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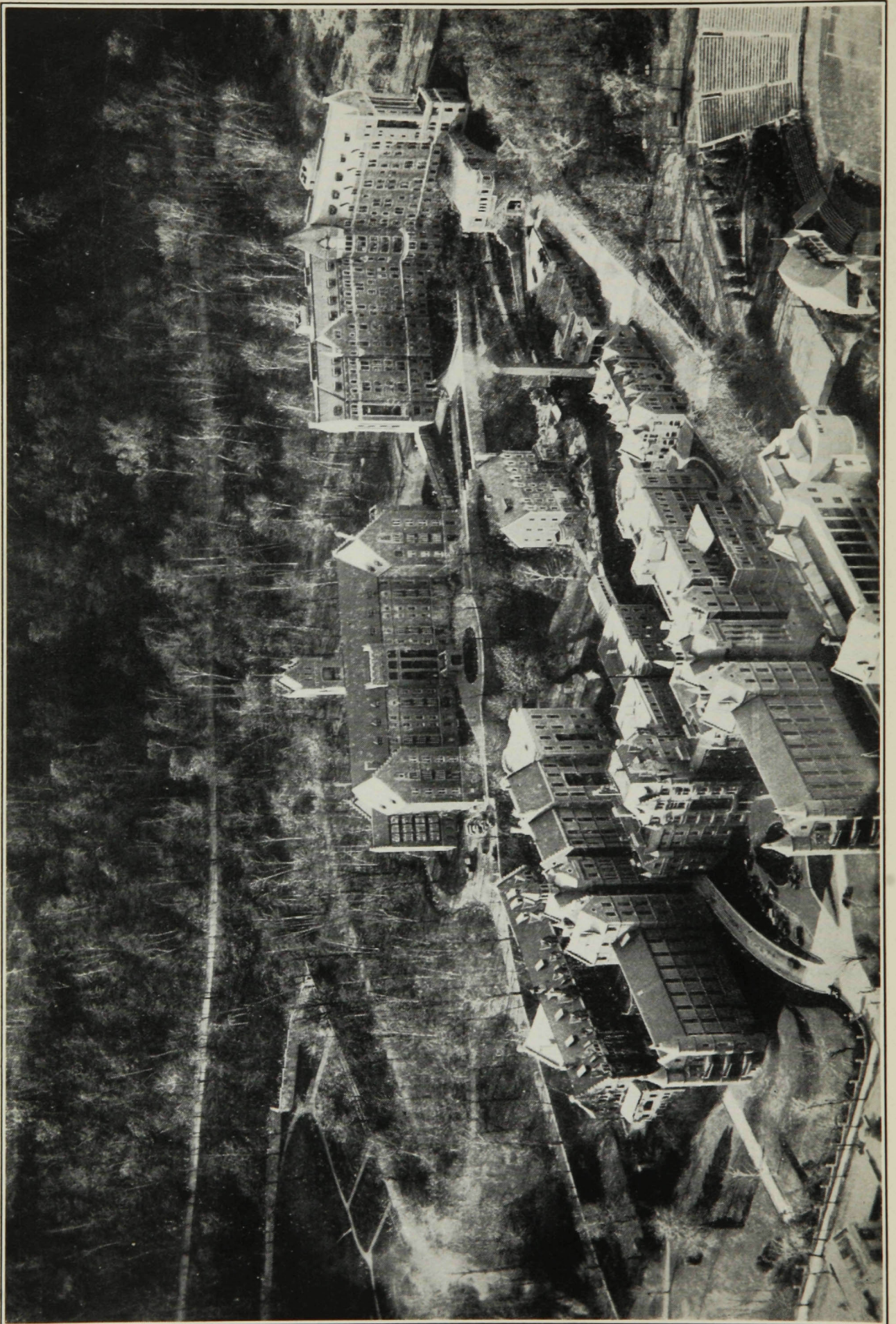
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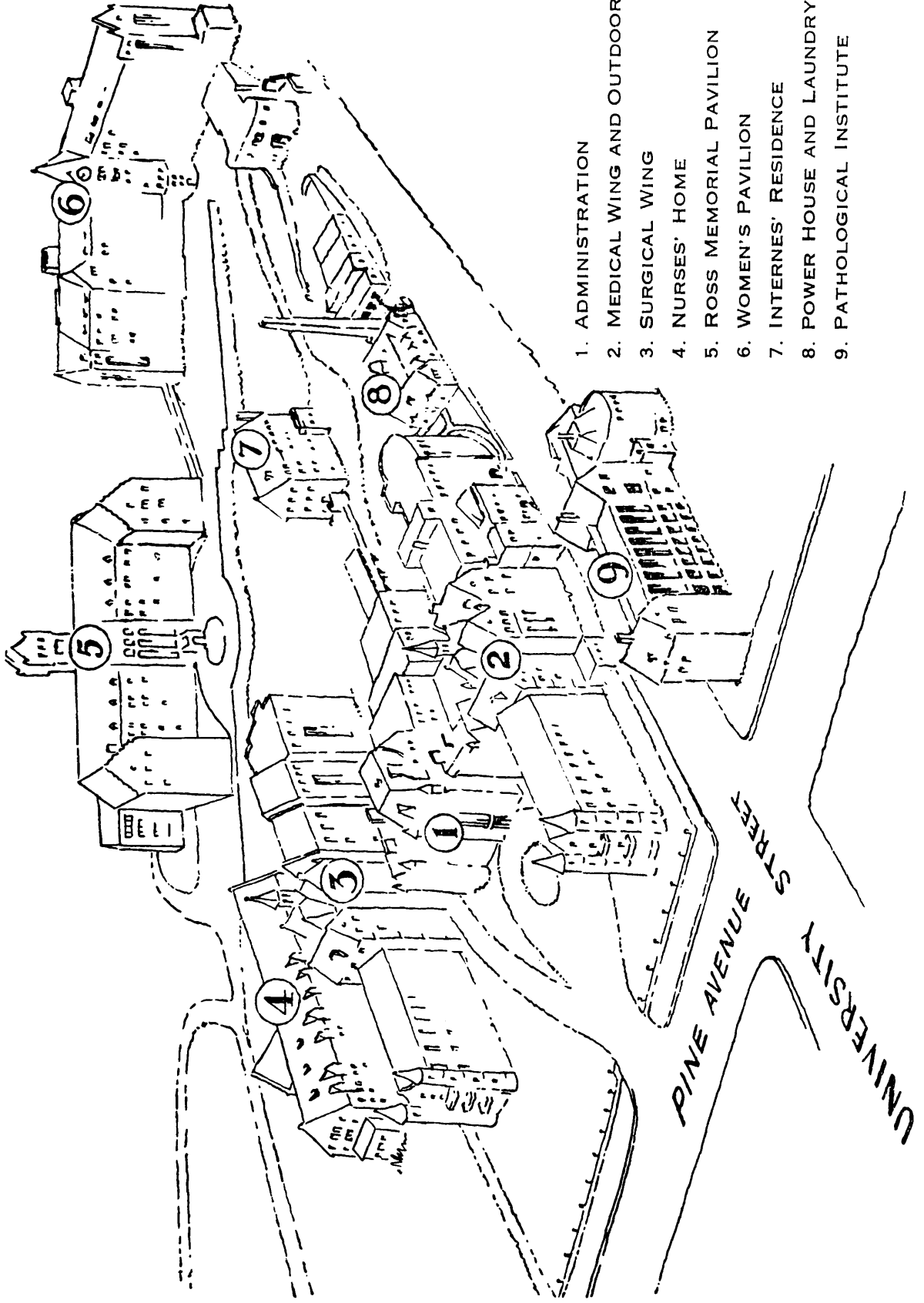
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ROYAL VICTORIA HOSPITAL



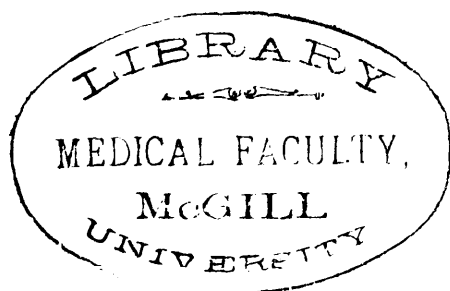
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9. PATHOLOGICAL INSTITUTE

THE
ROYAL VICTORIA HOSPITAL
MONTREAL

THIRTY-SEVENTH
ANNUAL REPORT

for

THE YEAR ENDED
31st DECEMBER, 1930



VISITOR

1930

**THE RIGHT HONOURABLE VISCOUNT WILLINGDON
G.C.S.I., G.C.I.E., G.B.E.**

GOVERNOR GENERAL OF CANADA

I N D E X



Founder and Governors.....	7
Associate Governors.....	8
Consulting Staff.....	9
Officers.....	11
Medical Board.....	13
Attending Staff.....	15
Resident Staff.....	21
Chairman's Remarks.....	23
Superintendent's Report.....	27
Financial Statements.....	35
Auditor's Report.....	41
Statistics.....	42
Report of the Auxiliary Board of Governors.....	43
Nursing School Report.....	47
Graduating Class.....	51
Report of Department of Nutrition.....	53
Social Service Department Report.....	57
Report of the Pre-Natal Settlement Clinics.....	65
McGill Alumnae Library Committee Report.....	71
Contributions and Donations.....	73
Department of Medicine Report.....	77
Department of Surgery Report.....	87
Department of Obstetrics and Gynæcology Report.....	98
Department of Ophthalmology Report.....	134
Department of Oto-Laryngology Report.....	136
Department of Urology Report.....	142
Pathological Institute Report.....	147
Department of Röntgenology Report.....	153
Department of Radium.....	155
List of Clinics, Out-Patients' Department.....	158
Regulations Governing Public Ward Patients.....	159
Visitors to Women's Pavilion.....	160

FOUNDERS

THE RIGHT HON. LORD MOUNT STEPHEN
THE RIGHT HON. LORD STRATHCONA AND MOUNT ROYAL

GOVERNORS

1931

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LORD ATHOLSTAN
T. B. MACAULAY

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President, Canadian National Railways, SIR HENRY THORNTON, K.B.E.
Principal, McGill University,
SIR ARTHUR CURRIE, G.C.M.G., K.C.B., LL.D.
Dean of the Faculty of Medicine, McGill University,
C. F. MARTIN, B.A., M.D., C.M., LL.D. (Queen's)

ASSOCIATE GOVERNORS

1931

JAMES B. ALLAN

D. FORBES ANGUS

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HUNTLY R. DRUMMOND

ELWOOD B. HOSMER

W. J. MORRICE

CONSULTING STAFF

GEORGE E. ARMSTRONG, C.M.G., M.D., LL.D. (QUEEN'S)

H. S. BIRKETT, C.B., M.D., LL.D. (MCGILL), F.A.C.S.

G. GORDON CAMPBELL, B.Sc., M.D.

W. W. CHIPMAN, B.A., M.D. (EDIN.), LL.D., F.A.C.S., F.R.C.S. (EDIN.)

J. B. COLLIP, M.A., M.D. (ALBERTA), PH.D. (TORONTO)

A. S. EVE, C.B.E., M.A. (CANTAB), D.Sc., F.R.S.C., F.R.S.

F. G. FINLEY, C.B., M.D. (LOND.)

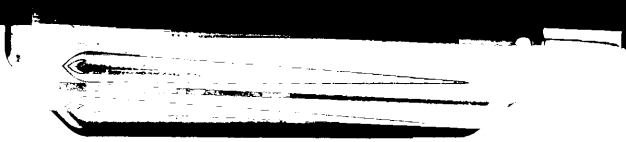
F. M. FRY, B.A., M.D.

LOUIS V. KING, M.A. (CANTAB.), D.Sc., F.R.S.

G. W. OLIVER, D.D.S., L.D.S.

JOHN TAIT, B.Sc., M.B., CH.B., M.D., D.Sc., F.R.S.E.

S. E. WHITNALL, M.A., M.D., B.Ch. (OXON.), M.R.C.S., L.R.C.P.



OFFICERS

1931

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SIR HERBERT HOLT

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SIR HERBERT HOLT, Chairman
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W. R. CHENOWETH

ASSISTANT TO THE SUPERINTENDENT
A. G. SMITH

OFFICE MANAGER
J. A. FRASER

CREDIT MANAGER
W. BLUES

ACCOUNTANT
H. G. WALSH

REGISTRAR-IN-CHIEF
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ADMITTING OFFICER
JOHN E. DE BELLE, M.D.

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SUPERVISOR, ROSS PAVILION
MISS B. CAMPBELL, R.N.

SUPERVISOR, WOMEN'S PAVILION
MISS C. V. BARRETT, R.N.

DIRECTOR OF SOCIAL SERVICE
MRS. H. A. PAICE, R.N.

CHIEF APOTHECARY
MISS M. GRACE MacDONALD, PHM.B.

DIETITIAN-IN-CHIEF
MISS C. M. LARGE

STEWARD
JOHN MILLER

NURSES' HOME
MISS M. MacINTOSH, R.N. (In Charge)

SOLICITORS
MEREDITH, HOLDEN, HEWARD & HOLDEN

AUDITOR
LEWIS BRIMACOMBE, C.A.

MEDICAL BOARD

1931

E. W. ARCHIBALD, B.A., M.D., C.M., F.A.C.S., HON. F.R.C.S. (ENG.)

W. G. M. BYERS, M.D., D.Sc.

J. R. FRASER, M.D., F.A.C.S.

W. F. HAMILTON, M.D., C.M.

C. B. KEENAN, D.S.O., M.D., C.M.

D. W. MacKENZIE, B.A., M.D.

C. F. MARTIN, B.A., M.D., C.M., LL.D. (QUEEN'S)

J. C. MEAKINS, M.D., LL.D. (EDIN.), F.A.C.P., F.R.C.P. (C.),
F.R.C.P. (EDIN.), F.R.S.C., F.R.S.E.

H. OERTEL, M.D.

A. H. PIRIE, M.D., D.Sc. (EDIN.)

E. HAMILTON WHITE, B.A., M.D., F.A.C.S.

ATTENDING STAFF

"Arranged in Alphabetical Order"

January 1st, 1931

DEPARTMENT OF MEDICINE

Physician-in-Chief

J. C. MEAKINS, M.D., LL.D. (EDIN.), F.A.C.P., F.R.C.P. (C),
F.R.C.P. (EDIN.), F.R.S.C., F.R.S.E.

Physicians

W. F. HAMILTON, M.D., F.R.C.P. (C.)
C. F. MARTIN, B.A., M.D., LL.D. (QUEEN'S), F.R.C.P. (C.)

Assistant Physicians

J. R. BYERS, M.D.
R. H. M. HARDISTY, D.S.O., M.C., B.A., M.D.
A. T. HENDERSON, M.D.
J. KAUFMANN, M.D.
D. S. LEWIS, M.D., M.Sc., F.R.C.P. (C.)
D. MacCALLUM, M.D.
E. H. MASON, Ph.B., M.D., F.R.C.P. (C.)
D. W. McKECHNIE, D.S.O., M.D.
C. F. MOFFATT, B.A., M.D.
COLIN G. SUTHERLAND, M.D.

Associates in Medicine

G. RAYMOND BROW, M.D., F.R.C.P. (C.)
NORMAN BROWN, M.D.
D. GRANT CAMPBELL, B.A., M.D.
W. C. GOWDEY, M.D.
C. R. JOYCE, M.D.
J. L. D. MASON, B.A., M.D.
W. DE M. SCRIVER, B.A., M.D., F.R.C.P. (C.)
J. J. WALKER, M.D.
J. C. WICKHAM, B.A., M.D.

Clinical Assistants

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W. W. EAKIN, M.D.
D. S. MacINTOSH, B.A., M.D.
W. G. McLELLAN, B.A., M.D.
C. J. TIDMARSH, M.A., M.D.

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F.R.C.P. (EDIN.), F.R.S.C., F.R.S.E.

Research Associates

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RONALD V. CHRISTIE, M.B., CH.B. (EDIN.)
C. N. H. LONG, B.Sc., M.Sc., M.D.
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W. DE M. SCRIVER, B.A., M.D., F.R.C.P. (C.)
DAVID SLIGHT, M.B., CH.B., D.P.M., M.R.C.P. AND S. (LOND.)

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Pædiatrician-in-Charge

H. B. CUSHING, B.A., M.D., F.R.C.P. (C.)

Pædiatrician

S. GRAHAM ROSS, D.S.O., M.C., B.A., M.D., M.R.C.P. (LOND.)

Assistant Pædiatrician

H. P. WRIGHT, B.A., M.D.

Associates in Medicine

R. CAMERON STEWART, B.Sc. (ARTS), M.D.
R. R. STRUTHERS, B.A., M.D.
W. E. WILLIAMS, M.D.

Clinical Assistants

JESSIE BOYD SCRIVER, B.A., M.D.
H. C. BUSSIERE, B.Sc., M.D.
AUBREY K. GEDDES, M.D.

SUB-DEPARTMENT OF DERMATOLOGY

Dermatologist-in-Charge

P. BURNETT, D.S.O., M.D., M.R.C.S., L.R.C.P.

Associate in Medicine

J. L. D. MASON, B.A., M.D.

Clinical Assistant

LEMUEL P. EREAUX, B.Sc. (ARTS), M.D.

SUB-DEPARTMENT OF NEURO-PSYCHIATRY

Neuro-Psychiatrist-in-Charge

C. K. RUSSEL, B.A., M.D., F.R.C.P. (C.)

Psychiatrist

DAVID SLIGHT, M.B., CH.B., D.P.M., M.R.C.P. AND S. (LOND.)

Associates in Neuro-Psychiatry

W. T. B. MITCHELL, M.D.
A. G. MORPHY, B.A., M.D.
A. W. YOUNG, M.D.

Clinical Assistants

J. N. PETERSEN, B.Sc. (Arts), M.D.
B. SILVERMAN, M.D.

SUB-DEPARTMENT OF PHYSIO-THERAPY

Physio-Therapist-in-Charge

NORMAN BROWN, M.D.

Assistant Physio-Therapist

LEMUEL P. EREAUX, B.Sc. (Arts), M.D.

Assistants

MISS M. BARKER, R.N.
MISS ANITA ROSS, R.N.

DEPARTMENT OF SURGERY

Surgeon-in-Chief

E. W. ARCHIBALD, B.A., M.D., F.A.C.S., Hon. F.R.C.S. (Eng.)

Surgeon

C. B. KEENAN, D.S.O., M.D., F.A.C.S.

Assistant Surgeons

F. E. McKENTY, M.D., F.R.C.S. (Eng.), F.A.C.S.
F. A. C. SCRIMGER, V.C., B.A., M.D., F.A.C.S.

Associates in Surgery

JOHN ARMOUR, M.Sc., M.D.
MARK KAUFMANN, B.A., M.D.
GEORGE GAVIN MILLER, M.Sc., M.D.
DUDLEY E. ROSS, M.Sc., M.D.
A. WILKIE, B.A., M.D.

Clinical Assistants

GEORGE C. ANDERSON, M.D.
NORMAN BETHUNE, M.B. (Toronto), F.R.C.S. (Edin.)
EDGAR M. COOPER, M.D.
HOWARD LER. DAWSON, B.A., M.D.

SUB-DEPARTMENT OF ORTHOPÆDICS

Surgeon-in-Charge

W. G. TURNER, M.C., B.A., M.D., M.R.C.S. (Eng.), F.A.C.S.

Assistant Surgeon

W. J. PATTERSON, B.A., M.D., F.A.C.S.

SUB-DEPARTMENT OF NEUROLOGICAL SURGERY

Surgeon-in-Charge

WILDER G. PENFIELD, Litt.B. (Princeton), M.D. (John Hopkins),
M.A., B.Sc. (Oxon.)

Assistant Surgeon

W. V. CONE, B.S., M.D.

SUB-DEPARTMENT OF ANÆSTHETICS

Anæsthetist-in-Charge

W. B. HOWELL, M.D.

Anæsthetists

J. W. ARMSTRONG, B.A., M.D.
WESLEY BOURNE, M.Sc., M.D.

Assistant Anæsthetists

E. T. ENRIGHT, R.N.
H. KENDALL, R.N.
M. ROACH, R.N.
D. M. L. TEGGART, M.D.

SUB-DEPARTMENT OF DENTISTRY

Dental Surgeon in Charge

F. W. SAUNDERS, D.D.S.

Attending Dentist

A. W. MITCHELL, D.D.S.

DEPARTMENT OF OBSTETRICS AND GYNÆCOLOGY

Obstetrician and Gynæcologist-in-Chief

J. R. FRASER, M.D., F.A.C.S.

Obstetricians and Gynæcologists

H. C. BURGESS, M.D., F.A.C.S.
J. W. DUNCAN, M.D., F.A.C.S.
J. R. GOODALL, O.B.E., B.A., M.D., D.Sc., F.A.C.S.
H. M. LITTLE, B.A., M.D., F.A.C.S.

Assistant Obstetrician and Gynæcologist

W. A. G. BAULD, D.S.O., M.D., F.A.C.S.

Clinical Assistants

A. D. CAMPBELL, M.D.
P. J. KEARNS, M.D., M.Sc.
G. C. MELHADO, M.D.
IVAN Y. PATRICK, M.D.
ELEANOR PERCIVAL, M.D.
N. W. PHILPOTT, M.D.

Pathologist

L. J. RHEA, M.D.

Consulting Ophthalmologist

S. H. McKEE, C.M.G., B.A., M.D.

DEPARTMENT OF OPHTHALMOLOGY

Ophthalmologist-in-Chief

W. GORDON M. BYERS, M.D., D.Sc.

Assistant Ophthalmologist

F. T. TOOKE, B.A., M.D.

Associates in Ophthalmology

J. A. MacMILLAN, M.D., F.A.C.S.

A. G. McAULEY, M.D., F.A.C.S.

J. ROSENBAUM, M.D.

Clinical Assistant

KENNETH B. JOHNSTON, M.D.

DEPARTMENT OF OTO-LARYNGOLOGY

Oto-Laryngologist-in-Chief

E. HAMILTON WHITE, B.A., M.D., F.A.C.S.

Assistant Oto-Laryngologist

J. T. ROGERS, B.A., M.D.

Associates in Oto-Laryngology

D. H. BALLON, B.A., M.D., F.A.C.S.

K. O. HUTCHISON, M.D.

W. J. McNALLY, B.A., M.Sc., M.D., D.L.O.R.C.P. AND S. (ENG.)

G. E. TREMBLE, M.D., D.L.O.R.C.P. AND S. (ENG.)

DEPARTMENT OF UROLOGY

Urologist-in-Chief

D. W. MacKENZIE, B.A., M.D., F.A.C.S.

Associates in Urology

ALLAN B. HAWTHORNE, B.A., M.D.

MAGNUS SENG, M.B.

Clinical Assistants

CHARLES T. LUNDON, M.D.

MAX RATNER, M.D.

DEPARTMENT OF PATHOLOGY

Pathologist-in-Chief

H. OERTEL, M.D.

Assistant Pathologist

T. R. WAUGH, B.A., M.A., M.D.

Prosector

W. H. CHASE, M.D.

DEPARTMENT OF BACTERIOLOGY

Bacteriologist-in-Charge

E. G. MURRAY, O.B.E., M.A., L.S.A.

Bacteriologist

A. A. BRUERE, M.D.

Assistant Bacteriologist

W. W. BEATTIE, B.A., M.D.

DEPARTMENT OF ROENTGENOLOGY

Röntgenologist-in-Chief

A. HOWARD PIRIE, D.Sc. (EDIN.), M.D.

Assistant Röntgenologist

E. C. BROOKS, L.R.C.P. AND S. (EDIN.)

Associate in Röntgenology

J. C. LANTHIER, M.D.

RESIDENT STAFF

1st January, 1931

House Physicians

Resident: DR. G. D. TAYLOR

DR. J. W. MACLEOD	DR. L. J. JOHNSTON
DR. T. J. QUINTIN	DR. H. L. BACAL
DR. J. R. PARMLEY	DR. L. DE WITT WILCOX
DR. A. D. TEMPLE	DR. ROBT. GALE BOYD
DR. V. D. SCHAFFNER	DR. HAROLD T. WERNER
DR. A. M. VINEBERG	DR. DOROTHEA MELLOR

House Surgeons

Resident: DR. C. A. McINTOSH

DR. E. WALTER WORKMAN	DR. H. PAUL MELANSON
DR. DAVID A. McLENNAN	DR. JOHN D. MALLOY
DR. W. S. RODGER	DR. J. E. McARTHUR
DR. J. R. DAVIDSON	DR. C. C. COLE

House Neuro-Surgeons

DR. A. R. ELVIDGE	DR. EARL BREWER
-------------------	-----------------

House Obstetricians and Gynæcologists

Resident: DR. W. F. HARRISON

DR. W. G. TERWILLIGER	DR. R. MOWRY
DR. J. V. MISSETT, JR.	DR. L. COCKLE
DR. J. ROSS VANT	DR. W. T. DAILY

House Oto-Laryngologists

DR. G. C. CURRIE	DR. JAMES D. McKINNON
	DR. S. G. ELBERT

House Urologists

DR. F. G. PRICE	DR. HAROLD G. BEESON
-----------------	----------------------

House Pathologists

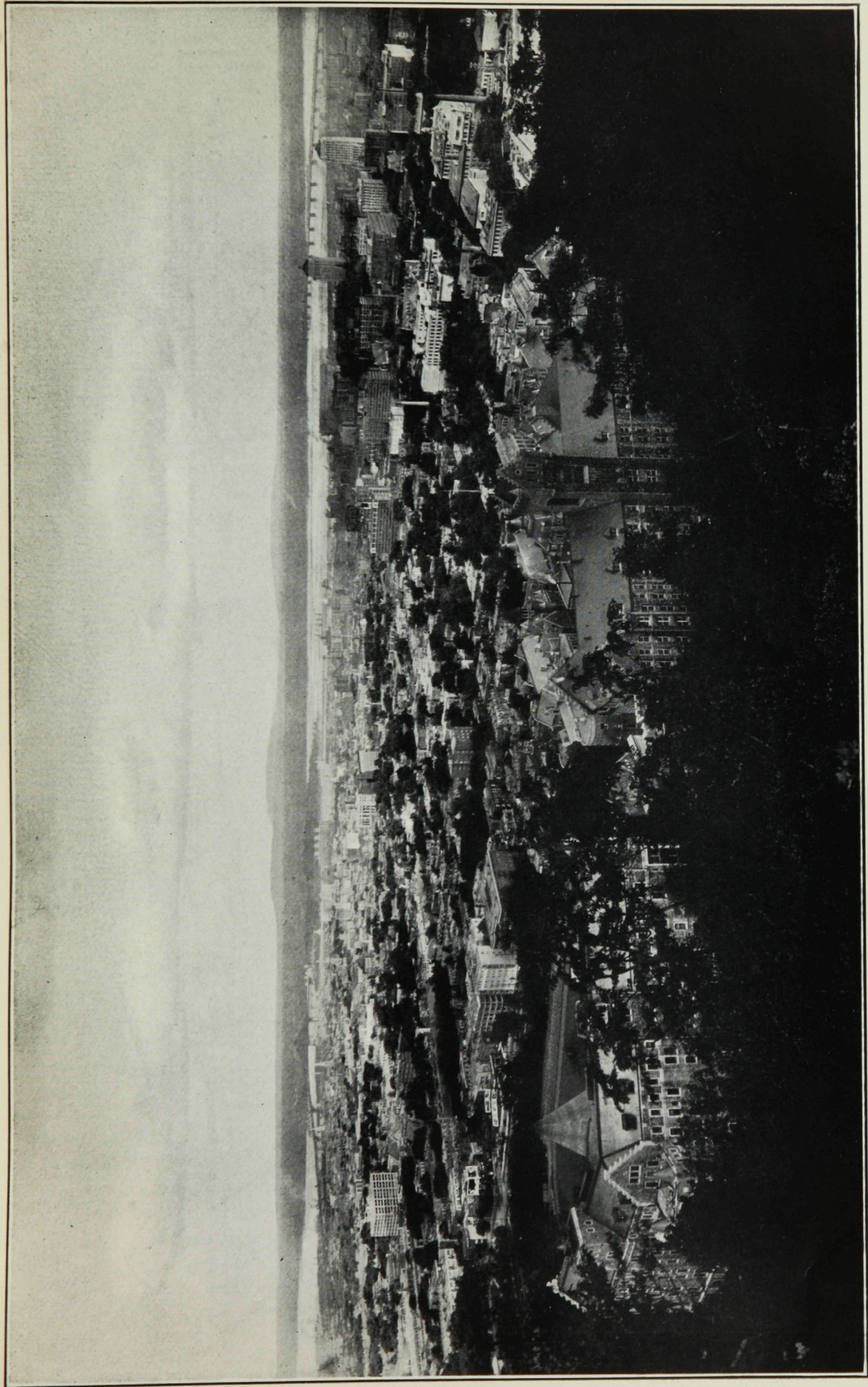
DR. DONALD KELLER	DR. ROBERT J. CALDWELL
DR. NORMAN D. HALL	DR. HARRY S. N. GREENE

House Dentist

DR. L. H. STILWELL

House Röntgenologist

DR. W. A. IRWIN



CITY OF MONTREAL FROM MOUNTAIN—ROYAL VICTORIA HOSPITAL BUILDINGS IN FOREGROUND

CHAIRMAN'S REMARKS

Annual Meeting, 26th February, 1931.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

The Thirty-seventh Annual Report for the year ended 31st December 1930 is herewith presented and the statistics covering the activities indicate that the Hospital has again closed a useful and busy year.

It is of interest to note that while the number of patients treated in the Hospital during the past year aggregated 14,597, an increase of 290 over the previous year, the total number of patient days shows a reduction of 2,046. In other words the average length of patients' stay in hospital was of shorter duration than the previous year. Our Out-door service has had one of the most active years in the history of the Department.

These observations would indicate that in sympathy with business conditions hospitals may expect to experience a shorter bed occupancy with an increased demand on their out-door dispensaries, with the result that the hospitals are faced with diminished financial support.

Hospitals, like industries, reflect a fair cross section of economic conditions. They cannot, however, lessen any activity essential to the care of the patient. They must continue to maintain an efficient standard of service to the community.

Our operating deficit for the year is \$19,661.66 an increase of \$4,660.52, which under present conditions may be regarded as satisfactory.

You will observe by the Balance Sheet before you that extensive repairs to the sum of \$41,661.55 have been made during the year for much needed improvements to the plant, and the service has greatly benefited thereby.

Last June Dr. H. S. Birkett tendered his resignation as Oto Laryngologist-in-Chief, which was accepted with extreme regret and the following resolution was unanimously passed by the Board of Governors:

RESOLVED:

THAT the Board of Governors accepts with much regret the resignation of Dr. H. S. Birkett as Chief of the Department of Otology and of the Department of Laryngology at the Royal Victoria Hospital;

THAT this Board desires to record its appreciation of Dr. Birkett's long and devoted service to this Hospital over a period of thirty-two years and recognizes with a deep sense of gratitude his valued efforts towards the Hospital's progress in the development of the arts of healing

The members of the Board remember with great pride Dr. Birkett's achievements in the Great War and the eminent position he has attained in his profession which has won for him the admiration of his colleagues and the respect and esteem of the governing body of this Hospital. His life work will ever be an inspiration to those who serve this Institution, and in recording this testimony of appreciation the members of this Board also express the hope that Dr. Birkett may long be spared so that in the years to come the Hospital may still benefit from his eminent services and wise counsel.

The vacancy caused by Dr. Birkett's retirement was filled by the appointment of Dr. E. Hamilton White as chief of this service.

The new residence for the interne staff was completed in December and on the 28th of January, this year, the first building ever erected in Canada of this type was informally opened. It provides accommodation for about forty housemen and solves a problem with which the Hospital has been faced for a considerable time of providing acceptable quarters for its resident medical staff.

At this point it occurs to me that it would be of interest to those who contributed so generously in the last Hospital Campaign to learn how the moneys that this Hospital has received from the Campaign Fund have been applied to date. It may be summarized as follows:—

Applied on accrued deficits to December, 1926.....	\$ 456,000
To complete construction of Women's Pavilion.....	1,000,000
Cost of new Internes' Residence.....	118,000
Improvements to Plant.....	32,000
	<hr/>
	\$1,606,000

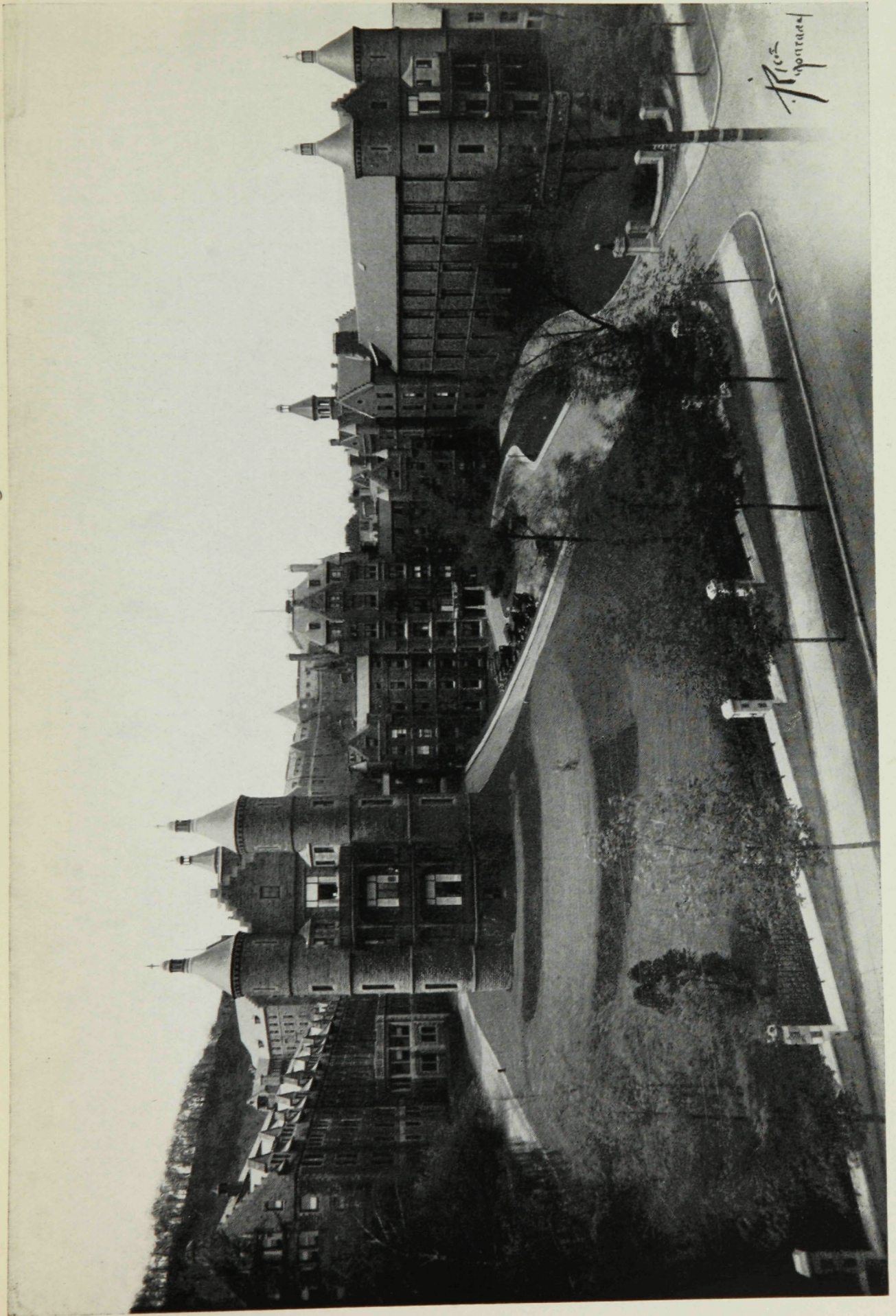
In conclusion, I am sure that it is with much pleasure that the members of this Board join me in expressing our thanks to the Medical Staff, the members of the Auxiliary Board and the personnel of the Hospital for their co-operation, which has made possible the high grade of service rendered. To the press, the officials of the City Hall and the Police and Fire Departments we also express our appreciation for their co-operation at all times. Also to the firms and individuals who have contributed to the Hospital's activities we express our grateful thanks.

H. S. HOLT,

President,

Board of Governors.

□ □



THE ROYAL VICTORIA HOSPITAL
(MAIN BUILDING)

SUPERINTENDENT'S REPORT

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I have the honour to present for your approval the Thirty-seventh Annual Report of the Royal Victoria Hospital for the year ended December 31st, 1930.

The Report indicates that the Hospital has carried out during the past twelve months a much greater volume of work than in the previous year and the increase in the number of patients treated in the public wards and the Outdoor Department confirms that the Hospital has in good measure met its obligations to the poor of the community.

It is of interest to note by the statistical report that while the number of cases admitted to hospital was 14,597, an increase of 290 over the previous year, the total number of days of hospital treatment is less by 2,046, which indicates the patients' average length of stay in hospital was of shorter duration, a condition no doubt more or less attributable to the economic conditions that prevail.

INDOOR DEPARTMENT

In the Indoor Department the patients admitted to the Hospital during the year may be classified as follows:—

			Inc.	Dec.
Males	5,634	Private patients	4,470	197
Females	8,963	Semi-private patients	1,028	49
		Public pay patients . .	6,510	247
		Public patients ad- mitted under Que- bec Public Charities Act	2,321	300
		Free patients	268	11
	* 14,597		14,597	547
			257	—
			290	

*These figures include 1,764 children.

Service:		Inc.	Dec.
Medicine.....	3,006	90	
Surgery.....	4,072	215	
Obstetrics.....	2,642	32	
Gynæcology.....	1,492	22	
Oto-Laryngology.....	2,067		143
Urology.....	845	52	
Ophthalmology.....	432	48	
Convalescent Home.....	41		26
	<u>14,597</u>	<u>459</u>	<u>169</u>
		169	—
		<u>290</u>	
Religion:			
Protestant.....	6,604		100
Roman Catholic.....	4,088	215	
Jews.....	2,980		141
Others.....	925	316	
	<u>14,597</u>	<u>531</u>	<u>241</u>
		241	—
		<u>290</u>	

10,749 were resident in Montreal and 3,848 came from districts outside the City.

The total number of days of hospital treatment aggregated 194,098 as compared with 196,144 the previous year, a decrease of 2,046 days.

The average number of days' stay in hospital was 13.0 as against 13.7 a year ago.

Patients discharged during the year numbered 14,560 as compared with 14,273 last year.

Deaths numbered 457 and the rate, excluding those who died within forty-eight hours of admission and "still births" was 2.3% as compared with 2.3% the previous year.

The number of cases treated in the Workmen's Compensation Clinic was as follows—

	1930	1929
Indoor.....	251	270
Outdoor.....	246	375

OUTDOOR DEPARTMENT

That the importance of preventing disease or detecting it in its incipiency is being increasingly recognized by the public is evinced by the ever increasing number of patients attending the Outdoor Departments of the Hospital, the total number of visits aggregating 82,952, as compared with 78,356 in 1929, an increase of 4,596 as follows:—

Service:		Inc.	Dec.
Medicine.....	19,500	244	
Surgery.....	11,688		1,354
Neurosurgery.....	405	156	
Urology.....	12,282	2,918	
Oto-Laryngology.....	7,744	605	
Pædiatrics.....	4,984		390
Ophthalmology.....	6,328	760	
Obstetrics.....	4,765		127
Gynæcology.....	3,702	576	
Neurology.....	3,938	279	
Pneumo-thorax.....	363	363	
Orthopædic.....	3,262	716	
Dermatology.....	2,821	391	
Psychiatry.....	680	5	
Serum Injections.....	490		546
	<u>82,952</u>	<u>7,013</u>	<u>2,417</u>
		2,417	
		<u>4,596</u>	

AUXILIARY DEPARTMENTS

The following statistics are of interest:—

		Inc.
Physiotherapy.....	13,218	763
X-Ray Department:		
Skiagraphs.....	35,429	862
X-Ray Treatments.....	3,410	160
Fluoroscopic Examinations.....	355	49

The ambulances made 2,243 trips, a decrease of 111.

The Ford car which is used for the purpose of visiting the district maternity cases and to take workers to and from the settlement clinics made 6,380 trips, an increase of 849. The number of nursing visits made to the district maternity cases was 5,856. Total mileage of Ford car for the year, 22,346 miles, an increase of 2,621.

FINANCIAL

The financial statements attached to this report reflect the following changes:—

The receipts for the year from all sources aggregated	\$1,064,694.80
(Receipts 1929—\$1,065,954.39)	
The total expenditure aggregated	1,084,356.46
(Expenditures 1929—\$1,080,955.53)	
Leaving a deficit of	19,661.66
as compared with an operating deficit of \$15,001.14 a year ago, an increase of \$4,660.52	

In connection with the increase of \$4,660.52 in our operating deficit, it may be observed that there has been quite a decrease during the past year in the number of cases treated of persons of means and in moderate circumstances, whereas there is quite an increase in the number of patients who could pay little or nothing for treatment. This is particularly noticeable in the public maternity division where the father of the family, owing to lack of employment, is often unable to contribute anything towards the hospital expenses.

This places a heavy burden upon the Hospital's resources and the problem is too important to be overlooked. Hospitals generally should receive adequate financial support to meet the cost of caring for patients in the community without means.

The cost of operating per diem, based on charging against indoor patients the full cost of maintenance, excluding the Outdoor Department is as follows:—

Private patients \$6.52

Public Patients \$4.59

IMPROVEMENTS

In order that the activities of the Hospital should be carried out in an efficient manner and to take care of urgently needed improvements, extraordinary outlays were incurred during the year aggregating \$41,661.55. Some of the more important items were:—

New Elevator, Main Building	\$3,948
New 6" Steam Line	9,787
Heating System, Nurses' Home	7,787
Converter and Circulating Pumps	6,840
New Hot Water Heater	3,358
Installing Fly Screens in Public Wards	2,665
New Flooring, Ross Pavilion	1,100
Insulating Steam Pipes	1,299
Repairing Medical Elevator	501
New Multigraph Machine for Printer	782
Presses for Laundry	1,357
Repairs to Roof	1,573

GENERAL REMARKS

The Reports of the Medical, Surgical and other Auxiliary and Scientific Departments indicate progress and advancement.

It is with exceeding regret that I have to report the resignation of Dr. H. S. Birkett as the active Head of the Department of Oto-Laryngology after thirty-two years of service. Dr. Birkett has brought his Department up to a high standard of efficiency and its success is due to his untiring efforts. Although Dr. Birkett is retiring as the Director of this service I am glad to report that he will still remain as Consultant to the Hospital.

The following appointments to the Medical Staff were made during the year:

Dr. H. S. Birkett—Consultant to the Department of Oto-Laryngology.

Dr. E. Hamilton White—Oto-Laryngologist-in-Chief, succeeding Dr. Birkett in this office.

It is also with pleasure that I have to record the following honours conferred on members of the Attending Staff of this Hospital during the year:—

Dr. J. C. Meakins—Received Honorary Fellowship of the Royal College of Surgeons of Edinburgh.

Dr. D. W. MacKenzie—Elected President of the American Association of Genito-Urinary Surgeons.

Dr. W. J. McNally—Appointed Research Fellow in Otology and Laryngology of the American Academy of Ophthalmology and Oto-Laryngology for another year.

In the spring of the year work on the new Internes' Residence was commenced—a four storey building containing forty bedrooms built on the foundations of old Ward S, at a cost of \$102,000. This accommodation for the Resident staff will relieve a congested condition and permit the Hospital to extend its facilities in other directions. The cost of this building will be met out of the money received from the Joint Hospital Campaign.

The Hospital is fortunate in having the support and interest of an Auxiliary Board of Governors. It is through the efforts of this Auxiliary Board that much has been done towards making the patients' stay in the Royal Victoria Montreal Maternity Pavilion pleasant and comfortable. This Board has made possible an efficient Social Service Department and their influence and assistance extended in many directions is greatly appreciated.

This autumn an adequate Canteen service was inaugurated in the Outpatient Department under the supervision of voluntary workers of the Junior League. This Canteen meets a long felt need for patients attending the clinics. Proceeds over and above the running expenses are devoted to the needs of the Social Service Department. The Hospital is indebted to the members of the League for their co-operation and interest in taking charge of this activity.

In reviewing the work of the year I cannot allow this opportunity to pass without expressing our gratitude to Miss Inez Baylis and her assistants who have freely and liberally given of their time in maintaining a circulating library from which the patients derive inestimable pleasure and benefit.

The Social Service Department continues to render efficient and valuable aid to the Hospital and its patients, and we express our appreciation to Mrs. Paice and her co-workers for their untiring efforts.

Once more it is my pleasant duty to gratefully acknowledge gifts of various kinds received from our many friends. Our sincere appreciation is extended to the Rotary Club for gratuitously equipping indigent children with braces and other surgical appliances. Our thanks are also tendered to Lady Meredith for her continued efforts in collecting a substantial sum to provide Christmas festivity. Also to Sir Herbert and Lady Holt for the very enjoyable dance provided by them for the nursing staff last February.

In closing may I express my appreciation for the support that I have received at all times from the President and the Board of Governors.

I also gratefully acknowledge the excellent co-operation and loyal support of the medical staff and the Hospital personnel who have actively carried on the work of the Hospital in its various departments.

Respectfully submitted,

W. R. CHENOWETH,
Superintendent.

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FINANCIAL STATEMENTS

ROYAL VICTORIA HOSPITAL INCLUDING ROSS MEMORIAL AND WOMEN'S PAVILION STATEMENT OF REVENUE AND EXPENDITURE

For Year Ended 31st December, 1930

EXPENDITURE	REVENUE	
EXPENSES FOR CARE OF INDOOR PATIENTS	1930	1929
Professional Care.....	\$194,692.55	\$186,278.13
Domestic Care.....	112,834.42	119,374.85
Cost of Meals.....	267,418.86	277,113.06
Property and House Expense.	169,301.87	155,213.03
Administration and General Expense.....	110,861.79	103,712.45
Improvements to Plant and New Equipment.....	41,661.55	48,676.17
	<u>\$896,771.04</u>	<u>\$890,367.69</u>
DEPARTMENTAL EXPENSES		
Outdoor Department.....	\$ 31,089.10	\$ 30,106.79
Ambulance.....	7,090.40	8,454.32
Social Service Dept.....	6,509.35	6,517.47
Other Departments.....	142,896.57	145,509.26
	<u>\$187,585.42</u>	<u>\$190,587.84</u>
Private Patients.....	\$409,997.08	\$430,799.43
Public Patients.....	201,082.14	187,682.40
Patients admitted under Que- bec Public Charities Act..	102,219.07	86,699.19
Military Patients.....	7,881.67	11,679.96
	<u>\$721,179.96</u>	<u>\$716,860.98</u>
Income from Endowment and Donations.....	\$144,206.67	\$145,883.87
Auxiliary Board of Governors	5,022.00	4,840.05
	<u>\$149,228.67</u>	<u>\$150,723.92</u>
DEPARTMENTAL INCOME		
Outdoor Department.....	\$19,804.92	\$18,755.29
Ambulance.....	8,419.85	9,569.25
Other Departments.....	166,061.40	170,044.95
	<u>\$194,286.17</u>	<u>\$198,369.49</u>
Total Income.....	\$1,064,694.80	\$1,065,954.39
Deficit.....	19,661.66	15,001.14
	<u>\$1,084,356.46</u>	<u>\$1,080,955.53</u>
	<u>\$1,084,356.46</u>	<u>\$1,080,955.53</u>

ROYAL VICTORIA HOSPITAL

BALANCE SHEET

as at 31st December, 1930

ASSETS	1930	1929	LIABILITIES	1930	1929
Buildings and Equipment....	\$3,299,359.45	\$3,178,946.57	Capital Account.....	\$3,391,271.17	\$3,231,072.31
Inventory of Supplies.....	85,736.33	98,798.87	Add:		
Amounts Due and Outstanding.....	79,824.31	70,802.61	Donations to Radium Fund	<u>25,200.00</u>	
Cash in Bank.....	65,916.03	33,314.53		<u>\$3,391,271.17</u>	<u>\$3,256,272.31</u>
			Less:		
			Excess of Expenditure over Revenue for Year Ended 31st December, 1930....	\$ 19,661.66	\$ 15,001.14
			Accounts Payable.....	<u>\$3,371,609.51</u>	<u>\$3,241,271.17</u>
				159,226.61	140,591.41
	<u>\$3,530,836.12</u>	<u>\$3,381,862.58</u>		<u>\$3,530,836.12</u>	<u>\$3,381,862.58</u>

ROYAL VICTORIA MONTREAL MATERNITY PAVILION

BALANCE SHEET

as at 31st December, 1930

ASSETS	1930	1929	LIABILITIES	1930	1929
Building Construction, Equip- ment and Furnishings	\$1,681,298.47	\$1,681,298.47	Capital Funds:		
			Montreal Maternity Fund..	\$331,598.47	\$331,598.47
			Province of Quebec Grant..	200,000.00	200,000.00
			Gifts, Donations.....	149,700.00	149,700.00
			Campaign Fund 1927.....	1,000,000.00	1,000,000.00
	\$1,681,298.47	\$1,681,298.47		\$1,681,298.47	\$1,681,298.47

AUDITOR'S REPORT

For the Year Ended December 31st, 1930.

To the PRESIDENT AND BOARD OF GOVERNORS,
ROYAL VICTORIA HOSPITAL.

Dear Sirs:—

I beg to report that I have completed my Audit of the Accounts for the year ended 31st December, 1930, and hereto attach:

1. Balance Sheet of the Royal Victoria Hospital, including New Pavilion and Trust Accounts as at 31st December, 1930.
2. Statement of Revenue and Expenditure of the Royal Victoria Hospital including Ross Memorial and New Pavilion for the year ended 31st December, 1930.

I have compared the Revenue from Investments held by the Trustees with the advices from the Royal Trust Company and other Depositories.

I have checked the receipts under the other headings from the daily cash sheets to the General Cash Book and have seen that such receipts have been duly deposited in the Bank.

I have seen properly certified vouchers for all disbursements.

In my opinion the accompanying Statement of Revenue and Expenditure is a true and correct exhibit of the operations of the Royal Victoria Hospital including the Ross Memorial and New Pavilion for the period mentioned, and the accompanying Balance Sheet a true and correct exhibit of the financial condition as at 31st December, 1930.

Yours faithfully,

LEWIS BRIMACOMBE,

Auditor.

ROYAL VICTORIA HOSPITAL

STATISTICS

	1930
Number of beds in the Hospital.....	680
Number of Babies' Cribs (Maternity Division).....	108
Number of Patients admitted during year.....	14,597
Total number of days of hospital treatment.....	194,098
Average number of days' stay in Hospital per patient.....	13.0
Deaths.....	457
Mortality per cent. (excluding those who died within forty-eight hours of admission).....	2.3%
Beds occupied per cent. (excluding babies' cribs).....	78%
Total number of staff nurses, pupil nurses, affiliates and graduates working in Hospital.....	258
Nurses per patient bed.....	.38
Total number of employees (excluding nurses).....	506
Employees per patient bed (excluding nurses).....	.69
Total pay roll for year, all employees (including nurses).....	\$538,047.34
Total pay roll for year, nurses.....	\$111,061.99
Total pay roll per patient bed.....	\$791.00
Maximum number of patients in hospital, 15th March 1930, (including babies born in hospital).....	717
Minimum number of patients in hospital, 1st December 1930 (including babies born in hospital).....	479
Maximum number of patients, 15th March 1930 (excluding babies born in hospital).....	605
Minimum number of patients, 25th December 1930 (excluding babies born in hospital).....	422
Industrial cases treated:	
Indoor.....	251
Outdoor.....	246
Ambulance:	
Number of trips.....	2,243
Average number of trips per day.....	6.14
Maximum number of trips in twenty-four hours.....	16
Total mileage for year.....	19,288
Operating Cost per diem (excluding Outdoor Patients):	
Private Patients.....	\$6.52
Public Patients.....	\$4.59

REPORT OF THE AUXILIARY BOARD OF GOVERNORS

Honorary President:

Her Excellency The VISCOUNTESS WILLINGDON

BOARD OF MANAGEMENT:

<i>President</i>	Lady Meredith
<i>Vice-Presidents</i>	{ Lady Holt Mrs. Walter M. Stewart
<i>First Directress</i>	Mrs. S. B. White
<i>Second Directress</i>	Mrs. F. Peverley
<i>Third Directress</i>	Mrs. S. H. Dobell
<i>Hon. Treasurer</i>	Miss Mona Prentice
<i>Asst. Treasurer</i>	Mrs. S. T. Blaiklock
<i>Hon Secretary</i>	Mrs. D. S. McMaster
<i>Recording Secretary</i>	Mrs. T. B. Heney
Mrs. R. E. Aikman	Hon. Mrs. G. K. Hugessen
Mrs. Ian Adair	Mrs. Lionel Lindsay
Lady Brunton	Mrs. W. K. G. Lyman
Mrs. G. R. Caverhill	Mrs. E. A. Mackenzie
Mrs. A. F. Culver	Mrs. W. D. McLennan
Mrs. S. Dawes	Mrs. A. E. Millar
Mrs. R. J. Dawes	Mrs. H. C. MacDougall
Mrs. F. C. Dobell	Mrs. Frank Meighan
Mrs. J. R. Fraser	Mrs. A. T. Paterson
Hon. Mrs. Hallward	Mrs. T. M. G. Stoker
Mrs. E. R. W. Hebden	Mrs. D. Wanklyn
Mrs. W. R. G. Holt	

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I have the honour to submit the Fourth Annual Report of the Auxiliary Board of Governors of the Royal Victoria Montreal Maternity Hospital, for the year ended December 31st, 1930.

The work of the Social Service Department has continued to increase and is greatly facilitated by members of the Committee who drive the Social Service Workers in the mornings during the winter months. We average in driving about 30 calls a week, visiting the poorest type of patient. As these calls are mostly in out-lying districts, cars are of the greatest assistance in enabling the nurses to make their visits in a very few hours.

It is impossible, in merely stating the number of calls made, to convey the amount of time saved and the good work accomplished. A driver was engaged during the summer at a salary of \$60.00 a month, to carry on this very necessary work in the absence of the Driving Committee.

Miss Mathews was sent by the Committee to the International Conference of Hospital Social Service Workers in Boston and on her return gave a most interesting report of the subjects which were discussed.

Our Committee is still undertaking to relieve the Hospital of all expenses in connection with the Hospital and Outdoor Clinics, Social Service Workers and Settlement Nurse, also the rental of the four outdoor clinics.

The cost of this work amounts to approximately \$6,094.00 a year.

Patients who were seriously ill were given "Blood Transfusions" at the cost of \$535.00. The demand on this fund has greatly increased, but has been the means of saving many lives.

At Christmas a present was given to every patient and baby in the Hospital. Also, under the direction of Mrs. Culver, assisted by Miss Mathews, thirty Christmas dinners were given by individual members of the Committee to the outdoor patients, who, owing to the unemployment, were in great distress.

Two hundred and twenty-five dollars was given during the year for relief in emergency cases.

The House Committee, under the direction of Mrs. White, First Directress, have visited the Hospital each week to inspect the wards and nurses' quarters. Many improvements have been made

to make the quarters more attractive and comfortable. Books, magazines and medical journals have been supplied for the use of the nurses and doctors.

It is with regret that we have to report the resignation of the Second Directress, Mrs. W. D. McLennan, who has done such excellent work since the Auxiliary Board was formed at this Hospital. Mrs. Peverley was appointed Second Directress.

The Clothing Committee, under the direction of Mrs. Peverley, have met each week to cut out and prepare baby clothing for the Hospital. During the past year 376 dozen garments were cut out for layettes and general Hospital use. \$395.43 has been realized from the sale of a percentage of these garments, which are sold at cost. In addition to the usual 120 layettes given to the Social Service Department for distribution, we have been able to supply many other deserving patients with necessary baby clothes.

The members of this Committee have also supplied and knitted 30 woollen garments a month for layettes.

We have been assisted in making up these layettes by the following organizations, to whom we wish to express our appreciation:—

The Junior League, The I. H. N. Society, Mrs. Woodgate's Sewing Group, Needlework Guild, and the following Chapters of the I.O.D.E.: Gordon Southam Chapter, Guy Drummond Chapter, Lady Scott Chapter, Duke of Gloucester Chapter and the Edwin Baldwin Savage Chapter.

During the past year 1,610 cups of cocoa were served in the Canteens. This figure has been reduced somewhat from last year owing to the closing of the canteen at the Hospital. This canteen was not re-opened in September as it was considered unnecessary.

At the Rosemont Clinic an increase in the number of patients made it necessary to secure new quarters.

Mrs. Dobell, our Third Directress, who has charge of the Canteens, has organized a new department, under the name "Odd Clothes Committee". Beds, bedding, shoes and clothing have been collected and distributed to many destitute families. In many cases the clothing has enabled quite a number of children to attend school who, for lack of proper clothing, would have been unable to do so. This Committee also makes nightgowns and nightingales for special outdoor patients referred to us by our Social Service Workers.

The work accomplished by these Committees has been most gratifying and much credit is due to the Convenors. Mrs. White, Mrs. Peverley and Mrs. Dobell.

The Charity Ball was held on January 23, 1931, and the net sum realized was \$6,942.98.

The Committee again wish to extend their most sincere thanks to their Chairman, Mr. J. W. McConnell.

The sum of \$1,140.00 was received from Governors' Annual Fees.

To Mr. W. R. Chenoweth, to Miss Barrett, Supervisor of the Women's Pavilion and her staff, and to the Social Service Workers and Settlement Nurses, the Committee owe their most grateful thanks for their help and co-operation in this work.

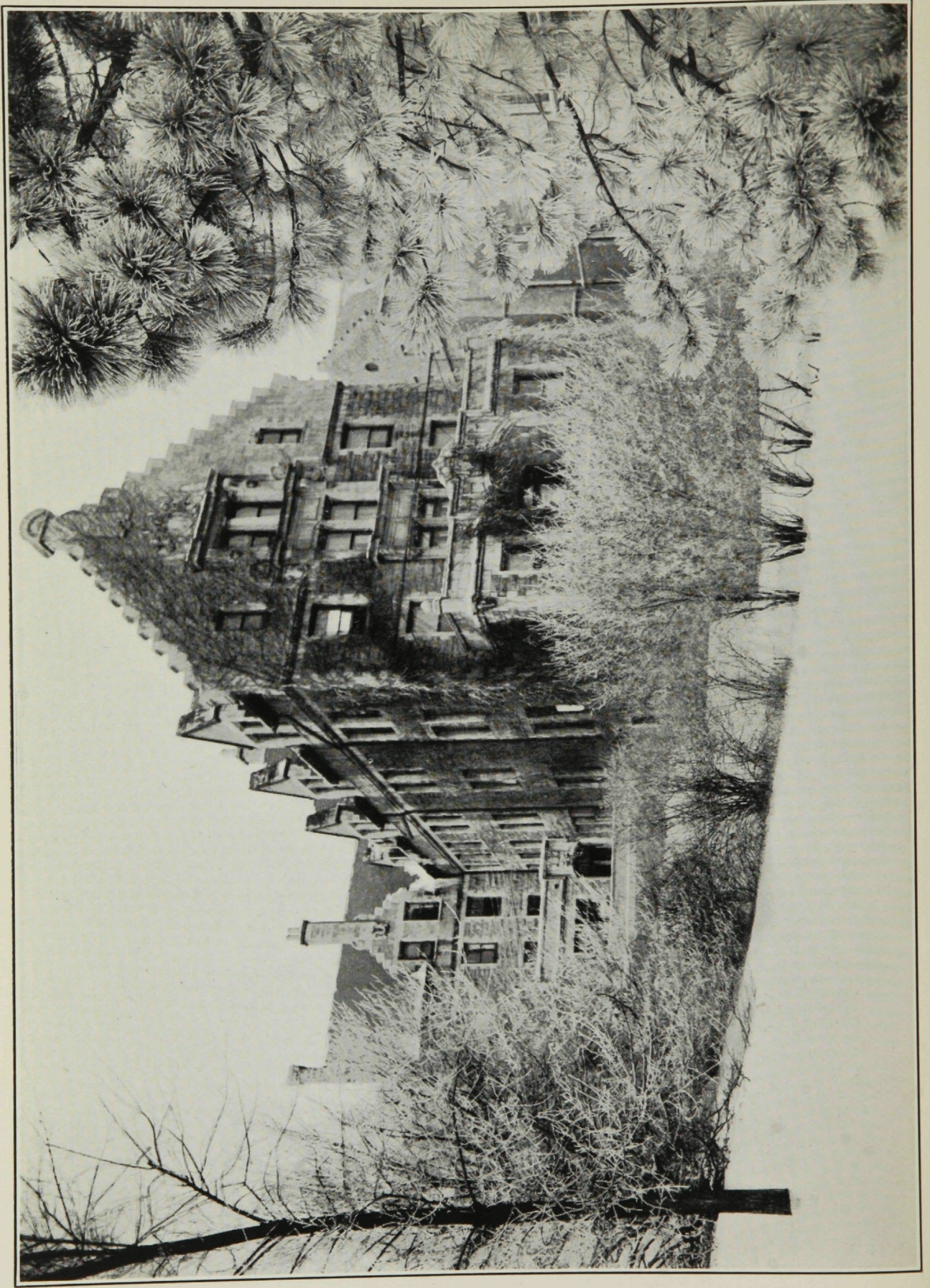
In conclusion, the Committee wish to thank the following for their very generous donations:—

Mrs. J. H. Burland, Mr. W. J. Morrice, Mr. J. W. McConnell, Queen Elizabeth of Belgium Chapter, I.O.D.E., Lady Holt, Lady Meredith, Mappin & Webb, Mrs. G. L. Cains, Miss Gillespie, Mrs. P. Mathias, Mrs. F. L. Wanklyn, Mrs. G. F. Benson, Miss E. Douglas, Mr. T. H. Stewart, Mr. W. M. Stewart.

Respectfully submitted,

RUTH R. McMASTER,

Honorary Secretary.



NURSES' HOME—ROYAL VICTORIA HOSPITAL

REPORT OF THE SCHOOL OF NURSING

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I have the honour to present the Thirty-seventh Annual Report of the School of Nursing, Royal Victoria Hospital, for the year ending December 31st, 1930.

Census of School	298
Graduate Nurses	70
Student Nurses (3rd. year)	57
Student Nurses (2nd. year)	62
Student Nurses (1st. year)	57
Affiliated Students	36
Post Graduate Nurses	8
General Duty Nurses	8
Nurses graduated in 1930	68
Preliminary students admitted	73
Preliminary students accepted	57

587 Calendars were sent out to applicants.

The Graduating Exercises were held in the Nurses' Home, March 26th, Dr. H. S. Birkett presiding in the absence of the President. Dr. H. Burgess gave the address to the Graduating Class, and Lady Holt presented the pins, diplomas, and prizes.

Prizes for general proficiency to:

Miss Laura Hennigar
Miss Frances Littlefield.

for highest standing to:

Miss Ruth Parsons
Miss Jean MacLaren.

The Scholarships for Post Graduate work in McGill for the year, were awarded to:

Miss Katherine Jamer, 1927—The Royal Victoria Hospital Scholarship.

Miss Marion Patterson, 1930—Dr. Garrow Scholarship.

Miss Edith McDowell, 1930—Henry Crowe Scholarship.

Miss Louise Keith and Miss Katherine McLennen are also taking this course.

When these Scholarships were first given it was not always an easy matter to find applicants ready to accept them—now we are looking for more Scholarships to help the increasing number of applicants.

Additions to the Nursing Staff to fill vacancies occasioned by resignations:—

Miss Ella Moffat—Night Superintendent, Ross.

Miss Blanche Herman—Assistant New Pavilion.

Miss Marguerite McDougall }
Miss Kathleen Scott } Hydro Department

Miss Eleanor Mathews }
Miss Donald Robertson }
Miss Dorothy Goodwill } New Pavilion.
Miss Phyllis Goodwin }

Miss Anna McLeod }
Miss Jean Rowat }
Miss Eleanor Crosby } Ross Pavilion
Miss Margaret McGregor }

Miss Edith Hennigar—Urological Ward.

Fourteen nurses resigned during the year, five to be married, two to do Institutional work as Superintendents of Nurses, one doing School Nursing, one taking a course in Psychiatry, three to do private nursing, and Miss Goodhue on account of ill health.

Miss Goodhue has been connected with the Hospital and Training School since the opening in 1894, holding many positions—Charge Nurse, Instructor, and for the last four years has been in charge of the University Street Residence for Probationers.

Miss Goodhue was one of the landmarks and will be greatly missed.

Developments in the out patients' and operating departments necessitated the appointment of extra graduate nurses, and one nurse has been added to the staff of each department.

Affiliations:

One hundred and fifty-six nurses completed courses in Obstetrics, Gynæcology and operating room work in the New Pavilion.

Forty students from this School have taken the course in communicable diseases at the Alexandra Hospital.

There are now eleven hundred and three graduates of this School, not including the present Graduating Class.

There are now eleven hundred and three graduates of this School, not including the present Graduating Class. Of these:—

- 44% are married.
- 14% in Institutional positions
- 12% in Public Health, Industrial and School Nursing
- 5% Retired or have taken up other lines of work
- 22½% doing Private Nursing
- 2½% deceased.

Illness during the year 1,377 days.

First year	301
Second year	661
Third year	445

Beginning January 1931, the monthly allowance to student nurses will be discontinued—uniforms and books given in place of same.

We are looking forward with pleasure to the new wing shortly to be added to the present Nurses' Home. The lack of housing for the student nurses has for the past few years been a great handicap.

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Each year many problems confront us, some old and others new, or at least seen for the first time, for with increasing demands upon Schools of Nursing and our obligation to the student nurses our problems are ever on the increase.

The development of medical science brings new responsibilities and the nurse of today must be prepared to work with the doctor in order that his scientific work may not be destroyed through her ignorance. The principles worked out for the care of the sick in years gone by are no longer adequate, and wide differences of opinion exist as to the best kind of nursing service to offer the public that will meet technically and economically the needs of today. The Nursing Survey now being carried on in Canada may offer a solution of this difficult problem. It is interesting to see that surveys are being carried on in England and in the United States at the present time—starting in England and almost finished in the United States.

The past year has been one of changing conditions, financial depression and unemployment. The graduate nurses in common with others have suffered from these conditions. Two hundred and thirty-seven applications were received for post graduate work or general duty from nurses in Canada and the United States, many of them stressing the fact of unemployment. These applications could not be considered. This again raises the question of over production. Should we graduate increasingly large classes of students if the demand for their services ends with the completion of their course.

May I thank the President and Governors for many pleasures given the Nursing Staff, and especially Lady Meredith for very generous gifts of concert and hockey tickets, sent so often, as well as one hundred tickets for the Charity Ball.

May I also thank the Medical Staff for their continued interest and help in giving generously of their time for lectures and in caring for the nurses who have been ill during the year.

Respectfully submitted,

MABEL F. HERSEY,

Superintendent of Nurses.

GRADUATING CLASS, 1930

ALGIE, JEAN.....	Toronto, Ont.
BAXTER, ELIZABETH.....	Westmount, Que.
BEDELL, BEATRICE.....	Bloomfield, Ont.
BAIN, MARGARET.....	Westmount, Que.
BALLANTYNE, MARY.....	Ottawa, Ont.
BARTLET, BETTY.....	Windsor, Ont.
BLACK, ETHEL.....	Oxford Station, Ont.
CARTER, EVA.....	Woodstock, N.B.
CHURCH, ELIZABETH.....	Montreal, Que.
COLES, MARY.....	Moncton, N.B.
CARNELL, ESTHER.....	St. Johns, Nfld.
CAMPBELL, FAY.....	Whitewood, Sask.
CAMPBELL, IVY.....	Perth, Ont.
CROSBY, ELEANOR.....	Wolseley, Sask.
DOBSON, HELEN.....	Halifax, N.S.
DICKSON, EMMELINE.....	Winnipeg, Man.
DRYSDALE, MARY.....	Montreal, Que.
ESTEY, EMILY.....	Grand Falls, N.B.
ELLIOTT, BERNICE.....	St. Lambert, Que.
FALLON, KATHLEEN.....	North Bay, Ont.
GILROY, DOROTHY.....	Stellarton, N.S.
GOLDIE, MARGARET.....	Guelph, Ont.
GOODILL, DOROTHY.....	Brockway, N.B.
GRASS, HAZEL.....	Andover, N.B.
HACKETT, MARY.....	Cowansville, Que.
HENNIGAR, LAURA.....	Northfield, N.S.
HENNIGAR, EDITH.....	Northfield, N.S.
INKSTER, MABEL.....	Trent River, Ont.
JOHNSON, THELMA.....	Rock Island, Que.
JAMIESON, NORMA.....	Charlottetown, P.E.I.
KEITH, LOUISE.....	Winnipeg, Man.

LECKIE, KATHERINE.....	St. Mary's, Ont.
LARSEN, ELLA.....	Braeside, Ont.
LITTLEFIELD, FRANCES.....	St. Stephen, N.B.
MINGLE, GLADYS.....	Montreal, Que.
MAY, FLORRIE.....	Arnprior, Ont.
MANNING, ELEANOR.....	London, Ont.
MANNING, MARION.....	London, Ont.
MATHEWSON, BESSIE.....	Cardigan, P.E.I.
MATHEWSON, ANNIE.....	Arnprior, Ont.
MACDONALD, BARBARA.....	Cardigan, P.E.I.
MACFARLANE, PHYLLIS.....	Southwold, Ont.
MACGREGOR, MAUD.....	Alexandria, Ont.
MACLAREN, DELLA.....	Douglas, Ont.
MACLAREN, JEAN.....	New Perth, P.E.I.
MACLENNAN, KATHERINE.....	Charlottetown, P.E.I.
MACLEOD, ANNA.....	Maxwell, Ont.
MCDOWELL, EDITH.....	Brandon, Man.
NIXON, MARGARET.....	St. John, N.B.
NEPHEW, MARGARET.....	Finch, Ont.
PATERSON, MARION.....	Winnipeg, Man.
PARKER, MARY.....	Moncton, N.B.
PARSONS, RUTH.....	Montreal, Que.
PEABODY, MARJORIE.....	Woodstock, N.B.
PARRY, KATHERINE.....	Hamilton, Ont.
RUMBALL, EYTHEL.....	Sudbury, Ont.
ROSS, MARGARET.....	Barrie, Ont.
ROWAT, JEAN.....	London, Ont.
REEVES, HELEN.....	Pictou, N.S.
ROWLEY, MARGARET.....	Jamaica, B.W.I.
ROBERTSON, MARGARET.....	Saint John, N.B.
RYAN, HELENE.....	North Bay, Ont.
SHOEMAKER, DOROTHY.....	Ottawa, Ont.
SPEAR, HAZEL.....	Moncton, N.B.
SCOTT, CATHERINE.....	Ardmeen, Ireland
TILTON, FRANCES.....	Saint John, N.B.
WAINWRIGHT, MURIEL.....	Fredericton, N.B.
WILEY, MARJORIE.....	Grand Falls, N.B.

REPORT OF THE DEPARTMENT OF NUTRITION

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I have the honour to present the Second Annual Report of the Department of Nutrition for the year ending December 31st, 1930.

The personnel of the Staff remains unchanged:—

Graduate Dietitians.	5
Student Dietitians.	8

One member, Miss Dorothy Clarke, was granted three months leave of absence. Her duties were taken over very creditably by Miss Florence Newman, a graduate of our student class of June, 1930.

Since the last report, twelve students have completed the post-graduate course in Hospital Administration. During the year nine have been placed in positions. The encouraging reports on these students prove to us that the lengthening of the course was a progressive step, enabling them to more efficiently assume responsibilities in the field of Hospital Dietetics.

Seventy-two student nurses have passed through the Department completing seven weeks training in the Diet Kitchens, thereby correlating theory with practice.

Four members of the staff attended the Thirteenth Annual Convention of the American Dietetic Association held for the first time in Canada at Toronto in September. This meeting was unique in that it assembled the largest registration in the history of the Association.

There have been no definite changes in the routine of our General Food Administration, but I again wish to mention the need of improved service to our public wards, and trust the budget for the ensuing year will provide for new food conveyors.

We were glad during the year to assist with the equipping of the Canteen in the Out-Patient Department organized by the members of the Junior League and congratulate them on their efficient management.

Records give statistics for the total number of meals served from the various food distributing centres as follows:—

Main Kitchen.....	982,709
Ross Diet Kitchen.....	104,620
Special Diet Kitchen.....	22,721
Women's Pavilion.....	431,511
	1,541,561
Average per day.....	4,224
Average cost per meal.....	21 cents

We are gratified to note the decreased per capita cost, and feel we have been successful in effecting every possible economy without lowering the standard of our food service or the nutritional value of our meals. This has not been a simple problem, and while there are several important contributing factors such as purchasing of food supplies and installation of new equipment, yet I realize this lowered cost has not been obtained without continuity of effort on the part of every member of my Staff. May I take this opportunity to express my appreciation of their loyal response when called upon to increase their efforts to administer more economically their respective food units during the financial depression of the last six months.

Every day new facts are being disclosed regarding diet therapy in its application to diagnosis and treatment and we have endeavoured to keep pace with the rapid developments along scientific lines.

During the past year the Metabolism Department took care of 268 Diabetic Cases, and an interesting factor in this division is the individual instruction given to hospitalized patients apart from the regular classes. Forty-eight hours were devoted to this phase of the work.

The daily average of therapeutic and weighed diets in the Ross Pavilion, Women's Pavilion and Main Building as indicated below, represents 12% of the total number of patients:—

Private Patients.....	7
Public Patients.....	22
Staff.....	7
Sippy.....	14
Typhoid.....	2
Baby Feedings.....	14

The Baby Feedings do not include those prepared in the Women's Pavilion.

Our Metabolism Kitchen, which takes care of research cases and special diets for public patients, served 22,721 meals as compared with 25,164 in 1929, a decrease of 2,441 meals or an average decrease of 6 meals per day.

Cost per patient per day—84 cents.

From the educational standpoint the Dietary Staff fulfills an essential service to the Hospital. It includes a course of instruction for our Nurses totalling 198 teaching hours.

Cookery	120 hours
Nutrition	30 hours
Diet Therapy	30 hours
Infant Feeding	18 hours

The completion of the Dietetic Laboratory in the proposed New Wing of the Nurses' Residence is anticipated with pleasure after the many difficulties encountered during the past year in presenting our practical work without a properly equipped Laboratory.

Lectures and demonstrations to Student Dietitians, Medical Students, patients and their relatives have been carried on as formerly and an interesting fact is a total class attendance for specialized instruction to the patients and relatives of 1,022.

In addition, out-patients attending the weekly Diabetic Clinic have received diet instruction.

Total number enrolled. 1,718

Of this number, 92 were new patients. One aspect of the educational unit for 1930 shows 30% increase in teaching hours since 1927, a satisfactory indication of the widening of this field, but resulting in further demands on a Staff already carrying a heavy schedule.

To the Medical and Nursing Staffs, I wish to convey our appreciation of their services to members of our Department.

In conclusion, I desire to gratefully acknowledge the continued interest of the Board of Governors and to express our thanks for the co-operation evidenced by all departments.

Respectfully submitted,

CHARLOTTE LARGE,
Dietitian-in-Chief.

REPORT OF THE SOCIAL SERVICE DEPARTMENT

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL

Gentlemen:—

I have the honour to submit the Annual Report of the Social Service Department for the year ending December 31st, 1930.

Owing to the unemployment situation the work has increased during the past year, there being 3,215 patients referred for some form of medical-social work. The most outstanding problems have been cases of extreme malnutrition. Through the co-operating agencies we have been able to secure extra nourishment and relief for a good many cases.

Staff.—From January until July the Department was short one worker, owing to ill-health and the difficulty in securing a Medical Social Worker. In July Miss M. Cosgrove, R.N. joined the Staff as Assistant Pædiatric Worker with the understanding that she would take three lectures each week at the McGill School of Social Work.

Volunteers.—The volunteer work in the clinics has again been faithfully carried on by 16 members of the Junior League and 3 other volunteers, with Miss Agnes Hill as Chairman.

Education.—Three students from McGill School of Social Work were given Field Work. The class from the School of Graduate Nurses had one afternoon in the Department.

The Training School of Nurses were not able to send any students this year owing to shortage of nurses-in-training. One lecture on Medical Social Work was given the graduating class.

An endeavour to further the education of the Medical Social Worker was made by the Montreal Group of Hospital Workers, who asked Miss McMahan, Educational Secretary, American Association of Hospital Social Workers, to come on from Boston

with a view to starting a training centre at McGill University in connection with the School of Social Work and the Social Service Departments of the Hospitals. A committee has been formed to look into the matter and we hope something will materialize before next year.

Two members of the Staff attended the National Conference of Social Work held in Boston in June.

Ward Follow-up.—There have been 1,439 patients referred back to the Out-patient Department this year, out of these 1,132 returned and 368 post cards were sent. These figures show an increase over last year of 287 patients who returned. The work with the Tubercular patients has been carried on by the Royal Edward Institute who visit the patients and supply a nurse in the Pulmonary Clinic twice a week. This is a very valuable service and we appreciate their co-operation.

Placements.—In thinking of the after-care for the young child with Tuberculosis, one is faced with the difficulty of no Sanatorium for such cases. Neither is there a Preventorium for early cases. The incurable patient is still a problem to place, and the urgent demand for public beds makes the situation more difficult.

New Activities.—For sometime the Social Service Department has been interested in having a canteen opened in the Out-patient Department, in order to provide food for the patients who come from a long distance to an early clinic and are obliged to stay until late afternoon. After some discussion between the Junior League, the Social Service Department and the Hospital, this was made possible through the generosity of the Board of Governors, who put in the equipment, and the Junior League who undertook the management under Miss M. Torrence, whom we would like to congratulate on her splendid work. The profits made at the canteen are given to the hospital and the Social Service Department can authorize free lunches to the patients who are unable to pay.

The problem of securing braces for the crippled children has this year been solved by the Rotary Club, who have been good enough to supply these for the needy cases. This has been a very great help and we appreciate their interest.

The English-speaking Catholic patients can now be given relief from the Catholic Welfare Bureau which opened in December 1930; and the patients who are totally, or partially blind, can now be helped with glasses or artificial eyes through the new branch of the Canadian National Association for the Blind, opened during this year.

Christmas.—The third Christmas Tree was given by the Social Service Department to over 300 children who attended the Out-patient Department during the year. Individual gifts, as well as candy, fruit and ice-cream were given to the children and a very good moving picture was shown which proved to be most popular. May we here thank the Montrose Club for sending 176 toys and 58 bags of candy for the Tree and the Junior League for arranging the moving picture. 14 baskets were trimmed, packed and delivered by the Social Service Department to patients in the Moore Old People's Home and a few other elderly patients. Christmas dinners were provided for 69 families through the kindness of the following:—

Percival Molson Chapter, I.O.D.E.	Royal Victoria Hospital
Kiwanis Club	Alumnæ
Elks Club	St. George's Society
Catholic Women's league	Red Cross Society
Private Individuals	

STATISTICAL REPORT IS AS FOLLOWS:—

New Medical Social Case Records	597
New and old cases carried during the year . . .	807
Number of cases referred for some sort of social work	3215
Financial investigation re free medicines and free X-rays	2406
Letters and post cards sent	2744
Interviews	13184
Home visits	2417
Admission arranged	165
Referred to other co-operative agencies	766
Written reports sent to other agencies	608

Assistance secured:—

Abdominal belts.....	13
Hypodermic needles (Diabetic).....	28
Insulin.....	25
Dental care.....	93
Nursing care.....	62
Employment.....	10
Dressings and bandages.....	82
Taxis.....	133
Crutches, tips and cane.....	56
Braces.....	9
Artificial limbs.....	2
Transfusions.....	7
Referred to other Cities for special treatment.....	2
Transportation.....	93
Funeral arrangements.....	5
Medicine.....	2378
X-rays.....	134
Financial aid.....	56
Clothing.....	107
Glasses.....	27
Artificial eyes.....	2

Assistance given by Social Service Department:—

Dentures.....	6
Taxis.....	100
Crutches and cane.....	8
Abdominal belts and trusses.....	4
Lunches.....	108
Telephones (long distance) and telegrams	4
Railway fares.....	10

Placements:—

Convalescent homes.....	170
Foster homes.....	19
Incurable homes.....	10
Permanent placement.....	25
Deported.....	19
Home for aged.....	9
Sanatorium.....	24
Camp.....	5

We again wish to thank the Convalescent Homes and other Social Agencies and private individuals with whom we have worked during the year and who have given donations of money, clothing, toys, and to make special mention of the Montrose Club, who has faithfully kept the Department supplied with clothing and beautifully knitted garments; the Needlework Guild, the Junior Red Cross Society, the Boy Scouts and the Guild of St. James Church, Compton, for their useful donations.

May I express my sincere thanks to the members of the Staff for their splendid work and willing help at all times.

In closing may we again thank Mr. Chenoweth, the Doctors, the Nurses and members of other departments for their continued interest and assistance.

Respectfully submitted,

H. ALINE PAICE,
Director Social Service.

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REPORT OF THE SOCIAL SERVICE DEPARTMENT

ROYAL VICTORIA MONTREAL MATERNITY HOSPITAL

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

In presenting the statistical report of this department an increase of 146 new patients over last year is noted. The post-partum clinic has fallen off, no doubt due to the unemployment situation and continuous moving of our patients.

The routine of referring the babies to the Child Welfare Association for supervision on discharge from the hospital has been followed as usual, the nurses visiting within 48 hours.

We again wish to express our appreciation to the Members of the Ladies' Auxiliary Board for the cars placed at the disposal of the social workers for the home visiting, many calls being in the outlying districts, where other transportation would be impossible.

The Committee organized for special emergency supplies for patients on the outside service has proved of great assistance during this period of unemployment. We are also indebted to the Members of the Ladies Auxiliary Board for 30 Christmas dinners provided for our needy patients. We have received many letters of appreciation from the recipients.

May I take this opportunity to thank the Committee for the opportunity given me of attending the Conference of Hospital Social Workers held in Boston last June. The attendance was over 5,000 and the speakers were all outstanding in their special field.

The Statistical Report is as follows:—

Financial investigations and interviews regarding Hospital and home care.	1429
Home visits made.	1221
Babies referred to Child Welfare Association.	1374
Patients referred from other agencies.	197
Patients referred to co-operating agencies.	204
Post-partum patients attending clinic.	606
Follow-up cards and letters sent.	602
Meetings attended.	20

120 Layettees given to patients.

We again wish to thank the Agencies with whom we have worked during the year, and the Needlework Guild for their generous donation.

In closing may we express our appreciation and gratitude to the Committee, Mr. Chenoweth, the doctors and staff for their interest and help.

Respectfully submitted,

GERTRUDE M. MATTHEWS,

*Social Worker,
Maternity Clinic.*

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REPORT OF PRE-NATAL SETTLEMENT CLINICS

ROYAL VICTORIA MONTREAL MATERNITY HOSPITAL

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL

Gentlemen:—

I have the honour to submit the Annual Report of the Pre-natal Settlement Clinics for 1930.

There has been an increase of about 28% in the total attendance, that of 1929 being 2373, and 1930 being 3037.

In May we moved the Rosemount Clinic to more spacious quarters; this clinic having grown considerably.

The Point St. Charles Clinic has increased its attendance from 703 in 1929, to 1,008 in 1930, Miss Barrett very kindly supplying an extra nurse.

The new committee organized for emergencies has been doing very valuable work, many children being able to return to school owing to donations of shoes, rubbers and clothing generally. Beds and bedding have also been given enabling patients to be confined in their own homes.

Tea, cocoa and biscuits served at the Settlement Clinics have been much appreciated by the patients. Some days as many as 25 cups have been given.

Our thanks are due to the Ladies' Auxiliary Board whose kindness during the past year has been much appreciated, also Miss Barrett for her invaluable help and suggestions, Mr. Chenoweth, the doctors, and staff for their loyal co-operation.

Statistical Report is as follows:—

Pt. St. Charles

Clinics held	50
New patients	209
Total attendance in 1930	1008
Total attendance in 1929	703

Rosemount

Clinics held.....	25
New patients.....	110
Total attendance in 1930.....	471
Total attendance in 1929.....	375

Montreal General Hospital

Clinics held.....	51
New patients.....	133
Total attendance in 1930.....	451
Total attendance in 1929.....	275

Maisonneuve

Clinics held.....	25
New patients.....	93
Total attendance in 1930.....	411
Total attendance in 1929.....	360

Coursol

Clinics held.....	25
New patients.....	91
Total attendance in 1930.....	385
Total attendance in 1929.....	479

Mount Royal

Clinics held.....	26
New patients.....	58
Total attendance in 1930.....	313
Total attendance in 1929.....	181

Total number of new patients in-door..... 350

Total number of new patients out-door..... 344

Total..... 694

Number of clinics held..... 202

Number of pre-natal visits made..... 994

Investigations made..... 1736

Patients referred to other agencies..... 123

Respectfully submitted,

MADGE FOLKINS,

*Social Worker,
Settlement Clinic.*

SOCIAL SERVICE DEPARTMENT
FINANCIAL STATEMENT

ROYAL VICTORIA HOSPITAL

FINANCIAL STATEMENT FOR THE

RECEIPTS

Cash balance from 1929.....	\$ 3.92	
Received from Main Office for Petty Cash.....	600.00	
		\$603.92
Credit Note (Hartz).....	5.20	
Special Fund.....	25.75	
		30.95
		\$634.87
 Special Medicine.....	 \$522.80	
 Donations.....	 8.00	
 Refunds: Taxis.....	 \$28.10	
Crutches and cane.....	43.75	
Surgical appliances and special boots.....	49.20	
Transportation.. .. .	27.75	
Gauze and bandages....	6.27	
Car tickets (patients).....	10.25	
Clinic attendance (patient).....	2.00	
Needles (Hypo. Diabetic).....	.40	
Scales (Diabetic).....	1.00	
		168.72
		699.52
		\$1,334.39

SOCIAL SERVICE DEPARTMENT

YEAR ENDING DECEMBER 31st, 1930.

DISBURSEMENTS

Deposited in Main Office:

Special Medicine.....	\$522.80
Donations.....	8.00
Refunds.....	168.72

\$699.52

Expenditure from Petty Cash:

Special diet.....	\$ 2.90	
Taxis.....	78.85	
Crutches and cane.....	65.05	
Surgical appliances and special boots..	73.65	
Transportation.....	114.40	
Gauze and bandages.....	7.00	
Car tickets (patients).....	1.00	
Room and board.....	11.70	
Telephones and telegrams (long distance).....	.82	
Refund to Special Fund.....	15.75	
Stamps, Post Office Orders, Subscriptions and Memberships to Social Service Associations.....	33.48	
	_____	404.60
Sundries: Dentures.....	20.00	
Shoes and rubbers (men's) ..	5.92	
Flowers, etc. for patients....	1.25	
Doll (Xmas).....	.29	
	_____	27.46
Car tickets (Workers).....	159.25	
Bus tickets (Workers).....	3.10	
	_____	162.35
		594.41
Cash balance on hand.....		40.46
		634.87

\$1,334.39

H. ALINE PAICE,
Director Social Service Department.

TENTH ANNUAL REPORT OF
THE MCGILL ALUMNÆ LIBRARY COMMITTEE
ROYAL VICTORIA HOSPITAL

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I take pleasure in presenting the tenth annual report of the Royal Victoria Hospital Library. As in the past, the library is under the management of a committee appointed by the McGill Alumnæ Society; and its work is carried on by a staff of volunteers, except in the summer when an undergraduate of McGill, paid by the Hospital, is in charge. Each bed in the hospital is visited twice a week by a librarian.

During the year, 24,671 books have been given out to the patients and staff of the Royal Victoria Hospital. This is an increase of 1,064 over the previous year and is very gratifying to the workers, in that it shows that the books are being more and more appreciated by patients and staff.

In September, when reorganizing for the winter, the committee made an effort to secure six workers more than in previous years, so that we now have a third worker each day who remains in the Library to give out books to members of the staff. This was found necessary as there has been a marked increase in the number of books loaned to the staff, due partly to the fact that all student nurses have joined the Library.

During the past year, 557 new books have been added to the Library shelves. Some of these were donations but the majority have been bought with the Three Hundred Dollars (\$300.00) granted by the Hospital for this purpose—of which Two Hundred and Ninety-three Dollars, sixty-seven cents (\$293.67) was spent; and with donations and fines. Of these donations, Fifty Dollars (\$50.00) was given by the McGill Alumnæ Society and Ten Dollars (\$10.00) by the Women's Auxiliary of the Shaar Hashomayim Synagogue. Sixteen Dollars, fifteen cents (\$16.15) was collected in fines. In all Three Hundred and Eighty-seven Dollars, and ten cents (\$387.10) was spent on new books and in replacing worn-out favourites.

At the suggestion of Miss Sharpe, Director of Education of Nurses, the idea brought forward, some years ago, by the convenor, was adopted and a notice board has been placed in the Nurses' Home. Twice a week, a librarian posts items of general interest taken from current periodicals. This board has become very popular.

For the convenience of patients a catalogue classifying books by subject matter, as Love Stories, Adventures, Biographies, etc., has been printed. Book-rests have also been provided for the use of patients who have previously been denied the pleasure of reading.

In June, the convenor attended a convention of librarians of the Massachusetts Librarians' Club, in Boston, where those present were much impressed with the information that the Library in the Royal Victoria Hospital was managed and operated by volunteers.

The Hospital Libraries Book Club has been addressed during the year by several speakers prominent in Montreal, among them Dr. Slight and Miss Eileen Flanagan. Dr. Slight spoke on the value of books in occupying the minds of patients whose mental attitude delayed their recovery. Miss Flanagan related some pathetic and many amusing stories told by the sixty patients whom she had interviewed regarding their interest in and their use of the Library.

It is gratifying to know that the work of the Royal Victoria Hospital Library is of interest outside its own sphere. Recently the convenor was approached by a lady from Copenhagen who wished to obtain information as to how to organize a hospital library.

In closing I should like to thank the Royal Victoria Hospital for its ready co-operation, for without this support, the work could not be carried on as successfully.

Respectfully submitted,

INEZ M. BAYLIS,
*Convenor Library Committee,
McGill Alumnæ Society.*

DONATIONS, 1930

ANONYMOUS (FOR GASTRO-INTESTINAL CLINIC).....	\$100.00
BASSARABIER HEBREW SICK BENEFIT ASSOCIATION.....	50.00
BLAUSTEIN, THE LATE MR. SAMUEL.....	100.00
CHAHOON, MRS. G. H. (FOR GASTRO-INTESTINAL CLINIC)	50.00
CAMPBELL, DR. A. D. (FOR BINDING RECORDS).....	25.00
CANADIAN JOHNS-MANVILLE CO. LTD.....	100.00
CANADIAN PACIFIC RAILWAY COMPANY.....	750.00
CROWN TRUST COMPANY.....	25.00
DENECHAU LODGE.....	25.00
DOMINION BRIDGE COMPANY.....	200.00
DOMINION TRANSPORT COMPANY.....	50.00
DUNN, SIR JAMES.....	100.00
ELMHURST DAIRY LIMITED (CHRISTMAS TREES).....	25.00
GILMOUR BROTHERS.....	10.00
GORDON, THE ESTATE LATE MRS. MARY.....	300.00
HEBREW SICK BENEFIT ASSOCIATION.....	50.00
HOLT, LADY (CHRISTMAS FUND WOMEN'S PAVILION).....	250.00
HOWARD SMITH PAPER MILLS.....	50.00
HUESTON, THE LATE MR. WILLIAM.....	500.00
HUGESSON, MRS. K. (FOR BABIES).....	12.00
JAQUIN, MR. J. (FOR STAMPS).....	5.00
JUNIOR LEAGUE, CANTEEN COMMITTEE.....	200.00
MATHIAS, MRS. PERCY F. (CHRISTMAS FUND WOMEN'S PAVILION).....	10.00
MEREDITH, LADY (FOR BLOOD TRANSFUSIONS).....	300.00
MOLSON, MRS. HERBERT AND MRS. J. H. (CHRISTMAS FUND).....	100.00
MOLSON, MR. WALTER.....	100.00
MONTREAL CITY AND DISTRICT SAVINGS BANK.....	75.00
MORRICE, MR. W. J. (CHRISTMAS FUND).....	20.00
PITFIELD, MR. WARD C.....	50.00
ROYAL ALBERT LODGE BENEVOLENT FUND (FOR BLOOD TRANSFUSIONS).....	25.00
STEWART, MRS. WALTER M. (MAINTENANCE OF TOWER CLOCK, WOMEN'S PAVILION).....	200.00
WILLIAM WARREN FUND.....	100.00

MISCELLANEOUS GIFTS

For The Year Ended December 31st, 1930.

Shirts and Bootees for Infants.....	American Women's Club
Bootees and Bonnets.....	Benson, Mrs. G. F.
Mattress.	Blaylock, Mr. S.
Five Boxes of Apples and 18 Christmas... Trees.....	Bonsecours Market Fruit & Vegetable Co.
Gramophone and 100 Records.....	Bourque, Mr. J. C.
Binding 22 Vol. of Medical Periodicals...	Campbell, Dr. A. D.
Six Turkeys.....	Davies, Wm. Co. Ltd.
Two Cases of Apples.....	Devondale Fruit Farm
One Box of Fish.....	Fish and Game Association
Grape Fruit and Cherries.....	Garrow, Mrs. A. E.
Subscription—National Geographic Mag- azine, Harper's Magazine, and Modern Hospital.....	Gillespie, Miss
Picture "FABIOLA" for Class Room, Nurses' Home.....	Gillespie, Miss
Radio-Gramophone and Clock	Holt, Sir Herbert
4 Dozen Cot Sheets, etc.....	Junior League Sewing Committee
Subscription—The Canadian Magazine...	Lavanchy, Mr. O. M.
2 Cases Sunkist Oranges.....	Lindsay, Mr. C. W.
Bootees, Bonnets and 6 lbs. of Candy...	Mathias, Mrs. Percy
Subscription—The Canadian Geographical Journal.....	Mathias, Mrs. Percy
Bootees.. ..	Miller, Mrs. W. R.
Two Telephone Booths.....	Montreal Stock Exchange
One Book Tickets.....	Montreal Tramways
Toys, Candy and Clothing.....	Montrose Club
Tin Foil.....	Morrice, Mr. H. G.
One Hospital Bed.....	McKim, Mrs. A.
Knitted Jackets, Sheets, Towels, etc....	Needlework Guild of Canada
Knitted Shirts for Infants.....	Osgood, Mrs. A. W.
Salmon.....	Pitfield, Mrs. W. C.
Toys, Candy and Plum Puddings.....	Pomeroy, Mrs. A. L.
Two Turkeys and Two Geese.. ..	Poulin, P. & Co.
One Layette, Jackets, Bootees, etc.....	Ready Circle
Eight Monel Metal Utensils.....	Regal Kitchens
31 Pounds of Salmon.....	Sheldon, Mr. Edward
Two Barrels of Apples.....	Silver Fruit & Vegetable Store
Apples.....	Stewart, Mrs. Walter M.
Tobacco.....	Stewart, Mr. Walter M.
Fifty Pounds of Tea.....	Stroud, W. D. & Sons
Two Cases of Oranges.....	Vipond, Dr. C. W.
Twelve Tickets for Flower Show.....	Wanklyn, Mrs.
Ten Ash Trays.....	White, Mrs. Stephen
Bootees.. ..	Williams, Miss M. K.
120 Tubes Nivea Cold Cream.....	Wingate Chemical Co.

ROYAL VICTORIA HOSPITAL

DONATIONS TO CHRISTMAS TREE FUND, 1930

NAME	AMOUNT	NAME	AMOUNT
ALEXANDER, JAMES.....	\$ 5.00	LABATT, MRS. THEO.....	10.00
ALLAN, MRS. ANDREW.....	20.00	LUCAS, MRS. ALGERNON.....	10.00
ALLAN, JAMES B.....	25.00	MACDOUGALL, H. B.....	50.00
ALLAN, HUGH A.....	25.00	MACLEAN, MRS. C. W.....	10.00
ALLAN, SIR MONTAGU.....	25.00	MACNUTT, E. A.....	10.00
ALLAN, LADY.....	10.00	MACINNES, W. R.....	5.00
ANGUS, D. FORBES.....	20.00	MARTIN, DR. C. F.....	10.00
ANGUS, W. F.....	25.00	MCCONNELL, J. W.....	50.00
ATHOLSTAN, LORD.....	10.00	McFARLANE, MR. AND MRS. C. H.....	10.00
BALLANTYNE, HON. C. C.....	25.00	McMASTER, R. H.....	25.00
BEATTY, E. W., K.C.....	100.00	MEREDITH, MRS. CHARLES....	25.00
BLACK, W. A.....	50.00	MEREDITH, F. E., K.C.....	25.00
BRONFMAN, ALLAN.....	25.00	MEREDITH, LADY.....	100.00
BUCHANAN, MRS. REGINALD...	5.00	MITCHELL, HONOURABLE W. G.	10.00
CAINS, MRS. G. L.....	10.00	MOLSON, COLONEL HERBERT...	20.00
CAPE, LT.-COL. E. G. M.....	25.00	MOLSON, MRS. WALTER.....	10.00
CHIPMAN, MRS. W. W.....	15.00	MORGAN, F. CLEVELAND.....	10.00
CLERGUE, F. H.....	25.00	MORRICE, W. J.....	20.00
COOK, J. W., K.C.....	15.00	MURRAY, HOWARD.....	25.00
COWANS, P. P.....	25.00	OGILVIE, A. E.....	25.00
COWANS, RUSSELL...	25.00	OGILVIE, MISS ALICE H.....	10.00
CREAM, DANIEL.....	2.00	OGILVIE, GAVIN L.....	25.00
DANIELS, F. G.....	25.00	OPPE, MRS. JOHN D.....	5.00
DAWES, A. SIDNEY.....	5.00	PATERSON, ALEX.....	10.00
DAWES, NORMAN J.....	25.00	PATERSON, J. B.....	25.00
DAWES, KENNETH T.....	15.00	PATERSON, MRS. R. MACD....	10.00
DECARY, E. R.....	10.00	PEASE, E. L.....	20.00
DESBARATS, W. A.....	5.00	PILLOW, HOWARD W.....	25.00
DOBSON, S. G.....	10.00	RACINE, ALPHONSE.....	25.00
DRUMMOND, HUNTLY R.....	25.00	REDMOND, RENE.....	10.00
DRUMMOND, LADY...	25.00	SCOTT, Miss ELISABETH.....	10.00
FETHERSTONHAUGH, E. C. B..	20.00	SHAUGHNESSY, BARONESS.....	20.00
FETHERSTONHAUGH, R. C.....	10.00	SHAUGHNESSY, LORD.....	25.00
FRASER, D. H.....	10.00	SISE, C. F...	10.00
GILLESPIE, T. S...	15.00	SKINNER, WALDO W.....	10.00
GORDON, SIR CHARLES.....	35.00	SOUTHAM, W. W.....	25.00
HART, CHARLES M.....	15.00	STARKE, COLONEL ROBERT....	5.00
HART, E. THORNLEY.....	5.00	THORNTON, SIR HENRY W....	25.00
HOARE, C. S.....	25.00	THORNTON, MISS ISABEL.....	5.00
HODGSON, A. A.....	20.00	TIMMINS, N. A.....	10.00
HODGSON, D. M.....	10.00	TODD, DR. JOHN L.....	25.00
HOLT, SIR HERBERT.....	100.00	TURNBULL, MRS. JOHN.....	5.00
HOSMER, E. B.....	100.00	WATSON, HUGH.....	10.00
HOSMER, MISS OLIVE.....	50.00	WATSON, J. C.....	10.00
JACK, J. R.....	10.00	WEBSTER, HON. L. C.....	10.00
JONES, F. P.....	100.00	WILDER, J. E.....	10.00
JOSEPH, HENRY.....	5.00	WILSON, HONOURABLE J. M....	10.00
KILLAM, I. W...	100.00		
KING, J. COCHRANE.....	10.00		

ROYAL VICTORIA MONTREAL MATERNITY HOSPITAL

DONATIONS TO CHRISTMAS TREE FUND, 1930

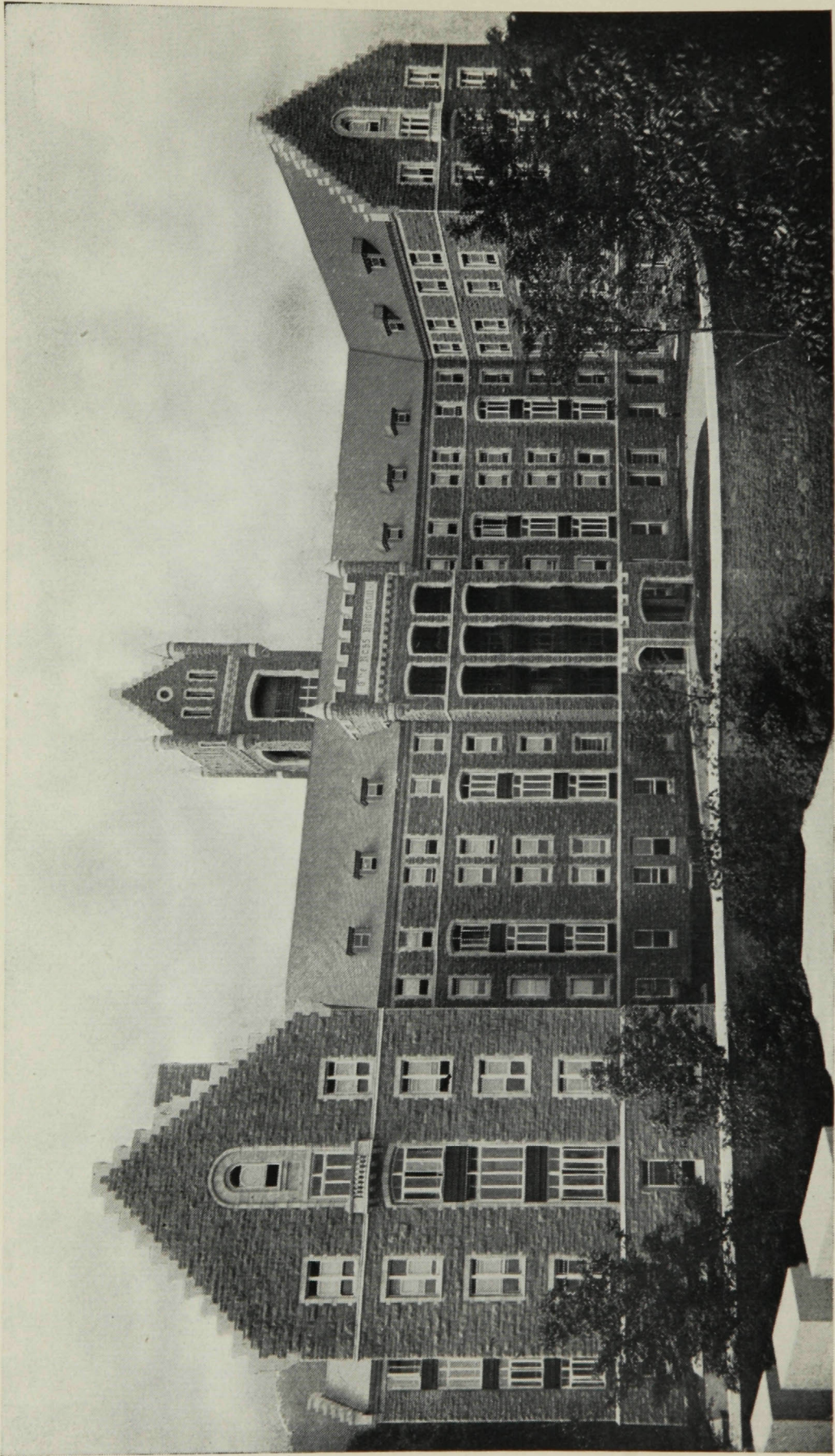
NAME	AMOUNT	NAME	AMOUNT
ADAIR, MRS. ROBERT.....	\$10.00	LAW, MRS. A. G.....	10.00
ANGUS, MRS. W. F.....	15.00	MACDOUGALL, MRS. G. W..	3.00
ATHOLSTAN, LADY.....	10.00	MACDOUGALL, MRS. R. E...	5.00
BEARDMORE, MRS. LIONEL....	10.00	MACINNES, MRS. W. R.....	5.00
BENSON, MRS. G. F.....	10.00	MARLER, MRS. W.....	3.00
BRAINERD, MRS. WINTHROP...	5.00	MCCONNELL, MRS. J. W.....	10.00
CAMERON, MRS. J. C.....	5.00	MORRICE, MRS. DAVID... ..	10.00
COOK, MRS. G. W..	2.00	OGILVIE, MRS. A. E.....	10.00
COWANS, MRS. P. P.....	25.00	OGILVIE, MRS. G. L....	5.00
DRUMMOND, MRS. H. R... ..	15.00	PEVERLEY, MRS. FRED.....	10.00
GILLESPIE, MISS L. M.....	5.00	REFORD, MRS. K. S.....	25.00
GORDON, LADY... ..	25.00	REFORD, MRS. R. W.....	5.00
HAYS, MRS. C. M.....	25.00	SKINNER, MRS. W. W.....	25.00
HAYS, MISS M. V.....	5.00	STEWART, MRS. T. HOWARD....	25.00
HICKSON, LADY.....	10.00	STEWART, MRS. WALTER M... ..	100.00
HODGSON, MRS. THOMAS E....	10.00	STOKER, MRS. T. T. MCG. . .	15.00
HOLT, MRS. C. M.....	5.00	TIMMINS, MRS. L. H....	5.00
HOLT, LADY.....	25.00	WANKLYN, MRS. F. L.....	10.00
JONES, MRS. F. P... ..	10.00		

FLOWERS

CANADA'S NATIONAL FLOWER SHOW
 CAPE, COL. E. G. M.
 CHURCH OF ST. ANDREW AND ST. PAUL
 CITY OF WESTMOUNT
 CLARKE, MR. D. R.
 FRASER, DR. J.
 GRACE CHURCH SUNDAY SCHOOL
 HOLT, LADY
 HOUSE OF FLOWERS
 LEY & McALLAN LTD.
 LINDSAY, MRS. LIONEL
 MONTREAL POLICE AND FIRE CHIEFS'
 CLUB
 ROBINSON, MRS. G.
 ROSERY FLORIST REG'D.
 STEPHENS, GEO. W.
 STEWART, MRS. WALTER M.
 UNITED CHURCH, GREENFIELD PARK
 WHITE, DR. HAMILTON

BOOKS AND MAGAZINES

ALLAN, MRS. ANDREW
 BARSALOU, MRS. L.
 CAPE, MRS. E. G. M.
 CHIPMAN, MRS. W. W.
 GILLESPIE, MISSES
 GRAHAM, MISS
 HOLT, LADY
 KIWANIS CLUB
 LA REVUE MODERNE
 MATHIAS, MRS. PERCY
 MEREDITH, LADY
 MACKENZIE, MRS. ELLICE A.
 PATERSON, MR. H.
 PATERSON, MR. R. MACD.
 TIDMARSH, DR. C. J.
 WANKLYN, MRS. F. L.
 WHITE, MRS. STEPHEN



ROSS MEMORIAL PAVILION

REPORT OF THE DEPARTMENT OF MEDICINE

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

I beg to submit the following report for the Department of Medicine for the year 1930.

The work of the Department has been carried on with the same facility as in past years. At times the urgency for public beds has made it difficult to keep pace with the applications for admission although during the past two years it has been our endeavour to increase the turn-over as rapidly as possible. We have been particularly helped in this connection by the efforts of the Social Service Department without whose assistance this could not have been accomplished.

The Out-Patient Department has maintained the activity of the previous year. It is gratifying to note that there has been a decrease in the number of patients attending for the Pasteur treatment of rabies.

The work of the Medical Laboratories has continued at maximum capacity and it is not to be expected that any important increase in this work will occur unless an increased Hospital population occurs.

At the termination of the Interne year Doctor Harold E. Edwards, Resident, left to take up a position as Assistant Resident in the Hospital for Sick Children in Toronto. He was succeeded by Doctor G. D. Taylor who has carried on and expanded the organization in the Department. At this point it cannot be omitted to express the appreciation of the Medical Department for the construction of the new Interne Residence which should add a great deal of pleasure to their sojourn in the Hospital.

Below will be found a comparative statement of the work done by the Department during 1930 as compared with that of 1929.

In conclusion I should like to place on record the appreciation of this Department of the co-operation of the Administrative and Nursing Staffs throughout the year.

Yours faithfully,

J. C. MEAKINS,
Physician-in-Chief.

□ □

TABLE 1.

IN-DOOR DEPARTMENT				
	1929		1930	
Patients remaining, Dec. 31st.....	140	.	115	....
“ admitted during the year....	2916	....	3006	....
“ discharged during the year...	....	2941	....	2997
“ remaining, Dec. 31st.. .....	....	115	....	124
	3056	3056	3121	3121
Deaths during 1929 and 1930.....	Total 255	% 8.4	Total 227	% 7.57
Consultations.....	....	597	....	632

TABLE 2.

MEDICAL OUT-PATIENT DEPARTMENT						
	1929			1930		
	Old Cases	New Cases	Ratio	Old Cases	New Cases	Ratio
A. 1. Medical Clinic.....	6604	1958	3.37	6497	2004	3.24
2. Cardio-Renal.....	1583	192	8.24	1583	187	8.46
3. Pulmonary Clinic.....	1564	298	5.24	1925	312	6.16
4. Gastro-Intestinal Clin.	2425	249	9.73	2755	277	9.94
5. Asthma Clinic.....	1917	122	15.71	1308	82	14.86
B. Pædiatric Clinic.....	4358	1012	4.30	4086	899	4.54
C. Neurological Clinic.....	3336	335	9.95	3570	368	9.70
D. Dermatological Clinic....	1902	528	3.60	2089	732	2.87
E. Metabolism Clinic.	1385	87	15.92	1626	92	17.67
F. Psychiatric Clinic.....	567	110	5.15	605	75	8.06
G. Rabies Clinic.....	807	215	3.70	366	124	2.95
H. Thyroid Clinic.....	604	154	3.92	712	141	5.04
Total.....	27052	5260		27122	5293	
Average..			5.14			5.12

TABLE 3.

MEDICAL LABORATORIES		
	Cases	
	1929	1930
Chemical Determinations.....	16,501	15,771
Basal Metabolic Determinations.....	1,695	1,684
Electrocardiograms.....	1,030	1,216
	19,226	18,671

TABLE 4.

PHYSIO-THERAPY DEPARTMENT		
	Private	Public
	Electro- and Physio-therapy.....	4,580	8,638
Massage.....	294	2,207
	4,874	10,845

PUBLICATIONS

Dr. J. C. MEAKINS:

"Tetany."

Annals of Inter. Med., 4: No. 6, 462-466, November, 1930.

(with Dr. W. de M. Scriver)

"The Treatment of Hypertension".

B. M. J., (in press).

"Clinical Aspect of Disturbances of the Parathyroid Gland."

B. M. J., (in press).

Dr. MAUDE E. ABBOTT:

"History of Medicine in the Province of Quebec."

Monograph in "Storied Quebec", pp. 1066-1150. *Dominion Publishing Co., Toronto, 1930.*

Dr. G. R. BROW:

(with Dr. C. N. H. Long and Dr. J. Beattie)

"The Hypothalamus and the Sympathetic Nervous System."

The Vegetative Nervous System, Chap. XI. Williams & Wilkins, Baltimore, 1930.

(with Dr. C. N. H. Long and Dr. J. Beattie)

"Physiological and Anatomical Evidence for the Existence of Nerve Tracts connecting the Hypothalamus and Spinal Sympathetic Centres."

Proc. Roy. Soc., London, Series B. 106: 253, 1930.

(with Dr. C. N. H. Long and Dr. J. Beattie)

"Irregularities of the Heart Under Chloroform. Their Dependence on the Sympathetic Nervous System."

Journ. Amer. Med. Asscn., 95: 715, 1930.

(with Dr. C. N. H. Long)

"Biochemical Changes in the Heart during Anæsthesia."

Anæsthesia and Analgesia. Sept.-Oct. 1930.

Dr. A. K. GEDDES:

(with Dr. H. P. Wright and Dr. C. L. Vick)

"A Comparison of the Results Obtained in the Feeding of Infants according to Appetite on Sweet and Lactic Acid Milk Formula."

Amer. Journ. Dis. Children, 40: 927-928, October, 1930.

(with Dr. H. P. Wright)

"A Simple Method of Artificial Feeding in Infancy."

C.M.A.J., 23: 537-539, 1930.

Dr. RUDOLPH GOTTLIEB:

(with Dr. Alton Goldbloom)

"Further Studies on Icterus Neonatorum. The Production of Icterus in Animals following prolonged Anoxæmia."

Journ. Clin. Invest., 8: 375, 1930.

(with Dr. Alton Goldbloom)

"Icterus Neonatorum. III. The Oxygen Capacity and Saturation of the Mother and Fœtus."

Journ. Clin. Invest., 9: 139, 1930.

(with Dr. Alton Goldbloom)

"The Nature of Icterus Neonatorum."

N.Y. State Journ. of Med., Oct. 15, 1930.

"La Jaunisse des Nouveaux Nés."

La Revue Pédiatrique Française (in press).

(with Dr. Joseph Kaufmann)

"The Innervation of the Renal Parenchyma. A Study to Demonstrate Nerve Endings in Renal Epithelium."

Amer. Journ. Physiol., 96: 40, 1931.

(with Dr. P. J. Kearns)

"Icterus Neonatorum. IV. The Role of the Placenta in Visible Icterus Neonatorum."

Journ. Clin. Invest. (in press).

Miss RHODA GRANT:

(with Dr. C. N. H. Long)

“The Recovery Process after Exercise in the Mammal. I. Glycogen Synthesis in the Fasted Rat.”

Journ. Biol. Chem., 89: 553, 1930.

Dr. JOSEPH KAUFMANN:

(with Dr. Rudolf Gottlieb)

“The Innervation of the Renal Parenchyma. A Study to Demonstrate Nerve Endings in Renal Epithelium.”

Amer. Journ. Physiol., 96: 40, 1931.

Dr. C. N. H. LONG:

(with Dr. G. R. Brow and Dr. J. Beattie)

“The Hypothalamus and the Sympathetic Nervous System.”

The Vegetative Nervous System, Chap. XI. Williams & Wilkins, Baltimore, 1930.

(with Dr. G. R. Brow and Dr. J. Beattie)

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Proc. Roy. Soc., London, Series B, 106: 253, 1930.

(with Dr. G. R. Brow and Dr. J. Beattie)

“Irregularities of the Heart Under Chloroform. Their Dependence on the Sympathetic Nervous System.”

Journ. Amer. Med. Asscn., 95: 715, 1930.

(with Dr. G. R. Brow)

“Biochemical Changes in the Heart During Anæsthesia.”

Anæsthesia and Analgesia. Sept.-Oct., 1930.

(with Miss Rhoda Grant)

“The Recovery Process after Exercise in the Mammal. I. Glycogen Synthesis in the Fasted Rat.”

Journ. Biol. Chem., 89: 553, 1930.

Dr. C. K. RUSSEL:

“The Syndrome of the Brachium Conjunctivum and the Tractus Spinothalamicus.”

Arch. Neur. and Psychiatry (early Number).

Dr. J. BOYD SCRIVER:

(with Dr. T. R. Waugh)

“Studies in Sickle Cell Anæmia.”

Can. Med. Asscn. Journ., 23: 375-380, 1930.

Dr. W. de M. SCRIVER:

(with Dr. Horst Oertel)

“Necrotic Sequestration of the Kidneys in Pregnancy (Symmetrical Cortical Necrosis.) A Clinical and Anatomic Pathogenic Study.”

The Journ. Path. and Bact., 33: 1071-1094, 1930.

(with Dr. J. C. Meakins)

“The Treatment of Hypertension.”

B. M. J. (in press).

“A Case of Pyloric Obstruction Responding to Treatment.”

C.M.A.J., 24: 99-100, 1931.

Dr. C. J. TIDMARSH:

“Rupture of the Aorta: Case Report.”

Journ. C. M. A., 23: No. 3, 1930.

Dr. C. L. VICK:

(with Dr. H. P. Wright and Dr. A. K. Geddes)

“A Comparison of the Results Obtained in the Feeding of Infants according to Appetite on Sweet and Lactic Acid Milk Formula.”

Amer. Journ. Dis. Children, 40: 927-928, October, 1930.

Dr. H. P. WRIGHT:

(with Dr. A. K. Geddes and Dr. C. L. Vick)

“A Comparison of the Results Obtained in the Feeding of Infants According to Appetite on Sweet and Lactic Acid Milk Formula.”

Amer. Journ. Dis. Children, 40: 927-928, October, 1930.

(with Dr. A. K. Geddes)

“A Simple Method of Artificial Feeding in Infancy.”

C.M.A.J., 23: 537-539, 1930.

□ □

DEPARTMENT OF MEDICINE

RECORD OF DISEASES

For the Year Ended 31st December, 1930

	Total	Died		Total	Died
Specific infections and general diseases	757	60	Jaw, teeth and gums	22	
Animal parasites	19		Oesophagus	6	
Metabolism	251	8	Stomach	132	
Diseases of infancy	195	21	Intestines	293	3
Physical agents	1		Liver and gall ducts:		
Poisonings, intoxications	87	6	Liver	46	3
Tumours benign and malignant:			Gall ducts	93	1
Benign	32		Pancreas	1	
Malignant	136	21	Abdomen and peritoneum	41	
Congenital malformations	31	5	Rectum and anus: Rectum	18	1
General injuries	22	1	Anus	4	
Special skin diseases	90	1	Larynx	14	
Circulatory system:			Trachea and bronchi	104	1
Arteries	123	9	Lungs (see also sections I and VII)	39	
Heart	690	39	Pleura and mediastinum	103	1
Veins	19		Kidney and ureter: Kidney	148	15
Lymphatic system	14		Ureter	2	
Blood	109	5	Bladder	18	
Ductless Glands:			Urethra	4	
General	2		Male generative organs	29	
Parathyroid	1		Female generative organs	74	
Pituitary	12		Puerperal state	20	1
Suprarenal	2	1	Diseases breast—male and female	2	
Thymus	4		Anaphylaxis	4	
Thyroid	133		Abnormalities of urine	19	
Diseases of the nervous system:			Unclassified	217	6
Brain	101	12			
Meninges	6	2			
Mental affections	176	1			
Miscellaneous	53				
Peripheral nerves	64				
Spinal cord	39	1			
Sympathetic nervous system	5				
Myopathies	9				
Bones, joints, etc	136				
Eye and ear: Eye	53				
Ear	70	2			
Nose and accessory sinuses	52				
Mouth, lips, cheeks, pharynx, etc	118				

STATISTICS FOR 1930

Total Admissions 1930	3006
Total Discharges 1930	2997
	9
No. in Hospital end of year 1930	124
No. in Hospital first of year 1930	115
	9

REPORT OF THE DEPARTMENT OF SURGERY

For the Year Ending December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

During the year 1930 the work of the Surgical Department has proceeded in a satisfactory way. In the Indoor service there were 4072 admissions, representing an increase of 215 over the previous year. On the other hand in the Surgical Outdoor there were 11688 visits, which was less than the number in 1929 by 1354. It is difficult to account for the difference, but possibly the fact that two of the senior members of the Outdoor staff (Dr. Armour and Dr. Miller) were absent for the greater part of the year, these gentlemen being engaged in post graduate study abroad, together with the further fact that the recently established Industrial Clinic and the Neurosurgical Clinic have withdrawn a considerable number of the patients, may have a good deal to do with it. The number of operations performed during the year was 3080, representing 395 over the previous year.

Particular mention should be made of the sub-departments of Neurosurgery, and of the Medico-Surgical Pulmonary Clinic, in both of which a considerable increase of work can be recorded.

The work of the Industrial Clinic is progressing satisfactorily along the lines laid down last year.

The waiting list of patients for the Indoor service, especially for the women's ward, remains more or less continuously a long one, and the need of extra accommodation is often acutely felt.

As regards various other subjects of interest which were discussed in the Annual Report of last year, there is nothing particularly new to be said, and the remarks then made still hold good.

Concerning the staff of the Department it may be said in a general way that the Hospital is fortunate in having a body of Junior Assistants possessed of very high qualifications.

Dr. John Armour returned to duty after an absence of eighteen months, spent for the most part in Edinburgh, where, besides attending the surgical clinics of the Royal Infirmary, he carried out two pieces of research concerned with the surgery of the stomach, which have recently been published. These are of a high order of merit.

Dr. Gavin Miller was granted leave of absence last July to pursue post graduate work in Britain and the continent, and he will be absent approximately a year.

Apart from the regular work of the Hospital, which all members of the staff have faithfully carried on, a considerable amount of extra work has been done in special investigations, both of a clinical and of a laboratory character. In this connection the work of the Neurosurgical Department is outstanding. A list of the publications by members of the staff, for the past year, is appended.

In addition it should be mentioned that members of the staff have attended a large number of meetings of medical societies in Canada and the United States, at which they have delivered addresses. The wide scope of this phase of medical work, which is particularly calculated to increase the prestige of the Hospital, may be gathered from the following list of cities visited:— Ottawa, Quebec, Winnipeg, Kingston and all the larger cities of the Canadian West and Middle-west (post graduate lecture tour); Atlantic City, Boston, New York, New Haven, Philadelphia, Pittsfield, St. Louis, Baltimore and Washington.

Reports of the sub-departments of Neurosurgery, Orthopædics, and Anæsthesia are appended.

EDWARD ARCHIBALD, M.D.

SUB-DEPARTMENT OF NEUROSURGERY

During the year of 1930 work has continued in the Sub-department of Neurosurgery along the lines previously outlined. Dr. Joseph Evans finished his work for the Degree of Master of Science. During the summer a number of additions were made to the staff so that at the close of the year the following men were on the staff in addition to Dr. Penfield and Dr. Cone: Dr. Petersen, who has been awarded the Madeleine Ehret Ottmann Research Fellowship, is working in the Department of Neurosurgery in

addition to the Department of Neurology; Dr. A. R. Elvidge, resident in Neurosurgery; Dr. A. Torkildsen, of Oslo, Norway, assistant resident; Dr. E. L. Gage, of the University of Pennsylvania, Neurosurgical Research Fellow; Dr. I. V. Tarlov, of the John Hopkins Hospital, Baltimore, Neurosurgical Research Fellow in Pathology, in charge of the routine pathology in the laboratory; Dr. G. Chorobski, Neurosurgical Research Fellow, a member of the Neurological Department of the University of Warsaw, comes to this clinic after a year of work in Paris. Dr. Brewer has just joined the staff as Neurosurgical Research Fellow to work particularly in neuropathology.

The number of operations carried out in the Department is three hundred and twenty-seven, an increase of ninety over the preceding year.

WILDER PENFIELD, M.D.

SUB-DEPARTMENT OF ANAESTHESIA

Anæsthetics were administered for six thousand one hundred and forty-six operations during the year 1930. A detailed account is shown in the accompanying table:

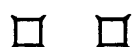
	Main Operating Room	Ross Operating Room	Maternity Operating Room	Outdoor (Oto- Laryngology and Ophthalmology)	Outdoor Surgery	TOTAL
Ether.....	208	38	....	443	51	740
Nitrous Oxide and Ether.....	1384	942	1020	792	....	4138
Nitrous Oxide and Oxygen.....	598	256	84	58	67	1063
Nitrous Oxide, Oxygen and Local.....	101	42	....	....	....	143
Ethyl Chloride and Ether.....	1	1	....	....	....	2
Chloroform.....	....	5	....	....	....	5
Rectal Ether.....	28	....	....	....	....	8
Spinal.....	9	8	....	....	....	7
Amytal and Local....	1	2	....	....	....	3
Avertin.....	5	2	....	....	....	7
Total.....	2335	1296	1104	1293	118	6146

W. B. HOWELL, M.D.

SUB-DEPARTMENT OF ORTHOPAEDICS

There has been a steady increase in the work of this Department. Outpatient consultations have increased from 2666 to 3262, with proportionate demand for indoor bed accommodation. Two voluntary assistants have come on duty in addition to the regular staff.

W. G. TURNER, M.D.



PUBLICATIONS BY MEMBERS OF THE
SURGICAL STAFF

ARCHIBALD, EDWARD W.

The Dangers Involved in the Operation of Thoracoplasty for
Pulmonary Tuberculosis.

Surg. Gyn. and Obstet., January, 1930, p. 146.

The Surgical Treatment of Tuberculous Empyæma.

Can. Med. Assn. Jour., XXIII, 1930, p. 160.

ARMOUR, JOHN.

Studies on High Intestinal Obstruction. The Administration
of Saline and other Substances by Enterostomy below the
site of Obstruction.

Brit. Jour. Surg., Jan., 1931, XVIII, No. 71.

A Lesser Curvature Gastroplasty.

Can. Med. Assn. Jour., XXIII, 1930, p. 756.

BETHUNE, NORMAN

(with Dr. Roddick Byers)

Pre-Operative Localization of Lung Abscesses.

Trans. American Clinical and Climatological Society, 1930.

CONE, WILLIAM

(with Dr. Barrera)

Brain and Cerebrospinal Fluid in Acute Aseptic Cerebral Embolism.

Arch. Neurol. and Psych., 1930.

(with Dr. Jean Saucier)

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OPERATIONS IN THE SURGICAL DEPARTMENT

For the Year Ended December 31st, 1930

Alimentary System...	1641
Cardio-Vascular System.....	6
Lymphatic System.....	71
Ductless Glands.....	73
Muscular System.....	50
Nervous System.....	326
Osseous System.....	532
Respiratory System.....	232
Diseases of the Breast.....	98
Integumentary System.....	281
General Injuries.....	115
Miscellaneous.....	38
Female Genital Organs.....	12
Total	3475
Total number of operations for the year ending December, 1929.....	3080
Increase of.....	395

In addition to this general statement, it is considered worth while to give a more detailed report of the figures of certain branches of Surgery which have wide interest. Of these the work of the recently established departments in Neurosury and Thoracic Surgery, both of which can record a large advance over the records of earlier years in the Department of Surgery, deserve perhaps first mention and a detailed statement.

NERVOUS SYSTEM:

Osteoplastic craniotomy, Exploration.....	14
“ “ Removal of tumor.....	13
“ “ Partial removal of tumor.....	8
“ “ Excision of cicatrix.....	5
“ “ Frontal lobectomy.....	2
“ “ Excision of cyst and brain scar.....	1
“ “ Separation of adhesions and ligation of vessels.....	1
“ “ Amputation of occipital lobe.....	1
“ “ Puncture of gliomatous cyst.....	1
Rt. or L. subtemporal decompression.....	12
Craniotomy, Exploration (when not osteoplastic and not described by other term).....	5
“ Removal of tumor.....	3
“ Drainage of extradural abscess.....	1
Suboccipital craniotomy, Exploration.....	3
“ “ Removal of tumor.....	13
“ “ Partial removal of tumor.....	4
“ “ Acoustic rhizotomy.....	1
“ “ Removal of adhesions.....	1
Rt. or L. Trigeminal Rhizotomy.....	3
Rt. or L. Trigeminal Rhizotomy Subtotal.....	5

NERVOUS SYSTEM:—*Continued*

Cervical, dorsal, lumbar:

Laminectomy, Exploration.....	5
“ Removal of tumor.....	4
“ Partial removal of tumor.....	1
“ Rhizotomy.....	3
“ Decompression of spinal cord.....	1
“ Fusion of thoracic spines and removal of tuberculoma.....	1
“ Division of adhesions.....	1
“ Opening of dura.....	1
“ Removal of deformity of vertebra.....	2
Rt. or L. Parietal Craniotomy, corpus callosal puncture.....	1
Ventriculography, Occipital trepanation Rt. or L.....	48
“ Fontanelle puncture.....	2
“ Injection of dye.....	1
Ventricular puncture, Occipital trepanation Rt. or L.....	13
Encephalography, Lumbar puncture.....	71
Plastic repair of spina bifida.....	6
Periarterial sympathectomy.....	4
Sympathetic ramisection.....	1
Sympathetic ganglionectomy, cervical.....	3
Elevation of depressed skull fracture.....	8
Debridement and suturing of wound of scalp.....	23
Nerve suture (radial and ulnar).....	1
Drainage of subarachnoid space, Laminectomy.....	1
Drainage of subarachnoid space, Occipital trepanation.....	1

Unclassified:

Exploration of skull defect.....	1
Occipital trepanation.....	2
Occipital trepanation and puncture of brain.....	1
Plastic repair of dura and skull defect.....	1
Plastic repair of cranium bifidum meningocele.....	1
Plastic repair of meningocele and freeing of nerve roots.....	1
Osteoplastic repair of cranial defect.....	1
Implantation of meningocele tissue.....	1
Incision of cranium bifidum.....	1
Exploration of scalp wound.....	6
Repair of suboccipital wound.....	1
Choroidplexectomy.....	1
Anastomosis of hypoglossal and fascial nerve.....	1
Anastomosis between dura and meningocele.....	1
Removal of cerebral blood clot.....	2
Aspiration of softened brain.....	2
Injection of nerves 9th and 10th dorsal and paravertebral roots.....	2
Total.....	326

RESPIRATORY SYSTEM:

Thoracentesis.....	3
Thoracotomy, Exploratory.....	3
Thoracotomy with open drainage for empyema.....	27
Thoracotomy with closed drainage for empyema.....	3
Rib resection with drainage for Lung abscess.....	12
“ “ “ “ “ Bronchiectasis.....	3
“ “ “ “ “ Lung abscess and bronchiectasis.....	4
Decortication of lung.....	3
Cauterization of lung as stage of cautery pneumectomy.....	6
Removal of thickened pleura.....	1
Closure of broncho pleural fistula.....	1
Thoracotomy for removal of foreign body in pleural cavity.....	2
Removal of shell fragment in lung.....	1
Phrenic exairesis.....	55
Thoracoplasty for Pulmonary tuberculosis.....	75
“ “ Pulmonary tuberculosis with pyopneumothorax.....	12
“ “ Pulmonary tuberculosis with pneumothorax..	6
“ “ Bronchiectasis.....	2
“ “ Empyema, chronic.....	5
Thoracoscopic exploration.....	2
Thoracoscopic pneumolysis (Jacobaeus operation).....	1
Lobectomy, total, for bronchiectasis.....	2
Lobectomy, partial.....	1
Wiring aneurysm of arch of aorta.....	1
Plastic closure of wound (unhealed post-operative wound of chest)	1
Total.....	232

ALIMENTARY SYSTEM:**Oesophagus:**

Plastic reconstruction of diaphragm for idiopathic dilatation of the œsophagus (so-called cardiospasm) (the Scrimger operation) ..	1
--	---

Stomach:

Excision of gastric ulcer.....	3
Suturing of perforated gastric ulcer.....	2
Gastrectomy, partial.....	3
Gastrostomy.....	4
Gastroenterostomy.....	29
Gastroplasty.....	4
Separation of adhesions (perigastric).....	1
Pyloroplasty.....	6
Rammstedt's operation.....	1
Total.....	53

Appendix:

Appendectomy without drainage.....	508
Appendectomy and drainage.....	168
Drainage only of appendicular abscess.....	6
Total.....	682

ALIMENTARY SYSTEM:—Continued**Liver and Gall Bladder and Bile Ducts:**

Cholecystectomy.....	122
Partial resection of gall bladder.....	2
Cholecystostomy.....	12
Choledochostomy.....	11
Plastic on common duct.....	1
Cholecystenterostomy.....	1
Cholecystogastrostomy.....	5
Total.....	154
Repair of Hernia, Femoral.....	19
“ “ “ Inguinal (recurrent—6).....	255
“ “ “ Ventral (recurrent—1).....	23
“ “ “ Ventral (traumatic).....	1
“ “ “ Umbilical.....	8
“ “ “ Epigastric.....	2
“ “ “ Diaphragmatic.....	2
Total.....	310
(of the above fascial suture was used in 154)	

DUCTLESS GLANDS:**Spleen:**

Splenectomy for thrombocytopenia.....	1
“ “ hæmolytic jaundice.....	1
Total.....	2

Thyroid:

Enucleation and resection of adenoma of thyroid.....	8
Subtotal thyroidectomy, Non-toxic.....	11
“ “ Toxic, simple.....	35
“ “ Graves' disease.....	13
Polar ligation.....	2
Incision and drainage of abscess of thyroid.....	1
Total.....	70

OSSEOUS SYSTEM:**Fractures:**

Open setting of fractures (bone plating—4).....	18
Closed setting of fractures.....	151
Suture of fracture of patella.....	12
Wiring of fracture of olecranon.....	1
Total.....	182

Details concerning operations not mentioned in the above list are obtainable from the analysis of the year's operations kept in the Surgical Records Office.

DEPARTMENT OF SURGERY

RECORD OF DISEASES

For the Year Ended December 31, 1930

	Total Died		Total Died		
Specific infections and general diseases.....	587	16	Mouth, lips, cheeks, pharynx, etc.....	13	
Diseases of animal parasites..	1		Jaw, teeth, gums.....	32	
Metabolism.....	22	1	Tongue.....	2	
Diseases of infancy.....	5		Oesophagus.....	3	
Physical agents.....	23		Stomach.....	59	3
Poisonings, intoxications....	7		Intestines.....	805	13
Tumours: benign.....	149	2	Liver and gall ducts.....	191	7
malignant.....	227	49	Pancreas.....	10	2
Congenital malformations... ..	99	10	Abdomen and peritoneum... ..	343	14
General injuries.. ..	873	24	Rectum and anus.....	186	
Special skin diseases.....	23	2	Trachea and bronchi.....	35	2
Circulatory system.....	78	2	Lungs.....	13	
Lymphatic system.. ..	41		Pleura.....	41	1
Blood.....	11		Kidney and ureter.....	41	
Ductless glands.....	77	1	Bladder.. ..	3	
Nervous system.....	276	5	Urethra.. ..	3	
Bones, joints, etc.....	217		Male generative organs.....	14	
Eye and ear: eye.....	1		Female generative organs....	30	
ear.....	11		Puerperal state... ..	9	
Nose.....	4		Diseases of breast—male and female.....	17	
			Unclassified.....	228	4

	1930	1929	For 1930
Number of Operative Cases Discharged.....	2431	2308	Increase 123
Post Operative Complications.....	153	154	Decrease 1
Post Operative Infections.....	14	12	Increase 2
Post Operative Mortality.....	120	130	Decrease 10
Aseptic Cases.....	1358	1340	Increase 18
Septic Cases.....	1074	973	Increase 101
Total Admissions.....			4072
Total Discharges.....			4053
			19
Number in Hospital end of year 1930.....			172
Number in Hospital first of year 1930.....			153
			19
Total Deaths.....			158
Total Deaths P.O.....			120

REPORT OF THE DEPARTMENT OF OBSTETRICS
AND GYNAECOLOGY

For the Year Ended December 31st, 1930.

To the BOARD OF GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL

Gentlemen:—

The increase in the work of the departments of obstetrics and gynæcology for the year ending December 31st, 1930, applies both to the indoor and outdoor services.

There has been a progressive decrease in the maternal and infantile mortality of this hospital for a period of years which is remarkable in the light of the great increase in the admissions.

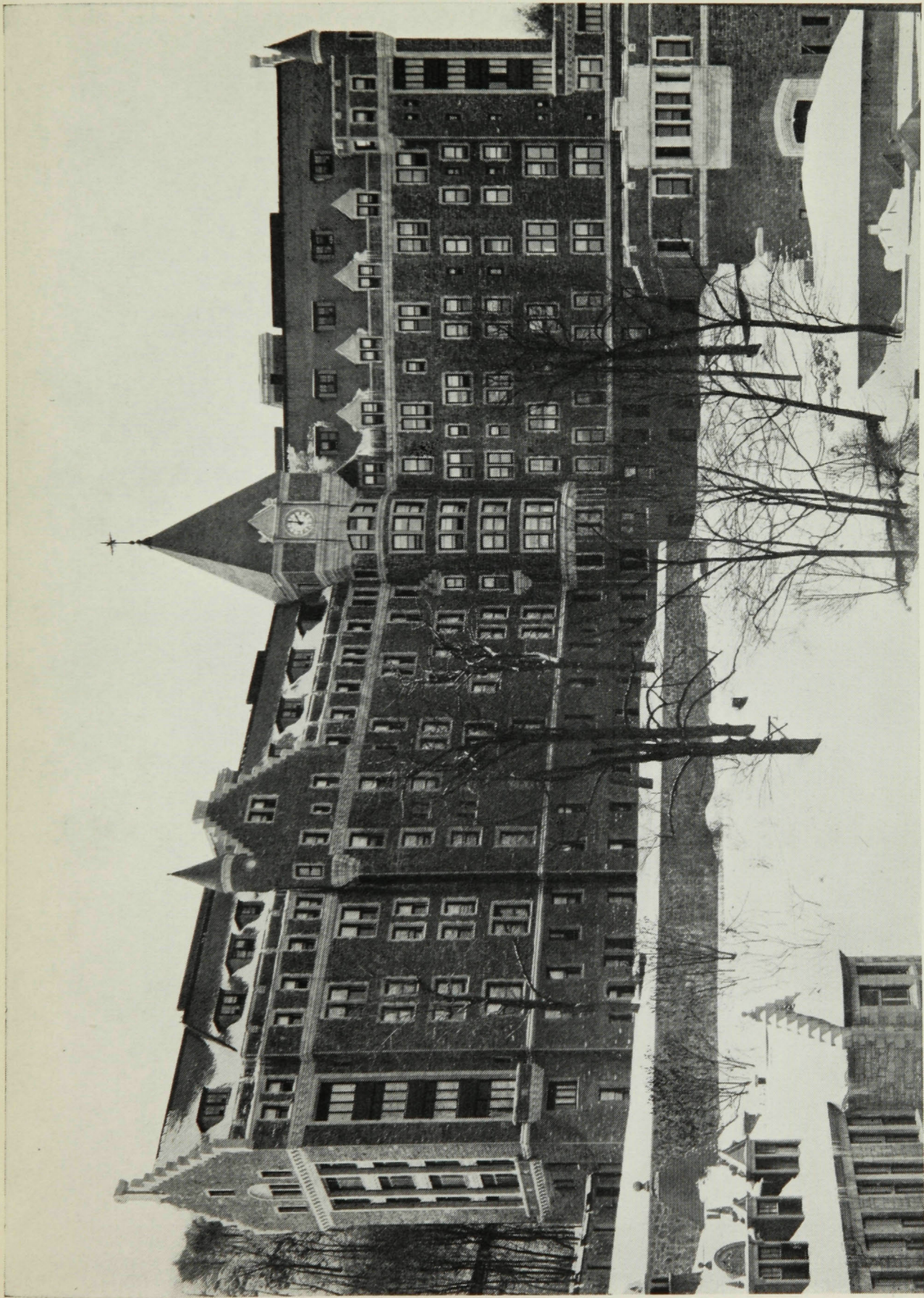
The first five year period, since the inception of the radium clinic has just been completed with encouraging results—see appended report.

The transfusion report establishes this procedure on a firm basis as a method of dealing with pelvic infections—hæmorrhage, and as a pre-operative measure.

Respectfully submitted,

JOHN FRASER,

*Obstetrician and
Gynæcologist-in-Chief.*



ROYAL VICTORIA—MONTREAL MATERNITY PAVILION

REPORT OF THE RADIUM CLINIC

For the Year Ended December 31st, 1930

Cancer Cervix Uteri

Total Admissions.....	48
New Patients.....	30
Treated with Radium.....	26
Treated with Radium and X-ray.....	1
Treated with X-ray only.....	1
Hysterectomy.....	1
Untreated.....	1
Living at end of year.....	24

Cancer Corpus Uteri

Total Admissions.....	22
New Patients.....	17
Treated with Radium only.....	5
Treated with Radium and X-ray.....	5
Hysterectomy.....	4
Untreated.....	3
Living at end of year.....	16

Cancer Ovary

Total Admissions.....	18
New Patients.....	16
Exploratory Laparotomy.....	1
Salpingo-Oophorectomy.....	3
Salpingo-Oophorectomy and X-ray.....	1
X-ray only.....	1
Pan Hysterectomy and X-ray.....	1
Pan Hysterectomy.....	5
Hysterectomy, Left Salpingo-Oophorectomy.....	1
Untreated.....	2
Living at end of year.....	13

Cancer Vulva

Total Admissions.....	4
New Patients.....	4
Treated by Surgery and Radium.....	1
Treated by Electro Coagulation.....	2
Excision by Cautery.....	1

Sarcoma

Recto vaginal septum, treated by surgery 1 died 1

Carcinoma Metastatic of Retroperitoneal Glands

Secondary to Carcinoma of Tube—

Exploratory Laparotomy 1 living 1

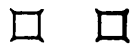
Carcinoma of Cervix Uteri treated since 1926

	Treated	Living
1926	15	4
1927	45	11
1928	21	6
1929	27	16
1930	30	26
Total	138	63

Total number of follow-up visits 386

Radium Treatments for Diseases Other than Carcinoma

Total number of treatments	108
Endocrine Dystrophy with Hæmorrhage	70
Fibromyoma Uteri	26
Uterine Polypi	6
Sub Involution	2
Cervicitis	1
Dysmenorrhœa	1
Endometriosis	1
Erosion of Cervix	1



BLOOD TRANSFUSIONS

During 1930 there were given in the New Pavilion, 151 blood transfusions to 128 patients, divided as follows:—

106 transfusions to 90 gynæcological patients.

87 transfusions to 30 obstetrical patients.

8 transfusions to 8 babies.

Out of the total of 151 transfusions 32 were made possible through the fund so generously provided for that purpose by the Women's Auxiliary Board of the Royal Victoria Montreal Maternity Hospital.

In general, blood transfusions have shown their greatest value in combatting hæmorrhage, shock and sepsis. In the last named blood transfusion has been used more and more extensively in recent years, both in the department of obstetrics and that of gynæcology, with very gratifying results. In these cases its greatest effectiveness is seen when given early, before the resistance of the patient has been to any marked degree weakened by the infective processes, and it seems wise to repeat small transfusions at intervals of two to three days until the infection is overcome.

Its use in a small series of cases of chronic pelvic inflammation has been attended by very gratifying results. In these cases its action may be two-fold; the accompanying secondary anæmia is overcome by the stimulus to the patient's blood forming organs, and the moderate rise in temperature over a period of two to four days seems to indicate a non-specific protein shock.

Transfusion has also proved its usefulness as a preparation for major surgical procedures especially in the "poor surgical risk," as well as in hastening convalescence in debilitated patients.

INFANTILE MORTALITY, 1930

There were 174 foetal deaths during the year. Of these 45 were non-viable:—

Full Term:—

Ante Partum.....	11
Intra Partum.....	30
Post Partum.....	21

Premature:—

Prematurity as cause of death.....	28
Prematurity with other causes (seen below).....	39
Non-viable.....	45

Total..... 174

	ANTE PARTUM		INTRA PARTUM		POST PARTUM		Total
	Full term	Premature	Full term	Premature	Full term	Premature	
Trauma of labour:							
1. Forceps.....			8	1	3	1	13
2. Version and extraction.....	1		1			1	3
3. Breech extraction.....			3		1		4
4. Spontaneous.....	1		3		1		5
5. Spontaneous with intra-cranial hæmorrhage.....	1				2		3
6. Tight coil of cord about neck.....	1		1				2
7. Prolapsed cord.....			5	1			6
8. Induction bag.....				1			1
9. Premature separation of placenta.....	1		1				2
Craniotomy.....			2	1			3
Complications:							
Eclampsia.....		1				1	2
Pre-eclampsia.....	1	1		2	1	3	8
Chronic nephritis.....		3	1				4
Maternal pulmonary T.B.C.....		1					1
Mother died during labour.....	1						1
Foetal atelectasis.....					1		1
Icterus Neonatorum.....						1	1
Sclera adiposa.....					1		1
Congenital heart disease.....					1		1
Scleroderma.....					1		1
Congenital tumor with metastases in lung.....					1		1
Hæmolytic jaundice.....					1	1	2
Congenital lues.....		8			2	1	11
Acute Hydramnios.....						1	1
Sepsis, broncho pneumonia.....					1		1
Extra-uterine pregnancy.....	1						1
Placenta prævia.....			3	1		1	5
Placental abnormality.....			1				1
Prematurity.....				2		26	28
Placental infection.....		1					1
Cause obscure.....	3	4					7
Abnormalities:							
1. Hydrocephalic.....		1	1				2
2. Imperforate anus (Radii absent).....					1		1
3. Microcephalic.....					2	1	3
4. Atresia of ileum.....					1		1
Total.....	11	20	30	0	21	28	120

OBSTETRICAL REPORT

For the Year Ended December 31st 1930

ROYAL VICTORIA, MONTREAL, MATERNITY

Obstetrical patients remaining in Hospital January 1st 1930.....	81	
Obstetrical patients admitted to Hospital January 1st, 1930 to January 1st, 1931.....	2642	
	2642	2723
Obstetrical patients remaining in Hospital January 1st, 1931.....	78	
Obstetrical patients treated to conclusion.....	2645	
	2645	2723

GENERAL RESULTS

TOTAL CONFINEMENTS.....		2438
Patients confined and discharged well.....	2412	
Patients treated, but not confined.....	191	
Patients treated post partum.....	13	
Patients treated and transferred.....	13	
Patients died....	16	
	2645	

PATIENTS TRANSFERRED TO OTHER SERVICES 13

No.	Para	Service	Result
8362	II.	To Ward "J" Mitral endocarditis.....	Improved
8510	I.	" Ward "B" Cholecystitis.....	Died
8605	I.	" Gynæcology—Extra Uterine Pregnancy.....	Cured
8887	IV.	" Ward "B" Cerebral embolism.....	Died
8922	III.	" Gynæcology—Ovarian Cyst.....	Cured
9062	I.	" Gynæcology—Needle in Perinæum.....	Cured
9389	IV.	" Gynæcology—Fibromyomata.....	Cured
9447	I.	" Ward "B"—Eclampsia.....	Cured
9984	IV.	" Gynæcology—Inevitable Abortion.....	Cured
10417	I.	" Ward "B"—Cardiac Disease.....	Improved
11077	I.	" Gynæcology—Threatened Abortion..	Cured
10568	VI.	" Gynæcology—Ovarian Cystoma.....	Cured
9100	II.	" Ward "B"—Eclampsia.....	Cured

BABIES TRANSFERRED TO OTHER SERVICES

9050	To Ward "N"	Prematurity.....	Died
9409	" "	" Twin.....	Died
9736	" "	" Prematurity.....	Died
10341B	" "	" Jaundice....	Died
10434	" "	" Jaundice.....	Cured

OBSTETRICAL MORBIDITY

Number of Febrile Cases.....	577
Single rises.....	182
Bacteræmia.....	4
Bacterial Toxæmia.....	169
Acute Metritis.....	19
Pelvic Cellulitis.....	17
Pelvic Thrombo Phlebitis.....	9
General Peritonitis..	1
Pyelitis.....	48
Mastitis.....	33
Engorged breasts.....	32
Lymphangitis of breasts.....	5
Infected Perinæum.....	8
Miscellaneous.....	50

A single rise in temperature to 100.6 (after the first 24 hours till discharge classes the case as morbid). Of the 2723 patients treated during the year, there were confined, and carried over from the previous year 2519.

Number of morbid cases... ..	577
Percentage from all causes.....	22.9%

There were 16 maternal deaths. The following is a summary of each case. The mortality rate for all admissions is thus .6%

MATERNAL MORTALITY

8509 **Chronic Myocarditis. Cardiac Failure.**

Condition critical on admission. Refused to have pregnancy terminated at three months. Bag induction was performed and after 18 hours, patient was delivered of a 6 months non-viable fœtus. Died 2 days post partum.

8746 **Broncho Pneumonia. Pyelo Nephritis.**

Admitted to hospital in a severe toxic state showing signs of early labor. Delivered by low forceps. After 12 hours the pulse became rapid and thready. She died 14 hours post partum. Autopsy showed advanced broncho-pneumonia. Child died 36 hours post-partum.

9603 **Broncho Pneumonia.**

Spontaneous delivery at term. Low grade temperature followed delivery. Became irrational on 5th day and this persisted until her death 13 days post-partum. Child discharged alive.

9128 **Eclampsia with Aspiration Pneumonia.**

Admitted in deep coma with history of convulsions for one week. Cæsarean section was performed and continuous oxygen given. Condition became gradually worse until her death 4 days post partum. Child discharged well.

9375 Eclampsia. Cardiac Failure.

Severe toxæmia on admission. Convulsion second day after admission with onset of labour. Bag induction performed and six hours later delivery was completed by low forceps. Patient died three hours post partum due to cardiac failure. Child died post partum.

10903 Eclampsia. Cardiac Failure.

An emergency admitted in a comatose condition having had four previous convulsions. She delivered spontaneously of a dead-born premature child. Patient died the day of admission.

9609 Placenta Prævia Lateralis.

Admitted with vaginal bleeding. Bag induction was done and the bag expelled in 36 hours. A transverse position with a prolapsed arm necessitated version and extraction. The bleeding was profuse due to a cervical laceration, and relaxed uterus. Cervix repaired and uterine cavity packed, but the patient's condition became worse. She died 40 minutes post partum. Child died 7 days post partum.

10005 Post Partum Hæmorrhage.

Patient had a pre-eclamptic toxæmia for which she received treatment. Fœtus died in utero at 5 months. Went into spontaneous labor three weeks later and delivered a macerated fœtus. No bleeding until after the placenta separated, when the hæmorrhage became alarming. In spite of uterus being packed and blood transfusion, the ooze continued. She died 11 hours post-partum.

10314 Post Partum Hæmorrhage.

A medical induction was given two weeks before term due to a flat rachitic pelvis. A precipitate labour of four hours duration, and a premature separation of the placenta occurred. Though the delivery was spontaneous, there were multiple lacerations of the cervix. These were repaired, the uterine cavity packed and blood transfusion was given. Oozing continued until her death 6 hours post partum. Child was deadborn.

10903 Post Partum Hæmorrhage. Ruptured Uterus.

A multipara with a long labour, characterized by severe pains, was delivered by low forceps. Severe hæmorrhage followed expulsion of the placenta. The cervix appeared intact and the uterine cavity was packed. Ooze continued in spite of blood transfusions. By digital examination a tear was found through the right lower uterine segment. Patient died 4 hours post partum. Child discharged well.

8809 Streptococcic Septicæmia.

Repeated attempts to terminate pregnancy at home. Treated for one month in the department of surgery and transferred to our department in labour. Had all the signs of streptococcic septicæmia. Died 2 days post partum. Child discharged well.

10810 Purulent Peritonitis.

Three days previous to admission a vaginal examination was done by the family doctor. Admitted to our hospital as an emergency in a very critical condition. She died undelivered 3 hours after admission. The autopsy examination showed purulent peritonitis with a twin pregnancy.

10320 Thrombo Phlebitis. Pulmonary Embolism.

First stage of labour short, but due to foetal distress delivery was terminated by mid forceps. Considerable oozing from varices in vagina necessitated packing. A bilateral thrombo phlebitis of the lower extremities developed and had practically disappeared. On the 26th day post partum she suddenly became cyanosed, developed severe pain in the chest, and died. Child discharged well.

9796 Pulmonary Embolism.

An emergency with acute hydramnios. Spontaneous delivery of non-viable twins occurred. Developed pelvic thrombo phlebitis. Apparently was progressing favorably, but on the 14th day she became suddenly blanched and pulseless. She died within five minutes of the attack.

9338 Puerperal Sepsis. Subacute Bacterial Endocarditis.

Patient admitted on account of pelvic contraction and floating head. Vaginal examination showed head to go into pelvis. Bougie induction was followed by an elevation of temperature. Mid forceps done to complete the delivery. She died 5th day post partum. Child discharged well.

10302 Puerperal Sepsis. Peritonitis.

Cæsarean section performed on account of a large uterine fibroid and a breech presentation. On the third day post partum she developed abdominal pain, a high temperature and acute shock. She died 7th day post operative. Child discharged well.

SUMMARY OF OBSTETRICAL OPERATIONS

1930

LOW FORCEPS

Elective.....	165
Fœtal distress.....	77
Maternal distress.....	20
Perineal delay.....	28
Posterior positions.....	14
Pelvic contraction.....	3
Uterine inertia.....	1
Prolapsed cord.....	2
Demonstration purposes.....	1
Eclampsia.....	2
Chronic nephritis.....	1
Pre-eclampsia.....	6
TOTAL.....	320

MID FORCEPS

Elective.....	51
Fœtal distress.....	33
Posterior positions.....	35
Uterine inertia.....	9
Pelvic contraction.....	8
Pre-eclampsia.....	2
Deformity of coccyx.....	1
Maternal distress.....	8
Prolapsed cord.....	1
TOTAL.....	148

HIGH FORCEPS

Fœtal distress.....	1
Posterior positions.....	9
Brow presentation.....	2
Face presentation.....	1
Maternal distress.....	3
Elective.....	2
Pelvic contraction.....	2
Prolapsed cord.....	3
TOTAL.....	23

**CAESAREAN SECTION
Without Sterilization)**

Pelvic contraction.....	21
Persistent death in utero.....	3
Previous Cæsarean.....	1
Eclampsia.....	1
Deformity lower limbs.....	1
Posterior position (flat pelvis).....	1
Mitral endocarditis.....	2
Elderly primipara.....	6
Fibromyoma uteri.....	2
Active pulmonary T.B.C.....	1
Old colostomy for T.B.C. peritonitis.....	1
TOTAL.....	40

**CAESAREAN SECTION
(With Sterilization)**

Pelvic contraction.....	5
Feeble minded (Public charge).....	1
Pulmonary T.B.C.....	1
Previous foetal death in utero.....	1
Chronic mitral endocarditis.....	1
Previous Cæsarean.....	1
TOTAL.....	10

**CAESAREAN SECTION
(Porro)**

Placenta prævia centralis.....	1
Old vaginal fistula.....	1
Multiple fibromyomata.....	1
TOTAL.....	3

INDUCTION OF LABOUR (Hydrostatic Bag)

Eclampsia.....	2
Pre-eclampsia.....	16
Placenta prævia.....	6
Chronic nephritis.....	5
Cardiac disease.....	3
Pelvic contraction.....	14
Pelvic tumour.....	1
Over-term.....	3
Hydramnios.....	1
Breech.....	1
Disproportion.....	1
Prolapsed cord.....	1
Ante-partum hæmorrhage.....	1
Demonstration purposes.....	1
Unsuccessful (not confined).....	1
TOTAL.....	57

INDUCTION BOUGIE

Pelvic contraction.....	4
Pre-eclampsia.....	2
Prolapsed cord.....	1
TOTAL.....	<u>7</u>

CRANIOTOMY

Brow presentation.....	2
Absence of foetal heart.....	1
Foetal death in utero.....	2
TOTAL.....	<u>5</u>

VERSION AND EXTRACTION

Pelvic contraction.....	2
Prolapsed cord.....	4
Twins.....	4
Transverse positions.....	7
Pre-eclampsia.....	1
Prolapsed arm.....	1
Placenta prævia.....	1
Failed forceps.....	1
TOTAL.....	<u>21</u>

MANUAL REMOVAL OF PLACENTA

Retained placenta.....	5
Adherent placenta.....	3
TOTAL.....	<u>8</u>

COMPLETE TEARS

Low forceps.....	7
Mid forceps.....	5
Breech extraction.....	2
Spontaneous labour.....	4
TOTAL.....	<u>18</u>

BREECH PRESENTATIONS

Breech extraction.....	104
Bag induction (Breech delivery).....	2
Forceps (after coming head).....	5
TOTAL.....	<u>111</u>

CLASSIFICATION OF PELVIS

Normal.....	1234
Not measured (Private patients).....	1071
Rachitic flat.....	81
Funnel.....	14
Justo-minor.....	38
TOTAL.....	<u>2438</u>

COMPLICATIONS OF PREGNANCY

CARDIAC CONDITIONS:

SPONTANEOUS DELIVERIES.....	20
RESULTS:	
Mothers died.....	1
Children died.....	0
Nos. 8485, 8809, 8897, 8971, 8676, 9695, 9701, 9744, 9804, 10434, 10419, 10585, 10704, 10767, 10798, 10649, 10908, 10811, 10999, 10929.	
LOW AND MID FORCEPS.....	10
RESULTS:	
Mothers died.....	0
Children died.....	1
Nos. 8627, 8689, 8765, 8908, 9258, 9286, 9827, 10110, 10594, 10740.	
BAG AND BOUGIE INDUCTION.....	2
RESULTS:	
Mothers died.....	1
Children died.....	2
Nos. 8509, 10417.	
CÆSAREAN SECTION.....	3
RESULTS:	
Mothers died.....	0
Children died.....	0
Nos. 8362, 9528, 10341.	
CRANIOTOMY.....	1
RESULTS:	
Mother good.	
No. 9290.	
NOT CONFINED.....	5
RESULTS:	
Mothers died.....	0
Nos. 8691, 9008, 9338, 9437, 8691.	

TOXAEMIA OF PREGNANCY:

Pre-Eclampsia:

SPONTANEOUS DELIVERIES..... 45

RESULTS:

Mothers died..... 0

Children died..... 7

Nos. 8477, 8575, 8527, 8730, 8558, 8575, 8835, 8909, 8940, 9039, 9225, 9329, 9397, 9441, 9398, 9494, 9498, 9423, 9518, 9689, 9739, 9660, 9773, 9951, 9940, 9929, 9963, 10181, 10261, 10234, 10280, 10265, 10321, 10427, 10412, 10400, 10573, 10558, 10928, 11015, 10970, 11100, 11024, 11112, 10524.

LOW AND MID FORCEPS..... 15

RESULTS:

Mothers died..... 0

Children died..... 4

Nos. 8757, 8746, 9671, 9555, 9676, 10002, 9925, 10056, 10073, 10293, 10632, 10768, 11082, 9260, 8476.

BAG AND BOUGIE INDUCTION..... 10

RESULTS:

Mothers died..... 0

Children died..... 2

Nos. 8650, 9193, 9551, 9784, 9861, 9917, 10554, 10745, 10916, 11105.

BREECH EXTRACTION..... 6

RESULTS:

Mothers died..... 1

Children died..... 4

Nos. 8527, 9447, 9720, 10005, 10444, 10463.

VERSION AND EXTRACTION..... 3

RESULTS:

Mothers died..... 0

Children died..... 0

Nos. 8656, 10337, 10405.

CÆSAREAN SECTION..... 2

RESULTS:

Mothers died..... 0

Children died..... 0

Nos. 10128, 10440.

COMPLICATIONS OF PREGNANCY

CARDIAC CONDITIONS:

SPONTANEOUS DELIVERIES.....	20
RESULTS:	
Mothers died.....	1
Children died.....	0
Nos. 8485, 8809, 8897, 8971, 8676, 9695, 9701, 9744, 9804, 10434, 10419, 10585, 10704, 10767, 10798, 10649, 10908, 10811, 10999, 10929.	
LOW AND MID FORCEPS.....	10
RESULTS:	
Mothers died.....	0
Children died.....	1
Nos. 8627, 8689, 8765, 8908, 9258, 9286, 9827, 10110, 10594, 10740.	
BAG AND BOUGIE INDUCTION.....	2
RESULTS:	
Mothers died.....	1
Children died.....	2
Nos. 8509, 10417.	
CÆSAREAN SECTION.....	3
RESULTS:	
Mothers died.....	0
Children died.....	0
Nos. 8362, 9528, 10341.	
CRANIOTOMY.....	1
RESULTS:	
Mother good.	
No. 9290.	
NOT CONFINED.....	5
RESULTS:	
Mothers died.....	0
Nos. 8691, 9008, 9338, 9437, 8691.	

TOXAEMIA OF PREGNANCY:

Pre-Eclampsia:

SPONTANEOUS DELIVERIES. 45

RESULTS:

Mothers died 0
 Children died 7

Nos. 8477, 8575, 8527, 8730, 8558, 8575, 8835, 8909, 8940, 9039, 9225, 9329, 9397, 9441, 9398, 9494, 9498, 9423, 9518, 9689, 9739, 9660, 9773, 9951, 9940, 9929, 9963, 10181, 10261, 10234, 10280, 10265, 10321, 10427, 10412, 10400, 10573, 10558, 10928, 11015, 10970, 11100, 11024, 11112, 10524.

LOW AND MID FORCEPS. 15

RESULTS:

Mothers died 0
 Children died 4

Nos. 8757, 8746, 9671, 9555, 9676, 10002, 9925, 10056, 10073, 10293, 10632, 10768, 11082, 9260, 8476.

BAG AND BOUGIE INDUCTION. 10

RESULTS:

Mothers died 0
 Children died 2

Nos. 8650, 9193, 9551, 9784, 9861, 9917, 10554, 10745, 10916, 11105.

BREECH EXTRACTION. 6

RESULTS:

Mothers died 1
 Children died 4

Nos. 8527, 9447, 9720, 10005, 10444, 10463.

VERSION AND EXTRACTION. 3

RESULTS:

Mothers died 0
 Children died 0

Nos. 8656, 10337, 10405.

CÆSAREAN SECTION. 2

RESULTS:

Mothers died 0
 Children died 0

Nos. 10128, 10440.

TOXÆMIA OF PREGNANCY—Continued**Eclampsia:**

SPONTANEOUS DELIVERIES..... 4

RESULTS:

Mothers died..... 2
Children died..... 2

Nos. 9982, 10707, 10766, 9375.

LOW AND MID FORCEPS..... 2

RESULTS:

Mothers died..... 0
Children died..... 1

Nos. 10991, 9494.

HIGH FORCEPS..... 1

RESULTS:

Mothers died..... 0
Children died..... 1

No. 9127.

CÆSAREAN SECTION..... 2

RESULTS:

Mothers died..... 1
Children died..... 1

Nos. 9128, 8911.

BAG INDUCTION..... 2

RESULTS:

Mothers died..... 0
Children died..... 2

Nos. 9131, 9100.

ADMITTED POST PARTUM..... 2

RESULTS:

Mothers died..... 0

Nos. 9518, 10940.

CHRONIC NEPHRITIS:

SPONTANEOUS DELIVERIES..... 21

RESULTS:

Mothers died..... 1
Children died..... 0

Nos. 8619, 8763, 8330, 8821, 8953, 8985, 8578, 9423, 9571, 9701, 9781, 9754, 9824, 9982, 10280, 10285, 10395, 10612, 10642, 10867, 10895.

LOW AND MID FORCEPS..... 4

RESULTS:

Mothers died..... 0
Children died..... 0

Nos. 9676, 10506, 10825, 10912.

CHRONIC NEPHRITIS:—Continued

HIGH FORCEPS.....	1
RESULTS:	
Mothers died.....	0
Children died.....	1

No. 10762.

INDUCTION BAG.....	4
RESULTS:	
Mothers died.....	0
Children died.....	4

Nos. 9131, 8558, 9551, 10673.

CÆSAREAN SECTION.....	2
RESULTS:	
Mothers died.....	0
Children died.....	0

Nos. 8824, 8911.

BREECH EXTRACTION.....	3
RESULTS:	
Mothers died.....	0
Children died.....	1

Nos. 10413, 10463, 10944.

NOT CONFINED.....	4
RESULTS:	
Mothers improved.	

Nos. 9449, 9548, 9437, 10682.

VOMITING OF PREGNANCY..... 2

RESULTS:	
1 mother discharged against advice.	
1 mother improved.	

Nos. 8687, 10988.

ANTE-PARTUM HAEMORRHAGE (Accidental Apparent):

SPONTANEOUS DELIVERIES.....	12
RESULTS:	
Mothers died.....	0
Children died.....	6

Nos. 9930, 9160, 9351, 9931, 10386, 10395, 10874, 8773, 10013, 8601, 10251, 10920.

ANTE-PARTUM HAEMORRHAGE (Accidental Apparent):—Continued

LOW AND MID FORCEPS.....	4
RESULTS:	
Mothers died.	0
Children died..	2
Nos. 9391, 9167, 10420, 10616.	
VERSION AND EXTRACTION... ..	1
RESULTS:	
Mothers died.....	0
Children died.....	1
No. 10064.	
CÆSAREAN SECTION.....	2
RESULTS:	
Mothers died.	0
Children died....	1
Nos. 8993, 10229.	
INDUCTION BAG.... ..	8
RESULTS:	
Mothers died.	1
Children died.	5
Nos. 8982, 9609, 10273, 10186, 10619, 8964, 8585, 10536.	
BREECH EXTRACTION.... ..	4
RESULTS:	
Mothers died.	0
Children died....	3
Nos. 10113, 10066, 10137, 8650.	
NOT CONFINED.....	7
RESULTS:	
6 mothers improved.	
1 mother left against advice.	
Nos. 10120, 10098, 8965, 8526, 8948, 9358, 9580.	
RETRO-PLACENTAL HÆMORRHAGE:	
SPONTANEOUS DELIVERIES.....	7
RESULTS:	
Mothers died.	0
Children died..	5
Nos. 8773, 9933, 10304, 10812, 10309, 9152, 10395.	
LOW FORCEPS.....	2
RESULTS:	
Mothers died.	0
Children died.	1
Nos. 9555, 8536.	

POST-PARTUM HÆMORRHAGE:

SPONTANEOUS DELIVERIES.....	9
RESULTS:	
Mothers died.	1
Children died.. . . .	1
Nos. 8985, 9686, 10386, 10392, 10426, 10941, 11017, 11110, 10314.	
LOW FORCEPS.....	2
RESULTS:	
Mothers died...	1
Children died....	0
Nos. 10420, 10903.	
BREECH EXTRACTION.....	3
RESULTS:	
Mothers died...	2
Children died.... (1 twins)	4
Nos. 9796, 8683, 10005.	
VERSION AND EXTRACTION.	1
RESULTS:	
Mothers died.	0
Children died.....	0
No. 11041.	
ADMITTED POST-PARTUM.....	2
RESULTS:	
Mothers died.....	0
Children died.....	0
No. 8927, 11039.	

DIABETES MELLITUS:

SPONTANEOUS DELIVERIES.....	1
RESULTS:	
Mothers died.....	0
Children died.....	0
No. 9292.	
CÆSAREAN SECTION.....	1
RESULTS:	
Mothers died.	0
Children died.....	0
No. 10243.	

HYDRAMNIOS:

SPONTANEOUS DELIVERIES..	5
RESULTS:	
Mothers died.....	0
Children died.....	1
Nos. 9216, 9520, 10524, 10659, 8892.	
BREECH EXTRACTION.....	4
RESULTS:	
Mothers died.....	0
Children died..... (1 pr. twins)	5
Nos. 8892 (twin), 9796, 10045, 10444.	
VERSION AND EXTRACTION..	2
RESULTS:	
Mothers died.....	0
Children died.....	1
Nos. 9157, 9248.	
LOW FORCEPS.....	2
RESULTS:	
Mothers died.....	1
Children died.....	2
Nos. 8746, 9531.	
BAG INDUCTION.....	1
RESULTS:	
Mothers died.....	0
Children died.....	0
No. 9814.	

SYPHILIS:

SPONTANEOUS DELIVERIES.	13
RESULTS:	
Mothers died.....	0
Children died.....	5
Nos. 8516, 8510, 9212, 9231, 9154, 10372, 10634, 10688, 10744, 10957, 11085, 11112, 9502.	
MID FORCEPS.....	1
RESULTS:	
Mothers died.....	0
Children died..	0
No. 9574.	
BREECH EXTRACTION.....	5
RESULTS:	
Mothers died.....	0
Children died.....	5
Nos. 9325, 9301, 10145, 10835, 11096.	
NOT CONFINED (Admitted for observation).....	1
Discharged, condition unimproved.	
No. 9059.	

NEISSER:

SPONTANEOUS DELIVERIES..... 13

RESULTS:

Mothers died..... 0

Children died..... 0

Nos. 8510, 8530, 8778, 9168, 9329, 9726, 9905, 9972, 9885, 10205, 10254, 10263, 10372.

LOW FORCEPS..... 3

RESULTS:

Mothers died..... 0

Children died..... 0

Nos. 10206, 10254, 10372.

BREECH EXTRACTION... 3

RESULTS:

Mothers died..... 0

Children died..... 1

Nos. 9599, 10315, 10796.

ADMITTED POST-PARTUM..... 1

RESULTS:

Mother improved.

No. 9034.

PYELITIS—CONFINED:

SPONTANEOUS DELIVERIES..... 33

RESULTS:

Mothers died..... 1

Children died... 0

Nos. 8755, 8705, 8802, 8888, 8740, 8968, 9010, 9036, 9114, 9061, 9423, 9564, 9642, 9585, 9603, 9805, 10049, 9890, 10012, 10121, 10130, 10101, 10126, 10118, 10209, 10259, 10249, 9942, 10012, 10051, 10542, 10845, 10970.

LOW AND MID FORCEPS..... 19

RESULTS:

Mothers died..... 0

Children died.. 2

Nos. 8723, 9728, 8848, 8901, 9244, 8892, 9446, 9553, 9728, 9925, 9917, 10116, 10191, 10465, 10324, 10849, 9515, 9590, 9555.

VERSION AND EXTRACTION... 1

RESULTS:

Mothers died..... 0

Children died..... 0

No. 9248.

PYELITIS—CONFINED:—Continued

CÆSAREAN SECTION..... 1

RESULTS:

Mothers died..... 0
 Children died..... 0

No. 8914.

LABOUR INDUCED—PACKING OF UTERUS..... 1

RESULTS:

Mothers died..... 0
 Children died..... 1

No. 10733.

BREECH EXTRACTION..... 2

RESULTS:

Mothers died... .. 0
 Children died..... 0

Nos. 9065, 9877.

PYELITIS NOT CONFINED..... 9

RESULTS:

Mothers all improved.

Nos. 8782, 10809, 10965, 10310, 10348, 10633, 10683, 10869, 10965.

TUBERCULOSIS:

SPONTANEOUS DELIVERIES..... 4

RESULTS:

Mothers died..... 0
 Children died..... 1

Nos. 10012, 10230, 10347, 11065.

CÆSAREAN SECTION..... 2

RESULTS:

Mothers died..... 0
 Children died..... 1

Nos. 10094, 9922.

LOW FORCEPS..... 2

RESULTS:

Mothers died..... 0
 Children died..... 0

Nos. 9870, 10096.

NOT CONFINED..... 1

RESULTS:

Mother's condition unchanged.

No. 9550.

TWINS—(27 pairs)

SPONTANEOUS DELIVERIES. 9
 RESULTS:
 Mothers died. 0
 Children died. 5
 Nos. 8587, 9738, 9934, 10401, 11020, 11104, 11085, 9704, 9738.

LOW AND MID FORCEPS. 3
 RESULTS:
 Mothers died. 0
 Children died. 1
 Nos. 9097, 8666, 9842.

VERSION AND EXTRACTION. 2
 RESULTS:
 Mothers died. 0
 Children died. 1
 Nos. 8654, 10946.

BREECH EXTRACTION. 12
 RESULTS:
 Mothers died. 0
 Children died. 4
 Nos. 8527, 8646, 8892, 9179, 9409, 9596, 9796, 10040, 10331, 10746.

MOTHER DIED DURING LABOUR. 1
 RESULTS:
 Both twins died in utero.
 No. 10810.

MISCELLANEOUS:

ANÆMIA. 1
 RESULTS:
 Mother discharged well.
 Child discharged well.
 No. 8644.

BRONCHITIS. 3
 RESULTS:
 Mothers died. 0
 Children died. 0
 Nos. 8466, 8657, 8862.

MISCELLANEOUS:—*Continued*

BILIARY COLIC..	1
RESULTS:	
Mother good.	
Child dead-born.	
No. 9659.	
EPISTAXIS (Not confined).....	1
RESULT: Improved.	
No. 11123.	
EPILEPSY (Not confined).....	1
RESULT: Improved.	
No. 8641.	
PARKINSON'S DISEASE.....	1
RESULTS:	
Mother good.	
Child good.	
No. 9545.	
PNEUMONIA...	3
RESULTS:	
Mothers died..	0
Children died.....	0
Nos. 9991, 10629, 10844.	
SEPARATION OF SYMPHYSIS (Not confined)..	1
RESULTS:	
Mother improved.	
No. 10065.	
FIBROMYOMA UTERI.....	7
RESULTS:	
Mothers died.....	0
Children died.....	1
Nos. 8053, 8839, 9439, 9229, 9727, 10302, 10853.	
OVARIAN CYSTOMA.....	4
RESULTS:	
Mothers died.....	0
Children died.....	0
Nos. 8947, 8922, 9413, 10568.	

ROYAL VICTORIA
MONTREAL MATERNITY CHART

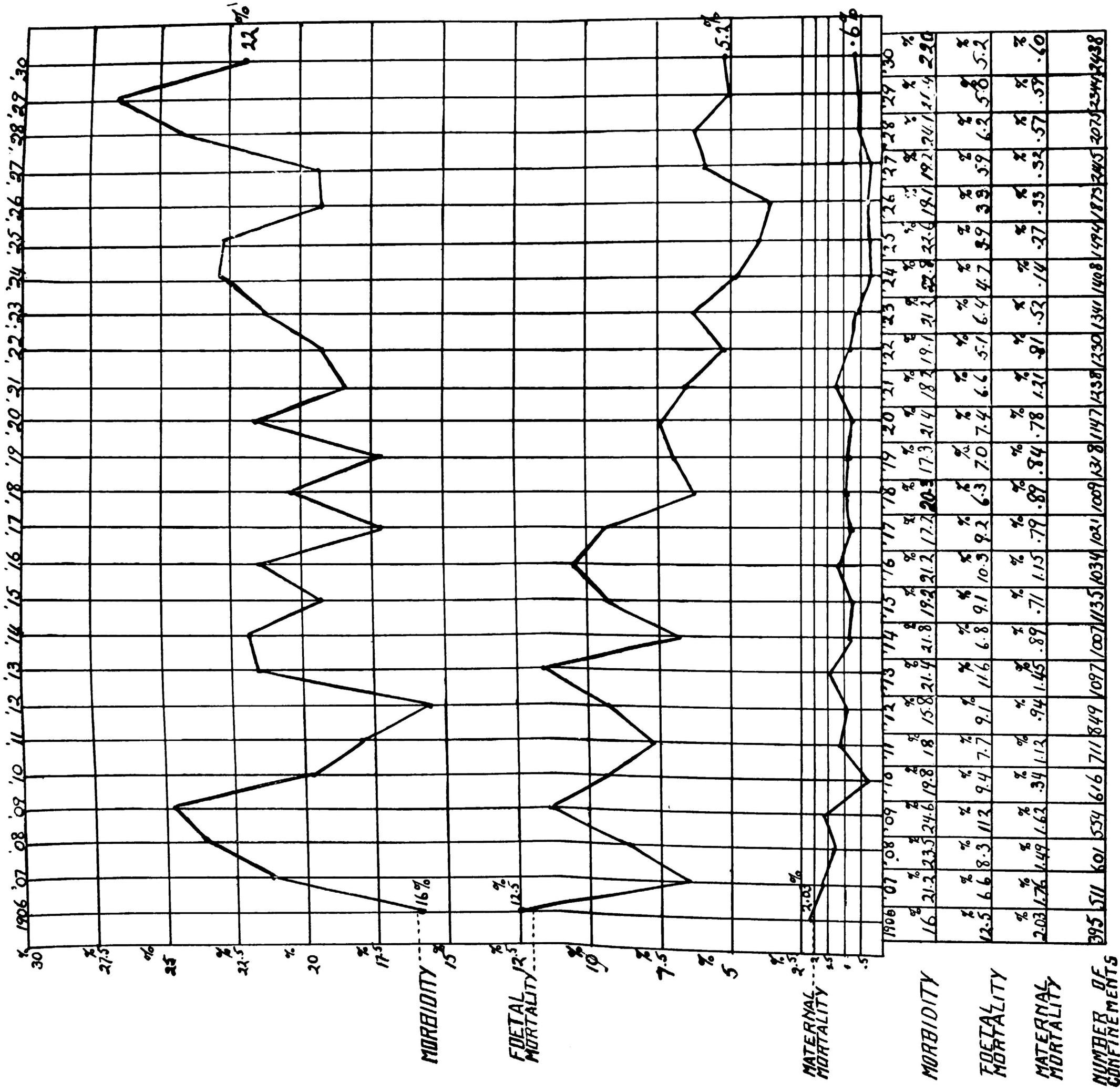


CHART SHOWING MORBIDITY, FOETAL & MATERNAL MORTALITY

OUT-DOOR DEPARTMENT—OBSTETRICS

Number of applications for treatment (at Hospital).....	1273
Number of applications for treatment (at Sub-stations)....	694
Number of Ante Partum visits to Hospital Clinic.....	2884
Number of Ante Partum visits to Sub-station clinics.....	3039
Number of cases delivered.....	408
Number of viable babies born.....	401
Twins.....	2
Dead born (3) Still born (2).....	5
Died Post-partum.....	2
Abortion.....	1
Maternal mortality.....	1
Number of Post-partum visits paid by Doctors.....	2040
Number of Post-partum visits paid by Nurses.....	5856
Number of patients transferred to Victorian Order for post-partum care.....	48
Number of Post-partum visits paid by patients.....	608

INFANTILE MORTALITY

- No. 1523 Abortion (5 months)
- No. 1345 Still born (Congenital heart)
- No. 1512 Still born—Prematurity
- No. 1537 Dead born—Prematurity
- No. 1343 Dead born—Cause unknown.
- No. 1189 Gastro-intestinal Hæmorrhage.
- No. 1376 Intra-cranial hæmorrhage.
- No. 1388 Dead born, macerated.

MATERNAL MORTALITY

- No. 1502 Pulmonary Embolism, died 12th day post-partum.

GYNÆCOLOGICAL REPORT

For the Year Ended 31st December, 1930

URETHRA:

Peri Urethral Abscess, Acute.....	1
Urethral Caruncle.....	9
Urethritis, Chronic.....	3

VULVA:

Angioma Right Labium Majus.....	1
Contusion Right Labium Majus.....	1
Labial Abscess.....	1
Bartholinian Abscess.....	4
Bartholinitis, Acute.....	2
Bartholinian Cyst.....	4
Carcinoma Vulvæ.....	4
Furuncle Vulva.....	3
Vulvo-Vaginitis.....	1
Vulvo-Vaginitis, Sub-Acute.....	1
Vulvo-Vaginitis, Chronic.....	1

VAGINA:

Sinus of Vagina.....	1
Vaginal Stricture.....	1
Recto-Vaginal Fistula.....	1
Vesico-Vaginal Fistula.....	2
Perineo-Vaginal Fistula.....	1
Sarcoma of Recto-Vaginal Septum.....	1
Vaginitis, Acute.....	1
Vaginitis, Senile.....	5
Hæmatometra.....	1
Imperforate Hymen.....	3
Lacerated Hymen.....	1

SACRO PUBIC HERNIA:

Total.....	158
Sacro Pubic Hernia Complete†.....	37
" " " Incomplete, Cystocoele, Rectocoele....	103
" " " " Urethrocoele.....	2
" " " " Retroversion.....	20
" " " " Cystocoele.....	9
" " " " Rectocoele.....	27
" " " " Cervicitis, Chronic.....	69
" " " " Complete Perineal Tear....	8
" " " " Laceration Perinaeum Incomplete.....	25

† This indicates complete prolapsus uteri with cystocoele and rectocoele.

UTERUS:

Development:

Uterus Didelphys 1

Deviations:

Retroversion 27
 Retroflexion of Uterus (Mobile) 1

Fibrosis:

Fibrosis Uteri 20

Infections:

Endometritis, Acute 5
 Endometritis, Sub-Acute 1
 Endometritis, Chronic 19

Traumatism:

Uterine Rupture 1

Neoplasms:

Sarcoma Uterus 2
 Carcinoma of Uterus 47
 Carcinoma of Uterus (New Cases) 17
 Carcinoma of Cervix (New Cases) 30
 (Readmissions—34)
 Fibromyoma Uteri 151
 Fibromyoma Uteri with Hard Polyp 6
 Uterine Polyp 2

Pyometra

1

Subinvolution Uteri:

3

Tuberculous Endometritis:

1

CERVIX:

Stenosis Cervix 1
 Adeno Carcinoma Cervix 2
 Carcinoma Cervix Squamous 24
 Carcinoma Cervix, Unclassified 4
 Polyp Fibrous Cervix 21
 Polyp Glandular Cervix 9
 Laceration Cervix 61
 Cervicitis, Acute 1
 Cervicitis, Sub-Acute 1
 Cervicitis, Chronic 103
 Nabothian Cysts 7
 Atresia Cervix 2
 Partial Atresia of External Os 1

PARAMETRIUM:

Parametritis, Chronic 8

TUBES:

Cyst of Hydatid of Morgagni (Tube) 1
 Carcinoma Metastatic—Right Fallopian Tubes 1

Infections: (See special sheet).

OVARIES:

Ovarian Abscess 1

Neoplasms:

Fibromyoma Ovarii 1
 Carcinoma Ovarii 15
 Granulosa Cell Tumour Ovary (Carcinoma ?) 2

Cysts:

Cystadenoma, Ovarii Compound, Non Malignant 1
 Ovarian Cystoma Simple 36
 Retention Cysts Ovary 6
 Follicle Cysts Ovaries 25
 Luteal Cysts 3
 Cystadenoma Ovarii, Papilliferous, Malignant 9
 Dermoid Cyst 1
 Parovarian Cyst 7
 Torsion Pedicle 3
 Oophoritis, Chronic 1

PERITONEUM:

Peritoneal Adhesions 1
 Retro-Peritoneal Abscess 2
 Retro-Peritoneal Lipoma 1
 Carcinoma Retro-Peritoneal (Secondary) 2

Perineal Body:

Relaxed perinaeum 1

PREGNANCY:

Abortions—Complete 24
 Incomplete 141
 Inevitable 12
 Missed 7
 Threatened 21
 Therapeutic 19
 Infected 3

PREGNANCY:—Continued

Ectopic Gestation.		19
Pregnancy Abdominal.	1	
Ruptured Ectopic—Direct.	2	
Tubal Abortion.	15	
Interstitial, Ruptured.	1	
Mole, Hydatidiform.	2	
Puerperal Infections.		10
Thrombo-Phlebitis.	7	
Thrombo-Phlebitis—Iliac Veins.	1	
Septicæmia.	1	
Pyæmia.	1	
Pregnancy Uterine.	280	
Placental Polyp.	4	
Retained Placenta.	1	
Placenta Prævia.	1	
Pyelitis of Pregnancy.	8	
Retroverted Gravid Uterus.	5	
Toxæmia of Pregnancy.	60	
Pseudocyesis.	2	
Pregnancy, Insanity.	1	

ENDOCRINE DYSTROPHY:

Total.		235
Amenorrhœa.	32	
Dysmenorrhœa.	36	
Myopathia Hæmorrhagica.	140	
Infantile Uterus.	7	
Polyp Cervical, Glandular.	18	
Erosion of Cervix.	26	
Hypo-ovarianism.	5	
Hypothyroidism.	23	
Hyperthyroidism.	1	
Myxœdema.	1	
Obesity.	1	
Hypopituitarism.	1	
Pruritus Vulvæ.	3	
Senile Vaginitis.	7	
Sterility.	33	
Acromegaly.	1	

ENDOMETRIOSIS:

Total.		15
Chocolate Cysts.	5	
Adenomyosis Uteri.	9	
Endometrioma of Vaginal Wall.	1	

NEISSER AND SYPHILIS:

Neisser Acute.....				6
“ “ with Bartholinian Abscess.....	2			
“ “ “ Endometritis, Acute.....	1			
“ “ “ Vaginitis, Acute.....	1			
“ “ “ Vulvitis, Acute.....	2			
“ “ “ Vulvo-Vaginitis, Acute.....	2			
“ “ “ Urethritis.....	3			
“ “ “ Parametritis.....	1			
“ “ “ Salpingitis, Acute.....	1			
“ “ “ Salpingo-Oophoritis, Acute.....	1			
Neisser Chronic.....				60
“ “ with Bartholinitis, Chronic.....	4			
“ “ “ Bartholinitis, Acute (Abscess).....	6			
“ “ “ Chronic Urethritis.....	7			
“ “ “ Acute Urethritis.....	1			
“ “ “ Vulvitis.....	3			
“ “ “ Cervicitis, Chronic.....	11			
“ “ “ Cervicitis, Acute.....	1			
“ “ “ Parametritis, Chronic.....	7			
“ “ “ Parametritis, Acute.....	1			
“ “ “ Tubo-Ovarian Abscess.....	1			
“ “ “ Salpingo-Oophoritis, Chronic.....	32			
“ “ “ Salpingo-Oophoritis, Acute.....	1			
“ “ “ Hydrosalpinx.....	1			
“ “ “ Pyosalpinx.....	1			
“ “ “ Utero-Sacral Cellulitis.....	2			
“ “ “ Pelvic Peritonitis.....	1			
“ “ “ Pelvic Peritonitis, Acute.....	1			
“ “ “ Pelvic Abscess.....	1			
Venereal Warts.....				5

SYPHILIS:

Lues.....	3
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CHRONIC PELVIC INFECTION:

Total.....		174
Chronic Pelvic Infection, Chronic Cervicitis.....	44	
“ “ “ Paracervicitis.....	16	
“ “ “ Salpingitis, Acute.....	2	
“ “ “ Salpingo-Oophoritis.....	98	
“ “ “ Salpingo-Oophoritis, Sub-acute.....	1	
“ “ “ Salpingo-Oophoritis, Acute.....	4	
“ “ “ Hydrosalpinx.....	9	
“ “ “ Pyosalpinx.....	1	
“ “ “ Peri-oophoritis.....	1	
“ “ “ Retroversion.....	9	
“ “ “ Tubo-Ovarian Abscess.....	6	
“ “ “ Tubo-Ovarian Cyst.....	1	
“ “ “ Chronic Parametritis.....	42	
“ “ “ Sub-Acute Parametritis.....	1	
“ “ “ Utero-Sacral Cellulitis.....	5	
“ “ “ Pelvic Abscess.....	10	
“ “ “ Pelvic Peritonitis.....	2	

CHRONIC PELVIC INFECTION:—Continued

Sub-Acute Pelvic Infection		1	
" " " Parametritis	1		15
Acute " " Parametritis	5		
" " " Salpingo-Oophoritis	2		
" " " Pelvic Abscess	3		
Pelvic Peritonitis	3		
Pelvic Abscess	2		

Tuberculous:

Tuberculous Cervicitis	2
Tuberculous Endometritis	1
Salpingo-Oophoritis Tuberculous	9
Tuberculous Peritonitis	3

MISCELLANEOUS: (Admissions, Complications, etc.)

Total	230
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Of these the following were Pulmonary Post-Operative Complications:

Total	4
Pulmonary Embolism	2
Pleurisy, Acute	1
Broncho-Pneumonia	1

**GYNÆCOLOGICAL OPERATIONS****VULVA:**

Incision and Drainage Furuncle Vulva	2
Excision Angioma Vulvæ	1
Excision Bartholinian Cyst	8
Excision Carcinoma Vulva	2
Incision Bartholinian Abscess	10
Incision Hymen	2
Perineorrhaphy	13
Excision Urethral Caruncle	7

VAGINA:

Posterior Colpotomy	22
LeFort	3
Packing Vagina	1

CERVIX:

Repair of Cervix.....		151
Amputation of Cervix.....	23	
Cauterization Cervix.....	68	
Emmett's Repair Cervix.....	8	
Schroeder's Repair Cervix.....	7	
Excision Eroded Area Cervix.....	1	
Removal Polyp Cervix.....	40	
Dilatation of Cervix.....	4	
Dilatation and Exploration.....	243	
Incision Nabothian Cysts.....	5	
Cervical Hysterotomy.....	6	

UTERUS:

Curettage.....	5
Removal of Placental Tissue.....	182
Therapeutic Abortion.....	17
Bag Induction.....	3
Uterine Packing.....	2
Removal Uterine Polyp.....	4
Reposition of Uterus.....	2

APPLICATION OF RADIUM:

Total.....		169
Radium was applied in the following conditions:		
Endocrine Dystrophy.....	70	
Subinvolution.....	2	
Endometriosis.....	1	
Dysmenorrhœa.....	1	
Fibromyoma Uteri.....	26	
Uterine Polypi.....	6	
Cervicitis, Chronic.....	1	
Erosion of Cervix.....	1	
Carcinoma of Cervix.....	46	
Carcinoma Vulva.....	2	
Carcinoma Uteri.....	10	
Carcinoma Breast.....	1	
Carcinoma Metastatic Chest Wall.....	2	

COELIOTOMY:

Total.....		283
Hysterectomy.....		160
Indication in:		
Fibromyoma Uteri.....	78	
Chronic Pelvic Infection.....	18	
Adeno Carcinoma Fundus Uteri.....	10	
Carcinoma Cervix.....	1	
Endometriosis.....	11	
Chronic Neisser.....	2	
Tuberculous Salpingo-Oophoritis.....	1	

COELIOTOMY:—Continued

Ovarian Carcinoma.....	7
Ectopic Gestation.....	2
Ovary Cystoma Papilliferum Malignum.....	2
Pregnancy—Therapeutic Abortion.....	1
Lacerated Cervix—Extensive.....	1
Salpingo-Oophoritis.....	5
Sacro Pubic Hernia.....	1
Tuberculous Endometritis.....	1
Abortion Incomplete.....	1
Pregnancy, Pulmonary Tuberculosis.....	1
Follicle Cysts Ovaries.....	1
Ruptured Uterus.....	2
Ovarian Cystoma.....	4
Sarcoma Recto-Vaginal Septum.....	1
Atresia Cervix.....	1
Endocrine Dystrophy.....	8

SALPINGO-OOPHORECTOMY:

Total.....	148
Fibromyoma Uteri.....	19
Fibromyoma Ovarii.....	1
Ectopic Gestation.....	11
Neisser, Chronic.....	2
Hydrosalpinx.....	2
Cystoma Ovarii.....	25
Pregnancy, Abdominal.....	1
Follicle Cysts Ovary.....	18
Chronic Pelvic Infection.....	16
Salpingo-Oophoritis, Tuberculous.....	2
Salpingo-Oophoritis.....	13
Granulosa Cell Tumour.....	2
Carcinoma Ovarian.....	8
Endometriosis.....	4
Endocrine Dystrophy.....	3
Corpus Luteum Cyst Ovary.....	2
Carcinoma Cervix.....	1
Carcinoma Fundus Uteri.....	4
Ovarian Cystoma Papilliferous.....	5
Tuberculous Endometritis.....	1
Parovarian Cystoma.....	5
Sacro Pubic Hernia.....	1
Retroversion (mobile).....	1
Pregnancy, Pulmonary Tuberculosis.....	1

SALPINGECTOMY:

Total.....	22
Salpingitis.....	5
Pregnancy Ectopic.....	9
Ovarian Cystoma Right.....	1
Fibromyoma Uteri.....	1
Cyst Adenoma Ovary.....	1
Hydrosalpinx.....	1
Cysts-Ovary.....	1
Carcinoma Cervix.....	1
Endocrine Dystrophy.....	1
Salpingo-Oophoritis.....	1

OOPHORECTOMY:

Total.....	9
Fibromyoma Uteri.....	1
Follicle Cysts.....	1
Chronic Pelvic Infection.....	2
Dermoid Cyst.....	2
Pregnancy Ectopic.....	1
Parovarian Cyst.....	1
Endometriosis.....	1

FALLOPIAN TUBES:

Resection Tubes.....	17
Rubin's Test.....	23
Lipiodol.....	7

RADICAL CURE HERNIA (SACRO PUBIC):

Total.....	107
Radical Cure of Cystocoele.....	61
Radical Cure of Rectocoele.....	91
Repair Urethrocoele.....	2
Repair Complete Tear.....	4
Perineorrhaphy.....	66
Amputation Cervix.....	51
Ventral Fixation.....	2
Baldy-Webster Suspension of Uterus.....	2
Olshausen Suspension.....	34
Watkins Interposition.....	3

MISCELLANEOUS:

Appendectomy.....	62
Hæmorrhoidectomy.....	7
Myomectomy.....	10
Repair Ventral Hernia.....	1
Removal Hydatid Cyst.....	3
Dilatation of Vaginal Stricture.....	1
Amputation Ant. Lip of Cervix.....	1
Anterior and Posterior Colporrhaphy.....	1
Biopsy Cervix.....	11
Coagulation with Diathermy.....	2
Dilatation of Anal Canal.....	2
Drainage of Abscess.....	3
Excision Retro-Peritoneal Lipoma.....	1
Examination Under Anæsthesia.....	13
Excision Secondary Carcinoma.....	1
Excision Foreign Body Perinæum.....	1
Excision Perineal Scar.....	1
Incision Breast and Axillary Abscesses.....	1
Incision Ischio-Rectal Abscess.....	1

MISCELLANEOUS:—*Continued*

Pneumothorax.....	1
Puncture Cyst (Tube).....	1
Radical Cure Femoral Hernia.....	1
Removal Dead Fœtus and Placenta.....	1
Removal Cyst Left Broad Ligament.....	1
Removal Cyst of Round Ligament.....	1
Removal Recto-Vaginal Tumour.....	1
Removal Venereal Warts.....	1
Repair Inguinal Hernia.....	1
Repair Post Operative Hernia.....	1
Repair of Perforation in Sigmoid Colon.....	1
Repair Recto-Vaginal Fistula.....	3
Separation Adhesions.....	4
Sterilization.....	3
Sub Mucous Resection.....	1
X-Ray Therapy.....	8
Blood Transfusions..	91



MORTALITY RETURNS

- 1. Recurrent Carcinoma Cervix.**
Aged 41. Had been treated for one year, extensive abdominal metastases.
- 2. Recurrent Carcinoma Cervix.**
Aged 44. Had been under treatment for over a year; wide-spread pelvic metastases.
- 3. Adeno-Carcinoma of Rectum with Ovarian Metastases.**
Aged 48. Admitted in advanced stage of disease, died after laparotomy. Autopsy confirmed above diagnosis.
- 4. Carcinoma of Cervix with Vaginal and Parametrial Metastases.**
Aged 56. History one year. Disease very advanced. Died few days after admission.
- 5. Carcinoma of Cervix. Bilateral Hydronephrosis. Uræmia.**
Aged 40. Under treatment nearly one year. Died in coma ten days after admission.
- 6. Carcinoma Fundus Uteri and Polycythemia. Pulmonary Embolus.**
Aged 59. Died suddenly of pulmonary embolus nearly one month after total hysterectomy.
- 7. Carcinoma of Ovary with Pulmonary and Abdominal Metastases.**
Aged 61. Three years previously breast amputated for carcinoma. Now admitted after short illness, abdominal and pelvic tumour masses, presumably ovarian. Died in uræmic coma.
- 8. Sarcomatous Degeneration of Fibromyoma.**
Aged 54. Admitted in extremis; very large retroperitoneal tumour removed. Died within twenty-four hours.
- 9. Ovary Cyst Adenoma Papilliferum.**
Aged 29. Enormous right hydrothorax associated with clinically malignant ovarian cystoma.
- 10. Ovary Cyst Adenoma Papilliferum, Ovarian Abscess, Operation, Peritonitis.**
Aged 30. Patient was operated on in extremis. A right sided salpingo-oophorectomy was done, as right ovary was site of a large tumour and also contained an abscess cavity. Patient did not rally from operation and died on the sixth day.
- 11. Fibromyoma Uteri, Hysterectomy, Pulmonary Embolus.**
Aged 48. Fibromyoma size of three months' pregnancy, removed and complete perineal tear repaired. Died suddenly on sixth day of pulmonary embolus.
- 12. Fibromyoma Uteri, Menorrhagia.**
Aged 45. Menorrhagia one and a half years. Uterus contained multiple fibroids. Had several fainting attacks and died in one of these. Autopsy showed no lesion to explain sudden death.

13. Fibromyoma Uteri, Hysterectomy, Peritonitis.

Aged 45. Sub-total hysterectomy, multiple fibromyomata. Peritonitis supervened. Died on fourth day.

14. Fibromyoma Uteri, Metrorrhagia, Total Hysterectomy.

Aged 50. History of two to three years. Large intra-ligamentous fibromyoma. Wound broke down sixth day. Died eighth day. Myocardial failure.

15. Ectopic Gestation, Operation, Peritonitis.

Aged 32. Typical history of ectopic gestation. Peritonitis developed eighteenth day after operation. Died twenty-sixth day.

16. Ectopic Gestation.

Aged 28. History of profuse vaginal bleeding and some lower abdominal pain. Uterus size three months' pregnancy. Uterine cavity explored for diagnosis, followed by immediate collapse of patient who did not rally sufficiently to permit further operative procedure.

17. Normal Delivery, Pulmonary Embolus.

Aged 30. Delivered spontaneously at home, uneventful recovery; tenth day symptoms pulmonary embolus. In next two weeks had several more, the last of which was fatal.

18. Abortion, Therapeutic, Chronic Nephritis, Streptococcus Hæmolyticus, Septicæmia.

Aged 36. Therapeutic abortion at third month, indicated by rising blood pressure and increasing evidence of renal deficiency, followed by streptococcus hæmolyticus septicæmia.

19. Infected Abortion, Toxic Hepatitis, Pelvic Peritonitis.

Aged 31. Expelled complete gestation sac covered with purulent material. Condition became worse, jaundice developed. Died one month later.

20. Infected Abortion, Peritonitis, Retro-peritoneal Abscess.

Aged 38. Slight fever on admission. Uterus explored, peritonitis and retro-peritoneal abscess developed.

21. Retro-Peritoneal Abscess, Broncho-Pneumonia, Pyonephrosis.

Aged 43. Appendectomy February 1930. Discharge from wound ever since. Pelvic abscess ruptured and drained through bladder. Admitted October. Laparotomy revealed retro-peritoneal abscess of great size communicating with bladder.

22. Sigmoid Diverticulitis, Perforation and Formation of Pelvic Abscess.

Age 61. Pelvis filled by large fluctuant mass extending to umbilicus. Operation disclosed the above origin. Died within twenty-four hours.

23. Cerebellar Hæmorrhage.

Age 20. Admitted unconscious and died within twenty-four hours, still in coma. Above diagnosis determined at autopsy.

	1929	1930
Total Admissions.....	1470	1492
Total Operations....	1008	1015
Major Operations.....	274	283
Minor Operations.....	734	732
Total Mortality.....	13	23
Post Operative Mortality.....	1.2%	1.57%

REPORT OF THE OPHTHALMOLOGICAL DEPARTMENT

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

The work of the Ophthalmic Department progressed satisfactorily during the year 1930. There was an increase of 703 in the total number of patients examined, and of 42 in the operations performed, as compared with the figures for 1929.

A new operation for detachment of the retina (Gonin's) has been performed with success; and implantations of decalcified bone spheres into the orbit following enucleation of the eye have given gratifying results.

The interest of all members of the staff in the work of the Department's pathological laboratory has been fully maintained.

Respectfully submitted,

W. GORDON M. BYERS,

Ophthalmologist-in-Chief.

DEPARTMENT OF OPHTHALMOLOGY

RECORD OF DISEASES

For the Year Ended 31st December, 1930

Glaucoma.....	41
Eyelids.....	12
Lacrimal apparatus.....	28
Conjunctiva.....	32
Cornea.....	81
Anterior chamber.....	4
Sclera.....	12
Lens.....	116
Iris.....	27
Ciliary body.....	47
Choroid.....	4
Retina.....	9
Vitreous.....	6
Optic nerve.....	8
Eyeball.....	34
Orbit.....	3
Disturbances of motion.....	23
Miscellaneous.....	3

STATISTICS FOR 1930

Total Admissions 1930.....	432
Total Discharges 1930.....	430
	2
No. in Hospital end of year 1930.....	6
No. in Hospital first of year 1930.....	4
	2

REPORT OF OPERATIONS

Advancement.....	14
Cauterizing ulcer cornea.....	6
Cyclodyalysis.....	1
Elliott's sclero-corneal trephining.....	18
Gouin's trephine of sclera.....	2
Enucleation.....	26
Evisceration globe.....	1
Excision cyst of orbit.....	1
Excision lacrimal sac.....	23
Excision lacrimal gland.....	1
Excision prolapse iris.....	7
Excision prolapse uveal tissue.....	1
Excision tarsus—Kuhnt Heiserath.....	1
Extraction cataract.....	54
Extraction intra capsular.....	9
Extraction foreign body with magnet.....	2
Incision and curetting Meibomian cyst.....	4
Incision lacrimal abscess.....	1
Inclusion iris.....	2
Iridectomy.....	55
Iridectomy with conjunctival flap repair.....	4
Iridotomy.....	1
McReynold's for pterygium.....	3
Needling.....	27
Paracentesis.....	2
Plastic for socket.....	1
Removal foreign body.....	4
Repair conjunctival flap.....	2
Saemisch section cornea.....	1
Sclerectomy.....	2
Skin implantation.....	1
Slitting canaliculus.....	1
Tenotomy.....	2

REPORT OF THE DEPARTMENT OF OTO-LARYNGOLOGY

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:--

The Department of Oto-Laryngology has had an active service during the year 1930, and the work has proceeded in a satisfactory manner. In the outdoor there were 7711 cases treated, and 535 minor operations performed. The total number of admissions amounted to 2067, of which 1331 were public cases, 664 private cases, and 78 semi-private cases.

In all 1814 operations were performed, 1230 in the Ear, Nose and Throat outdoor operating room, and 584 in the Ross operating room. These operations were made up of 1388 tonsil and adenoid operations, 65 simple and 18 radical mastoid operations, 107 cases of sub-mucous resection of the nasal septum, and 187 operations on the accessory sinuses of the nose.

Post operative hæmorrhage occurred in 21 cases, of which 20 were tonsillar in origin, and 1 from the adenoid bed. Of this group of cases, 5 were treated by ligature in the operating room, 14 by the use of tannic and adrenalin packs, and 2 cases stopped without any interference.

During the year this department saw 775 cases on requisition from various other departments of this hospital.

The Bronchoscopic Clinic treated 133 cases, an increase of 44 from the previous year. A new development in this field has been the introduction of flexible metallic tubes, in the cases of Carcinoma of the Oesophagus, after the Method of Souttar.

Two cases of scarlet fever occurred in the wards during the year, and both were transferred to the Alexandra Hospital. No cases of erysipelas developed.

The following papers were prepared by members of this Department during the current year:

- (1) DR. JAMES T. ROGERS—
 1. Early Diagnosis of Septic Infection of the Lateral Sinus.
(*Read before British Medical Association Meeting, Winnipeg, August, 1930.*)
 2. Intracranial Complications of Middle Ear Suppuration.
(*Read before the Montreal Neurological Society.*)
- (2) DR. DAVID H. BALLON—
 1. A Fish Bone in the Trachea of a Sixteen months old Child.
(*Canadian Medical Association Journal XXIII, 822, 1930.*)
 2. A Molar Tooth in the Left Lower Bronchus.
(*Canadian Medical Association Journal XXIII, 821-822, 1930.*)
- (3) DR. G. EDWARD TREMBLE—
 1. The Value of the Audiometer in Industrial Medicine.
(*The Canadian Medical Association Journal XXII, 71-75, 1930.*)
(*Read before the Industrial Medical Association of the Province of Quebec, Montreal, October 29, 1929.*)
 2. Decalcification of the Temporal Bone for Dissection.
(*The Archives of Oto-Laryngology, May 1930, Vol. 11, pp. 580-582.*)
- (4) DR. W. J. McNALLY—
 1. A Check Mechanism in the Frog's Labyrinth.
(*Presented to the American Academy of Oto-Laryngology and Ophthalmology, October, 1930.*)

There were six deaths in the service during the year, of which one died of a brain abscess, a direct complication of a Chronic Otorrhœa. Three cases died of Septicæmia following an acute mastoid infection, and two cases of acute septic tonsillitis with complications, both of whom died within twenty-four hours of admission to the hospital.

The American Academy of Ophthalmology and Oto-Laryngology has again elected Dr. W. J. McNally a research fellow, for further investigation into the labyrinth.

We have to record the resignation of Doctor H. S. Birkett, C.B., as Chief of this Department.

Doctor Birkett came to the Royal Victoria Hospital thirty-one years ago to organize a Department of Laryngology. In 1906 the ear cases were also put under his care, and the Department was broadened to include Oto-Laryngology.

The Board of Governors in accepting his resignation with regret, appointed him to the Consulting Staff of the Hospital.

This report has been prepared by Doctor Keith Hutchison, Associate in Oto-Laryngology, who has acted as departmental Registrar during the past year.

Respectfully submitted,

E. HAMILTON WHITE,

Oto-Laryngologist-in-Chief.

□ □

STATISTICS

DEPARTMENT OF OTO-LARYNGOLOGY

OPERATIONS ROSS MEMORIAL PAVILION, 1930

NOSE AND NASAL SINUSES:

Curettage ethmoid.....	1
Drainage sinus.....	1
Ethmoidectomy.....	1
Incision furuncle.....	1
Incision septal abscess.....	1
Puncture and irrigation antrum	3
Radical antrum.....	32
Radical excision maxilla— Moure's.....	1
Removal nasal polypi.....	5
Setting fracture nasal bones....	1
Sphenoidectomy.....	1
Submucous resection.....	34
Turbinotomy.....	16

FAUCES, PHARYNX, NASO-PHARYNX:

Arresting secondary hæmorrhage tonsil.....	1
Incision peri-tonsillar abscess...	2
Incision retro-pharyngeal abscess	1

Tonsillectomy and adenoidec- tomy.....	409
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LARYNX, TRACHEA, BRONCHI, LUNGS:

Direct bronchoscopy.....	2
Direct œsophagoscopy.....	3
Removal foreign body trachea..	1
Removal papilloma larynx.....	2
Laryngoscopy.....	1

EAR:

Closure mastoid fistula.....	1
Curettage mastoid cavity.....	3
Ligation jugular.....	1
Opening lateral sinus.....	2
Paracentesis.....	11
Plastic on mastoid.....	1
Radical mastoid.....	3
Removal exostosis auditory meatus.....	1
Simple mastoid.....	25

OPERATIONS OUT-DOOR OPERATING ROOM, 1930

NOSE AND NASAL SINUSES:

Sub-mucous resection.....	73
Radical antrum.....	55
Ethmoidectomy.....	7
Turbinotomy.....	19
Sphenoidectomy.....	2
Radical frontal sinus.....	5
Moure's operation.....	1
Removal nasal polypi.....	11
Puncture and irrigation antrum	8
Setting fracture nasal bones....	3

Incision hæmatoma left antrum	1
Removal foreign body nose....	1
Removal papilloma cheek.....	1
Post nasal pack.....	1
Intra nasal curetting sinus duct	1
Insertion radium ethmoid cavity	1
Drainage sinus.....	1
Insertion radium sphenoid cavity.....	4
Incision of septal abscess.....	1

OPERATIONS OUT-DOOR OPERATING ROOM—*Continued*

FAUCES, PHARYNX,		Direct œsophagoscopy for re-	
NASO-PHARYNX:		removal foreign body..... ..	7
Adenoidectomy..... ..	29	Direct laryngoscopy with	
Tonsillectomy..... ..	327	snipping..... ..	9
Tonsillectomy and adenoidec-		Direct laryngoscopy for removal	
tomy..... ..	623	foreign body.	2
Incision of retro-pharyngeal		Tracheotomy.	3
abscess..... ..	6	Exposure of larynx and insertion	
Incision of peri-tonsillar abscess	2	of radium..... ..	1
Insertion of radium naso-phar-		Laryngo fissure..... ..	2
ryn timer..... ..	5	Direct laryngoscopy..... ..	11
Insertion of radium tonsil fossa	1		
Curettage naso-pharynx..... ..	1	EAR:	
Arresting secondary hæmorrhage		Simple mastoid..... ..	40
tonsil..... ..	2	Paracentesis ear.. ..	33
Biopsy pharyngeal tumor....	2	Curettage mastoid cavity.....	5
Incision cervical adenitis....	1	Incision of furuncle.....	2
		Removal aural polypus.....	8
		Radical mastoid.. ..	15
		Radical mastoid and opening	
		brain abscess..... ..	1
		Plastic to radical mastoid.....	5
		Radical mastoid with implan-	
		tation radium..... ..	1
		Excision sebaceous cyst ear....	2
		Ossiculectomy..... ..	2
		Opening lateral sinus..... ..	7
		Ligation of jugular..... ..	5
		Closure mastoid fistula.....	1
		Simple mastoid with drainage	
		peri-sinus abscess..... ..	1
LARYNX, TRACHEA,			
BRONCHI, LUNGS:			
Direct bronchoscopy..... ..	50		
Direct bronchoscopy with re-			
moval foreign body.. ..	2		
Direct bronchoscopy with lipio-			
dol injection..... ..	12		
Direct bronchoscopy for removal			
papiloma vocal cords..... ..	8		
Direct œsophagoscopy..... ..	18		
Direct œsophagoscopy with in-			
sertion of Soutar's tube.....	11		

DEPARTMENT OF OTO-LARYNGOLOGY

RECORD OF DISEASES

For the Year Ended December 31st, 1930

DISEASES OF THE NOSE:

	Total Died
External nose and nasal vestibule.....	171
Nasal cavities.....	28
Nasal sinuses.....	147

**FAUCES, PHARYNX
AND NASO-PHARYNX:** 1645 2

LARYNX, TRACHEA, BRONCHI AND LUNGS:

General Diseases:

Foreign body pleural cavity.	1
Pneumothorax.....	1
Syphilis larynx.....	1

Acute Conditions:

Abscess bronchiectatic..	1
Abscess lung.....	1
Laryngitis.....	4
Pneumonia.....	4

Chronic Conditions:

Asthma.....	7
Bronchiectasis.....	1
Bronchitis.....	1
Tuberculosis larynx.....	1
Tuberculosis lungs.....	1

Tumours—Benign:

Papilloma vocal cord....	6
Polyp larynx.....	2

Tumors—Malignant:

Carcinoma larynx.....	4
-----------------------	---

MISCELLANEOUS DISEASES LARYNX AND TRACHEA:

	Total Died
Erosion vocal cord....	1

LARYNGEAL PHARYNX AND ŒSOPHAGUS:

Carcinoma œsophagus...	12
Foreign body œsophagus	6

MOUTH:

Carcinoma Tongue...	1
Gumma tongue.....	1
Stomatitis, ulcerative...	1

DISEASES OF THE EAR:

External ear.....	8
Middle ear.....	184
Internal ear.....	3

MISCELLANEOUS

DISEASES: 71

STATISTICS FOR 1930

Total Admissions 1930.....	2067
Total Discharges 1930.....	2057
	10

No. in Hospital end of year 1930.. 24

No. in Hospital first of year 1930.. 14

10

Total Deaths..... 5

REPORT OF THE UROLOGICAL DEPARTMENT

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

The work of the Urological Department has continued with increased success during the year 1930. We are able to report a greater number of admissions to the indoor service during the year, along with an increase in the number of operations, particularly the major ones.

The Urology Out-Patient Department has shown a notable increase in attendance during the past year. Seven clinics per week are held, a daily clinic for men and one on Thursday mornings for women. The attendance at these clinics has more than doubled during the year and is in fact, almost six times that of five years ago.

In October of the past year Dr. N. E. Berry accepted the position of Clinical Professor of Surgery, Department of Urology at Queen's University, Kingston, and Director of the Department of Urology at the Kingston General Hospital. Dr. Berry came to our Service as an interne six years ago. He later served in General Surgery and then became Resident in Urology. After a tour of the European Clinics he returned as Clinical Assistant in Urology here. Though exceedingly loath to lose Dr. Berry, we are extremely proud of his promotion and wish him all success in his new field.

Addresses and publications from the Department during the year 1930 were:—

“Tumours of the Testis” History: Pathology: Prognosis: Treatment. Address by David W. MacKenzie at the Clinical Congress of the American College of Surgeons at Philadelphia, October 14th, 1930.

“Hypopituitarism with special reference to its sexual manifestations.” By N. E. Berry. Canadian Medical Association Journal, Vol. 22, No. 3. Page 354-7. March 1930.

- "Traumatic Rupture of the Bladder and Urethra." By N. E. Berry. Canadian Medical Association Journal, Vol. 22, No. 4, Page 475-83. April 1930.
- "Perirenal Hæmatoma Primary with Polycythemia." By David W. MacKenzie. Journal of Urology. Vol. 23, No. 5, Page 535-43. May, 1930.
- "Tumours of the Testis." A brief series with special reference to the pathology and clinical malignancy. By David W. MacKenzie and Max Ratner. Read at the New York Academy of Medicine, November 16th, 1930. Published in Surgery Gynæcology and Obstetrics. Vol. 52, No. 2a. Pages 336-49. February 1931.
- "Studies of Blood Pressure in Prostatism." Including cardiovascular changes. By M. I. Seng. Read at the American Urological Association at New York City in June, 1930. In publication.

Respectfully submitted,

D. W. MACKENZIE,

Urologist-in-Chief.

□ □

OPERATIONS IN THE UROLOGICAL DEPARTMENT (Indoor)

For the Year Ended 31st December, 1930

Amputation of penis for carcinoma	1
Biopsy of chronic ulceration of genitalia (granuloma inguinal)	1
Circumcision	15
Coagulation urethral caruncle	2
Curettage perineal sinus	2
" perineal and suprapubic sinuses	1
" perineal and inguinal urinary sinuses	1
Cystotomy, suprapubic for drainage in prostatism	49
" " for drainage in carcinoma of the prostate	8
" " for drainage in carcinoma of rectum involving vesical neck	1
" " for drainage in plastic on urethra	1
" " with removal of vesical calculi	7
" " with coagulation of malignant growth of bladder	4
" " with excision of diverticulum	1
" " with coagulation of carcinoma in vesical neck	1
" " with dilatation of vesical neck	3
" " for ruptured urethra (fractured pelvis)	1
" " for control of bladder hæmorrhage	1
Cystoscopy	114
" with ureteral catheterization	142
" with ureteral catheterization and pyelogram	362
" with ureteral catheterization and pyeloureterogram	40
" with ureteral dilatation	28
" with fulguration of bladder tumor	7
Cystograms	53
Uroselectan	16
Dilatation of urethra for stricture	25
" of vesical neck	3
Dorsal slit for phimosis	3
" " " " (chancroidal ulcers)	1
Epididymectomy for tuberculous epididymitis	3
" for chronic epididymitis and herniotomy	1
Vasotomy	1
Radical cure of hydrocele	13
" " " " with herniotomy	1
Tapping hydrocele	1
Excision veins pampiniform plexus	13
" " " " and herniotomy	1

Excision cyst of cord and herniotomy	1
“ cyst of epididymis.....	3
“ carcinoma of bladder (with coagulation).....	3
“ diverticulum of bladder with transplattation of ureter.....	1
“ papilloma of urethra (with coagulation).....	1
Incision and drainage perinephritic abscess.....	8
“ “ “ perineal abscess.....	2
“ “ “ periurethral abscess.....	2
“ “ “ ischio-rectal abscess.....	1
Nephrectomy for malignant tumor of kidney.....	2
“ for renal tuberculosis.....	5
“ for renal calculus.....	3
“ for cyst of kidney.....	1
“ for hydronephrosis, extreme, infected.....	7
“ for pyonephrosis.....	2
“ for pyonephrosis with calculi.....	4
“ for marked nephroptosis, kinked ureter, periureteral and perirenal adhesions.....	2
“ for multiple abscesses of kidney.....	1
Nephrectomy and partial ureterectomy for hydronephrotic kidney with obstructed ureter.....	1
Nephrotomy with removal of calculi.....	1
Nephropexy for ptosed kidney.....	1
“ with freeing of adhesions.....	2
Orchidectomy for tuberculous epididymitis.....	3
“ for torsion of testicle.....	1
“ for malignant growth with removal of metastases right groin and epididymectomy for suppurative epididymitis.....	1
Perineal Section with drainage of prostatic abscess.....	3
“ “ with incision of periurethral abscess.....	3
“ “ with incision periurethral abscess (phlegmon).....	1
“ “ for acute extravasation (phlegmon).....	2
“ “ for chronic extravasation, stricture of urethra.....	1
“ “ with excision urinary fistula.....	1
“ “ with plastic closure urinary fistula.....	1
“ “ for stricture of urethra, bulbomembranous.....	1
Placement of testis in scrotum with herniotomy for cryptorchidism.....	8
Plastic repair of urethra for hypospadias.....	1
“ on renal pelvis for improvement of drainage.....	5
“ for formation of urethra.....	1
“ repair of persistent suprapubic sinus.....	2
Prostatectomy, suprapubic, for prostatism (2nd stage).....	47
“ “ for carcinoma of prostate.....	1
Pyelotomy for calculus.....	14
Ureterotomy for calculus.....	11
TOTAL.....	1091

DEPARTMENT OF UROLOGY

RECORD OF DISEASES

For the Year Ended December 31st, 1930

KIDNEY AND URETER:		Total	Died			Total	Died
	Total	Died		General injuries		7	
General Diseases	475	3		Special skin diseases		9	
Congenital deformity	49			Circulatory system	133		
Foreign body	142	2		Lymphatic system	5		
Neoplasms—Malignant	7			Blood	13		
Traumatism	6			Ductless glands	4		
				Nervous system	18	1	
BLADDER:				Bones and joints	28		
General diseases	141			Eye and ear	4		
Congenital deformity	1			Mouth, lips, pharynx, etc.	11		
Foreign body	18	1		Jaw, teeth, gums	2		
Neoplasms—Benign	12			Oesophagus	2		
Malignant	21	4		Stomach	3		
Traumatism	1			Intestines	18		
				Liver and Gall-Ducts	8		
URETHRA:				Abdomen and peritoneum	21	1	
General diseases	93	1		Rectum and anus	11		
Congenital deformity	20			Larynx	1		
Foreign body	5			Trachea and bronchi	11		
Neoplasm—Benign	1			Lungs	32		
Trauma	9			Pleura and mediastinum	9		
				Miscellaneous	14		
MALE GENERATIVE							
ORGANS:							
General	23						
Scrotum	45						
Seminal vesicles	6						
Testicle	55	2					
Penis	31						
Prostate	176	10					
Female Generative Organs	46						
Puerperal state	6						
Specific and Infectious							
diseases	35						
Animal parasites	1						
Metabolism	15						

STATISTICS FOR 1930

Patients discharged 1930	848
Patients admitted 1930	845
	3
No. in Hospital first of year 1930	29
No. in Hospital end of year 1930	26
	3
Total Deaths	25

REPORT OF THE PATHOLOGICAL INSTITUTE

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

Herewith is submitted the Annual Report of the Pathological Institute for the year 1930. The convenient presentation in summary form, according to its subdivisions, has been retained and, as in former years, concerns here only the routine for the hospital, leaving the academic and scientific sides for consideration elsewhere.

The increase of twenty (20) autopsies over the previous year in the Division of Morbid Anatomy is most gratifying although this increase, it must be admitted, is largely due to the rise in the autopsy service of other city hospitals which avail themselves of the opportunities of the Pathological Institute. It is especially noticeable in the cases coming from the Woman's General Hospital. There is nothing in connection with the other divisions which deserves additional emphasis here. They speak for themselves. But it is perhaps worth while mentioning that in the Bacteriological Division, which is already overburdened, more economy in demands might be exercised. Thus out of one hundred and twenty-five (125) vaccines asked of this division, fully 20% were never called for.

The organization of the Pathological Institute has remained essentially as in previous years, the only noticeable change being the entire reconstruction of the bacteriological service and its elevation from a pathological subdivision to a Bacteriological Department. This was the logical outcome of the expansion of this department, both in quantity and quality of the work, which required a different administration and organization from that of a simple subdivision. It had long become apparent that on the academic, university side such a change was urgent and when at the end of the last academic year Professor Harrison resigned, the University decided to establish a University Chair and Department of Bacteriology and, as natural, to house it in the Pathological Institute where it also absorbed the previous subdivision of bacteriology.

The necessity for reorganization as far as the more practical hospital requirements were concerned, had become no less imperative than those on the academic side. It was therefore thought advisable to combine, with the establishment of a University Department of Bacteriology under its own head, a similar arrangement for the Hospital. When it is considered that at the opening of the Pathological Institute in 1924 the bacteriological subdivision had at its disposal a bacteriologist, a technician and a boy (a total of 3), and at the end of 1929 there was a bacteriologist-in-charge, an assistant bacteriologist, a junior bacteriologist, two technicians and a boy, together with a larger number of graduate workers and research students (a total of 16), and that the demands from the Hospital within these six years had gone up several hundred per cent. (to say nothing of the more complicated quality of the work demanded) an idea may be formed of the urgent necessity of readjusting that service.

At the end of this year this reorganization is well under way. Professor E. G. D. Murray, formerly of the University of Cambridge, and now the holder of the University Chair of Bacteriology and in charge of the department on the University side, has also assumed the supervision and direction of the bacteriological work of the Hospital. Thus, just as in the Department of Pathology, both academic and hospital sides may be properly co-ordinated and correlated to their mutual advantage. The details and plans of this reorganization have at the time of this report not been fully worked out, but they promise to put both Pathology and Bacteriology into a greater, efficient hospital unit, although physically and administratively independent. It is therefore hoped that at the next Annual Report a further statement as to this reorganization and improvements in the conduct of this department can be made.

The increasing demands for diagnostic and scientific assistance of the Departments of Pathology and Bacteriology made by the Royal Victoria Hospital speak well for the practical value of their results. And still, it is felt that the advantages which the Pathological Institute offers to the Hospital are perhaps not as fully and universally appreciated as they should be. It is only too natural that the chief interests and chief concern of the hospital administration and of others interested in the hospital centre in those departments which are in more intimate personal contact with the patient, and to regard the Departments of Pathology and Bacteriology as somewhat outside of the real hospital sphere. But experience has amply shown, here as well as in other institutions, that a neglect of the more scientific laboratory side of a hospital is detrimental to the

best interests of its progress and to the efficiency of its staff; consequently, also to the patients. I have pleaded in previous reports for somewhat more encouraging recognition of its position in the Hospital, and I feel that this is an appeal which may well be repeated particularly to all those who take more than a cursory interest in the welfare of this Hospital. A department can only just go as far as its resources will permit, but much more could be done here both for patients and for the progress of scientific medicine if it were possible to ease somewhat the financial stress under which the Pathological and Bacteriological Departments constantly labour for the interests of the Hospital.

Respectfully submitted,

HORST OERTEL,

Pathologist-in-Chief.



I. DIVISION OF MORBID ANATOMY (Dr. CHASE, in Charge)

During the year 1930 there were three hundred and seventy-eight (378) post-mortem examinations performed at the Pathological Institute. This represents an increase of twenty-four (24) cases over the previous year, and it represents the largest number of autopsy examinations on record. Two hundred and seventy-three (273) cases came from the various departments of the Royal Victoria Hospital, while one hundred and five (105) cases (nearly 39%) were referred by other city hospitals or by physicians not connected with a hospital.

The autopsies from the Royal Victoria Hospital came from the following departments:—

Departments	No. of Autopsies	% of Autopsies
Medicine.....	109	48
Surgery (and Neurosurgery).....	71	45
Urology.....	7	28
Otolaryngology and Ophthalmology..	1	20
Obstetrics and Gynæcology.....	24	61
Babies, newborn.....	61	35
	273	39

This table shows that autopsies were performed on 39% of the total number of deaths from all departments. This compares with 46% during the previous year.

Autopsy examinations from other sources may be tabulated as follows:

Woman's General Hospital.....	68
Homeopathic Hospital.....	11
Alexandra Hospital.....	11
Montreal Foundling and Baby Hospital.....	6
St. Mary's Hospital.....	4
Private cases.....	5
	105
Total autopsies from outside sources.....	105

This total figure (105) represents an increase of twenty (20) autopsies over the previous year. This increase was almost entirely due to the larger number of cases referred from the Woman's General Hospital.

A total of about 9,200 microscopic slides were prepared from the autopsy material. This represents an average of over 23 histological slides from each autopsy.

As in former years all cases were demonstrated and discussed at weekly Staff Conferences. After gross and histological findings were protocolled, a synopsis was incorporated with the anatomical diagnosis of each case.

All autopsies on neuro-surgical cases were investigated conjointly with the Department of Neuro-pathology.

II. DIVISION OF SURGICAL PATHOLOGY

(Prof. WAUGH, in Charge)

During the year 1930 the Department of Surgical Pathology examined twenty-four hundred and ninety (2490) specimens, consisting of thirty-one hundred and thirteen (3113) tissues and organs. From these approximately eighty-three hundred (8300) histological sections were prepared for microscopical examination. The specimens were divided among the various services of the Hospital as follows: Surgery, 1323; Obstetrics and Gynæcology, 924; Urology, 105; Oto-laryngology, 75; Medicine, 19; Ophthalmology, 2; Outside, 42. This represents an increase of 4.7% in the work of this Department over the previous year.

III. DIVISION OF MORPHOLOGICAL HAEMATOLOGY

(Prof. WAUGH, in Charge)

During the year 1930 the Department of Hæmato-pathology carried out two hundred and eighty (280) blood examinations. These consisted of two hundred (200) complete morphological blood studies and eighty (80) partial examinations. These were divided among the various services of the Hospital as follows: Medicine, 212; Oto-laryngology, 23; Surgery, 21; Obstetrics and Gynæcology, 10; Urology, 8; Radiology, 4; and Ophthalmology, 2. This represents an increase of 7.9% in the work of this Department over the previous twelve months.

IV. TECHNICAL DIVISION

(Mr. THOMLINSON, in Charge)

The total number of slides prepared for the Pathological Department were about 17,500 for the routine work in connection with the autopsy and surgical service, and approximately 250 for the bacteriological division. For other departments of the Hospital, approximately 350 slides were prepared for special work in surgery and 500 for medicine. These figures do not include the work done in connection either with the classes in Pathology or investigations, but are confined strictly to hospital work.

V. DIVISION OF BACTERIOLOGY

(Dr. BRUERE, in Charge)

The following represents the material used for the investigation of the specimens sent from the clinical services of the Hospital together with that used in the laboratory class in Bacteriology for the medical students, which this year was taught by Professor Harrison:

- 43,943 tubes of various culture media
- 1,493 flasks of 100 c.c. capacity of various kinds of broth
- 49 flasks of 200 c.c. capacity of nutrient aga for preparing blood plates (represents approximately 980 blood plates).

The actual work done by this Division is represented by the following two charts:

A. DEPARTMENT OF CULTURES (Dr. Beattie, in Charge)

	Medicine	Surgery	Urology	Gynæcology & Obstetrics	Ophthalmology	Oto-Laryngology	Out-Patients	Pathology	Pediatrics	TOTALS
General Cultures.....	526	533	146	41	124	123	306	35	160	1994
Blood Cultures.....	268	28	14	12	...	35	10	11	19	397
Pneumococcus Typing.....	54	15	...	..	...	...	3	..	6	78
Guinea Pig Inoculations.....	73	33	31	..	...	...	12	..	2	151
Vaccines.....	34	2	...	..	...	11	76	..	2	* 125
Other Agglutination Reactions..	9	2	1	..	...	...	12	..	4	28
TOTALS.....	964	613	192	53	124	169	419	46	193	2773

*Of these 125 vaccines ordered and prepared 24 were unclaimed.

B. DEPARTMENT OF SEROLOGY

WASSERMANN TESTS		Total No. of Tests
Blood.....	Strongly positive.....	480
	Feebly positive.....	227
		4363
Cerebrospinal Fluid.....	Strongly positive.....	68
	Feebly positive.....	6
		441
LANGE TESTS		
Cerebrospinal Fluid.....	Positive.....	39
		197
KAHN TESTS		
	Strongly positive.....	470
	Feebly positive.....	286
		1996
GONO. COMPLEMENT FIXATION TESTS		
	Strongly positive.....	31
	Feebly positive.....	19
		248
TOTAL		7245

REPORT OF THE DEPARTMENT OF ROENTGENOLOGY.

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

During the past year safety films only have been used in the X-ray Department.

A new form of X-ray machine has been designed for the use of pneumoencephalography. This machine has been built completely in Canada and has proved satisfactory for its purpose.

A special desk and viewing box was also built in Montreal and installed in the X-ray Department, and has added considerably to the efficiency of the department.

Comparison of the work done in 1929 with 1930 shows an increase of 6.6 per cent. in the number of patients examined, and 7.8% in the number of films made. There is a decrease of 5.2% in the number of dental films, and a very slight increase, viz. 0.2% in the number of X-ray treatments.

Comparison with former years is as follows:—

	1930	1929	1928	1927
Total number of patients for skiagraphs.	14,016	13,130	10,987	10,284
Total number of Films including dental.	35,837	33,232	27,445	24,096
Total number of Dental films.	5212	5499	4214	3984
Number of patients for X-ray treatments.	622	600	535	518
Number of X-ray treatments	3410	3403	3039	2639

	Main	Ross	Ward L Urology	Ross Urology
Total number of patients for skiagraphs.....	10,494	3304	407	176
Total number of films in- cluding dental.....	24,030	9890	1394	523
Total number of dental films	3712	1500		
Number of patients for X- ray treatment.....	517	105		
Number of X-ray treatments	3098	312		

Respectfully submitted,

A. HOWARD PIRIE,
Röntgenologist-in-Chief.

REPORT OF THE RADIUM DEPARTMENT

For the Year Ended December 31st, 1930.

To the GOVERNORS OF THE
ROYAL VICTORIA HOSPITAL.

Gentlemen:—

The Radium Department has completed its first year of service. During that time 218 treatments have been given, and 118 cases have been treated. The figures show however that in general surgery radium is not being extensively used in the treatment of cancer. Only 16 per cent. of cancer cases treated with radium in this hospital have been treated by the method of implantation of radium needles. The remaining 84 per cent. have been handled in the Radium Department by external application.

The use of radium for implantation has not been so great as had been expected. This may partly be due to the fact that the smallest needles contain 2 milligrams of radium element, and the demand has been for needles containing 1 milligram. Arrangements are being made to split up some of the radium supply in order to meet this demand. It should be noted that in the Memorial Hospital, New York, 2 milligram needles are recommended and not 1 milligram.

On two occasions when a radium needle disappeared it was found in an unexpected place by means of a gold leaf electroscope. One needle which has disappeared during the past year has not so far been traced.

The efficiency from the use of the existing stock of radium is low, and shows only a fluctuating demand throughout the year. The average efficiency is under 14 per cent. per month, whereas in radium clinics 60 per cent. is expected.

A special room for radium treatments will be necessary as the Department grows larger. At present treatments have to be given in the small room where the radium is kept, and this practice exposes the radium custodian to extra radiation which is detrimental to her health.

For a department which has been established just one year the results are encouraging. As an instance, four cases of leukoplakia, a forerunner of cancer looked upon as a very incurable disease, have all been cured.

The following tables give the cases treated and results:—

I

Carcinoma of Breast	16
“ “ Rectum	5
“ “ Vulva	1
“ “ Mouth, lips, cheek, jaw, tongue, etc.	27
“ “ Antrum, throat, tonsils, naso- pharynx, larynx, etc.	15
“ “ Middle ear	1
“ “ Oesophagus	7
“ “ Lungs metastatic	1
Epithelioma of finger	1
“ “ mouth	1
Parotid tumor	1
Leukoplakia	4
Nævus	4
Rodent Ulcer	14
Vernal catarrh	6
Traumatic cyst	1
Lupus	1
Corn	1
Moles	2
Ganglion	1
Sarcomas	6
Not diagnosed	2

118

II. Number of cases treated:—

Cured	14	11.8 per cent.
Improved	36	30.5 “ “
Not improved	21	17.1 “ “
Died	24	20.3 “ “
No report yet	10	20.3 “ “
No answer to enquiry	13	

118

III. Number of treatments given:—

By surgical implantation	35	16 per cent.
By external application.	183	84 per cent.
	218	

The number of requisitions made for radium during the year are shown as follows:—

Radium Department—Dr. Pirie..... 59

Surgical Department

Dr. Archibald.....	11	
Dr. Scrimger.....	20	
Dr. McKenty.....	4	
Dr. Bauld.....	2	
	—	37

Ear, Nose and Throat Department

Dr. Hutchinson.....	7	
Dr. Rogers.....	3	
Dr. McNally.....	5	
	—	15

Eye Department

Dr. Byers.....	3	
Dr. Tooke.....	2	
Dr. Rosenbaum.....	1	
	—	6

Department of Gynæcology—Dr. Bauld.. 1

118

Respectfully submitted,

A. HOWARD PIRIE,
in Charge of Radium Department.

LIST OF CLINICS OUT-PATIENT DEPARTMENTS

MAIN BUILDING

Asthma.....	Wed. and Sat.....	9-10 A.M.
Bronchoscopic.....	Tue. and Fri.....	9-10 A.M.
Cardio-Renal.....	Tue. and Fri.....	9-10 A.M.
Dermatology.....	Saturday	10 A.M.
	Wednesday.....	1-2 P.M.
Fracture.....	Mon. Wed. and Fri.....	10-11 A.M.
Gastro-Intestinal.....	Mon. and Thurs.....	9-10 A.M.
General Medical.....	Daily.....	9-10 A.M.
Genito-Urinary.....	Female, Thur	9-10 A.M.
	Male, Daily.....	12.30-2.30 P.M.
Hæmatology.....	Wednesday.....	1.30 P.M.
Laryngology.....	Tue. and Fri.....	2-3 P.M.
Metabolism (Diabetic)...	Thursday.....	2 P.M.
“ “ (Ductless Glds)..	Wednesday..	10 A.M.
Neuro-Surgery.....	Monday.....	1-3 P.M.
Neurology..	Mon. and Thur.....	1-30-2.30 P.M.
Orthopædic.....	Tue. and Fri... ..	2-3 P.M.
Ophthalmology.....	Tue. and Fri.....	2-3 P.M.
Psychiatry.....	Tue. and Fri... ..	2 P.M.
Pædiatrics.....	Daily.....	9-10 A.M.
Pulmonary.....	Mon. and Wed.....	9-10 A.M.
Pneumothorax.....	Friday.....	2 P.M.
Surgical.....	Daily.....	10-11 A.M.

WOMEN'S PAVILION

Gynæcology.....	Daily Except Sat.....	2-3 P.M.
Pre-Natal.....	Daily Except Sat.....	2-3 P.M.

REGULATIONS

GOVERNING PUBLIC WARD PATIENTS

ACCOUNTS All patients' accounts are rendered weekly and are payable within two days from date rendered. The final account must be paid in full before the patient leaves the Hospital.

CHEQUES UNACCEPTED CHEQUES WILL NOT BE ACCEPTED BY THE HOSPITAL.

CHAPLAINS Chaplains of various denominations attend the Hospital daily, and will visit a patient if a request is made through the nurse in charge of the Ward.

TRANSFER A patient who desires to be transferred from a Public Ward to a Private Room must first of all settle the Public Ward account and Deposit the sum of \$40.00. The patient will be responsible for all extra charges incurred (as per Schedule of Charges for Private Patients), and the Professional Fee of the Attending Physician, Surgeon or Specialist from date of admission to Private Room.

VALUABLES **VALUABLES SHOULD BE HANDED OVER TO THE NURSE IN CHARGE OF THE WARD, WHO WILL ENTER THEM IN A BOOK FOR THAT PURPOSE, AFTER WHICH THEY WILL BE DEPOSITED IN THE HOSPITAL VAULT. THE HOSPITAL WILL NOT BE RESPONSIBLE FOR ANY MONEY OR VALUABLES RETAINED IN THE WARD BY A PATIENT. VALUABLES WILL BE DISPOSED OF IF UNCLAIMED WITHIN THIRTY DAYS AFTER DISCHARGE OR DEATH OF PATIENT.**

VISITORS Friends are permitted to visit Public Ward Patients on the following days:—

Wednesday 3 to 4 P.M.

Friday 3 to 4 P.M.

Sunday 3 to 4 P.M.

Visitors are not allowed in the Children's Wards "N" and "H" without obtaining special permission from the Office Manager.

VISITORS TO WOMEN'S PAVILION

2nd FLOOR

Husbands only are permitted to visit Public Patients on the following days:—

Sunday 2 to 3 P.M.
Tuesday and Thursday . . . 7 to 8 P.M.

Semi-Public Patients—Any two visitors are permitted to visit patients on the following days:—

Sunday }
Tuesday } 2 to 3 P.M.
Thursday }

Every Night—7 to 8 P.M.—Husbands only.

5th FLOOR

Friends are permitted to visit Public Ward Patients on the following days:—

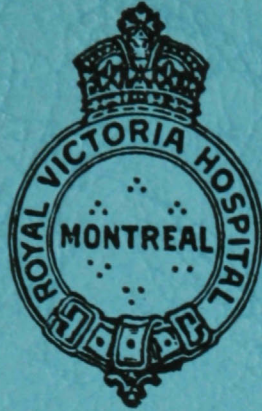
Sunday 3 to 4.30 P.M.
Wednesday and Friday . . . 3 to 4 P.M.

Semi-Private Patients

Visiting Hours—Every day between the hours:—

10 A.M. to 12 Noon. 2 P.M. to 4 P.M.
7 P.M. to 9 P.M.

Collected



CHARTER GRANTED BY ROYAL AUTHORITY 1893

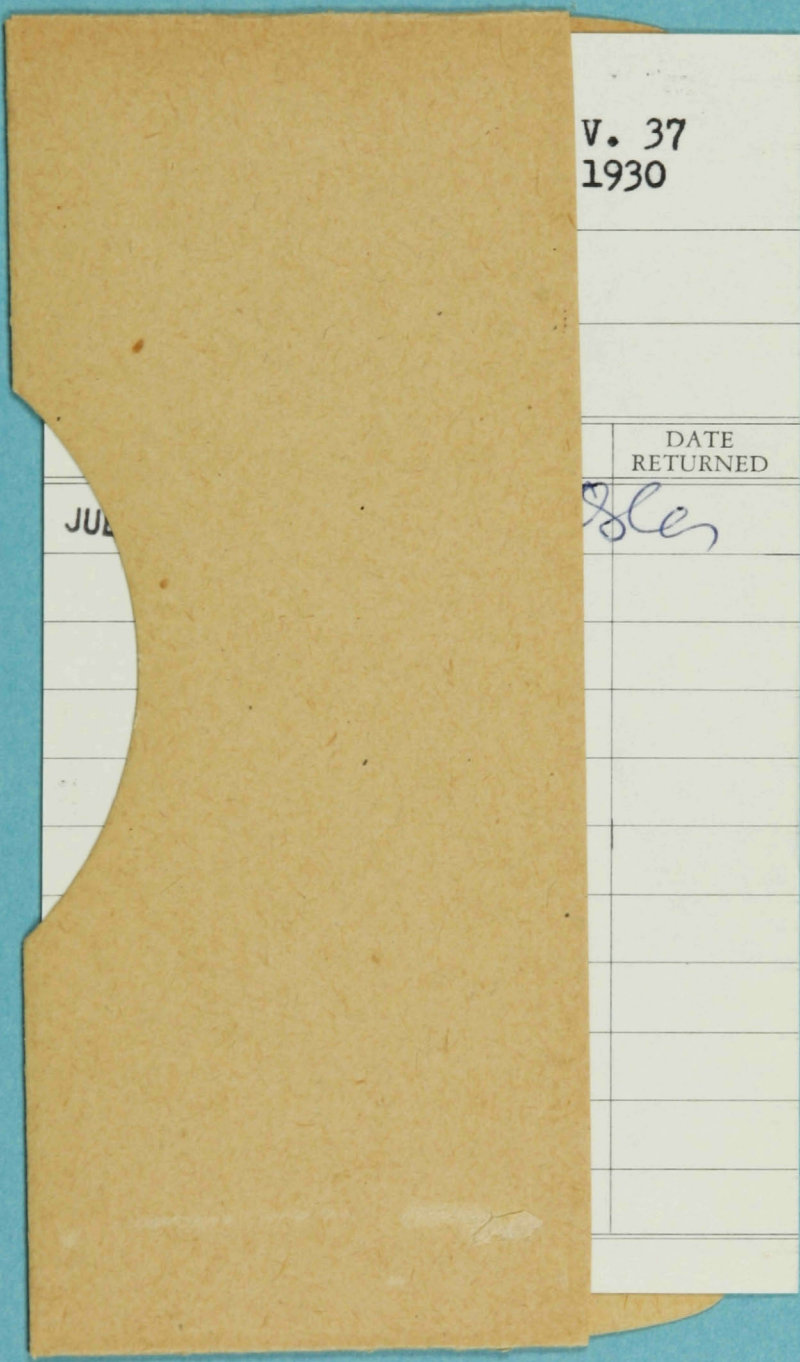
THE
Royal Victoria Hospital
MONTREAL

Thirty-Seventh Annual Report

for the year ended

31st DECEMBER, 1930

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1930

DATE
RETURNED

JUL

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