Then there is Colonel G. A. Winfield, who is also deputy director general of medical services. This officer proceeded overseas early in the war and held the appointment of assistant medical director, officer in charge of hospitalization, Canadian military headquarters. He became a member of the staff of Dalhousie university after five years post-graduate work in surgery and carried on an extensive practice in Halifax as a specialist.

Then there is Colonel A. E. Archibald, who is as widely known as a consultant as any surgeon in Canada. He has been a chief consultant surgeon for some time. Then there is Colonel W. P. Warner, who is chief consultant in medicine. He was associate professor of medicine, university of Toronto, and has been a specialist in internal medicine in Toronto for the past fifteen years. Then there is Lieutenant-Colonel C. S. Fahrni, who is a consultant surgeon. He is the immediate past president of the Canadian Medical association and was assistant professor of surgery, university of Manitoba. He has carried on a leading surgical practice in Winnipeg for the past twenty years.

The next is Lieutenant-Colonel J. D. Adamson, who is a consultant physician. He was professor of medicine, university of Manitoba and chief of the medical staff, Winnipeg general hospital. Next is Lieuten-ant-Colonel R. I. Harris, M.C., who is a surgical consultant. He was assistant professor of surgery, university of Toronto, as well as chief surgeon of the orthopaedic service, university of Toronto. He is past president of the American orthopaedic association and for the past twenty years has been a leading consultant in surgical practice in Toronto. These are the senior men at national defence headquarters. Along with them are eleven district medical officers throughout the districts. I will give their names:

Lieuterant-Colonel G. L. Jepson, Military Cross and V.D., the district medical officer for military district No. 1, has been a specialist in anæsthesia for the past thirty-seven years and assistant professor of anæsthesia, Western university; also chief anæsthetist, Victoria hospital, London, Ontario.

Colonel A. R. Hagerman, another Military Cross man, is the district medical officer of military district No. 2. He has specialized in internal medicine and cardiology for the past twenty years and is on the staff of the department of medicine, university of Toronto, as well as on the medical staff of St. Michael's hospital, Toronto.

[Mr. Ralston.]

Colonel A. E. Lundon, whom I knew in the last war, is district medical officer, military district No. 3. He has had extensive post graduate work in ear, nose and throat in the United States and Europe. He has been a specialist in ear, nose and throat, Montreal, for the past twenty years, having served on the staff of Montreal general hospital and McGill university in this capacity.

Colonel R. H. McGibbon is the district medical officer, military district No. 4. He has had post-graduate training in medicine for six years in Canada and the United States. He has had a large general practice in Montreal for the past sixteen years and is a member of the medical staff of the

Montreal general hospital.

Lieutenant-Colonel J. P. A. J. Mercier, whom my hon. friend has mentioned, is district medical officer of military district No. 5. He has had post-graduate experience in mental and nervous diseases, and has had a general medical practice in the city of Quebec for the past eighteen years. These are not the dregs of the medical profession, Mr. Chairman.

Colonel G. R. Forbes, the district medical officer of military district No. 6, has had a large general and surgical practice in Kentville, Nova Scotia, for the past eighteen years.

Lieutenant-Colonel A. A. James, the district medical officer of military district No. 7, became a member of the permanent force subsequent to relinquishing his appointment as assistant professor of biochemistry at the university of Western Ontario. This officer proceeded overseas in 1940, where he held the appointment of A.M.D. 1 at Canadian military headquarters.

Lieutenant-Colonel P. G. Bell, another officer whom I knew in the last war, is a D.S.O. and V.D. He is district medical officer at military district No. 10. This officer has had three-and-a-half years post-graduate work in eye, ear, nose and throat and has specialized in eye, ear, nose and throat work in the city of Winnipeg for the last twenty-two years. He held the appointment of head of the department of ophthalmology at the university of Manitoba.

Colonel W. A. Wilson is the Command medical officer, Pacific Command. He took post-graduate work in internal medicine in London, England. This officer has carried on an extensive practice in internal medicine in Vancouver for the past twenty-two years. He holds the appointment of chief of the medical staff of Shaughnessy hospital, Vancouver.