

I have also proposed the formation of a reserve corps of medical officers, somewhat on the basis of that of the British service. All medical officers under sixty years of age, of good health and physique, and whose previous service had been found satisfactory, might voluntarily, and at any stage of their service, be placed on the reserve list. They would be liable to be called upon to serve again either in peace (optional) or in war time. In this way the services of such men as Sullivan, Roddick, Bell, Douglas (late 24th), Cameron, Kerr (late of Winnipeg), Elder, Shephard and others need not be permanently lost to the department. They might receive a step in honorary rank on transfer to the reserve list and be compulsorily retired after sixty-five years of age.

The formation of such a reserve list is possible even under the existing (regimental) system; and if, for any reason, it is thought inadvisable to alter that system at present, that need be no bar to its inauguration. The reserve bill would constitute a *corps d'élite* of retired medical officers. It would (in times of peace) cost the country nothing (an important consideration) and would afford a graceful recognition on the part of the Government of previous good service. On emergency, its members would form a part of the medical departments ready to take their share of duty with troops at the base or in the field, and preferably in military hospitals, where their previous experience, military and civil, would be invaluable.

I had, at the same time, much pleasure in informing the meeting in Halifax that, of late years, improvements had been made in the regimental ambulance system there. Select classes have been instructed in "first aid to the injured," under the officers of the St. John Ambulance Society, in which society Surgeon-Major Lees Hall, of the Army Medical Staff, and Dr. Carleton Jones, of Halifax, are zealous workers. Both these gentlemen had volunteered their assistance as instructors to the militia. In this work, however, I am sorry to say, there has been a falling-off of late on the part of the men.

As regards the formation of chairs of military surgery, suggested in Dr. Farrell's address, I was able to inform the author that the plan had already been tried in Great Britain (after the Crimean war) and had not proved a success. Such a chair had, for instance, been established and was occupied by the late Surgeon Tuffnell, in the Royal College of Surgeons in Ireland, but was soon abandoned.

So much, I was able to point out, in answer to Dr. Farrell, had been suggested in the way of reorganization of the militia medical service, and something, in fact, has already been done, for at stations where permanent militia corps are established the medical service is worked