FLORENCE KELLER (called by Mrs. Nicol), on her oath, saith.

[Mrs. Porch's temperature-charts and copy of case-book entries relating to her case are perused by witness, and also Mrs. Porch's written statement. Mrs. Porch's evidence on oath is read over to the witness. General Hospital chart and history perused by witness as well as extract from operation-book.]

Examined by Mrs. Nicol.] I have seen Mrs. Porch. Her mental state was perfectly normal when I saw her, which was about four weeks ago. I think her capable of writing out the statement which has been produced, and which purports to be made out by Mrs. Porch. I consider the period of the first stage of her labour a long one. The second stage—five hours—I consider a long period. I consider a labour of sixty-five hours' duration an abnormal labour. I have had eleven maternity cases in the last two weeks. That is a little above my average. I speak from my own experience and from books I have read. I consider that the medical attendant should have been called in during Mrs. Porch's labour. I consider that if labour has been going on for twenty-four hours a medical attendant should be summoned. I have told them at the Salvation Army Home to send for me in every case if the labour is prolonged more than twenty-four hours. These are cases for which I am not paid. I do not think it right for a Matron who is a certificated midwife to put in stitches where the perinæum is ruptured. My answer extends to all ruptures—small and great. From the chart I see that Mrs. Porch was twice given hyoscine. That is to relax and dilate the os. I would myself give hyoscine—that is, I would prescribe the dose. I would not leave that to a midwife. I have not seen the labour-bed at St. Helens. At the Salvation Army Home there is a labour-bed composed of a horsehair mattress, having springs in it, upon a common ironing-board, which is placed on the iron-work of the bedstead. On the mattress is a blanket, over that a macintosh, then another blanket, and then a sheet. Mrs. Porch could have been put in a sitz bath. I should have thought it would have been a wise thing for Dr. Goldstein to have seen Mrs. Porch when he was in the home in the morning o the day of the birth. I would consider that it amounted to a duty of the doctor to go and see the woman. I th nk medical aid should have been called in at the end of twenty-four hours. I think it would have been wise to have done artificial dilitation at the end of the second day. Other steps could have been taken. I would say that the prolonged labour would be a factor in the woman's mental state; that is mainly owing to sleeplessness. I should say that septic infection started on the second day. The septic infection would be another factor in the delirium. Pressure is generally applied to the abdomen to ascertain if there is any tenderness. If there is, one is suspicious of septic infection. For a septic patient I would prescribe slop foods and a milk diet. Septic infection would be the cause of the abscess in the pelvis. If the streptococcus germ got in it could have been caused by membranes or part of the placenta being left in. I believe in the injection of vaccine in connection with sepsis. I have used it for thirteen years. I say it was not right to keep Mrs. Porch with other women, though the isolation ward was full, when it was found that she was septic. I think it would be all right to perform a cæsarian operation in the Hospital. After every patient leaves the wards should be disinfected.

Mrs. Nicol.] Would you permit a nurse suffering from a vaginal discharge——

[Mr. Mays objects to the question Commissioner tells Mrs. Nicol that the question contains an insinuation, and she must either withdraw the insinuation or state that she is prepared to prove her insinuation. Question not pressed.]

Cross-examination continued.] I would call two hours a quick confinement. I would not call twenty-two hours a quick confinement. I remember a puerperal case at the Salvation Army Home. I remember one in six years. There are seventeen beds in the Army Home. The Matron was isolated on account of the puerperal case. The case was sent to the General Hospital. The period of isolation was a month. For a blood-test I would take the blood from the ear or the tip of the finger. I have not known a blood-test taken from a vein in the arm. I cannot account for Dr. Frost taking twenty drops from a vein in the arm unless she was going to inject saline. I was allowed to suture after I graduated. Whether I would treat a cough or not after confinement depends on the nature of the cough. I do not consider it right for the nurse to have nursed Mrs. Porch, so soon after nursing Mrs. Chamberlain, till her death—that is, from an infectious standpoint, even though both were suffering from the same complaint. I was once refused help by a member of the British Medical Association—by Dr. Scott. He said that it was because I was not a member of the British Medical Association. He told me he would not be allowed to go to my help by the president, Dr. Inglis, unless he went with a solicitor. The case was a very serious one at Onehunga, and on Dr. Scott's refusal to come without the permission of the British Medical Association I came to town and got my husband and Dr. Stopford, and so satisfactorily completed the case.

Cross-examined by Mr. Mays.] Two days is, I think, the longest period of labour in connection with any case of mine. I did something in this case, but I do not know that it had the effect of shortening the period. I have shortened the first stage by artificial dilitation. Before doing so one makes certain that the patient is in a fit state to stand it. To do it prematurely may mean to impair the cervix. This may have a bad after-effect on the patient. As to Mrs. Porch's case, as I do not know what was the condition of the cervix, I am not in a position to say what I would have done. An experienced trained midwife ought to be in a position to know the condition of the cervix. The only fault I find is that the Medical Officer did not go and see the patient when informed of her condition by the Matron. I approve of the principle of bringing about a confinement as naturally as possible. My experience of hospitals is that in infectious diseases wards a nurse remains on duty for two weeks, and then in isolation for two weeks. As to the same nurse having nursed Mrs. Chamberlain and then Mrs. Porch, there is a risk to the second patient in the event of the diagnosis that both were suffering from the same disease being wrong. This same danger is common to all infectious-diseases wards or hospitals. I have not read the evidence relating to Mrs. Porch's case.

To the Commissioner.] There are many cases at the Army Home that I never attended. There are about 100 cases there per annum. I am not sure of this. I would like to look it up. There has been but one death at the Army Home. I am not in a position to give evidence on statistics.

Adjourned to the 5th March.