4326. And cubic space?—I think they would be well off with from 1,000ft. to 1,200ft. in medical wards, and from 1,300ft. to 1,400ft. in surgical wards; but they have far more here. I know that 1,500ft. is laid down by the authorities, but that is merely theoretical. It has been proved that Hospital patients can be perfectly healthy with only 1,000ft.

4327. Has it ever occurred to you that the cubic space in the Dunedin Hospital is too little?—Never.

4328. But it has been proved by figures to be too small?—What is the cubic space here?

4329. It has been calculated at 1,177 cubic feet per head?—I say that it is not true; the space is not too small in the Dunedin Hospital. Of course, 1,500ft. is laid down by the authorities as the requirements of a modern Hospital; but, speaking as a practical man, dealing with a practical question, I do not admit that it is too little, because I have never found that any patient was the worse for being treated in the Dunedin Hospital.

4330. You say that there is nothing to complain of in the position and condition of the water-closets?—Nothing at all. I do not know whether they are perfectly trapped; it is not my business to look into it, and I have not done so.

4331. I will call your attention to what the report says on this subject: "With regard to the closets, we are aware that you have done everything in your power to render them sanitary so far as their position renders it possible; but we are strongly of opinion that no system of double doors will render a ward safe which has a closet opening directly off it." Is that true?—I did not give any attention to that. I think that the closets are perfectly safe. I repeat that my views were perfectly well known.

4332. At the meeting, did you dissent from the report?—I do not think I voted. If I did not dissent, then you can say that it was agreed to unanimously, though they knew my views perfectly well.

4333. The report further says: "We would venture to suggest that a wing might be added to each corner of the Hospital of about the dimensions shown in the accompanying plan, to contain the bath-room, lavatory, and ward-closets"?—I quite admit that that would be better.

4334. Yet you say that it is quite safe as it is?—Perfectly safe. In nearly all the hospitals in Great Britain a similar condition of things exists.

4335. Generally speaking, I understand—it follows from what you have said—you to say that Dr. Batchelor's complaints are grossly exaggerated?—Yes; they are most grossly and unjustifiably exaggerated.

4336. Do you recognise the existence of two parties on the medical staff? We have been told by Dr. Gordon Macdonald that there is a University and an anti-University section?—No.

4337. For instance, I find here, strangely enough, something which gives an idea of the existence of two parties in the Hospital. After this "row" by Dr. Batchelor it was suggested "that all the cases be removed from No. 7 ward (septic or suspicious cases being separated from those to which no suspicion attaches), and that the ward be thoroughly cleansed." Do you remember that?—Yes.

4338. Did you agree with that?—I thought that no such motion should be brought forward pending this inquiry.

4339. Strangely enough, the meeting was divided exactly as Dr. Gordon Macdonald said the staff were. For the resolution there voted (the University section) Drs. Batchelor, Maunsell, and Lindo Ferguson?—On whatever question the Hospital staff were divided these men were found together; instead of being the staff's opinion, it was really only one opinion. I am an independent man.

4340. On the other side of the question, I find Drs. Gordon Macdonald, Coughtrey, Jeffcoat, and Stenhouse. Are they one party?—If you mean to insinuate that I belong to any party you are entirely wrong. I believe that there are cliques in the Hospital, but I have never belonged to any clique. I endeavour to be loyal to the truth.

4341. I find that there is not the best of feeling between you?—I do not know why there should not be. It is not on my part if there is not.

4342. Do you remember Dr. Batchelor getting a resolution passed to this effect: "Dr. Batchelor stated that he had summoned the meeting for the purpose of drawing attention to the fact that the operation of abdominal sections for removal of ovaries and fallopian tubes had been recently performed by Dr. Stenhouse, who was in the position of physician only on the staff. He referred to a minute on the subject passed at a meeting of the staff in 1885, at which the separate duties of physician and surgeon were defined. He was desirous of obtaining an expression of opinion from the staff on the question whether the physician is justified in operating on these cases in the Hospital. Dr. Stenhouse explained that he was not a member of the staff when the duties of physicians and surgeons were defined, and he was under the impression that a certain latitude was allowed. He had called the consultation on the case in due order, and had also obtained Dr. Batchelor's opinion on the case. After some discussion, Dr. Colquhoun proposed 'That it be a recommendation that the various members of the staff in the Hospital keep to the work to which they have been appointed in the Hospital.' Seconded by Mr. Maunsell, and carried. Dr. Batchelor moved, 'That the Trustees be asked that the above resolution be added to the by-laws.' Seconded by Dr. Roberts, and carried"?—I remember it.

4343. And the result of it was that you did not operate any more?—No.

4344. I suppose you are much obliged to Dr. Batchelor for that?—I must give the history of that case, seeing that you have brought it up. I think that Dr. Batchelor has done some things which I disagree with very much, and I say that in this case he was guilty of a crime. This young woman (Jessie McB——) had been a patient of mine for years, and therefore had great confidence in me. She came from the country very much worse than when I had seen