

the past year was \$1.21 per day, and, considering the work being done, the financial records are certainly satisfactory.

I am sometimes asked what I consider the model plan for a young and growing city desirous of planning for a hospital that is to serve future generations. My answer, founded on observation, is, in my judgment, the model plan to have a large section carefully selected outside and away from the noise and dust of the city, and on this large area lay out the hospital which will care for and receive all classes and diseases in distinctly separate pavilions and provide with all the facilities of outdoor treatment when practicable. With such a scheme, one or more small reception hospitals in the centre of the city would meet all the requirements for emergency cases. This hospital village would have a leading feature, the convalescent home, to which the patient could be transferred as soon as convalescence became first established. This leads me to refer to the fact that at present there is not sufficient attention paid to providing large convalescent homes. The poor man has to be kept in our hospitals long after his recovery has commenced—too sick to be sent home, and really not sick enough to be kept in a bed which might with advantage be taken by an acute case. On the grounds of economy alone, it would be particularly advantageous to every large hospital to have a convalescent home to which its recovering patients might be transferred.