known this to be done, not once but repeatedly. I have known a young woman to write her parents during the third month of her training, while still a probationer, that she was getting along famously, having been assigned to "special" duty, and all this in a hospital pretending skilled service to the sick, but really conducting its training school for revenue.

I should like to say, "As is the training school, so is the hospital," because a good training school in a poor hospital is unthinkable, and the converse holds equally true. The state boards cannot classify hospitals, because the friends of a discredited hospital would immediately rise in arms, would term the action of the board arbitrary and unfair, and would set in motion political machinery embarrassing to the board, or to those

members of the board considered responsible. But the board can inspect the training school, and carefully examine all applicants for state license. Should candidates be sent back for three or six months' additional preparation, neither the hospital itself nor its friends could protest without directing attention to the shortcomings of the training school.

It sometimes happens that a young woman, early in her course in training, comes to a realization of the fact that the instruction she is receiving is far from satisfactory. Let her try to gain admission to some other school, even if willing to forfeit the time already spent in training, and she will apply to many before attaining her object, if she succeeds at all. She will be requested to present a satisfactory certificate from the head of the school in which she is a pupil, and begin again as a probationer. The second requirement is not so objectionable; in fact, in many cases it is entirely reasonable; but an "honorable discharge" is not always to be had for the asking. The candidate for admission to the training school is on trial for three months, and at the end of this time she may be received or may be sent away. Would it not be fair that she be given a certificate at this time, stating that her probationary period has been satisfactory, and be granted the option to remain or to seek training elsewhere? These credentials might not be accepted by other schools; but they would be equivalent to an "honorable discharge," and enable her to enter another school without being required to ask her principal for a certificate of character and class standing, difficult to obtain should work be crowding and nurses none too plenty, or an exodus of nurses feared. More likely, she would be branded as a disloyal discontent, and the desired credentials refused. To be accused of disloyalty and discontent covers a multitude of virtues, in a training school pupil.

It is manifestly unfair to compel an inexperienced but intelligent young woman to spend three years in an inferior school just because she made a poor selection at the outset. The present arrangement is much in favor of the poorer hospitals and poorer schools. Their pupil nurses simply cannot get away, even when willing to forfeit all the time already spent in training. At my request, a young woman wrote twenty-five letters

to as many different hospital training schools, asking for admission, and stating that she had spent one year in a local school, but that she felt she was not receiving the training she desired. Twenty-five replies were received, but not one school would accept her. The usual answers were, "We do not accept pupils from other schools," "We will not consider your application at all so long as you are in another school," or "You must first secure an honorable discharge from the school you are now attending." In no school would there be a vacancy for months. She had started wrong, and there was nothing to do but remain where she said she had begun. Only a few days ago, a hospital director, a physician, expressed himself thus on this point: "The record and standing of every nurse ought to be in writing, and given her whenever desired. As matters now stand, the intelligent, ambitious girl who comes to a realization of the fact that the training she is receiving is very inferior will not be received by another school, as the necessary papers will most likely be denied her, especially if other trainers are apt to follow."

In this great democratic country of ours, only the young woman in a training school is subjected to such thralldom. It is not fair. Of all women, none are quite so helpless as the pupil in a training school. Of all women, few are more autocratic, few more relentless, than the average head of the training school. It is quite time that a more liberal spirit should make itself felt in behalf of the young woman in training. The American Hospital Association might well consider this matter.

A NATIONAL BENEFACTOR

THESE stirring times recall in some respects the days of good Queen Bess, when great fights were fought in England's name on sea and land. The men of Devon were the heroes of the Elizabethan age. They have been immortalized in song and story. Kingsley's "Westward Ho!" tells of some of their valiant deeds, and it is with justifiable pride that Devonshire men now sing:

Spirits of old-world heroes wake,
 By river and cove and hoe;
 Grenville, Hawkins, Raleigh and Drake
 And a thousand more we know.

Great would be the amusement of those knights of old if they could revisit the land of their birth in these wonderful days. What a grand time Raleigh would have! He it was who first grew potatoes in the old land. After discovering them on one of his famous expeditions he planted them on an estate in Ireland, which had been presented to him by his Queen. The French named them "the apple of the earth," and now they are so much in demand they are sometimes called "underground strawberries."

From the modern point of view Sir Walter Raleigh conferred an even greater blessing on the nation through another of his discoveries. He found tobacco on the plantations of Virginia in the sixteenth century, learnt the joy of smoking, and introduced the English people to its benefits. It is related that he one night walked into the Mermaid Tavern in London and invited all present to smoke. Ben Jonson was there and after the first few puffs this is what "rare Ben" had to say: "Tobacco, I do assert, is the most soothing, sovereign and precious weed that ever our dear old Mother Earth tendered to the use of man! Sir Walter, your health!"

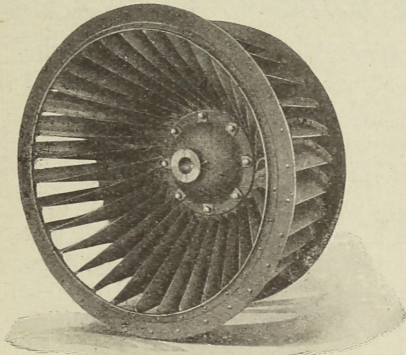
Historians say that Columbus was the first European to discover tobacco. Some give to Sir Francis Drake the credit of carrying it to England, and there is no doubt that it was through the enterprise of those two great Devonians—Sir Walter Raleigh and Sir Francis Drake—that it became a fashionable luxury with the Englishmen of their day.

It is interesting to note that the first use of tobacco seen and recorded by civilization was in the form of a cigarette. History tells us that on the first voyage of Columbus, in 1492, two of his sailors were despatched to explore the Island of San Domingo. They found that the natives carried "small brands of fire" from which they breathed smoke, and on further investigation it was discovered that these "brands" consisted of leaves of tobacco rolled in strips of maize.

With first place in the historical records, the cigarette is now supreme as the purest form in which tobacco can be smoked. Charles F. Loomis has worthily sung its praises in these lines:"

My cigarette! The amulet
 My cigarette! My amulet
 That charms afar unrest and sorrow,
 The magic wand that, far beyond
 To-day, can conjure up to-morrow.
 Like love's desire, thy crown of fire
 So softly with the twilight blending;
 And ah! meseems, a poet's dreams
 Are in thy wreaths of smoke ascending.

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F. MOQUIN BROTHERS, 120 St. Denis Street, Montreal, announce to the Medical Profession in Ontario that they have special facilities for the shipment of wines to Ontario purchasers. Their advertisement appears on page xii of this issue, and Physicians will find some interesting information by referring to the same—*Nuf sed.*

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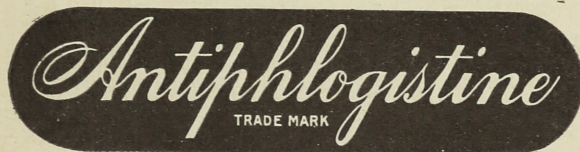
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essential factors towards interfering with our well being, and that stimulating cell activities to increased vitality, by the use of bacterial vaccines is one of the important means of defence. Vaccines which contain the most common infecting organisms serve this purpose best. A combined vaccine containing colon bacilli, streptococci, pneumococci and staphylococci is the one usually employed. Bacterial vaccines consist essentially of bacterial proteins and are given in such extremely small doses that no harmful results can follow their administration.

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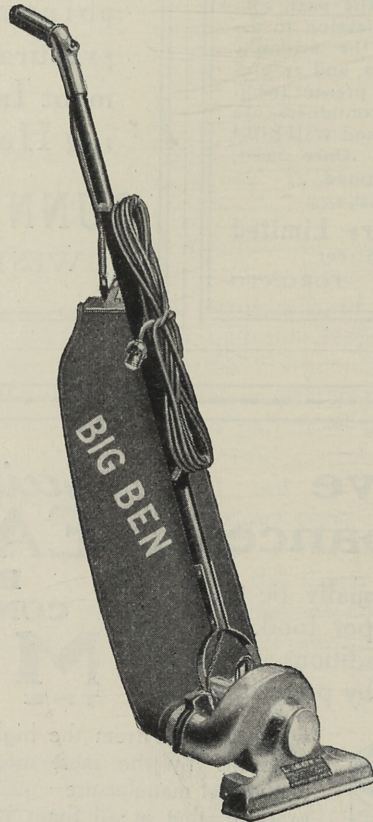
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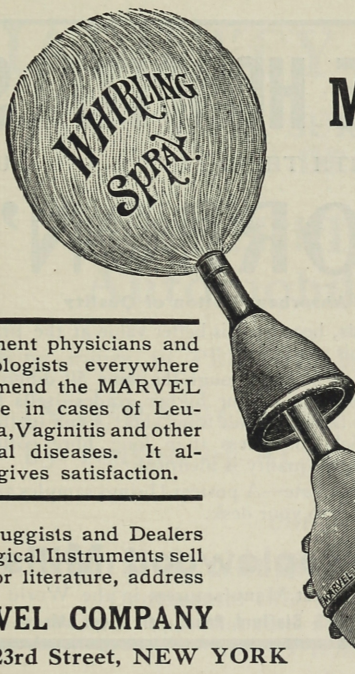
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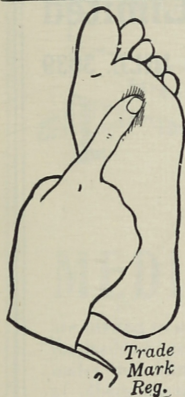
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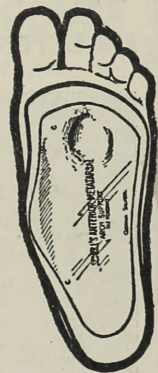
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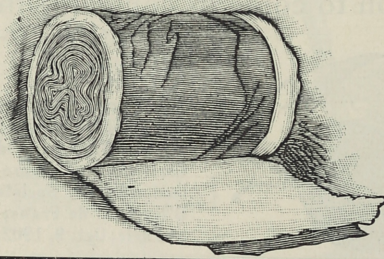
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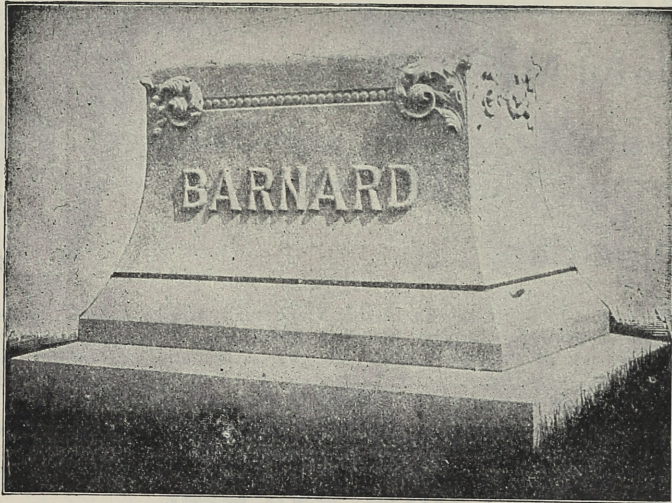
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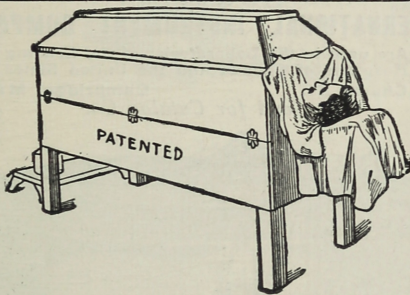
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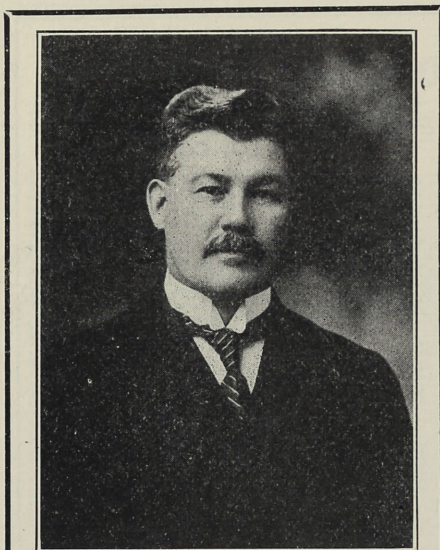
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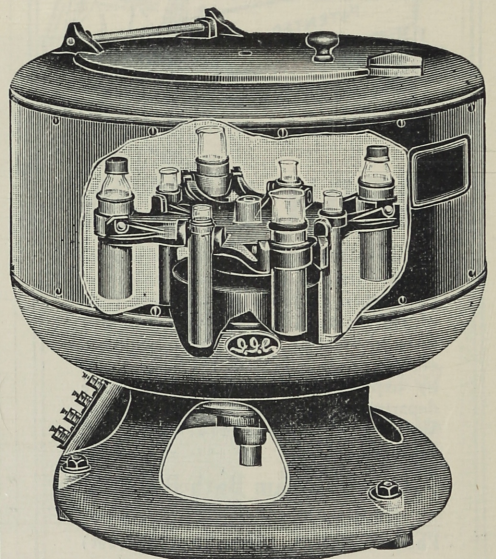
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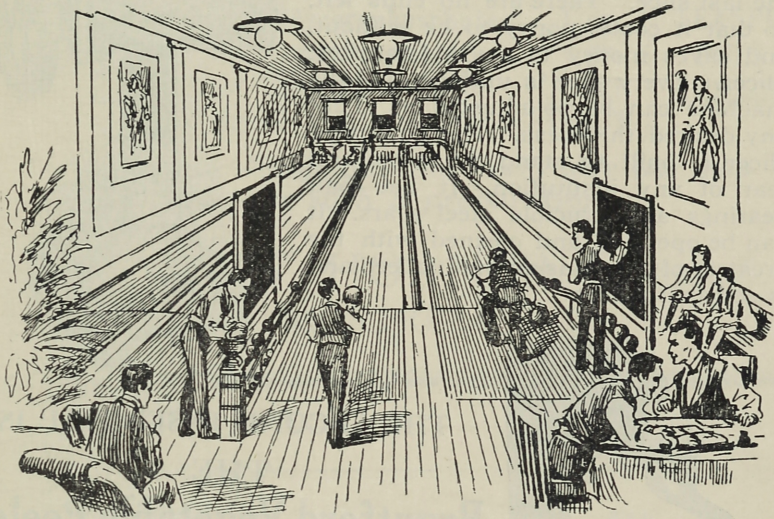


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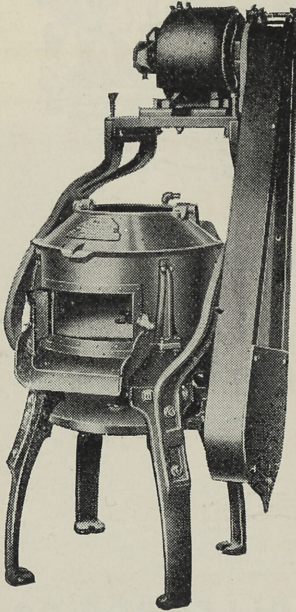
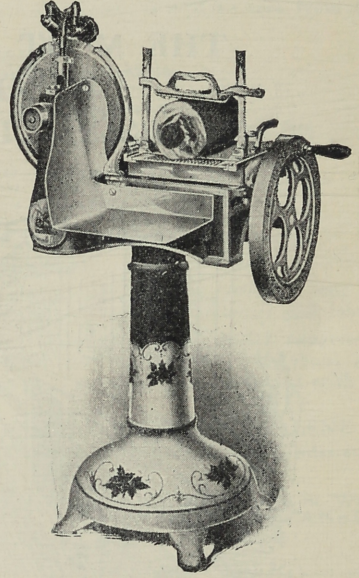
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