3661. And there is considerable risk from there being no such proper means of ventilation?-There is.

3662. Well, you have admitted to us it is possible the beds are too close for the health of the patients, that the system of ventilation is imperfect, that the Hospital contravenes modern principles as to construction, that the waterclosets and so on are where they should not be. Do you contradict the statements of all the witnesses who have been called on Dr. Batchelor's side who say that on account of that the patients run a material risk?—If all these things are true, they do run a risk.

3663. Do they run a material risk?—Yes, they do.
3664. Will you tell us the extent to which they run a risk?—Well, all the matters you have mentioned are matters of degree, and the degree of risk they run depends on the things you have stated being all true.

3665. Do they run a material risk in consequence, if these things are true?—Certainly they

3666. And you have said yourself that they are true?—Well, to a certain extent they are all deficient, and to a certain extent the patients run a risk in consequence.

3667. Do you think that under those circumstances things should be allowed to remain as they

are?—No, I think improvements should be made.

3668. You have said that in consequence of the defects you have pointed out the patients run a material risk. Can you deny that the defects are of so serious a character as to be a source of grave danger, and call for immediate remedy?—To a certain extent that is correct.

3669. Can you or can you not deny—Yes or No, and then explain if you like—that this proposition is true: that the defects in the Dunedin Hospital are of so serious a character as to be a source of grave danger to the inmates, and call for immediate remedy?—I do not agree exactly

with the wording of it.

3670. Do you agree with the spirit of it?—The spirit of it is correct.
2671. Mr. Chapman.] Is it exaggerated?—It is.
3672. It is a matter of degree?—Yes.
3673. And you have not found any appreciable evils result?—Not in my experience. I have had no ill effects from patients being in the Hospital, and have had no such effects among patients I have had to deal with. They got on perfectly well.

3674. You have been asked about special wards, and you admit that in some cases it would

be better to have them?—Yes.

3675. What are the special conditions of an ophthalmic ward?—A particular arrangement of

3676. And in that it differs from other wards?—Yes.

3677. Mr. Solomon.] In my examination I omitted to ask a question. It was this: Were you present at a discussion by the staff on this question of special wards, when Dr. Maunsell said: "Of late years surgery and medicine had progressed by leaps and bounds, so that now they were compelled to specialise in such branches as ophthalmology, gynecology, and special surgery, for it was impossible for one man, no matter what his energy and ability, to grasp the whole range of these subjects. The sooner, therefore, that they recognised that they must have special wards here the better. To his mind there could be no advance in surgery or medicine unless they specialised. Dr. Gordon Macdonald agreed with Dr. Maunsell in regard to specialising, but he did not approve of going on with additions to the present building. He would much rather see a new building altogether." Is that correct?—Yes.

3678. The Chairman.] What date is that?—March of last year. 3679. Mr. Chapman.] That was after the suggestion to spend £8,000 in some particular way,

was it ?—I really forget.

3680. Supposing you had an opportunity of getting special wards, in what order of urgency would you take them—for what classes of cases first?—Eye diseases would be one, abdominal diseases would be another.

3681. And what would be the others?—I would really require to think them over before giving

an answer.

3682. That is, isolating patients for their own sake?—Yes.

3683. Are there cases which you would isolate for the sake of others?—Yes. 3684. What are they?—Erysipelas, hospital gangrene, patients suffering from phthisis, and patients suffering from pneumonia. If I was to go on I think I should really come to give every disease a separate ward.

3685. That is, give each disease a separate room?—Yes; there is no end to it.
3686. In what order of urgency would you take them, supposing your funds were limited?—I would take first those in which there were danger of infection. The most urgent of any would be erysipelas and hospital gangrene cases; then eye diseases; next, abdominal cases; and then would come the separation of phthisis, and pneumonia.

3687. In the report Mr. Solomon read Dr. Batchelor is reported to have said: "By the expenditure of £8,000 the building can be made a perfectly good hospital of itself—a sample hospital for the colony." Do you remember that?—Yes.

3688. Then there were several other speakers, after whom Dr. Maunsell is reported to have said that "the sooner, therefore, that they recognised that they must have special wards here the better; to his mind there could be no advance in medicine or surgery unless they specialised." The report also says: "Dr. Gordon Macdonald agreed with Dr. Maunsell with regard to specialising, but he did not approve of going on with additions to the present building. He would much rather see a new building altogether "?—Yes; and I think that is true still.

3689. You did not reckon with the taxpayer at that particular moment?—No.