

from us regarding this point. He says: "In any circumstances twelve years service as Surgeon will ensure promotion to Surgeon Major (of which three must be passed on foreign service)." In reading Dr. Muir's reply it must be borne in mind that twelve years' service as Surgeon really means simply twelve years' service as a Medical officer, for the position of Assistant Surgeon does not now exist in the regular service. On entering they are now styled Surgeons, and they receive their relative rank from length of service. What is to hinder the Militia of Canada following the same rule? Active service of course cannot be insisted upon, because the country has it not to offer, but they can give the promotion within the same or nearly the same period of service. Surgeon Major Coffee, who for distinguished service in the Zulu war was lately decorated by Her Majesty with the Companionship of the Bath, entered the army in 1863, sixteen years ago, yet for the last four he has been a Surgeon Major. As a contrast to this, we know of Medical officers in the Canadian Militia who began their medical services in 1860, and who, getting their promotion to Surgeon in 1866, have, under the order of June 11, 1879, to serve till 1886 before they are entitled to their rank of Surgeon Major, making a period of twenty-six years. And this is the best side of the question, because, unless they get their promotion to Surgeons before ten years' service as Assistant Surgeons, they will have to serve thirty full years before the rank can be obtained. The entire Medical Staff are unanimous in favor of rescinding this order. We, therefore, ask the Militia Department to act at once in the matter. They have perhaps unwittingly been led into a most grievous mistake, and not a moment should be lost in rectifying it. At the same time we would suggest that the additional pay which the rank carries with it in the regular service should be granted. It is a comparatively small matter to the Department, but if insisted upon will still constitute a grievance, concerning which the Medical officers will still have reason most justly to complain.

#### PERSONAL.

Dr. Neilson "B" Battery, Quebec, is on two months' leave. He is visiting Cuba and the Southern States. Dr. Colin C. Sewell performs duty for him during his absence.

#### LEGAL LIABILITIES OF HOSPITALS AND OF MEDICAL MEN.

The New York *Medical Record* of Nov. 19th, 1879, says: "A recent decision by the Supreme Court of Rhode Island will have considerable interest to the medical profession, and especially to those members of it who are connected with charity hospitals. It appears that a man in Providence, R. I., while working in a lumberyard, had two of his fingers cut off by a circular saw. He was taken to the Rhode Island Hospital, and there put under the care of interne. Ether was administered, and attempts were made to stop the bleeding. This could only be done, however, by the application of the tourniquet, and that instrument was kept on for seventeen hours. The result was, that eventually the arm had to be amputated at the shoulder-joint. When the patient recovered he sued the hospital for damages on account of unskilful treatment, and because the interne did not summon the visiting surgeon in accordance with the hospital rules.

In the Court the judge directed the jury to give a verdict for the defendant, on the ground that an institution supported as this was, by public charity, should not be made liable for negligence or unskilful treatment. The knowledge that there was such a liability might deter the benevolent from giving money to such institutions. The case was appealed, however, and this judgment reversed.

In his decision the judge stated that hospital corporations should be considered liable for failure to exercise reasonable care in selecting skilful, competent men as internes, and that they were also liable for negligence on the part of the internes in carrying out the proper rules of the institutions, such as sending for the visiting surgeon in cases of emergency.

#### HYDRATE OF CHLORAL.

Dr. H. H. Kane, of New York City, specially requests members of the profession with any experience whatever in the use of the Hydrate of Chloral to answer the following questions, and give any information they may possess with reference to the literature of the subject:

1. What is your usual commencing dose?
2. What is the largest amount you have administered at one dose, and the largest amount in twenty-four hours?