

81. Just keep to the present hospital?—In the present hospital ten beds are provided for in the main ward, and two in inside wards, and four in case-isolation wards. There is also room for two to six cases on the veranda.

82. Quite independent of the inside?—Yes. The veranda has been designed for cases separate from inside. The plan provided for the main block being separate from that connected with the general block. As a part of any modern hospital pavilion there is a room known as the "treatment duty room," which we call it in New Zealand, as distinct from the "diet duty room," where nurses would prepare the food; and it seemed to the Board easier to take the treatment duty room and put it into the administrative block near the main block, and in that position it could be used for minor surgery and cases in the camp as well as cases from the ward. The treatment duty room is provided with a special "Fama" floor, with the object of its being aseptic as possible. It will have proper surgical washing-basins, and in that room would go the sterilizers for instruments and dressings. That room is also provided with a good light so that in the event of an urgent operation requiring to be done at the camp it could be carried out in that room.

83. There is no operating-room provided in the hospital?—No.

84. Is there any room you call the operating-room?—That is the room marked on the plan "Treatment duty room—minor surgery."

85. And in that room you keep your sterilizer?—Yes.

86. And that room is in a distinct block from where the patient is under treatment?—Connected by a closed corridor.

87. What is the light arranged in that room?—A light to the south-west.

88. My recollection of the hospital is quite different. Is the present operating-room at Trentham not in the same room where the patients are to be treated?—[Plan explained to Commissioners].

89. You say that this hospital is only designed to treat minor cases?—That is so.

90. What do you mean by a "minor case" in surgery?—I had in my mind such a thing as a man chopping his finger badly, or getting a kick, or perhaps breaking a leg.

91. I put this case to you: A man gets kicked by a horse in the camp on the skull, and gets a compound depressed fracture of the skull: where will that man be taken to?—Requiring an operation at once?

92. He is found lying in the camp with a compound compressed fracture of the skull: where would he be taken to?—Straight into the operating-room, I take it.

93. He would be taken into the hospital?—Then, there are two extra rooms provided for. If it were a serious case he would be put into one of the side rooms.

94. When an urgent operation is deemed necessary, as it always is in such a case, where would he be taken to?—Into the operating-room.

95. Where there is everything in the room ready to perform major surgery?—I have not gone into the question as to the sterilizers—that has been left entirely by me to the military officers, who would be asked to say what fittings would be required.

96. Now, here is a man with a compound depressed fracture of the skull brought into this operating-room: would everything necessary be in the room to treat him—every modern appliance?—So far as I am aware there will be.

97. That is major surgery?—Yes.

98. Then you admit the hospital is for more than minor surgery?—Intended for minor surgery, but equipped for possible major surgery as a matter of emergency.

99. You admit the present arrangement is wrong: you stated it was only intended and designed for minor surgery?—Quite true.

100. Now, I put it to you that a major case arrives, and you say it would be put into the hospital?—Yes.

101. Then you admit the present arrangements are wrong?—No, I do not. The arrangements that are there are quite as good as could be obtained in any other circumstances where a major operation is required and a big hospital is not immediately available.

102. You will admit that a compound depressed fracture of the skull is a major operation?—Yes.

103. And you say that could be efficiently done in that room?—Yes, safely done.

104. Therefore you would have all the modern surgical instruments for that type of case?—Yes.

105. And all the necessary sterilizing-apparatus?—Yes.

106. Then I put it to you it will be arranged for major surgery?—It will be arranged for major surgery.

107. Then your statement that it will be only arranged for minor surgery is not correct?—I qualified it by saying "minor surgery, and major surgery as a matter of emergency."

108. "As a matter of emergency" you could leave out?—Oh, no, as a matter of emergency.

109. Then, supposing a man is brought in with acute peritonitis from ruptured abscess of the appendix: that is a surgical emergency. Would that be done there?—Certainly.

110. Do you tell me that every arrangement will be there to treat a severe abdominal case such as that?—If it is not, the camp will not be properly equipped.

111. Do you say that the hospital will be equipped to treat such a severe case as that?—I do.

112. Have you ever heard of a hospital which takes on major cases having the sterilizing-instruments in the operating-room?—Yes.

113. And approved of it?—No. Most of our small hospitals in New Zealand have that arrangement, and almost all private hospitals.

114. Mr. Morton and Mr. Campbell told us that at the meeting of the Board it was their impression that this operating-room and the hospital generally was designed only for minor surgery?—That is so.

115. And it was their impression that no major work would be done there?—That is so. The major work was to be taken to Wellington, but the cases you have quoted are cases that could not