

Recommendations concerning amalgamation of the Sub-departments

Feb 1934

Neurology and Neurological Surgery into the  
Department of Neurology and Neurosurgery.

in R. V. H.

After consultations with Dr. Russel and Dr. F. H. MacKay,  
I am authorized to make the following suggestions.

The Departments of Neurology and Neurological Surgery  
should be combined in one department to be called the Department of  
Neurology and Neurosurgery. By this arrangement the control of clinical  
material would remain unchanged and likewise the undergraduate  
teaching would continue to be carried out at the discretion of the  
Professor of Medicine and the Professor of Surgery. But the laboratory  
of Neuropathology would become the laboratory for the whole department.

If this amalgamation takes place the budget which has been  
exclusively for the laboratory of Neuropathology will be considered a  
budget for the whole department to be expended on the requisition of  
Dr. Russel, Dr. Penfield and Dr. Cone, although it will be expended  
upon the activities of this experimental laboratory as heretofore.

The neurosurgeons will assist in the teaching of students  
in the outpatient department once a week at both the Royal Victoria  
Hospital and the Montreal General Hospital at the discretion of the  
neurologist in charge.

At the Royal Victoria Hospital it is considered to be desirable  
that both neurological and neurosurgical patients, which are  
being actively treated or actively studied shall be admitted to the  
special ward which is to be set aside for neurosurgery. At the same  
time there should be beds available for neurological cases on the  
medical wards and for neurosurgical cases on the surgical wards. In



the case of neurology it is requested that it be made possible to get sufficient cases for teaching purposes into the hospital when the necessity for teaching arises. In the case of neurosurgery it is desired that the traumatic neurosurgical cases should be handled for the most part in the general wards and that other cases may be transferred back and forth so as to continue the contact between neurosurgery and surgery in all types of cases.

It is felt that neurology will require the use of 15 beds and that neurosurgery will require the use of 25 beds, about 10 of which will be usually occupied by traumatic cases.

In regard to post-graduate teaching it is felt that every effort should be made to give opportunity to serious students who wish to carry on neurological investigation, to be trained in neurology and neurosurgery and to do constructive work along this line, but that it is not desirable to deliver a series of lectures for practitioners who wish to "brush up" their knowledge of the nervous system or to become finished neurologists in a few week's time.

Under the new arrangement it is recommended that the following list of University appointments be made in the Department of Neurology and Neurosurgery:-

Clinical Professor of Neurology	Colin Russel
Clinical Professor of Neurology	F. H. MacKay
Clinical Professor of Neurosurgery	Wilder Penfield
Assistant Professor of Neurology and Neurosurgery	William Cone
Lecturer in Neurology	A. W. Young
Lecturer in Neurology and Madeleine Ehret Ottmann (Fellow	J. N. Peterson
Lecturer in Neurology	N. Viner
Assistant Demonstrator in Neurosurgery	A. R. Elvidge
Assistant Demonstrator in Neuropathology	I. M. Tarlov
Research Fellow in Neurology & Neurosurgery	G. Chorobski
Research Fellow in Neurology & Neurosurgery	E. L. Gage
Research Fellow in Neurology & Neurosurgery	G. N. Paterson Smyth



In regard to the budget the following quotation may be made from a recommendation drawn up by the sub-department of Neurological Surgery last spring. To these specifications has been added at the suggestion of Dr. Russel \$500 for photography, making the total \$7,800.

"The following memorandum is to draw attention to the indefinite provisions made for Neurosurgical and Neurological work at the Royal Victoria Hospital, in the hope that that work may be placed on a definite and permanent basis.

LABORATORY OF NEUROPATHOLOGY.  
(To be changed to Department Budget)

<u>"ESTIMATED YEARLY MINIMUM EXPENSES.</u>		<u>PRESENT YEARLY RESOURCE.</u>	
Secretary @ \$120.00 a mth.	\$1440.00	Royal Victoria Hospital for	
Technician @ \$100.00 a mth.	1200.00	half cost of Secretary.	\$660.00
" @ 125.00 " "	1500.00	Medical Clinic,	
Cleaning of Lab. @ 8.84 a wk.	460.00	(1930 duration?)	2000.00
Routine Lab. Supplies	2000.00	Hodgson & Reford,	
New Equipment & Miscellaneous.	500.00	1930, 1931, 1932, (1933?)	2000.00
Printing & Stationery.	200.00	Murray,	
Photographic expenses.	500.00	1930, half of 1931.	1000.00
		Cooper Fund	1000.00
	<u>\$7800.00</u>		<u>\$6660.00</u>

CONE SALARY FUND.

Yearly salary Dr. Cone-----	\$8000.00	Specific Hodgson-Reford
		donation 1930, 1931, 1932
		(1933?)-----
		-----\$8000.00

"The laboratory has been run from funds the nature and source of which I have been ignorant. No definite promise has been made apparently for any continuance of these resources except the money coming from the Hodgson and Reford contribution, the \$660.00 from the Hospital



and the money from Mr. Murray which has, so far as I know, been expended already.

"We have not been limited in any way up to date in organizing the laboratory and thanks to a donation for the specific purpose of research in epilepsy we have been able to carry out our researches and also to contribute some extra things to the laboratory, among which were a photomicrographic apparatus costing \$1000.00 and microscopes, books and other apparatus which totalled almost an additional \$1000.00. Thus our work has progressed without limitation.

"The whole arrangement has been on an unsatisfactory basis, however, inasmuch as nothing is definite excepting the salary for Dr. Cone for the next four years. It seems to me we have been working in what may be termed "a fool's paradise," - a paradise which may vanish at any time should the goodwill of various individuals and departments alter.

"From the point of view of Hospital support of the laboratory of Neuropathology, the work that is being carried on in the Laboratory is largely clinical and of a routine nature. Operative material is studied here and during the past year two hundred and thirty operations were carried out in Neurosurgery, and clinical patients and specimens are studied here to a certain extent. It would seem justifiable that certain items of expense should be undertaken by the Royal Victoria Hospital, The items of expense which seem properly to belong to the Hospital are as follows:-

"Proposed additional Hospital expenditure:-

Cleaning	\$460.00
Printing & Stationery	200.00
Technician for routine work	1200.00
	<u>\$1860.00</u>

"Present Hospital expenditure  
for half time of secretary.

660.00

\$2500.00



"The cleaning of the Laboratory involves at present the halftime of a cleaning woman daily. The Stationery and Printing should be undertaken by the Hospital inasmuch as it is used in connection with clinical cases. The cost of one technician should be defrayed by the Hospital inasmuch as his time is taken up entirely with routine work. I have placed this at \$1200.00. We are paying the research technician \$1500.00.

"Up to the present Dr. Cone and I have drawn requisitions against an unknown budget for the support of the Laboratory of Neuro-pathology. If this work is to be carried out on a permanent basis it seems necessary that there should be a budget of a fixed yearly amount, so that we would know what we have to draw upon and what our limitations are.

"Further there is needed for extra research of the Department about \$5000. to \$10,000. a year. This extra work will vary depending upon the type of problem that is being attacked and might be left upon the basis of contributions from time to time from those who are interested in the solution of certain problems.

"At present a definite combined Hospital and University yearly budget amounting to about \$7800.00 is necessary to put the Laboratory on a permanent basis, and further contributions for specific research undertakings. It is impossible to look forward to the conduct of a permanent clinic unless a definitely specified budget is placed at the disposal of the work."

Wilder Penfield, M.D.