

retired after 65 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 the formation of a properly constructed reserve list. This reserve list would constitute a *corps d'elite* of retired medical officers. It would in time of peace cost the country nothing—a very important consideration—but would afford a graceful recognition on the part of government of previous good service, and, in emergency, its members would form part of a reorganized medical department, ready to take their share of duty at the base, in the field, or preferably in military hospitals.

I had at the same time much pleasure in informing the meeting that of late years improvements had been made in the regimental ambulance system in Halifax. Select classes had 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. But in this work there has been a sad falling off of late.

As regards the founding of chairs of military surgery suggested in Dr. Farrell's paper, 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 been established and was held 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 done or suggested in the way of reorganization of the militia medical department. In fact, already, in stations where permanent militia corps are established, the medical service is worked rather on a departmental than a regimental basis. To attempt a complete change, however, may be considered premature, as it would certainly be unpopular at present. We know the heart-burnings that ensued on a similar change being decreed in Her Majesty's service, but there can be no doubt nevertheless that however socially agreeable to individual officers, the regimental system in service has always proved and always will prove an utter failure. It stands condemned and must go, if our branch of the service is ever to be made effective.

The idea of forming a proper reserve list meets with more general and official approval. I have been asked to elaborate a plan and furnish details, but at present I consider a modification of our defective ambulance system and the formation of a bearer company (at least in Halifax, which is exceptionally situated) of more pressing importance. This was also the view taken by the general meeting in Halifax, and the committee appointed to deal with the whole subject. The following resolution was the outcome of that meeting:

"That it is desirable that militia medical officers should receive such instruction in military surgery, ambulance drill, and the routine of military medical administration generally, as will enable them to discharge satisfactorily their duties in the field, in camp and in military hospitals.

"It is desirable that bearer companies should be formed wherever possible in localities where several regiments are brigaded together; that the officers and men of these companies should receive instruction in stretcher drill, in ambulance work and in giving first aid to the wounded; that each bearer company should be provided with a proper supply

of medicines and surgical appliances, and ambulance furniture, to enable officers and men to learn their duties practically and to prepare them to carry them out in emergency."

This resolution was drawn up by the committee and so presented to the full meeting and discussed next day, and passed with a recommendation that it be forwarded to the department.

The part of the resolution treating of the formation of bearer companies in connection with our militia forces attracted particular attention, and elicited amongst others the following remarks in support of such organization, from Surgeon-Colonel O'Dyer, P.M.O., of Her Majesty's forces in Canada:

"It is considered desirable that bearer companies should be formed—

"(a) Because all Christian nations now employ them in war

"(b) Because a bearer company, properly trained, saves much suffering to the wounded, and in many instances by timely and skilled assistance prevents loss of life in the field by bleeding, with which the medical officers available would be unable, unassisted, to deal. In these days of quick-firing rifles and machine guns, the knowledge of a soldier that prompt and suitable measures are at hand for treating him when wounded, improves his morale as a fighting unit. Nothing more depresses an army than to be aware that assistance will not attend them when struck down."

The duties of a bearer company, I may tell you, consist in giving first aid to the wounded, and in removing them promptly and properly from the field of battle.

To perform these duties efficiently, they require a course of special instruction in such elementary anatomy and surgery as will enable them to arrest hemorrhage, apply splints to fractured limbs, &c, and a course of structure drill to teach them how to handle the wounded without aggravating their injuries, and remove them carefully and speedily from the field. No militia or volunteer brigade is now considered effective in Great Britain without having attached to it such a bearer company. Its formation need involve no loss of strength to the corps it is formed from; the men may remain attached to their respective regiments. In any case in time of war or of mobilization, a similar number of men for similar duties (vide Queen's regulations) would be called for from each regiment in the field, with this important difference, that the men then handed over to the medical officers as bearers would be unskilled, untrained, and perhaps unreliable, whereas should the bearer company system be adopted, the medical officers would have under their control a body of trained men, confident and experienced to give every assistance to the injured and remove them speedily from the scene of action.

The men of the bearer company should be selected preferably from those who are already proficient in their ordinary drill, and when possible from those who have already gone through a course of instruction in first aid to the injured, as some of our militia in Halifax have done. They would continue for purposes of discipline to remain attached to their respective regiments, and continue to wear its uniform, but would be liable to be detached when doing duty with the bearer company and would parade under their own medical officer. The men of the bearer company, when formed, should receive some distinctive badge, such as the Geneva cross, as might be determined by the dominion government.

In addition to the professional instruction in first aid to the wounded which

might always be given by their own regimental medical officer, they would require a course of stretcher drill under a competent instructor. In Halifax, should sanction be given to form such a bearer company, or half a company, which will be sufficient for local purposes, we propose applying to the general officer commanding in Canada to appoint such an instructor from the army medical hospital corps. This instructor will receive adequate recompense, the expense to be borne out of local regimental funds. His services would only be required long enough to teach the medical officer, non-commissioned officers and men, their drill. Afterwards the medical officers so taught would be able to teach the stretcher drill themselves with the aid of the regulation text book, "The Manual for the Medical Staff Corps," a copy of which should be in the possession of every medical officer.

In Halifax we are exceptionally well placed, having a competent staff of the army hospital corps to copy. In addition, we are fortunate in having the principal medical officer of the imperial forces in Canada, Surg.-Col. O'Dwyer, with us heart and hand, ever ready to give us the benefit of his experience in military medical matters. Surg.-Col. O'Dwyer has organized similar bearer companies in connection with the militia and volunteer forces in Great Britain, and commanded a bearer company during the Egyptian campaign. I am delighted to see him present here to-day, and hope that he will be pleased to favor us with some of his experiences. I would like particularly to hear from him what he has to say as regards the organization of our medical service on a departmental basis, also what his ideas are as regards the formation of a reserve corps of medical officers, and particularly what he thinks is needed to complete our defective ambulance organization. I already know that both he and his predecessor, Surg.-Col. Archer, have warmly recommended the formation of a bearer company in Halifax. The plan for the formation of a half bearer company in Halifax has gone through the proper channel to Ottawa, and as it involves no expense to the government and is urgently required, and in the words of the local deputy adjutant general, is considered "a practical scheme for a very necessary purpose," it is to be hoped it may meet with favorable consideration and may prove to be the initiatory step in the direction of a complete and effective organization such as I have outlined of the militia medical service.

I wish only to add that in promoting my views on this subject, I have always received the kindest assistance and encouragement from my personal friend, Mr. Malachi Daly, now lieutenant-governor of Nova Scotia, and from Mr. Thos. Kenny, M.P., who takes great interest in the subject, and that I have been received with the greatest courtesy by the ministers of militia and defense, Sir Adolphe Caron, Hon. Mr. Patterson, and the present minister, Hon. Mr. Dickey, whom I have approached on the subject.

Detail of the medical personnel of a half-bearer company:

Two medical officers.

One staff sergeant.

Three sergeants.

Three corporals.

Twenty-three privates.

(Including officer servants and a batman for the senior non-commissioned officer.)

Two medical officers are available from the 63rd and 66th battalions, which have each two medical officers, a surgeon and