

(No. 94)



1868.

T A S M A N I A.

DAVID ANDREWS.

REPORT OF THE SELECT COMMITTEE TO ENQUIRE INTO
HIS CASE.

Brought up by Mr. Balfe, and ordered by the House to be printed, September 11,
1868.



SELECT COMMITTEE appointed on the 14th August, 1868, to consider and report upon the Papers and Documents connected with the case of DAVID ANDREWS.

MEMBERS OF THE COMMITTEE.

MR. BALFE.	MR. J. R. SCOTT.
MR. ROOKE.	MR. BUTLER.
MR. DODERY.	MR. SWAN.
MR. GLEADOW.	

DAYS OF MEETING.

August 19, 27, and 28. September 3, 8, 10, and 11.

WITNESSES EXAMINED.

David Andrews.	Dr. Crowther.
John Andrews.	Dr. Stokell.
Dr. Turnley.	Dr. Brooke.

WITNESSES' EXPENSES.

	£	s.	d.
J. Andrews and Son.....	6	0	0
Dr. Turnley.....	8	2	0
Dr. Brooke	3	3	0
Dr. Stokell	1	1	0
Dr. Crowther.....	1	1	0
	£19	7	0

R E P O R T.

Your Committee have the honor to report to your Honorable House that they have investigated the Case remitted to their consideration; and beg to submit the Evidence which they have taken from the several Witnesses whom they have examined, as, in their opinion, sufficiently carrying out the instructions given to them by your Honorable House.

J. D. BALFE, *Chairman.*

Committee Room, 11th September, 1868.

MINUTES OF COMMITTEE.

WEDNESDAY, 19TH AUGUST, 1868.

The Committee met at 11 o'clock.

Present—Mr. Balfe, Mr. Rooke, Mr. Gleadow, Mr. Scott, Mr. Dodery, Mr. Butler.

Mr. Balfe was elected Chairman, and took the Chair.

The Clerk was instructed to summon as Witnesses John Andrews and David Andrews, and to request Dr. Turnley to send to the Committee the Medical Register, and to inform the Committee upon what day he took charge of the case from Dr. Miller.

The Committee adjourned to Thursday, 27th instant.

THURSDAY, 27TH AUGUST, 1868.

The Committee met at 11 o'clock.

Present—Mr. Balfe, Mr. Gleadow, Mr. Swan, Mr. Dodery, Mr. Rooke, Mr. Butler.

The Chairman, Mr. Balfe, took the Chair.

The Evidence of John Andrews and David Andrews was taken.

The Committee adjourned to Friday next.

FRIDAY, 28TH AUGUST, 1868.

The Committee met at 11 o'clock.

Present—Mr. Balfe, Mr. Butler, Mr. Dodery, Mr. Rooke, Mr. Gleadow, Mr. Swan.

The Chairman, Mr. Balfe, took the Chair.

The Evidence of Dr. Turnley and Dr. Crowther was taken.

The Committee adjourned to Thursday at 11 o'clock.

THURSDAY, 3RD SEPTEMBER, 1868.

The Committee met at 11 o'clock.

Present—Mr. Balfe, Mr. Gleadow, Mr. Rooke.

The Chairman, Mr. Balfe, took the Chair.

Dr. Stokell's Evidence was taken.

Resolved that Dr. Stokell's further examination be postponed until Dr. Butler is present.

Dr. Brooke was in attendance.

The Clerk was instructed to summon Dr. Brooke for the next meeting.

TUESDAY, 8TH SEPTEMBER, 1868.

The Committee met at 11 o'clock.

Present—Mr. Balfe, Mr. Rooke, Mr. Gleadow.

The Chairman, Mr. Balfe, took the Chair.

Dr. Brooke was called and examined.

The Committee adjourned *sine die*.

THURSDAY, 10TH SEPTEMBER, 1868.

Present—Mr. Balfe, Mr. Gleadow. No quorum.

FRIDAY, 11TH SEPTEMBER, 1868.

The Committee met at 12 o'clock.

Present—Mr. Balfe, Mr. Butler, Mr. Gleadow, Mr. J. R. Scott.

The Chairman, Mr. Balfe, took the Chair.

The Evidence of Dr. Brooke was taken.

The Committee rose at 1 P.M.

LAUNCESTON GENERAL HOSPITAL.

History of Case of DAVID ANDREWS, aged 17, admitted August 4, 1867. (Copied from Medical Register.)

<i>Date.</i>	<i>Fracture of Femur (right side).</i>	<i>Treatment.</i>	<i>Class of Diet.</i>	<i>Extra Allowance (daily).</i>
Aug. 4.	This lad met with the accident at Scott's New Country while cutting down a tree. The tree fell in an unexpected direction and caused the above injury. There is also a very extensive wound in the groin on same side, about ten inches long. This was caused by the edge of an axe against which he fell. Seven of his fellow-workers brought him into town, a distance of forty miles, in a slung hammock. The journey was over very rough country, and occupied two days. The accident occurred at 11 A.M. on Friday, and he did not reach here till 7 P.M. to-day (Sunday). Owing to the careful transit, and the constant application of cold water, the mischief caused by the journey was much less than might have been expected.	R. Liq. Opii. Sed. M. xl. Sp. Æth. S. Co. ʒj. Vini Rubri ʒij. s. s.	Spoon.	Milk, 1 pint; Beef Tea, do.; Bread, ʒij.; Porter, half a bottle.
Aug. 5.	The limb was put up in long splint to-day, counter-extension from above being obtained by a band of jean fitted by laceholes to the opposite thigh (its upper third), as the large wound precluded the use of the perineal strap. The fracture is in middle third of femur.	Repetatur haustum, & Pil. Calomelan. & Colocy. No. ij nocte Pulv. Seidlitz. i. mane. Limb set as described.		
6.	Passed an excellent night, and seems easy.	Rep. Pil. & Pulv. ut heri		(Aug. 7.)
9.	Keeps up well, and does not complain of any pain.	Rep. Haust. ut antea.		Increase porter to 1 bottle per diem.
16.	Still the same.			
28.	Altered and tightened bandages; leg of good length, position good.	Tightened bandages.	(Aug. 29) Full.	
Sept. 7.	Is easy; leg in good position.			
12.	The wound in groin has nearly healed.			
24.	Removed splint, and put limb up in starch bandage; length and position good.	Starch bandages put on.		
30.	Is up during the day.			
Oct. 3.	The wound has opened a little, and discharges slightly. To go back to bed for a few days.			
18.	Wound nearly healed, to be touched daily with Cupri Sulph.	App. vulneri Cupri Sulphatem.		
28.	The starch bandages being loose were to-day removed for renewal. It was found that <i>no union</i> had taken place, and the ends of the bone were not in apposition. Long splint resumed; but in all probability an operation will be necessary to give the bone a chance of union.	Long splint resumed.		
Nov. 30.	The limb is still kept in the long splint. The bone is in good line, and there appears to be some attempt at union.			
Dec. 8.	There is to-day an erysipelatous blush on the leg below the knee.	Collodion. ʒj. Ol. Ricini, ʒij.; apply to erysipelatous surface.		
11.	Blush much fainter.			
16.	Erysipelatous blush has disappeared. Union has probably begun. The ends of the bone are in good line.	Removed bandages and splint, as the cicatrix is giving way. Extension made with a 7lb. weight attached to ankle by a hank of worsted sliding over pulley at end of bed. Counter-extension made by strap attached to upper part of bed.		
Mar. 9.	No union has taken place, and an operation will be necessary. He wishes to be near his parents who live at the Huon, and to be visited in hospital by them. He has therefore determined on getting admission into Hospital at Hobart Town to be operated on. Discharged.	(Jan. 7, 1868.) Thigh splints put on firmly. To be up.		

21st April, 1868.

A true Copy,

GEORGE TURNLEY.

On reference by the Select Committee to the original MS. Journal, which Dr. Turnley was summoned to produce, the following were found to be the really correct entries in the Journal :—

<i>Date.</i>	<i>Fracture of Femur (right side).</i>	<i>Treatment.</i>	<i>Class of Diet.</i>	<i>Extra Allowance (daily).</i>
Aug. 4.	This lad met with this accident at Scott's New country whilst cutting down a tree. The tree fell in an unexpected direction and caused the above injury. There is also a very extensive wound in the groin, penetrating deeply into the fibres of sartorius, &c. on same side, about ten inches long, caused by edge of an axe blade against which he fell. Seven of his fellow-workers brought him into town, a distance of forty miles, in a slung hammock. The journey was over very rough country, and occupied two days. The accident occurred at 11 A.M. on Friday, and he did not reach here till 7 P.M. on Sunday. Owing to the careful transit, and constant application of cold water, the mischief caused by the journey is much less than might be expected.	R. Liq. Opii. Sed. M. x4. Sp. Æth. S. Co. 3j. Vini Rutri 3ij. s. s.	Spoon.	Bread, Milk, Beef-tea, $\frac{1}{2}$ bottle Porter.
5.	The leg was put up to day; counter-extension from above being obtained by a band of jean fitted by laceholes to the opposite thigh (in its upper third), as the large wound in the groin precluded the use of the perineal band. The fracture is in the middle third of the thigh.	Repetatur haustum, & Pil. Calomelan. & Colocy. No. ij. nocte Pulv. Seidlitz i. mane sumend. Bone set as described.		
6.	Had an excellent night, and seems very easy.	Pil. Col. et. Col. iij. n. i.		Full diet; 1 bottle Porter.
9.	Complains of nothing; suffering slight pains.	Pulv. Seid. mane sd.		
11.	Keeps up well; complains of no pain.	R. Liq. Opii Sed. 3ij.		
16.	Still the same.	Sp. Æth. Sulp. Co. 3j.		
21.	Is easy; bandages not removed since first put on; wound in groin healing well.	Vin. Rub. 3ij.		
28.	Altered and tightened bandages; leg of good length, position good.		(Aug. 29) Full.	
Sept. 7.	Is easy; leg in good position.			
12.	The wound in groin has nearly healed.			
24.	Removed old bandages, and put limb up in starch ditto; length and position good.	Leg put in starch bandages.		
30.	Is up through the day.			
Oct. 3.	The wound has opened a little, and discharges slightly. To go back to bed for a few days.			
18.	Wound nearly healed, to be touched daily with Cupri Sulph.			
28.	The starch bandages being loose were to-day removed for renewal. It was found that <i>no union</i> has taken place, and the ends of the fracture were not in apposition. Long splint resumed; but in all probability an operation will be necessary to give the bone a chance of union.	Long splint resumed with perineal strap.		
Nov. 30.	The limb is still kept in long splint. The bone is in good line, and there appears to be some attempt at union.			
Dec. 8.	There is to-day an erysipelatous blush on the leg below the knee.	Collodion. 3j. Ol. Ricini, 3ij. : apply to erysipe- latous blush.		
11.	Blush much fainter and dying out.			
16.	Erysipelatous blush has disappeared. Union has probably begun. The ends of bone are in good line.	Removed bandage and splint, as the cicatrix is giving way. Extension made with 7lb. weight attached to ankle by hank of worsted sliding over pulley at end of bed, on strap being at- tached to upper part of bed on counter exten- sion.		
	No union has taken place, and an operation will be necessary.			
	He wishes to be near his parents who live at the Huon, and to be visited in hospital by them, so has determined on getting admis- sion into Hospital at Hobart Town to be operated on. Discharged.	(Jan. 7, 1868.) Thigh splints put on firmly. Patient to be up.		

Compared by me at the request of the Chairman,

HUGH M. HULL.

EVIDENCE.

THURSDAY, 27TH AUGUST, 1868.

DAVID ANDREWS *called in.*

I WAS admitted into the General Hospital on the 4th of August last year, with a broken thigh and a wound. The next day my limb was put into a long splint. I can't say how long I was in when the bandages were altered; it was about three weeks when the bandages were tightened by Mr. M'Queen. The long splint was not removed from my thigh for twelve weeks. It was certainly between eleven and twelve weeks when it was removed by Dr. Miller, and he applied starch bandages. I asked him if he thought my leg was united, and he said "Yes, it was all right." Dr. Turnley was not at the Hospital when the splint was removed. I got up one day after the splint was removed; the cut opened a little, and Dr. Miller told me I should have to go to bed for a few days again. I was up with Dr. Miller's consent: he ordered me to get up. I was only one day up before I was ordered to go to bed again. I did not use the leg when up. I had it in a sling round my neck. After I was ordered to bed, the next person who examined my leg was Dr. Turnley. It was more than a month after I was ordered to bed again that my leg was examined by Dr. Turnley. I did not know that no union had taken place until Dr. Turnley examined it and told me. The starch bandages were on when Dr. Turnley examined it. He took them off, and put on the long splints again. This was the first time Dr. Turnley examined it. From the time I was ordered to bed until Dr. Turnley examined it my broken leg was not examined by any medical man; the cut was examined. The splints were removed while Dr. Miller was there. I still say it was twelve weeks after I first went into the Hospital until they were first removed. Dr. Turnley told me I would have to undergo an operation, which I understood to mean the cutting off of the limb, but he did not tell me so, but said I should undergo an operation. No one in the Hospital, either medical men or attendants, ever told me I should have to lose my leg. I was told in the Hospital that I was badly treated by Dr. Miller. George Anderson, the wardsman, told me so. He told me Dr. Miller for the last month he was there neglected his duty, as he did not care as he was going away. My own opinion was that my leg was badly treated. Dr. Miller used to walk round the ward every morning and out again. He examined the cut in my groin every other day. I was cautioned against playing, larking, and throwing pillows in the ward. I was not in the habit of doing so, but a young man named Innocent used to sit beside my bed and poke me with his crutches. He told me afterwards it was not proper to do so. I could not sit up in the bed; I was prevented by a strap which went across my middle on to the splints. I never threw pillows. I am quite sure I did not disobey the advice and instructions I got by playing and larking. When Innocent advised me not to lark, Dr. Turnley was the Medical Officer in charge. I was removed to Hobart Town at my own request. I don't remember the date I left Launceston. It was on the 29th February I was admitted into the Hobart Town Hospital. When I was leaving the Launceston Hospital I had five splints on. When I was leaving the Launceston Hospital Mr. M'Queen came after me, when I was just outside the gate, and told me I was not to take the splints with me except you will return them again from Hobart Town. I told him it would be a great bother to return them, and that I would rather buy splints of my own and leave them. I sent to Mr. Spong for splints. Mr. Spong came next morning to the Court House Hotel, and put them on himself. Mr. Spong knew me at the Huon. He removed the splints that were put on at the Hospital. The splints were put on the morning I left for the journey by Tom Innocent: they were additional splints. Tom Innocent was a patient in the Hospital. After they were put on Dr. Turnley or any medical man did not examine them. Dr. Turnley told me if I waited until he had seen the out-door patients he would put the splints on. I waited until I saw him going up the hill home, and then I went to Innocent, who put them on. It was one day before I left for Hobart Town. I left the Hospital on Monday about 12 o'clock, and started on the coach on Thursday night. I stopped at the Court House Hotel until I went to the Coach Office. I went through by coach, and reached Hobart Town on Wednesday morning. I was admitted into the Hospital on Saturday. I was put in Dr. Crowther's ward. He examined me the next day, Sunday. He said he thought I would have to undergo an operation. Dr. Crowther saw me frequently there. He ordered the splints to be taken off on the first examination, and ordered two sand bags to be placed one on each side of the leg. Dr. Crowther told me the leg would have to come off, but not the first day; he said he would have to consult upon it. Dr. Crowther told me he thought he would operate by sawing a piece off each end of the bones, and putting it in splints again. He told me my leg would have to come off the Sunday before it was taken off. I was about a month in the Hospital when my leg was taken off. I was placed under the influence of chloroform. I did not hear the Doctors say it was a case of neglect. I did not hear anything that was said. My father was present before I was put under the influence of chloroform. From the arrival of Dr. Turnley in Launceston I had nothing to complain of; he tried all he could to save my leg. I am quite sure of the date I entered the Hospital in Hobart Town: I am sure because the date was on a card over my head. When I was told in Launceston an operation was necessary I was unwilling it should be performed there, I was so far from my friends.

By Mr. Swan.—No one was present when Anderson told me I was being neglected by Dr. Miller. When Innocent remonstrated with me for larking I told him it was his fault, as he used to come to the side of my bed and poke me about. I did not deny to him that I had been larking. I spent the time I was in Hobart Town at a friend's house. I was not drinking. The leg was not painful at all before it was cut off: I could twist and screw it about in any way. I saw Mr. John Hay and Patrick Henry in the Launceston Hospital; they came in to see me about a week before Christmas.

By Mr. Rooke.—When I say my leg was not examined for a month after the long splint was put on, I mean the Doctor had not examined the break. He could ascertain the position of it without examining the break. I never threw a pillow at Tom Innocent or any other patient.

By Mr. Dodery.—Anderson and I were talking about my leg, and Anderson said he had thought for some time it was not right, but did not like to tell me so; and that he thought Dr. Miller was neglecting his duty, as he was going away. Innocent had a diseased bone in the knee.

By Mr. Rooke.—I told my father that Dr. Miller only once examined my leg until Dr. Turnley arrived.

By Mr. Gleadow.—The bandages were tightened once by Mr. M'Queen, that was the only time,

David Andrews then withdrew.

JOHN ANDREWS *called in.*

I am the father of David Andrews. I made a complaint to the Colonial Secretary of the treatment my son received in the Hospital at Launceston. I got a friend to write the letter for me, I hold myself responsible for the statements in it. I first heard that my son's leg would have to be taken off from Mr. Spong, and afterwards by a letter from Dr. Turnley to you (the Chairman). These letters from Mr. Spong and Dr. Turnley were in reply to letters written by Mr. Balfe on my behalf. My son was admitted into the Hospital here on 29th February. I was in the ward when the operation was performed. I was behind a screen, over which I could have seen if I had stood up. When Dr. Crowther opened the leg before it was cut off, I heard him say to Dr. Brooke, "You see, Brooke, this is neglect." I did not hear Dr. Brooke make a remark. There were present Drs. Bright, Crowther, Brooke, and Stokell, and several young students. The other medical men must have heard the remark of Dr. Crowther. That was my reason for writing to the Colonial Secretary. I received a letter from my son when he was in the Launceston Hospital, saying that his leg had not joined, and he blamed Dr. Miller for it. I was told by my son that this letter was written by George Anderson, the wardsman. Mr. Chesterman, the contractor, told me he had seen my son in Launceston, and that he was getting all right, that he was able to lift up his leg. Mr. Hay told me my son would never do any good in Launceston, and I had better get him to Hobart Town. He meant he would be nearer his friends, and we could go and see him. I was not under the impression when he came to Hobart Town that his leg would have to be taken off. I was not told it would until three days before the operation. I then received a letter informing me that the Doctors had consulted, and the leg must be taken off. Dr. Crowther told me before it was probable it would have to be cut off. He said it was gone too far, and that if he had had the case at first it would have been all right. I wrote the letter to the Colonial Secretary on what Dr. Crowther said. I have not seen Dr. Crowther since the leg was cut off. The conversation with Dr. Crowther was in the ward, on the Sunday before the leg was taken off. You (the Chairman) wrote to Dr. Turnley at my request.

John Andrews withdrew.

DAVID ANDREWS *recalled.*

The letters were written for me by different persons in the Launceston Hospital. George Anderson wrote one. I can't tell which it is of those produced. It was one in which I complained of the treatment.

By Mr. Rooke.—I told him what to write. He said Dr. Miller had neglected me.

David Andrews withdrew.

FRIDAY, 28TH AUGUST, 1868.

GEORGE TURNLEY, *Esq., called in.*

By Dr. Butler.—I am Surgeon-Superintendent of the Launceston General Hospital. I took charge on 8th October last. I remember the boy David Andrews. He came under my charge on that day. I found him in bed, with a starch bandage on his thigh, and got a history of his case from Dr. Miller. I saw no reason at that time to alter the treatment or diet. I was not led to believe that no union had taken place—I supposed union had taken place. About three weeks afterwards I removed the starch bandages, as they were getting loose. When I found union had not taken place I put the leg up again in the long splint. I fancied at one time union was taking place. After some considerable time I determined there was no probability of an union without an operation, and I determined that an operation was necessary. I never thought of amputation. I am aware of the character of the treatment the boy received on admission. In a fracture of this character it was correct treatment to put the limb in a long splint. If the limb was in a good position and proper length, it was correct not to remove the splints. In my practice

I sometimes leave a fracture up for five or six weeks, until union has taken place. I could judge the nature of the flesh wound. The character of that wound presented an obstacle to the good adjustment of a long splint. The wound was a very extensive one; it healed by granulation. There was profuse suppuration; and a wound of that kind in the vicinity of a fracture would most probably interfere with the process of reparation. The means taken to adapt the splint to the thigh in this particular case were such as to obviate the disadvantages arising from the wound. I am satisfied the care and treatment given to this case were correct.

By the Chairman.—Dr. Miller never told me before he left the Hospital that union had not taken place. If he had told me, it would have been my duty to take off the bandages and examine it. When I saw the leg in starch bandages I thought firm union had taken place. I should have thought it incumbent upon me, if I thought or suspected union had not taken place, to inform my successor had I been in Dr. Miller's place at the time and examined the limb. I do not think union of any kind had taken place: the ends of the fracture were moveable. A medical man might be deceived as to firm union having taken place. I can give an instance:—A gentleman in Hobart Town sustained a fracture of the arm bone; when the splints were removed I examined the arm, and considered firm union had taken place; he then went to England, where it was found that there was no union then; there must have been union at the time of the examination; I attribute it to his carelessness. I attribute Andrews's case to the same cause, from what I heard of his conduct. After I took charge I was informed that Andrews' carelessness was such that he allowed another boy and a young man, to tumble over his bed. If a wardsman were always present he would prevent it, but the wardsman is not always present. I was told of this "larking" by a man who was in the same ward. He told me after this enquiry commenced—about a week ago. I only see this man occasionally. I operated upon him some time ago for cancer, and he comes to see me occasionally. He had heard of this enquiry and made the statement to me. It would be the duty of the wardsman to prevent that if he had been present. The wardsman leaves the ward for ten minutes or so to go for anything required, such as arrowroot, beef tea, or for wood for the fire; but he is in constant attendance. If George Anderson were a good wardsman, and saw the larking, it would be his duty to report it to me. I find the wardsmen do not generally do so. I knew nothing of it until I saw the affidavit of Innocent. If it had been reported to me I would have spoken to Andrews about it, and also to the wardsman, whose duty it would have been to prevent it. I would have been dependent upon the wardsman to prevent it. Patients suffering as Andrews was are bound in the long splint. When Andrews had the long splint on he could not move about or sit up, but when the starch bandage was put on he could sit up, or, if he had chosen, he could have got out of bed. Innocent is still a patient in the Hospital. The book produced is the Medical Register. It is the duty of the Dispenser, Archibald John M'Queen, to keep that book. He goes round with me with a waste book, in which he enters any remarks I make, and enters them in the book produced in the evening. I don't remember what date Andrews left the Hospital. In my declaration I took the dates from the Register. The date 9th March must be incorrect if Andrews entered the Hobart Town Hospital on 29th February. I cannot understand how the error occurred.

By Mr. Gleadow.—It is quite possible that a patient with a case of fracture might be there from 16th December to 9th March and no entry made in the Register, as in many cases there is nothing to record. The case has been altered in the Register, and by Mr. M'Queen. I believe that Mr. M'Queen being called upon to make a copy of the case made alterations, additions, and omissions, but from what I know of Mr. M'Queen I believe it was done for the purpose of making the case read better, and that he had no intention of deceiving the Colonial Secretary.

By Dr. Butler.—I have since compared the printed return to which I certified with the Register. In the discrepancies between them there is no alteration which materially affects the case. The note at the bottom was not inserted by me or by my authority. It was inserted by Mr. M'Queen, and was his opinion. Mr. M'Queen is Dispenser, and is a medical student. I believe if the boy Andrews had remained at the Launceston Hospital, he would have been walking about on his original legs this day.

Dr. Turnley then withdrew.

WILLIAM LODWYK CROWTHER *called in.*

By the Chairman.—I am an honorary Medical Officer at the Hobart Town General Hospital. The boy Andrews was admitted a patient on the 29th February, and was under my care in Ward No. 3. It was a case of non-united fracture of the right femur at its middle third. He also had the cicatrix of a wound five or six inches in length in the groin, and was a person of fat but feeble constitution,—what we term strumous. I knew nothing of the history of his case beyond that he said he had been six or seven months in the Launceston Hospital. As soon as he got accustomed to hospital diet, and the change of position, a consultation was held as to what would be the best plan to adopt for his relief. There appeared to have been no attempt made on the part of nature to unite the bone; and coupling that circumstance with his feeble constitutional power, and the little chance that arose from any other mode of treatment, it was decided to remove the limb, as giving him the best prospect of recovery. The limb was removed on 1st April, and he left on 29th May. I examined the limb the first day he was in bed, and no attempt at reparation had been made. There was not the slightest chance of a union of the bone when it was decided to amputate the limb. The processes adopted are these:—One, to cut down and saw off the ends of the fractured bones; and the other, to remove the ends of the bone in the same manner, and drill holes in the sawn surface, and insert bone pegs to cause irritation, which would tend to a formation of bone and union;

but after waiting for a sufficient length of time to enable me to judge, I was of opinion that his constitution was such that life would be endangered by such an operation. The line of action adopted—viz., amputation—was fully verified after the operation, for upon examination of the bones it was ascertained that nature had made but a very feeble attempt to repair the mischief—mere film of bone only covering the extremities. Such cases of non-union are occasional, not frequent. In this case I attribute the non-union to the non-adaptation of the broken ends in consequence of a large wound at the groin, the discharge from which would be a drain upon the constitution as long as it remained open; and secondly, because an open wound in that situation would prevent the adjustment of a strap by which the limb is extended and the bones kept in position; the best treatment of such fractures being the use of a long splint, extending from the armpit to the foot, to which the foot is bandaged,—extension and muscular quietude being obtained by the passage of a strap through the head of the splint under the armpit coming from behind in front of the groin, and when tightened extending the limb to its proper length, and retaining the bones in their proper position. The quietude of the limb can only be perfectly ensured by that process. The wound on the groin in Andrews's case must have interfered with this process, at least in the earlier part of the treatment. I do not know how long the wound was open. [Evidence of John Andrews read.] I did not make the remark to Dr. Brooke as stated by John Andrews. I did not know anything of the previous treatment of the case, and could not have made such a remark. The only remark I made was after the operation, when I said the appearance of the bone justified the course we adopted; viz., amputation. It was not possible to tell from the appearance of the bone whether the case had been neglected. I did not make the statement as to the prior treatment of the case as stated by John Andrews. He must have misunderstood what I said. It is not customary to make remarks of that nature,—it is contrary to professional etiquette.

By Dr. Butler.—If I were giving up charge of a ward to another medical man, and had such a case as Andrews's, and suspected that union had not taken place, I would have considered it necessary to make known my suspicions to my successor, provided the case was still under treatment. We had a consultation on the case of Andrews before amputation. There were all the honorary medical staff present, and all agreed upon the necessity for amputation. There was no difference of opinion on that point. [Last paragraph of Dr. Turnley's evidence read.] If, as Dr. Turnley states, the boy would have walked again had he remained in Hospital, it is to be regretted that he left that establishment without submitting to further treatment, and thereby testing the accuracy of an assertion made upon imperfect data. Dr. Turnley was not in as good a position to form an opinion as the medical men who were present at the amputation, for, after seeing the ends of the bone, all were agreed that any other operation would have endangered the boy's life.

Dr. Crowther then withdrew.

THURSDAY, 3RD SEPTEMBER, 1868.

DR. GEORGE STOKELL *called in.*

By the Chairman.—I am House Surgeon to the General Hospital, Hobart Town. I remember the case of the boy Andrews, and I was present at the operation when his leg was amputated. It would have been a great risk to try the union of the bone. We had a consultation prior to the operation. Dr. Bright, Dr. Crowther, and all the Honorary Medical Officers saw the case. There was no flesh wound near the fracture. It was in the groin, and it might have interfered with the union in this way, that the extension would not be so good. Having seen the wound and the nature of the fracture, I should have put it on an inclined plane at once. We should get extension that way. I have never seen a limb put up in the way marked in the Journal of the 5th August. The inclined plane is one of the oldest systems in use. You could not have used the perineal strap on account of the wound. In the way I propose you could not get the limb the same length as the other, but you might bring the bone together. In applying the jean to the other limb there is a large muscle which would be drawn inwards. The treatment in the Journal is ordinary treatment. I should not use it myself. From what I have seen in England the inclined plane should be used. A large flesh wound five inches in length would be made by cutting out the bone. The operation is not at all a successful one in England. I heard no observation by Dr. Crowther at the time which would imply that the case was neglected. All I heard the medical men remark was, that it was strange that a boy of his health and strength should not have the bone united. Dr. Bright said this the second day after the boy's admission. I heard no remark at the time of operation. Each Medical Officer keeps a Medical Register. I attend to no cases except to order medicines. Cases of any importance are entered into the Journal. Under ordinary circumstances a limb will unite in 40 days, but the bone would not be as strong as before for many months. It is customary to take it down and see how the limb was getting on. If I had charge of the case I certainly should have told my successor that I thought there was no union, and the medical man should examine the case for himself. I am not aware whether old Andrews was in the room while the operation was going on. He made no complaint to me of the treatment of his son.

By Mr. Rooke.—I was present at the operation. Dr. Crowther was the operator. I heard no remark.

Dr. Stokell withdrew.

TUESDAY, 8TH SEPTEMBER, 1868.

DR. BROOKE *called in.*

By the Chairman.—I am one of the Honorary Medical Officers of the General Hospital. I know the case of Andrews, and was present at the operation. Dr. Crowther operated. He made no remark in my hearing that the leg had been neglected. I do not recollect him making any observation. I should have recollected it if he had done so. I was in favour of another operation being performed,—one which would have been experimental, but it has been successfully done in France and at Home. After seeing the amputation, I should have preferred my operation.

By Mr. Gleadow.—Was there anything after the bone was cut down upon to alter your opinion as to trying the operation you mention? Nothing—my operation would have been experimental.

By Mr. Rooke.—If Dr. Crowther had said “You see, Brooke, it is a case of neglect,” you would have recollected it? I do not think he made it; I should have remembered it if he had made that statement so deliberately to me.

Dr. Brooke withdrew.

FRIDAY, 11TH SEPTEMBER, 1868.

THOMAS THORNILEY BROOKE *called in.*

[Printed Paper 45 placed in Dr. Brooke's hands.]

By Dr. Butler.—I have heard of the treatment the case received before the boy came to Hobart Town. I do not think the treatment the first day was correct. I don't think extension could be obtained from the opposite thigh: it is very unusual, and contrary to my experience. There is no necessity shown for other treatment to 3rd October. The person who made the note on 24th September must have thought the bone had united.

Q. Is it probable that the callus would be absorbed between the 24th September and 28th October?

No, unless the boy was a scorbutic subject, which he was not. In a case of fracture, if the position of the limb was good and the length the same as the other, I would examine the fracture before six weeks had elapsed. It would not be necessary to remove the bandages to do so.

By the Chairman.—In case of ununited fracture of the thigh bone he had no business to be up during the day. Supposing Dr. Miller had known no union had taken place when he handed the case over to Dr. Turnley, it was his duty to inform Dr. Turnley; and if Dr. Turnley had been so informed, he would neglect his duty if he had not examined the limb within three weeks. I attribute the non-union to want of apposition of the fragments. It was not set as I should have set it. Such cases of non-union are not common, but do happen sometimes from causes otherwise than from neglect, but are very rare. This case of Andrews's was not treated as I should have treated it. The conduct of Andrews, as described in the Paper 45, might prevent union by causing the disturbance of the position of the bones. I am familiar with Hospital practice. It would have been the duty of the warders and others to prevent such conduct.

Dr. Brooke then withdrew.