

APPENDIX No. 2

There are quite a number of these boards that have many younger men on them who have not had that experience and they have to determine the expectancy or chance in those cases very largely from text-books or the table of disability.

Q. Would it not be better if the man with large experience was an officer that had returned from the front who had had experience at the front?—A. The experience that is needed is along two lines, one is the experience in the class of cases in which the Board is dealing, and the second is the experience of the ultimate outcome in many cases of chest trouble, heart trouble and kidney trouble; in the latter case the man who has experience of some years in clinical practice is the best man. In the case of wounds and injuries it is better to have men who have experience in dealing with that class of cases, and who has seen these in service.

By Mr. Power:

Q. Would it not be advisable to allow the man to go before his own private medical practitioner? Would that doctor not be better qualified to speak as to the man's disability?—A. No, I do not think that would be better—I am simply speaking for myself.

Q. Why not?—A. You see the man's medical adviser ordinarily is the medical adviser in the hospital, and the man has read over to him that statement which shows that the medical man finds so-and-so, describing his condition, and the man is asked if he has anything to add to that, and if he has, he has the opportunity of having it added.

Q. The objection to that in practice, I think, is that the man himself cannot exactly express his own condition; a great number of men cannot put their condition in such form that it will be readable?—A. This is put down by the medical officer in charge of the examination, and it is read to the man, and if he wishes to complain of so-and-so in addition to that it is put down too.

Q. Supposing that man was allowed to go out to the city or town, wherever he lived, and choose some medical man who would represent him at the board, just as, if you were pleading a case, you would choose a lawyer; he would choose some man who would represent him at the board, and who had made a special examination of him previously and be able to lay the matter before the board in medical terms?—A. I do not see what advantage that would be; it would complicate matters very materially to bring in a man from outside.

Q. Where would the complication come in? There would be more or less of a row, of course—A. No, I do not suggest that at all, but you would have to have a board sitting when the other doctor could come in and sit, you would have to make arrangements and all that sort of thing.

Q. That would be comparatively easy because the medical board could say to the pensioner that he should turn up at such a date, and he would turn up at the time fixed with his doctor.—A. It is a different thing if the man is discharged from the army. That matter might in an individual case be brought up in this form if he is not satisfied with the finding and might be considered then, but as long as he is in the army, I cannot see why he should bring in a man from outside, when the man's condition is read over to him, and he is asked if he is or if he is not satisfied and if he is not satisfied, he has the right to add himself the particulars as to which he is not satisfied.

By Mr. Nesbitt:

Q. That brings up another point that has been suggested that when men are required to state their condition to their officers, it would be better if their officers were in mufti than in uniform so that the private would not be so much frightened of these officers. Do you think there is anything in that?—A. I do not think so. We have never had a case of that character where the man was afraid to state his case to the medical officer. In my experience, the medical officer has been quite as sympathetic to the men under his care as is the doctor in civilian practice. The medical officer who

[Dr. W. T. Connell.]