

**Report of Drs. Nelson and MacDonnell, and Zephirin Perrault, Esq.,  
advocate, of the Québec, Marine and Emigrant Hospital.**

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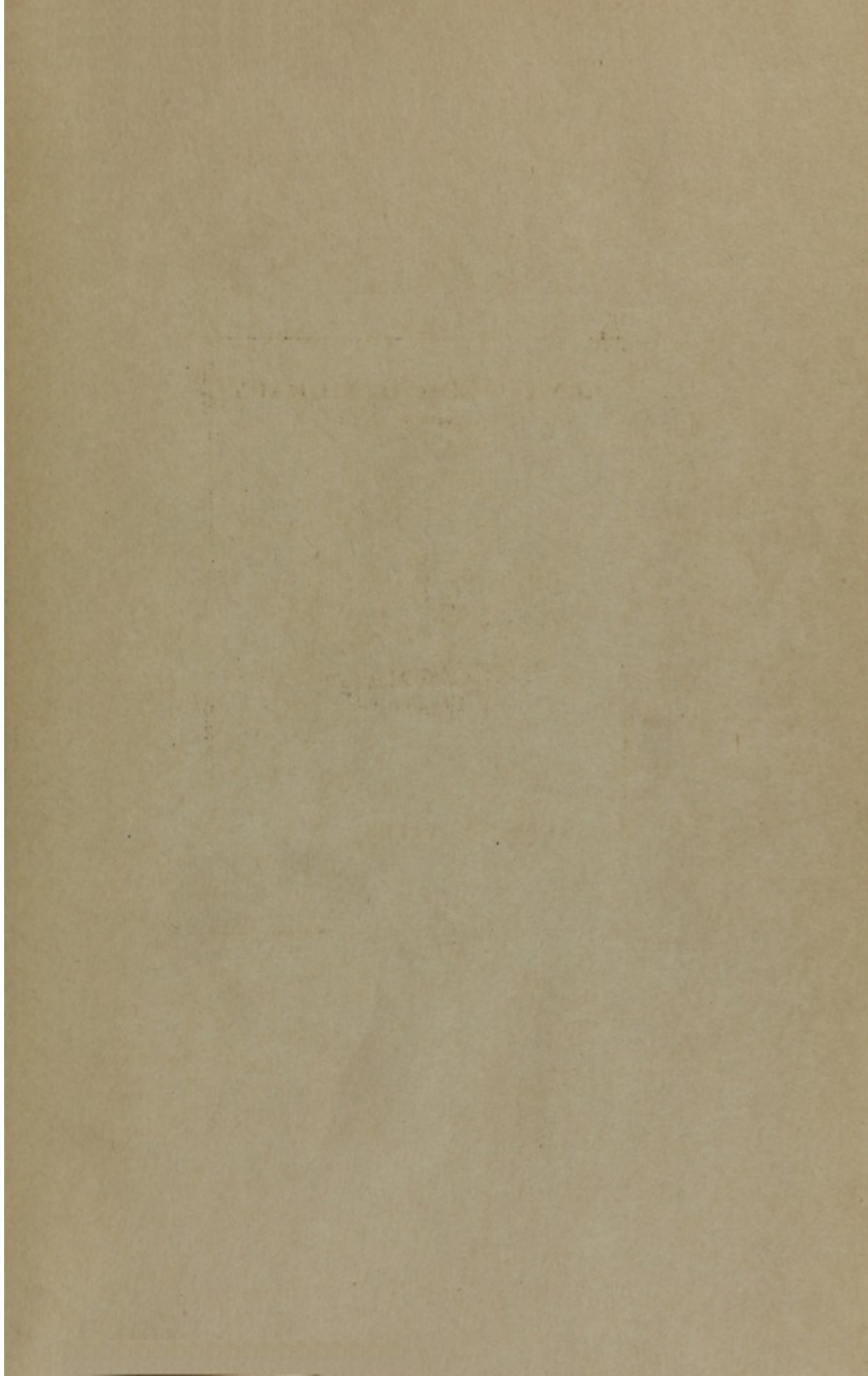
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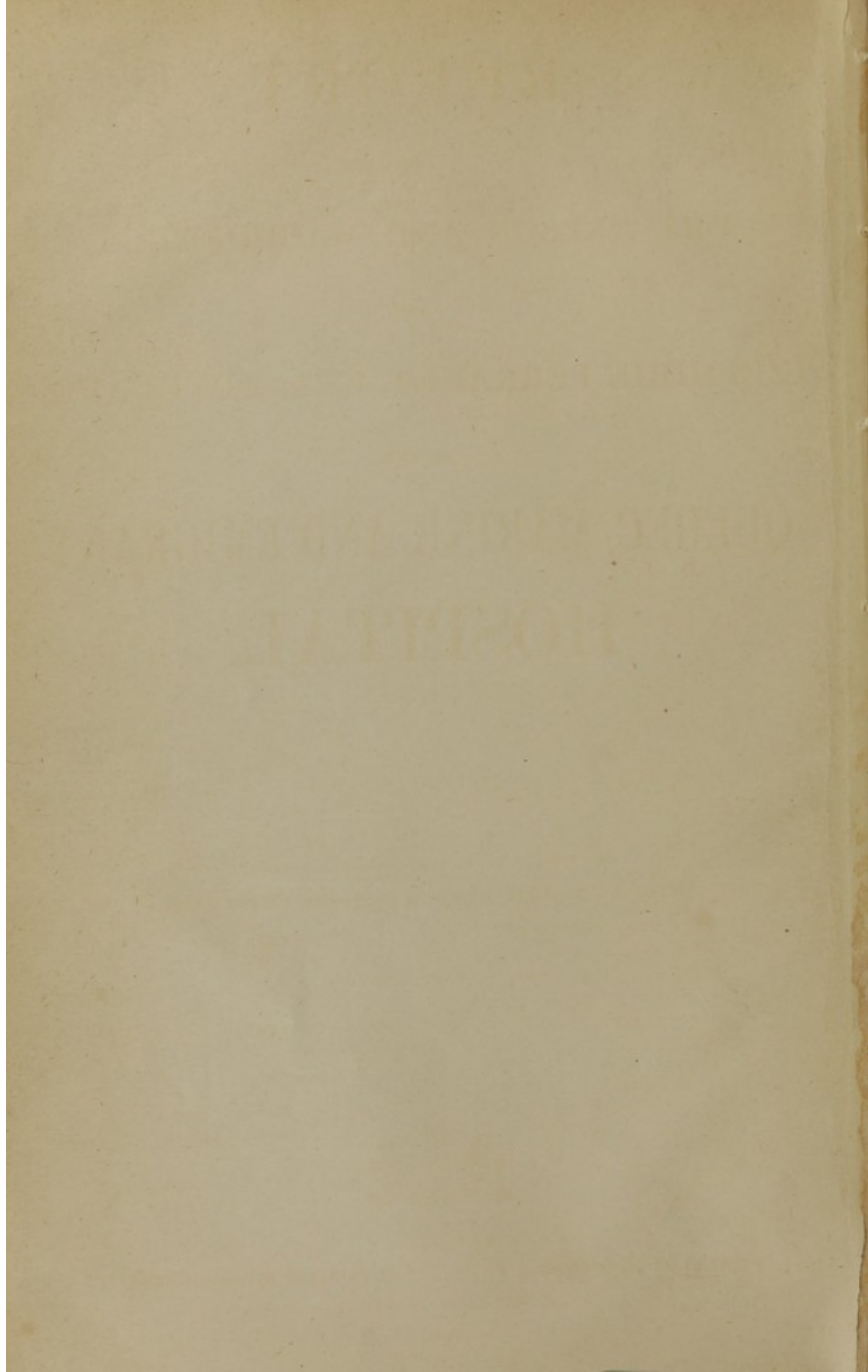
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REPORT

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OF

DRS. NELSON AND MACDONNELL,

*W. Ly. Green*

AND

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ZEPHIRIN PERRAULT, ESQ., ADVOCATE,

OF THE

QUEBEC, MARINE AND EMIGRANT

HOSPITAL.

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# RETURN

TO AN ADDRESS from the Legislative Assembly, of the 30th ultimo, for a Copy of the Report of Doctors NELSON and MACDONNELL, and ZEPHIRIN PERRAULT, Esquire, Advocate, on the QUEBEC MARINE AND EMIGRANT HOSPITAL, and of all Documents having reference to the Inquiry held by the said gentlemen concerning the said Institution.

By Command,

A. N. MORIN,  
Secretary.

Secretary's Office,  
Quebec, 7th April, 1853.

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*To His Excellency the Right Honorable JAMES, Earl of Elgin and Kincardine, Knight of the Most Ancient and Most Noble Order of the Thistle, Governor General of British North America, Captain General and Governor in Chief in and over the Provinces of Canada, Nova Scotia, New Brunswick, and the Island of Prince Edward, and Vice Admiral of the same, &c., &c., &c.*

MAY IT PLEASE YOUR EXCELLENCY:

On the thirtieth day of October last, it pleased Your Excellency to issue a Commission, under the provisions of an Act of the Legislature passed in the ninth year of Her Majesty's Reign, intituled, "An Act to empower Commissioners for enquiry into matters connected with the public business to take evidence on oath," nominating and appointing the undersigned, Wolfred Nelson and Robert L. McDonnell, of Montreal, Physicians and Surgeons, and Zephirin Perrault, of Kamouraska, Advocate, to be Commissioners to inquire into the management of the Marine and Emigrant Hospital at Quebec, empowering them to summon before them any persons or witnesses, and to require them to give evidence on oath, orally or in writing, and to produce such documents and things as they the said Commissioners, or any two of them, should deem requisite for the full investigation of the management of the said Marine and Emigrant Hospital.

That in and by a letter bearing anterior date to the above-mentioned Commission, namely, the eighteenth of October last, and offering the same for the acceptance of the undersigned, it was stated, that it was the wish of Your Excellency that the Commissioners should meet in Quebec on the second of November then next, when and where they would receive their Commission and instructions; and further, that in and by the communication, enclosing therewith our appointment, dated the second of November, one thousand eight hundred and fifty-two, they were instructed to report specially upon the mutual charges or complaints of Dr. Douglas and the late Commissioners, and upon the subject referred to in Dr. Rowand's representation, herewith transmitted, and generally upon the internal management of the Hospital, with a view to suggest a remedy to any abuses or irregularities which may be found



to have heretofore existed therein, and to enable the Government to place the establishment upon the most satisfactory footing in all respects.

The Commissioners therefore most respectfully beg leave to Report, for the information of Your Excellency, that, in obedience to Your Excellency's commands, they repaired to Quebec at as early a period as their professional avocations would permit. One of them, Dr. Nelson, presented himself at the Office of The Honorable The Provincial Secretary on the second of November, and Dr. McDonnell reached Quebec on the morning of the third of November. Mr. Perrault was prevented by important business from reaching Quebec before the thirteenth of November.

Having received their Commission with the letter of Instructions, the two Medical Commissioners proceeded at once to business, and immediately made arrangements for an apartment in which to hold their investigation, and through the politeness of The Honorable The Speaker of the Legislative Council, one of the Committee rooms was placed at their disposal. They also engaged the services of a medical gentleman, Dr. Von Iffland, as Secretary, being persuaded, from the nature of the inquiry intrusted to them, that they could not proceed to their own satisfaction with ordinary writers, the more especially as the greater part of the proceedings were to have reference to matters of a strictly medical character; and the Commissioners are happy to state that Dr. Von Iffland's assistance was most valuable and efficient, and that he rendered the duties of the inquiry less arduous, and materially contributed to its being brought to an early termination.

The same day the Commissioners made their first inspection of the Marine and Emigrant Hospital, and examined its structure, internal economy, and domestic management. The result of this and subsequent visits to the Institution will be detailed in another part of this Report, as well as the suggestions humbly offered for the future management of the establishment.

In the examination of the facts placed before them, the Commissioners beg to state that they dispelled from their minds all feelings of partiality; and not being residents of Quebec, or interested in the issue beyond their desire to have justice done the aggrieved parties, and order and regularity once more established in the institution, they believe they have been free from those personal motives which it is difficult to render inoperative, when we are allied by relationship, social intercourse or community of interest, with parties standing in the position of the accused and the accusers in the present case. The Commissioners felt, therefore, that if the mode of inquiry instituted by them be unsatisfactory, and the suggestions they offer be valueless, the fault must be attributed to their want of ability, and not to their want of honesty, for, impressed with the great responsibility imposed upon them, they used their best exertions to conduct the investigation to the satisfaction of the Government and the credit of the public service.

Whilst the public interest demanded a fair and searching examination of all the alleged abuses, there was likewise entrusted to the Commission the delicate task of guarding from undeserved reproach the professional and private reputation of a number of respectable practitioners, whose medical qualifications and characters for integrity, propriety and morality, were freely and extensively assailed, and careful attention to this part of the inquiry was rendered necessary, as well for the interests of the Hospital as in justice to the gentlemen whose characters were thus assailed, for it is hardly necessary to state that no charitable institution can occupy a high position in public estimation or public confidence whose officers are even suspected of conduct which (as will appear in the sequel) was so frequently and so openly attributed to some of those connected with the Marine and Emigrant Hospital.

There was one feature in the present investigation peculiar to it, viz., that the same parties appear both as accusers and accused; and the same charges,—dereliction of duty, connivance at abuses, and indifference to the interest of the establishment,—are reciprocally charged against all concerned with the management of the Hospital. This unusual state of disorganisation has arisen from the want of a

proper code of regulations exactly defining the duties of the several officers, and to a want of firmness in enforcing such rules as did exist, to which may be added, as another and important cause of disorganisation, the want of a Board of *paid* Commissioners or Inspectors, whose duty it ought to have been to visit the Institution regularly, to report to the Government at regular periods, to correct irregularities and redress grievances at their very outset, and not to have allowed them, from long duration and want of correction, to become established abuses.

These observations apply more especially to the mutual charges of Dr. Douglas and the late Commissioners, which have unfortunately called for the intervention of the Government, and the nature of which will be best understood by giving a short history of the causes which have led to this disagreement.

It would appear, that for several years past a want of harmony so essential to the well-being of an Institution like the Marine and Emigrant Hospital, has existed among the officers; but, though occasionally manifesting itself previous to the year 1847, it then became so evident that both parties ceased to make any efforts at concealment; and this discord and bad feeling have been increasing up to the present time.

Notwithstanding such serious impediments to the proper discipline of the Hospital, the care and attention bestowed upon the patients, the zeal and assiduity of the lay officers, and the advancing and well deserved reputation of the Medical Staff, served to counterbalance all drawbacks, and the Hospital attained a high position as an Asylum for the sick and maimed, and a respectable reputation as a School of practical Surgery and Medicine.

The first Commission appointed to superintend the affairs of the Marine Hospital, was composed of Drs. Parent and Morrin, and Mr. Gowen;—of these, Dr. Parent seldom acted. The feeble state of Mr. Gowen prevented him attending to his duties, whilst the active professional occupation of Dr. Morrin, the Chairman, interfered with his efficiency as a Commissioner, and he delegated to Dr. Douglas his power, having every confidence in that gentleman's zeal for the interest of the Hospital, and ability to manage for its general welfare and utility.

That this confidence was not misplaced, is proved by the testimony of Dr. Painchaud, who states that he always deferred to the opinion of Dr. Douglas, and admitted his superior knowledge of Hospital management and discipline; and the Steward, Mr. Whelan, who resided in the establishment from its commencement to within a few years, declares that he always regarded Dr. Douglas as the very "heart and soul" of the establishment, and that it was to him complaints were referred, and by him abuses were checked. So long as matters were thus managed, so long as the Commissioners had their duties vicariously performed, so long as Dr. Douglas ruled supreme (to use the words of the late Commissioners), all went on well, and no complaints were made by Dr. Douglas, although several were made *against* him. Amongst these, was his overbearing conduct to the Under-officers of the Medical Department.

In support of this statement, the evidence of Dr. Landry may be quoted, in which it is averred, that during the period he was Apothecary, he was frequently ill-treated (*maltraité*) by Dr. Douglas; although with a candour which stamps veracity upon his previous statement, he admits that, whilst performing the higher duties of House Surgeon, he was treated kindly by that gentleman, and received marks of special attention from him.

Dr. Painchaud also alludes to the treatment of his son by Dr. Douglas, during the time that young gentleman acted as House Surgeon, and which he assigns as one of the first causes of discord in the establishment. He says, in one part of his written document:—"Painful as the task is to pourtray the oftentimes unpardonable conduct of a professional brother, of a colleague and a friend of long standing, I shall not shrink from my duty."

Dr. Painchaud alludes to the concord which existed during the first ten years, and to the threat held out by Dr. Douglas, when Dr. Painchaud, Junior, was appointed House Surgeon:—"It was not before 1846; and then on the appointment of my son as House Surgeon, that our amicable and fraternal understanding was interrupted. Dr. J. D. was impressed with the idea that my son had played him a trick in supplanting his *protégé*, whom he had strongly recommended; my colleague then remarked to me, 'Your son will not be three months in the Hospital: I will put him to the proof!'" To this threat Dr. Painchaud replied that, if his son were badly treated, he would protect him, not because he was his own son, but as he would any other House Surgeon.

This remonstrance appears to have had no effect upon Dr. Douglas:—"He kept his promise and his word in treating the young man tyrannically. He began by questioning him every day, and in the presence of the Students of the Hospital, on the *materia medica*. His imperious tone had the effect of intimidating him, and occasionally caused him to give erroneous answers. He made an official complaint to me. I remonstrated with my colleague on the injustice of his proceeding, and assured him that if the Commissioners refused to do justice in the case, I should make a direct appeal to the Executive. The examinations ceased, but the tyrannical treatment was not abated, taking only a different form. Dr. J. Douglas deprived him of all moral influence by making him a subject of ridicule before the patients and nurses, and by charging Whelan, the Steward, with a part of his duty, as the admission and discharge of patients."

Dr. Painchaud proceeds to state that, in 1847, a Methodist Minister entered as pupil of the Marine and Emigrant Hospital, and soon some of the duties of the House were assigned to him, and altercations took place between this gentleman and Dr. Painchaud's son, caused by Dr. Douglas having given the former orders to turn out the House Surgeon from his surgical wards; and, when an official inquiry was made into the matter, Dr. Douglas appeared to approve of the conduct of this gentleman, and justify his proceedings.

The Commissioners, though aware that, in 1847, owing to the great prevalence of typhus fever, and the difficulty of procuring competent medical assistants, the discipline of most sanitary institutions necessarily became lax and was temporarily suspended, can hardly imagine a state of things which could justify a line of conduct like that assumed by Dr. Douglas. How is respect for an inferior officer to be maintained, when his superior turns him into ridicule before his subordinates, sets at naught his authority, delegates to others the performance of his most important duties, and entrusts an inexperienced person with highest responsible duties of the surgical department? If the House Surgeon was incapable, Dr. Douglas ought to have made known the circumstance to the Commissioners;—if they heeded not his complaint, the Executive would have listened to it, and have inquired into the matter. No amount of incapacity on the part of the House Surgeon,—no indifference on the part of the Commissioners,—no degree of superior qualification of a gentleman holding the position in the establishment which the party alluded to occupied, could warrant the conduct of Dr. Douglas towards the recognized officer of the Hospital—the *permanent* House Surgeon. When we recollect that the young gentleman was son of Dr. Douglas' oldest colleague, we can well conceive how difficult it was to preserve harmony and unanimity in the Institution,—how impossible for the visiting Physicians to act in unison as colleagues, or ever meet one another with the usual civility of ordinary acquaintances.

That the animadversions upon the behavior of Dr. Douglas are not based upon the statements of Dr. Painchaud alone, is clear, from what Dr. Morrin mentions in his reply to some of the charges brought against him by Dr. Douglas. That gentleman states that, "during the early years of the Commission, Dr. Douglas was one of two paid visiting Physicians, and, as such, was allowed to reign supreme throughout the Institution. No charges were then heard respecting its management, save

“ those which had reference to the well-known peculiarities of his temper and disposition, which were frequently the cause of bitter complaint.”

The above extracts shew the cause of much of the disagreement that for years past has reigned in the Hospital; and the Commissioners would suggest that a great amount, if not all, of this bad feeling might have been averted, had Dr. Douglas' duty in the Hospital been strictly confined to his medical care of the sick.

But when we find the Chairman of the Commission speaking of the visiting Physician as “ ruling supreme,” and of his “ Dictatorship,” we must confess we can put no other construction upon these words, than that Dr. Douglas was allowed to use this authority because the Commissioners delegated it to him. It is too late to charge an officer with the abuse of power, which we have shifted from our own shoulders to his. It is too late for Dr. Morrin to complain of Dr. Douglas' “ Dictatorship,” when he himself placed him in a position to act the Dictator. If Dr. Douglas, from his known peculiarity of temper and imperious conduct, abused the power entrusted to him, it was the fault of the Commissioners not to have kept him in check, and to have withdrawn the control of the establishment from his hands; but though these facts were well known to the Commissioners, and though their Chairman was frequently made acquainted with the “ bitter complaints” they occasioned, no attempt was made to curb this misrule—no effort was made to confine Dr. Douglas' duty to its proper limits; he was allowed to act as Chief Medical Officer and Chief Commissioner, combined offices, for which his infirmity of temper, to use a mild phrase, evidently rendered him unsuited.

The Commissioners of this Inquiry cannot refrain from expressing their opinion that, had there been a regular paid Board of Commissioners, Visitors or Inspectors of the Institution, who were responsible for the performance of their duty, who dared not to have delegated to the visiting Physician the onerous charge of such an important establishment, they should not now hear of the visiting Physician being called the “ heart and soul” of the establishment, to whom all complaints were to be referred, and by whom redress was to be granted; nor should they hear of his “ reigning supreme,” of his being a “ Dictator;” nor should they hear of “ bitter complaints,” “ tyranny” over inferior officers, and insulting and degrading treatment of the Medical Officers of the Hospital. Had such a Board been in existence, there would have been no necessity for the present investigation. We should have heard of no abuses, for they would have been arrested in their infancy; no charges of dereliction of duty, for such would have been instantly detected; no acrimonious vituperation, for such would have been uncalled for, and unnecessary.

The Commissioners have now brought down to the year 1847, the history of these misunderstandings and disagreements, and they respectfully direct Your Excellency's attention to the documents contained in the Appendix, for the grounds upon which they base their statements.

They are anxious to direct special attention to these documents, for in the course of their inquiry, it was endeavoured to date the origin of these misunderstandings from the appointment of the six visiting Physicians, in 1847. This attempt has been made, both by Dr. Douglas and some of his present and former colleagues, but Your Commissioners feel satisfied that this unfortunate state of feeling existed before, and had its origin in Dr. Douglas' treatment of Dr. Painchaud's son, in 1846, before which period perfect good feeling appears to have existed between the two visiting Physicians, indeed, between Dr. Douglas and the Commissioners, if that body can be said to have existed, or to have ever exercised its functions.

In 1847, a new cause of discord came into operation, and now the bickerings and heart-burnings became more general and more universally known, not only to the officers of the Institution itself, but to the public; and the press of the City acted upon from different quarters and by different operations, dragged the alleged, as well as the real abuses before the public, and tended to injure materially both the respectability and the utility of the establishment in general estimation.

But before entering upon this part of the question, the Commissioners of Inquiry beg to direct attention to the following points:—

Dr. Douglas never having formally complained of the non-performance of duty on the part of the Marine Hospital Commissioners, and as these gentlemen never felt aggrieved by the dictatorship of Dr. Douglas, and his assuming supreme reign, it is to be presumed, that neither party considered that any cause of complaint existed. Dr. Douglas assumed the functions of the Commissioners, and performed them, which these gentlemen appeared contented to allow him to do,—thereby being relieved of much responsibility. Dr. Douglas cannot, therefore, at this late period, complain of the negligence and apathy of the then Commissioners, nor can they complain without incriminating themselves of his abuse of power which should never have been placed in his hands. It is since 1847, that a real antagonism has existed between the Commission and the visiting Physician, and it is now the duty of the Commissioners of Enquiry to lay before Your Excellency, what they believe to be the real cause of this discontent.

On entering upon their investigation, the Commissioners determined to avoid a consideration of all those charges upon which a decision of the Executive had already been given; consequently many of those questions involving the character of the officers of the establishment, which had already been settled by the previous Enquiry held by the late Commissioners and which are contained in a blue-book entitled "A Return, &c.," were not opened anew in the present investigation. By excluding all vague and unfounded hearsay evidence, and by obliging the majority of the witnesses to furnish written as well as verbal statements, the Commissioners believe they have protected their investigation from the charges of distorting evidence, and giving a false coloring to testimony, imputed to the inquiry held by the late Commissioners.

As the Commissioners of Inquiry are of opinion that Dr. Douglas' real hostility towards the late Commissioners, and their opposition to him, had its origin in the appointment of the six additional visiting Physicians in 1847, it is well to state the grounds of those strifes before considering the mutual charges of the Doctor and the Commissioners.

In 1847, Canada was visited with a greater amount of immigration than in any other year, and along with it came Typhus fever, which was then raging all over Ireland. The duties of the two Medical Officers became suddenly increased, and they demanded additional assistance, and the Government yielding to their request appointed Drs. Frémont and Racey as their colleagues, *but without any salary*. Here commenced the first real dissatisfaction amongst the increased medical staff. The newly appointed gentlemen complained of not being paid, and one of them, Dr. Frémont, soon retired, and Dr. Racey died of Typhus fever contracted in the discharge of his duty.

Soon after this event, the Government appointed six additional Physicians, the nomination of whom was left to the Medical Officers of the Hospital.

It would appear from the evidence laid before us, that Dr. Douglas expressed his disinclination to have associated with him some of those recommended by Dr. Painchaud, and proposed that six of the *senior* Medical practitioners of Quebec should be requested to accept the new appointments; but on applying to these gentlemen, they refused to act, as the Government did not propose paying them for their services. Six other names were then agreed upon; and when requested to meet these gentlemen, Dr. Douglas expressed ignorance of their having been nominated, although he himself had given in the names of some of them. For confirmation of this statement the Commissioners refer to the letter of Dr. Painchaud in the Appendix (see p. 53). This pretended ignorance on the part of Dr. Douglas was not calculated to create a good feeling towards him on the part of the new Visiting Physicians; and the rude manner in which they were received by Dr. Douglas, and the highly offensive terms in which he alluded to their pro-

professional qualifications, were calculated to engender the worst feeling amongst the senior and junior members of the medical staff. It would appear that Dr. Douglas wished, by making resistance in the beginning, to prevent any of the newly-appointed Physicians taking any part in the management of the surgical cases, for whose care and treatment he considered himself as alone qualified.

The position thus assumed by Dr. Douglas might to some extent be excused, were we ignorant of the fact, that he himself had aided in the selection of these gentlemen, and if they were unfitted for the duties of the office they were about to assume, it did not display on his part, a marked interest in the welfare and utility of the establishment to have made such a selection, provided his objection were well founded.

But, it does not appear that these gentlemen were devoid of experience or unaccustomed to the responsibility of Hospital practice, for three of them, Drs. Sewell, Blanchet and Nault had been attendants upon the Hotel Dieu for upwards of ten years, and in common with Drs. Jackson, Rowand, Robitaille and Hall, had acquired a large share of public confidence and public patronage, and as a body of practitioners were well qualified to discharge the duties entrusted to them by the Executive.

We need not point out to Your Excellency, that in all well regulated Institutions similar to the Marine and Emigrant Hospital, no matter how strenuously a candidate may be opposed by the existing members of the Medical Staff, if he succeed in procuring admission, he is met with cordiality and friendship, all past strife is forgotten, and every effort made to uphold his professional qualifications, and protect his reputation against any unjust assaults that may be directed against them. But in the instance now under consideration, we find a gentleman, at the head of a large public Institution, entrusted by the Government of the country with the nomination of a number of practitioners to be associated with himself in the performance of highly responsible duties, and who is so regardless of the trust reposed in him or so indifferent as to the manner in which it is discharged, as to nominate gentlemen whom he subsequently stated to be unqualified for those duties.

Your Commissioners would wish to put this construction upon Dr. Douglas' conduct, but a careful examination of the documents laid before them, as well as an analysis of the evidence furnished by the witnesses examined by them, prevents them forming such an opinion.

They cannot conceal from themselves the fact, that Dr. Douglas wished to retain to himself the whole of the surgical practice of the Hospital, and domineering over the newly appointed Physicians as he was accustomed to do over the inferior officers of the establishment in former years. They cannot allow this part of their report to be terminated, without directing Your Excellency's attention to the very insulting expressions made use of by Dr. Douglas at the first meeting of the increased Staff, to the words of which all the witnesses testify. He then stated to his new colleagues, that he would as soon let a "bull into a china shop, as allow one of "them into his surgical wards." No difference in professional standing, no superiority in experience, skill and learning, and no inequality of reputation, could warrant the use of such language—were all other causes of discontent removed, this reception of the newly appointed gentlemen, was quite sufficient to account for the quarrels and heart-burnings that have since existed.

It is no excuse for the use of such language, that Dr. Douglas was already at the head of the surgical part of the profession in Quebec, and that some of his colleagues were as yet unknown to fame; he should have recollected that no greater difference existed in their respective relations, than between the senior Surgeon of a European Hospital and his newly appointed colleague, and that it was not possible to have selected from the profession of Quebec, six Surgeons of equal eminence with himself; moreover, he must have been aware that some of those who accepted office did so for the sake of the surgical practice afforded by the Hospital, and which

in lieu of pecuniary emolument, they regard as the reward of their services, and he must have known that the duties of a Hospital Surgeon necessarily tend to make him more practically familiar with the treatment of important surgical diseases, and that it is for this object alone that many industrious and aspiring members of the profession seek Hospital employment. To have supposed that his colleagues would not aspire to distinction in this walk of practice, was to have supposed them either deficient in a laudable ambition to advance themselves, or wanting in moral courage to resist his usurpation, and that they would quietly have yielded to his dictation.

Their opposition to his views, was followed by an appeal to the Government, and it was ruled, that the newly appointed Physicians were to be considered in every respect on equal terms with those already in charge of the Hospital, and that no distinction was to be made in the surgical and medical practice except what was agreed upon by the Staff amongst themselves.

In these directions, the Executive was guided by the practice of the Montreal General Hospital, to the President of which application was made for information on the subject.

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## THE MARINE AND EMIGRANT HOSPITAL, QUEBEC.

A brief account of the present state of the Marine and Emigrant Hospital seems not only desirable, but absolutely necessary, as pertaining in an especial manner to the duties that have devolved upon the Commissioners, who will consider themselves amply repaid, if only a small portion of advantage should result from their investigation and suggestions; and they must be candid enough to admit that they do anticipate no small measure of good therefrom.

Under any circumstances the Commissioners will enjoy the consoling reflection that they have, to the utmost of their abilities, as professional men and as citizens, endeavored to acquit themselves faithfully and fearlessly, of the important trust confided to them.

On the third of November last, they paid their first visit to the Hospital—a very large edifice, which cost, as they were informed upwards of twenty-two thousand pounds. They were met by the House Surgeon, Dr. Lemieux, a highly intelligent young gentleman, who speaks English very fluently, and in a manner to fit him well for all the exigencies of his office.

The Apothecary's Shop, though small, was neat and clean; the officials were in good order and well labeled; the shelves and drawers were tidy, and every thing at hand.

There was quite an armory of splints of every kind and form, and among them a goodly array of Dessault's long splints for the thigh. There was no great abundance of Surgical Instruments, nor were they of very modern date; they had not apparently been obtained at first hand, although it was said, they had cost as much as would have procured a complete set of the very best kind, yet such as they are, they can be used efficiently, and are in good order.

The Library is in a large room, and consists of 321 volumes. The books, however, are not of very recent date, although, generally, the works of standard authors; they have been considerably used, and it would consequently appear that they were not originally purchased for the Marine and Emigrant Hospital, as there are few Students attending the Hospital to disturb or soil them; and it is very properly forbidden to take any out of the Institution. Whether procured at auction, or from the private library of some orthodox professional veteran, does not satisfactorily appear. They will, nevertheless, form the nucleus of a good library.

The whole edifice was examined, and every thing appeared to be in its proper place. The wards were closely inspected and were passably tidy.

All the bedsteads are of iron, and are strong; but the interstices, between the cross-bars or hoops, were too large, thereby allowing the bed tick to be forced through, causing it to wear the sooner, and the bed to be less comfortable. The bedding was sufficient, snug and clean. Although the ventilation is most defective, still there was no unpleasant odour perceptible in the few wards that were occupied, for as at this season of the year the navigation is nearly closed, the number of inmates is consequently small.

There was, however, one ward in which the smell was excessively bad, and this was a ward which had been placed at the disposal of a physician who had announced in the public prints that he was in possession of an infallible cure for the Cholera! There was a stove in active operation! The windows and doors were kept most carefully closed, and the natural consequence was, that patients and attendants were immersed in an atmosphere, which from its heat and closeness constituted the best medicine possible for imparting increased impetus and virulence to a disorder which apart from its own malignity, requires a cool, fresh, and pure atmosphere. So offensive was the smell, that the nurses were advised to remove the chimney board, and to keep the door ajar. A suggestion of a similar nature, it was afterwards understood, had been deemed an interference with the treatment, and invoked as one cause of the failure of all the cures that were to have been wrought.

This Cholera affair has been alluded to in a former part of this Report, and it is to be hoped, that no similar event will ever occur again in any public institution.

The Surgical Wards, certainly, presented to the medical men a far more pleasing appearance. Order and method prevailed, and while there were no cases of particular importance, yet, were the Commissioners struck with the large number of fractures under treatment, and especially of the lower extremities: the proportion of such injuries is far greater in this Hospital, than in any other certainly in this Province. This is to be attributed to the frequency of accidents occasioned in loading timber. They all seemed to be doing well: the bandaging was very neat, the splints well applied, and the whole reflected much credit on Dr. Lemieux. In fairness to Dr. Douglas, whose demeanor towards his fellow practitioners has so often been painfully alluded to by the Commissioners, they have pleasure in admitting that he has spoken of Dr. Lemieux in a most favorable and gentlemanly manner, in his capacity of House Surgeon.

The whole interior had a gloomy appearance, arising from the dull colour of the paint on the walls. It may be here observed, that paint is by no means the most economical, or most eligible application for effect, and certainly not in a sanitary point of view; it may be also remarked, that a preparation of lime and salt, with or without a small portion of plaster or size, colored to suit the taste, (the pure white or bluish cast is far preferable) would impart a lively aspect to the whole interior of the building. This should be applied twice a year, or once at the very least, and that should be in the month of April, so that all might be ready for the arrival of the shipping.

By this application, all exhalations with which the walls might have been impregnated, would be completely destroyed, and a fresh and sweet state of the atmosphere be imparted to the whole edifice. To continue this digression, the floors of such Institution should be in the first instance, well saturated with double boiled linseed oil, and this should be repeated every second year; each subsequent coating would require a smaller quantity of oil, than the previous one, and ultimately the flooring would become impervious to any thing that might fall on it, and thus all foul effluvia would be prevented. By these several means, the sanitary condition of the Hospital would be effectually sustained, provided always that recourse be had to some more efficient method for ventila-



tion, for, without a full supply of external air, it would be vain to expect any lodging place to be healthy or a fit receptacle for the sick.

The Commissioners were at a loss to conceive to what purpose one of the apartments, a dark room, was devoted; on inquiry, however, they were informed that it was in this dark room that the clothes of the sick were deposited, on their entering the Hospital, redolent as they were, with perspiration, filth, and often times with vermin, without being aired or washed. In this abominable and filthy state, they were "rolled up and labelled," and there left to fester (real fomites from which, on the slightest cause, pestilence might be generated and spread through the whole Institution) until the owners should claim them on leaving the Hospital.

Now the Commissioners must be permitted to state that they regret, as they sincerely do, that such an unpardonable oversight should be allowed to exist, which could scarcely have been expected, in an establishment exclusively devoted to sanitary purposes.

They must, nevertheless, state, that there is a Rule enjoining: "That the Stewards shall receive the clothing of the patients, catalogue and ticket them, and have such of them washed as may seem to require it;" but on examination it appeared that they "never seemed to require washing!"

The rule should have been imperative: "That all the clothing should be aired, washed, dried and pressed, and then ticketed, &c." This not being the case, a very unpleasant odour of perspiration and other offensive smells were apparent on opening the door of this dark chamber.

The fact is repeatedly alluded to by authors, and corroborated by daily observations, that (as stated by Griscorn in his work on this subject): "Scarcely any thing tends more to pollute the air than the accumulation of old rags and old clothes, imbued with every species of filth, and covered with vermin. They constitute the lurking places of those contagious fevers that occasionally devastate the neighbourhood of houses in which these wares are kept."

The distribution of the rooms appear to be tolerably well adapted for the purposes intended, and the whole Hospital might not be found exceedingly defective, had not the means of ventilation, of such paramount importance in the construction of dwellings for mankind, been totally disregarded, the want of which, particularly when combined with other important items of mismanagement, may tend to very disastrous results, and even to a high rate of mortality.

Of all the instances of faulty and inconvenient distribution which have ever come under the notice of the Commissioners, that of the cellar or basement story, was found to be the worst. The kitchen is situated here and is of far too contracted dimensions, to meet all the purposes of so important a department in an Hospital, it being only 6 feet 7 inches in height, and with but two small windows of four panes of glass each, 10 x 11 or 10 by 11 inches. There are no means for the escape of the large volumes of steam continually arising from the boiling caldrons.

The flooring is very bad, and is raised only a few inches from the soil beneath. and during high water, the planks forming the floor are lifted and are almost afloat, thereby rendering it very wet and always damp.

It is a most gloomy apartment, and not at all adapted for cooking. It is as damp, repulsive in appearance, and as defective from the want of pure air, as it is possible for any person to imagine, or be devised.

The Kitchen of so large an Hospital should be a spacious apartment of at least 30 feet in length, and occupying the whole breadth of the building, well lighted, properly supplied with water, and completely furnished with all the utensils and conveniences required for culinary purposes. Then should follow in succession separate store-rooms for all kinds of victuals, fuel, materials for cleaning and lighting, and various other articles necessary for so large an Institution.

The cellars are all on this flat, and are equally as wet and damp as the kitchen, requiring planks to be laid down on the earth for the purpose of a pathway, without which those having business there would sink shoe-deep in mud.

The water-closets are located in the south end of the building, one on each flat to gain access to which the sick have to pass through the pantry, where the women are almost constantly at work, and cannot but hear the *flatus* and noise made during defecation, as the seats are within a few feet of them, and only separated from their washing place by a thin half glass door and wooden partition. In addition to this, the cess pipes are often obstructed in summer and constantly during winter, as no steps have ever been taken to guard against their freezing; besides which the sewers are always full. The result of this want of precaution is, that the privies are useless half the year, and during the summer, emit a very foul stench; in winter the few sick remaining in the Hospital, and who have sufficient strength, are obliged to go down stairs, and cross the yard, to find a place where they can obey the calls of nature! The others have recourse to the night-buckets, a filthy and highly improper expedient, and which means should be taken to avoid.

Dr. Douglas assured the Commissioners, that of late years in particular, the Hospital had become quite unhealthy, the basement story always abounding in bad smells, of so deleterious a nature as sensibly to affect the health of the sick to such a degree, that he has frequently been under the necessity of transferring those of his patients labouring under wounds and ulcers to an upper story, who when sufficiently strong were sent abroad for exercise and air. Nor is it to be wondered at, when the attention is directed to the facts above stated, having reference to the cess-pipes and sewers. The exhalations from similar ones when opened, have in many well recorded instances, caused instant death. This infectious air is exceedingly expansive as well as penetrating, and is rapidly absorbed by the soil, not only to be given out again, to the air above ground, but also to be in constant operation; thus it occurs, that the pestilential vapour is incessantly at work, and as no possible remedy can correct it, there is no safety but in total abandonment of the locality. It is true that the putrescent mass will ultimately decay, and by evaporation the earth at last discharges itself of all the mephitic gas it had imbibed, but that can only be achieved by time, and the complete abandonment of the site.

A recent writer has most correctly remarked: "That it has been found impossible to divest water once contaminated by human *excreta*, of its noxious principles," in another place the same popular author uses these words, very severe but, it must be admitted, too true: "It is hard to conceive the depravity of sentiment which tolerates the presence, the contact even, of human *egesta* which makes no effort to avoid or remove the most loathsome excrementitious matter."

Although this extensive edifice is comparatively new, having been constructed and established for the reception of sick Mariners and Emigrants, in the year 1835, it has already the appearance of decay, and will ere long require great repairs; and should no measures be adopted to prevent the water from pursuing its course from the roof into the stone work, and through the window sills, the plastering will be destroyed, for it is already much injured, the whole masonry work in bad condition, and the massive walls will crumble and fall, in consequence of the water freezing between the stones. There are neither spouts nor gutters attached to the building, but in place of these and apparently for ornament, there is a moulding, projecting nearly 16 inches from the walls, about a foot below the eaves. On this ornamental projection the rain falls, a part of the water penetrates behind this contrivance, into the stone work, the rest is projected over the moulding, and with the slightest wind is blown and spread over the whole external surface of the building, thereby destroying the mortar on the

outside; and by continually falling on the window ledges, works its way under them and injures the plastering within, as already stated.

The Commissioners would suggest, that the inconvenience alluded to, might be effectually remedied, by carrying the eaves five or six feet further out; this projection would throw off the water to such a distance as to prevent it wetting the walls, except occasionally during violent gusts of wind. It might be made ornamental and even useful, by being lined underneath with boards in a circular form, and painted white. This would reflect much light, and give an appearance of airiness to the building, while it would withhold the direct action of the sun's rays in hot weather, and thus render the whole Hospital cooler and more pleasant. In winter it would tend, not only to keep off the cold in some degree, but also in a great measure ward off the snow; prevent its collecting about the windows, and diminish the force of wintry blasts. This addition would cost comparatively but a small sum, certainly nothing in comparison to the advantages to be derived from it.

Some plan of the same description might be adopted in the construction of all similar buildings; a short gutter only would be required to keep the droppings of the roof from falling over the door-ways.

The Commissioners remarked that a long, low, wooden building about one hundred feet from the Hospital, constructed in the first instance for a shed and wood-house, was being vamped up at considerable expense, for the purpose of being converted into a Cholera or Fever Ward; certainly a very necessary and proper appendage to a large Hospital. It is to be regretted, however, that though designed to be but a temporary structure, a little more regard had not been paid to its sanitary state. The sills of the building, although on a stone foundation, were but a few inches above the ground; at trifling cost, the whole edifice might have been raised a couple of feet, by which means the floors would have been higher from the earth, and less exposed to the exhalations and vapours that are always given out from low, damp and shaded places. These could have been effectually carried off through small apertures in the wall. But even a far greater error has been committed in the interior of this building, which is not over seven feet high, and is intended to accommodate a large number of sick. There is not one single opening for ventilation in the whole of the *low* and *flat* ceiling; and how the bad air is to go out, and the good air is to get in, surpasses the philosophy of the Commissioners; and yet, there was a means of effecting this, as simple and efficacious as advisable, which could have been resorted to at little cost. Between the ceiling, which is of boards, and the floor above, there is a space of nearly a foot, caused by the intermediate beams; it would have been the most easy thing possible to have made openings between each beam, (for the whole frame-work is of thick planks) and in each side of the building opposite to each other of from twelve to fifteen inches broad and four or five inches high, in which a small blind could have been put, thus would a thorough draught be obtained through and through between the floors, and if there were a certain number of perforations made in the ceiling, the fetid and buoyant air would readily issue, and be carried off by the transient current of fresh air from the outside, and a part of which, unquestionably, would pass down by its specific gravity, while the hot air from its levity would rush upwards, hence, a double current would be in constant operation by the escape of the air between the floors. Registers could have been easily placed in all these small ventilators, to moderate the draught as might be required. For want of some trifling mechanism of this kind the most frightful consequences might ensue, from the air becoming infected as much from its deterioration in the process of breathing, as from the poisonous emanations from the bodies of the sick which are constantly exhaled; and who, in truth, would suffer even less than their attendants and physicians, lying as they would, low on their beds, while those walking about would have their heads and breathing apparatus

always immersed in this pestiferous effluvium, and it is such, seeing that there would be more than one deleterious agent always at work.

The author already quoted in reference to sanitary matters, uses these words, which are applicable to Canada quite as much as to England or elsewhere: "Society, from base to apex, has yet to be indoctrinated with the true principles of the reciprocal relations between vital functions and physical elements." And when treating on the subject of pure air and adequate ventilation, he makes the following remarks, which, it may be said, are of universal application; "Almost without exception, in all structural arrangements, there is no plan, every builder builds as to him seems best;" and in another place we find these words, the truth of which is so palpable, and they are so judicious, that it would be a happy circumstance if Architects and Engineers, nay, if everybody was to acquire some practical knowledge of the animal economy. "Architects and Builders seem to have been profoundly ignorant of the physiological fact, that man carries a pair of lungs beneath his ribs, fitted only to inspire oxygen and nitrogen in their purity."

The able author might have extended his remarks a little further, and have stated, that besides these uses of the lungs in breathing and in the formation of blood, they also possessed the faculty of ridding the body of one of the most deleterious principles in nature, and which is abundantly formed in the system, and if not duly eliminated, would prove fatal ere long; this mephitic gas is one well known under the name of carbonic acid gas, and is destructive to life when collected in any quantity, and where it constitutes the whole atmosphere of the place, causes death as instantaneously as would a thunderbolt.

This Hospital, under the best attempts at improvement, can never be made wholesome, or freed from noisome smells arising from the lowness of the ground, which at high water is but a few feet, and often only a few inches above the river: as the drains have little or no declivity, they therefore can very imperfectly empty themselves of their contents; and what is still worse, they are more or less in a constant state of agitation, than which nothing tends more to cause them to give out vast volumes of putrescent gas; for by the alternate rising and falling of the tide, the pestiferous mass they contain, is driven backwards and forwards repeatedly every day.

This locality can never become perfectly healthy, even if the contamination above pointed out did not exist, the atmosphere being malarious from the great extent of low lands, and especially from the marshes which surround it on almost every side: it will, therefore, always be exposed to unhealthy emanations. It is furthermore most inconveniently situated, and not very easy of access. The Commissioners, therefore, conceive themselves warranted from the above facts, most respectfully but strenuously to recommend that, instead of building up the wing for which the foundation has long been laid, no further outlay be made for this purpose than the exigencies of the moment actually require; but that the best possible bargain should be made to get rid of the present building, which might easily be converted into use as a storehouse, and the premises being sufficiently extensive, into a Lumber or Timber Depot for the numerous ship yards in the vicinity; and, further, that a new Hospital should be erected with the least possible delay in a more *elevated* or *dryer*, and therefore more salubrious position, and one which would be more easy of access.

It has been said, that not a few persons conversant with this establishment have expressed their opinion that it would be a fortunate circumstance if it were burnt down, rather than be continued as an Hospital for the relief of the sick, who only become worse by a sojourn in so pestiferous an atmosphere.

It may not be deemed irrelevant in connection with this subject, to suggest that there should be stationed at some convenient point, at or near the Port (perhaps the best would be at the Custom House,) half a dozen or more pairs of

“bearers” for the purpose of conveying the sick and maimed to the Hospital; nothing being more injurious to the sick themselves nor more horrifying to a medical man, than to see a poor fellow with a broken thigh or other limb carried on men’s shoulders a couple of miles—the extremity dangling and the fractured end of the bones constantly grating against each other and lacerating the tender flesh, thus rendering the injury infinitely worse than it was originally. This cruel and revolting spectacle has been witnessed at Quebec; it should be effectually guarded against, and means should be provided, and care taken to convey the unfortunate sufferers in a state of comparative ease and comfort to the Asylum which humanity has prepared for his reception and relief.

The subjoined extracts from two valuable little works lately published, the one in England and the other in New York, on the ventilation of buildings seem, far from being out of place, to be loudly called for—that the oversights so invariably committed in the construction of our public buildings may, for the future, be avoided, without which all measures, however ample, complicated and expensive, must prove abortive in all that relates to sanitary purposes.

Dr. John H. Griscom in his work on the uses and abuses of air, at page 156, states as follows:—

“The renewal of the air is not so light a matter as is supposed. To effect it, a simple communication is not sufficient, a mere contact of the external and internal air. It is necessary that one or more *currents* exist to multiply that contact and cause the pure air to prevade that which is vitiated.”

And Charles Tomlinson, in his Rudimentary Treatise on warming and ventilating, says, at pages 256, 257 and 258.

First, “The proper supply of fresh air is denied to the great mass of the population, because builders who ought to be perfectly acquainted with these things, too often neglect to study the natural laws which Chemists and Physiologists have placed on a sure basis.”

And again: “When the great masses of the population become fully alive to the necessity of abundant supplies of wholesome air within doors, then and not till then will they also become alive to other sanitary measures; then will every house be properly supplied with *pure water*, efficient sewerage and special means for *letting out foul air and admitting fresh*; then shall we cease to bury our dead in the midst of the living; then will cattle markets, slaughter-houses, and all noxious trades, manufactures and occupations be removed to a greater distance from dwelling houses; then shall we have Boards of public health filled by competent men, and endowed with adequate powers; then will vested rights in injurious abuses yield to public opinion, and the health and well-being of the population will be of paramount interest.”

#### *Further remarks on the condition and economy of the Marine and Emigrant Hospital at Quebec.*

The Commissioners observed, with surprise, that the practice of smoking was indulged in by nearly all the male patients. In one ward every patient had his pipe and tobacco. Without alluding to the danger of fire incurred by allowing patients lying in bed to indulge in this habit, it may in certain cases be injurious to some of the patients and offensive to others; whilst a tidy and neat appearance of the ward can hardly be maintained. The bad condition of the water-closets, generally, has already been noticed, but this was particularly the case in the one connected with the syphilitic ward—which was so completely out of repair that the venereal patients were obliged to go out to the privies at some distance from the building. It is needless to remark upon the danger incurred by those patients, many of them in a state of salivation and obliged to leave their

warm bed and warm ward to resort to a privy, in the inclement season, during which the Commissioners visited the Hospital, when snow, sleet and rain were daily falling.

The appearance of the servants was not as clean and respectable as could have been desired, and indeed there is little about the establishment to encourage decency of attire and self respect on the part of the servants and nurses.

When the Commissioners visited the kitchen, the servants were at their dinner, and instead of the cleanliness, order and regularity to be expected at the meals of the servants of such an Institution, disorder and discomfort were observed. The table at which they were sitting was composed of a few boards nailed together and laid across a couple of uprights; there was no table cloth, the portion of each servant seemed to have been helped out to him separately, and some were eating in one direction and some in another. The apartment was very dirty. Adjoining this room (the kitchen) was the one appropriated for the division and distribution of the diet for the different wards; the boards upon which the meat had been divided and cut up, was in any thing but a clean condition, and drew from the Commissioners, remarks to that effect. In one part of the chamber was a bedstead and bedding, and articles of female dress were strewed about in different directions.

These, it appeared, belonged to the cook, for whose occupation of the apartment, which was intended for another purpose, and which, it is manifest, should not have been converted into a dormitory, no better excuse could be given than that she found it more convenient to sleep there than in her own room, as it was nearer to her work.

Had the room been in a tidy and clean state, it might have excited less surprise; but it was in a state of great disorder, and very badly ventilated.

The Commissioners would remark, that Hospital servants, like those in private families, soon throw aside the decencies of life, when they do not see a respect for them observed by their employers; and the slovenly attire and habits of those of the Marine Hospital admit of some excuse, when we know that so few comforts have been provided for them, and which could have been procured at so little expense.

In the future management of this Charity, the Commissioners trust that those to whom its interests are confided will pay attention to this matter, and see that a proper room be provided for the servants to take their meals in, and that such cheap comforts as a clean table cloth, tumblers, knives and forks, be procured; and that each servant be obliged to keep himself or herself clean and respectably dressed, and observe the decorum and propriety of conduct at their meals, required from similar persons when in private service.

There can be no doubt that, by making the position of servants in the Hospital comfortable and respectable, a better class of domestics will be procured; but, as at present managed, few servants who could be engaged elsewhere would be likely to enter its employment.

The Commissioners noticed, with astonishment, the absence of all proper means for the washing and bathing of the sick, an oversight on the part of the Visiting Physicians not easily to be accounted for, in consequence of which the Commissioners deem themselves called upon to make some brief suggestions on the subject. A metallic bathing tub, one of *cast iron*, the cheapest and the best, should be placed at the extremity of each corridor, with a moveable screen in front. The water, when not used, would not require very frequent changing, as the iron would prevent its speedy decomposition. The contents of these tubs could also be used for sprinkling the floor, be at hand in the event of fire, and the constant and gradual evaporation of the water would tend to restore and maintain in the atmosphere of the place its due hygrometic condition.

It may not be irrelevant to recommend that a small portable fire-engine should be placed in every corridor; it would also serve for the purpose of sprinkling the floors.

*Evidence of Doctor Douglas and the other Visiting Physicians of the Hospital.*

Dr. Douglas having appeared before the Commissioners on the 6th November, 1852, in compliance with their request, gave an account of the commencement of the abuses which have since existed in the Marine and Emigrant Hospital. He states that, at one time, the Hospital had got into the hands of one family, one member of which was a Commissioner, another Visiting Physician, a third was House Surgeon (son of the Visiting Physician), and a fourth, a nephew of the same Visiting Physician, was Medical Officer to the fever sheds. All these gentlemen were receiving Government pay. He also stated that, in the year 1847, the Hospital became completely *demoralised*. A great difficulty was experienced in procuring nurses for the fever patients, and at last it was found impossible to get respectable women to volunteer for this service. The Commissioners were then obliged to avail themselves of the services of several female prisoners, at the time confined in the Quebec Gaol, who were granted a free pardon on condition of their acting as nurses in the fever sheds. These women being of immoral character, introduced every species of vice into the Hospital, and the *morale* of the Institution became thus contaminated, and it has not yet recovered from it.

He states that he frequently complained on this score to the Chairman, Dr. Morrin, and pointed out the evil which would certainly follow the employment of such characters in the Hospital; but that no attention was paid to his remonstrances.

He also stated that much of the mismanagement of the Hospital was caused by the appointment, in 1847, of a new Board of Commissioners, not one of whom, except the Chairman, Dr. Morrin, was in the least acquainted with the discipline of an Hospital, and that they took no pains to become acquainted with it. He likewise mentioned as another cause of disorder, the appointment by the Government of six additional Visiting Physicians, some of whom were, in his opinion, unfit to perform the duties imposed upon them. At first he refused to hand over the surgical wards to some of them, but stated his willingness to allow Dr. Blanchet to take charge of his wards, but objected to allow some of the others.

One of these gentlemen happened to mention, that he had accepted office principally for the opportunities thus afforded of "learning surgery;" whereupon Dr. Douglas remarked that, in his opinion, the gentleman ought to have learned surgery elsewhere, and should be prepared to practice it at the Hospital when he accepted office.

Dr. Douglas objected to giving up his surgical wards, because he had not received any commands, either from the Executive or the Commissioners, to do so. The newly-appointed Physicians applied to Government for information respecting the position they were to occupy in the Hospital; and, in reply, Mr. Provincial Secretary Daly informed them that they were to be placed on the same footing as Drs. Douglas and Painchaud, except that they were not to receive any salary: that there was to be no distinction between the surgical and medical practice, except what might be agreed upon amongst the medical staff themselves.

Dr. Douglas declares that owing to this order, the reputation of the Hospital has been seriously injured, that operations have been attempted by unqualified Surgeons who were incapable of completing them. That in one particular instance, the operator wished to extirpate a portion of diseased rib, and contrary to his advice, commenced the operation, became confused, lost his presence of

mind, and that finally the patient was removed to bed without the operation being completed. The same Surgeon on another occasion had to perform Tenotomy (one of the simplest operations,) and "stuck fast" in the middle of the operation. On another occasion, a man was allowed to remain three days labouring under a strangulated Hernia; the Surgeon not affording him any relief when he, Dr. Douglas, was called to see the patient, he returned the Hernia by the Taxis without any trouble, but it was too late, inflammation of the *peritoneum* had already set in, and the man died. Dr. Douglas mentioned some cases of badly set fractures, which he was obliged to break over again, and set in the proper manner, so as to insure the future use of the limb to the patient.

Dr. Douglas stated that the character of the Hospital became so much injured by the practice of some of the newly appointed Visiting Physicians, that patients used to leave the Hospital sooner than allow some of them to operate upon them. He particularly alluded to two cases, in one of which it was necessary to amputate a finger, in the other a toe; these patients left the Hospital sooner than allow the attending Surgeon to operate upon them. These cases occurred soon after the "rib case." These patients did not subsequently apply to Dr. Douglas to perform the operations.

Dr. Douglas stated that there is no written rule for calling consultations in urgent or dangerous cases; nor is there any rule obliging a Surgeon to abide by the decision of the majority of his colleagues when their opinion is adverse to the performance of an operation.

Drs. Blanchet and Nault, two of the newly appointed Visiting Physicians, resigned because they were not to be remunerated for their services.

Dr. Douglas then gave a very high character of Dr. Lemieux, the present House Surgeon, he had always found him at his post, he took excellent care of the patients, and "gave him every satisfaction." He complained of the incapacity of the present Apothecary, who though a student of only three months' standing, was appointed by the late Commissioners to that important office. He is not aware if the young gentleman is related to any of the late Commissioners, nor can he tell if the vacancy in the office was duly announced to the Medical Students of Quebec.

Dr. Douglas disclaimed any connection with Dr. Marsden, and averred that he had nothing to do, either directly or indirectly with that gentleman's charges against the management of the Marine and Emigrant Hospital, and that he had no desire to have him summoned as a witness on his behalf; that Dr. Marsden was a gentleman whose testimony would be more injurious to his friends than his enemies: that he was very excitable and apt to be carried away by his feelings.

He said, he (Dr. D.,) had made his charges against the late Commission, advisedly, and had other witnesses to substantiate his statement.

With reference to the expulsion of Dr. Marsden from the Marine and Emigrant Hospital, he stated that there was a rule in the Hospital, that no Physicians should enter the Wards, except in the presence of the Attending Physician, or during the hours of visit; and that such a rule was not made to act expressly against Dr. Marsden, but that the House Surgeon had his attention directed to it, that he might make the same known to Dr. Marsden.

Dr. Douglas appeared again before the Commissioners on the 8th of November, 1852, and furnished them with his reply to the letter of the late Commissioners in answer to his own, of the 17th July, 1851.

He expressed his satisfaction with the manner in which the present Commissioners were conducting their enquiry, inasmuch as they were giving each party a fair and impartial hearing.

In the course of a desultory conversation which then ensued, Dr. Douglas complained of the bad situation of the Hospital, the want of pure air, and the



very unhealthy condition of the syphilitic wards, that latterly he had experienced difficulty in healing the venereal sores, and in some instances, was obliged to remove patients to the upper wards, where they quickly get well; in other instances he was obliged to discharge the patients from the Hospital altogether, giving them medicines to take in their own lodgings; they rapidly got well, although their diseases were quite intractable whilst in Hospital, which the Doctor attributed to the bad foul air surrounding the Hospital.

During the interviews between Dr. Douglas and the Commissioners, that gentleman made other charges against the Officers of the Institution. He stated that some of the Sailors, inmates of the Hospital, had been robbed of their money, and that the money had been divided between the present House Surgeon and some of the Nurses, and the late Steward, Mr. Cutter. That in one particular case, a cheque of Mr. Deane's, the President of the Board of Trade, had been cashed, and when the owner was about dying, he made a will distributing this money amongst the Officers of the Hospital above named.

That the will was made in such an irregular manner, and the circumstances of the case were so peculiar that three Notaries to whom application was made to draw up the will refused to do so, as such a transaction was discreditable to a charitable institution. Dr. Douglas also referred to the case of a Sailor named McIntosh whose money was stolen from him by one of the Nurses.

The Commissioners having discovered, that with the exception of this one case, Dr. Douglas could not specify any instance where a similar disposition of a patient's effects had been made, and as this very case had been thoroughly enquired into, and the accused parties acquitted by the decision of Your Excellency, the Commissioners did not conceive that they were called upon to re-investigate the matter; and for the same reason they objected to enquire into certain charges of immorality brought forward again by Dr. Douglas against the Officers of the Institution, which upon examination were found to be the identical charges already preferred by Dr. Douglas against the same Officers, and upon which Your Excellency had already adjudicated. Dr. Douglas repeated the same complaints that he had before preferred against the late Commissioners of neglecting to attend to the requisitions of the medical staff, for the necessaries of the Hospital, whereupon the Commissioners suggested to him the *propriety of putting these complaints in writing* as part of the charges he stated he was prepared to advance against the late Commissioners. All these complaints are incorporated in the letter of Dr. Douglas, dated 6th November, 1852, to which attention will be directed when the mutual charges of the Commissioners against Dr. Douglas, and Dr. Douglas against the late Commissioners will be under consideration.

Dr. Douglas also preferred charges against Dr. Painchaud, of indecency in the style of his lectures to the Students of the Hospital. He said that these lectures were illustrated largely by indelicate and even obscene anecdotes and allusions to the diseases of certain patients of Dr. Painchaud, that he felt it is duty to prevent his own Students from attending them, and consequently prohibited them doing so. Dr. Douglas related some particulars in support of the statements he now made to which the Commissioners do not think it necessary further to allude.

At present the Commissioners of Enquiry would direct Your Excellency's attention to the statements of the other medical officers of the Hospital, for having heard Dr. Douglas' complaints of his colleagues, and listened to his charges against them, of incapacity, &c., they considered it but right and proper that these latter gentlemen should be heard, not only in their own defence, but that they should be allowed an opportunity of stating what reasons they might have for being dissatisfied with the conduct of Dr. Douglas, and what causes he may have given, which have led to the destruction of the peace of the Hospital and the good feeling which ought to exist amongst its medical staff.

The Commissioners regret exceedingly to find such unanimity displayed in describing Dr. Douglas' treatment of his colleagues, as pervades the testimony of all these gentlemen: they have all been aggrieved by him; they have all smarted under the slights he has cast upon them; they had all felt that their reputations had been injured by his unkind and unjust aspersions; they have all murmured, but strange to say, they have all submitted to these acts of oppression, indeed it may be said of cruelty, without offering resistance, with one single exception, that of Dr. Rowand, who not only maintained his position in the Hospital, but openly challenged on two occasions, Dr. Douglas' assumption of infallibility, and proved that that gentleman was, like all medical men, liable to err, and that on two very important occasions, his errors were near leading to irreparable mischief. Dr. Rowand did more, he openly complained to the present Commissioners of Dr. Douglas' neglecting to consult his colleagues, before proceeding to operations, and openly charged him with the blunders he committed in the cases just referred to. With the exception of these two instances, the Commissioners have not been able to ascertain any in which the present colleagues of Dr. Douglas have remonstrated against the conduct of which they now so unanimously complain; nor, do the Commissioners find any other instances recorded, where Dr. Douglas himself has been brought to task, or his acts examined with the same searching scrutiny, as he was accustomed to employ in the examination of those of his colleagues.

The Commissioners cannot allow themselves to believe that Dr. Douglas is different from all other medical men and that he has never made mistakes of omission or commission in his hospital practice.

To suppose such exemption from error, would be absurd, for, until medicine can rank as an exact science, errors will be committed, and there is little doubt that a captious enquirer, searching for materials to form a charge against Dr. Douglas, could find plenty of evidence where perhaps the Doctor least expected it; a knowledge of our great liability to error, and of the care constantly exercised by the scientific and conscientious practitioner to avoid it, should have made a practitioner of Dr. Douglas' experience and acknowledged abilities more lenient towards his junior brethren, and perhaps a kind suggestion, or advice delicately communicated, might, even in the instances to which he alludes, have averted the mischief of which he complains. Indeed, the Commissioners were so impressed with that idea, that they asked Dr. Douglas if he did not consider it his duty to assist his less experienced colleagues with his advice, and occasionally to urge them to abandon operations they were about to commence, and plans of treatment they were pursuing, in which courses Dr. Douglas might have considered them in error.

To this enquiry he replied, that he did not consider that his directions, as received from the Government, authorized him to interfere in the least in the affairs of his colleagues, that when asked his opinion, he gave it, but, that it was not always followed; he allowed them to follow their own courses, without any active opposition from him.

The Commissioners would again draw attention to the confusion and absence of system created by the want of rules regulating the conduct of the Medical Officers in cases requiring consultation. Consultations at the Marine and Emigrant Hospital seem to have been little better than solemn farces. The staff were summoned, their opinions given, and the operator proceeded, in many cases, to carry out his original intentions regardless of the opinions of the majority of those present. *Cui bono* such consultations? Were opinions asked, that respect for them was to be manifested by going in direct opposition to them? Yet, such has often been the practice from 1847 up to the present time.

The Commissioners hope that the important feature in hospital discipline of holding regular consultations will occupy a prominent place in the future man-

agement of the Hospital, and they believe that thereby the reputation of the Hospital will be greatly increased, and what is of more consequence, the safety, care and judicious management of the patients will be more effectually carried out, and the cause of suffering humanity be materially benefited.

Dr. Douglas again appeared before the Commission, and requested that Dr. Fremont, Mr. Patrick Whelan and Mrs. Whelan, Buckley, the Sexton, and Mr. Dean, President of the Board of Trade, should be summoned to attend, as he believed they could each give evidence in support of the statements made in the letters of 17th July, 1851, and 8th November, 1852.

Letters were accordingly addressed to these parties. Mr. Whelan and his wife, and Mr. Buckley attended at the hours specified, but Dr. Fremont did not make his appearance before the Commission, but furnished them with a written document containing his evidence.

Mr. Dean did not attend, nor did he direct any written statement to the Commissioners, or even acknowledge the receipt of their letter.

Mr. Dean's conduct is the more strange, as he exhibited, on one occasion, a great desire for an enquiry into the affairs of the Hospital, and did not display any great reluctance in bringing forward charges which he shrunk apparently from substantiating when an opportunity presented for his doing so.

As the testimony of Mr. and Mrs. Whelan and that of Mr. Buckley refers to the charges against the Commissioners, and not against the Medical Officers, its examination will for the present be omitted.

The Commissioners summoned Drs. Painchaud, Nault, Sewell, Hall, Robitaille, Jackson and Lemieux, to give their opinions concerning the causes of discontent in the Hospital, and these gentlemen were requested to state whence they believed the evil to originate, and how it could be best remedied.

The Commissioners did not summon Dr. Rowand on this part of the enquiry, for as he already appeared as an accuser against Dr. Douglas, they did not consider that his testimony was called for.

The evidence is given in the order in which it was taken. The striking similarity in the testimony of the witnesses is very remarkable, and must convince the most sceptical, of the truth of the assertions contained in the different depositions.

### *Letter from Doctor Painchaud to Commissioners of Enquiry.*

*(Translation.)*

GENTLEMEN,—You have been so obliging as to permit me to state in writing what I know in reference to the state of the Marine and Emigrant Hospital, since I have been one of the Visiting Physicians, directing my remarks particularly to what has passed in it since 1847.

Painful as the task is to pourtray the oftentimes unpardonable conduct of a professional brother, of a colleague and a friend of long standing, I shall not shrink from my duty, but act in obedience to your requisition.

I regret that the time does not permit me to select my phrases, but I have thought fit to give a faithful and succinet account, without attending to the sounding of my sentences.

I was appointed Visiting Physician of the Marine Hospital jointly with Dr. James Douglas and on the same day.

The first ten or eleven years passed in the most perfect peace and harmony, for the excellent reason, that I allowed my colleague to do as he pleased.

I was under the impression that I was indebted to him for my new appointment, and that he had in a manner obliged Lord Gosford to place me in the Hospital. I considered him then, and I still consider him to be the most skilful Surgeon in North America. I thought that he was better qualified than myself

to govern an Hospital, and I left the government to him. I always acted with him, signed everything with him, and joined with him in his *accusations*, often at my own risk and peril.

In the affair with Dr. Andrews, the House Surgeon, Dr. J. D. drew me into action of damages, personally for £10,000. The suit lasted 18 months, was dismissed for informality, and I came off, with a loss of my share of the costs.

Not till 1846, on the appointment of my son as House Surgeon, were our good understanding and amicable feelings interrupted.

Dr. J. D. was convinced that my son had used unfair means (played him a trick) to supplant Dr. McGrath whom he favoured, and had strongly recommended.

My colleague then observed to me, "your son will not be three months in the Hospital. I will put him to the proof." "Why should he not remain long in it," I replied, "provided he does his duty? Can you intend to treat him unfairly? If so, I give you notice that I shall support him, not as being my son, but as I would support any other House Surgeon." I explained to him as a friend, that my son was only desirous of improving himself in Surgery, under his auspices, for a couple of years, and intended to devote himself as a Surgeon-missionary to the relief of the Indians at Vancouver's Island; that the young man, strongly recommended by his professors at Paris, had been equally so, by all the most respectable practitioners in Quebec; and that he was not unprovided for; that with me he had a situation upon which he might enter forthwith, and very much to his advantage, with the prospect of succeeding me.

This made no impression on my colleague. He kept his promise and his word that he would exercise his tyranny on the young man. He commenced by questioning him every day, in presence of all the pupils in the Hospital, on *materia medica*. His imperious tone intimidated him, and sometimes caused him to answer erroneously. He complained to me in my official capacity. I remonstrated with my colleague on his unjust conduct, and assured him that, if the Commissioners did not do justice in the case, I should make direct application to the Executive. The examinations ceased, but the tyranny was none the less continued in another form. Dr. J. D. deprived him of all moral influence, by making him an object of ridicule before the patients and the nurses, and by charging Whelan, the Steward, with a part of his duty, as admissions and discharges.

In the spring of 1847, a Methodist Minister, Mr. Selly, offered himself as a pupil at the Hospital. He came strongly recommended by one of the Members of this Honorable body of Commissioners, Dr. W. Nelson. I received him as well as I was able, and assured him that my son would do everything in his power to make his time pass usefully and pleasantly in the Hospital. I also advised him to visit my colleague. This he had already done; and he told me moreover, that he had taken him under his protection.

Several days after, Mr. Selly assumed towards the House Surgeon an insolent and rude demeanor. Dr. J. D. addressed himself, in his visits, only to him, and he made up his prescriptions. Towards the end of the month of May, the Hospital filled rapidly with cases of typhus fever; the House Surgeon was scarcely competent to do the whole duty of filling up the tickets of admission, and afterwards entering them in the large book. The Commissioners allowed him an assistant, a writer, at a dollar per day. Dr. J. D. had Mr. Selly appointed. At the end of a week the new writer threw pen and ink aside, and went to work to prescribe for the patients in the Hospital. He lived at that time with his wife at the Little River; generally arrived between 8 and 9 o'clock, and went away between 3 and 4.

In order to shew his contempt for me, this Mr. Selly used to call out on my arrival at the Hospital, "John, or Thomas, bring the tray; I am going to make my visit!"

I thought it right to make a strong remonstrance to my colleague on this occasion. He made answer that Mr. Selly was a man of talents, that he had confidence in him, and that he made himself answerable for his acts.

Subsequently, my colleague entrusted to him his principal surgery, No. 15, with orders to prevent all persons from going near the patients; the House Surgeon on going to make his usual visit, was brutally turned out, and the watch-chain which he wore round his neck was broken; next morning he complained to me, in my official capacity. I referred the complaint to my colleagues who were, at that time, Messrs. Douglas, Racey and Fremont. Mr. Selly was called, and being questioned by Dr. J. Douglas as to whether he had really acted in that manner, boldly answered in the affirmative, and declared that he had acted according to orders. Dr. J. Douglas then made use of these unfeeling words "you served him well."

An enquiry took place, but came to nothing; the Commission of the day was literally Dr. Morrin. Mr. Gowan attending to nothing but the building, and Dr. Parent being too sick to act.

Mr. Selly was moreover charged with the minor operations which he performed in the Dispensary, shutting out the House Surgeon and some Canadian Students, who made a complaint to the Commissioners, which came to nothing. They even obtained no answer: yet, Dr. J. Douglas had cognizance of the complaint for he enquired of Mr. Lemieux, one of the pupils, whether he was not at the head of the complainants. The latter replied that he was. The Dr. observed to him in my presence, "You shall remember me," and he kept his word. At the contest for the office of apothecary, Dr. Douglas' pupil was proved to be very far inferior to Mr. Lemieux, but Dr. J. Douglas found means to get Mr. Martin appointed, because he had longer to continue his medical studies. I think that Dr. J. Douglas has always owed Lemieux a grudge for it, and that he still owes him one.

Mr. Martin was installed as apothecary, and was soon converted into an instrument of torture against the House Surgeon. He nailed up the door of communication between the apartments of the latter and the Dispensary. A complaint to the Commissioners came to nothing. The House Surgeon then made application to the Executive, and a new body of Commissioners were appointed and a formal enquiry set on foot. Whelan, the Steward, and Mr. Martin were dismissed. A final effort of Dr. J. Douglas was the representing of the House Surgeon as of a feeble constitution, as being always in ill-health, and that he, Dr. J. Douglas, could no longer answer for the safety of his patients. The answer of the Executive was prompt and brief. The House Surgeon was to resign, and the Commissioners were to send in the name of the person whom they recommended to fill the vacancy. The House Surgeon had, however, still leave to offer any remarks which he might have to make, through the Commissioners. The House Surgeon humbly replied that he would submit to the will of the Governor General, that he would send in his resignation, but that at the same time he defied Dr. J. Douglas to prove that he had been a single hour absent from his duty, with the exception of two attacks of Typhus Fever contracted in the Hospital.

Dr. J. D. thought he had gained the victory! He gave it out through the Hospital, that there was no longer a House Surgeon; that he had been disgraced. He was much surprised to learn by the next post that the Government had given orders that the enquiry should close. The House Surgeon remained another year in the Hospital, and resigned in order to return to France, when he was appointed to a French Government vessel freighted with settlers for California.

My colleague was very much displeased with the new Commissioners; he could no longer dictate as before; but His Excellency's determination to add six new visiting Physicians to the Hospital displeased him still more, and he resisted the Government accordingly, and obstructed me in the execution of the duty assigned to me.

On the 21st July, 1847, I wrote to the Provincial Secretary that the Physicians of Quebec would receive with joyful approbation His Excellency's offer, and that the whole difficulty lay in the selection. Dr. J. D. wrote likewise on the 22nd of the same month, that the measure was impracticable, and could not be brought to work beneficially.

The selection was made by Dr. J. D. and his associate, the late Dr. Racey. I objected, but in vain, to the omission of the senior members of the profession who had accepted, in order to substitute a junior, namely Dr. Hall. I was in the minority and he was appointed.

Dr. J. D. received his new colleagues very coolly, and endeavoured to intimidate them in respect of their position, giving them to understand that they were only temporary, that in all likelihood they would be ordered to the sheds. The six new Physicians then applied to the Executive, who gave them a satisfactory answer.

The second time they appeared at the Hospital in order to organize themselves. Dr. J. D. objected to make an arrangement with them. "I require no assistance," he remarked, "I did not ask for you and I would as soon see a bull in a china shop, as see you enter my surgery." Some time afterwards, three of the new Visiting Physicians, Drs. Sewell, Blanchet and Nault resigned.

Since that period Dr. J. D. has seemed to me to be desirous of bringing the Hospital into discredit: he has allowed operations to be performed which did no honor to it, and that by his peculiar *protégé* Dr. Hall, without giving him a word of advice. From time to time indeed, he would say to him "another slice, Dr. Hall, another slice."

He endeavoured to scatter dissension between the Visiting Physicians and the Commissioners while the Board of Trade assailed the whole establishment; and what makes me believe that Dr. J. D. moved the springs of these events, is, that he predicted the proceeding of the Board of Trade three weeks beforehand: and we recognized in Mr. Dean's communication the very words and expressions which Dr. J. D. made, use of in our presence.

The contempt of Dr. J. D. for his new colleagues has been evident for several years. He allowed me to be maltreated in a Court of Justice by Dr. Marsden, whom we (Dr. J. D. and I) had banished from the Hospital by an order given verbally to the officers in consequence of a reprehensible action.

Dr. Marsden produced in Court a letter from Dr. J. D., the substance of which was "that he had never given such an order in writing." By this equivocation, he saved himself from the imputation of a falsehood, and by it he indirectly fixed the stigma upon me.

Dr. Rowand was likewise maltreated in Court by Dr. J. D., and in a manner still more cruel, as also more than once in the Hospital in my presence.

Recently he displayed contempt for his three colleagues, who are not on terms with him; Drs. Rowand, Jackson (his brother-in-law), and myself, by introducing, without consulting us, a method of treating *Cholera*, derived from Mr. Chaperon, a country practitioner, although this method had been contemned by respectable practitioners in Quebec.

A month afterwards, when Dr. J. D. perceived that the method of treatment was absurd, and that he would probably be censured for it, he called on us all three "to know whether he should discontinue the said Dr. Chaperon's plan of treatment." I was absent from that meeting, and purposely so, because I was already aware of its intention. Dr. Rowand replied, in my opinion very justly,

“ that as Dr. J. D. had commenced the treatment without asking our opinion, he  
 “ would act with equal propriety in discontinuing it without requiring our per-  
 “ mission.”

There will never be peace in the Hospital unless Dr. J. D. should be sole and undisputed Master—never will there be sympathy between him and the Visiting Physicians.

The whole humbly submitted to your consideration.

Gentlemen of the Special Commission,  
 By your respectful Servant,

(Signed,)

JOS. PAINCHAUD,  
 One of the Senior Practitioners at  
 the Marine Hospital.

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*Evidences of Drs. Sewell and Nault.*

Dr. J. A. Sewell appeared and stated that he had some aversion to continuing as Visiting Physician to the Marine and Emigrant Hospital from: 1st non-payment; 2ndly. want of equality, as far as regarded his position in the Hospital with Drs. Painchaud and Douglas; and 3rdly. the apparent want of readiness on the part of Dr. Douglas to render his assistance in surgical operations. That Dr. Douglas did not show any regard to the Visiting Physicians, and instead of requesting the assistance of his colleagues in surgical operations, he usually obtained the assistance of Dr. Frémont, or others, not connected with the Marine Hospital.

Drs. Sewell and Nault, conjointly are of opinion, that neither harmony nor cordiality can exist in the institution, so long as Dr. Douglas treats his colleagues as he has done.

Dr. Sewell states, that while acting in the Hospital, he soon after his nomination, perceived that neither harmony nor good understanding could exist therein, while Dr. Douglas assumed to himself so much undue authority.

Dr. Nault states, that he only performed duties in the Marine Hospital, for a few weeks, and says that the same reasons assigned by Dr. Sewell for retiring from the Hospital, besides that of being employed as Inspecting Physician of the Port, caused him to discontinue his attendance.

When Dr. Douglas was remonstrated with, for using the language he had, in alluding to the new Visiting Physicians and particularly that of as soon seeing a bull in a China shop, as the performance of duties, by the present Visiting Physicians, he Dr. Douglas, replied, that he had merely alluded to Dr. Jackson.

Drs. Sewell and Nault state that Dr. Douglas frequently operated on Sundays, during the hours in which Divine Service was being performed in the different churches of the City, implying that, by operating on such days, Dr. Douglas would not have the attendance of his colleagues. Sunday is not the day appointed for operations, one week-day, generally Tuesday, having been set apart for performing operations.

(Signed,)

JAS. A. SEWELL,  
 J. Z. NAULT.

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*Evidence of Dr. J. L. Hall.*

Dr. Hall states that, since his appointment, having always considered the Visiting Physicians and the Commissioners as gentlemen, he always met them with perfect confidence and a desire of performing his duties honestly and conscientiously, and he was also under the impression that the same feeling existed among the other Visiting Physicians.

That he was always treated by his colleagues with attention and consideration, and that they (his colleagues) evinced a desire to advance the interests of the pupils and the welfare of the institution. He also thinks that there always appeared a desire on the part of his colleagues to shew him (Dr. Hall) every consideration when professionally employed.

That he has been more intimate, and on a more friendly and kindly footing with Dr. Douglas than with any other member of the profession: so much so, indeed, that his house is, he believes, the only one which Dr. Douglas visits, and takes tea, &c., with him, and that he (Dr. H.) does the same thing reciprocally: that of visiting his (Dr. D's,) house, and taking tea with him and his family.

That he had always depended upon his own resources, and that through his professional exertions alone he had acquired property.

That lately, from some remarks which have been made, not by the Visiting Physicians but by others out of the Hospital, he had felt a want of confidence (diffidence) in performing operations, which he had a consciousness of being able and competent to perform well and neatly.

In alluding to the case of *caries of the Rib*, and for which he operated, he states that, before commencing the operation, although agreed upon by Dr. D., he (Dr. D.) observed that it was a bad case and not fit for him (Dr. H.) to begin to operate with, and one that was better adapted for him (Dr. D.) to perform upon; and, in connexion therewith, he states that Dr. Douglas had no conception that the disease was so extensive.

That he has felt embarrassed more than once, when performing operations, by the presence of persons who were unfriendly to him, and who would misrepresent his manner of operating. He does not allude, in this observation, to any of his colleagues.

Dr. Hall states that Dr. Douglas has, in some instances, called in Dr. Frémont, when performing operations, at the Hospital. On the question being put to him, (Dr. Hall) whether he did not think this practice a slight intended to the Visiting Physicians, he objected to reply to the question.

He states that the observation made by Dr. Douglas on the appointment of the new Visiting Physicians, viz: that he would as soon see "a bull in a china shop as the newly appointed Visiting Physicians in the Hospital," caused some dissatisfaction among the Visiting Physicians.

He states that Dr. Douglas was in the habit of consulting his colleagues in professional cases, and also that Dr. Douglas was in the habit of calling in his colleagues in consultation, previous to an operation, and, on a recent case, he declined to operate, though prepared to perform it, on Dr. Rowand's disapproving of it, as Dr. R. said the case was susceptible of cure without operation.

He also states that in cases when operations are to be performed, he Dr. D. waits for his colleagues to the time appointed for operating; but, if they are not present, he at once performs the operation without waiting.

That Dr. Douglas has performed operations on Sundays, but it is his belief that it was at the end of the summer and to send the sailors home before the close of the navigation; and that he has also an indistinct recollection of his (Dr. D.) having performed operations on Sundays, during the winter season, when the above reasons did not exist for operating.

(Signed,) JOHN L. HALL.

*Evidence of Dr. Robitaille.*

Dr. Robitaille states that he is one of the Visiting Physicians of the Marine and Emigrant Hospital since 1847, the period of the new appointments.



Shortly after their nomination, the Visiting Physicians assembled at Dr. Parent's on the subject of dividing their duties in the Hospital. Dr. Parent recommended the division into Departments and fixing the period of attendance, quarterly.

He (Dr. Robitaille) was rather averse to being connected with Dr. Douglas, but on some explanation taking place, Dr. D. said he would make things very easy to him.

Some time after, in the Hospital, and when speaking of the qualifications of the Visiting Physicians, Dr. Douglas observed, that "he would as soon see a bull in a china shop as the Visiting Physicians in the Surgical Wards," he, (Dr. D.) applied the words generally and the expressions were certainly very painful to the feelings of the gentlemen present.

On Dr. Robitaille being questioned on the authority assumed by Dr. Douglas in the Hospital, as also his (Dr. D.'s) expressing himself disparagingly of his colleagues. He (Dr. R.) was silent, but he relates the case of a sailor having the *humerus* fractured—there was a callus (*dépôt*) formed. He had seen cases much worse than the one in question, and notwithstanding that the case was of a nature not to require it, he (Dr. R.) felt greatly pained to see Dr. Douglas break anew the bone, and place the arm on the fracture apparatus, and without consulting the Medical attendant under whose case he was.

He, Dr. Robitaille, is in the habit of calling Dr. Douglas in dangerous medical cases, and when attending at the same time with Dr. D., but that he has never himself been called in consultation in any important medical case occurring in the Hospital, nor in any surgical case. That their being in attendance at the same time, he does not think that there is any necessity of calling a consultation on medical cases.

That when Dr. Douglas has some important operation to perform in the Hospital, he is assisted generally by professional men not connected with the Hospital. Dr. Frémont is generally the gentleman assisting with his (Dr. D.'s) own pupils. He has never seen Dr. Douglas assisted by his own colleagues.

When surgical operations are performed by his colleagues, Dr. D. gives his opinion on being requested to do so, and now and then is present at the operations.

Dr. Douglas has, to the best of his recollection, attended to the consultations when required. He has no recollection that Dr. D., in capital operations, performed them before or after the time appointed.

That he has no recollection that Dr. Douglas has performed capital operations on Sundays.

That, in one case, a patient being placed on the operation table to be operated upon, it was a capital operation, a case of *diseased rib*, Dr. Douglas was present, at some distance from the table, and seemed to take no interest whatever in the operation. He, Dr. Douglas, however, observed to the operator, that, "when an operator is desirous of seeing the nature or character of the disease, he should at once make sufficient incision thereto." He made these remarks at the termination of the operation, and not at the beginning. He was surprised that he Dr. D. took so little interest in the operation.

Dr. Douglas, he thinks, might have done more to create harmony in the Hospital than he has done.

(Signed,)

OLIVIER ROBITAILLE.

Dr. Jackson being absent from Quebec, the following questions were proposed to him in writing, to which he has given written answers hereto annexed.

1. State the substance of conversation which took place at the first meeting of the newly appointed Visiting Physicians?

2. To whom did the expressions " Bull in a china shop" apply?
3. Did you not feel insulted at being thus received?
4. Have you always had the assistance of Dr. Douglas in your cases which required consultation?
5. Does Dr. Douglas attend the consultations regularly, and does he give his opinion of the propriety of the operation, and lend his aid to the operator?
6. Does not Dr. Douglas bring professional gentlemen not connected with the Hospital to assist him at his own operations?
7. Is not this practice calculated to cast a slight upon the Medical Staff of the Hospital, and to lower them in public estimation?
8. Is it the custom to call consultations in serious medical cases?
9. Have you had occasion to complain of Dr. Douglas having treated you in a manner calculated to lower you in public estimation, and to diminish the confidence of your Hospital patients?
10. Will you state the particular instances to which you have alluded?
11. Have you heard Dr. Douglas speaking disparagingly of the Visiting Physicians, before the House Surgeon, stewards, pupils, &c., or patients of the Hospital?
12. What do you know of the case of Lawson?
13. When you took charge of Lawson, did you believe he had been under the care of Dr. Douglas?
14. Is it the rule of the Hospital, that the Surgeon who commences his quarter, takes the cases (bad and good) of the Surgeon who has terminated his quarter.
15. Does not Dr. Douglas leave bad cases to his successors?
16. Did you know of Dr. Douglas having on any former occasion refused to take the management of a bad case left in Hospital by his predecessor?
17. Will you state your connection with the treatment of Cholera by Dr. Chaperon?
18. Did you throw any obstacles in his way whilst investigating the result of his plan of treatment?
19. What are the real causes of want of harmony and union in the Hospital?
20. How would you propose putting a termination to this state of affairs?
21. Does Dr. Douglas call his colleagues in consultation in his surgical cases?
21. Or does Dr. Douglas seem to conduct himself towards his fellow Physicians as if they were on a par with him; or does he decide on the treatment or the operations that he may deem necessary and only state when he is to operate?

Answers to the questions put by the Commission of Enquiry into the affairs of the Marine Hospital?

1. At the first meeting of the newly appointed Visiting Physicians, Dr. Douglas refused to give up charge of the Surgical cases; he stated that he had asked for no assistance, and required none, that he would sooner see a Bull enter a China shop than some of the newly appointed Visiting Physicians enter his Surgical wards.
2. I cannot say exactly to whom the expression applied.
3. As a matter of course, the reception was not a very flattering one, and we appealed to His Excellency the Governor General.
4. I remember one case in which Dr. Douglas refused to attend in consultation, giving for reason that he had not been regularly notified.
5. Tuesday of each week is appointed as consultation day. The consultations are not regularly attended. It is customary when an important case

happens, to notify the Visiting Physician in writing, stating the time appointed for the consultation, the nature of the case, &c. I have had occasion to find fault with the manner in which Dr. Douglas gave his opinions at consultations. He has frequently stated that he was prevented by his instructions from interfering at operations.

6. It is within my recollection that Dr. D. brought medical men not connected with the Hospital to assist him at his operations.

7. I certainly did think that it was a slight, cast upon his colleagues.

8. It is not customary to call consultations in medical cases, except they be of an unusual nature.

9. I have had occasion to complain of the manner in which Dr. D. treated some of my cases, and spoke of others, as it had a tendency to lower me in the estimation of the patients of the Hospital.

10. The instances alluded to were, a case of fracture of the patella, a case of fracture of the arm, and one of fracture of the thigh in a child; they happened in the summer of 1848.

11. I do not remember, with the exceptions mentioned, any particular occasion upon which Dr. D. spoke disparagingly of his colleagues; but Dr. D. is in the habit of joking, and some one of the Visiting Physicians may have been occasionally the subjects of his jokes.

12. I know very little of Lawson's case; I saw him occasionally when he was first brought to Hospital, he came under my charge about eight or ten days before his death; he was then in a hopeless state.

13. When I took charge of Lawson, I received him at the hands of Dr. Rowand. I was under the impression that he had been under Dr. Douglas' care, he, Dr. Rowand having stated as much.

14. It has always been a rule with me to take charge of all cases good or bad; at the commencement of a quarter, there is, however, a rule established amongst ourselves to the effect that any Visiting Physicians having an interesting case may retain it at the end of his quarter should he think fit so to do.

15. Dr. D. leaves his cases to his successors such as they are, good, bad and indifferent.

16. I do not now remember any former occasion on which Dr. D. refused to take the management of a bad case left in Hospital by his predecessors.

17. I had nothing whatever to do with the treatment of cases by Dr. Chaperon; he took charge of the patients at a time when I was off duty, with, as I understood at the time, the sanction of the medical men in charge, and the approval of the Commissioners.

18. I did not interfere in the least, or throw any obstacles in the way: I used to go to the Hospital occasionally to see the result of the treatment, but understanding, as I have said before, that he was there under authority, I looked on and said nothing.

19. In my opinion, the want of harmony in the staff of the Hospital is due to three different causes: in the first place it is too numerous and composed of materials differing in their way of thinking and acting, with different views on medical and surgical matters. Secondly, a feud or antagonism has existed between the two senior Visiting Physicians for several years past, which has completely destroyed all *esprit de corps* and caused many of the jars that we have to complain of at the present time. And thirdly, that part of the staff is paid, and the remainder not, thereby creating an invidious distinction.

20. I would propose that the staff be reduced in number to four, that the two senior Visiting Physicians be made consulting Physicians, to attend on all occasions as such when requested to do so by the Visiting Physicians and subject to be called on active duty whenever the number of patients in Hospital shall exceed one hundred, or in case of sickness or absence of the Visiting Physician. That

the two Visiting Physicians be placed on permanent duty, as I consider the plan of changing every three months faulty, and that all parties be equally paid. This plan I have every reason to think should work well.

21. Dr. Douglas does occasionally call his colleagues in consultation on his surgical cases, and notifies them in cases requiring operation.

(Signed,) ALFRED JACKSON, L. R. C.

*Dr. E. Lemieux*, House Surgeon states:—

That whenever appointments were made for a meeting of the Visiting Physicians for the performance of a surgical operation, it is within his knowledge that when Dr. Douglas arrived before his time appointed, he would proceed at once to the operation without waiting for the arrival of his colleagues, and would also, although arriving himself after the time proceed to the operation, notwithstanding the absence of his colleagues, and without consulting those present, and in surgical cases generally, he, Dr. Douglas very seldom regarded the advice of his colleagues.

He also states, that Dr. Douglas has often spoken in very disparaging terms of his colleagues in the presence and hearing of the patients and students, and such was the severity of the language employed by Dr. Douglas, that he, Dr. Lemieux declares, that if he had been a patient himself, he would never have allowed any of the Visiting Physicians to continue their attendance upon him.

That furthermore, it is his, Dr. Lemieux's opinion, that so long as so much arrogance on the part of Dr. Douglas is allowed, there cannot exist any harmony or good feeling among the Visiting Physicians of the Hospital.

Truly taken,

(Signed,)

A. VON IFFLAND.

9th November, 1852,

It having been represented to the Commissioners that Dr. Landry, formerly House Surgeon of the Hospital, could give information calculated to aid the enquiry, he was accordingly requested to appear before the Commission. Having complied with their request, he gave the following evidence, which the Commissioners have much pleasure in laying before Your Excellency, as it proves that though Dr. Landry has had good reason to be dissatisfied with Dr. Douglas, yet his sense of justice would not allow him to detract in the least from that gentleman's merits.

The Commissioners are pleased at being able to adduce this testimony, as it served to disabuse their minds of an impression they had received from the various reports that reached their ears, as well as from printed statements, one of which was laid formally before the Executive, which attributed to Dr. Douglas an overbearing and indeed an unjustifiable fondness for operating, and a disregard of other methods of treatments, as well as neglect of the medical cases intrusted to his care. These imputations so injurious to the character of a Surgeon are removed by the evidence of Dr. Landry, who had ample opportunity of forming a correct opinion on this subject from the length of time he was resident in the Hospital, during which period all the operations were performed by Dr. Douglas, and much of the medical treatment of the patients devolved upon him.

Dr. Landry appeared in conformity to the request of the Commissioners, November 10th. He was examined by the commission on the presumed co-operation of Dr. Douglas with the Sexton, Patrick Buckley, and more particularly whether on any occasion or occasions two bodies had been confined and buried together.

That on one occasion he recollected that two bodies had been buried together in the same coffin ; one Protestant and one Catholic.

The information which Dr. Landry afforded was, however, obtained by his having visited the burial ground.

Dr. Landry stated, that he believed Dr. Douglas had objected to the new appointments of the six Visiting Physicians, and had not approved of their nomination, and in reference to these appointments had used the expression that they were no more fitted to perform their duties than *a bull in a china shop* ; he likened the admission of the new Visiting Physicians into the Hospital to that of letting a bull into a china shop. Dr. Landry stated that he believed Dr. Douglas intended these improper observations to apply to all the six Visiting Physicians appointed. Dr. Douglas, however, evinced a disposition to divide the surgical wards. Dr. Landry considered Dr. Douglas as the Chief of the Hospital, because Dr. Parent was very feeble, Mr. Gowan a very indolent man, and Dr. Morrin took very little interest in the matters connected with the Hospital.

Dr. Landry then entered into an account of his two periods of residence in the Marine Hospital. During the first period he had been Apothecary, and during that period he had been badly treated (*maltraité*;) by Dr. Douglas, which was in the years 1837, 1838 and 1839. During the second period as House Surgeon, in the years 1844, 1845 and 1846, he had been well treated by Dr. Douglas.

Dr. Landry gave several instances to prove that he had been badly treated during the time he had been Apothecary to the Institution, and also enumerated instances when he had been well treated by Dr. Douglas.

In allusion to the assumption that Dr. Douglas had not visited the Hospital daily during the winter, Dr. Landry stated that it was because the cases did not require daily visits, but that he did so whenever dangerous cases were in the Hospital ; his impression is that Dr. Douglas took great interest in the Hospital and in the recovery of his patients.

That it is within his recollection that Dr. Douglas had said to a patient of Dr. Jackson, who had a badly united fracture, "*crooked*," when asked by the man. What shall I do? "Go show yourself for a penny a head, and you will "make your fortune." This was said before the class of students of the Hospital, and with an intention apparently of casting reflection upon Dr. Jackson.

Dr. Landry thinks that Dr. Douglas had been exceedingly successful in his treatment of patients, and happy in his treatment of accidents. Dr. Douglas is averse to primary operations in the class of accidents that present themselves at the Marine and Emigrant Hospital, and was desirous of giving nature an opportunity of some weeks of effecting a cure, as he has often said that it will be time enough to perform the operations.

Dr. Douglas objected to the appointment of the six Visiting Physicians. It is also his, Dr. Landry's impression, that in naming the six Visiting Physicians, Dr. Douglas had selected those who were less likely to dispute with him the surgical supremacy of the Hospital. He believes that Dr. Douglas knew the inefficiency of Dr. Hall for the surgical practice of the Hospital, and that he did not conceal his opinion of Dr. Hall's want of capacity for the duties of the surgical practice from the members of the Profession, although he had recommended that gentleman with the other five Visiting Physicians. He believes that the practice of Dr. Douglas in cases other than those of accidents was equally cautious, and he does not recollect any instance where a fondness for operating induced him to resort to operations, "*il ne faisait pas des operations sans nécessité*."

Dr. Douglas took an equal interest in the medical care of surgical diseases. He never undertook an operation without reasonable prospect of success. He never operated from mere fondness of operating. In painful operations Dr.

Douglas did not exhibit any marked indifference to the sufferings of his patients, but used to take unnecessary pains. Yet it appeared that in amputations he did not divide the soft parts. Dr. Douglas never treated the patients with *cruelty*, and his attention to patients who did not require operations or active surgical treatment was equally regular.

He prescribed for them when requisite, and examined them daily. His after treatment was always judicious, as well as in all cases upon which he had operated.

### *Mutual Charges of Dr. Douglas and the Commissioners.*

From the evidence laid before the Commission of Enquiry, it appears that from time to time Dr. Douglas made *verbal* complaints to the Chairman of the late Commission of the Hospital of certain abuses alleged to exist in the Hospital; but as these charges were irregularly preferred, and as he carefully avoided putting them in writing, so as to bring them formally under the notice of the Board of Management, he cannot now complain, with any degree of justice, of attention not having been paid to his remonstrances. At last he addressed a letter to the Executive, in answer to one from Mr. Assistant Secretary Parent. In this letter, dated July 17th, 1851, Dr. Douglas states that the accusations urged by the Commissioners, in their Report to Government, that he had had communication with the Board of Trade, and had instigated Mr. Dean to make his complaint against the management of the Hospital, is unfounded. He distinctly states, that he never had any communication with a Member of that Board, knowing him to be such, "with the exception of Mr. Dean."

He denies that he ever calumniated the Commissioners, and states that, in the previous enquiry they distorted evidence in some instances, and suppressed it in others, so as to mislead His Excellency the Governor General. He also states, that the Commissioners are culpable of a dereliction of duty in not having attended to the applications of the Visiting Physicians; and that on two occasions he himself had formally called upon the Chairman, in November, 1850, and stated to him that great irregularities and abuses existed in the Hospital, and which demanded an immediate investigation by the Commissioners; and furthermore, Dr. D. avers that he requested the Secretary, M. Casault, to call a meeting of the Commissioners to hear his (Dr. D's.) statement regarding these irregularities, but that no meeting was called, Mr. Casault stating that he had no power to call a meeting. Dr. Douglas then requested to be notified of the first regular meeting of the Commissioners, but his request was not attended to, and he has not since had an opportunity of laying his complaints before that body.

Dr. Douglas says, that he is aware conversions have been made in the Hospital, and that such conversions might have been prevented by adherence to a rule formerly existing, which provided for the separation of the Protestant from the Catholic patients. Dr. Douglas states, that though aware from *hearsay*, that two bodies had frequently been buried in the same coffin, yet, as he had no positive proof of the matter, he refrained from making it a subject of complaint to the Commissioners, but that as *positive proof* was subsequently furnished him of this practice having been pursued in *one* particular instance, he did mention the circumstance to Dr. Morrin, the Chairman.

He also charges the Commissioners with a systematic neglect of the communications made to them by the Visiting Physicians, for "on no occasion did they answer, verbally or in writing, any one of the repeated requests and complaints of the Visiting Physicians." He charges them with exhibiting in the enquiry they held into the affairs of the Hospital, an anxiety to "screen the parties (guilty,) and to escape themselves from a dilemma in which their dereliction of duty and management of a valuable Institution had placed them."

As a proof of what he states, Dr. Douglas refers to the fact, that at the moment he was writing, a suit was pending in the Courts, in reference to disgraceful scenes that had been recently enacted in the Female Wards of the Hospital.

Dr. Douglas invites an investigation into his conduct as Visiting Physician, and declares that he had always "identified himself with the interests of the Hospital, and had done his duty uninfluenced by fear or favor from any one," and blames himself for not having complained of the Commissioners sooner.

To this letter the Commissioners made reply, in a lengthy communication, August 30th, 1851.

They charge Dr. Douglas with being the secret agent of the Board of Trade, "who caused that body to act," and they refer for confirmation of their assertion to a similarity of expressions in the letters of the Visiting Physicians and Mr. Dean. They aver that Dr. Douglas has unjustly attacked them, that he has calumniated them; and that he has shamefully traduced them to Government, is proved by their answers to the letters of Drs. Douglas, Hall and Jackson, and by the letters of Drs. Painchaud, Rowand and Robitaille.

They explain the absence of Dr. Morrin's signature to their answer to Government, by the fact of his being out of the Province at the time.

They allude to Dr. Douglas' unwillingness to put his charges in writing, and state that his conversations with the Chairman and with the Secretary had reference to some knives and forks wanted for the Hospital. The Commissioners admit that conversions from the Protestant to the Roman Catholic faith did take place, but they deny that any of the Officers of the Institution were instrumental in bringing about these conversions; and they deny that any rule for the separation of Protestant from Catholic patients ever existed. The Commissioners admit that during the stewardship of Mr. Cutter, two bodies were sometimes buried in one coffin, but since Mr. Cutter's dismissal this malpractice has not been resumed. They ask how Dr. Douglas became so positively certain of this practice having been pursued and insinuate, pretty openly, that he knew more about the matter than he wished to disclose. "If (they say) it was before interment, why did he not prevent it? If it is by opening the grave in the burial ground of an institution of which he is an Officer, who is the more to be blamed, the Officer who put two bodies in one coffin, or the one who opened the graves?"

They refer to the employment of Messrs. Godbout and Pelletier, in the place of Dr. Lemieux, during that gentleman's absence, and declare "that for the temporary substitution of these gentlemen in his (Dr. Lemieux's) place, they did not think they were bound to consult the Visiting Physicians."

They also deny having neglected to answer the communications addressed to them by the Visiting Physicians, and state that they received *only one* letter from them, and which required no answer.

They enter into an explanation of Captain Alleyn's connection with the Catholic Church, which, as having no bearing on the matter under consideration, need not be referred to at further length.

They complain that Dr. Douglas should have blamed them for the conduct of Dr. Marsden in the Hospital, and say that he should have left to Dr. Painchaud who had come more immediately in collision with Dr. Marsden, the task of imputing to the Commissioners dereliction of duty, and they express their surprise that Dr. Douglas should have alluded to this matter, seeing that he himself had given Dr. Marsden information by letter, that there was no rule preventing him from visiting the Marine Hospital. They likewise complain of Dr. Douglas having ante-dated his letter for sinister purposes.

The Commissioners again charge Dr. D. with having "calumniated them" "with circulating false reports about the Hospital" and "exciting the public against the Institution."

The Commissioners state that Dr. Douglas "has not always done his duty," and that "he has always tried to render the task imposed upon them, difficult and arduous;" and they complain that since the appointment of the additional Physicians, he has not only shewn a want of good will, but he has not given the assistance which was of right to be expected from him in the management of the Hospital.

Allusion is made to the fact of Dr. Douglas not lodging his complaint of the want of the proper necessaries for an Hospital until his term of duty was nearly finished, and the number of patients greatly diminished. His quarter ended the 15th of November, and at the end of that month he made his complaint.

The Commissioners again charge Dr. Douglas with having "shamefully led into error" three of his Colleagues, and induced them to bring forward groundless accusations against them, and they also insinuate that it was he who prompted the Board of Trade to address the Government on the 29th January, two days after the date of the communication of the letter of the three Visiting Physicians, alleged to have been shamefully led into error.

An opportunity was given to Dr. Douglas to answer the letter of the late Commissioners, dated August 30th, 1851, and as it would be difficult to condense his reply or convey his views in words different from those he employs, it has been considered better to give it in detail and to annex to it the rejoinder of the Commissioners.

QUEBEC, *November 6th*, 1852.

GENTLEMEN,—I have only this day been made aware of the existence of a letter of the late Commissioners of the Marine Hospital, dated 30th August, 1851, in which I find my conduct and motives as Visiting Physician are censured. Before noticing the errors, mis-statements, and suppressions of the truth in which this most extraordinary document abounds, I may observe that it would have been better had this letter contained specific facts and charges worthy of notice, instead of mere assertions, insinuations, a play upon words, and special pleading unworthy of Commissioners of so important an Institution.

With regard to my alleged connexion with the Board of Trade, the Commissioners leave on their Secretary the responsibility of his assertion contained in his letter of 31st March, 1851. They themselves now rest satisfied with saying that, they *feel* I was a secret agent of the Board of Trade; they should have stated facts well known to them, that my only communication with any one belonging to that body was with Mr. Dean, who inquired from me, as Visiting Physician, what had become of a seaman sent by him in a dying state to the Marine Hospital, with his check for a large amount of money in his possession. They might at the same time have stated that to their knowledge this check was sent to the Bank, and the money divided among some of the officers and servants of the Hospital, under their management; they ought also to have stated that when their attention was publicly and officially called to this and other similar nefarious transactions, they instituted no inquiry and called no evidence, though such was then tendered to them.

With respect to the statement that I have unjustly attacked the Commissioners, I again most distinctly deny it, and demand some show of proof, and not mere unsupported assertions. With respect to the statement that I have refused to put in writing charges against individuals, it is perfectly true. The Commissioners should have stated that such a mode of procedure is neither necessary nor called for. It was my duty to call their attention to any thing which I saw or suspected to be amiss; it was their duty to call me before them, and hear what I had to say. Not twice only, as he states, but twenty times I most urgently



entreated the Chairman to hear me before the Commissioners, on the abuses and irregularities which existed in Hospital. I told him what was going on and increasing from day to day, by neglect; I begged him, for the sake of the Institution, and for his own sake, to cause an inquiry to be made. I refused to bring charges in writing against individuals for a reason which the Chairman, before making it a subject of complaint, should have honestly stated. In 1838, by desire of the Commissioners then acting, and of whom Dr. Morrin was one, my colleague Dr. Painchaud, and myself, did adopt that course in a parallel case, and, although the charges were fully proved, the Commissioners allowed Dr. Painchaud to be put to considerable pecuniary loss in defending himself from a vexatious suit, they neither supported us, nor refunded the amount expended in adopting the course recommended by them. To Dr. Morrin I made no vague charges, but stated facts on my own responsibility, and my readiness to support them whenever called on. I consider this to be my duty, and no more. The object and purport of my interviews with the Secretary are not truly stated by him—they were not about knives and forks only, but to demand to know when there would be a meeting of the Board, and that I might be afforded an opportunity of being heard on abuses which I stated to him were then going on in the Hospital. No notice was taken of this demand. I stated subsequently, to the whole of the Commissioners assembled, that I had grave matters to lay before them. I did then and there state that the money of patients was appropriated by the officers and servants; I also told them that there were other abuses on which I wished to be heard; I have never been called, I have never been asked, to state what these abuses were. With respect to the conversions, I again distinctly state that I have nothing to do with the matter. I have never interfered—never charged any one with proselyting. I have left to their respective clergy the care of their respective flocks, and, if they allowed interference and conversions, it was a matter to be settled by themselves or by the Commissioners.

The rule adopted, just previous to the appointment of the late Commissioners was a proper and necessary one, one which could easily be carried into effect in the Marine Hospital, and one which exists in other institutions similarly circumstanced, and in my opinion should be enforced in this. Of the different Protestant denominations the Episcopalians only have the benefit of the ministrations of a clergyman, who, I believe, attends to the patients belonging to other denominations, when requested so to do. There is a disposition in the Commissioner's letter to fasten on me a portion of the "*Odium Theologicum*," which, though malicious, is as fitting and as absurd as Dr. Lemieux, in his letter of 3rd January, 1851, to attribute to me ruthless and inveterate political passions.

With respect to the malpractices connected with interments I was aware that such existed. The Commissioners also well knew them, but took no notice of them, and no steps to abate the nuisance. The Sexton came to me and complained that the Officers of the Hospital were, as he said, cheating him, by burying two bodies in the same coffin; and that when he complained to Dr. Lemieux he was kicked by him out of Hospital. I sent him to make his complaint to the Chairman, Dr. Morrin. Some time afterwards it came to my knowledge that a white girl had been buried between the legs of a runaway negro. I then considered it to be my duty to go myself to the Chairman, and I did so. I stated the facts and the name of my authority, and told him the interest of the Hospital required it to mention them. I left it to his own discretion and professional feelings. He knew all the facts; and knowing them, evinces a degree of bad faith, and no small share of moral turpitude in affixing his name to a document in which Government and the Public are led to suppose that I myself have opened graves, and in which he pretends to account for my refusal to submit charges in writing. I am disposed to make every allowance for the Chairman's want of moral courage, and dread of responsibility. I can make none for so vile an attempt

to injure me in the execution of a duty. With respect to the complaints of the Visiting Physicians, I have stated the facts in my letter of 17th July, 1851, and your enquiry will satisfy you whether they are well or ill-formed. Their joint letter was true and was proper; it was intended to shield them from a charge of neglect of duty, and was not an unjust and calumnious attack on the Commissioners, but a simple statement of facts, for the truth of which they were, and are responsible.

With respect to the investigation, so called, it was, in my opinion, intended, and had the temporary effect of screening the guilty parties. The Commissioners did not call evidence; they refused to hear it when offered, and they most improperly attached a meaning to evidence given not intended by the parties giving it; of these facts Drs. Jackson and Hall will satisfy you.

With respect to the disgraceful scenes which took place in the Female Wards of the Hospital, and which were the subject of proceedings in Court, I know nothing whatever, I was not in charge and did not interfere. It is most dishonest in the Commissioners to attach unworthy motives to me, for writing such a simple note as the one appended, which is the one referred to. I submit to you whether I could refuse to answer Dr. Marsden's note, or whether I could say more or less. I did leave to Dr. Painchaud the duty of managing his own affairs in his own way, and though I felt disgusted with his proceedings and ashamed of my connexion with him, I did not in any way interfere. The letter referred to was from Dr. Jackson, the Visiting Physician in charge, to the Commissioners, asking instructions, and at the date of his letter was unanswered.

With respect to that paragraph in which the Commissioners advert to the manner in which my duties have been performed, it would have been more satisfactory to me to know in what manner I have erred, as I am not aware of any neglect of duty, at any time, either before or since the appointment of the late Commissioners. They say I ought to visit every day. They ought to know that I am prohibited doing so. If this is the alleged neglect of duty, it shews gross ignorance of their own.

The Commissioners assert that "before their appointment I commanded as sole master, and that almost every body in the Hospital was my creature." This is a most shameless assertion, and instead of being indorsed, should have been contradicted by Dr. Morrin, who has most "*honteusement induit en erreur*" his colleagues by allowing them to state such a fact. Dr. Morrin was of the Commission, and knows that I possessed no more power, and exercised no more than ought to be possessed by a Visiting Physician of a like Institution. He knows also that, on the contrary, at no time and on no occasion, did any one in any way connected with me receive a from the funds of the Institution. Mr. J. Martin was my student, and was appointed Hospital Pupil by "*concours*," the only mode, in my opinion, in which such appointments should be made. It is monstrous and unjust to charge me, of all men, with making the Hospital subservient to private ends, and a means for providing for my dependants. In this respect my position has always contrasted most favorably with that of my colleague Dr. Painchaud, whose brother-in-law was Commissioner, whose son was House Surgeon and whose nephew was successively House Pupil, House Surgeon and Visiting Physician to the sheds. He himself being like his relations liberally paid out of the Hospital funds. I may remark, that, in my opinion, these different officers should never be in the same family, but on the contrary, should be check on each other.

The Commissioners refer to my letter to the Provincial Secretary on the appointment of the six Visiting Physicians. I also refer you to that letter, as the expression of my opinion at that time. Your inquiry will satisfy you that these opinions were correct, in every particular. There are some other mistatement.

the Commissioners' letter, but as they seem to me to be of small importance, I have not thought it necessary to notice them.

I have the honor to be,  
Gentlemen,  
Your most obedient servant,

(Signed,) J. DOUGLAS.

To W. Nelson, M. D.,  
R. McDonell, M. D.,  
Commissioners, &c.

QUEBEC, November, 1852.

GENTLEMEN,—We acknowledge the receipt of a letter dated the 6th instant, which was addressed to you by Dr. Douglas, in answer to one we addressed to Government on the 30th August, 1851, in reply to former charges against us, which he had brought before His Excellency.

We do not feel that we are called upon to follow Dr. Douglas in his *abusive* comments on certain parts of our letter, and abusive language towards the Commission, and more towards its Chairman; we shall therefore confine ourselves to the proof of our assertions and to the relation of the facts upon which they were grounded.

With regard to the connection of Dr. Douglas with the Board of Trade, we do not leave the responsibility of that assertion to our late Secretary, Mr. Casault. It was and is still our conviction, it was the conviction of a great many in Quebec, and we feel convinced that you will be of the same opinion, after having compared the abstracts of the several documents on which we grounded our opinion, and also by comparing the dates of the respective letters of complaints of the Visiting Physicians and the Board of Trade.

Here we copy our letter to Government, of the 30th August, 1851 :—

“ Dr. Douglas took charge of the Hospital at a time when there was a great number of patients, and after having suffered to go on, during nearly three months the alleged abuses, improprieties, dereliction of duty and malpractices, which must have come to his knowledge, he comes, when his time of attendance is nearly over, when the number of patients is considerably diminished, and then for the first time, complains of the quality of the diet, and of the want of knives and forks for the patients, and about one month after, at a time when there were but very few patients in the Hospital, and while the Commissioners were engaged in the investigation on Mr. Cutter, Dr. Douglas gets the other Visiting Physicians to sign a letter informing the Commission that a certain rule for the admission of the friends of the patients had lately led to abuses, and that the Hospital wanted bedsteads, bedding and clothing. Without having addressed any other communication to the Commissioners for upwards of eighteen months previous, Dr. Douglas gets again the Visiting Physicians to complain to Government on the 27th January, following, (p. 65, Blue Book,) that their REPEATED requisitions, and their claims on the attention of the Commissioners had equally been disregarded; and two days later, the Board of Trade also addressed complaints to Government (p. 138 and following B. B.) Three of the Visiting Physicians have subsequently denied the charges, and said that they had been ‘*honteusement induits en erreur*’ by Dr. Douglas, (p. 65 and following B. B.) The Board of Trade must then also have been led into error; and by whom? Is it by the three Visiting Physicians who withdrew their signatures? Is it by the two, who acknowledged, during an investigation, that they knew nothing going on wrong? (p. 185 and 186, B. B. ; ) or is it

“by the one who had already, for the same purpose, shamefully led his *confrères* “into error? The facts speak for themselves.” Now compare the several abstracts respectively marked, No. 1, 2, 3, 4, 5 and 6, and annexed to this letter, and we leave it to you to state, if our conviction was well grounded or not. Further, if you add to that, what was known by many of us, that is: that a member of the Board of Trade had acknowledged that they had got all their information from Dr. Douglas, to whom they were referred by Archibald Campbell, Esq., and that the same Mr. Campbell had solicited a gentleman from this City to write to Mr. Leslie, the then Provincial Secretary, about those abuses, and moreover, that long before those complaints of the Visiting Physicians and the Board of Trade, there were rumours that an investigation would take place on the management of the Marine Hospital; the name of Mr. Bristow was connected with those rumours.

Dr. Douglas alludes again to the fact of monies having been divided between the Officers and Servants of the Hospital. It is not true that we refused to take the evidence which was tendered to us in relation to that matter; none whatever was ever offered but what was given by Dr. Douglas himself, during the investigation on Mr. Cutter's conduct (p. 49, B. B.) We were then inquiring into the conduct of the Steward. The Nurse incriminated had been dismissed from the Hospital, and Dr. Lemieux was identified with one case only, (same page.) It was the first time that those accusations were brought against the Steward. We took the evidence of Dr. Douglas as he dictated himself; he did not suggest the name of any other witness who could substantiate the fact, which, moreover, was then admitted by both House Surgeon and the Steward, the former promising to explain the whole matter and circumstances, which he did, on the 13th of Jany., 1851, (p. 58 and following B. B.) We transmitted that explanation to Government, and stated (p. 17): “The answers “given by Dr. Lemieux are so satisfactory as to render it unnecessary for the Com- “missioners to make further enquiries, unless directed to do so by Government.” To that, Government, in answer to a letter from the Board of Trade stated in a letter, copy of which was transmitted to us (p. 143, B. B.) “With regard to the case of “the will made by a seaman, referred to in a letter, that case having formed part of “the previous investigation mentioned in my letter of the 15th February, was satis- “factorily explained and reported upon to His Excellency.”

After Government had pronounced itself satisfied with the explanations which were given, were we to investigate *de novo* into the matter; and to what end?

We again copy our letter of the 30th August, 1851:

“That Dr. Douglas unjustly attacked the Commissioners, that he has calum- “niated them, that he has shamefully traduced them to Government, is proved “by the answers made by the Commissioners on the 31st March, 1851, (p. 99, “B. B.,) to the complaints addressed to the Executive by Drs. Douglas (p. 70, B. B.) “Hall and Jackson, and by the letters in which Drs. Painchaud, Rowand and Robitaille “(30th January and 3rd February, 1851, p. 65, 66, 67, B. B.,) informed His “Excellency that they had been “*honteusement induits en erreur*” by Dr. Douglas, “who by that means had caused them to complain of abuses and grievances which “did not exist, and more so by the letter which forms the subject of this answer, “(the letter of Dr. Douglas of the 17th July, 1851,)” and we may also add now, by the letter which forms the subject of this present answer.

We beg you to take notice of the admission of Dr. Douglas, that he refused to put his complaints and communications about the Hospital in writing, and we deny that it was our duty to call him before us to know if he had any communications or complaints to make to us about the wants or management of the Hospital. We could not call him before us unless there was something officially laid before the Board. Dr. Douglas as well as all other Visiting Physicians or Officers of the Hos- pital should have communicated to us *officially* his remarks, complaints or sugges- tions on the wants or management of the Institution, and then we would have acted upon them. To maintain the contrary, is much as to say, that each meeting of

the Board ought to have been a Court of Enquiry, where all the Officers and Servants of the Hospital should have been called to be questioned on all the wants of the Hospital and its management, a thing surely most absurd and impracticable. Was it not, we ask, the duty of each Officer and Servant of the Hospital who knew of any thing going on wrong within it, officially to call the attention of the Commissioners to it? This was provided for by the rules and regulations for the guidance of the Visiting Physicians of which there is an abstract, p. 125-126 of the Blue Book, which rule was well understood and acted upon by Dr. Douglas himself for years previous. Were those Reports required by the rules to be made to Members of the Commission when they were met in the Street and likely to forget what had been communicated to them? Or were they to be made by the complainant in his official capacity? And why not, if they were true and well founded, submit them in writing? Why attempt to draw back from the responsibility of his office? But even in the absence of that rule, would it not be the imperative duty of the Visiting Physicians to inform the Commissioners of all that was wanting or improper in the Hospital. They had to visit the Hospital daily, at which visits it was their duty to remedy the abuses and provide for the immediate wants of the Hospital; and when they thought that it did exceed their powers they should have reported to the Commissioners who would immediately have acted, remedied abuses and provided for the wants. This had not been done either by Dr. Douglas or any of his colleagues, and yet they complained that "their repeated requisitions and their claims on the attention of the Commissioners have been disregarded," (p. 65, B. B.).

The reasons assigned by Dr. Douglas for not having made his communications official and in writing, is such as to do no credit to his judgment and good faith. If he felt that he could not fulfil the duties of his office of paid Physician, without exposing himself to law suits and disagreements which he did not like to submit himself to, he should have resigned it; all that story about a similar case which occurred in 1838, is a pitiful afterthought which is not likely to avail him. A slander either verbal or written is equally actionable; but a written communication to his Superior Officers about things which he was obliged to communicate to them by the duties of his office, and the rules of the Institution, did not expose him to damages. If the contrary were the case, who would give his evidence before your Board or any other Board; but Dr. Douglas shews by his letter of the 17th July, 1851, which he lately published in the newspapers of this City, with comments of his own, by his former attacks, charges and accusations against us, and by the letter which is the subject of this answer, that his duty was not so imperative on him as his frantic desire to attack, calumniate and injure; all his hesitation, all his fear of prosecution had then vanished; he was not even stopped by the obstacles that truth and honesty threw in his way, and he resolved to duplicity, (and even perhaps the word falsehood would not be too severe) to accuse us, and to induce his brother practitioners to join him in his slanderous attacks against us and the Institution.

Both Dr. Lemieux and Mr. Casault will probably have to testify before your Board of the truth to their narration of Dr. Douglas' interview with Mr. Casault. The object of those interviews we imagine, though we know not their purport, it will be to those gentlemen to state if it was other than what they stated to us, (p. 113, 127 and 128, B. B.) namely, the want of knives and forks.

As to the conversations with the Chairman, Dr. Morrin, Dr. Douglas was invariably requested by that gentleman to put his complaints in writing, and address the Commission officially. Why did he refuse to do so? Will he allege his ridiculous fear of prosecution when they related to the bad quality of the meat and the want of knives and forks for the patients or other similar objects? Could communications of that kind expose him to an action for slander? But even when the conduct of the officers was the subject of his communication, if his reason not to write, was that assigned by him, why did he not write officially to the Commission, stating that here were abuses in the Hospital which he did not like to disclose in a letter, but

which he would make them aware of if called before the Board? In that case the blame should have remained with us ; as it is, it remains altogether with him.

We refer to the evidence of Dr. Douglas, (p. 49, of the Blue Book), to establish that he never stated to us on that occasion referred to by him, that there were other abuses about which he wished to be heard. He complains that he had not been called before us to state what these abuses were ; but why did he not mention them at that time ? He had been called to that meeting ; there he was in the presence of those Commissioners whom he refused to address in writing ; what then closed his mouth ? Why did he remain silent on those abuses ? Why did he give such short answers to all questions which were put to him by ourselves, the House Surgeon and the Steward ? Had he not there that opportunity which he had sought for so long ? This would more than sufficiently prove that Dr. Douglas had then no complaints to prefer, no abuses to complain of, and that he was actuated by some other motive than the welfare of the Hospital when he complained to Government. This would tend to prove a want of good faith in the reasons by him assigned for not having addressed us in writing.

Of conversions we know nothing. No complaints of the sort ever reached us, (see last paragraph of p. 147 and 148, B. B.) As to the "rule" mentioned by Dr. Douglas, for the classification of Protestants and Catholics in the Hospital, we persist saying that it has never been put into effect, (though never cancelled and still in force,) as may be ascertained by reference to the accompanying letters of Dr. Painchaud and Mr. Whelan. It was left with the Visiting Physicians to put into force, and we repeat that if it has not been followed, the blame should fall on those gentlemen, who are solely charged with the classification of the diseases and patients. We do not think necessary to dwell on that point, speaking, as we do, to gentlemen conversant with the rules and government of institutions of the same kind, and producing, as we also do, a letter signed by Dr. Douglas himself, which fully bears out the truth of our assertions, and leave with the Visiting Physicians the responsibility of having not carried out the rule into effect.

You will, moreover, ascertain from all the patients and servants that have ever been in the Hospital, that the Ministers of all religious denominations are admitted in the Hospital, and that they are always indiscriminately sent for when asked by a patient. If those gentlemen did not think it proper to attend regularly the patients belonging to their denominations, surely neither the Hospital nor its Managers are to be blamed for their absence. We further state that a room in the Hospital has been set apart and appropriated as a place of worship for the Protestants.

As to the interments, the rules of the establishment, (see those for the guidance of the Steward,) and the investigation on the House Surgeon's conduct, sufficiently prove that the fault in that case remained with the then Steward, Mr. Cutter, (see p. 171, 200, 207 and 208, B. B.) We leave it to Dr. Douglas to explain how that fact came to his knowledge. It must either be before the interment or after. If it was before the interment, as we already said, why did he not prevent it ? If after, how did he get that knowledge ? We are well founded in stating that in that case, he must have acquired that knowledge by the graves having been opened after burial ; and we leave it with you to say, if he could acquire it otherwise. He was, as he alleges, informed of the fact by the grave-digger, who complained to him that he was cheated by the officers of the Hospital. But, how could that man know that two bodies were inclosed in a coffin of *ordinary size* ? Why did he mention the facts to Dr. Douglas before addressing himself to the Commissioners. The answer to those questions is too plain to be inserted here. We do, however, beg to state that we are informed that Dr. Landry could give you important information in relation to that part of our letter.

We have no words to qualify Dr. Douglas' bad faith and the hideous effrontery of the abuse which his letter to the address of Dr. Morrin contains on that subject, when Dr. Douglas himself told that gentleman, that he had in his possession the head of the alleged "runaway negro."

We cannot but quote Dr. Douglas' own words, speaking of the letter which was addressed to the Government by the Visiting Physicians, on the 27th January, 1851, (p. 65, B. B.) he says, "*their joint letter was intended to shield them from a charge of neglect of duty.*"

It is established (p. 87 and 88, B. B.) that the meeting was called at the request of Dr. Douglas, that (p. 88 and 89) he framed the letter which was signed by him first and by the others after some hesitation. It is also established (p. 66, 67) that three of those gentlemen denied the charge, and accused Dr. Douglas of having "shamefully led them into error," to induce them to sign it. Dr. Hall's own words during a subsequent investigation were (p. 185 B. B.) "If I had perceived any thing going on wrong in the Hospital more than I have stated above, I should have taken notice of it officially." And Dr. Jackson in answer to the same questions which had been put to Dr. Hall, namely, if he had heard any complaints against the Hospital or knew of any thing going on wrong in the establishment, said (p. 186 B. B.) "While I was on duty at the Hospital, I heard of no complaints, excepting about potatoes. I spoke to the Steward, who told me they were of the best that he could get in the market; some of the patients also complained to me of the quantity of the articles of the diet, but not of the quality. I again addressed myself to the Steward, who told me that the diet prescribed was given; and it is not an uncommon thing when upon half, low or spoon diets, to complain, particularly mariners."

From all this from Dr. Douglas' own admission, he became the accuser, not on account of the interest he took in the Hospital, but so as not to become the accused, he knew that the mismanagement, improprieties of conduct, malpractices and all the disorders which had been proved during the investigation on Mr. Cutter's conduct, which was then over, could be attributed to his own neglect of duty, to the want of information by the Visiting Physicians to the Commissioners. He knew that if the Visiting Physicians had made their visits as they should have done, and inquired not only into the health of the patients, but into their wants, into the way and manner they were attended and treated, into their food and their comforts, he knew that (a) "If they had been particularly observant of the general good conduct of all persons attached to the Hospital, and if they had reported to the Commissioners any irregularity of conduct, or violations of the Hospital regulations," all that had then been proved could not have taken place, that it would have been prevented or stopped in time. He knew that he could be blamed for all those disorders, and then he thinks of directing public attention by accusing the Commissioners; he thinks of carrying into effect a plan long thought of and by which he would get rid of the Commissioners and obtain the appointment of others, who, according to his wishes, would be led by his ideas and suggestions. By disclosing the abuses, by accusing the Commission and charging its management, he would be looked at as the proper person to remedy the abuses. The advice of a man who had so much at heart the interest and good management of the Hospital would necessarily be asked and taken, in the formation of a new Commission. And then again he could rule and command as sole master. He had already laid the foundation of his attacks by the joint letter of the Visiting Physicians, addressed to the Commissioners on the 14th December, 1850 (p. 72) by the conversations he had with the President and the Secretary. The time was come to act. Injurious and calumnious reports are spread against the Institution and its *employés*, which we traced to Dr. Douglas. At his request a meeting of the Visiting Physicians is called, and at that meeting a letter prepared and drafted by him, is signed and transmitted to the Government. The Board of Trade instructed through him and his agents address complaints to Government against the Hospital and its management and officers. A man of public notoriety is set to work. Everything was so

(a) 5th Rule for the guidance of the Visiting Physicians p. 176, B. B.

well concerted, so well managed, so well prepared, so well conducted, that he was sure of success, when three of his confrères guided by honorable principles publicly acknowledged to Government that their complaints were unfounded, and that they had been led into error. The result of your investigation will prove this to be the whole story; these appear to be Dr. Douglas' motives and object.

Dr. Douglas states that our investigation on Dr. Lemieux's conduct was intended to screen the guilty parties. We boldly refer to that investigation. The number of witnesses examined, their position, the actual or previous connection of many of them with the Hospital, sufficiently show that we desired to know the truth and to do justice to the Hospital. We defy any one to name any of the present or former Officers and Servants of the Hospital and even of the Ministers of Religion who had been connected with it whom we did not call before us for the purpose of examining them. Dr. Douglas' assertions in that respect are as false as they are malicious. We call on him not to make more unscrupulous and untrue assertions, but to mention and to state the evidence which we did not call, and more so, that we refused to hear when offered

As to the testimony of Drs. Hall and Jackson, we call your attention to the part of it which we copy above, to show whether we gave it a meaning which was not intended by them. They were made to see by Dr. Douglas that their evidence was a contradiction, and gave the lie to the letters which he has got them to sign, and rather than oppose him, they admit that they *stultified themselves* (these are Dr. Douglas' own expressions, letter of the 17th July, 1851) by saying that which they did not mean. We would like Dr. Hall to say what he meant by these words, "If I had perceived any thing going on wrong in the Hospital more than I have stated above, (bad tea and bad soup,) I should have taken notice of it officially." (p. 183.)

With respect to the disgraceful scenes which took place in the female wards of the Hospital, Dr. Douglas, in his letter of the 17th July, 1851 stated: "A letter from the Visiting Physician in charge, dated 5th instant, and demanding instructions from the Commissioners, has, like all other demands on their attention been disregarded and unanswered." In answer to that charge we said in our letter of the 30th August, 1851, that Dr. Douglas should have left to Dr. Painchaud the care of saying if the Commissioners had not done all that could be expected from them. Now in his letter of the 6th instant to you, Dr. Douglas says, that he was not then making allusion to the letter of Dr. Painchaud, but to one addressed to the Commissioners on the same subject by Dr. Jackson. That letter of Dr. Jackson, which was also signed by Dr. Rowand was received by the Secretary on the 18th July, (as may be seen by the indorsement on the back of it) though dated the 16th, submitted on the 18th to the Board, who assembled that day, and answered on the 19th, as may be ascertained by the annexed copy of the correspondence. Dr. Painchaud's letter was dated the 5th, and it was clear from their respective dates, that Dr. Douglas made allusion to that letter and not to Dr. Jackson's letter, which was dated the 16th; that taken aback, he says what he must have known to be incorrect. Could the delay of one day between the receipt of Dr. Rowand and Jackson's letter, and the letter and the answer thereto be thought too long, and condemned? And even supposing that three days elapsed between the receipt and the answer, could that be thought too long a delay, when we had to be assembled, and meet to decide on the answer? Was not the passage above described of the letter of Dr. Douglas, a false, shameful and dishonest attack upon us? It was more. At the time Dr. Douglas wrote his letter, Drs. Rowand and Jackson had received an answer to their joint letter of the 16th. Dr. Douglas knew it, and it was for the purpose of bringing against us that false and malicious attack, that he antedated his letter, and mentioned it to be the 17th July, 1851, when it must have been written after the 21st of that month, date of two letters from Drs. Hall and Jackson which he commented on, in his own of the 17th.



An order had been given to Dr. Douglas in the presence of Dr. Landry not to admit Dr. Marsden into the Hospital; that gentleman having been informed by Dr. Douglas as he subsequently said, at a trial before the Police Court, that there was no such rule, introduced himself into the Hospital to test the fact, and there caused most disgraceful scenes. That was the purport of that note of Dr. Douglas, which Dr. Landry will prove to be incorrect, if not to cause trouble and difficulties in the Hospital? And after such conduct on his part, he is bold enough to allude to those scenes and to attack us in respect to them.

We did not say that Dr. Douglas ought to visit every day during the whole year round, but during the term of his attendance, that is during six months; and we complained that during that time he was not in the habit of visiting regularly, and at the regular hours fixed by the Rules. The truth of that assertion is borne out by the 6th answer of Dr. Landry (p. 121 of the B. B.) and the 14th answer of Dr. Lemieux (p. 116, B. B.) and also by a letter of Dr. Painchaud (p. 83, B. B.) He never gave the information that we had a right to expect from him; he spread slanderous reports against the institution, and did his utmost to discredit it in public opinion. During the investigation, and more so during that on Mr. Cutter's conduct there was scarcely a day that passed without some rumours of the most serious character about scenes that had happened in the Hospital the previous day, which we always traced to Dr. Douglas. Amongst others, we heard one day that a trustworthy man, whom we had hired as porter during Mr. Cutter's suspension was reported to have gone during the night to the female ward and tried to introduce himself into the bed of a blind woman. An immediate inquiry proved it to be false, and traced it to Dr. Douglas. Another day the same man was reported to be an habitual drunkard, who was always drunk in the Hospital. This again was traced to Dr. Douglas. On another occasion we heard complaints that a young gentleman acting as Apothecary could not understand one word of the English language. After examination we found that he was quite familiar with that language, and again Dr. Douglas was the author of that report.

There would be no end to this letter if we were to notice all the instances of that kind in the conduct of Dr. Douglas. You may judge by yourselves of what a person would be capable who could have antedated his letter to charge us with neglect, who so much feared prosecution for damages, but who nevertheless slandered right and left. He could not with safety address to the Commissioners a written communication on the management of the Hospital, but he could with impunity spread false and calumnious reports against the Hospital and its Officers and *Employés*, namely by his published letter of the 17th July, 1851. Dr. Douglas always did his utmost to render to us the management of the Hospital not only disagreeable, arduous and difficult, but almost impossible. He advised and counselled those whose conduct was the most to be blamed, and specially Mr. Cutter, during the investigation on his conduct. In one word, we always found him creating obstacles and raising difficulties in the management of the Hospital. And we do not hesitate to say that the same state of things will last as long as Dr. Douglas is allowed to have any connection with the Marine Hospital. He is at war with every one in the Institution with the exception of the Visiting Physicians, and of those one is united with him through fear of his power to do harm (p. 80, B. B.,) and the other from motives best known to himself.

We did not assert what we are still ready to prove and maintain, that before our appointment Dr. Douglas commanded in the Hospital as sole master (p. 122, 6th answer of Dr. Landry,) that he was allowed to have more influence than the Commissioners over all the persons connected with the Hospital, that he carried and did all he wished without control or opposition.

As soon as other Visiting Physicians were appointed against his wishes and advice, as soon as he understood that we would take the responsibility of our office

and control the government of the Hospital and the conduct of its Officers, he began to throw obstacles in the way and has constantly done so during our administrattion.

We beg to add in conclusion that, though we do not admit the right of Government to submit us to a trial after we ceased to be in office, and particularly after having by unjust and unaccountable treatment forced four of us to resign, still we owe it to ourselves to meet your enquiry, in order that the public may see that we do not dread an investigation into our conduct, and that if we did resign before it took place, it was not to avoid submitting to it.

We have the honor to be,  
Gentlemen,  
Your most obedient servants,

(Signed,) JOS. MORRIN,  
" RICHD. J. ALLEYN,  
" F. X. PARADIS,  
" J. J. NESBITT,  
" T. KELLY.

(Dr. Morrin desires to state that all the letters addressed to Government by the other Commissioners since his resignation, were sent without his concurrence, and even without his knowledge. He has not since then anything to do with the management of the Hospital.

#### *Abstracts from Correspondence, &c.*

No. 1. "That the patients were in want of absolute necessaries; that some of them were obliged to eat with their fingers for want of sufficient number of knives and forks."—*Conversation of Dr. Douglas with the Secretary, 8th November, 1850, p. 113, B.B.*

"Yet it is asserted that the provision made in the Hospital for sick and disabled seamen is of the most wretched description; even in the article of food, the quantity as well as the quality is often deficient, and such as it is, they have it served to them like dogs, with scarce a knife or fork for 150 patients."—*Letter Board of Trade, 29th January, 1851, p. 128, B.B.*

"Among other things in support of these facts, it was stated to him, that 160 patients then in the wards fed themselves with their fingers, as there was not a single pair of knives and forks in all in Hospital."—*Letter Dr. Douglas, Hall & Jackson, on 27th February, 1851, p. 70, B.B.*

No. 2. "The statement made in my letter as to the defective provision made for sick and disabled seamen in the way of food or otherwise, is fully borne out by the records of the Hospital, and will be corroborated by the Visiting Physicians."—*Letter of Board of Trade, 3rd March, 1851, p. 137.*

"The soup was not soup; it was dirty water. The beef was very bad; it was not fair beef. I stated the same day, to the Chairman of the Commissioners, that the materials furnished to the Hospital were of inferior quality, and gave just grounds of complaint, by which the patients suffered, and the character of the Hospital was damaged."—*Evidence of Dr. Douglas in the investigation on Mr. Cutter's conduct, p. 49, B.B.*

No. 3. "That if the \_\_\_\_\_" (speaking of Dr. Lemieux and Dr. Beaubien) "had been guilty of the irregularities and malpractices attributed to them, it was only what might have been expected from young men under their peculiar circumstances, placed as they were in an institution, unchecked, irresponsible, and neglected by the Commissioners."—*Letter of Dr. Douglas, 17th July, 1851.*

“ There was no intention to include the Commissioners or Visiting Physicians under that designation, or to implicate them in the abuses complained, any farther than these abuses may be found to have arisen from a *neglect of duty on their part.*”—*Letter of the Board of Trade, p. 136.*

No. 4. “ It is most desirable that His Excellency the Governor General should appoint a Commission, entirely unconnected with the present management of the Marine Hospital, to inquire into its whole condition, &c., &c., &c., and for organizing a system under which such abuses will be less likely to recur.”—*Letter Board of Trade, 29th January, 1851, p. 130.*

“ I now trust to His Excellency’s sense of Justice, and to his expressed anxiety for the welfare of so important an Institution, that he will be pleased to cause such inquiry to be made, &c., &c., as will place the Hospital itself on such a footing of usefulness and respectability as it ought to possess, and as it did possess some years ago.”—*Letter Dr. Douglas, 17th July, 1851.*

“ Nor do they ask His Excellency to condemn, punish, or even try the parties implicated. All they ask for is, that a full investigation into the conduct of those parties be instituted and carried on, on the spot, by a competent tribunal above all suspicion of partiality or prejudice.”—*Letter Board of Trade, 3rd March, 1851, p. 136.*

No. 5. “ With the particular views which the Roman Catholic Church entertains of the efficacy of certain rites and ceremonials before death, it is to be expected that its clergy should consider it to be a paramount duty to make as many conversions as possible.”—*Letter of Dr. Douglas, 17th July, 1851.*

“ The last moments of the patients are often disturbed and embittered by ignorant, though perhaps well-meant efforts, to convert them to the Roman Catholic faith.”—*Letter Board of Trade, 29th January, 1851, p. 130.*

No. 6. “ Rumours have been for some time afloat, seriously reflecting on the general management of the Quebec Marine Hospital.”

“ These rumours have lately assumed such a shape and consistency, that the Council of the Board of Trade have deemed it their duty to ascertain, as far as possible, the truth or falsehood of them. This they have done, and, after obtaining all the information in their power from parties on whose knowledge and accuracy they could rely, they regret being able to come to no other conclusion than that there is a great reason to fear that neither the property, the morals, nor religion, &c., &c., &c.”

“ It is also, in the apprehension of the Council, a very serious evil, that while the services of one of the most accomplished Surgeons in Quebec are actually paid for by the Institution, an arrangement has been sanctioned by the Government, by which his talents and experience are only available to the patients for a small portion of the year.”—*Letter from Board of Trade, 29th January, 1851, p. 128 & 130, B.B.*

“ The Council, although urged from various quarters (a) to bring these rumours under the notice of Government, refused to do so until they were perfectly satisfied that they were sufficiently well founded to warrant them in calling for an investigation.”—*Letter Board of Trade, 3rd March, 1851, p. 135.*

More citations would be a trespass on time, and a mere copy of the Blue Book.

MARINE AND EMIGRANT HOSPITAL,  
QUEBEC, 25th August, 1851.

SIR,—In reply to your letter of the 19th instant, received this moment, I hasten to reply. I am asked, “ whether at any time there had been a rule in the

(a) Archibald Campbell, Esquire, and the Rev. Dr. Cook.—*Note of the Commissioners.*

“ Hospital, directing Protestant patients to be placed in separate wards, and  
 “ attended by Protestant nurses, and to state if it has ever been enforced, and  
 “ when, and how long; and also to state when and for what reason this rule  
 “ ceased to be persevered in; also, if there has been any other rule respecting  
 “ the classification of Protestants or Catholics, to state what it was, when and  
 “ how long it was enforced, and when and for what reason it ceased to be  
 “ enforced.”

I have the honor to inform you, Sir, that I have no recollection or experience of any such rule being either established or acted upon in the Marine Hospital, but I recollect that the subject had been merely spoken about and suggested by different parties, (particularly in 1847,) but never was carried into effect in any manner.

I have the honor to be,  
 Sir,  
 Your obedient servant,

(Signed,) P. WHELAN,  
 Steward Marine and Emigrant Hospital.

N. Casault, Esquire,  
 S. T. Marine and Emigrant Hospital,  
 Quebec.

(Translation.)

MARINE HOSPITAL,  
 QUEBEC, 25th August, 1851.

SIR,—In answer to your note dated 19th August, requesting me on behalf of the Commissioners of the Marine Hospital, to inform them whether there ever existed in the Hospital a regulation for the classification of Catholics and Protestants, and to state at the same time when, and why, and by whose orders such regulation ceased to be in force, I have the honor to state to you, for the information of the Commissioners, that no regulation has existed in the Hospital for the classification of Catholics and Protestants other than that which still exists; that is to say, that a card is affixed to the head of each bed, on which are written the name, the country, and the religion of the patient.

In 1847, the Chairman of the former Commission communicated to us the wish of the Lord Bishop of Montreal relative to the classification of the patients in the Hospital. He was desirous that Protestants and Catholics, should be placed in different wards. The Chairman requested us, at the same time, to state to the Commissioners whether this classification would occasion inconvenience or additional expense.

My two colleagues, Dr. James Douglas and Dr. John Racey were favorably inclined towards his Lordship's plan; for my part, I thought differently, and did not consider the plan a feasible one, especially at certain seasons of the year, but as I did not wish to throw in the way any obstacles which might prevent the plan from having a fair trial, I signed with my colleagues, and there the matter ended.

I have, &c.,

(Signed,) JOS. PAINCHAUD,  
 Vis. Phys., M. H. Q.

N. Casault, Esq.,  
 Secretary, M. H. Q.

QUEBEC, 13th September, 1847.

GENTLEMEN,—We have the honor to acknowledge receipt of your letter of this date, inclosing one from His Lordship the Bishop of Montreal; and in answer we beg leave to inform you, that there will be at present no difficulty or additional expense in placing Catholic and Protestant patients in separate wards.

We will accordingly adopt measures to carry your wishes into effect, and will report to you whenever the number of patients in Hospital is so small as to require a change in this mode of classifying them,

We have the honor to be,  
Gentlemen,  
Your obedient servants,

(Signed,) JOS. PAINCHAUD,  
J. DOUGLAS,  
JNO. RACEY.

To the Commissioners,  
M. & E. Hospital.

(Translation.)

QUEBEC, 5th July, 1851.

SIR,—I am under the disagreeable necessity of requesting that you will inform the Commissioners of the Marine Hospital, that this morning, Dr. Wm. Marsden renewed his attempt to intrude into the wards, and that I considered it my duty to cause him to be put out; this I was compelled to do twice.

I respectfully request that the Commissioners will take immediate steps to prevent the repose and tranquillity of the patients being interrupted.

I have the honor to be,  
Sir,  
Your most humble and obedient servant,

(Signed,) JOS. PAINCHAUD.

N. Casault, Esqr.  
Sec. Com. M. & E. H.

QUEBEC, 16th of July, 1851.

To the Commissioners  
of the M. & E. Hospital.

GENTLEMEN,—We are under the impression that our colleague Dr. Painchaud has made an official report to you of what took place at the Hospital on the fourth and fifth instant concerning the peace of the Establishment, and the tranquility of the patients, which were seriously interfered with by the obtrusive visits of Dr. Marsden. Our colleague has been prosecuted in damages for having caused Dr. Marsden to be turned out of the Hospital, and we regret having to add that he is still waiting for the protection he has demanded from you, and even (a) an answer to his two letters. As it is possible we may be placed in the

(a) This is incorrect. I, as Secretary, wrote to Dr. Painchaud on the fourth.

(Signed,) N. CASAULT,  
S. T. C. of M.

same situation as our colleague, and not wishing to enter in any lawsuits, and incur costs on account of the Hospital, we beg respectfully that you may take this affair into your serious consideration.

We have the honor to be,  
Gentlemen  
Your most obedient servant,

(Signed,)      A. JACKSON,  
A. ROWAND.

QUEBEC, 22nd November, 1852.

GENTLEMEN,—Having appended my signature to the preceding letter, I deem it my duty to state that before doing so I expressed to my colleagues my regret that it should have been considered expedient to adopt therein a tone and expression which, however much they may be justified by the general course pursued by Dr. Douglas in relation to this matter, as well as by the language of his letter of the 6th instant, are nevertheless in my opinion much better avoided. This objection, I wish it to be perfectly understood, has reference only to the tone, and not to the substance of the letter (in which I entirely concur) and applies equally to the Commissioners' letter of the 30th August, 1851, which has called forth Dr. Douglas in terms perfectly characteristic of that gentleman, though not such as I have any desire or intention to imitate.

Further than expressing my dissent in the above particular, I should not have considered myself called upon to add any remarks of my own to those of the Commissioners, were it not that Dr. Douglas' letter to which the above is intended as a reply, gives a prominence to my name which it becomes less the duty of the Commissioners as a body than mine as an individual member to notice.

There are but two points in Dr. Douglas' letter upon which I feel myself personally called upon to touch, and these I shall dispose of as briefly as possible.

In the first place, as regards the frequency with which Dr. Douglas asserts he brought under my notice, as Chairman, the irregularities practised in the Hospital and my unwillingness to institute the required investigation, I am not at all surprised at the pertinacity with which Dr. Douglas adheres to any assertion that he has once made, whether it be founded in truth or like the present, the offspring of his own imagination. I am perfectly aware that Dr. Douglas was (and has been ever since the cessation of his dictatorship in the Marine Hospital) in the constant habit of finding fault with every thing connected with that Institution, and moreover that on many irrelative occasions when I was present, he would persist in bringing the subject under discussion and making vague, rambling and general charges against its management, which always appeared to me to be the result of personal pique and not the genuine expression of friendly zeal for the interests of the Institution against which they were directed. These incidental conversations, which took place most frequently at the Quebec Lunatic Asylum in the presence of Dr. Fremont, when met on the business of that Institution, and also occasionally in the streets, constitute the twenty occasions to which he alludes and which he would lead the public to believe were so many proper official communications addressed to me as Chairman, instead of being as they were, vague and intangible general complaints. I here distinctly and emphatically repeat that on two occasions only did Dr. Douglas make the Hospital grievances the subject of a special visit, and my reply on those as on other similar occasions was, that he should address the Commissioners in writing officially and that his complaints should receive immediate attention. This course was so plain and reasonable, so simple and so safe, that it is surprising that so small

a sacrifice of time and convenience could have prevented its immediate adoption by any one pretending to entertain a sincere desire for the redress of the evils complained of.

I need not remind any one who has ever had the misfortune to differ in opinion with Dr. Douglas, that verbal conversation with him under such circumstances is anything but agreeable. The overbearing dictatorial style he assumes, the impetuosity of his language and gesticulations, are invariably such as to silence, though rarely, I should say, to convince his antagonist; an instance of this kind occurred on the occasion of a discussion at the Quebec Lunatic Asylum, respecting the alleged interment of a child between the legs of a negro. Dr. Douglas persisted in stating it to be a fact that had come to his *personal knowledge*, and asserted that the child was one that had died about that time of the small pox. On my expressing doubts of the correctness of this information, he went through the usual stormy pantomime and was left to the enjoyment of his fancied success. A few days afterwards, however, I received a note from Dr. Douglas of which the following is an extract, the original of which I only recently and accidentally discovered. "I was wrong in my opinion about the child buried with the negro; it was not the little girl that died of the small pox."

As regards that portion of the letter of the 30th August, 1851, which refers to the manner in which Dr. Douglas became possessed of the information respecting the interment of the child and colored man before alluded to, I can only say that in conversation with Dr. Douglas on the subject, he admitted to me that *he had in his possession the head of the negro*; such an admission could not be regarded in any other light than as an argument in support of "personal knowledge" he claimed in regard to that fact, and as such it was clearly entitled to great weight, but whether it warranted the presumption assumed as an alternative by the Commissioners I shall leave to the present enquiry and to the public to determine.

Before closing these remarks I shall take the liberty, notwithstanding my great "dread of responsibility and deficiency of moral courage" briefly to state my experience and views of the connection of Dr. Douglas with the Marine Hospital. During the early years of the Commission, Dr. Douglas was one of the two paid Visiting Physicians, and as such was allowed to reign supreme throughout the Institution. No charges were then heard respecting its management, save those which had reference to the well known particularities of his temper and disposition which were frequently the cause of bitter complaint. In process of time the Executive, contrary to the expressed desire of Dr. Douglas (and I may add contrary to my own opinion,) thought fit to associate with him six unpaid Visiting Physicians, who forthwith became co-participators with him in all the privileges and control of the Hospital. From that period the management of the Institution has never been satisfactory to Dr. Douglas; it has been his constant theme of animadversion, rumors involving charges of a nature properly cognizable by the Visiting Physicians and incumbent by the rules of the Institution on them, and a *fortiori* on the paid Visiting Physician to investigate and redress, are industriously circulated through the City. The Board of Trade become *intuitively* cognizant of the grievances and borrow Dr. Douglas' words and expressions to join in the outcry, the Government lends an ear, and an enquiry takes place, the result of which proved unquestionably two facts: First, that a Steward who was appointed by the Executive and whose duties necessarily placed him under the immediate eye of the Visiting Physicians in their daily visits, and for whose conduct they are properly responsible, is unworthy of his situation; and second, that a negro was buried, but whether with or without a child in the same coffin, is to me to this moment problematical.

In conclusion, I would beg to remind Dr. Douglas in reference to the epithets so profusely scattered through his last production, that invective is not argument, and generally shews the want of it, and that such terms as "moral turpitude,"

“bad faith” and others equally creditable and appropriate in a discussion of this description, will never be resorted to by me as long as truth can be attained by the language of moderation.

I have the honor to be,  
Gentlemen,  
Your most obedient servant,

(Signed,) JOS. MORRIN, M. D.

To the Commissioners of Enquiry into the  
management of the Marine and Emigrant  
Hospital at Quebec.

The Commissioners of Enquiry would draw attention to the fact that the last letter of Dr. Douglas, and also that of the late Commissioners in reply to it, do not contain any facts not previously brought before the notice of Your Excellency. It is true that the phraseology is different, and that the mutual recriminations, vituperation and abuse, are more strongly expressed. The Commissioners regret that communications marked by so much bad feeling and acrimony should have come under their notice when engaged in investigating the management of a charitable institution, and they can well conceive how difficult it was to act harmoniously when the Commissioners, and one of their principal medical officers, entertained towards each other such feelings of animosity; and they cannot but deplore the bad example set to the inferior officers, by those holding high appointments in the Institution. But however disagreeable the task, the Commissioners of Enquiry feel it their duty to condemn the spirit which pervades the letters of the late Commissioners; they were most unscrupulously attacked by Dr. Douglas, and it must be evident that they would have occupied a more dignified position by successfully repelling his charges, than by imitating him in bringing forward accusations and by the use of improper language. But it is necessary to examine these documents more closely: In this part of their duty the Commissioners of Enquiry decided upon avoiding a re-opening of questions already settled, and they took particular pains to ascertain if the different charges and statements could be sustained by unequivocal evidence. To prove some of the positions advanced in Dr. D's. last communication, he requested them to summon Dr. Frémont, Mr. Dean, Mr. and Mrs. Whelan and Mr. Buckley the Sexton.

The Commissioners of Enquiry would point out that Dr. Douglas' disavowal of any connexion with the Board of Trade, or his having furnished them with information whereupon to base their complaints against the Hospital, has not been disproved in a tangible manner by the late Commissioners. While this is quite true, there is such a variety of circumstances corroborating the supposition, that it is impossible not to arrive at the conclusions which the Commissioners did, in attributing the reports and slanders, if not directly to Dr. Douglas, certainly bearing the strongest impression that he was in no small degree implicated in their propagation; this will appear the more clearly when his various communications have been scrutinized, and is further rendered probable from the license of language he indulged in when before the Commissioners.

The allusion to the money transactions again made by Dr. D., in his letter of November 6th, 1851, requires no comment; the matter has already been decided by His Excellency's dismissal of the accused parties. Reverting to this as well other topics long since settled, is not creditable on the part of Dr. D., and would lead every dispassionate person to the conviction that Dr. D. was not actuated in his accusations solely by a virtuous or a praiseworthy regard for the reputation and the utility of the Marine and Emigrant Hospital.



Dr. D. denies having unjustly attacked the Commissioners and calumniated them, and it must be remarked that the Commissioners have not produced irrefragable evidence to prove that he has done so. They speak of rumours, and allude to newspaper paragraphs but they have not traced these (at least to the satisfaction of the Commission) directly to Dr. Douglas, yet it must be admitted that there are not a few reasons for inducing the late Commissioners to accuse Dr. D. of these highly censurable acts, which were of a nature to excite the indignation of all honest, straightforward men, and this they may justly urge in extenuation of their language. The late Commissioners allege that Dr. D. was not deterred by the fear of legal measures from putting his complaints in writing, but Dr. D. declared before the Commissioners of Enquiry, that he was prevented by a dread of consequences from so doing, and that the conduct of the Marine Hospital Commissioners on a former occasion, prevented him from making any charges in writing; and he alluded to the circumstance of his colleague, Dr. Painchaud, having complained in writing to the Commissioners, of the conduct of a House Surgeon, and was afterwards obliged to pay the expenses of an action for libel, brought against him by the House Surgeon, the expenses of defending which action the Commissioners refused to refund.

The Commissioners of Enquiry cannot give Dr. Douglas credit for being influenced by this dread of the consequences of sending a written accusation before the Board, as in that act he would have been discharging a duty appertaining to his office, and was not making a public or calumnious accusation. The excuse is at least a very poor one, but they cannot conceive, even admitting his dread of a prosecution, how this apprehension should have prevented him applying in writing for articles wanted in the Hospital, or pointing out to the Commissioners some of the abuses which he has since not only put in writing, but has published in the public newspapers of Quebec, with no fear of the law before his eyes.

Dr. Douglas, in his last communication states, that before a meeting of all the Commissioners he mentioned some abuses, and expressed a wish to be allowed to bring others under their notice, but he has never been summoned for the purpose of doing so. In their reply, the late Commissioners omit all allusion to this statement, which, however, is adverted to by Dr. Morrin in his letter.

Dr. Douglas disclaims all connection with the conversions said to have been made, and alludes to the neglect of a rule past just previous to the appointment of the late Commissioners, which provided for the separation of Protestants and Catholics, and he believes that conversions would not have taken place had that rule been adhered to. But on this point Dr. D. appears to labor under a misconception, for the evidence of Dr. Painchaud and Mr. Whelan proves that, though an attempt was made, at the suggestion of the Bishop of Montreal, it was found to be impracticable, or at least excessively inconvenient, and, in fact, it was never carried out, and the Dr. seems to have lost sight of it, till it might form the basis of a complaint.

The subject of the interments was enquired into when Cutter's case was before the last investigation, but as Dr. D. alludes to a recent instance, the Commissioners of Enquiry took some pains to ascertain all its particulars:—It appears that a black man died in the Hospital, and a student of Dr. Douglas being anxious to make a preparation of his cranium, (at least this seems to be the inference) it was intimated, visited the grave in which he was interred, and whilst engaged in decapitating the body, he discovered that a white female corpse was also contained in the same coffin, and informed Dr. Douglas of this fact. The Sexton had previously, however, ascertained the same fact from the weight of the coffin, which induced him to open it, and he also informed Dr. Douglas, who advised him to inform Dr. Morrin who referred him to Mr. Paradis. The latter refused to believe him, and at last promised to visit the grave to be satisfied of

the fact, which, however, he never did. When the Sexton went to examine the coffin the next day, he found both bodies had been carried off.

The mention of this case by Dr. Douglas and the manner of his becoming acquainted with its particulars, have suggested to the late Commissioners the question they addressed to Dr. Douglas, and which he has construed into an accusation *that he himself had opened the grave!*

The Commissioners of Enquiry do not consider the misunderstanding about Dr. Marsden's expulsion from the Hospital as a matter of such magnitude as the accusers of Dr. Douglas. Dr. Marsden had rendered himself obnoxious to one of the senior Physicians, and likewise to some of the junior ones; and even though there might not have been a rule expressly prohibiting *him* attending the Hospital, except in the presence of one of the Visiting Physicians, his own sense of propriety and professional etiquette should have kept him out of an Institution to which he was not a welcome visitor. The letter of Dr. Douglas, for writing which the late Commissioners blame him, stated that no rule existed prohibiting Dr. Marsden's admission to the Hospital; but it was not worded with sufficient precision, and indeed must be considered as calculated to mystify. Still it came out in evidence, that a verbal order to that effect had been consented to by Dr. D. The Dr. merely asserts that "there was no written order." It may justly be asked, is there no equivocation here? Dr. Marsden also may have construed it into a permission to visit whenever he pleased. But we cannot excuse the steps he then took to test the question, bearing in mind that the scene of his experiment was a charitable asylum. Both Dr. Douglas and the late Commissioners are on this point for once unanimous, that "most disgraceful scenes" were then and there committed.

The charge against Dr. Douglas, of irregularity and want of punctuality in his attendance upon the Hospital, has not been proved to the satisfaction of the Commissioners of Enquiry, and the complainants are rather unfortunate in alluding to the "Blue Book" for proof of their accusation; for the following passage is recorded in the evidence of Dr. Landry:—"During my residence in the Marine Hospital, in the capacity of House Surgeon, Dr. James Douglas was in the habit of paying daily visits during the period during which almost the whole of the patients are admitted, that is to say, from about the beginning of May until about the end of November in each year. These daily visits, however, were frequently made after the stated hours, and sometimes even in the afternoon. Those on Sunday, for instance, were generally made about five o'clock in the evening. I had orders from Dr. Douglas, when he did not come himself *at a quarter past ten, to go his rounds for him.*" The Commissioners of Enquiry are convinced, from the latter sentence of Dr. Landry's evidence, that when Dr. Douglas failed in being at the Hospital at the usual hour, viz., ten o'clock, he must have been prevented by urgent professional avocations. At the time Dr. Landry speaks of, Dr. D. was in the habit of attending the whole year round to the surgical wards principally; he was, moreover, in large practice, and resided at a considerable distance from the Hospital, and the hour of visit was one very inconvenient to a practitioner who had private patients to attend to. Under these circumstances, it could not fail that occasional irregularity would take place; and the late Commissioners did not display great familiarity with the usages of Hospitals, attended by Physicians in large practice, if they could not make allowance for occasional want of punctuality in Dr. D's. visits. As Dr. D. attended every day, and had the Hospital visited by a House Surgeon in the morning, when he himself could not attend, it is clear that little inconvenience was occasioned, and the safety and comfort of the patients not jeopardised. Visits to Hospitals on Sunday are usually made at any hour most convenient to the Physician, and, in some instances, where there is a trustworthy House Surgeon, are altogether omitted. Dr. Douglas cannot be blamed for selecting an

hour which in all probability was the only one in which he could have visited the Institution on the Sabbath, for the disposal of a medical practitioner's time on that day is usually regulated by the hours for Divine Service in the Church which he and his family attend. Consequently the same hour may not be convenient to all the Physicians of an Hospital, and the same Physician may find it impossible to attend upon Sundays at the hour he is accustomed to visit on week days. The fact of this charge having been already disposed of in the "Blue Book," and again adduced in the last communication of the late Commissioners, displays an over anxious zeal to collect materials on which to base charges against Dr. Douglas, which the Commissioners of Enquiry regret to notice, but which is too evident to escape observation, and deserving of the same censure as the attempts of Dr. D. to rake up old charges already disposed of.

But what did the Commissioners do to enforce the regular attendance of Dr. Douglas? It does not appear that they were even aware of his want of punctuality until the late investigation was being held. If they were, they are certainly culpable for neglecting to admonish Dr. Douglas; but if, as it appears, they were seldom seen in the Hospital, and their Secretary for a great part of the year absent from Quebec, it can easily be conceived how this matter escaped their notice until it served their purpose to bring it forward as an instance of dereliction of duty. The late Commissioners again make the assertion that Dr. Douglas spread slanderous reports against the Institution, but, as on the former occasion, they have omitted adducing a single witness to substantiate the charges. With regard to the new accusations under this head, viz: that referring to the attempt of the temporary porter to get into the bed of one of the female patients, to his being an habitual drunkard; to the ignorance of the Apothecary of the English language; all of which it is alleged, originated with Dr. Douglas, as well as several others not given in the communication; it is singular that neither at the time when the former investigation was going on, and when it was stated, these reports were first circulated, nor since then, have the late Commissioners adduced a single witness or any other kind of evidence to prove that Dr. D. gave rise to them.

The Commission of Enquiry cannot attach the same importance to mere rumours, hearsay evidence and newspaper reports, as it appears the Commissioners of the Marine Hospital did, and which it is to be regretted they considered so satisfactory in affixing charges of misconduct on one of their medical officers.

It is also affirmed that Dr. Douglas threw obstacles in the way of the Commissioners and always did his utmost to render to them "the management of the Hospital not only disagreeable, arduous and difficult, but almost impossible." It would have been satisfactory to have had the truth of this serious charge fully established, and the same remark applies to the still more serious one, of Dr. D's. having "advised and consulted those whose conduct was the most to be blamed" and specially Mr. Cutter, during the investigation on his conduct." The Commission of Enquiry is of opinion, that if the Commissioners of the Hospital *had it in their power to prove the latter assertion, it was, and is still, their bounded duty to do so*, for if Dr. D. guided and counselled an individual who had been found guilty of the many offences charged against Mr. Cutter, he himself being one of the principal accusers (see Blue Book, page 49) of that person, his name should have been at once struck off the list of the Medical Staff.

In that part of their communication in which the late Commissioners allege that Dr. Douglas "is at war with every one in the Hospital, with the exception of two Visiting Physicians, and of those two, one is united with him through fear of his power to do harm, and the other from motives best known to him," it must be confessed they have travelled out of their way to give gratuitous offence to two of the Medical Staff, an act not very indicative of a conciliatory policy on their part.

Dr. Morrin, the Chairman of the late Commission, has sent in a separate reply to the charges of Dr. Douglas, in which he deprecates the strong language employed in the last rejoinder of the late Commissioners. He repeats what had previously been alluded to, that Dr. Douglas' complaints were always made verbally, that he neglected to make a formal written statement of his charges, and that it was usually in the public streets or at the Beauport Lunatic Asylum, that these grievances were spoken of. Dr. Fremont's testimony, upon which Dr. Douglas places so much reliance, only shows that the complaints were made when these three gentlemen were apparently employed in the performance of their duties at the Lunatic Asylum, and corroborates what has been advanced both by Dr. Douglas and Dr. Morrin; the former always refused to make his charges in writing, alleging as an excuse, the liability of a law suit following the act, whilst the latter invariably refused to listen to verbal remonstrances and requested Dr. D. to put his complaints formally before the Commissioners in writing. Dr. Morrin alludes to the peculiar manner of Dr. D., his violence of gesticulation, and the pertinacity with which he adheres to opinions once formed, and to the assertion of statements, whether based on truth or only the offsprings of his own imagination. That these peculiarities present obstacles to the friendly and quiet adjustment of misunderstandings, as well as to the calm and dispassionate consideration of matters of importance, all will admit, but Dr. Morrin must ere this, have learned to discuss such subjects with Dr. Douglas without much obstruction from the above causes, otherwise he could have hardly conducted harmoniously with that gentleman, for the last seven years, the Provincial Lunatic Asylum, which is in fact their property, and in the management of which they are partners.

It is but reasonable to infer that Dr. Morrin always believed that those charges were of the same groundless character so often urged by Dr. Douglas, and to get from that gentleman something tangible, his usual reply to him was a request that they should be put in writing. Whilst the admission, on the part of Dr. Douglas, that the negro's head was in his possession, and which admission supplies the deficient information wanted to explain how he became acquainted with the fact of two bodies being buried in one coffin, does not lead to the conclusion that he himself opened the grave and decapitated the negro's corpse.

The Commissioners of Enquiry cannot help expressing their admiration of the calm and temperate manner in which Dr. Morrin replies to one whom he had ever considered his friend; who was and is his partner; whom he was in the daily habit of meeting professionally; and for whose talents he has ever expressed a high degree of respect, and yet from this gentleman, at last he received gross insult, and is charged with "moral turpitude," and with being deficient in moral courage," as one who whilst assuming responsibility shrinks from the consequences of performing his duties, and allows, by his vacillations, his indecision of character and indifference, a valuable public charity to become the scene of immorality, robbery and every other species of vice.

That Dr. Morrin was culpable, in the first instance, in allowing the duties of his peculiar office, that of Medical Supervisor over the whole establishment, to be performed by Dr. Douglas, can admit of little doubt; and that the latter having exercised those powers for several years, and finding himself restrained in his control over the Hospital, and his sole management of the Surgical Department disputed by the incoming Physicians, can well be conceived as causing bitter and ceaseless murmurings and dissatisfaction with the new state of things, so opposite to what they had been when he was the "heart and soul" of the establishment, the "dictator" enjoying the flattering admiration of a colleague who considered him "the first Surgeon in all North America." But, if from a feeling of intolerable restraint, or from disappointment at his plans about the Surgical Practice not having been supported, or from any other cause, his position in the Hospital became disagreeable

to him, he should have resigned, and not have remained to create broils and give rise to discontent, in an establishment with whose utility and public reputation he has so frequently declared himself to be deeply interested.

In testimony of the faithful manner in which he has discharged his duty to the Hospital, Dr. Douglas adduces the written evidence of Mr Gowan, one of the members of the first Commission, and to prove that he has been known to complain frequently of abuses in the Hospital to the Chairman, Dr. Morrin, he has brought forward a written statement from Dr. Fremont; both these letters will be found in the Appendix. The evidence of Mr. Whelan, who was Steward of the Hospital for several years, and that of his wife, Mrs. Whelan, is also brought forward by Dr. Douglas, as well as that of Buckley, the Sexton. Mr. Dean, whose name was given to the Commission as before stated, did not appear in compliance with the request of the Commissioners of Enquiry. Mr. Whelan's evidence does not support the repeated charges of immorality in the Hospital brought forward by Dr. Douglas, although it does incriminate one of the Medical Officers, placed in the Institution during the illness of Dr. Lemieux, and for whose "temporary substitution" the late Commissioners "did not consider they were bound to consult the Visiting Physicians." The Commissioners of Enquiry are of quite a different opinion, they believe that no person should have been placed in the responsible post of House Surgeon without the approval of the Visiting Physicians, for whom he was to act as deputy.

It is not improbable that had the Medical Staff been consulted, the only improprieties spoken of by Mr. Whelan, would have been avoided.

Mr. Whelan speaks in laudatory terms of Dr. Douglas' attention to the interests of the Hospital, and also of Dr. Painchaud's. He did not notice any disagreements except occasionally between Drs. Douglas and Painchaud.

The conversions which took place in the Hospital were the spontaneous acts of the patients themselves; they were not brought about by any attempts at proselytising.

Mr. Whelan knows of no instance in which Dr. Lemieux was guilty of any immoral conduct. Dr. Lemieux was always *regular in his habits and attentive to his duties.*

The evidence of Mrs. Whelan is pretty much the same as that of her husband; she also alludes to the misconduct of Dr. Godbout with one of the female patients.

She has no personal knowledge of Dr. Lemieux being "guilty of any improper or immoral practices with any one of the nurses, patients or servants, of the Hospital." She had heard rumours of his freedom of manners with one of the nurses. She states that one of the nurses, for the purpose of injuring her, showed some bad meat to the Commissioners, but that they took no notice of the matter. This same nurse was the cause of much disturbance in the Hospital. She says that she repeatedly mentioned to Dr. Morrin the irregularities and immoral practices existing in the Hospital—that Dr. Morrin desired her to state what servants should be dismissed; to which she replied, that she desired all of them to be dismissed except John Hillstrip (the orderly.) As Mrs. Whelan knew nothing personally of these alleged misdeeds, but had her knowledge from rumours, it is not strange that the Chairman, Dr. Morrin, did not act on her suggestion, being probably of opinion that Mrs. Whelan's request was in some measure dictated by a spirit of revenge, as one of the nurses had brought charges against herself not attending to the quality of the meat.

On another occasion when bad meat was supplied, the same nurse shewed it to Mrs. Whelan, but she (Mrs. Whelan) omitted mentioning the matter to the Commissioners as she would obtain no redress from them.

The Commissioners of Enquiry do not consider that the evidence furnished by Mr. and Mrs. Whelan, two most respectable and trustworthy witnesses, establishes the fact of frequent acts of immorality having been committed in the Hospital, since the late investigation for as was before stated, all matters adjudicated upon at that enquiry were not investigated during the present one.

It appears that Mrs. Whelan had heard rumours of misconduct, and it is but fair and proper to state that the alleged freedom of manner imputed to Dr. Lemieux in his demeanour towards one of the nurses, was founded on the simple fact, that some of the other nurses thought she remained longer in the Apothecary's shop, when getting the medicines for her ward, than was really necessary! It is upon foundations equally solid that many of the charges have been based.

It affords the Commissioners of Enquiry much pleasure to have it in their power to state, that throughout the whole of the present investigation, the conduct of Dr. Lemieux will bear the closest examination. All the Medical officers testify to his capabilities as a House Surgeon, and to his regular and attentive care of the sick, and none of his accusers have been able to bring home a single charge out of the many advanced against his moral character.

And although not connected immediately with the subject of investigation, it may not be altogether irrelevant to mention, that Dr. Lemieux is quite familiar with the English language and speaks it with great fluency. It is, perhaps, not out of place to mention this fact, as his alleged ignorance of the English language was brought forward on several occasions as an objection to his appointment to the office of House Surgeon of the Hospital.

*Buckley*, the Sexton's evidence was not given in a straight-forward candid manner, and it was necessary to remind to him frequently of his prevarication and contradiction. It appeared that he was engaged either about Dr. Douglas' country residence, or at the Beauport Lunatic Asylum nearly the whole year round, and yet he tried in every way to avoid giving a direct answer to the question addressed to him upon that subject. Similar equivocation and evasion characterised the rest of his evidence; from the tenor of which, however, it is evident that formerly great misconduct took place with regard to the interments, bodies having been taken out of the coffins in the dead house of the Hospital before they were removed for burial, and two bodies having been frequently put into the same coffin; but except in the case of the black man and the white girl already alluded to, he was not aware of the practice having been pursued since Mr. Cutter's dismissal.

Mr. Patrick Whelan appeared before the Commission on the 11th day of November, 1852, at half-past 9 o'clock, A.M., and on oath declared:—

That he had been Steward of the Marine and Emigrant Hospital for upwards of 16 years; that he left the same Institution in January last. He has no knowledge regarding the taking away of bodies for purposes of dissection, and that he has never been in a dissecting room. Up to the period he left the Hospital, he saw nothing personally touching immoralities or irregularities of an immoral tendency committed in the Hospital. He never personally witnessed any bad conduct on the part of any of the Officers of the Institution during the 16 years he was Steward of the Hospital. That on the 4th November, 1851, two of the nurses complained to him of the immorality of Dr. Godbout, then acting as House Surgeon in the stead of Dr. Lemieux, who was then ill; that it was stated by nurse, Mary McMahan, an old woman, that Dr. Godbout, with a patient, Harriet Young, were locked up together in a room (the room is the one appropriated for the nurses to sleep in); that she, Mary McMahan, rapped frequently at the door for admittance, but it was only after some time that the door was opened, and she found them, Dr. Godbout and Harriet Young, together; but they were not discovered in any improper position, nor doing anything improper together. It appeared to the deponent, Mr. Whelan, that some other more convenient means might have been chosen in the Hospital, particularly in the House Surgeon's room, for improper connexion between Dr. Godbout and the nurse. He repeats, that he never saw at any time and he certainly has no knowledge, during the whole time that Dr. Lemieux was House Surgeon, that he had acted in an improper or immoral manner; that he was regular in his habits, very correct in his

deportment in all things, and very regular and attentive in his duties as House Surgeon.

That Dr. Douglas was considered the chief of the Hospital, that is, the *heart* and *soul* of the Institution; that in 1847 he was very assiduous in his duties, and particularly at a time when the Hospital had been abandoned by the Commissioners; that Dr. Douglas had been considered the leading authority at the Hospital, and he was the Visiting Physician to whom he generally addressed himself on the affairs of the Hospital. That Dr. Painchaud was always attentive to the duties of the Hospital, and equally so with Dr. Douglas with regard to the patients. That he has always seen harmony and cordiality existing among the Visiting Physicians, excepting occasionally there appeared some differences between Dr. Douglas and Dr. Painchaud.

That latterly, the patients seemed to show a preference to Dr. Douglas professionally; he thinks that this preference arose in consequence of his superior reputation as a surgeon.

That he has no knowledge whatever that patients had been robbed in the Hospital during the whole time of his Stewardship; that he has no knowledge of *forced* religious conversions having occurred in the Hospital during his time; the best feelings seemed to exist between the Protestant and Roman Catholic Clergymen. That there were some conversions from the Protestant to the Roman Catholic religion, but these occurred without being tampered with for that purpose, and were the spontaneous act of the patients; these were very few in number. That the Reverend Mr. Percy is the regular and recognized Chaplain in attendance, and is very zealous, and a gentleman of fine feelings. The Presbyterian Clergyman attended only when called for by Presbyterian patients.

Mrs. Ellen Whelan, wife of Mr. Patrick Whelan, appeared also, on the 11th November, 1852, and stated under oath as follows:—

Was a paid Matron in the Marine and Emigrant Hospital, and had been so far upwards of sixteen years. That she knows nothing *personally* of immoral practices in the Hospital since the time of Jane Hamilton. She left the Hospital with her husband, Mr. Whelan, about a month after Dr. Douglas had left for England; with regard to Harriet Young, a girl of about 20 years of age, and a patient in the Hospital as convalescent, she only knows what was related by one of the nurses, Mary McMahan; that two nurses had stated to her, that Dr. Godbout had been found in a small ward, (but empty of patients) with Harriet Young; that the nurse, Mary McMahan, had returned from church with her daughter, about 15 or 16 years, and found the room locked; that she rapped at the door, it was opened from within by either Harriet Young or Dr. Godbout, it was about 6 o'clock, P. M., in, she believes, the month of September, it was light of day. That it is not within her personal knowledge, that Dr. Lemieux had been guilty of any improper or immoral practices with any of the nurses, patients or other servants of the Hospital, except what she heard about his, Dr. Lemieux's freedom with Sarah Garland. That she had repeatedly mentioned to Dr. Morrin the irregularities and immoral practices existing in the Hospital. That Dr. Morrin desired her to state what servants should be dismissed, to which she had replied, that she desired all of them to be dismissed, except John Helstrip.

That she has no knowledge, personally, that Sarah Garland had ever robbed the patients of money. That this Sarah Garland has repeatedly created disturbances in the Hospital, and has some times put meat in the drawers and shewn that meat to the Commissioners for the purpose of injuring her, the Matron, but nothing was done in the case by the Commissioners. That once, Sarah Garland had come to the Matron with some meat complaining of its quality; the Matron acknowledged that the meat was stale but not so much so as not to be eaten. She placed it on the shelf, and did not report the case to the Commissioners, because she thought, from former circumstances, that she would obtain no redress from the Commis-

sioners. Dr. Douglas had informed her that the investigation of the affair of the Hospital was going on, but did not enter into particulars, or say that she was to be called as an evidence.

*Mr. Neville's (the Steward) Evidence.*

Mr. Neville was examined by the Commissioners of Enquiry on different occasions, as to whether he knew of any impropriety going on in the Hospital, and he invariably declared that he was not aware of any instances of the kind. He offered a suggestion which the Commissioners think should be acted upon, viz:— that *male* nurses should be employed in the *male* wards, particularly in the venereal wards, the inmates of which are generally sailors. As he very properly remarked, no women, however virtuous, can long remain in attendance upon patients labouring under a disease of such a nature, and having to perform services offensive to modesty, without having her morals, or at least her delicacy of feeling, seriously endangered. It seems strange that this circumstance has been up to the present totally neglected, for as the Hospital has always had a male nurse in some of the surgical wards, it would have been no innovation to have appointed one to that ward, which, more than any other, required one.

Patrick Buckley appeared before the Commission and declared under oath, that he believed he was in his twenty-ninth or thirtieth year, and that he was and had been Sexton to the Marine and Emigrant Hospital burial-ground for six years. That in the summer of two years ago and during the prevalence of sickness, a black man and a white girl of seven or eight years of age were placed in the same coffin for interment. That from the weight of the coffin, he suspected that there was more than one body in the coffin, he was therefore, from so suspecting, induced to raise the cover of the coffin with his spade, and found the two bodies. That he went to Dr. Morrin at the request of Dr. James Douglas, but he would give him no satisfaction, and told him to go to Mr. Paradis (one of the Commissioners); that he went to Mr. Paradis, but that gentleman said he would not believe such talk unless he saw it himself, and that he would go after him to examine the case, but which he did not do. That next day when he went to cover the bodies he found them missing; in explaining he said, that there was no earth in the coffin the evening previous, but that on the next morning he found that some earth had been thrown upon the coffin. That on a second examination when he had raised the lid of the coffin, he discovered that the head of the black man had been taken away, and that next day when he went for the purpose of interring the coffin, he discovered that the bodies had also been taken away and the coffin empty.

That he is positive that bodies several times before those of the black man and the girl have been taken away, and even since that period.

That he has never assisted in abstracting or procuring bodies for any dissecting room in the City of Quebec or Montreal, before the black man and the young girl had been taken away, nor since, and that he never entered into any agreement with any person or persons to furnish them with bodies; nor has he ever absented himself for the purpose of allowing bodies to be taken away for dissection, or other purposes, during the time he had been employed as Sexton to the burial-ground of the Marine and Emigrant Hospital.

That some time after discovering that two bodies had been placed into one coffin, he went to Dr. Lemieux and complained, that he was cheated by doing so; upon so complaining Dr. Lemieux placed his hand upon the collar of his coat and ordered him out, remarking at the time he was doing so, not to make any further false reports about the Hospital.



That he has seven shillings and six pence for opening a grave and burying, and that when out of employment he is employed on the farm of Dr. James Douglas.

That he has never been requested by Dr. Douglas to furnish him with bodies, nor by persons in the professional service of that gentleman.

That he has never in any instance, nor has any of his family ever given notice to any medical gentleman or medical pupil that they could easily obtain bodies from the burial-ground of the Marine and Emigrant Hospital. And that independently of being employed as Sexton to the burial-ground, he is employed by Dr. James Douglas, in the summer season, and he is much more, and he would say, more generally employed as labourer by Dr. James Douglas than by any other person in the company.

his  
PATRICK ✕ BUCKLEY.  
mark

#### CASE OF WILLIAM LAWSON.

##### *Mutual charges of Drs. Rowand and Douglas.*

William Lawson was admitted into the Surgical Ward of the Marine Hospital on the 22nd June, 1851, which was then under my care. He had a gun shot wound in the left thigh. Upon examination, four or five lacerated wounds were observed on the posterior aspect and about the middle of the thigh, which were scattered over a surface of five or six inches. Two or three of these had perforated through and through and emerged on the inner side. A shot which had not quite penetrated through the limb was felt under the skin and removed, and another was shortly after found in the poultice which had been used. These shot were about the size and weight of swan shot. They differ from it only in their form which was square, which accounted for the lacerated appearance of the wounds. The femur was fractured in the middle. It did not possess any of the characters of a comminuted fracture. But on the contrary, a doubt was entertained by me and my colleague, Dr. A. Jackson (who being at the time at the Hospital, I had requested to see the case with me) whether the bone might not have been broken by the superincumbent weight of the body, after it had been splintered and thus weakened by the shot. There was very little hemorrhage from the wounds. We agreed to leave the limb in the long splint, which had been very properly applied by the House Surgeon previous to our arrival at the Hospital.

The House Surgeon, at my request, called a general consultation of the Visiting Physicians on the following day, and to the best of my recollection, Dr. Douglas was there, and like the others, appeared to entertain a hope of the man's ultimate recovery without the loss of his limb. In a few days, notwithstanding cooling applications and low diet, great tumefaction followed from inflammation, and it became imperatively necessary to loosen the bandages and relax the extension of the limb. This step was quickly followed by considerable shortening. As soon as the subsidence of the inflammation would permit, an attempt was made to correct this shortening; but the suffering and irritation it gave rise to, compelled the abandonment of further attempts. I continued to employ the long splint as it did not appear to hurt the patient in any way, and it enabled the nurse to apply poultices constantly on the posterior aspect of the thigh where the greater number of the wounds were situated, and from which there was a constant discharge of pus. My treatment was strictly antiphlogistic until the subsidence of all inflammatory symptoms, when every effort was made to support the constitution by a generous diet and the use of wine. The man's appetite became very good, and he was in excellent spirits, having no doubts as to his ultimate recovery. I have frequently

found him laughing with his fellow patients and enjoying his pipe. The wounds looked healthy. Those on the front were cicatrizing and those behind had become clean and healthy from the removal of the sloughs. Two wounds which lay close together on the posterior aspect had become converted into a common one from the sloughing away of the septum which divided them. Through an opening thus made, the upper end of the fractured femur was seen overlapping the lower upon its outer side. About an inch of bone was exposed, and it had a pearly appearance, as if deprived of vitality. This bone did not stick out or project through the wound, as Dr. Douglas asserted in the Court House. It lay in a straight line with the lower end of the femur, and was placed upon its outer side. From the time I observed this exposed bone, I was of opinion and frequently expressed it to the patient and students who followed my visits, that exfoliation would take place, when rapid recovery would follow. In this condition, I left my patient on the 15th of August, my term of attendance having expired. I was informed on the following day, by the House Surgeon, that Dr. Douglas had taken charge of my wards, and at his very first visit had seen Lawson, commented upon the shortening of the limb, to the students who followed him, as if it had been caused by my fault. About a fortnight after this, he ordered the long splint to be removed and the double inclined plane to be used in its stead, countermanded the wine which the patient had been taking and ordered porter. The nurse who attended this patient during the whole time he remained at the Hospital, thinking Dr. Douglas had charge of this case as well as of the other cases in the same ward, frequently exposed the leg for his inspection, when Dr. Douglas ordered him to go on with the poultices. At length, the patient becoming despondent, he begged Dr. Douglas to cut off his leg to save his life. He was answered no, that it would do. During the period of three months that Dr. Douglas attended the Hospital, I never visited or prescribed for or in any way interfered with Lawson, as I looked upon him as Dr. Douglas's patient. I was never informed, either by Dr. Douglas or the House Surgeon, that he was not attended to. In fact, it was only after his death, and when the case was likely to become the subject of criminal prosecution, that I learned for the first time, that Dr. Douglas intended to disown having had anything to do with the case.

The patient again came under my care on the 15th November, at the expiration of Dr. Douglas' quarter. I found him in a hopeless condition, he was pale and greatly emaciated, with a bad cough and diarrhoea. The wounded limb was much enlarged from the groin to the knee and was permanently flattened by the double inclined plane. The form of the shaft of the femur could be distinctly traced upon the posterior surface. About three inches of bone was now exposed. The discharge from the wound was thin and watery. My colleague, Dr. Jackson, saw him with me about this time, and we were both of opinion that tubercular disease had fairly commenced. We concluded so from the man's naturally delicate and effeminate conformation, and the severe cough under which he was laboring. The appearances so very unfavorable, indicated approaching dissolution, so that I considered amputation at this time an act of unnecessary cruelty, and rejected the idea.

At the beginning of January, 1852, I was succeeded in my charge of Lawson by Dr. Jackson. He lingered on to the 21st of the month when he died from diarrhoea.

There was a post mortem examination at which I was present. The lungs were but slightly diseased; a few tubercles could be felt between the finger and thumb at the apices; there was a slight adhesion of the right one. In cutting through the skin and muscles of the thigh to examine the femur, they were observed to have been converted into a sort of semi-cartilaginous and gelatinous structure throughout. The sciatic nerve was found wounded. The femur was fractured in its middle with a lateral overlapping of the broken ends, the upper end being situated on the outer side and the lower to the inner side. This overlapping caused a shortening of about two inches. With this fracture there were three or four small splinters; the largest

was about an inch and a half long, and was found to have formed firm adhesion to the portion of the femur, from which it had been chipped off. The other splinters were small and were embedded in the soft parts near the thigh bone. Such were the appearances at the post mortem examination.

I am of opinion that Lawson might have recovered with his limb, had he been possessed of an ordinary good constitution, his frame, &c., was the most fragile and effeminate I have ever witnessed in a male; had amputation been resorted to a short time after the commencement of hectic fever, I think his life would most likely have been saved. I believe primary amputation would have been perfectly unjustifiable; it was not a gun shot wound of an aggravated kind, the extent of the injury justified an attempt to save the limb; there was no hemorrhage nor much laceration of soft parts, nor any extensive injury of bone, and this opinion is amply established by the fact that the patient lived seven months after the receipt of the shot.

This case became the subject of criminal prosecution at the late Criminal Term in Quebec; Dr. Douglas stated in his evidence at Court, that he had had nothing whatever to do with the case. That he never had him under his care, and if he had, he certainly would have amputated his leg, and in all probability thus have saved his life. A short time before the trial, he sent for Mr. Pope, Advocate, who defended the prisoner, T. Bourke, accused of the murder of Lawson, and stated to him that he never had charge of Lawson. That I had shamefully mismanaged the case, and he had died through my mismanagement. Mr. Pope, in consequence, endeavoured to throw the blame of Lawson's death on me, in order to save his client, and succeeded in producing an impression upon the Jury, the Court, and the Quebec public in general, with the idea that I was alone to blame for Lawson's death. Feeling innocent, I lost no time in soliciting the Commissioners to investigate the matter, that blame might be placed upon the guilty. My letter was referred to Government. In the meantime months passed away, and the public continued unfavorably impressed towards me. I suffered both in character and professional reputation; and I am greatly rejoiced at the present opportunity, though a tardy one, of clearing myself of these injurious imputations, which I hope I have succeeded in accomplishing by a simple statement of the facts.

(Signed,) A. ROWAND, M. D. E.

W. Nelson, M. D.,  
R. L. MacDonell, M. D.,  
Commissioners, &c.

QUEBEC, 17th November, 1852.

GENTLEMEN,—I have to acknowledge the receipt of Dr. Rowand's statement of the case of Lawson, with a request from you, that I should furnish you with my observation on it.

Before doing so I will briefly relate all I know of the case.

On the morning of the 15th August, I took charge of the surgical wards. On going round, attended by some students and my colleagues of the Hospital, my attention was directed to Lawson, whom I then saw for the first time. He had compound and comminuted fracture of the thigh bone, from gun shot; the limb was about three inches shorter than natural. There was an extensive wound of some inches length on the posterior part of the thigh, through which the bone protruded. *He had on the long splint.* I remarked that it was a very bad case and ought to be carried out by the Visiting Physician who had treated it from the beginning. Dr. Lemieux then said that he believed that Dr. Rowand

intended keeping charge of the case. The next day being again in the ward and in the presence of some parties, Dr. Lemieux addressed me saying, that Dr. Rowand *would* keep charge. Dr. Hall, then present, also observed that Dr. Rowand had told him that he wished to continue the case. I expressed my satisfaction at this arrangement, and my opinion that it was a very bad case, with which I did not wish to interfere. I saw Lawson every day but did not in any way meddle with his treatment. Twenty-seven days afterwards I was accosted by two policemen, at the door of the Hospital, who said they had brought a vehicle to take a patient to the Court House. I returned to the ward, and when Lawson was pointed out, told them his removal was impossible, and that when I got to Upper Town would inform Mr. McCord so, and of the reasons. I then for the first time carefully examined Lawson's limb, and as he complained of the long splint, I asked Dr. Lemieux when Dr. Rowand had last seen him? he replied: "Not for some time, that he had only been down two or three times." I then said it was a shame, that no matter who had charge, common humanity would warrant the removal of a splint which was worse than useless, and I recommended him to remove it and place the limb on a pillow or on a Liston's Apparatus straight. I then saw Mr. McCord, and explained to him why Lawson could not be removed. He said he had a certificate from Dr. Rowand that Lawson was doing well, and was out of danger. I replied that my opinion was the very reverse; that I considered his limb gone, and his life likely to follow. He demanded a declaration to enable him to stay proceedings, and I made it accordingly. The day following being again in the wards, Dr. Hall addressed me saying, that Dr. Rowand requested him to see after Lawson, as it was not worth his (Dr. Rowand's) while to come down so far for one case. I replied, you may if you like, it is a bad case, and I do not wish to be mixed up with it. I saw Lawson daily until the termination of my attendance, on the 15th November. I always spoke to him as I went round, and I sometimes looked at the limb, when Helstrip, the nurse, threw off the bed-clothes, which he occasionally did. I remarked to Lawson once or twice that perhaps the time would come when he would be glad to exchange his leg for a wooden one. He, however, seemed very averse to the idea, and of course I did not urge it.

In November I left Canada for the south of Italy. Lawson died on the 28th January.

I have stated all I know of Lawson's case. I never met Dr. Rowand or any one else in consultation on it. I never was asked. I never saw Lawson until 15th August.

With respect to Dr. Rowand's statement I hardly know how to designate it. He has drawn largely on his imagination for his facts, without reflecting where a departure from a straight line would lead him, and into what a mass of contradictions he would be involved. He states that on 23rd June, the day after Lawson's admission, he called a meeting of the Visiting Physicians, at which he says, "I believe Dr. Douglas was present." His belief strengthens until he actually quotes my opinions and the expressions I used at this pretended consultation. Dr. Lemieux states he never heard of this consultation. Dr. Robitaille was not present and never heard of it. The notes of Drs. Jackson and Hall will show that there was no such consultation and that I was not of course present. As a climax I was ill and absent from Quebec and did not return until 27th. So much for fact No. 1.

The other facts are disproved by Dr. Hall's answers to my questions herewith appended. They were also disproved by the House Surgeon's evidence in Court, who distinctly stated that on 15th August there was an arrangement to his knowledge by which Dr. Rowand kept charge of this case. He also correctly stated the reasons for my interference on 11th September. Dr. Rowand's statements of my opinion are most contradictory. He first says I thought the case

very bad and expressed such before the students. Then he says, "I thought well "of the case and that 'it would do.'" *Do?* do what? My declaration before Mr. McCord will answer the question—my refusal to interfere with the case will answer.

Dr. Rowand's own opinions on the case show an amount of ignorance of the most common principles of Surgery, which would disgrace a student of three months' standing.

He describes fearful gun shot wounds with compound fracture of thigh bone, and then says he doubted whether the gun shot had any thing to do with it, and whether the bone was not broken by the fall. To make matters more glaring, he says, "the body was the most slight and effeminate he had ever seen in a male." He describes four or five gun shot wounds, not ordinary ones, but lacerated by square slugs. These lacerated wounds covered a space of five or six inches, some of them ultimately ran into each other by destruction of intervening parts, leaving one huge wound, in which the broken bone lay, white and lifeless. After this he gravely says, "the case was not a gun shot wound of an aggravated kind, the "extent of the injury was comparatively slight." Dr. Rowand may well complain of the impression made on the Court, the jury and the public by the evidence on Burke's trial. Dr. Rowand himself was examined at length, and by his self contradictions in the witness box, gave rise to these impressions. He stated that Lawson never recovered from the shock of the gun shot, and that he doubted whether at any time amputation was practicable or allowable. Any comments on these opinions of Dr. Rowand's would be like his long splint. Any comments on his attempts to rid himself of the responsibility of such a case as Lawson's would be even worse. I have always done my duty in Hospital; I never shrank from any sacrifice of time or trouble in my care of my own cases, or from my own responsibilities in their treatment. But I ought not to be made responsible for the ignorance or incapacity of any one who may be associated with me. The other Visiting Physicians have equal power with me, and equal responsibility. They exercise the one and ought to bear the other. In my letter of instructions from Government on their appointment, I am told to give them any advice and assistance when asked, but in no way to interfere with them. I have always studied to do so.

I have the honor to be,  
Gentlemen,  
Your most obedient servant,

(Signed,) J. DOUGLAS.

W. Nelson, M. D.,  
R. L. McDouell, M. D.,  
Commissioners, &c.

QUEBEC, *November 29th*, 1852.

GENTLEMEN,—Having been favored by Dr. Von Iffland with a copy of Dr. Douglas' remarks upon my statement of Lawson's case, I think it due to you and to myself to make some observations on them, which I shall do as briefly as possible, and in the same order which he has deemed it right to pursue.

Dr. Douglas states in the instance that when he took charge of the surgical wards on the 15th of August, he was informed by the House Surgeon and Dr. Hall that it was my intention to continue my attendance upon Lawson. I certainly did express such an intention to Dr Hall while I was under the impression that he was to succeed me in the charge of the wards, and I acquainted the House Surgeon of that intention. But, when upon calling at the Hospital on the day after the period of my attendance had expired, I found that the care of the sur-

gical wards had devolved, not upon Dr. Hall, but Dr. Douglas who had visited Lawson, minutely examined him and used disparaging language with regard to my treatment, I from thenceforward considered the case to be in his hands and he would pay to it the attention it so forcibly demanded. This view I immediately communicated to Dr. Hall, and did not again visit or see Lawson until after the lapse of three months, when in the routine of duty, the surgical wards again came under my charge.

By the rules laid down for the regulation of the Hospital there is no power given to any of the medical attendants to retain in their own hands any individual case after the expiration of their quarterly rotation. I could not have done so in Lawson's case, without a violation of these rules, or by the permission and favor of Dr. Douglas, which I was by no means inclined to ask for, as he and I had not been on speaking terms for some time previous.

I therefore absented myself from the Hospital during the three months of his attendance, and did not give the House Surgeon or Dr. Hall to understand that I would continue my attendance upon Lawson during this period, as will be proved by the inclosed note from the House Surgeon, marked No. 1.

These circumstances were lately recalled to Dr. Hall's memory, and he gave testimony to the correctness of my statement of them; but he has since very unaccountably written a letter to Dr. Douglas, contradictory of his own evidence and of the facts.

If, as Dr. Douglas asserts, he considered Lawson to be my patient, although in the ward under his charge, then I ask was it consistent with professional etiquette for him to meddle with my patient, and to make remarks calculated to lower the professional reputation of a brother practitioner?

Dr. Douglas would fain have it believed that he merely looked at Lawson during his first visit, whereas his own evidence proves that on this occasion he made a very minute inquiry and examination into his state and case. These are his words: "He, (Lawson,) had compound and comminuted fracture of the thigh bone from gun shot; the limb was about three inches shorter than natural; there was an extensive wound of some inches in length in the posterior part of the thigh, through which the bone protruded."

Now, if Dr. Douglas made merely a cursory and transitory visit to this poor man upon this occasion, how is it possible that he could have at once come to the knowledge of the facts he has here stated? To see the posterior wound, he must have undressed the limb, and changed the patient's position in the bed.

He says that the fracture was "comminuted." How was this to be ascertained without examination? It is true, at the *post mortem* examination three or four small splinters of bone were brought to view in the immediate vicinity of the fracture, but this does not necessarily imply that the fracture was a "comminuted" one, much less does it prove that Dr. Douglas knew it to be so on his first visit, or that he did not in any way meddle with the case.

Twenty-seven days after this first visit, he states that in consequence of an interview with two policemen, he examined Lawson for the first time, and humanity induced him to remove the splint from his fractured limb. He is right in his date with regard to his interview with the policemen, as is proved by his deposition which is registered in the Court House, and bears date 11th September; but, unfortunately for his accuracy with regard to Lawson's case, the Prescription Book of the Hospital shows that he had removed the long splint and prescribed for the patient on the 5th September, six days before he says he examined him for the first time. An extract from the Prescription Book, proving this, made by the House Surgeon, and marked No. 2, is transmitted herewith.

Dr. Douglas next proceeds to state that I gave Mr. McCord a certificate that the patient was doing well and out of danger: with regard to which I have simply to say that I never gave any such certificate to Mr. McCord; that I call upon Dr.

Douglas to produce it, which, if he should fail to do, will certainly lay him under the imputation of having "drawn upon his imagination for his facts."

Drs. Hall and Jackson, in their answers to Dr. Douglas' queries, admit that they saw Lawson, with one or two other medical men, and as at the time Dr. Hall was not in attendance at the Hospital, it is not more than probable that he attended the consultation which I then called, and which has been forgotten by others. As to Dr. Douglas' statement, that at this period he was ill and absent from Town, and therefore could not have been present, the Commissioners will please to remember that this assertion is not corroborated, and rests alone upon the unsupported testimony of an interested party.

Dr. Douglas imputes to me the crime of having quoted expressions as having been used by him at this consultation, at which he says he was not present. This is misrepresentation of the truth. I quoted no language of his at the consultation, but I did cite an expression used by him subsequently, and addressed to Lawson, and the nurse Helstrip, in his evidence, has sworn that what I stated was correct.

With regard to the opinion expressed by Dr. Douglas of the amount of my ignorance of the most common principles of Surgery, I should only observe that he appeared to hold very different views a few short years ago, when he and I were in partnership, and that some of the most eminent men in Europe have expressed opinions opposite to his with regard to my abilities and acquirements. Testimonials from two of these, marked No. 3 and No. 4, I herewith transmit, assured that their evidence is as trustworthy as that of Dr. Douglas.

Dr. Douglas' competency to sit in judgment and pronounce sentence upon my professional ignorance and incapacity, will be evident from the facts of a case at present in the Marine Hospital, of which the following is an outline :

On the 15th September last, I received a notification in form from the House Surgeon, that on the following morning Dr. Douglas would amputate the testicle of Lawrence Cahil, an emigrant and patient in the Marine Hospital. Upon seeing the case I gave my opinion, although I was not invited to do so. I stated it was not a malignant and incurable enlargement, as Dr. Douglas asserted:—that it was simply syphilitic inflammation of the testicle. I pointed out upon the skin of the patient syphilitic scars; I stated that amputation would be an irreparable injury to the man, without being of the slightest use in the alleviation of his symptoms, whilst his disease was evidently curable by medicine. After I had strongly expressed these opinions, Dr. Douglas desisted from performing his purposed operation, and prescribed the medicines which I had recommended, whereupon the man rapidly recovered, the syphilitic inflammation completely disappeared, and his testicle returned to its natural size. He was, however, permitted by Dr. Douglas to leave the Hospital too soon, and consequently had to return, and is now under my charge for another symptom of the same disease, Tritis, for the cure of which, it would be just as reasonable to cut out his eye, as it would have been to amputate his testicle, as recommended by Dr. Douglas for the relief of his previous symptoms.

The last accusation which Dr. Douglas brings against me in connection with Lawson's case, is that of having given contradictory evidence in the witness-box. But, gentlemen, has Dr. Douglas proved this? His talent for assertion no one can deny, and he appears to labor under the delusion that his assertions are invariably credited. He was not present when I gave my evidence, a very short and inaccurate sketch of which has been published, for which I am surely not responsible. What I did swear to upon that occasion was, that the extent of the injury did not, *in the first instance*, warrant amputation. There was no danger of life from Hæmorrhage, mortification or tetanus, nor was the bone so shattered as to preclude all hope of union, and the length of time (seven months) which the patient survived after the injury establishes the correctness of the view.

I testified also that when Lawson came for the second time under my care, on the 15th of November, the original delicacy of his constitution and the shock which his system had received, combined with great emaciation, unhealthy state of the whole limb, bad cough, exhausting diarrhœa, night sweats, and loss of appetite, rendered it impossible to entertain a hope of saving him by amputation. This was my testimony at the time, it is my testimony now, and in it I can perceive no inconsistency or contradiction.

Thus, gentlemen, you will perceive, that Dr. Douglas stated what was not the fact, when he asserted that I had expressed my intention to keep Lawson in my care, while the care of all the patients in the Ward devolved upon him. See Note No. 1.

2. That he stated what was not the fact, when he asserted that he did not prescribe for Lawson when in the Ward under his charge. See extract from Prescription Book.

3. That he has failed to prove his assertion that I have given a certificate to Mr. McCord, stating that Lawson was likely to recover.

4. That he has failed to establish his assertion that there was no consultation in Lawson's case, or that he was not present at it.

5. That he has utterly failed to mystify you, and impeach my truth by making me appear to have quoted language as having been used by him one time, which I have stated, and the Hospital nurse has sworn was uttered, at a different period.

6. That in accusing me of professional ignorance and incapacity, he proves that he must have been cruel and dishonest towards his private patients when he took me into partnership with him, or that he must be false and treacherous towards me now.

7. That he has produced no proof of his assertion that I gave contradictory evidence on the trial of the man for shooting at Lawson.

8. And finally, that he has completely failed to exonerate himself from the fearful charge of having purposely neglected unfortunate Lawson, in order that he might have some show of foundation for all accusations against me.

I have the honor to remain,

Gentlemen,

Your most humble and obedient servant,

(Signed,) A. ROWAND, M. D.

W. Nelson, M. D.

R. L. McDonell, M. D.

Commissioners.

On the 12th day of November, 1852, appeared John Helstrip, who made oath and said:—

That he has been "off and on," as an orderly at the Marine and Emigran Hospital, nearly seventeen years, with few and short interruptions. That he recollects the case of Lawson; he was under the charge of Dr. Rowand during his term of attendance. On the termination of Dr. Rowand's term, he understood that Dr. Rowand was to continue his attendance upon that patient. He has seen Dr. Douglas yesterday at his own house, on his, Dr. Douglas', request, and also this morning at the Hospital. Dr. Douglas inquired from him about the case of Lawson, but he, Dr. Douglas, did not enter into particulars.

That Dr. Douglas, when going his rounds, would look at Lawson, and ask him how he was getting on.

That when Dr. Douglas went round the Ward, Lawson had a long splint, which he ordered to be taken away, and ordered a double inclined plane.



He ordered him wine and porter, and the continuance of the same dressings; that he, Helstrip, did not lay open every day the wound, or expose the leg for his (Dr. Douglas's) examination, but he did so occasionally, as he would any other case.

Dr. Douglas has examined the wound and probed it, and did everything surgically as he would do to an ordinary patient during his term of attendance; and that he would also order the continuance of the treatment, such as poulticing. He, Helstrip, does not recollect that Dr. Douglas had ever mentioned that Lawson's leg should be cut off. Drs. Hall and Jackson would occasionally look at the case, having patients in the same ward. That when Dr. Douglas' term of attendance expired, he believes that Dr. Rowand took charge, and Dr. Douglas never disapproved of the treatment of the case.

On cross-examination by Dr. Rowand:—

After the time of Dr. Douglas' attendance, he, Helstrip, does not recollect that Dr. Rowand ever prescribed or continued his attendance upon Lawson, or even visited him, and consequently did not look upon Dr. Rowand as the Medical attendant upon Lawson. He further says, that during Dr. Douglas' quarter he has no knowledge that any other doctor attended him. He did not hear Dr. Douglas state, that he would not take charge of Lawson. He never knew Dr. Douglas to refuse any bad case on his entering upon duty. The Surgeons take all cases as they find them in the Hospital, on entering upon their quarter's duty.

Dr. Douglas has never retained any of his bad cases during the attendance of his successor. Lawson asked Dr. Douglas to take his leg off; but Dr. Douglas replied, "No—that he would do."

(To the above statement he requested a paper to be appended, bearing his own writing and signature, which he declared also contained the truth, this paper here appended):—

"Who attended the late William Lawson at the Hospital?"

"I recollect no one but Dr. Rowand and Dr. Douglas. Dr. D. removed the long splint, and put on the double inclined. Dr. D. looking at the limb from day to day, ordered Helstrip to go on with the poultice.

"Lawson said to Dr. Douglas, would it not be better to have the limb removed to save his life?"

"Dr. Douglas answered, 'No.'"

(Signed,) "JOHN HELSTRIP."

QUEBEC, *November 12th*, 1852.

To the Commissioners of Enquiry.

GENTLEMEN,—I beg to call your attention to the letter of Dr. Beaubien relative to the case of Wm. Lawson. I regret to notice an ill feeling manifested against Dr. Douglas in this letter, and I beg to state that I do not participate in it.

I have the honor to be,  
Gentlemen,  
Your most obedient servant,

(Signed,) A. ROWAND.

BYTOWN, *2nd August*, 1852.

A. Rowand, Esquire, M.D.

SIR,—I have received your letter of the 27th ult., requesting me to furnish you with my recollection of the case of the late William Lawson, who was admitted into the Marine Hospital at Quebec, on the 22nd June, 1851, during one of the terms of your attendance.

In complying with your request, I give you the following statement from notes I took at the time.

Early in the morning of the 22nd June, 1851, we were awakened by the door-keeper of the House to receive a patient named William Lawson, who had received a gun shot wound on the preceding night. Doctor Lemieux, the House Surgeon examined the wounded limb, and applied the long splint to it. Dr. Rowand came on his visit at 10 o'clock, and met Dr. Jackson who was also making his visit. They both went to see the patient and decided that what Dr. Lemieux had done was right; after a few days the patient began to suffer severely, so Dr. Rowand directed the bandages to be loosed, and applied again when the irritation would be diminished. Dr. Lemieux re-applied the bandages several times and made the extension, but the patient could not bear them. Dr. Rowand seeing that the patient was weak ordered him wine. His regimen was continued the whole of Dr. Rowand's quarter, which ended on the 15th August, when Dr. James Douglas took his place. On the first visit Dr. Douglas looked at the patient's limb in present of the students, and made some remarks which were very illiberal and injurious to his *confrères*; remarks which he never dared to make to the Commissioners, to whom he should have complained if he thought the patients had suffered from want of treatment. Dr. Douglas paid no more attention to the wounded limb for a long time. In the beginning of September, he asked Dr. Lemieux who was taking care of Lawson? Dr. Lemieux answered, Nobody, "Sir." "Well, we must try to do something for him" said Dr. Douglas. He then proceeded to a minute examination of the wounded limb, after which he ordered the long splint to be removed and applied the double inclined plane in its stead, and ordered the patient porter instead of wine. He afterwards prescribed compound rhubarb and Ipecac., to stop the Diarrhœa. I cannot say the date that these were prescribed; it was some time in September. You can ascertain the date by referring to the Prescription Book.

Since, Dr. Douglas saw the patient every time he made his visit. Late in September, the patient exhibited symptoms of hectic fever. In October, when I left the Hospital he was getting still worse. I do not think that your treatment of the patient was in any wise *deserving* of censure. When you left him on the 15th August his constitution was good, and neither I nor Dr. Lemieux considered him to be in danger. We entertained the brightest hopes of his recovery at that time. I was under the impression as well as Dr. Lemieux, that the patient was under the charge of Dr. Douglas in common with the other patients. I was surprised to see that Dr. Douglas paid so little attention to the patient. He must certainly have known that the case was serious, and though at first the patient was not absolutely in danger, nevertheless his case required skilful treatment; and a conscientious Physician would have devoted to it his best science. I am of opinion that amputation ought to have been performed in September as soon as it was perceived that the patient's health began to suffer from the irritation caused by the pain and by the abundant and constant discharge of matter from the wound.

I say that had amputation then been performed in September, it would have given the patient a last chance of recovery, while omitting it, he could not possibly live.

I am, Sir,

Your obedient servant,

(Signed,)

Dr. J. T. C. BEAUBIEN.

MY DEAR HALL,—Was a consultation of the Visiting Physicians called on Lawson shortly after his admission into the Hospital?

Did you see the case, and what was your opinion of it?

Under whose charge was Lawson after 15th August, and until nearly the middle of September?

Did not Dr. Rowand, about that time, ask you occasionally to see Lawson, saying it was not worth his while to go so far to visit one case?

Yours, very truly,

(Signed,) J. DOUGLAS.

Quebec, November 15th, 1852.

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MY DEAR SIR,—The following are my answers to your questions:  
 1st. In conjunction with Dr. Jackson, I saw Lawson shortly after his admission into Hospital, at Dr. Rowand's request.  
 2nd. I saw the case which I considered a bad one.  
 3rd. Dr. Rowand.  
 4th. Yes.

Yours, truly,

(Signed,) JOHN L. HALL.

Quebec, 16th November, 1852.

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Dr. Rowand never stated to me that he would take charge of Lawson after the commencement of Dr. Douglas' term, but the proposal was made anterior to the commencement of Dr. Douglas' quarter.

(Signed,) CHS. LEMIEUX,  
 House Surgeon.

Marine and Emigrant Hospital,  
 Quebec, 22nd November, 1852.

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*Extract from the Prescription Book of the Marine and Emigrant Hospital.*

Dr. Douglas removed the long splint, on the fourth September, 1851, in Lawson's case and substituted to it, on the same day, the double inclined plane.

(Signed,) CHS. LEMIEUX,  
 House Surgeon.

Marine and Emigrant Hospital,  
 Quebec, 22nd November, 1852.

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It affords me much pleasure to express the very favorable opinion which I entertain of Dr. Rowand's talents and acquirements. I have been well acquainted with him during his residence here, and have always remarked his diligence in the acquisition of professional knowledge. I believe that he is now in every respect prepared to enter upon practice with credit to himself and benefit to his patients and beg to offer my earnest recommendation of his claims for employment whether in a public or private capacity.

(Signed,) JAMES SYME,  
 Professor of Clinical Surgery,  
 in the University of Edinburgh.

Edinburgh, 24th February, 1844.

EDINBURGH UNIVERSITY,  
24th January, 1844.

I have the pleasure of knowing Dr. Rowand—I believe him to be thoroughly well educated and trustworthy practitioner. His education has been most elaborate, and his opportunities of acquiring professional knowledge unusually great.

(Signed,) HENRY SIMPSON,  
Professor of Midwifery.

*Observations on the case of William Lawson.*

The Commissioners have entered upon the consideration of the case of that unfortunate man, William Lawson, with much regret, and feel themselves compelled, after diligent investigation, not to approve of many of the steps taken in the premises, steps, they are constrained to say, that in all probability would not have been taken had a better spirit prevailed among some of the staff of the Hospital. It is quite enough to make a running commentary on the whole matter.

The age and habits of Lawson are not mentioned—rather an important omission in a medical point of view. This man received a gun shot wound in the *middle* of the left thigh, which fractured the bone, but apparently with little comminution, on the night of the 21st of June, 1851, while perpetrating a nefarious act. The next morning he was taken to the Marine and Emigrant Hospital, and fell under the care of Dr. Rowand, the Physician of the quarter; Dr. R. states that he called a consultation, this Dr. Douglas denies; others of the faculty state that it was the fact, whilst others declare they knew nothing about it. However, Dr. R. came to the conclusion, a perfectly correct one, not to perform “primary” amputation, but to test the recuperative powers of the constitution; and this conclusion of Dr. R’s. harmonized with the general practice of the Hospital, which was opposed to primary amputations in serious accidents. Dr. Douglas himself being favorable to that line of treatment, and constantly in the habit of following it and inculcating it upon others. The treatment adopted seems to have been quite judicious up to the 15th of August, when the Dr’s term of attendance for that period expired, and Dr. Douglas assumed the charge of the “Surgical” ward, and asserts that he was told that Lawson was to remain under Dr. R’s. care: a desire of this kind, it appears clearly, was manifested by Dr. R., but he did not in fact continue the attendance, stating that “it was not worth his while to go such a distance to see one patient.” It is mentioned that for a few days no one visited Lawson; not long after, however, Dr. Douglas very properly remarking that the man was not there to be abandoned, prescribed, and removed the long splint, substituted one in the form of one inclined plane, and ordered porter in the place of wine, which had been directed to be taken by Dr. R. After this he appears to have prescribed for this man, as for the other patients, in his “ward” as is proved by reference to the Prescription Book of the Hospital; and still Dr. D. persists in asserting that Lawson was not his patient. Yet he acknowledges to have invited Dr. Fremont, who was not connected with the Hospital, to see him.

Now, this circumstance alone is sufficient to establish one of the two points, either that L. was Dr. D’s. patient, or if not, that he was guilty of a great breach of Medical Etiquette, in calling another Physician to see his colleague’s patient, and one not attached to the Hospital.

Even admitting what Dr. D. pertinaciously insists upon, that L. was *not* his patient, still he cannot but admit that L. was in his ward, and if he really was without attendance, on the score of common humanity alone, but more particularly as the Senior Medical Officer of the Institution, and likewise a paid officer,

as well as for the credit of the Hospital, with whose reputation he was intimately allied, he should have summoned his *confrères*, the *Visiting* Physicians, if not in deference to their opinion, at least, to set himself right in the eyes of every body; the more so, as he was aware that whether recovery or death ensued, the case would come before the penal tribunals of the Country. However this may be, no Physician saw L. but Dr. D., and it has come out in evidence, that the unfortunate man begged of Dr. D. at one time to amputate his limb, but the Dr.'s rejoinder was, that "it would do," from which expression it was natural for L. to infer that he would recover and save his leg; but at a later period, he told the man "the time for operation was past." After being over three months in Dr. D.'s ward, he again fell under the care of Dr. Rowand. Dr. R. says, "he considered amputation at this time an act of cruelty." Now, to say the least, the case was most miserably managed, and while Dr. R. was perfectly justified in giving nature full scope, to try her restorative powers in the first instance, he does not stand justified in not calling all the Physicians of the Hospital together, that some decision might have been arrived at; and while it is very true, that it is not always just or prudent to give an opinion in any serious case without a personal examination of it, the Commissioners are forced to come to the conclusion, that there was still a tolerably fair chance of saving the man's life by the loss of the limb. The symptoms of hectic fever were certainly very prominent, but there was ample cause for all the disturbance, without attributing it to "Tubercular disease." The constant irritation, together with the exhausting suppuration, were quite sufficient to account, with considerable certainty, for all the mischief that was apparent, the whole was entirely symptomatic; the removal of the cause in all human probability, would at once have arrested all the excitement, and even the "severe cough and diarrhœa," if the cough did not result from disease of the lungs, of which the stethoscope would have given satisfactory proof; and the examination after death has shewn that there was little or no lesion of the lungs. Nor must it be forgotten, that L. died 67 days after Dr. R. resumed the charge of the ward. But whilst the Commissioners conceive it to be their duty as medical practitioners of some experience, thus to reflect upon Dr. R. for not giving L. the only chance left him for his life, they are compelled more strongly still to disapprove of Dr. D. not using his reputed determination, when there was not only all reasonable hope of saving the man's life, but when it would appear, it was imperative upon him to have performed "secondary" amputation. Nature had had ample opportunity to try her powers. There was yet much vigor, and the man was desirous of submitting to the loss of his limb to save his life. And while the Commissioners are unwilling to believe the insinuations promulgated, that there was some malignant passion at work, and efforts made to ruin a rival, or injure one at least disliked, the man was allowed to perish; but while this discreditable imputation is repudiated with the utmost indignation by the Commissioners, they are bound in fairness to state, that it is their decided impression, that if a better feeling and more cordiality had existed between Drs. Douglas and Rowand, in all probability William Lawson would this day be alive, at least, so far as regard his injury, or the amputation.

As a surgical matter, this case is full of interest and importance to the Medical Profession, but this is not the place to treat it as such, and the Commissioners, though wishing to be as concise on this subject as possible, deemed themselves called upon to make the above statement, and from the facts above cited, together with those that have been detailed elsewhere, no doubt can longer be entertained of the step that should have been adopted. The only one to prevent such tragical occurrences as the above being repeated, as well as for the establishing concord, unanimity and a proper professional feeling in a situation, where every one is expected most zealously to co-operate with the other, for the honor of the Profession, and for the well being and safety of the unfortunate individuals confided to them as Christian men and Physicians.

When it is recollected that this unfortunate man survived the injury 214 days, the presumption is that the mischief was not so great but as to afford very reasonable hopes of a cure. The first 56 days were most properly devoted to ascertaining what the constitution could effect, but this probationary state was nearly exhausted; and how L. could have remained 91 days under Dr. Douglas' daily inspection without that gentleman deciding upon the adoption of some other steps, is painful to reflect upon. It was during the first part, more particularly, of this long period, that a very fair chance of success might have been anticipated to result from an operation, and even during the third period, the propriety of a resort to the knife seems manifested, seeing that death must have been the *inevitable* consequence if the limb were not removed; it is difficult to be reconciled to the omission of it even at that time, calling to mind the circumstances of his living 67 days after Dr. Rowand took charge of him for the second time. The Commissioners are very far indeed from wishing to cast any improper censure on either of these gentlemen, but they have a solemn duty to acquaint themselves of, and which they are bound to do, with all due caution and circumspection, but still without fear or favor, and in obedience to their instructions and to the dictates of their consciences.

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*Further remarks on this case.*

The evidence adduced by Dr. Rowand, viz: that of Dr. Beaubien, who was at the time of Lawson's sojourn in the Hospital, acting as Apothecary, that of Dr. Lemieux and John Helstrip, the orderly, all go to establish the fact that Dr. Douglas did take charge of the patient, and that he prescribed for him is beyond question, proved by reference to the book of the Hospital. It is useless then for Dr. Douglas to attempt to exonerate himself from any implication in the case; by the rules of the Hospital he could not have refused a bad case, and he often left them to others, on his own term of duty being finished. It is true that he has brought forward the evidence of Drs. Hall and Jackson, to show that no regular consultation was held on the case of Lawson, and it is not unlikely that on this point Dr. Rowand may be in error, for as it appears Drs. Hall and Jackson saw the case at the time, the impression may have been left on his mind that others had done so likewise. The statement concerning the morbid condition of the limb, is different from that given by Dr. D., whose account is borne out by the House Surgeon. It is too late for Dr. Douglas to charge Dr. Rowand with *ignorance of the principles of his profession*, when we recollect that Dr. Douglas took that gentleman into partnership some years ago, and introduced him as a competent Surgeon to the public of Quebec; but Dr. Rowand is fortunate in being able to bring forward the certificates of such celebrated men as Syme and Simpson of Edinburgh, to prove his qualifications, and may with confidence refer to his standing in the profession of Quebec, to repel the malicious, indeed it may be said, libellous attack on his professional reputation, contained in Dr. Douglas' remarks on his account of Lawson's case. In these remarks Dr. Douglas has unfortunately again betrayed the unhappy spirit which seems to pervade all his actions when coming in contact with his colleagues; he not only displays a want of respect for their attainments, but a total disregard for the ordinary courtesy of professional life, and complete indifference for their feelings, and it can well be conceived that his every-day behaviour is, when he can pen such language in the calm retirements of his study, and when he is well aware it must come before the Profession and before the public. But he has been rather forgetful of recent events, in charging Dr. Rowand with ignorance of the "principles of Surgery," for it is in evidence before the Commission, that Dr. Rowand has charged Dr. Douglas with having set about commencing an operation of a very

serious nature, (castration) without calling a consultation, and that at his, Dr. Rowand's remonstrance, the operation was stopped, and the man cured by other means. This surely displayed a greater amount of knowledge than is usually possessed by "a student of three months standing!" Did it not display, on that point at least, a greater amount of practical knowledge, than was at that time possessed by Dr. Douglas himself who has always stood sentry over the errors, real or supposed, of his colleagues, and dragged them before the gaze of the Profession and the officers and inmates of the Hospital, to their serious injury and annoyance.

The Commissioners of Enquiry, after a careful examination of all the evidence before them, adopt the conclusions drawn by Dr. Rowand, except the fourth one, which refers to the consultation said to have been held, of which Dr. Rowand has not furnished satisfactory evidence; under these circumstances they must strongly condemn the means taken by Dr. Douglas to get out of a dilemma, which would have placed his name in a disadvantageous light before the public, had he not taken the steps he did to screen himself, and heap obloquy upon a brother practitioner and one of his own colleagues, and which measures did for a time prove successful, and served the end for which they were adopted, but which now that the real facts of the case have been inquired into, contribute largely to his own discredit and discomfiture.

#### *The case of Monsieur le Docteur Chaperon.*

It would appear that for some months previous to the outbreak of cholera last summer, in Quebec, a Dr. Chaperon had been eulogising some peculiar treatment of his own for which he claimed a superiority over the remedies usually employed by the profession. He was invited by Dr. Douglas to test his remedy in the Marine Hospital. Dr. Douglas having obtained the necessary permission from Dr. James Sewell, the recently appointed Chairman of the Hospital, and with the concurrence of his colleagues Drs. Hall and Robitaille, placed some wards at the disposal of Dr. Chaperon. Every facility was given him to carry out his plan of treatment, and after some time it was ascertained that the average of success was less by Dr. Chaperon's plan than by that previously employed.

Dr. Douglas now convened the staff of the Hospital, and wished them to join him in some plan to get rid of Dr. Chaperon, but one of those present, Dr. Rowand very properly remarked, that as Dr. Douglas had not consulted the staff of the Hospital for Dr. Chaperon's introduction, he might take upon himself the responsibility of his dismissal. It was ultimately agreed that Dr. Chaperon should be written to, to relinquish his attendance; and after some delay, he did so on the 25th of October.

As the Commissioners cannot conceive what right Dr. Douglas and his colleagues had to place sixty individuals entrusted to their charge, in the hands of a stranger to the Hospital, to be made the subjects of experiment on a grand scale, in order to test what Dr. Douglas himself style a "*nostrum*," they cannot conceive with what justice Dr. Chaperon can complain of the abrupt termination put to his experiments, seeing that not one of his promises had been fulfilled, as will be hereafter shewn.

That all parties consenting to Dr. Chaperon's admission are to blame for making a charitable Institution, supported by public funds, a scene for testing the value of a *nostrum* there can be little doubt, and the Commissioners cannot but express their astonishment that gentlemen of education, entrusted with the care of ignorant patients who had no idea that they would be made the subjects of experiment, would have so far forgotten their duty to these unfortunate

creatures, as to allow sixty of them, afflicted with a dreadful disease, to be treated with a remedy with whose properties, chemical or medicinal they were at the time ignorant.

If every one pretending to have an infallible cure for certain diseases, should obtain admission to our public Institutions, where would the mischief end?

If such remedies are to be tested, let them be tried on persons who give their consent to their being employed in their own cases, not upon the poor, ignorant and afflicted inmates of an Hospital, who are under the impression that in resorting to it for relief, they are sure to be treated with the greatest skill, care and judgment.

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Patrick Neville, Steward, Marine and Emigrant Hospital, appears—he states :—

That he is at present the Steward of the Marine and Emigrant Hospital.

That on the introduction of Dr. Chaperon into the Hospital for curing cholera, he Patrick Neville, observed to him, Dr. Chaperon, that he was prepared to place at all times, at his disposal, anything which might facilitate the objects he had in view.

(Signed,) P. NEVILLE.

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### *Suggestions for the Future Management of the Marine and Emigrant Hospital.*

The Commissioners of Enquiry, before offering any suggestions for the future management of the Hospital, would beg respectfully to direct the attention of His Excellency to the present anomalous state of its constitution. Five Commissioners are appointed by Government, and, like the former Commission the present has only one medical member. It does not appear what peculiar fitness these lay gentlemen, no doubt in all other points most respectable, possess for the performance of their functions for which it is but reasonable to suppose, they had not prepared themselves until appointed. These gentlemen are not paid, and residing at a great distance from the Hospital, and having their own affairs to attend to, may become indifferent to the management of the Institution, or, as on the former occasion, delegate to others their powers. The Chairman is in every respect qualified for his post, but two of the Commissioners of Enquiry being themselves medical men, know well what demands are made upon the time of their brother practitioners, and are well satisfied that even the zealous and active gentleman at present at the head of the establishment, will acquire, and ought to be furnished with competent and responsible colleagues.

There are six Visiting Physicians, who are declared by the Government to be on the same equality, to have control over the surgical and medical cases in equal degree, to have no power of interference the one with the other, and though two of them have been in office since the opening of the present Institution, there is no other distinction between them and their recently appointed colleagues, than the very invidious one of the former being remunerated for their services while the latter have to perform the same duty for nothing. It is true that amongst themselves the Visiting Physicians are in the habit of styling Dr. Douglas the "Senior Physician," but to this distinction he is not strictly entitled; it does not confer any extra privileges, nor does it involve the performance of any extra or special duties, or impose upon that gentleman any responsibility not shared by his colleagues; yet the Commissioners call Dr. Painchaud the Senior Physician, because he is considered the *doyen* or oldest member of the Staff.

In this apparently simple matter, want of uniformity is perceptible.



The Visiting Physicians being irresponsible to the Commissioners, and only accountable for their conduct to the Government, has a tendency to lead to abuses which are difficult of remedy, for the necessary steps for redress are circuitous and tedious, and thus, irregularities or derelictions of duty, which when detected, could be checked at once, may become established before it is thought necessary to apply to Government for redress or correction. Again, the Physicians seeing gentlemen not previously acquainted with Hospital discipline, put in charge of a large establishment peculiar in its economy, being supported from two different sources, and accommodating two very opposite classes of inmates, are very apt to disregard, or at least, not pay the necessary respect to orders and suggestions coming from persons they suppose incapable of giving advice on such subjects.

In most other Hospitals, even where the Medical Staff is under the control of Trustees or Managers, the selection of the House Surgeon and the Apothecary is left to their judgment, or what is tantamount to the same thing, the examination of the candidates is left to them, and their recommendation of the best qualified candidate is followed by his selection to the Office. But in the present instance the House Surgeon is appointed by the Executive, without reference to the Commissioners or the Visiting Physicians (see letter of Mr. Casault in Appendix) and consequently it is fair to presume, that he who can command the greatest amount of political influence may be appointed, to the prejudice of him who is best qualified. This Officer not being subject to removal either by the Visiting Physicians or the Commissioners, is to a certain extent independent of them, and the Executive must be applied to for his removal for improper conduct or neglect of duty. It can well be supposed that many acts even deserving of censure may be overlooked in preference to appealing to so distant and formal a tribunal.

The Apothecary is appointed by the Commissioners after due advertisement of the appointment being vacant, but it does not appear that the Visiting Physicians are even consulted in the matter. Yet this Officer is entrusted with the compounding of the prescriptions and the superintendence of their administration; and although he may be incapable of the first part of his duty and indifferent about the second, the Visiting Physicians have really no control over him. Nor do the Commissioners think it even necessary in all cases to consult the Medical Staff about the substitution of one person for another in the higher post of House Surgeon, as they themselves admit in reference to the appointment of Dr. Godbout during the illness of Dr. Lemieux.

The appointment of the Steward and Matron also rests in the hands of the Executive; and the same objection applies with equal force to this mode of appointment, as to that of the House Surgeon.

Misconduct must arrive at a high pitch, before even the most querulous will think fit to bring the matter before Government.

It must be at once evident that it is difficult to conduct an establishment of the kind with order and regularity in which the different Officers are so independent of each other, and little astonishment need be expressed that in the Marine Hospital some abuses have crept in, which the public prints acted upon by secret maligners have so much exaggerated and distorted.

The Visiting Physicians, and not the Commissioners, are competent to judge of the ability of the Apothecary, Steward, &c.; and coming in contact with them nearly daily, affords them opportunities which the Commissioners cannot possess of knowing how to judge of them. They are the servants of the Visiting Physicians, who have a deep personal and professional interest in the due performance of their duties, hence they should have the sole control.

But in other respects this Institution is peculiar; two Physicians are paid, four others not paid. The House Surgeon (inferior in rank and responsibilities to the paid Physicians) has a salary greater than they receive. He gets per annum, £125; £30 for alimentary allowance, rooms, with coals and candles.

The two Senior Physicians get £100 a year. The Steward, lower again than the House Surgeon, gets a salary almost equal to him for duties certainly less responsible and arduous, whilst the Matron, whose office should be considered nearly on an equal footing with that of the Steward, is paid very little more than the common nurses, and not more than is paid to a good plain Cook in a private family.

The Apothecary gets no board in the Hospital, but is paid £30 as alimentary allowance, a sum insufficient to procure board, except he resorts to places outside the Hospital, and not enough to pay for cooking, attendance, &c., if he takes his meals within the Hospital Walls. Moreover, the Secretary and Treasurer is not paid a regular salary for his services, but is allowed *two and a half per cent on the general outlay*.

By this mode of payment, it is manifest that an inducement is held out to the Treasurer to be lax in the supervision of the accounts, and an officer whose emoluments are thus derived, cannot be expected to exercise the same vigilant control over the expenditure as one whose salary is fixed and paid from other sources.

In these remarks, it is not intended to imply that the present Treasurer has been thus indifferent to the interests of the Hospital. His respectable position and character for integrity, are sufficient guarantees for the faithful and judicious performance of his duties; but a less scrupulous man might be appointed, and as the Institution may not always have so honest and conscientious a Treasurer, it is not imprudent to provide against an abuse so likely to occur and so difficult to detect.

The Commissioners of Enquiry have now pointed out for Your Excellency's information, the more prominent features in the Constitution of the Hospital, which they believe mar its working and interfere with its successful management, and as they are firmly convinced that a perpetuation of the same must inevitably lead to similar consequences, they would humbly suggest that the following alterations in the management of the Hospital be adopted, if it be, as they are well aware it is, the wish of the Government that order and regularity should prevail in its economy, and that it should again occupy a respectable position in public estimation and command the confidence of the community.

The Commissioners of Enquiry would strongly but respectfully recommend that the following organisation be adopted. They have carefully reflected upon the measures they now propose, and are convinced that a considerable change in the Constitution is absolutely required for the proper working of the Institution.

They beg leave therefore to propose—

1<sup>o</sup>. That the management of the Hospital shall henceforth be under the control of three "*Trustees*," who are to be designated by that term.

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### *Of the Trustees.*

The Chairman of the Trustees should be a Medical Practitioner; one, the Chief Emigrant Agent; and the other, the President of the Board of Trade for the time being.

These Trustees should each be paid the sum of fifty pounds currency yearly. They should hold a meeting in the Board room of the Hospital, at a regularly appointed hour, once every week both during summer and winter. When prevented from attendance, payment for the period of their absence to be deducted from their yearly allowance, and no cause, save illness, to be considered as satisfactory excuse for absence, in arrest of the aforesaid deduction from the yearly salary. They should sign their names in a book to be kept for that purpose, as well as the hour of their

arrival at the Hospital, on those days upon which a Board is held. It should be their duty to superintend the whole management of the Hospital, to attend to complaints of improper conduct, to correct abuses, and, when such occur, to point out to the members of the Medical Faculty, through the Chairman of that body, any conduct requiring explanation or correction on the part of any one of its members. They should require from all parties making serious charges against or affecting any of the officers of the Institution, that such charges be put *in writing*, and transmitted to the Chairman of the Board of Trustees; and they should also observe the same rule themselves when addressing the medical staff on any point connected with the conduct or duty of that body, or of the House Surgeon or Apothecary.

They should have the power of appointing the Steward, Matron, Orderlies, and male and female Nurses. They should also appoint the House Surgeon and the Apothecary; and, in the event of unusual sickness or during the prevalence of epidemics, if extra Physicians should be required, they should have the power of appointing them, on a representation being made to the Trustees by the medical staff that such additional assistance is required. In the appointment of the House Surgeon and the Apothecary, they are to be guided by the recommendation of the medical staff. If, however, any member of the Board of Trustees should be cognizant of any circumstance which would render the appointment of the person recommended by the medical staff injurious to the character or interests of the Hospital, they would withhold their sanction to his appointment until such matter be investigated by the medical staff, and they should explain in writing to that body their objection to the candidate, and state in unequivocal terms their reason for delaying their sanction. They should likewise see that the building and out offices, sheds, &c., be kept in a proper condition; they should also inspect the accounts of the Secretary and Treasurer, and no money should be drawn from the Bank without having the cheque signed by the Chairman of the Board of Trustees, as well as by the Secretary and Treasurer.

In the absence of the Chairman, the cheque is to be signed by one of the other Trustees in his stead. They should transmit to the Government or to the Sanitary Board, (should one be established,) a yearly Report, to be drawn up by the Secretary, of the condition of the Hospital for the past year, detailing its expenditure, the sources of its income, the number of indoor patients, the number of deaths, the number of capital operations, and the success following them, and also a short account of the prevailing epidemics. In addition to the above mentioned duties, there are many others of minor consequence, which able and practical men must be aware of, but which are too numerous to recount, which of course devolve upon the Trustees; these it will be equally their duty to perform efficiently and conscientiously.

It has been recommended that the lay members should be the Chief Emigration Agent and the President of the Board of Trade. It is well perhaps that the Commissioners should explain their reasons for the selection of these officers. The Hospital is for mariners and emigrants; it is not a general Hospital, and does not admit patients who are residents of Quebec, or the surrounding District, and its benefits being confined to the two classes of patients above mentioned, it is, in the opinion of the present Commission, more judicious to appoint the Emigrant Agent to look after the interests of the Emigrants, and the President of the Board of Trade to superintend those of the sailors, than to select persons who are not connected either directly or indirectly with the one class or the other, and concerning whom they may be equally indifferent. But as these gentlemen may not wish to act, or as the Government may not feel disposed to place the management of the Hospital in the hands of two officers, whom it would be difficult to remove, for the reasons advanced in favor of their being appointed, viz. ; their close connexion with the commerce and emigration of the country, the Commission would respectfully recommend that gentlemen be selected who may possess some other qualification for the office than that of *residing in proximity to the Hospital*, a reason given to the Commission for the appointment of one of the late managers.

One of the members of the present Commission having had personal knowledge of the exertions and zeal displayed for the care of the sick emigrants by the present Chief Emigrant Agent during the dreadful visitation of typhus fever in 1847, having visited Grosse Isle, in his capacity of Commissioner, in company with that gentleman, has strongly recommended his appointment to his colleagues, and they now humbly suggest that that gentleman's services be solicited for the Hospital as Trustee.

It also affords the Commissioners pleasure to express their humble opinion, that a better selection for Medical Chairman could not have been made than that of the present highly respectable practitioner whom the Government have so wisely placed in that position.

### *The Secretary and Treasurer.*

20. The Secretary and Treasurer must be a Medical man appointed by Government, but subject to removal for inefficiency or bad conduct, at the suggestion or prayer of the Trustees. His salary should be £100 currency *per annum*, at least. He should be obliged to visit the Hospital not less frequently than twice a week, besides having the power of doing so at any other time and at all hours. At his ordinary visits, he shall enquire and examine into the condition of the different wards, and make an entry in his minute book of the condition of the wards, their state of cleanliness, ventilation, the conduct of the officers, &c.

This Report is to be laid before the Board of Trustees at the weekly meeting. He should act as Secretary to the Trustees, take notes of their proceedings and enter them in the minute book, conduct the correspondence of the Trustees, give notice of extraordinary meetings, and summon the Trustees on any emergency not admitting delay until the usual period of the weekly meeting.

He is to prepare a quarterly Report of the Hospital to be laid before the Trustees, which is to include the morbidity and mortality of the Hospital, its state of discipline, its requirements, its expenses, (in detail,) and its actual state of funds. He shall examine and check the Steward's accounts. He shall visit the dead house occasionally, and take care that decency and order are observed in preparing the bodies for interment. He shall sign all the cheques along with the Chairman, and produce, at each quarterly meeting, vouchers for the disbursements he may have made on account of the Hospital. All requisitions from the Medical Staff are to be addressed to him and by him laid before the Trustees. Once appointed, he must consider himself as under the control of the Trustees. He is not on any account to undertake the duties of any of the Medical Officers of the Institution, or to interfere in the least, either actively or otherwise, with the medical management of the patients, nor is he to express, either in their presence or in that of the other officers or servants of the establishment, any opinion concerning the nature or treatment of the diseases; but should he observe anything which, in his opinion as a medical man, would require correction or interference, he is to make known the same to the Chairman of the Trustees at his earliest convenience.

It is not intended to prevent the Secretary from offering his opinion when requested to do so, by one of the Visiting Physicians, about any case in the Hospital, or any plan of treatment under discussion, and if any sudden emergency should occur whilst he is on his duty in the Hospital, or if any patients who have received accidents should be admitted, he may if requested to do so, assist with his advice the House Surgeon or Apothecary in the treatment of the case until the Visiting Physician shall arrive, after which he is not further to interfere in the management of the case.

As complaints have, from time to time, been made of the quality of the provisions and of the manner in which they are cooked and served up, the Secretary

will be expected to make his visits frequently at the meal times of the patients, and satisfy himself that the diet is good, measured out according to the Hospital scale and properly cooked. He will enter in his weekly reports the result of these examinations and take care to bring under the notice of the Trustees any circumstances requiring their interference.

### *The Visiting Physicians.*

There should be four Visiting Physicians who ought to be Graduates of some University or College in the British Dominions, Licentiates or Members of a College of Physicians or Surgeons of Great Britain or Ireland or other in the British Dominions, of *at least three years standing*, and they should moreover be in possession of the License to practise granted by this Province. They should receive a yearly salary of £100 currency.

The Commissioners would beg to explain in this place their reasons for recommending this allowance :—

1st. It is in evidence that some of the most experienced practitioners in Quebec were offered the situation of Visiting Physician and refused their services, on the grounds that they were not to receive any remuneration.

2nd. It is also in evidence that Dr. Blanchet, (whom even Dr. Douglas did not object to) Dr. Sewell, the present Chairman and Dr. Nault, a respectable practitioner, allege as a reason for resigning, the want of emolument.

3rd. Dr. Douglas and other members of the Medical Staff have declared, that the fact of some of them being paid, and others not paid has led to an invidious distinction among them, and has also been the cause of many of the disturbances that have constituted one of the subjects of the present investigation.

4th. It has been represented that the present Visiting Physicians are not likely to continue their services unless paid. Now, if they resign in a body, the Hospital will have to go through a probationary period of disorder and want of discipline, before any staff of in-coming Physicians shall have had time to become familiar with Hospital management and Hospital routine, and the Institution losing the advantage it now possesses in having Medical attendants familiar with its working, might be thrown back into the very condition from which it is the object of the Executive at this moment to rescue it.

5th. Unlike many other Hospitals, the one under consideration does not hold out the prospect of *indirect* reward to the Visiting Physicians. It is frequented by persons who do not become residents of Quebec, and who having no friends in that City, do not assist in establishing the fame of the practitioner who may have most skilfully cured a serious malady, or performed a most difficult operation; and as few students frequent the Hospital, the judgment of the Physicians, and the skill of the Surgeon, are not through them made known in the community. Hence the attendant in this Hospital has few of the incentives to exertion that stimulate the Physicians of other Hospitals, and not deriving any advantage *indirectly* from his post, he is apt to become indifferent in the manner of performing some of his duties, and irregular in the periods of his attendance, for though it has already been explained that some allowance is to be made for want of punctuality much inconvenience necessarily attends a too great disregard for it. It is only necessary to point to the manner in which the Hospital Records have been kept to illustrate the species of neglect alluded to.

6th. The salary of £100 a year would secure for the Hospital the services of the best talent and skill in Quebec, and thus the paternal solicitude evinced by the Government would be satisfied, and the community cease to regard the Institution with the feelings of rancour so frequently displayed and so often expressed in the public prints; although it must be acknowledged, however, that many of

the evil reports promulgated owed their origin to certain parties who had private ends and grudges to satisfy.

7th. The Visiting Physicians should have the control in all medical matters of the Hospital, and they should be the body before whom candidates for the offices of House Surgeon and Apothecary, should lay the Testimonials of their qualifications. It should be the duty of the Visiting Physicians to enquire carefully into the professional attainments and moral characters of the applicants, and recommend for election to the Trustees, and the approval of Government, the best qualified person from amongst the Candidates. They should give notice some three months previous to a vacancy occurring that the situation of House Surgeon, or Apothecary is about to be vacant, and they should solicit candidates to come forward. This announcement should not be confined to the newspapers of Quebec, but should be published in the principal papers throughout this Province. When necessary to dispense with the services of a House Surgeon or Apothecary, they should give three months notice of their intention to do so, to the party, and should require a similar notice from them when it is the intention of either to leave. All complaints against the House Surgeon or Apothecary should be investigated by the Visiting Physicians and their decision reported to the Trustees, who would lay the matter before the Executive Government, if of a nature sufficiently serious to demand dismissal.

The Visiting Physicians should not, in any case requiring operations of importance, proceed to its performance without a full consultation having been called, and a decision arrived at by the majority of the staff should be considered binding upon the Surgeon proposing to operate; in the event, however, of the decision being in favor of the performance of an operation, the Surgeon under whose care the patient may be placed may refuse to operate, if he be strongly convinced of the impropriety of the act, but in that case he should not refuse to allow the patient to place himself under the care of one of the other Surgeons favorable to the operation, provided the patient should so request. A Visiting Physician should call into consultation his colleague on duty at the same time, to consult upon all serious or interesting medical cases in his ward. The Visiting Physicians may be permitted to divide the practise of the Hospital into Surgical and Medical cases, as they may agree amongst themselves, but those selecting Surgery should not refuse attendance upon medical cases in times of pestilence, and when the wards allotted to the Physicians are filled, they should not refuse admission into the surgical wards, of medical cases, or object to take charge of them. The Visiting Physicians selecting medicine, in the division of labor, should assist at all operations, and render their aid whenever the Surgeons may require it.

The Medical Staff should be appointed to office by the Executive, but once they enter on their duty, they should consider themselves under the control of the Trustees and render them every assistance, in the management of the Institution.

The Visiting Physicians should enter their names daily, and the hours of their arrival at the Hospital, in a book to be kept for that purpose, to be called "The Visiting Book."

In the event of their not being able to attend punctually at the appointed hour for visiting the Hospital, they should name the cause of the irregularity, which may be urgent professional avocations and important private business, &c. This book should be examined by the Trustees at stated periods, and should any of the Visiting Physicians exhibit a marked disregard for punctuality, he should be admonished by the Chairman, that such irregularity is calculated to cause confusion in the routine of the Hospital, and give rise to additional trouble, and will not be tolerated.

The Visiting Physicians should consider the hour appointed for a consultation as the most important engagement for that day, and nothing short of the most urgent demand on their time and attention should prevent them keeping it.

### *The House Surgeon and Apothecary.*

This Officer should be appointed by the Executive, after the recommendation of the Trustees and the Visiting Physicians. If the Hospital is to prosper, care must be taken that efficient Officers be appointed, and if the professional attainments and moral character of the House Surgeon be not thoroughly investigated by the Medical Staff and the Trustees, that Officer may again be in antagonism with his superiors and these latter excuse themselves at the expense of the Government for the appointment of incapable Officers. In the opinion of the present commission it would be more judicious to make the Medical Staff responsible for their own Officers, and they should have no voice in the election of any others.

The rules for the guidance of the House Surgeon and Apothecary are very amply drawn up, and the Commissioners of Enquiry have nothing to add to them.

The Commissioners of Enquiry are not prepared to recommend any deduction from, or increase to, the salary of these Officers. They believe that as it at present stands, viz; salary £125, alimentary allowance £30, with lodgings, fuel, &c., that most efficient young Surgeons can be procured. It must be recollected that this Institution is sought by the zealous young Surgeon as a means of improving himself by experience, in practical surgery, quite as often as it is solicited as a source of emolument, and that in many Hospitals the salary is not as great as it is in the Marine and Emigrant Hospital. The Commissioners would suggest that both the House Surgeon and Apothecary be furnished with board at the expense of the Hospital, in place of an alimentary allowance, an arrangement which would prevent for the future such frivolous charges being made as some of those brought against the present House Surgeon, such as conniving at his servants having stolen from the Hospital provisions, a few potatoes and onions.

The apartments of these Officers should be attended to, and kept in order by the servants of the Hospital.

The Steward should be appointed by the Trustees. His salary should be £75 per annum, with board, (instead of the present alimentary allowance of £30 per annum) lodging, coals and candles.

His duties being fully described in the rules of the Hospital, need not be alluded to further.

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### *The Matron.*

The Commissioners are of opinion that this Office has never been considered by the authorities of the Hospital as important as it really is, and involving as much responsibility as it ought to do. They would respectfully remark that a person entrusted with a supervision of a number of servants in a large public charity, having the care of linen and other matters, should receive a salary much higher than that of an ordinary servant; yet in the present instance the allowance to the Matron is only £18 currency, per annum. The Commissioners would beg to suggest that the Matron should thenceforth receive a salary of £40, with board and lodging at the expense of the Hospital, the same as the Steward.

The Commissioners need hardly point out that many abuses likely to occur in such a large Institution, will be avoided by boarding the different officers at its expense. Though they have every confidence in the honesty of the present Steward and Matron, speculation may be practised by their successors, and it may be extremely difficult to prove the offenders guilty. All inducements to pilfer from the provisions of the Hospital, will be prevented by the plan now humbly recommended.

The Commissioners would suggest that after the resignation or removal of the present Steward and Matron, these officers should not be man and wife, unless some very special advantage to the Hospital is thereby to be obtained, for these officers should serve as a check upon each other, a protection against abuses, lost by the appointment of a married couple.

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*The Nurses and other Servants.*

The Nurses (male and female) should be hired by the Trustees, but if found incompetent by the Medical Staff for the performance of their important and arduous duties they should be dismissed. Their wages will of course vary, and its amount should be regulated by the Trustees. A servant who has been once dismissed for bad conduct, should on no account be again employed, unless there were the very best reasons for thinking that he was truly repentant, and would not offend again,—and they should be made to understand that they are to obey the lawful commands of the House Surgeon, Apothecary, Steward and Matron, as implicitly as if the servants of these several parties.

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*The Medical Records of the Marine and Emigrant Hospital.*

In the commencement of this Report it was stated that much irregularity arose from the want of a good code of rules, and from neglect of enforcing those which already existed. A striking instance of the truth of this statement is furnished in the careless, imperfect and slovenly manner in which the Hospital Records have been kept. The House Surgeons are not to blame so much for this neglect of duty, as the Visiting Physicians. The House Surgeon is handsomely paid for his services, and notwithstanding that occasionally his duties may be onerous, yet the Commissioners are satisfied that even during the most busy period of the year, he could have entered in detail in the Case Books, all cases of an interesting or extraordinary nature. It was the duty of the Visiting Physicians to direct the House Surgeon to note such cases, and moreover they ought to have assisted him in his labor, so as to transmit to their successors the medical history of the Institution, to have placed before the students the results of the practice of the Hospital, which would have served as models to guide them entering practice themselves, and serve as guides in the practice of *case-taking*, a most important department of Clinical Institutions. In order to illustrate this branch of their enquiry, it may be useful to quote from the regulations the rules defining the duties of the House Surgeon in these matters, and from the examination made of the books laid before the Commission, it will be observed how the rules were neglected.

The Table of operations hereto appended gives the number and variety of the operations performed during the last seven years. Contrary to what the profession has been led to believe, these have neither been numerous nor very important; very few of them have even been capital operations. The cases present the common run of surgical practice, and fail completely in upholding the character which the establishment was said to possess above all others in the Province, as a Surgical Hospital; it is in fact more useful as a Medical than a Surgical Hospital, and requires that the Medical attendants be equally able as Physicians and Surgeons.

“He shall enter in detail in the *Case Book* all cases of an interesting or extraordinary nature, giving as complete a history of the disease from the commencement as can be obtained, with the treatment in Hospital and the result; in every instance making the record as complete as possible.”—*By-law 26.*—(For the guidance of the House Surgeon.)



“ They will take care that the description of the appearances after death be recorded in the Medical Register of Cases, as a conclusion to the individual case.”—*By-law 2.*—(For the guidance of the Visiting Physicians.)

The above By-laws clearly provide for the establishment and maintenance of the book which should contain an accurate detail of the history, symptoms, treatment and results of treatment of every case of disease “ of an interesting or extraordinary nature,” admitted into the Hospital; and to which should be added, a detailed statement of appearances revealed by *post mortem* examination, whenever any such case terminated fatally, and it were possible to obtain such examination. A book of this nature, as a work of reference and as an Exhibit of the results of treatment in particular diseases, could not but be of immense value to the Medical Staff of the Hospital, and by a periodical publication of a summary of its contents, of no less importance to the profession generally. Instead, however, of strictly observing the requirement of the By-laws, by keeping *one complete Register of cases*, three separate and *very imperfect* books have been maintained by the Hospital Surgeon and Staff of Visiting Physicians:—1st. “Case Book of the Marine Hospital.” 2nd “Post Mortem Book” 3rd “List of operations.” The incompleteness of the Case Book may be readily appreciated by the mere mention of the fact, that it contains the records of *nineteen cases only, all of which were entered during the year 1848.* But *five* out of the nineteen have the name of the disease affixed to them, and the remainder are so meagre in details, that the nature of the malady in many cases must be exceedingly problematical to the reader. The numerous glaring errors orthographical as well as grammatical, are disgraceful on the pages of a *Medical “Case Book.”* Two of the cases mentioned in this book terminated fatally. An autopsy was held on *one*, and the particulars inserted in the book kept for that purpose. The “Post Mortem Book” contains the details of *fourteen* cadaveric examinations during the year 1848, of *seven* made during the year 1851, and of *eight* during the year 1852:—*twenty-nine* in all. During the years 1849 and 1850 either there must have been no autopsies made, or the House Surgeon must have neglected to enter them in detail in the Book “and the Visiting Physicians must have omitted to take care that the description of the appearances after death were recorded.” The comparative number of post mortems is exceedingly small during the years 1851 and 1852. According to the Hospital Returns there occurred 265 deaths, while as mentioned above, only *fifteen* autopsies were made during the same period. As the cases stand in this book, they are practically of little or no importance, for with the exception of two, there is no accompanying history of the disease and its treatment.

The following is a Table of the “List of operations.”

Name of Patient.	Date of operation.	Name of operation.	Name of Operator.	Result.	Mode of operation.
	1843.				
Amable Bernier .....	March 27	Amputation of right leg .....	Not given.	Not given.	} Not given.
Edward Bell .....	March 29	Removal of left Metatarsus ...	Not given.	Not given.	
James McNider .....	March 21	Dislocation into the Axilla ...	Not given.	Reduced.	
George M. Night .....	May 2	Amputation of the Thumb ...	Dr. Douglas.	Not given.	
James McNeil .....	May 8	Dislocation into the Axilla ...	Not given.	Reduced.	
James Thompson ..	May 15	Amputation of toe on right foot	Not given.		
John McDonald .....	May 19	Hydrocele of the Cord .....	Not given.		
Amable Bernier .....	May 18	Amputation of Metatarsal Bones of left foot .....	Not given.	Not given.	
Wm. Woodhouse.....	June 8	Amputation of phalanges of foot .....	Not given.		
George Green .....	June	Fistula in ano ..	Not given.		

## List of Operations.—(Continued.)

Name of Patient.	Date of operation.	Name of operation.	Name of Operator.	Result.	Mode of operation.			
1843.								
Samuel Sivan .....	June 30	Removal of 2 tumours .....						
James Ross .....	July 18	Amputation of great toe .....						
James Fitzpatrick ...	July 27	Strabismus of right eye.....						
Mich. Ware .....	Aug. 5	Hydrocele .....						
Louis Boutin .....	Aug. 22	Dislocation of Tendō Achilles.						
Charles Brown .....	Aug. 25	Removal of Anal Excrecence						
Charles Roach .....	Sept. 10	Blind Fistula .....						
Patrick Kelly .....	Oct. 8	Amputation of right leg .....						
James M. Pherson ...	Oct. 16	Amputation of left arm .....						
Chas. Carté .....	Nov. 8	Removal of a Polypus .....						
David Whelan.....	Nov. 9	Ununited fracture of Humerus						
1845.								
Isaïe Tremblay .....	May 18	Amputation of leg.....				} Not given.	} Not given.	} Not given.
Wm. Robert.....	May 24	For Phimosis .....						
Jon Goodhan .....	May 29	Amputation of great toe .....						
Hugh Campbell .....	May 31	Amputation of finger .....						
— Rossiter .....	May 31	Amputation of finger .....						
— Prason .....	Not given.	Amputation of finger .....						
— Daly .....	" "	Amputation of finger .....						
— Rice .....	" "	Amputation of eight toes .....						
— Smith .....	" "	Amputation of great toe .....						
Thos. Robinson .....	" "	Removal of portion of thumb.						
Mary Power .....	Aug. 5	Amputation of great toe .....						
Louisa Tabault .....	Aug. 11	Paracentesis abdominis.....						
Wm. Terry .....	Aug. 22	For Phimosis .....						
Thos. Fox .....	Aug. 27	Amputation of great toe .....						
John Wiltupp .....	Aug. 26	Amputation of toe .....						
James Westland .....	Aug. 27	Amputation of three toes.....						
John Marshall .....	Aug. 27	Amputation of finger .....						
Mich. Winkle .....	Sept. 20	Amputation of finger .....						
Mich. Baudry .....	Sept. 22	Lithotomy .....						
Joseph Lœrie .....	Sept. 23	Removal of cancer on lip.....						
Thos. Cully .....	Sept. 10	Removal of Testicle.....						
Martin Routh .....	Sept. 30	Fistula in ano .....						
Joseph Robins .....	Oct. 9	Hydrocele .....						
Wm. O'cara.....	Oct. 9	Hydrocele .....						
John Ke'te .....	Oct. 9	Fistula in ano .....						
Joseph De-Lain .....	Oct. 7	Amputation of finger .....						
Luke Samson .....	Not given.	Cataract .....						
John Newman.....	" "	Amputation of right leg .....						
— Duffy .....	" "	Strangulated oblique Hernia.						
John Newman.....	" "	Ligature of the femoral artery						
Cath. Kelly .....	" "	Paracentesis abdominis.....						
Peter Taylor .....	" "	Removal of tumour .....						
Peter Hisard .....	" "	Amputation of arm .....						
1846.								
Andrew Hamilton ...	April 4	Amputation of toe.....						
Francis Halliyes .....	April 16	Amputation of arm .....						
John Pleunketh .....	April 26	Amputation of the thigh .....						
Benj. Francis .....	April 27	Amputation below knee .....						
James Dobson .....	April 27	Amputation of three toes .....						
— le .....	April 27	Amputation of fingers of left hand .....						
Fran. Neville .....	May 7	Amputation of fingers and thumb of right hand .....						
Pierre Thibodeau ...	May 7	Removal of cancer of lip.....						
Benj. Francis .....	May 7	Amputation of four toes .....						
— Wicks .....	May 7	Amputation of finger .....						
Isaac Nichols .....	Not given.	Amputation of finger .....						
Napoleón Winter .....	" "	Amputation at the thigh .....						
John Harvey .....	" "	Amputation of great toe .....						
Jos. Manchester .....	" "	Amputation of toe .....						
William Gay .....	" "	Amputation of finger .....						

## List of Operations.—(Continued.)

Naute of Patient.	Date of operation.	Name of operation.	Name of Operator.	Result.	Mode of operation.
1846.					
Thos. Williams .....	Not given.	Amputation of finger .....	} Not given.	}	}
And. Cummins .....	July 9	Amputation of finger .....			
Arthur Donahue .....	July 9	Removal of cancer of lip .....			
Phil. Glisson .....	July 13	Amputation of great toe .....			
Not given .....	July 13	For Phimosiis .....			
Hugh Wilson .....	July 14	Amputation of great toe .....			
Rich. Harris.....	July 27	Amputation of finger .....			
Wm. Delaney .....	No given.	Cataract .....			
Nat. Humphry .....	" "	Removal of Testicle .....			
Stanley Miics .....	" "	Trephining Depressed fracture of skull .....			
Eliz. Roxburgh .....	" "	Amputation of leg .....			
Wm. Taylor .....	" "	Amputation of leg .....			
Wm. Evans.....	" "	Strangulated inguinal hernia..			
Rich. Doy .....	" "	Lithotomy .....			
John Wilson .....	" "	Amputation of finger .....			
Geo. Tooke .....	" "	Extirpation of right eye .....			
John Barrett .....	" "	Amputation of finger .....			
Wm. Giles .....	" "	Amputation of finger .....			
Robert Rogers.....	" "	Amputation of finger .....			
Luke Samson .....	" "	Cataract .....			
1847.					
Martin Joyce .....	Jan'y. 6	Hydrocele of the Cord .....	} Dr. Racey.	} Not given.	}
Wm. Corcoran.....	Jan'y. 21	Abcess near the liver .....			
James Hagan .....	Feb'y. 18	Amput' of 6 first phalanger..			
John Atchison.....	March 26	Fistula in ano .....			
John Crosswhite ..	May 27	Dislocation of head of Femur.			
Thos. Lavicount .....	Oct. 5	Hydrocele .....			
Peter Moran .....	Oct. 6	Fistula in ano .....			
1848.					
Thos. McNamara ...	Feb'y. 3	Amputation of 1st phalanx of toe .....	} Not given.	}	} Not given.
Denis O'Hare .....	Feb'y. 3	Amputation of toe .....			
Adam Belle.....	Feb'y. 4	Amputation of both legs .....			
Antoine Lavoie .....	May 6	Amputation of toes of left foot			
John Screase .....	May 30	Amputation of finger .....			
Edward Curren .....	June 17	Amputation of leg.....			
Geo. DeLaporte .....	Aug. 18	Fistula in ano .....			
Chris Atkin .....	Sept. 12	Fracture of arm.....			
Chs. Benson.....	Sept. 25	Hydrocele .....			
James Burns .....	Oct. 2	Strangulated hernia .....			
James Day .....	Oct. 10	Removal of hemorrhoidal tumours .....			
Chs. Brown .....	Oct. 25	Amputation of finger .....			
Thos. Davidson .....	Oct. 25	Amputation of phalanx .....			
Lawrence Ramsay..	Nov. 14	Fistula in ano .....			
Henry Parry .....	Dec. 5	Removal of tumour .....			
1849.					
James Dunnett .....	May 24	Dislocation into the axilla ..	} Drs. Jackson and Douglas.	} Reduced.	}
John Frampton .....	May 25	Amputation of phalanx .....			
James Leshe .....	May 29	Amputation of two phalanges	} Dr. Hall.	} Not given.	}
John McDonald .....	May 26	Dislocation of one head of Humerus forwards .....			
Pat. O'Malley.....	May 26	Amputation of phalanx .....	} Dr. Jackson.	} Reduced.	}
Alfred Ward .....	June 8	Amputation of phalanx .....			
Cath. Case .....	June 11	Amputation of toe.....	} Dr. Jackson.	} Not given.	}
Mat. Tomlinson .....	Aug. 8	Amputation at the thigh .....			
Maglie Pelletier ..	Nov. 1	Removal of part of lower jaw	} Dr. Douglas.	} Not given.	}
Ban. McKelney .....	Nov. 3	Operation of Tenotomy .....			
1850.					
Oliver Thompson ...	Feb'y. 26	Amputation of leg.....	Dr. Douglas.	Not given.	}

## List of Operations.—(Continued.)

Name of Patient.	Date of operation.	Name of operation.	Name of Operator.	Result.	Mode of operation.
1850.					
Wm Harrison .....	May 29	Amputation of phalanx .....	Dr. Jackson.	} Not given.	}
Oliver Thompson ...	April 2	Amputation of left leg .....	Dr. Hall.		
John Stephenson .....	May 22	Amputation of phalanx .....	Dr. Jackson.		
Bend McKinnish ...	May 27	Amputation of finger .....	Dr. Jackson.		
Cath. Carroll .....	June 4	Artificial pupil .....	Dr. Jackson.		
Mary Hinesey .....	June 7	Amputation of right leg .....	Not given.		
Thomas Rich .....	June 6	Amputation of finger .....	Not given.		
Henry Wagner .....	June 25	Amputation of thumb .....	House Surgeon		
Emma Sylva .....	June 29	Ectropium .....	Dr. Jackson.		
Duncan Taylor .....	July 31	Excision of Penis .....	Dr. Rowand.		
David Spence .....	Sept. 10	Amputation of finger .....	Dr. Jackson.		
John Wyse .....	Oct. 19	Amputation of finger .....	Dr. Hall.		
John Smith .....	Oct. 22	Removal of cancer of lip. ....	Not given.		
Hugh Thompson .....	Oct. 23	Amputation of leg .....	Not given.		
Mich. Matthews .....	Oct. 24	Amputation of the thigh .....	Dr. Douglas.		
Mich Sathry .....	Nov. 12	Removal of part of lower jaw.	Not given.		
1851.					
Margt. Murphy .....	Jan. 21	Excision of left mamma .....	Dr. Rowand	} Reduced.	} Not given.
Pat. McUvpy .....	Jan. 29	Paracentesis abdomen .....	Dr. Douglas.		
Mich Butler .....	June 6	Amputation of right leg .....	Dr. Jackson.		
Pat. Gorman .....	June 6	Dislocation of shoulder .....	Dr. Jackson.		
James Toler .....	June 25	Amputation of finger .....	Dr. Jackson.		
John Rosevert .....	Oct. 2	Amputation of leg .....	Dr. Hall.		
Geo Giles .....	Oct. 2	Amputation of finger .....	Dr. Hall.		
John Ready .....	Oct. 9	Amputation of phalanx .....	Dr. Douglas.		
Frs. Hunter .....	Oct. 9	Incision into Urethra for stric- tures .....	Dr. Douglas.		
1852.					
Wm. Williamson ...	Jan. 21	Amputation of two fingers ...	Dr. Jackson.	} Reduced.	}
David Whelan .....	Jan. 17	Amputation of two phalanges.	Dr. Jackson.		
Robt. Keith .....	May 15	Dislocation of hip joint .....	Dr. Jackson.		
Mich. Daly .....	May 25	Amputation of two phalanges.	Dr. Jackson.		
Denis Syle .....	May 28	Amputation of two phalanges	Dr. Jackson.		
Rich Power .....	June 1	Refracture of mid-joined bones	Dr. Jackson.	} Not given.	}
John Ansley .....	June 17	Amputation of finger .....	Dr. Jackson.		
John Adams .....	June 19	Amputation of two phalanges.	Dr. Jackson.		
Jos. Thornewell .....	June 19	Amputation of two phalanges.	Dr. Jackson.		
Jas. Peacock .....	June 25	Amputation of finger .....	Dr. Jackson.		
John Davis .....	July 15	Removal of 5 encysted tu- mours of eyelid .....	Dr. Rowand		
George Pinshins .....	July 23	Strabismus .....	Dr. Jackson.		

The foregoing table contains the Records of 162 operations performed during the years 1843-45-46-47-48-49-50-51 and 52. Not one entry is made in the "List" for the year 1844. Many cases are recorded with marked brevity, such as: "Amputation of right leg of Patrick Kelly." "The left arm of James McPherson was amputated." "Daly was operated for strangulated Hernia, after three days strangulation." "George Tooke, seaman, from the 'Gentoo' had his right eye extirpated in consequence of Fungus."—"A Polypus removed from Chs. Chartré," &c., &c.

The date of the operation is not given in thirty one cases.

The name of the operator has been omitted sixty-four times, and the name of the patient once.

The result of the operation has been noticed seven times; six out of the seven were reductions of dislocated bones, and the seventh was a record, that the patient "died the same day."

The mode of operation is not mentioned in any one instance.

All that can be learned from the "List of operations" is simply this: one hundred and sixty two operations of various kinds have been performed during the period of nine years.

1851.		1851.	
Diseases usually exhibiting a high or medium rate of mortality:—		Diseases usually exhibiting a low rate of mortality:—	
Fever .....	311	Rheumatismus .....	100
Inflammation of the Lungs.....	55	Gastrodynia .....	1
"    of the Liver .....	5	Febricula .....	51
"    of the Bowels.....	13	Febris Intermit. ....	11
"    of the Heart.....	5	Dyspepsia .....	3
Gastritis .....	2	Diarrhœa .....	37
Dysentery .....	53	Cynanche Tonsillaris.....	1
Variola .....	26	Diseases of the Skin .....	20
Apoplexia .....	1	Rubeola.....	18
Congestion of the Brain.....	3	Epilepsia.....	1
Scorbutus .....	2	Hysteria .....	1
Delirium Tremens.....	3	Neuralgia .....	2
Paralysis.....	4	Insanity .....	1
Nephritis.....	1	Otitis .....	1
Cholera .....	152	Spermatorrhœa .....	1
Dropsy.....	4	Amenorrhœa .....	1
Scrofula.....	3	Pregnancy.....	18
Tympanitis.....	1	Hæmorrhoides .....	1
Phthisis .....	4	Erysipelas.....	5
Cancer Labii.....	1	Subluxatio.....	2
Necrosis .....	2	Contusions.....	74
Hernia.....	4	Caries Maxillæ one .....	1
Gangrena Spontanea.....	1	Periostitis .....	1
Concussion of the Brain.....	2	Catarrhus Vesicæ.....	1
Fractures.....	20	Diseases of the Eyes .....	8
Wounds .....	17	Burns and Scalds.....	6
		Frost Bite .....	3
		Strictures .....	3
		Inflammation of Testicles.....	13
		Syphilis .....	112
		Dislocations .....	2
		Abscesses .....	105
		Ulcers .....	30
	695		635

1852.		1852.	
Diseases usually exhibiting a high or medium rate of mortality:—		Diseases usually exhibiting a low rate of mortality:—	
Fever .....	144	Rheumatismus .....	89
Inflammation of the Lungs.....	62	Febricula .....	62
"    of the Liver .....	5	Feb. Intermittens .....	9
"    of the Bowels.....	9	Diarrhœa.....	8
"    of the Heart.....	2	Cynanche Tonsil .....	5
Phrenitis .....	1	Diseases of the Skin .....	10
Dysentery .....	50	Rubeola .....	7
Variola .....	13	Hysteria .....	1

1852.		1852.	
Diseases usually exhibiting a high or medium rate of mortality:—		Diseases usually exhibiting a low rate of mortality:—	
Scorbutus .....	2	Insanity .....	1
Delirium Tremens .....	1	Mania .....	1
Paralysis .....	2	Otorrhœa .....	1
Cholera .....	121	Ptyalism .....	1
Scrofula .....	3	Hæmorrhoides .....	3
Morbus Coxarius .....	1	Pregnancy .....	27
Phthisis .....	4	Erysipelas .....	5
Wounds .....	27	Pertussis .....	2
Necrosis .....	1	Asthma .....	1
Concussion of Brain .....	2	Catarrhus Vesicæ .....	1
Fractures .....	24	Abscessus .....	76
Dropsy .....	2	Subluxatio .....	2
		Contusions .....	85
		Periostitis .....	1
		Diseases of the Eyes .....	15
		Burns and Scalds .....	10
		Frost Bite .....	9
		Strictures .....	5
		Hydrocele .....	4
		Fist. in ano .....	1
		Diseases of Ankle Joint .....	1
		Inflammation of Testicles .....	10
		Syphilis .....	111
		Dislocations .....	3
		Ulcers .....	34
	476		601

### *Morbidity and Mortality of the Quebec Marine and Emigrant Hospital.*

The Commissioners of Enquiry having fully examined the Return of admissions, discharges and deaths, in the Marine and Emigrant Hospital, for the years 1851 and 1852, were surprised to find so great a ratio of mortality, and in order to ascertain if there were any accidental circumstances occurring in these years to account for the fact, they procured from the House Surgeon the Returns for the last five years. They also procured from the Records of the Montreal General Hospital, the Reports, for the corresponding five years, in order to compare them with these from the Marine and Emigrant Hospital.

They have divided the diseases named in the Return from the Quebec Hospital into two classes, because a great portion of them are rarely *fatal* diseases, which makes the mortality amongst the diseases, exhibiting a higher medium rate of mortality, unusually great.

RETURN of Admissions, Discharges and Deaths in the Marine and Emigrant Hospital for the years 1847, 1848, 1849, 1850 and 1851.

Years.	Remained of previous years.	Admissions.	Total.	Discharges.	Deaths.	Remaining.
1847	24	4973	4997	3697	1227	72
1848	72	1033	1105	1030	57	18
1849	18	1493	1511	1231	263	17
1850	17	1222	1239	1122	67	50
1851	50	1330	1380	1179	162	39

Marine and Emigrant Hospital, }  
Quebec, January 19th, 1853. }

(Signed,)

C. E. LEMIEUX,  
House Surgeon.

From the above table it appears that out of 10,051 cases of all diseases there have been 1776 deaths, or 1 death to 5.51 admissions.

The following is the Return of the Montreal General Hospital for the same years.

Years.	Admissions.	Deaths.
1847	2061	263
1848	792	55
1849	871	79
1850	757	55
1851	947	56
Totals..	5428	508

Giving the average of deaths as 1 to 1060.

This difference is too great not to have attracted the attention of the Commission of Enquiry, for it shows that in a given number of cases amongst the same class of persons labouring precisely under the same forms of disease, the mortality has been twice as great at the Marine Hospital as it has been at the Montreal General Hospital. And if the years when diseases of a particularly fatal character, as typhus and cholera, be compared, we find that the same ratio (in round numbers) is maintained. Thus, in 1847, the year when typhus fever raged, we find that into the Montreal General Hospital 2061 patients were admitted, the majority of whom were afflicted with typhus; the number of deaths amounted to 263, or in the proportion of 1 to 7.30.

During the same year, the number of admissions into the Marine Hospital was 4973, of whom 1227 died, giving a proportion of 1 to 4.05, nearly double that of the Montreal Institution. If we examine the Returns for 1849, the year of cholera, we obtain nearly the same results.

Thus there were admitted into the Marine and Emigrant Hospital in the year 1849, 1493 patients, of whom 263 died, giving a mortality of 1 to 5.500.

During the same year there were admitted into the Montreal General Hospital 871 patients, of whom 79 died, or in the proportion of 1 to 11.

But when compared with the Returns of St. Patrick's Hospital, the difference is still more striking

The number of admissions into the St. Patrick's Hospital from August 16th, 1852, when the Hospital was opened in the present building, to February 1st, 1853, was 331, deaths—18, or in the proportion of 1 to 18.38.

It is true that in the latter Institution there are 20 beds occupied by patients labouring under Ophthalmic diseases, but there are as many or more beds occupied by venereal patients in the Marine Hospital, amongst whom the mortality is equally low; and though so many Emigrants in proportion to accommodation may not have been admitted, amongst whom mortality is always great, yet it is a fact, that many patients resort to this last named Hospital in the last stage of disease that they may die in peace, and make that preparation for death, which distractions of their own homes prevent, and this adds to the list of deaths.

The mortality of the French Hospitals is about the same as that of the Montreal General Hospital, i. e. 1 in 11. 18 for all diseases, medical and surgical. In the Hospital St. Antoine . . . . . which presents the highest rate of mortality, it is 1 to 7. 58, which is much less than that of the Marine Hospital. (a.)

The Commissioners deem this subject of such importance, that they would respectfully recommend that an investigation should be held upon the matter.

The Report shows the mortality is greater than in any Hospital in this Province, and there is no Hospital in the world with whose reports the Commissioners are acquainted, that exhibits so high an average of deaths.

This fact is the more remarkable when we recollect that a large proportion of cases admitted into the Marine and Emigrant Hospital are of a *surgical* nature, for the tables of mortality of the French Hospital show the average of deaths to be 1 to 22. 97, or in round numbers 1 in 20 cases, which, in surgical cases, correspond very nearly with the average mortality of one of the largest General Hospitals in Dublin, where the numbers stand about 1 to 26; the majority of the cases being of a surgical nature

This great mortality (greater than follows some of the most important surgical operations) would no doubt have attracted public attention, long ere this, if the authorities of the Institution had observed the custom of publishing periodical Reports of the Hospital. There must be some reason for this unusual mortality. If it depends upon the unhealthy situation of the Hospital, that cause should be removed by changing the location. If it depends upon the medical treatment of the patients, the matter should be inquired into, and the usual treatment adopted; and this Institution should be compared with that of other establishments. There is too great a difference, and that difference has been too well marked both during seasons of little sickness, and those when epidemics raged, to suppose that some explanation cannot be given for so important an anomaly; and the cause of science, and still more that of humanity, demand that this explanation be furnished.

### *Expenditure and Dietary.*

The Commissioners of Enquiry have examined very closely the accounts of the Hospital, and have not found that its management is conducted upon an unusually expensive scale. Some articles, such as arrowroot, seem to be ordered by the Physicians rather too frequently, and in too large quantities to be consistent with due economy. To many of the patients this article of diet is presented for the first time when in the Hospital; and we know, from our own experience of Hospital management, that many other articles of much less expense would be equally useful to the sick, and more palatable to them. On this and a few other points, the Commissioners would recommend the future managers of the Hospital to consult the Medical Staff, for they have ever found the medical officers of a charitable Institution to accede to all such reasonable requests, provided the request be conveyed to them in terms not offensive or insulting. The Commissioners would also respectfully but earnestly recommend that the strong alcoholic

(a.) See Stewart's "Hospital of Paris," p. 101.



liquors should be used as substitutes for wine in all cases where the *stimulating* property of that beverage is required.

They are, it is needless to point out, much cheaper; a small quantity suffices to produce an effect; they are more suited to the class of patients who frequent the Hospital—sailors, and for the most part Irish emigrants—and are not so likely to be purloined and consumed by the servants of the Institution without detection, as wine; and moreover, other drugs can be conveniently administered along with them.

Of course these remarks do not apply to those cases where wine is administered with other intentions, nor are they to be considered as applying in certain cases in which the patient cannot make use of brandy, whiskey, or rum as stimulants, but they are intended to apply to all cases other than those just now mentioned, and which it is unnecessary to allude to more particularly.

The Commissioners find that the expenses for drugs, &c., are not greater than the requirements of a large Hospital demand.

On comparing the diet scale with that of the Montreal General Hospital, and of St. Patrick's Hospital, Montréal, they find that it is much higher, and they are of opinion that it might be made to correspond with those of the above named Institutions with great advantage, not only as regards the funds of the Hospital, but as regards the welfare of the patients themselves. The Commissioners had ample opportunities, (as before remarked,) of observing that the diet of some patients was excessive, for, in nearly all the wards they visited, they saw portions of the previous repasts reserved for consumption during the intervals between the hours of meals. On nearly every stove were heaped large quantities of potatoes, and other articles were stowed away in different quarters. They were told by the House Surgeon that this quantity of food was what remained after the patients had eaten as much as they could at dinner, and that they were in the daily habit of thus retaining the surplus. Without making any comment upon the impropriety of allowing Hospital patients, even when convalescent, to indulge to the fullest extent of their appetites, they not taking any exercise, it must be evident that patients for whom such a large quantity of victuals is prescribed, make not *three* but *four* or *five* meals daily, and must be in a state of excitement and fever the whole day; for it is perhaps unnecessary to point out, that increase in the rapidity of the circulation ensues, upon the introduction of food into the stomach, and continues during the process of digestion; but, besides being injurious to the patients themselves and destructive to regularity, in one of the most important of Hospital economies—the dietary—it is injurious to the funds of the Hospital. It is a fact well known to those who have had experience in Hospitals, particularly those in this country, that many persons of lazy, indolent habits, or who are unprovided for, make excuses for remaining in Hospital long after they are cured, and they will very reluctantly leave that Institution where the diet list is a very generous one. These persons are in the constant habit either of feigning disease, or of giving exaggerated accounts of those they are really afflicted with, and finding the Hospital a comfortable residence, and its diet good and even more ample than they have been accustomed to, and moreover obtained gratis, they frequently manage to deceive the medical attendant, and eke out a considerable term of residence, to the great prejudice of the Hospital interest, and to the injury of other patients who may be in want of a bed in the Institution. The Commissioners are persuaded that the diet scale of the Marine Hospital is well calculated to foster this abuse, and that it holds out inducements to lazy or indigent patients to prolong their sojourn, and remain a charge on the Institution, after they have perfectly recovered from the illness for which they were admitted. *No inducement should be held out to entice an Hospital patient to remain in the establishment one day after he is fit to be discharged,* and to the class who frequent Hospitals in this country, the *indigent* or the *improvident*, other modes of obtaining a livelihood are to be found out.

That the Commissioners have not found fault without reason with the diet scale of the Marine Hospital, it is only necessary to remark, that it is much higher than the diet scale of the Military Hospitals all over the world; and, admitting that sailors are accustomed to full and good diet, yet as they usually frequent the Hospital for fevers, accidents or syphilis, it is evident that in the majority of instances, the lowest, or at least a middle diet, is most suited to their diseases; and as the emigrants are treated with at least equal success, in the two Montreal Hospitals just named, it does not appear that the scale need be kept up at its present high standard. It may in some cases be necessary to give a fuller diet than the scales of the Montreal Hospitals allow, but the plan of ordering the increased diet, as an *extra*, can be done with the same convenience as at the latter Institutions.

In order to place this matter in a more satisfactory aspect for examination, it is necessary to give the scales of the Military Hospitals, and those of the Montreal General and Quebec Marine Hospitals.

## DIET TABLES.

*Montreal General Hospital Diet Table.*

	FULL.	HALF.	LOW.	MILK.
BREAKFAST.	1 pint Tea and 4 oz. Bread, or, 1 pint Porridge and $\frac{1}{2}$ pint Milk.	1 pint Tea and 4 oz. Bread, or, 1 pint Porridge and $\frac{1}{2}$ pint Milk.	Tea, 2 oz. Bread.	$\frac{1}{2}$ pint Milk, 4 oz. Bread.
DINNER.	1 lb. Meat, 1 lb. Potatoes, 4 oz. Bread, 1 pint Soup.	1 pint Soup, 4 oz. Bread.	1 pint Gruel, 4 oz. Bread.	$\frac{1}{2}$ pint Milk, 4 oz. Bread, 2 oz. Rice.
SUPPER.	1 pint Tea and 4 oz. Bread, or, 1 pint Porridge and $\frac{1}{2}$ pint Milk.	1 pint Tea, 2 oz. Bread, or, 1 pint Porridge and $\frac{1}{2}$ pint Milk.	Tea, 2 oz. Bread.	$\frac{1}{2}$ pint Milk, 4 oz. Bread.

## MILITARY HOSPITAL DIET TABLE.

MEAL.	FULL.	HALF.	LOW.	SPOON.	MILK.
BREAKFAST.	1 pint Tea, 6 oz. Bread,	1 pint Tea, 6 oz. Bread.	1 pint Tea, 4 oz. Bread.	1 pint Tea, 4 oz. Bread.	1 pint Milk, 6 oz. Bread.
DINNER.	12 oz. Meat, 4 oz. Bread, 16 oz. Potatoes.	8 oz. Meat, 4 oz. Bread, 8 oz. Potatoes.	4 oz. Meat, 4 oz. Bread, 3 oz. Potatoes.	Any article at the discretion of the Medical Offi- cer, as Puddings, &c.*	1 pint Milk, 2 oz. Rice, 4 oz. Bread.
SUPPER.	1 pint Tea, 6 oz. Bread.	1 pint Tea, 6 oz. Bread.	1 pint Tea, 4 oz. Bread.	1 pint Tea, 4 oz. Bread.	1 pint Milk, 4 oz. Bread.

\* Puddings to consist of the following ingredients:— 3 oz. Rice or 2 oz. Sago or 3 oz. Bread, 1 oz. Sugar,  $\frac{1}{2}$  pint Milk, 1 Egg, Ginger or Cinnamon, a few grains.

REMARKS.—No extras are to be given on full, half or low diets, except Wine, Porter or Spirits—these to be given when required, in conformity with existing Regulations.

## MARINE AND EMIGRANT HOSPITAL DIET TABLE.

FULL.		HALF.		LOW.		SPOON.		MILK.	
lb.	oz.	lb.	oz.	lb.	oz.	lb.	oz.	lb.	oz.
Beef	1	Meat	$\frac{1}{2}$	Meat	4	Bread	4	Bread	12
Bread	1	Bread	12	Bread	8	Tea	$\frac{1}{4}$	Tea	$\frac{1}{4}$
Potatoes	1 8	Potatoes	1 8	Potatoes	8	Sugar	$1\frac{1}{2}$	Sugar	$\frac{1}{4}$
Barley	$\frac{3}{4}$	Barley	$\frac{3}{4}$	Barley	$\frac{3}{4}$	Oatmeal	2	Milk, from 1 pint to	
Sugar	$\frac{1}{2}$	Sugar	$1\frac{1}{2}$	Tea	$\frac{1}{4}$	Salt	$\frac{1}{2}$	3 pints per day,	
Tea	$\frac{1}{4}$	Salt	$\frac{1}{4}$	Sugar	$1\frac{1}{2}$	Milk	3 gills.	as ordered by	
Salt	$\frac{1}{4}$	Tea	$\frac{1}{4}$	Salt	$\frac{1}{4}$			Physicians.	
Milk	1 gill.	Milk	1 gill.	Milk	1 gill.				

*Short Rules for guidance of Trustees.*

1st. With a view, not only of economising the medicine, but for the object of establishing an approximation to similarity of practice amongst the different Visiting Physicians, it is recommended that they draw up a *formulary* for the Hospital, as is done in most European Hospitals, and that they make their prescriptions as plain and simple as possible.

2nd. As complaints have been made to the Commission, by one of the medical men of the Hospital, that he has felt embarrassed and diffident in performing operations in the Hospital, which he felt confident he could have performed in a satisfactory manner elsewhere, and that this state of feeling has been produced by the presence of persons, who, not being friendly to him, would give an unfavorable account of his manner of operating, the Commissioners would suggest, that the Visiting Physicians should have the power of preventing the visits of all such persons, who, it would appear, frequent the Hospital, not for improvement or to countenance and assist the operator, but for the purpose of embarrassing him, and gaining materials to found malicious charges against both the operator and the Institution, and whose presence, under such circumstances, must likewise be injurious to the unfortunate patient, whose life or limb may be jeopardized by the disconcerted and embarrassed state of the operator. It would be hardly necessary in any other place to put such a rule upon the books, but it seems required at the Marine and Emigrant Hospital, as a safeguard against the intrusion of uninvited visitors and others who may be actuated by selfish or improper motives.

3rd. All articles required by the Visiting Physicians should be asked for in writing, and entered in a book kept for that purpose, to be called the "Requisition Book." This book should be laid by the House Surgeon before the Trustees at their Weekly Meeting.

4th. The Hospital should provide all surgical instruments and apparatus commonly used in hospitals, and the same should be kept in repair at the expense of the institution. On no account should books, instruments or apparatus for the Hospital be purchased from any one connected with it at a former period or at the present moment. The necessity for this rule is obvious.

5th. No officer of the Institution should have any interest direct or indirect with the parties supplying provisions and other articles to the Institution, and such articles as may be required for the edifice itself, such as wood, stone, tin and other articles employed in building and for repairs, should not be purchased under any circumstances from officers of the Hospital. These remarks may appear unnecessary, when we recollect the parties now recommended for

office; but the history of public institutions in Canada and elsewhere, shows that precaution on this subject is not altogether useless, and that establishments commencing under auspices equally favorable have become the prey of interested and sordid functionaries, and as no inconvenience can arise from the rule, its establishment may hereafter serve to prevent abuses.

*The Comptroller of Customs' Evidence.*

As it was stated to the Commission, by a gentleman engaged in one of the Public Departments, that Mr. Bruce, the Comptroller of Customs could probably give some information respecting the effects of sailors dying in the Marine and Emigrant Hospital, he was summoned to appear, and accordingly did appear on the 11th November, 1852, and stated that he had no information whatever to impart. He promised to lay before the Commission the paper bearing upon this matter in his possession, and the next day forwarded the accompanying document, which provides for and regulates the action of the Comptroller in the cases alluded to. He entered into some verbal explanations of the manner in which the effects of deceased sailors are disposed of, but as those are in accordance with the annexed directions, they need not be further described.

OFFICE OF THE COMMITTEE OF PRIVY COUNCIL FOR TRADE,  
WHITEHALL, 8th June, 1852.

SIR,—The Registrar General of Merchant Seamen has transmitted to this Department the letter which you addressed to him, under the date of the 3rd instant, requesting his observations upon a letter (copy of which was sent to him) from the Comptroller of Her Majesty's Customs at Demarara, asking for instructions relative to the property of seamen who die in that Colony.

With reference to which, I am directed by the Lords of the Committee of the Privy Council for Trade, to inform you that the 33rd Section of the Seamen's Fund Winding up Act has directed as follows:—

“ If any such seaman or apprentice as aforesaid, dies abroad, leaving any money or effects, not on board his ship, the Chief Officer of Customs at the place, if in Her Majesty's Dominions, and Her Majesty's Consul or Vice-Consul at or nearest the place, if not in Her Majesty's Dominions, shall claim and take charge of all such money and effects, and shall, if he thinks fit, sell such effects, and shall remit the balance, after deducting expenses, with a full account of such money and effects, to the Board of Trade, or as it directs.”

I am, therefore, to request that you will cause instructions to be given to the Collectors of Customs at the various ports in the Colonies, that they are to receive all monies and effects belonging to each deceased seaman, not on board his ship, and deal with them according to the directions contained in the above Section of the Act.

The amount to be received, is to be remitted in such way as the Commissioners of Her Majesty's Customs may think best, to Her Majesty's Paymaster General, to be placed to the account of wages and effects of deceased seamen, and the full particulars for each seaman to be sent to the Board of Trade.

With respect to the wages due to such deceased seaman, as well as the money and effects on board his ship, the Act has provided, in the 29th Section, that the Master of the vessel shall account for them to the Board of Trade.

I am, Sir,  
Your obedient servant,

(Signed,) T. H. FARRER.

W. Maclean, Esquire,  
Custom House.

No. 19.

CUSTOM HOUSE, LONDON,  
17th June, 1852.

The foregoing copy of a Letter from Mr. Farrer, Secretary for the Naval Department at the Board of Trade, together with a copy of the 14 and 15 Vic., cap. 102, therein referred to, is transmitted to the Collector at Quebec for his information and government; who will take care to remit any amount that may be received under the 33rd Section of the above recited Act, by Bill, to the Paymaster General in this Country, for the purposes mentioned in Mr. Farrer's Letter advising the Board of Trade thereof, and transmitting to their Lordships the particulars for each seaman, as directed by Mr. Farrer's Letter.

By order of the Commissioners,

(Signed,) F. G. GARDNER.

The Commissioners of Enquiry have now to perform a duty no less imperative than disagreeable, but from which they cannot shrink without proving themselves unworthy the confidence placed in them by Your Excellency. It must ere this have appeared evident to Your Excellency, that the spirit of opposition displayed by Dr. Douglas towards his superior officers, has at all times been manifest, and that he does not appear to have been ever pleased with the order of things, except when the whole management was in his own hands, and when his opinion was law. Since the appointment of new Commissioners, this opposition has assumed a more marked character, and has led, in a great degree, to the disorderly management of the Hospital. It may be supposed that the late Commissioners having resigned, better order and more cordiality will be observed in the Establishment, and that it is likely that Dr. Douglas will act with the present Board of Managers more peacefully and cause less anxiety to the Government.

The Commissioners of Enquiry cannot bring themselves to believe this:—they are still of opinion that nothing short of absolute rule will satisfy Dr. Douglas, and that if the management of the fiscal Department of the Hospital were placed under his control, he would not be content until he obtained equally despotic power over the Medical Department. The late Commissioners being now disconnected with the Hospital, it would be ungracious to allude to their conduct towards Dr. Douglas, further than to remark that, there seems to have been a complete “incompatibility of temper” between the parties—and although the Commissioners of Enquiry do not deny, that these gentlemen may have given Dr. Douglas serious cause of complaint on various occasions, yet they have not yet arrived at their decision, solely on account of these disagreements between the parties, which seem evidently to owe their origin to Dr. Douglas, in the first instance.

Unfortunately for his own reputation as well as for the interests of the Hospital, and indeed, the character of the Medical Profession, Dr. Douglas has been in the habit of treating his colleagues with such marked disrespect, rudeness and injustice, which conduct taken into conjunction with his usual treatment of the other Officers, and his intolerance of proper control and dispositions for creating dissatisfaction, if not disturbances in the Hospital, leave no alternative to the Commissioner of Enquiry, than to recommend to Your Excellency, that the services of Dr. Douglas be henceforth dispensed with.

They beg respectfully to state for Your Excellency's information, that they have reflected carefully over this matter, and have endeavored as much as possible, to find some extenuating circumstances which would have obviated the measure now recommended; they believe they have given due consideration to

the injury the Hospital will sustain by the loss of an able and experienced Surgeon, but they also recollect that other Medical Officers connected with the establishment have performed their duties equally as well and as conscientiously as Dr. Douglas, whom he has been in the daily habit of grossly insulting, not only before other members of the staff, but even before the nurses, students and the patients themselves. These gentlemen were appointed to office by the Government; they were declared the equals of Dr. Douglas; they were alike responsible for the proper performance of their duties, and had they proved themselves unfit for these duties, Dr. Douglas should have made known the circumstances to the Commissioners or to the Executive, and not made them the subject for public discussion, and the means for injuring the professional reputation of the Officers of a Public Hospital;—one of whom is his own brother-in-law, and another his most intimate friend! But what excuse can be urged for the slights cast upon the whole staff by Dr. Douglas' performing operations without consulting his colleagues, and by his bringing Dr. Fremont and others, not connected with the Hospital, to assist him at these operations, when there were five colleagues equally competent to perform that service. Assuredly no greater insult could have been offered to them, no greater mark of want of confidence could have been exhibited; no act could more completely shake the confidence of the patients in their medical attendants, and apparently this striking departure from Hospital usage seems to have been adopted from invidious motives.

It is foreign to the present investigation to express an opinion upon the sense of delicacy displayed by these gentlemen in countenancing on the part of Dr. Douglas such acts of disrespect to his own colleagues.

As was before observed, it is not difficult to conceive the numerous occasions in which this conduct has led to altercations and unseemly *rencontres*, when it is recollected that, both in his *verbal* and *written* evidence, such unmeasured terms of abuse are heaped upon all connected with the Institution.

In conclusion, the Commissioners beg to express their deep regret that they are compelled to recommend a measure so disagreeable to their feelings, but being convinced that harmony and good-will will never exist in the Hospital until Dr. Douglas shall cease to be connected with it, they earnestly but respectfully recommend to Your Excellency, that that gentleman be requested to resign his situation of Visiting Physician to the Quebec Marine and Emigrant Hospital, a step which he alone has necessitated.

The Commissioners beg also to recommend that the services of Drs. Painchaud, Rowand and Jackson be retained; and they are prepared to assign their reasons for recommending that Drs. Hall and Robitaille be not included in the new Medical Staff, if it should please Your Excellency to require them.

*Communication from Dr. George Douglas on the Grosse Isle Quarantine Establishment.*

MEMORANDUM submitted to the Commission sitting on "The Management, &c., of the Marine and Emigrant Hospital."

The undersigned takes the liberty of suggesting some of the advantages likely to result from the appointment of a paid Commissioner, whose duty should be to exercise a personal and constant surveillance over the Hospital, and who might act as Treasurer, and pay all claims against the Institution. The undersigned further suggests that the same gentleman could, in addition to these duties, perform others of a like nature for the Emigrant Hospital, Grosse Isle, and by this means save the cost of the present cumbrous and expensive management. As an instance of the saving to the public funds to be effected by this appointment, the undersigned would state, that the total expenditure for the diet, medi-

cine and medical comforts of all the sick admitted to the Hospital, did not exceed £200, while the pay and allowances of the staff of military, commissioned and non-commissioned officers, employed in superintending the disbursements and keeping the accounts, exceeded considerably the amount expended.

This does not, of course, include the sums paid in hire of steamer, salary of Medical Officers, Hospital nurses and boatmen, all of which being fixed and established by the Executive Government, previous to the commencement of the season, require no supervision or control.

Many other advantages besides those of an economical nature would accrue from the appointment of such officer; the class of patients admitted to both institutions is the same, and the Chief Agent of Emigrants, Mr. Buchanan, has represented the convenience in many instances of transferring sick Emigrants or those falling ill to the Grosse Isle Hospitals, particularly those who have already numbers of their family detained in the Quarantine Hospitals. Again, there are constantly happening cases of sickness or injuries, neither of which can be treated with safety in Hospitals devoted solely to the reception of contagious diseases, and who might be transferred to the Marine and Emigrant Hospital, Quebec. A Commissioner having superintendence over both Institutions would facilitate many such arrangements.

(Signed,)

GEO. DOUGLAS, M. D.,  
Medical Superintendent.

Quebec, November 10th, 1852.

Although not coming within the scope of their duty, the Commissioners, take the liberty of laying before the Government the foregoing document sent to them by Dr. George Douglas, the Medical Superintendent of the Quarantine Establishment at Grosse Isle.

It affords an additional argument for the necessity of a Sanitary Board, whose duty it would be to superintend, not merely the Quarantine Hospital, and that at Quebec as suggested by him, but all the Public Hospitals and Charitable Institutions of the Country, supported by or receiving assistance from Government.

Until some such Board be formed, the Establishment at Grosse Isle will cost more for military services than is enough to pay "for the diet, medicine and medical comforts of the sick." There will every now and then be a necessity for a Commission of Enquiry into abuses, alleged or proved, to exist in Penitentiaries, Gaols, Hospitals, &c. In addition, whenever there is an outbreak of pestilence the "Central Board of Health" will have to be formed, the Medical Members of which will not readily give their services, so valuable to their own patients on these occasions, without payment—nor can the Government expect them to do so.

The history of all Public Institutions proves, that it is much more easy and economical to prevent abuses than to correct them. The Government have acted wisely in applying this doctrine to one of their most important Institutions—the Provincial Penitentiary—but it should be applied to all establishments supported by Government, and it would cost the Country less to establish such a Board of Control, as is now alluded to, than to pay for the several Commissions to be employed in examining into the affairs of different Public Institutions.

The foregoing remarks are, with the greatest respect, submitted for the consideration of the Executive, and the importance of the subject it is hoped will be considered sufficient apology for their introduction into this Report.

The whole respectfully submitted.

(Signed,)

WD. NELSON, M. D.  
ROBERT MACDONNELL, M. D.  
Z. PERRAULT.

Montreal, February 2nd, 1853.

## LIST OF PAPERS.

*Letters and other Documents composing the Appendix to the Report of the Commissioners appointed to enquire into the management of the Marine and Emigrant Hospital, Quebec.*

- No. 1. Copy of letter from Dr. J. Crawford to S. Gerrard, Esquire, President of the Montreal General Hospital, dated 11th January, 1848.
2. Dr. Painchaud's proposal for election of Visiting Physicians.
3. Copy of Provincial Secretary's Letter, dated 17th July, 1847.
4. Circular addressed by Visiting Physicians M. and E. Hospital to Medical Practitioners of Quebec, dated 22nd July, 1847.
5. Letter from Dr. Painchaud to Dr. Douglas, relating to appointment of six Visiting Physicians, dated 5th January, 1848.
6. Dr. Douglas' Letter to Provincial Secretary.
7. Dr. Marsden's Letter to Dr. Douglas, dated 5th July, 1851.
8. Dr. Douglas' reply thereto, of same date.
9. Provincial Secretary's Letter to Dr. Douglas, dated 4th July, 1851.
10. Dr. James Douglas' Letter, complaining of the conduct of the Commissioners, addressed to Provincial Secretary, dated 17th July, 1851.
11. Letter from Provincial Secretary to N. Casault, Esq., Secretary to the Marine and Emigrant Hospital, Quebec, dated 5th August, 1851.
12. Reply of the Commissioners to the Letter of Dr. Douglas, dated 30th August, 1851.
13. Letter from P. Whelan, Stewart of the Marine and Emigrant Hospital, to N. Casault, Esq., Secretary and Treasurer, dated 25th August, 1851.
14. Letter from the Secretary of the Marine and Emigrant Hospital to the Honorable Provincial Secretary, dated 4th Sept., 1851.
15. Letter from Dr. Painchaud to the Secretary of the Marine and Emigrant Hospital, dated 25th August, 1851.
16. Letter from Secretary of the Marine and Emigrant Hospital to Honorable Provincial Secretary, dated 18-19th August, 1852.
17. Letter from Honorable Provincial Secretary to the Secretary of the Marine and Emigrant Hospital, dated 21st August, 1852.
18. Letter from the Commissioners of the Marine and Emigrant Hospital to the Honorable Provincial Secretary, dated 24-25th August, 1852.
19. Letter from Dr. Frémont to Dr. J. Douglas, dated 9th November, 1852.
20. Letter from H. Gowen, Esq., to Dr. J. Douglas, dated 9th November, 1852.
21. Letter from Dr. Lemieux in the case of Lawson, dated 12th November, 1852.
22. Copy of Minutes of *Post Mortem* examination of William Lawson, who died in the Marine and Emigrant Hospital on the 21st January, 1852.
23. Dr. Robitaille's Letter relating to Lawson's case, dated 20th November, 1852.
24. Dr. Jackson's Letter to Dr. J. Douglas, referring to case of Lawson, dated 17th November, 1852.
25. Letter from Dr. Douglas to Dr. Hall, referring to case of Lawson, dated 15th November, 1852.
26. Dr. Hall's Letter to Dr. Douglas, relative to case of Lawson, dated 21st July, 1851.
27. Petition of Dr. L. F. Chaperon to His Excellency the Governor General.
28. Statement of Expenditure on account of the Marine and Emigrant Hospital for years 1849, 1850 and 1851.
29. Return of all patients admitted into the Marine and Emigrant Hospital from 1st January to 31st December, 1851.
30. Return of all patients admitted into the Marine and Emigrant Hospital from 1st January to 27th November, 1852.



## APPENDIX.

*Letter from Dr. J. Crawford to S. Gerrard, Esquire, President of the Montreal General Hospital, dated 11th January, 1848.*

SIR,—In reply to your enquiry with respect to the manner the duties of Montreal General Hospital are conducted, I beg to say, that the Physicians who are now twelve in number, are elected by the Governors of the Institution, and by arrangement between themselves, they attend by two at a time for two months, during which period they have the entire management of the sick, each taking charge of one half of the Wards, and receiving patients alternately by weeks into their own portion of the wards. During their periods of attendance, they have the aid and advice of their colleagues in consultation, if required, but are not interfered with. There is no distinction made between medical and surgical cases, unless it be by private arrangement.

(Signed,) J. CRAWFORD, M. D.,  
Physician to the  
Montreal General Hospital.

(No. 2.)

Dr. Painchaud's proposal to appoint six Visiting Physicians, dated Quebec, 21st July, 1847.

The following is the scheme which Dr Painchaud would adopt in conformity with the desire of His Excellency, conveyed in the letter of the Provincial Secretary, dated the 17th instant :

Should Messrs. Douglas & Racey desire the adoption of another, they will be good enough to communicate it to Dr. P., otherwise the present scheme will be carried out.

(Signed,) J. PAINCHAUD,  
Visiting Physician, Q. M. H.

Messrs. Douglas & Racey,  
Physicians, Q. M. H.

(No. 3.)

*Official Letter dated Secretary's Office.*

MONTREAL, 17th July, 1847.

SIR,—I have the honor to convey to your fellow Visiting Physicians of the Marine and Emigrant Hospital, the Governor General's desire that you should make it known to the Faculty of Quebec, that you are authorized to select six Physicians to assist you in your duties, but on the distinct understanding that services so rendered will not entitle them to any remuneration, as His Excellency cannot but believe, that many members of the Faculty will be ready to avail themselves of the professional advantage which the practice of such an Hospital will afford them. His Excellency understands that at Montreal, the Physicians are anxious to afford their gratuitous services in the General Hospital, solely for the professional advantage to be gained thereby, and there exists in the Hospital practice at Quebec a superior advantage over that at Montreal.

I have, &c.

(Signed,) D. DALY,  
Secretary.

*Circular Letter addressed by Visiting Physicians to Lederal Practitioners of Quebec on the subject of nominating six other Visiting Physicians, dated 22nd July, 1847.*

(Translation.)

GENTLEMEN, It being the desire of His Excellency the Governor General to add six to the number of the Visiting Physicians of the Marine Hospital, and in order thereto, His Excellency having authorized us to select six members of the profession in Quebec, we would request of you to inform us in writing, whether you would accept the said office of Visiting Physician to the Marine Hospital.

We have the honor to be, Gentlemen,  
Your very obedient servants,

(Signed) JOSEPH PAINCHAND,  
JAMES DOUGLAS,  
JOHN RACEY,

To the Quebec  
Practitioners.

Visiting Physicians to the Marine Hospital.

(No. 5.)

*Letter from Dr. Painchaud to Dr. Douglas relating to appointment of Six Visiting Physicians, dated 5th January, 1848.*

(Translation.)

MY DEAR DOCTOR,—Your pretending ignorance is very unfortunate. What! After having, with me, appointed Visiting Physicians who have all accepted, you now ask me who they are?

I have added this time the word "Surgeon" to the words "Visiting Physicians" to make the newly appointed Visitors clearly understand, that this general style of designating the Visiting Physicians and Surgeons, in official and other communications only by the short term of Visiting Physicians, is applied to those parties appointed to attend and prescribe without exception throughout the whole Hospital.

I am aware that some of these gentlemen are under the impression that reference will to-day be made to this subject. and that an attempt will be made to separate the department of Surgery from that of Medicine, that is to say, that there shall be a Visiting Surgeon, and that the others shall be Visiting Physicians, an arrangement never intended by Government, as I have been informed at the Government Offices.

I shall require the official communication of the Commissioners. Send it back if you please before noon.

Ever yours,

(Signed,) JOSEPH PAINCHAUD.

(No. 6.)

*Letter from Dr. Douglas to the Hon. D. Daly, Provincial Secretary.*

SIR,—Dr. Painchaud has given me communication of your Letter, authorizing him with Dr. Racey and myself to appoint six Visiting Physicians to assist us in our duties in the Hospital, without remuneration.

Dr. Painchaud is under the impression that these six gentlemen so to be appointed will form part of the permanent Medical Staff of the Hospital. Dr. Racey and I differ on the interpretation of your letter.

Sir, in the Hospital we require no assistance; the duties just now are arduous, but even without a successor to Dr. Frémont, we can perform them. The sheds,

however, press too heavily on our time, and we have latterly been in hope that one additional medical man, with pay, 20s. per diem, would have been appointed by the Commissioners, to assist us. This is all we require at first, and all we will likely require this season. The medical men, whom you authorize us to appoint, will, I doubt not, object to do duty in the sheds, as not forming part of the Hospital.

The members of the profession here of higher standing, and who would be of advantage to the Hospital will not, I am satisfied, accept under present circumstances, and an addition of six of the junior members of the profession would be worse than useless.

In fact, this Hospital would not work; nine Physicians to an Hospital such as the Marine Hospital, is at present out of all proportion to its size and wants. Some time since, the charter of a medical school, in connection with the Hospital was granted by the Legislature, and it was contemplated by the Faculty to recommend to His Excellency the appointment of the gentlemen who could be the Lecturers.

The present plan would seriously impede this very desirable object, and would exclude Drs. Blanchet, Morrin, Rowley, Nault, Sewell, Jackson and others.

There will be no difficulty in finding a Medical man of good standing to fill up the situation vacated by Dr. Parent. It is, however, necessary at present, and I would respectfully recommend that under existing circumstances, that appointment be deferred until next winter when with likelihood the Medical School will be authorised.

I am authorized by Drs. Morrin & Parent to state, that they entirely concur in the remarks I have here submitted to you.

I will endeavour to induce Dr. P. to suspend any action in the appointment of the six additional Visiting Physicians, until I hear from you, that it is His Excellency's pleasure, that such appointments be made, and that the Visiting Physicians so to be appointed, form part of the present medical staff of the Hospital.

(Signed,) J. DOUGLAS.

(No. 7.)

*Letter from Dr. Wm. Marsden to Dr. Douglas dated 5th July, 1851.*

SIR,—Will you inform me whether, during your long and valuable connection with the Marine and Emigrant Hospital, any rule or law existed prohibiting medical gentlemen from attending the Hospital, during the regular medical visit hour, or whether in point of fact any medical gentleman was ever refused admission at any of these times to your knowledge.

(Signed,) W. MARSDEN, M. D.

No. 8.

*Reply of Dr. Douglas to the above, dated 5th July, 1851.*

No medical gentleman has ever been refused admission to the wards of the Marine Hospital during the regular times of visit, and I am not aware that any rule existed prohibiting medical practitioners from attending the practice of the Hospital at these times.

I am, Sir,

(Signed,) JAS. DOUGLAS.

(No. 9.)

SECRETARY'S OFFICE,  
TORONTO, July 4th, 1851.

SIR,—With reference to the correspondence which has already taken place between the Government and the Visiting Physicians of the Marine and Emigrant Hospital at Quebec, as also with the Quebec Board of Trade, in relation to certain charges brought by those Bodies against the administration and management of that Institution, I have the honor to state that a Report of a full investigation made by the Commissioners has been received by His Excellency the Governor General.

As your conduct in connection with the above mentioned charges is severely censured and condemned by the Commissioners, His Excellency before taking final action upon their Report, has commanded me to transmit to you a copy of these charges, in order to afford you an opportunity of giving such explanations as you may deem proper to offer to any parts thereof which appear to affect your conduct.

I am at the same time commanded to draw your special attention to that portion of the Report which states that “there cannot be any good understanding, mutual assistance, or harmony between Dr. Douglas and the Commissioners, and that prompt measures on the part of His Excellency are necessary to do away with a state of things so much the more dangerous, as the season of navigation is commenced, and as the active co-operation of all the officers of the Institution will be promptly and unavoidably indispensable.”

I have, &amp;c.,

(Signed,)

J. LESLIE,  
Secretary.Dr. Douglas,  
Quebec.

(No. 10.)

*Dr. James Douglas' Letter complaining of the conduct of the Commissioners.*

QUEBEC, 17th July, 1851.

SIR,—I have the honor to acknowledge receipt of your communication of the 4th instant, inclosing copy of a Report of Commissioners of the Marine Hospital. The papers, through mistake, were transmitted to Grosse Isle, and only reached me yesterday.

In conformity with His Excellency's desire [that I should furnish him with any remarks or explanations on the Commissioners' Report, I beg very respectfully to reply that I know nothing whatever of the affidavits transmitted to the Commissioners by Dr. W. Marsden. I have had no communication with Dr. Marsden on this matter, directly or indirectly. I have not seen the affidavits, and I do not know the parties who made them.

With regard to the correspondence with the Board of Trade with which the Commissioners have been pleased to identify me, I beg to assure you that I am not the Secretary to that Body. I have not now or never had any correspondence or connexion with the Board either verbally or in writing. I do not know the members. I never conversed with any one of them on the affairs of the Hospital, knowing him to be a member of the Board, with the single exception of Mr. Dean, whom I know very slightly; he called on me during the period when the affairs of the Hospital were the subject of newspaper discussion, to inquire about some transactions relative to the monies of the patients, and to the diet and

treatment of the seamen in the Hospital. I have since then twice met Mr. Dean and conversed with him, but the subject of the Hospital, or of its *attachés*, was not alluded to.

I am charged by the Commissioners with having unjustly attacked and calumniated them; this statement is utterly without foundation, and injustice to me. I hope they will be prepared to state when, where and to whom I ever spoke disrespectfully of them, as my character and motives as Visiting Physician have been impugned by the Commissioners. I consider it a matter of strict justice to myself to submit fully and fairly to His Excellency the state and management of the Hospital, since the appointment of the present Commissioners. These gentlemen, in their Report, have made certain assertions on matters, in which they could have taken, but did not take, any evidence whatever. On other matters, vitally affecting the interests of the Hospital, they carefully avoided calling such evidence as would have elicited the truth. To some of the evidence taken they have given a meaning not intended by the witnesses, but tending to mislead His Excellency, as to the state and efficiency of the Hospital, under their management. This Report, moreover, wants the signature of the President of the Board, and of the only individual in the Commission who fully understands its management, and knows the wants and requirements of an Hospital.

As to the moral conduct of the employés, it is a matter more immediately under the guardianship of the Commissioners; it is, however, the duty of the Visiting Physicians, should they see or suspect anything amiss, to call the attention of the Commissioners to it; and it is obviously their duty to lose no time in instituting an enquiry. In November last I twice waited formally on the Chairman, and stated to him that great irregularities and abuses existed in the Hospital, and which demanded an immediate investigation by the Commissioners. I also waited personally on Mr. Cazeau, the Secretary, and stated to him that I had a communication to make to the Commissioners on the state and conduct of the Hospital, and beg that he would afford me an occasion of doing so. He informed me that he had not power to call the Commissioners together. I then requested to be notified of their first meeting, to be afforded an opportunity of being heard. This opportunity has not been afforded to me; no enquiry has yet been made into these irregularities and abuses, and I have not been even asked by the Commissioners to state what they were.

With respect to conversions, although as Visiting Physician, I have nothing to do with the religious belief of the patients; I am aware that conversions, so called, have been effected. With the particular views which the Roman Catholic Church entertains of the efficacy of certain rights and ceremonials before death, it is to be expected that its clergy should consider it to be a paramount duty to effect as many conversions as possible. It is, however, the business of the Protestant Clergy to look after their own flocks, and to take such steps as will prevent any undue or unfair influence being exerted upon them. A few weeks before the appointment of the present Commissioners, a rule was made, directing Protestant patients to be placed in separate wards, and attended by Protestant nurses. This rule was made on the complaint of the Lord Bishop of Montreal—that Protestant patients were improperly interfered with. I do not know why this reasonable and proper rule has not been persevered in, as it certainly would have obviated the present difficulties about interfering about the religious belief of the patients.

“With respect to the interments, I had heard that at different times two bodies had been buried in the same coffin. As, however, that had been a matter of hearsay, I did not consider it to be my duty to inform the Commissioners until the fact came to my personal knowledge.” I then informed the Chairman of the Commissioners, that two bodies had been buried together, under circumstances the most revolting. This is neither the first nor the second

time the character of the Hospital has suffered by such malpractice ; two years ago they were the subject of enquiry in Court. This particular affair yet remains to be enquired into. The Commissioners, in their Report, have not stated all they know on the subject. They refer to the evidence of Messrs. Godbout and Pelletier as *attachés* of the Hospital, and whose names I now hear for the first time. With respect to that part of the Report, referring to the evidence of Drs. Jackson and Hall, their note will prove that their testimony has been most improperly travestied, and that they have not stultified themselves by officially stating a fact one day, and being induced to deny it the next. In their Report the Commissioners state that "they consider it useless to repeat here the answer given by "them to complaints of Visiting Physicians." This tends to mislead His Excellency, by conveying an impression that they did answer the repeated complaints of Visiting Physicians. On no occasion did they answer, either verbally or in writing any one of the repeated requests and complaints of the Visiting Physicians. Even the confession of faith by the Commissioners tends to mislead His Excellency. Captain Alleyn ought to have remained silent on this matter, or to have stated that his associations and feelings were altogether Catholic, and that he attended exclusively the Catholic Church.

From the time of the Report—from the refusal to receive evidence tendered to them—from the very improper color to evidence taken—from the anxiety to avoid subjects unfavorable to, and dwell on matters favorable to those whose conduct was the subject of enquiry, I am compelled to express my conviction that in this investigation the Commissioners were anxious to screen the parties and to escape themselves, from a dilemma in which their dereliction of duty and mismanagement of a valuable Institution had placed them.

However estimable and capable the Commissioners may have been in private life, an enquiry into the state and conduct of the Hospital during the past two years will satisfy His Excellency of their utter *unfitness* to manage so important a trust. On this day suits are pending, and a Bill is before the Grand Jury, connected with most disgraceful scenes which took place in the female wards of the Hospital. And a letter from the Visiting Physician in charge, dated 5th instant, and demanding instructions from the Commissioners, has, like all other demands on their attention, been disregarded and unanswered.

My own conduct as Visiting Physician will bear the strictest examination. As Visiting Physician, I have invariably identified myself with the interest of the Hospital, and have done my duty uninfluenced by fear or favor for any one. The only instance in which I feel I have erred was in not earlier submitting the state and condition of the Hospital to His Excellency.

I now beg leave most respectfully, but most distinctly, to assure His Excellency that the charges and insinuations against me as a Visiting Physician, contained in the Commissioner's Report, are utterly without foundation, and not based on one tittle of evidence. Of Jane Hamilton, whose name has been in my opinion most injudiciously associated with the House Surgeon, I know nothing whatever, my duties being confined to a different flat of the Hospital. I have many months ago, in my examination of Mr. Cutter's case, stated to the Commissioners themselves, at a full Board, that of Mr. Beaubien's conduct in the Hospital I knew little. That Dr. Lemieux had proved himself to be a capital House Surgeon, and that if the twain had been guilty of the irregularities and malpractice attributed to them, it was only what might have been expected from young men under their peculiar circumstances, placed as they were in an institution unchecked, irresponsible and neglected by Commissioners.

I now trust to His Excellency's sense of justice, and to his expressed anxiety for the welfare of so important an Institution, that he will be pleased to cause such enquiry to be made as will afford me an opportunity of vindicating my character, so unjustly aspersed, and what is of far more consequence, as will place

the Hospital itself on such a footing of usefulness and respectability as it ought to possess, and as it did possess some years ago.

I have the honor to be, Sir,  
Your most obedient servant,

(Signed,) J. DOUGLAS.

The Honorable  
James Leslie,  
Provincial Secretary.

(No. 11.)

SECRETARY'S OFFICE,  
TORONTO, 5th August, 1851.

GENTLEMEN,—I have the honor to enclose to you by command of His Excellency the Governor General, for such remarks as you may see fit to make thereon, the accompanying copy of a letter received from Dr. Douglas, with reference to the Report of the investigation made by you into the state and management of the Marine and Emigrant Hospital.

I have &c.,

(Signed,) J. LESLIE,  
Secretary.

The Commissioners of the Marine  
and Emigrant Hospital, Quebec,  
To N. Casault, Esquire,  
Secretary.

(No. 12.)

*Reply of the Commissioners to the Letter of Dr. Douglas.*

MARINE HOSPITAL,  
QUEBEC, 30th August, 1852.

SIR,—We have the honor to acknowledge the receipt of your letter of the 5th instant, which accompanies the copy of a letter from Dr. James Douglas, relative to the Report made upon the conduct of the House Surgeon, the Apothecary and one of the Nurses of the Marine Hospital, and which you addressed to us by order of His Excellency for such remarks as we might think proper.

A reply to all that is said by Dr. Douglas is to be found both in the answers before given by us to the complaints of three of the Visiting Physicians of the Hospital, and in the investigation concerning Mr. Cutter and that concerning the House Surgeon and those who were accused with him.

The Commissioners never pretended to say that Dr. Douglas was Secretary to the Board of Trade, but that he was the secret agent who caused that body to act. And this conviction which was generally felt, was more specially founded upon the letters of the Board of Trade of the 29th January and 3rd March last, and upon those of the Visiting Physicians of the 27th January and 27th February last, which bear so striking a resemblance not only in the complaints which are absolutely the same but even in certain parts of the phraseology itself.

That Dr. James Douglas unjustly attacked the Commissioners, that he has calumniated them, that he has shamelessly traduced them to Government is proved by the answers made by the Commissioners on the 31st March last to the complaints addressed to the Executive by Drs. Douglas, Hall and Jackson, and by the letters in which Drs. Painchaud, Rowand and Robitaille, (30th January and 3rd February, 1850,) inform His Excellency that they had been "*honteusement*

“*induits en erreur*” by Dr. Douglas, who by that means had caused them to complain of abuses and grievances which did not exist ; and also, lately, by the letter which forms the subject of this answer.

Though the Commissioners availed themselves of the opportunity afforded them during the last investigation to enquire into the truth of some of the complaints preferred against the Hospital, yet the enquiry was not made into the management of the Institution, but into the conduct of some officers and servants who were accused and incriminated.

And upon referring to the letter addressed by you, on the 21st March last, to the Board of Trade, a copy of which was addressed to the Commissioners, His Excellency will perceive that in confining their investigation to that subject only, the Commissioners took the same view of the matter as Government did.

As to the absence of the signature of the President of the Commission, it is simply due to that gentleman being absent from Quebec when the Report was sent up. And had it not been that the Report was asked for by a telegraphic despatch, and that they were informed by one of his household that he would not be back before ten or twelve days, the other members of the Commission would probably have awaited his return, so as to procure his approbation in addressing to His Excellency a document of such importance.

The Commissioners have already had occasion to inform His Excellency in their letter of the 31st March last, that Dr. Douglas always refused to put in writing, and officially submit to the Commission his remarks upon the pretended abuses of which, at two different times, and in the course of conversations, he spoke to the President of the Commission ; and also that the conversation with the Secretary spoken of by Dr. Douglas had only reference to some knives and forks which he said the Hospital wanted. It remains now with them to show, as they will presently, the object of those conversations.

The Commissioners never denied that conversions to the Roman Catholic Religion took place in the Hospital, but they formally denied that any of the officers or persons employed in the Institution ever took part in, or encouraged it. As to the rule spoken of by Dr. Douglas, the want of rooms, and the increase of expenses which the enforcing of such a rule would cause, render it impossible ; and it has never existed, as may be ascertained by reference to the accompanying letters of Dr. Painchaud and Mr. Whelan. The plan mentioned by Dr. Douglas, having been suggested by the Lord Bishop of Montreal, the then Commissioners left it with the Visiting Physician to carry it into effect, if possible and practicable. If it has not been followed, the blame should fall on these latter gentlemen, who are solely charged with the classification of the diseases and patients.

As to the interments, the rules of the Establishment and the investigation upon the House Surgeon's conduct, sufficiently prove that the fault in that case remained with the then Steward, Mr. Cutter, whom His Excellency has since thought proper to dismiss from his office. The Commissioners can only assure His Excellency that it has not since occurred. Dr. Douglas states that the fact of two bodies being buried in one coffin came to his personal knowledge : but how did it come to his knowledge ? If it was before interment, why did he not prevent it ? If it is by opening the graves in the Burial Ground of an Institution of which he is an officer, who is the more to be blamed, the officer who put two bodies in one coffin, or the one who opened the graves ? In that latter case the Commissioners would not be surprised at his obstinate refusal to address the Commission officially, but would be very much surprised at his alluding to a fact of a similar nature which happened two years ago, and which was laid at the time before Government.

During the absence of Mr. Beaubien, caused by illness, Mr. Godbout and Mr. Pelletier, both at different times fulfilled the duties of Apothecary, the one



from the 20th of September until the middle of November, 1849, and the other from the end of June to the end of July, 1850, as established by the evidence of those two gentlemen in the investigation on Dr. Lemieux's conduct. The Commissioners did not think that for the temporary substitution of these gentlemen in his place, they were bound to consult the Visiting Physicians.

As to that part of the Report relating to the testimony of the Visiting Physicians, and particularly that of Drs. Hall and Jackson, the Commissioners beg to refer again to the answers of these gentlemen as dictated by themselves during the absence of the Secretary, Mr. Casault, to his partner Mr. Langlois, and to which they appended their signatures after having read them. If they are susceptible of any other construction than the one put upon them by the Commissioners, in the Report in question, they will acknowledge they had the intention of misleading His Excellency, but if on the contrary their answers are formal and direct, it must of necessity be acknowledged that they were misled into the complaints they were made to sign.

The Commissioners did not answer the complaints made to them by the Visiting Physicians, for the simple reason that they never addressed them any complaints, and that the only letter which they received, in December, 1850, required no answer, having merely reference to a rule, which had long existed and which had then for the first time been found fault with, and the wants of the Hospital for the ensuing spring. The first was immediately attended to, and the latter in due time as already mentioned by the Commissioners, in their letter of the 31st March, 1851. It is true that what they did answer was not complaints, but unjust and calumnious attacks addressed against them to the Government by three of the Visiting Physicians, under the guidance and directions of Dr. Douglas, one of them, as is proved by the document forwarded to His Excellency by Dr. Painchaud.

It must appear more than strange that Dr. Douglas should try to impose upon Captain Alleyn, religious convictions which this gentleman has declared not to be his; and it would not have merited an answer, were it not that Captain Alleyn was desirous of stating that he belongs to the Protestant Religion, which he believes not to be inconsistent with the religious faith of his children, and the respect and friendship he feels for certain Ministers of the Roman Catholic Church.

The Commissioners have not shewn favor nor protection to any person, not more to Dr. Lemieux than to Mr. Cutter. They were only desirous of shewing justice. They have heard and they caused to come before them for the purpose of examination, all those persons whom they thought likely to be able to give them any information upon the conduct of those officers of the Institution who were accused. They rejected hearsay evidence, as a species of proof unjust towards the accused and unfit to enable to come at the truth. The evidence before Government, and more particularly the Report on the investigation concerning Mr. Cutter, sufficiently prove that the Commissioners did not "screen" the guilty party so as to conceal their own mismanagement.

Dr. Douglas should have left to the person who had a right to complain the duty of doing so; he should have left to the gentleman who had been insulted by Dr. Marsden; he should have left to the person whose orders were slighted, who was ignominiously dragged before Courts of Justice for having done his duty, and expelled from the Hospital a person who caused disturbances and disgraceful scenes in the female wards of the Hospital; in one word he should have left to Dr. Painchaud the care of saying, if the conduct of the Commissioners on that occasion was condemnable, and if they did not do all that could be expected from them. Dr. Douglas is the last who should have alluded to those disgraceful scenes, after having as he did, informed Dr. Marsden, by a letter produced by that gentleman in a Court of Justice, that there was no rule or order forbidding him an admittance, though he had himself given an order to that effect in the

presence of Dr. Landry. Above all, Dr. Douglas should have given to his letter a date which was not that upon which must have been written (as may be ascertained by reference to the date of the letters of Drs. Hall and Jackson, upon which he comments, his being dated the 17<sup>th</sup> and theirs the 21<sup>st</sup>) to state that the Commissioners had not yet answered Dr. Painchaud's letter on that subject.

The Commissioners would wish to believe Dr. Douglas; they would, for his sake, that all he alleges having said about Dr. Lemieux and Dr. Beaubien in the investigations concerning Mr. Cutter, should have been really mentioned. They feel desirous that the Visiting Physicians and Dr. Douglas, who should visit the Hospital every day and make a Report to the Commissioners of all improprieties of conduct there, had warned them of those mal-practices and irregularities. Every one would then have done his duty. Mr. Cutter would not then have committed all the disorders of which he has been proved guilty, and Dr. Douglas would not have "shamefully led his *confrères* into error," spread calumnious reports concerning the Hospital, and excited the public against the Institution.

Dr. Douglas in speaking of the manner in which he has discharged his duties as Visiting Physician, of the manner in which the Hospital was conducted when he commanded there as sole master, when almost every body in it was his creature, and when all was done according to his will, obliges the Commissioners once more to repeat that he has not discharged his duties, and that he has always tried to render the task imposed upon them difficult and arduous. The Commissioners pray His Excellency to refer to the letter addressed by Dr. Douglas to the Provincial Secretary after the nomination of the other Visiting Physicians. From that time which was previous to the appointment of the present Commission, he has not only shewn a want of good will, but he has not given the assistance which was of right to be expected from him in the management of the Hospital. The Commissioners feel themselves under the necessity of stating what is already established in their answers to the charges of three Visiting Physicians, that Dr. Douglas did not make his visits regularly, and did not give the information upon the abuses and wants of the Hospital, which the rules of the establishment and his office of paid Visiting Physician required, more particularly, from him.

The Commissioners may in justice be led to suppose that the complaints which Dr. Douglas states had been made by him in the course of conversation with the President, and which he formerly refused to put down in writing and address officially to the Commission were the consequent effects of a plan formed before hand, and were necessarily to precede the complaints of the Visiting Physicians and of the Board of Trade. For why obstinately refuse to put his complaints down in writing? And why when his quarter had begun on the fifteenth of August and was to finish on the fifteenth of November, wait till that last month before addressing the President of the Commission? Dr. Douglas took charge of the Hospital at a time when there were a great number of patients, and after having suffered to go on during nearly three months, the alleged abuses, improprieties, dereliction of duty and mal-practices, which must have come to his knowledge, if he did his duty, he comes when his time of attendance is nearly over, when the number of patients is considerably diminished, and then, for the first time, complains of the quality of the diet and of the want of knives and forks for the patients; for to that alone were his verbal communications confined. About one month after December, 1850, at a time when there were but very few patients in the Hospital, and while the Commissioners were engaged in the investigation on Mr. Cutter, Dr. Douglas gets the other Visiting Physicians to sign a letter informing the Commission that a certain rule for the admission of the friends of the patients had lately led to abuses, and that the Hospital wanted bedsteads, bedding and clothing. Without having addressed any other communication to the Commissioners for more than eighteen months previous, Dr. Douglas gets again the Visiting Physicians to complain to Government, on the 27<sup>th</sup> January following,

that their repeated requisitions and their claims on the attention of the Commissioners had equally been disregarded; and two days later the Board of Trade also addressed complaints to Government. Three of the Visiting Physicians have subsequently denied the charges and said that they had been "*honteusement induits en erreur*" by Dr. Douglas. The Board of Trade must then also have been led into error; and by whom? Is it by three Visiting Physicians who withdrew their signatures? Is it by the two others who acknowledged during investigation that they knew of nothing going wrong? or is it by the one who had already for the same purpose "shamefully led his *confrères* into error?"

The facts speak for themselves, and must convince His Excellency of the dispositions and intentions of Dr. Douglas and of the truth of his assertions.

We have the honor to be,

Sir,

Your most obedient servants,

(Signed,)

JOS. MORRIN,

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RICHD. J. ALLEYN,

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J. J. NESBITT,

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F. X. PARADIS,

"

T. KELLY.

"

N. CASAULT,

S. T. C. M. E. H.

The Hon. J. Leslie,  
Provincial Secretary.

(No. 13.)

MARINE AND EMIGRANT HOSPITAL,  
QUEBEC, 25th August, 1851.

SIR,—In reply to your letter of the 19th instant, received this moment, I hasten to reply. I am asked, "whether at any time there has been a rule in the Hospital, directing Protestant patients to be placed in separate wards, and attended by Protestant nurses, and to state if it has ever been enforced, and when and how long; and also, to state when and for what reason this rule ceased to be persevered in: also, if there has been any other rule respecting the classification of Protestants or Catholics, to state what it was, when and how long it was enforced, and when and for what reason it ceased to be enforced?"

I have the honor to inform you, Sir, that I have no recollection or experience of any such rule being either established or acted upon in the Marine Hospital; but I recollect that the subject had been merely spoken about and suggested by different parties (particularly in 1847) but never was carried into effect in any manner.

I have the honor to be,

Sir,

Your obedient servant,

(Signed,)

P. WHELAN,

Steward M. & E. H.

N. Casault, Esqr.,  
S. T. M. E. Hospital,  
Quebec.

(No. 14.)  
(Translation.)

MARINE HOSPITAL,  
QUEBEC, 4th September, 1852.

SIR,—I have just discovered that I have omitted to annex to the papers I had the honor to transmit to you yesterday, the accompanying letter from Dr. Painchaud, which is referred to in the letter of the Commissioners.

I have the honor to be,  
Sir,  
Your very obedient servant,  
(Signed,) N. CASAULT,  
S. T. M. & E. H.

The Hon. James Leslie,  
Provincial Secretary.

(No. 15.)  
(Translation.)

QUEBEC, 25th August, 1851.

SIR,—In answer to your letter bearing date the 19th instant, requesting me on the part of the Commissioners of the Marine Hospital, to inform them as to whether any regulation was ever in force with respect to the classification of Catholics and Protestants, and also to state at what period and for what reason, and upon whose order this rule was observed, I have the honor to inform you for the information of the Commissioners, that no other rule has ever existed with respect to the classification of Catholics and Protestants than that at present observed, that is to say, that a ticket is affixed to the head of each bed upon which are inscribed the name, country and religious faith of the patient.

In 1847 the President of the former Commission expressed to us the desire of His Lordship the Bishop of Montreal, with respect to the classification of the patients in the Hospital, that the Protestants and Catholics should be placed in separate wards; the President requested us at the same time to inform the Commissioners whether this classification occasioned any inconvenience or additional expense.

My two colleagues, Drs. James Douglas and John Racey, were desirous of returning a favorable answer to the scheme of His Lordship; for myself I was of a contrary opinion; I did not think the thing practicable, and more particularly at certain seasons of the year; but in order to offer no opposition to a trial of the plan, I signed with my colleagues, and there the matter dropped.

I have the honor to be,  
Sir,  
Your very humble and obedient servant,  
(Signed,) JOS. PAINCHAUD,  
V. P. Q. M. H.

N. Casault, Esquire,  
S. M. E. H., Quebec.

(No. 16.)

MARINE HOSPITAL,  
QUEBEC, 18-19th August, 1852.

SIR,—The Commissioners of the Marine Hospital would feel obliged to you for informing them, as early as may be convenient, if it is with the permission of His Excellency the Governor General, that Dr. Douglas published the letter addressed by him to Government on the 17th July, 1851, in relation to the

management of the Marine Hospital, and which appeared in the *Quebec Gazette* of the eleventh instant; and also, if that permission was such as to authorize Dr. Douglas to publish that letter without publishing at the same time the answer given thereto by the Commissioners, and all the correspondence on the same subject which was not included in the returns to an Address of the Legislative Assembly, dated the third of July, 1851.

I have the honor to be,

Sir,

Your most obedient servant,

(Signed,) N. CASAULT,  
S. T. C. M. E. H.

The Honorable A. N. Morin,  
Provincial Secretary.

(No. 17.)

SECRETARY'S OFFICE,  
QUEBEC, 21st August, 1852.

SIR,—In reply to your letter of yesterday, I have the honor to state for the information of the Commissioners of the Marine and Emigrant Hospital, that Dr. Douglas having expressed a wish of publishing his letter of the 17th July, 1851, he was informed that the Commissioners had answered the said letter, and that it was the intention of the Governor General to lay the whole before the Legislature at the then approaching Session, as a Supplementary Return to the Address of the Legislative Assembly of the 9th July, 1851, but that there was no objection to his publishing his letter if he thought proper so to do under the circumstances.

I have the honor to be,

Sir,

&c., &c., &c.

(Signed,) A. N. MORIN,  
Prov. Secty.

N. Casault, Esquire,  
Secty. to Com. of the  
Marine and Emigrant Hospital,  
Quebec.

(No. 18.)

MARINE HOSPITAL,  
QUEBEC, 24-25th August, 1852.

SIR,—We acknowledge the receipt of your letter of the 21st instant, by which you inform us that it was with the permission of Government that Dr. James Douglas published his letter of the 17th July, 1851.

We cannot refrain from expressing our regret at the course pursued by Government on that matter as well as on the request which we addressed, at different times, to His Excellency in relation to Dr. Douglas.

If His Excellency's advisers gave credit to the charges preferred against the Commission by Dr. Douglas, if they thought that those charges were true, that they were not sufficiently answered by the correspondence, and the evidence in support of it, that the Commissioners addressed to you, at different times, why not order at once an investigation which would have set the matter at rest and which would have shewn whether the Commissioners had neglected their duty. Dr. Douglas calumniated his Superior Officers! If on the contrary,

they were convinced that the accusations brought by Dr. Douglas were false, that he had tried to induce Government in error, after having, for the same object, and to use their own words, shamefully led his *confrères* into error, why not dismiss him at that time? His Excellency's Government cannot surely give as a reason for their not having decided between Dr. Douglas and the Commission at an earlier period, that the matter was in the hands of Parliament, for then what would be the purport of the letter addressed by you to the Commissioners on the 12th of April last, alleging the propriety of waiting for the return of Dr. Douglas, and more specially that of the 27th of July last, by which you informed them "that so soon as the determination of His Excellency on the matter would be formed, you would communicate it to them?"

The Commissioners do not know to what course they should attribute, and further do not know how to explain the permission given to Dr. Douglas to publish his letter of the 17th July, 1851, without at the same time publishing the answer given thereto by them. It is impossible that it should be for the reason assigned by Dr. Douglas, that his letter had not been published with the other documents printed by order of the Legislative Assembly, since the letter in question and the answer given to it by the Commissioners on the 30th August, 1851, and which it was not thought proper to lay before the public at the same time, had both been addressed to the Provincial Secretary, after the order had been given to lay before the Legislative Assembly all the correspondence which had then taken place on the same subject. Furthermore the Commissioners do not know how to account not only for their losing, all at once, the confidence with which, up to that time, Government seemed to honor them, but also for that denial of a justice which every accused parties have a right to expect, that of laying before their fellow-men their defence as well as their accusation. After having gratuitously fulfilled, for such a long space of time, a situation not only troublesome but in the highest degree disagreeable, the Commissioners would have expected that Government would not have lent assistance to the efforts which had been made, for a long time, to prejudice public opinion against them; and had reason to expect that at the same time they allowed Dr. Douglas to publish his letter, they would have obliged him also to publish the letter of the Commissioners of the 30th August, 1851.

The Commissioners would willingly have submitted themselves to an investigation in relation to their own conduct, had it been thought proper by His Excellency to order it, instead of requesting the Commissioners to make themselves that investigation into the conduct of those officers of the Hospital who were more specially accused; they boldly assert its result would still prove in their favor and against their accuser, but they are not left a choice in the course they have now to pursue. Since it has pleased His Excellency to delay so long his decision on their repeated prayer in relation to an inferior officer who falsely accused and calumniated them; since it has pleased His Excellency to permit that same officer to publish his *ex parte* correspondence, and by that means to prejudice and raise the public opinion against them, they have only to tender their resignation and earnestly to pray His Excellency to accept of it.

The Commissioners beg to add that, Dr. Morrin not having been present at any of their meetings since last winter, though he has always been properly notified, they have not thought proper to ask his concurrence to this letter.

We have the honor to be,

Sir,

Your most obedient servants,

(Signed,)

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F. X. PARADIS,

J. J. NESBITT,

T. KELLY,

RICHARD J. ALLEYN.

No. 19.

QUEBEC, TUESDAY EVENING,  
9th November, 1852.

MY DEAR DOCTOR,—In answer to your note of to-day, I cannot, in justice, hesitate to state, that on several occasions, in my presence, you spoke to our friend Morrin on the subject of the very imperfect condition of the Marine Hospital, and urged him for his own sake, as well as that of the Institution, to inquire into the irregularities that you stated existed. I have had very many opportunities of witnessing your assiduous attentions to the sick in that Hospital for many years that I visited it, and certainly never suspected you to shew favor to any servant in the establishment.

Yours *fideliter*,

(Signed,) C. FREMONT.

Dr. Douglas.

No. 20.

QUEBEC, 9th November, 1852.

To DR. J. DOUGLAS.

MY DEAR SIR,—In answer to your note of yesterday, wherein you say,—“As Chairman of the Commissioners of the Marine and Emigrant Hospital from 1836 to 1847, will you oblige me by stating whether, to your knowledge, I was ever remiss in my duty as Visiting Physician? Whether I had any relative or dependant attached in any capacity to the Institution? and whether you ever suspected or supposed that I made use of any authority I possessed as Visiting Physician, except for the use of and benefit of the Hospital?”

I have much pleasure in stating, in answer to the first question, that I do not recollect any instance when you were remiss in your duties as Visiting Physician; secondly, I am not aware that during the whole period, you had any relative or dependant attached in any capacity to the Institution; and lastly, I never suspected or supposed that you were in the habit of making use of your authority as Visiting Physician, other than what you considered was for the interest of the Hospital.

I am,

Dear Sir,

Your very obedient servant,

(Signed,) H. GOWEN,

Formerly Commissioner M. E. Hospital.

No. 21.

*Letter of Dr. Lemieux, on case of Lawson.*

James Lawson, aged 21 years, sailor and deserter from the barque “Pet,” was admitted in the Marine and Emigrant Hospital, on the 22nd June, 1851, at about 3 o'clock in the morning, with fracture of the thigh bone, caused by the discharge of a fire-arm. Upon the anterior part of the thigh were to be seen five or six wounds, with as many corresponding at the posterior part, and, opposite the bone, a larger opening through which the shot that caused the fracture must have passed.

Under the circumstances, I thought the best apparatus was Dessault's long splint, which was applied, and, at 8 o'clock in the morning, the patient was handed to Dr. Rowand, who took charge of him. The Dr. approved of my treatment, and the same apparatus was continued, with the approbation of Dr. Jackson, who also saw the patient at the same time.

The patient was then very weak in consequence of the great loss of blood, and it was only two days later that full reaction was brought on.

On the 22nd, Dr. Rowand prescribed :

Morphiæ acet. gr.  $\frac{1}{4}$  Tr. Hyosciami min. xxx. mist camphor. drach. i. M. F. H. hor. som. sum.

On the 23rd, tumefaction of the limb commenced, and the Visiting Physician prescribed cold applications, which were continued during three days.

24th. Injection.

26th. The bandages were loosened because the patient could not endure the least extension, so considerable was the tumefaction and pain of the limb.

27th. A cataplasm was applied, renewed two or three times a-day, and continued till death.

July 1st. Patient complaining of want of sleep from great suffering, an opiate was administered at night, 7th, 8th, 9th, 10th, 11th, 1 oz. of wine daily.

At this period extension was had recourse to a second time, without more success, the patient being unable to endure the least traction.

20th. Castor oil. The same treatment was continued during Dr. Rowand's quarter, with the only change of an increase in the dose of wine, to four ounces.

15th August. Dr. Rowand was succeeded by Dr. Douglas as Visiting Physician, Lawson being in one of the wards under Dr. Douglas' care. I was under the impression at the time that Dr. Rowand was to continue his attendance upon the patient, although nothing to that respect had been said by the Visiting Physicians before me. The patient was now nearly as well as he had been the first few days after his admission, his general health appearing not to have suffered much. His appetite and digestion were good, he slept well, and still entertained such hopes of saving his leg that I am convinced he never would have consented to have it amputated. The limb was still in a state of great tumefaction, several of the wounds upon the anterior part of the thigh were cicatrized and the patient was without pain, so long as extension was not attempted. Upon the posterior part of the thigh was to be seen a large wound, an inch and a-half in length, and at the bottom the body of the bone could be felt.

Both extremities of the fractured bone could be felt distinctly, but more particularly that of the superior extremity. The two bones overlapped each other laterally to the extent of two inches and a-half or thereabout, the upper extremity being situated externally. From the 15th August to the 4th September, the patient was not seen by any of the Visiting Physicians. It was at this date that Dr. Douglas, during his visit, asked me who was attending the patient. I answered him that nobody had seen him but myself, and that I had continued the same treatment prescribed by Dr. Rowand at the termination of the quarter. Dr. Douglas then replied, "I do not care who has charge of the patient, but at all events something must be done for him." He then completely and carefully examined the limb, ordered the long splint to be removed, as being now useless, because the patient could not endure any extension, and desired me to place the patient upon a double inclined plane, continuing the cataplasm and wine. From this time I considered the patient as under his care; for every day, at his visit, he stopped at his bed as at the others, which he had not done for three weeks previous, that is since the commencement of his quarter. On the 8th September, the patient complained to Dr. Douglas that he was tired of wine; he then prescribed porter, which was continued for a very long time. On the 16th, a bandage was applied to the limb, allowing a space between the folds for the escape of matter. A liniment was also prescribed on the same day for pains of which he complained in other parts of his body.

On the 21st October the Dr. prescribed for Diarrhœa; Rhæi comp. gr. ij., Doveri gr. ij., ter die.

On the 18th October, Tr. Camphoræ comp. drachm. i. h. s.



On the 26th October, Rhæi comp. gr. ij., Doveri gr. ij., ter die.

The patient continued to be under Dr. Douglas' care till the 8th November, 1852, when I took very ill. During all this time I do not recollect that Dr. Douglas ever proposed amputation of the limb to the patient, but I distinctly recollect that the Doctor in speaking of the patient, said repeatedly before me, "I am afraid it is going to be a bad speculation." The general health of Lawson was suffering much, he was now and then exposed to diarrhœa, his appetite diminished, slept little, and was reduced to a considerable degree of emaciation. From the 8th November I ceased to have any communication with the Hospital, till the beginning of January, when I found the patient in a state that announced a speedy dissolution. He was then under the care of Dr. Rowand till the 6th or 8th of January, at which time Dr. Jackson took charge of Lawson till his death, which occurred on the 21st January, 1852. *Post mortem* next day.

(Signed,) C. E. LEMIEUX,  
House Surgeon,  
M. & E. H.

M. & E. Hospital,  
Quebec, 12th Nov., 1852.

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No. 22.

*Post mortem examination of William Lawson, who died in the Marine and Emigrant Hospital on the 21st January, 1851.*

The cranium being opened the brain was found healthy. A few tubercles were found at the apex of the left lung, and slight adhesions were seen between the lungs and parietes of the chest. The heart was soft and pale. The abdomen was opened and all the viscera presented nothing more than a great paleness.

The thigh, being examined, was found  $2\frac{1}{2}$  inches shorter than the sound one, the two ends of the bone overlapping each other laterally, the upper end being situated at the outer side. There was no union. The fracture was oblique and a very small piece of bone was detached from the upper extremity. There could be no fissures seen in either of the extremity of the bones. They were exposed at the back part of the thigh, through an opening an inch and a half long. Two of the former openings made by the shot behind being confounded in one. All the wounds in front, with the exception of one, were cicatrized. The soft parts were all condensed and presented a kind of cartilaginous appearance. Nothing whatever was interposed between the two extremities of the bone. The sciatic nerve was injured a little higher up than the fracture.

(Signed,) C. E. LEMIEUX,  
House Surgeon.

M. and E. Hospital,  
Quebec, 12th Nov., 1852.

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No. 23.

(Translation.)

QUEBEC, 20th November, 1852.

*Dr. Robitaille's letter in Lawson's case.*

SIR,—In reply to your enquiry, dated 20th instant, I have to state that to the best of my recollection, no consultation was held by the Visiting Physicians, touching Lawson's case.

I have the honor to be,

Sir,

Your very obedient servant.

(Signed,) O. L. ROBITAILLE.

J. Douglas, Esquire, M. D.

No. 24.

*Letter of Dr. Jackson, referring to case of Lawson.*

QUEBEC, 17th Nov., 1852.

MY DEAR SIR.—You ask me in your note of yesterday whether a consultation was called on Lawson's case the day of his admission? and whether you were present at such consultation? I remember Dr. Rowand asked me with one or two others of the Visiting Physicians to look at the case, but to the best of my recollection you were not present.

Very truly yours,

(Signed,)

A. JACKSON.

Dr. J. Douglas.

No. 25.

MY DEAR HALL,—Was a consultation of the Visiting Physicians called on Lawson, shortly after his admission into Hospital?

Did you see the case, and what was your opinion of it?

Under whose charge was Lawson after 15th August and until the middle of September?

Did not Rowand, about that time, ask you occasionally to see Lawson, saying it was not worth his while to go so far to visit one case?

Yours truly,

(Signed,)

J. DOUGLAS.

Quebec, Nov. 15, 1852.

MY DEAR SIR,—The following are my answers to your questions:—

1. In conjunction with Dr. Jackson, I saw Lawson shortly after his admission into Hospital, at Dr. Rowand's request.

2. I saw the case, which I considered a bad one.

3. Doctor Rowand.

4. Yes.

Yours truly,

(Signed,)

J. L. HALL.

Quebec, 16th Nov., 1852.

No. 26.

*Letter from Dr. Hall, referring to case of Lawson.*

QUEBEC, 21st July, 1851.

SIR,—In answer to your questions I have to state:—

1st. That the Commissioners, to the best of my recollection, never did answer any requisition or complaint made to them by the Visiting Physicians.

2nd. That I was not aware that Messrs. Godbout and Pelletier were in any way connected with the Hospital; and if they had any charge whatever, the Visiting Physicians should have been made acquainted with it.

3rd. That on a late examination by the Commissioners, as far as any useful purpose was concerned, it was a farce, and suggestions and complaints were not alluded to. We were told, that it was a simple enquiry into the moral conduct of the House Surgeon. Of this we knew nothing. The meaning given to one of our answers is dishonest, unworthy of the Commissioners, and degrading to us. Until the examination, I never was afforded an opportunity of seeing either the Commissioners or their Secretary, excepting once.

I am, Sir,

Your obedient servant,

(Signed,)

JOHN L. HALL.

No. 27.

(Translation.)

*Petition of Dr. Chaperon.*

To His Excellency, the Right Hon. JAMES, Earl of Elgin and Kincardine, Baron Elgin, K. T., Governor General of British North America, and Captain General and Governor in Chief of the Provinces of Canada, Nova Scotia, New Brunswick, and Prince Edward's Island, and Vice Admiral of the same, &c., &c., &c.

The petition of L. F. Chaperon, of St. Joseph de la Pointe Levi, humbly represents :

That an announcement on his part with respect to a certain means of treating the Asiatic Cholera, called forth a virulent attack on the part of one of the Visiting Physicians of the Marine and Emigrant Hospital, which, on the following day, appeared in the *Canadien*, under the anonymous signature of "Humbug."

That on the thirteenth of last month the Visiting Physicians of the Marine and Emigrant Hospital through Drs. James Douglas and Oliver Robitaille, offered him either for a limited time, or for the entire duration of the epidemic, at the choice and discretion of your Petitioner, the entire care and direction of all the cases of cholera which should thereafter be admitted into the Marine and Emigrant Hospital.

That, for the said purpose, Your Petitioner, bearing an official note addressed to C. E. Lemieux, Esq., House Surgeon to the said Hospital, went immediately to the said Hospital and took charge of the cholera patients by virtue of the said note.

That Your Petitioner considering more particularly the tenor of the note of which he was the bearer, had a right to expect that he would not meet with the opposition and obstacles to which he was continually exposed, during the whole time that the trial of the proposed treatment lasted.

That he deeply regrets the conduct to which both he and his patients were subjected should be of a nature to require the serious attention of the authorities.

That, in consideration of the facts above alleged, and for the reasons aforesaid, Your Petitioner humbly prays Your Excellency to permit and order that the Commission appointed to enquire into certain charges brought against the Marine and Emigrant Hospital, do also enquire into the facts and conduct referred to in the above memorial, so that justice may thereby be done to the proposed treatment, and also to himself.

And Your Petitioner as in duty bound will ever pray.

(Signed,)

L. F. CHAPERON, M. D.

Quebec, 6th November, 1852.

No. 28.

*Marine and Emigrant Hospital Expenses.*

Amount of expenses in 1849.....	£1949	1	2
“ “ 1850.....	1991	11	8½
“ “ 1851.....	2350	9	2

*Salary of the different Officers of the Hospital.*

Visiting Physicians	} Dr. Douglas.....	100	0	0
		Dr. Painchaud.....	100	0
House Surgeon, Dr. Lemieux—salary.....	£125	0	0	
Aliment. Allowance.....	30	0	0	
		155	0	0
Steward, Mr. Nevile—salary.....	£ 90	0	0	
Aliment. Allowance.....	30	0	0	
		120	0	0

Matron, Mrs. Nevile—salary.....	18	0	0	
Aliment Allowance .....	30	0	0	
				48 0 0
House Pupil, Mr. Larue, Aliment Allowance.....				30 0 0

*Expenses for 1851.*

Ice.....	7	5	10
Milk.....	130	13	2
Meat.....	153	11	10½
Washing.....	58	5	0
Firewood.....	85	17	0
Cartage.....	35	16	4½
Interments.....	56	2	0
Sawing Wood.....	22	5	0
Bread.....	148	6	0
Groceries.....	275	19	8½
Drugs.....	80	6	8½
Sundries.....	5	5	7
Tinsmith Work.....	18	3	10½
Hardware.....	7	18	6
Dry Goods.....	103	3	11
Cleaning Privy.....	4	0	0
Plumber Work.....	30	11	8
Coals.....	50	17	0
Wheelwright Work.....	10	10	0
Earthenware.....	5	4	10
Repairing instrument.....	3	3	8
Stationery.....	18	8	5½
Court expenses.....	1	15	6
Carpenter work.....	78	10	8
Insurance.....	18	0	0
Assessment.....	13	10	0
Linseed.....	4	7	1
Apparatus.....	7	9	6
Dr. Godbout during Dr. Lemieux's illness.....	13	6	8
Contingencies, to wit: Extras ordered by Visiting Physicians for the patients, and bought by the Steward—January, £4 6s. 5s. February, £4 1s. 11d; March, £5 10s. 4d.; April, £3 9s. 8d. May, £3 7s. 8d.; June, £13 14s 3½d.; July, £13 14s. 2½d.; August, £10 10s. 3d.; September, £7 17s. 10½d.; October, £9 9s. 1d.; November, £7 9s. 8d.; December, £6 14s. 10d.	90	6	2½

*Servants, Nurses, &c.*

January, 9.....	£16	12	0	August, 11.....	18	10	0
February, 6.....	8	12	4	September, 16.....	23	18	0
March, 8.....	10	9	2	October, 20.....	24	7	4
April, 8.....	11	3	4	November, 15.....	18	8	4
May, 14.....	15	4	8	December, 9.....	12	1	0
June, 13.....	18	9	8		191	18	10
July, 13.....	20	3	0				

NOTE.—Some of the Servants included in the number. opposite each month were employed only for a few days.

(Signed,) N. CASAULT,  
S. T. C. M. E. H.

The Secretary Treasurer is paid 2½ per cent. on the amount expended.

No. 29.

RETURN of all Patients admitted into the Marine and Emigrant Hospital, from the 1st of January, 1851, up to the 31st December, 1851.

Remained from 1850,.....	50
Total admitted,.....	1330
	—1380
Total discharged,.....	1179
Total died,.....	162
Total remaining,.....	39
	—1380

*Classification of Diseases.*

DISEASES.		DISEASES.	
Fever, .....	311	Dropsy, .....	4
Inflammation of the lungs,.....	55	Amenorrhœa, .....	1
Inflammation of the liver,.....	5	Scrofula, .....	3
Inflammation of the bowels,.....	13	Tympanitis, .....	1
Inflammation of the heart, .....	5	Pregnancy, .....	18
Rheumatism,.....	100	Phthisis,.....	4
Gastrodynia,.....	1	Hæmorrhoides, .....	1
Gastritis, .....	2	Erysipelas, .....	5
Febricula,.....	51	Cancer labii,.....	1
Febris intermit,.....	11	Subluxatio, .....	2
Dyspepsia, .....	3	Contusions, .....	74
Dysentery, .....	53	Necrosis,.....	2
Diarrhœa, .....	37	Caries maxil. bone,.....	1
Cynanche Tonsillar,.....	1	Periostitis, .....	1
Of the skin, .....	20	Catarrhus Vesicæ, .....	1
Variola, .....	26	Diseases of the Eyes.....	8
Rubeola, .....	18	Burns and scalds,.....	6
Apoplexia,.....	1	Frostbites, .....	3
Congestion of the brain,.....	3	Hernia, .....	4
Scorbutus, .....	2	Strictures, .....	3
Epilepsia, .....	1	Gangrena spontanea,.....	1
Hysteria, .....	1	Concussion of the brain,.....	2
Neuralgia, .....	2	Inflammation of testicles,.....	13
Delirium Tremens,.....	3	Syphilis, .....	112
Paralysis, .....	4	Fractures, .....	20
Insanity, .....	1	Dislocations, .....	2
Nephritis, .....	1	Wounds, .....	17
Otilis, .....	1	Abscesses, .....	105
Cholera,.....	152	Ulcers, .....	30
Spermatorrhœa,.....	1		
		Total,	1330

(Signed,) C. E. LEMIEUX,  
House Surgeon,  
Marine and Emigrant Hospital.

Quebec, 29th November, 1852.

No. 30.

RETURN of all the Patients admitted into the Marine and Emigrant Hospital,  
from the 1<sup>st</sup> of January, 1852, up to the 27th November, 1852.

Remained from 1851,.....	39
Total admitted,.....	1077
	—1116
Total discharged,.....	946
Total died,.....	103
Total remaining,.....	67
	—1116

*Classification of Diseases.*

DISEASES.		DISEASES.	
Fever, . . . . .	144	Phthisis, . . . . .	4
Inflammation of the lungs, . . . . .	62	Hæmorrhoides, . . . . .	3
Inflammation of the liver, . . . . .	5	Erysipelas, . . . . .	5
Inflammation of bowels, . . . . .	9	Pertussis, . . . . .	2
Inflammation of the heart, . . . . .	2	Asthma, . . . . .	1
Phrenitis, . . . . .	1	Catarrh. vesicæ, . . . . .	1
Rheumatism, . . . . .	89	Wounds, . . . . .	27
Febricula, . . . . .	62	Abscesses, . . . . .	76
Feb. intermitt, . . . . .	9	Subluxatio, . . . . .	2
Dysentery, . . . . .	50	Contusions, . . . . .	85
Diarrhœa, . . . . .	8	Necrosis, . . . . .	1
Cynanche Tonsill, . . . . .	5	Periostitis, . . . . .	1
Diseases of the skin, . . . . .	10	Diseases of the eyes, . . . . .	15
Variola, . . . . .	13	Burns and scalds, . . . . .	10
Rubeola, . . . . .	7	Frostbites, . . . . .	9
Scorbutus, . . . . .	2	Strictures, . . . . .	5
Hysteria, . . . . .	1	Hydrocele, . . . . .	4
Delirium Tremens, . . . . .	1	Fist. in ano. . . . .	1
Paralysis, . . . . .	2	Diseases of ankle joint, . . . . .	1
Insanity, . . . . .	1	Concussion of brain, . . . . .	2
Mania, . . . . .	1	Inflammation of testicles, . . . . .	10
Otorrhœa, . . . . .	1	Syphilis, . . . . .	111
Cholera, . . . . .	121	Fractures, . . . . .	24
Dropsy, . . . . .	2	Dislocations, . . . . .	3
Phthyalism, . . . . .	7	Ulcers, . . . . .	34
Scrofula, . . . . .	3		
Morbus coxarius, . . . . .	1		
Pregnancy, . . . . .	27		
		Total,	1077

(Signed,) C. E. LEMIEUX,  
House Surgeon,  
Marine and Emigrant Hospital.

Quebec, 2nd December, 1852.

*Mons. Casault's Suggestions to Commission.*

QUEBEC, 4th December, 1852.

GENTLEMEN,—I postponed my answer to your letter of the 24th ultimo, in expectation that I would be able to give you my own views on the system upon which the management of the Hospital is now conducted, but not having yet been able to do so at full length, I feel that I cannot delay any more the transmission of the enclosed statement.

I may be, however, permitted to say and suggest that four Visiting Physicians would be sufficient; and that they ought to be paid, say £50 per year. It would put all the Visiting Physicians on the same footing, and it would not (after the death and resignation of present incumbent) increase the present expenditure, and would be a remuneration, though hardly sufficient, for the services of those gentlemen, who cannot in an Hospital solely devoted to Mariners and Emigrants, desire from their services that indirect profit, and acquire that professional celebrity which they could acquire in a General Hospital.

I will also add that the salary of the House Surgeon is not such as will ensure the services of efficient men. I consider that to be prejudicial to the interests of the Institution, as it is impossible to get for that price but a young man scarcely without any experience, who, as soon as he is well acquainted with the duties of his office, understands the wants and requirements of an Hospital, and has been made an efficient officer, looks after better pursuits and resigns his situation. As it is, the Steward and Matron, being always husband and wife, are better paid than him, though his inferior officers.

The Steward and Matron should not be husband and wife, but should exercise a kind of check on each other, and act separately, under the immediate superintendence and orders of the House Surgeon, and have no concurrent power with him. I am also of opinion that Government should never interfere in the nomination of these two officers.

The present system is too complicated. There are too many conflicting powers.

I have the honor to be,  
Gentlemen,  
Your most obedient servant,

(Signed,) N. CASAULT.

Drs. McDonell and Nelson, Commis-  
sioners of Enquiry M. & E. Hospital.

(Translation.)

QUEBEC, 20th March, 1853.

SIR,—I have been officially informed that a Report of the Marine Hospital for the last six years has been sent in to the Commission, including a statement of the deaths occurring both in the sheds and within the Hospital, which must have the effect of shewing in the said Report a most alarming mortality, and of affording a very unfavorable idea of the practice pursued in the Hospital.

I take the liberty of addressing to you herewith a copy of the said Report, with the subtraction which should have been made therefrom, and of another comparative statement for the last ten years.

I would beg of you to manage, if possible, that these two Reports should follow that of the Commission.

I have the honor, &c., &c.,

(Signed,) JOS. PAINCHAUD.

Mr. Et. Parent,  
Assistant Provincial Secretary.

(Translation.)

## RETURN of the Admissions, Discharges and Deaths at the Marine and Emigrant Hospital for the years 1847, 1848, 1849, 1850, 1851, 1852 inclusive.

Year.	Remaining in Hospital 1st. Jany.	Subsequently admitted.	Total.	Discharged.	Deaths.	Remaining in Ho-pital 31st Dec.
1847 .....	24	4973	4997	3697	1228	72
1848 .....	72	1033	1105	1030	57	18
1849 .....	18	1493	1511	1231	263	17
1850 .....	17	1222	1239	1122	67	50
1851 .....	50	1330	1380	1179	162	39
1852 .....	39	1094	1133	994	106	33
		11145		9253	1883	

N. B. In this Report the persons are included who died in the sheds during the epidemics of 1847, 1849, 1851, 1852.

Total number of deaths, 1883.

To be subtracted from the total number of deaths :

Deaths by Typhus in 1847, . . . . .	1198
“ “ Cholera in 1849, . . . . .	197
“ “ “ “ 1851, . . . . .	85
“ “ “ “ 1852, . . . . .	92
	1572
Deaths from other diseases, . . . . .	311

## REPORT of the Admissions, Discharges and Deaths at the Marine and Emigrant Hospital for the ten years prior to the epidemic of 1847.

Years	Admissions.	Discharges.	Deaths.	Years.	Admissions.	Discharges.	Deaths.
1837.....	923	853	70	1842 .....	1149	1079	70
1838.....	627	600	27	1843 .....	1109	1057	52
1839.....	961	922	39	1844 .....	940	919	21
1840.....	1398	1348	50	1845 .....	1434	1392	42
1841.....	1452	1407	45	1846 .....	1714	1625	89

C. E. LEMIEUX,  
House Surgeon, M. & E. H.

Jos. Painchaud, Esq.,  
Vis. Phy. M. & E. H.

(Translation.)

*Remarks on the Report of 1847.*

The patients were placed in the sheds so soon as a part of them were completed, but as at first the roof was only composed of boards, not tongued and grooved, it became necessary, at the approach of a storm, hurriedly to remove all the patients into the Hospital. The whole building was filled, and indeed over-crowded ; the Chapel, Commissioner's Room, a part of the House Surgeon's quarters, the passages, staircases, garrets, and even the cellars ; it was literally necessary to make great strides to avoid treading upon the sick,



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the servants themselves took sick, and it was found impossible to replace them, and still more so to increase their number, insomuch that the patients could not always procure drink. This state of things lasted several weeks. Two of the Visiting Physicians fell victims to the typhus fever, and another (the undersigned) narrowly escaped following them to the tomb. Is it now surprising that so great a number of patients should have fallen victims in 1847? Where in America or in Europe, will an Hospital be found, placed in similar difficulties. Can the number of deaths which took place in the sheds with any justice be considered as an appreciation of the practice of the Visiting Physicians of the Marine Hospital? Has the number of the deaths, which occurred at Point St. Charles, been included in the Report of the Montreal General Hospital? Indeed, one of the Commissioners and Visiting Physicians of the Montreal General Hospital would not so willingly have submitted to such a thing! and nevertheless, a perfect analogy exists between the sheds at Montreal and those at Quebec.

(Signed,)

JOSEPH PAINCHAUD,  
V. P. M. & E. H.

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QUEBEC:—PRINTED BY JOHN LOVELL, AT HIS STEAM PRINTING ESTABLISHMENT.

*Joseph Painchaud*

# REPORT

*D<sup>r</sup> F. J. Patrick*  
OF

DRS. NELSON AND MACDONNELL,

AND

ZEPHIRIN PERRAULT, ESQ, ADVOCATE,

OF THE

✓ *296*  
QUEBEC, MARINE AND EMIGRANT  
HOSPITAL.

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