hoping to obtain a ventilation of the subject, and having nothing but agreeable reminiscences of both systems whilst in the Queen's service, I consider myself as quite unprejudiced in the matter.

(Signed) "W. Tobin, "Surgeon, Halifax Provisional Batt."

The following was definitely the reorganization I proposed, viz., a modified departmental system:

- 1. A Surgeon-General (at Ottawa).
- 2. Two Deputy Surgeons-General (one to act as statistical officer, the other as purveyor of medical stores, etc., the second a position which my friend, the Hon. Dr. Sullivan, filled so efficiently during the North-west rebellion).
- 3. A Principal Medical Officer for each military district, who should take medical charge of that district and have complete control of its medical equipment.
- 4. A sufficient staff of surgeons-major and surgeons for each district, so many per head of the active militia.

It was recommended that the present regimental medical officers should be permitted to retain their positions and continue to wear the uniform of their respective corps, but newly appointed officers should be gazetted to the department and not be permanently attached to any corps.

All medical officers should be under the orders of the P.M.O. for the district. The P.M.O. should correspond directly with the Surgeon-General.

The Surgeon-General to be responsible to the officer commanding the militia in chief and to the Minister of Militia.

Such a militia medical department, subject to its own responsible medical officers, would prove more efficient and more economical than the present antiquated and cumbersome regimental system, which has been abandoned in the British service since 1872, as I had mentioned in my letter to the press.

In this scheme for reorganization, I did not enter—nor do I propose to do so now—into the details of the duties of each medical officer. Those duties are clearly defined in the official regulations of the Army Medical Department. This is merely the skeleton of a scheme, the details of which may be worked out later on; and, should the exigencies of the service permit and no political complications hamper, I have hopes of seeing some such scheme eventually adopted—whether at my suggestion or another's, whether it be my plan or another's, is immaterial. A reorganization of the medical service is urgently needed, and this, apart from personal or political considerations, is what we, as medical men, should aim at.