

why it should be done away with. In connection with the Adelaide Hospital she had admitted patients if there was room and the case was suitable. There had never been any difficulty in her experience. The production of a certificate should not be essential.

Mr. Reed: Here we have a case of a man walking from Mount Eden Railway-station presenting himself at the Hospital door after climbing up the steps. The porter sees him, and tells him to go and get a doctor's certificate. The man complains of pain. Do you think the porter justified in asking him to go and get a certificate?—Some of these cases are very delusive, and men will walk to the last step sometimes. If you were taken in once or twice you would know.

In the case of Miss Guthrie, the consumptive, do you know that Dr. Collins was away on a three-weeks vacation at the time one of the juniors communicated the fact that he (Dr. Collins) discovered tubercle bacilli?—I don't dispute that, because I know nothing to the contrary.

Dr. Robertson: In regard to the administration of anæsthetics, what is your objection to junior residents acting?—I think the giving of it requires experience, even in the simplest cases.

In reference to doctors' certificates being presented on admission, the witness said she had always found such certificates of help when she was a resident of Adelaide Hospital, because the patients were brought in in the mornings, when the staff was in full work, and there was no one available to see the cases so brought in. The production of the certificate prevented any delay in the patients being admitted and put in a ward. It did not give much help in the treatment of cases, as frequently the certificates were bare of details.

Dr. Robertson: In the case of a man coming up the steps and complaining to the porter, is he the proper person to decide as to the man being admitted?—I don't think he can decide. A doctor should see the patient before he was sent away.

Are the residents, who are qualified practitioners, capable to give a certificate?—Yes, I should think so.

Dr. Collins: Do you consider working on plague bacilli infectious?—Not to the person working if proper precautions are taken.

You don't think it a dangerous thing to work with?—Not if the person is careful. It is carelessness that makes it dangerous.

In Japan, where there are the most skilled bacteriologists of the times, four or five men have died, and would you say that their death was due to carelessness?—They carried on investigation at plague-time, when the plague was actually about. That is a different thing to doing culture-work. I did not consider I was in any danger. A person was not open to danger when taking proper precautions. I could say absolutely that I would be safe in working with plague bacilli.

Asked as to the practice followed in Adelaide Hospital as to the selection of patients for different wards, Dr. Frost said no doubt care would be exercised. She knew a plague patient was one time admitted and taken to a ward, and next day a neighbouring patient died from plague.

Dr. Collins: Do you think such cases should be admitted?—That was an exceptional case, and exceptions prove the rule, don't they?

The witness explained that the case was admitted by a resident who had worked in Hongkong, and she believed no person in the city could have determined better than he could that it was a case of plague. In reply to questions, she said she did not know if a resident was always on duty at the Auckland Hospital.

Mr. Beetham here interceded, and told Dr. Collins that the point at issue was that a man had been turned away from the Auckland Hospital by a porter without being seen by a member of the resident staff. It was a clear case that should have been admitted.

The witness said she knew of no case which should have been admitted to the Adelaide Hospital and was refused, but she had an impression that something occurred in connection with a London hospital, where a patient, after being examined by a resident, was turned away as an unfit case and died within twelve hours.

Dr. Collins: Do you think that similar accidents could happen in a hospital where patients are allowed to come and the question of their fitness is left to the junior to decide?—I consider that if a patient comes to the Hospital it would be very much better for the junior to admit him than send him away.

The Chairman: There is no harm in having a certificate, but if a patient has not got one he should not be excluded.

Dr. Collins: Do you know of any case sent away to seek a doctor's certificate?—No.

Have you done many *post-mortems* at the Hospital?—Virtually none. They have been practically discontinued since there was a row about one. The mortuary porter used to generally do them under my supervision.

And you have worked in the laboratory on organisms of a very dangerous nature?—Yes.

Do you think it is safe for a person, even with the greatest care, who is working on dangerous organisms to frequent the operating-theatre?—I think you can take cultures and sub-cultures. I don't think there is any danger to me; I don't know about any one else.

In regard to the letter sent to the Health Department for an order to admit Miss Guthrie to the sanatorium?—I know it was written, but do not know who sent it.

Who made the diagnosis?—I know who made the diagnosis, and I consider it disgraceful. I ought to have resigned my position at that time.