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Big Bell Hospital, 1941-1955 - Paper

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Ghost Town of Big Bell - Colleen O'Grady

*An hotel reared its lofty head
Beside a lilac.
No patrons now it could be said,
Not since way back.
The walls are dusty brown,
Once were white.
Inside curtains billow round,
Once were bright.
Pretty wallpaper covered in dirt
Peeling everywhere.
Drunken beds but no forms inert
Resting there.
Church with steeple rising high,
Pews in neat rows.
Long since pastor raised his cry
Of religious prose.
Bell no longer on its stand,
It tolls nearby
To call the boss and hired hands
Coodardy Station nigh.
House stumps standing neatly
Along the street.
Give mute testimony
Of houses once neat.*

*Pool is dry, hospital empty,
Creeper bloom.
Mine paraphernalia and shanty
Like the tomb.
Once a thriving community
But gold gone.
Now a dusty, dirty entity
A decade on.*

1. Abstract

The ruins of the Big Bell Hospital slumber today under the intense sun of the remote West Australian outback. Between 1942 and 1955 it served a remarkably busy goldmine, but like the hotels and shops it lived and died with the mine. Details of the medical practitioners who staffed the hospital and their patients are presented. Clinical details are derived mainly from local newspapers, not peer reviewed journals, but the most detailed source available.

2. Introduction

Big Bell is now a deserted ghost town in the Mid-West region of the remote outback of Western Australia. It is seven hundred and thirty-two kilometres north-east of Perth, four hundred and fifty-one kilometres inland from Geraldton and thirty kilometres from the extant town of Cue. Once the sole owners of the land were the Yamatji people for perhaps sixty thousand years since the Australian land mass was first colonised by the Australian Indigenous people.

Like most Australian ghost towns, it was once a thriving opulent mining town. Henry Paton discovered gold in the area in 1904 and a mine was rapidly developed. Mining persisted under different

ownership for thirty years, but major development of the mine and town did not occur until 1935 when Premier Gold Mining Company assumed the title.

The historical Big Bell mine produced 730,000 ounces of gold from 1904 to 1955 and a total of 2.6 million ounces of gold during its lifetime, worth about US\$ 4,500 million today.

The township was established in 1936 with subdivision into one hundred and sixteen blocks for a population rising rapidly to eight hundred and thirty-five people (Figure 1).

Facilities by 1936 included hotels, shops, a post office and the subject of this paper, the proposed Big Bell Hospital. A railway

and first-class road linked the towns of Big Belle and Cue. At the newly-erected school there was an attendance of forty children, a football ground and cycle track had been built, and a swimming pool, landing ground for aeroplanes and a volunteer fire brigade were under consideration.

The mine closed in 1955 leading to the inevitable demise of yet another Australian mining town. The mine was reopened in 1980 and has been owned by four different companies since then with limited success. Today's visitors can see the once prosperous ruins of the town including the mine entrance and the ruins of the Big Bell Hotel, said to have had the longest bar in Australia.

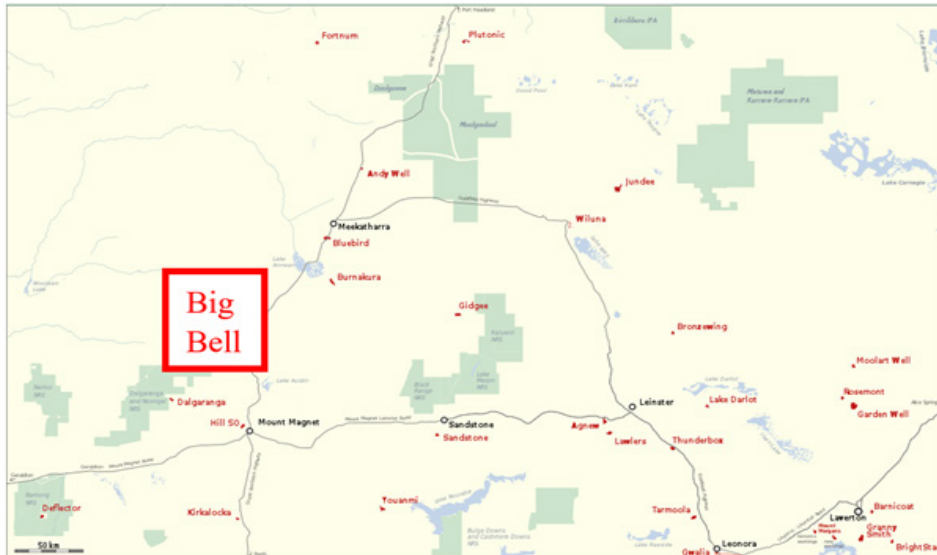


Figure 1: Mines and mining towns, central Western Australia by Pechristener CC BY-SA 3.0 <https://commons.wikimedia.org/w/index.php?curid=117666820>,

Doctors of Big Bell Hospital and district

1941 Dr Gilbert, Dr Jury, Dr Fletcher.

1941-1942 Dr McAuliffe

1943 Dr Bercov

1947 Dr Godby

1949 Dr Marshall

1954 Dr Ecksteins, Dr Foster

The Medical practitioners who were employed in the Big Bell Hospital also worked in the area and their exploits and misdemeanours were often published within the Western Australian press. Predominantly they appeared as expert witnesses in coronial inquiries into death in industry or on the roads. Information while they were employed elsewhere appears first, and chronological events in Big Bell Hospital appear subsequently.

3.1. 1941 Dr. Thomas Miles Gilbert. MB BS Melbourne 1932, MRCP London 1932

Dr Gilbert was born in England in 1906 and migrated from Coulsdon to Australia. He died in Perth in 1993 aged 87. Dr. T. M. Gilbert's date of qualification is uncertain, but he was a junior doctor

in St. Vincent's Hospital in 1930, busy organising balls. After travelling to UK for further studies, passing the MRCP (Lond) exam and pursuing further studies in Vienna, he returned home in 1933 as a ship's doctor.

Dr. T. M. Gilbert presented evidence at the inquest before the District Coroner, Colonel W. O. Mansbridge, concerning the death of Carrie Layland, age about 30, a lady of mixed racial descent. A cook of Sandstone, she died in the local hospital. Dr. Gilbert who conducted a post-mortem, stated that death was due to septicaemia. The inquest was adjourned [1].

Dr. T. M. Gilbert appeared as an expert witness in the Murchison Court of Sessions held at Cue before Colonel W. O. Mansbridge, the District Coroner where an Italian named Rocco Tassoni, employed at the Big Bell Mine, was prosecuted on a charge of having had unlawful 'carnal knowledge' of a girl under the age of sixteen.

Dr. T. M. Gilbert stated that 'he had examined the girl but found no definite evidence of the allegation made against Tassoni, although it was possible that it might have taken place.' A fairly useless statement made in the falsely sensitive period of avoiding specific anatomical details in which specifying if the hymen was intact or not would be considered unseemly.

Tassoni admitted he slept in the same bed as the girl and the police reported seeing them in a compromising situation. He was not asked directly if he had sexual intercourse with the girl. He and her mother thought she was sixteen but her birth certificate had been lost. However a copy was obtained showing her age to be fourteen.

The jury had heard enough to return a guilty verdict and Tassoni was sentenced to a year in jail with hard labour. [2].

Dr. T. M. Gilbert gave evidence at the Cue Court House to an inquiry into the death of Hugh John Doran of Reedy before the coroner, Colonel W. O. Mansbridge.

John Henry Linquist testified that he was the driver of the vehicle in which Doran was injured. Driver and passengers had had about four drinks of beer before starting. This fact was reported without generating comment or opprobrium as the cause of the crash, considered normal for the day and age. Linquist lost control of the car outside town which then crashed into a telegraph pole. John Wilson, sitting in the front passenger seat was briefly knocked unconscious, but on recovery found Doran lying at the side of the road, conscious, but in great pain, complaining of his shoulder and ribs being injured.

Gilbert said he examined Doran on arrival at Cue Hospital and found him to be suffering from shock and severe internal injuries, mainly to the chest wall and lungs. Doran died a few hours after admission, The Coroner agreed with the finding and stated Doran's death was accidental and due to the received injuries [3].

Dr. T. M. Gilbert gave evidence to an inquiry into the death of William Thomas Magher at the Big Bell Gold Mine before the coroner, Colonel W. O. Mansbridge.

Magher was reported missing at work, then his dead body was found lying on some ore down a mine shaft. He was wearing his safety belt, but there was no rope attached to it.

Dr. Gilbert said he found that there were extensive rib fractures, which had damaged blood vessels and internal organs, resulting in almost instantaneous death. There were abrasions on the head, but no skull fractures. Gilbert considered that Magher could not have lived for more than one or two minutes following the fall, and in response to a question said there were no signs of suffocation.

After a retirement for a quarter of an hour, the jury returned a verdict of accidental death, with no blame being attachable to anyone [4].

Dr. T. M. Gilbert gave evidence to an inquiry into the death of a young Italian miner, Guilio

Aiberti who was employed on the Klondike mine at Day Dawn. While descending a ladder he lost his hold and fell over a hundred feet to the bottom of the shaft and was killed.

Gilbert made a superficial examination of the body of Aiberti at the coroner's order. He found that the skull was fractured as were also the jaw and pelvic bones. The deceased had received internal

injuries and the condition of the body was consistent with the expected result of falling down a shaft. Another witness stated that the deceased appeared to have been in good health prior to the accident, and that there was no evidence to show he might have had a seizure prior to falling.

After a short retirement, the jury found the deceased had come by his death, from injuries received as a result of falling down the shaft. There was not sufficient evidence to show how he came to fall, but there was no blame attachable to anyone. The Coroner agreed [5].

The Big Bell Hospital board granted a salary adjustment of £38/16/0 to Dr. Gilbert [6].

3.2. 1941 Dr. Leslie Ronald Jury, MB BS Sydney 1939

Dr Jury was one of the most colourful doctors to work at the Big Bell Hospital. In 1940 during his first year as a junior resident at Fremantle Hospital, he was fined and sent to jail for three months for being a card-carrying member of the Communist Party and for the possession of the journal 'Spark' the newspaper of the Communist Party, at a time when membership of the Communist Party was illegal. At the Sydney University he was accused of being an active communist and was a functional member of the 19th Battalion Machine Gun unit. He became secretary of the League of Nations Union at the Sydney University and retained certain sympathies with the communists because he considered that they were fighting for the defence of democracy. Jury subsequently feared that if he pleaded guilty, he might get struck off the medical register [7,8].

By 1941 Jury was working in Big Bell. He was noted to be returning there after a hurried business trip to Perth at the weekend [9].

Jury's next appearance in court was as an expert witness! Mervyn John Muirhead a 23-year-old man was accused of raping a fifteen years old girl. Dr. Jury evidenced that he examined the girl on the night of 15th February, reported that there were small wounds and a swelling on the face, which were covered, in blood, an injury on the right thigh and the hip, and grass in her hair. Jury provided a 'sample' to Dr. William McGillivray, Government bacteriologist, which he said was negative. The nature of this sample is not clear in the delicate language of the 1940s but presumably it was a vaginal swab negative for spermatozoa.

The unnamed girl, overwhelmed and inaudible in court, had given inconsistent evidence at contrasting times. Mr. Commissioner Davies and Crown Prosecutor Gordon D'Arcy agreed there was insufficient evidence to proceed and the case was concluded, though no cause for her non-sexual injuries was reached [10].

In 1947, Jury was severely reprimanded by the Medical Board of W.A. for professional misconduct. Dr. Jury claimed two of his patients were suffering from silicosis as a result of their work in mines at Kalgoorlie and he supported their claim for workers' compensation. However, he appears to have ignored the opinion of a radiologist, Dr. W. Godby which appeared to refute the diag-

nosis of silicosis.

Practising radiologist Donald Edmund Copping gave evidence to the Medical Board of W.A stating that the reports by Dr. Godby and that made by Dr. Jury differed. Dr. Godby's first paragraph, which excluded the possibility of silicosis, had been omitted from Dr. Jury's report, he said. In finding Dr. Jury guilty of professional misconduct, the board said that a similar offence repeated would be viewed gravely by the board.

Silicosis was undoubtedly present in miners. A health review published in 1948 revealed that five thousand, five hundred men employed in the mining industry had been examined yearly since 1925 with a 1% annual detection rate of silicosis, but probably not in Jury's patient's case [11-13].

Mrs J. J. Murphy and family, following their recent sad bereavement, thanked all friends for letters, cards, floral tributes and personal expressions of sympathy, and also especially wanted to thank Dr. Jury and the matron and staff of the Big Bell Hospital. The name, age and diagnosis of the deceased were not published [14]. The State Health Department gazetted approval of the appointment of Dr. Jury as medical officer for the Big Bell Hospital and Cue portion of the Board's territory, and Dr. McAuliffe as medical officer for the Reedy area [15].

In 1942, Jury was back in court as the defendant in the Supreme Court, when his wife Hilda Evelyn Jury sued for divorce on the grounds of adultery. The couple married on 25th July 1941, having known each other for about thirteen months and had been engaged for seven months. However, after a month of married life her husband told her that they would not be happy together and that he had fallen in love with the Big Bell Hospital matron.

In her petition, Mrs. Jury alleged that the doctor committed adultery with Sheila Veronica Wheatley between 11.45 p.m. on January 23 and 12.20 a.m. on January 24 at 121 St. George's Terrace, Perth, after she and her inquiry agent found Jury and Mrs Wheatley together in a room that night.

She was granted a divorce from Leslie Richard Jury, medical practitioner, on the ground of adultery [16, 17].

Dr Jury's next adventure was to set sail on the Yugoslav migrant ship, Radnik, for former Yugoslavia, to accept a public health appointment under the Tito regime. Jury stated before his departure, 'I feel it should be interesting to see how medicine is developing behind the so-called 'iron curtain'' in the new democracies of Europe.'

He continued, 'I think, in a sense, the eastern democracies have a better rate and degree of reconstruction than in western Europe. These people have a much bigger say in affairs than those in the western world. This should influence public health considerably.' [18].

Shortly after his departure, his second wife, Lesley (Sheila) Ve-

ronica Jury issued a petition for divorce on the grounds of alleged misconduct with a woman known as Joy Shane, of Victoria Park, on January 27, 1948, in the bush near City Beach. She was also petitioning for custody of the children.

Mrs. Jury who was then living at Safety Bay, said her husband was an Army MO when she wed him in NSW. On his discharge they went to Big Bell where he accepted a practice including the hospital. They later moved to Perth, where he opened a surgery in James Street.

In September, 1946, she went to the Goldfields for a holiday and noticed a substantial difference in her husband when she returned, said Mrs. Jury. He was less affectionate towards her, continually offered excuses to stay out late, often going away for week-ends. She heard he was going with another woman, 'but when I questioned him on it he became surly' and if I pressed it he became angry and went out,' she said.

With inquiry agent Stuart Leckie one night in January, she had followed Jury and found him in his car at City Beach embracing Joy Shane. His face was smeared with the girl's lipstick. and they were both pretty drunk.

Mr. Justice Wolff granted the application of lawyer Len Seaton, KC for Mrs. Jury's decree, ordered Jury to pay the costs [19, 20]

The Perth Local Court awarded damages of £13/2/9 against Dr. Leslie Ronald Jury. The damages were for a mattress and two pillows which were in a flat he rented from Mrs. Lavinia Sanders, of Lord St, East Perth. When she leased the flat to Jury last November, the mattress and pillows were practically new, Mrs. Sanders said, but when Jury terminated the lease, they were unusable. She said she spoke to Jury about the mattress and pillows and, although he said it would be all right for her to buy a new one at his expense, nothing more was done about it [21].

In 1949 Jury returned from Tito's Yugoslavia after having spent sixteen months working in the Hygienic Institute at Zagreb, disillusioned with the Communist dictatorship. The Communist 'Daily Worker' published a report, quoting an Australian doctor as saying that Marshal Tito no longer commands a mass following in Yugoslavia. Jury said Yugoslavs are fed up to the back teeth with the Tito Government, which rules only by terror and military dictatorship. The workers' standard of living was deteriorating rapidly, while prices rise but

wages are pegged.

Jury said, 'When I arrived there, I found things not too good. Food was scarce and of extremely inferior quality. Wages were low and the people were discontented with the way in which things had grown worse since the end of the war. In 1945 and 1946 life was not too bad, and the people were full of enthusiasm, but from 1947 things began to go to pieces. The Five Year Plan was begun before the country got back to the pre-war level, and even now you can see thousands of roofless houses in Dalmatia. The Plan has defi-

nately failed; everything is behind schedule; it could never have succeeded without outside help; that is why Tito is on his knees begging to the US imperialists for dollars to 'build Socialism.' "In 1947/48 the workers' standard of living dropped 50% owing: to rising prices, and in the past year prices have again risen 100%, while wages have been rigidly pegged". [22, 23].

3.3. 1941 Dr. Edmund Fletcher

Dr Fletcher was a friend of Dr Jury and came to Big Bell Hospital in 1941 to undertake a locum tenens. He stayed in the area for a few years.

Dr. E. F. Fletcher appeared as the expert witness medical practitioner before Mr. H K Parker, coroner in the Coroner's Court inquest into the death of Alexander George Bowen. Bowen was killed when he fell from a skip down an ore shaft when the skip moved for some reason unknown probably without the appropriate signal. Fletcher performing the autopsy found five major injuries any one of which could have been fatal.

The coroner then addressed 'the jury of three who retired for twenty minutes, then returned the verdict, death due to misadventure. Edgar Keith Henley, a fellow miner, was considered partially responsible for failing to signal movement of the skip. The workplace was not considered at fault and in keeping with the Australian mining tradition of fifty years, the term compensation was not mentioned [24].

Dr. E. F. Fletcher appeared as the expert witness medical practitioner before Mr. S. R. Hardwicke JP, acting coroner, in the Coroner's Court inquest into the deaths Hugh Templar Davey and his son, Vernon Frank Davey, who were drowned in Lake Violet, Wiluna on March 1, 1942

Fletcher said that he held a post-mortem on the bodies of both victims and confirmed they both died of asphyxiation by drowning. Although Hugh Davey was a good swimmer, the two of them were out in a canoe designed for one person and it capsized.

The acting coroner expressed thanks and appreciation to those who helped in the search and stated greater care should be exercised the handling of canoes of such construction.

The verdict was that Hugh Templar Davey and Vernon Frank Davey came to their deaths by drowning. It appeared that the canoe in which they were travelling on the lake capsized, causing death from misadventure [25].

During the same sitting before Mr S. R. Hardwicke, J.P, an inquiry was held into the death of John Pearce. Pearce had been in good health shortly before his body was found in his boarding house. Dr. Fletcher also gave evidence of a post-mortem held in which no marks of violence indicating foul play were found. A mug containing about a quarter pint of a dark coloured fluid and powder in a yellow coloured tin with the words, 'Weevil paint poison' printed on it were found in his room with vomitus on the floor. Forensic

analysis revealed the liquid, powder and vomitus all contained arsenic.

The acting coroner's verdict was that John Pearce died on February 8, 1942, at 82 Scotia Street, Wiluna from the effects of self-administered arsenical poisoning [26].

Dr. Fletcher appeared in court on behalf of Vjekoslav Sulenta who was charged with possession of commercial quantities of alcohol without a license. Police discovered fifty-six bottles of Emu Bitter beer, one keg containing approximately seven gallons wine, five bottles of wine and one gallon of sour wine. Sulenta claimed it was for personal use as prescribed by his doctor. Fletcher confirmed in his evidence to the court that he had prescribed a glass of beer before each meal because of defendant's suffering from stomach troubles. The case was dismissed [27].

Dr. E. F. Fletcher appeared in the Police Traffic Court charged with driving a motor vehicle at a speed or in a manner dangerous to the public. Evidence given by the Traffic Inspector, E. J. Burrows, was to the effect that he received a report of an accident at about 8.20 p.m. on 1st December. The scene was near the corner of Wells and Lemon Streets when a high tension light pole had been broken off near the ground level. He saw car marks leading to and from the place where the pole was broken, took measurements and produced a plan. Tyre marks indicated the tracks of a car which had been braked six to eight feet beyond the pole.

He examined Dr. Fletcher's car and found slight damage to the fender and bumper.

Dr. E. F. Fletcher said that owing to having to attend a patient in the early hours of the morning, he was taken to the hospital by Mr. E. J. Horsfall and stayed there about twenty-five minutes. He drove the car back and whilst proceeding along Wells Street he fell asleep and struck a pole. The fender of the car was pushed back on to the front left wheel which prevented the car being: turned to the left. He took the car back to Horsfall's place where he stayed the remainder of the night He estimated he was travelling at from fifteen to twenty miles per hour at the time of striking the pole.

The case was dismissed with no costs. Happy days when doctors could prescribe beer for health problems and have driving charges dismissed on the grounds of being overworked! [28].

3.4. 1941-2 Dr. Joseph Albert McAuliffe – MB BS Melbourne 1937

Dr. McAuliffe first three appearances in the press were as an attendee of social balls including the Old Haleians Ball for alumni of the Anglican Hale School in Perth [29].

Dr. McAuliffe dealt with Hugh Booker, an eighteen year old cyclist, with a possible fractured hand and bruised leg, following a tragic accident at Inglewood. He was cycling in a group of four when a motor vehicle travelling towards them pulled across the road into the cyclists' path. One of them, Vernan Charles Myers,

age twenty was killed instantly [30].

Dr. McAuliffe appeared as an expert witness in the Criminal Court proceedings in which Henry Edward O'Brien, a forty-seven-year-old grazier, and his daughter Gwen O'Brien a domestic aged either twenty-two or eighteen were charged before the Chief Justice Sir John Northmore, and a jury, with having used force to procure an abortion.

Dr. McAuliffe initially gave very definite evidence that no other circumstance but a miscarriage would bring about the condition he discovered on examination but agreed on prompting that a normal delivery of a full term baby would produce the same appearance. The Crown therefore decided not to proceed with the prosecution, a case of 'nolle prosequi.'

Curiously, no one appeared to ask the young lady what had happened! [31, 32].

Dr McAuliffe, currently of Reedy agreed to make weekly visits to Meekatharra [33].

Dr. J. McAuliffe appeared as the expert witness before Mr. T. A. Parker, acting coroner, in the inquest into the death of Walter Creane. Creane had come into contact with a live wire, where the insulating covering had worn off, at the Triton Gold Mines and was electrocuted.

Attempted rescue resulted in minor shocks to fellow workers and turning the electricity off came too late. Creane was unconscious. First aid was rendered and the patient was taken to hospital. Artificial respiration was continued and stimulants were applied, but the deceased man failed to respond to this treatment.

The coroner's finding was that Walter Creane came by his death at Reedy on February 2nd, 1942, through shock caused by coming into contact with a steel guy rope attached to an electric wire pole, which guy rope owing to prevailing weather conditions was charged with electricity, and electrocuted the deceased, no blame being attachable to anyone [34].

H. Willbarra, an Indigenous boy was admitted to the Reedy hospital under the care of Dr. McAuliffe with a bullet wound in the right the right thigh. Willbarra and Bruce Hicks, aged fifteen had been wrestling with a 0.22 rifle, when Hick's finger came in contact with the trigger, causing the rifle to be discharged. McAuliffe extracted the bullet uneventfully and the boy was reported to be making satisfactory progress [35].

Dr. McAuliffe gave evidence at the coronial inquest into the death of Robert McVee, a thirty-eight year old miner, under the Acting Coroner, Mr. J. A. Cassey, J.P.. Dr. McAuliffe said that he had attended McVee for attacks of asthma to which he was subject. Asthma may have played a minor role in the pulmonary disease causing McVee's death.

McVee fell down when carrying a slab of timber in the Stockton Mine and the timber fell on his chest. Afterwards McVee com-

plained of severe soreness and was unable to attend work the next day. His condition deteriorated and he was admitted to the Collie Hospital where he died eight days after the accident. Dr. Walsh testified that death was due to congestive cardiac failure, asthma and pulmonary fibrosis and a bruised lung.

A post-mortem examination was performed at the request of Mrs McVee and revealed abrasions on the left side of the chest and there was an infected left-sided pleural effusion possibly caused by trauma to the chest wall and lung.

The jury found that McVee died as a result of injuries received when at work in the Stockton Mine [36].

3.5. 1943 Dr Jack Bercov

Dr Jack Bercov graduated MB BS (Sydney) in 1941 and proceeded FRACGP in 1971. He supported himself financially while training by selling fruit first in Kalgoorlie and then in Sydney. Bercov came to Big Bell Hospital in 1943. Dr Bercov had a strong work ethic and worked day and night without appearing fatigued or irritated. Several registered nurses who were also his patients thought that they had found the perfect doctor.

His tailor was Andy Zafer off London Court in Perth, described as 'Tailor to the Elite'

His practice included obstetrics delivering some fifty babies per year, anaesthesia and surgery performing minor operations such as appendectomies and circumcisions. He diagnosed the stroke that led to his death in 1974.

The Rotary Club of Claremont-Cottesloe has perpetuated his name with the valuable 'Jack Bercov Prize' awarded annually to the best fifth year student in the General Practice Course at University of Western Australia.

Dr. J. Bercov, son of Mr. and Mrs. L. Bercov, of Queen's Crescent, Mt. Lawley married Stella Doris, daughter of Mr. and Mrs. L. A. Alman of Kalgoorlie, at the Synagogue, Brisbane Street, Perth [37].

Dr Jacob Bercov appeared as an expert witness in the Criminal Court before Chief Justice Sir John Northmore where Albert Wilson, a forty-seven-year-old cook was accused of having unlawfully wounded Mrs. Madeline Mary Cook by slashing her face.

The prosecution stated that Wilson intercepted Mrs Cook at Boan's cake counter on 22nd April and slashed her face with a razor-sharp instrument, inflicting a cut from the ear to the jaw, an eighth of an inch deep at one part. The defence stated that Wilson tapped Mrs Cook on the shoulder from behind, and as she turned around she accidentally gashed her face on a cigarette lighter Wilson held in the hand resting on Mrs Cook's shoulder.

Dr Jacob Bercov, who treated Mrs Cook at the Perth Hospital, today examined the lighter, said that no part of it could have caused the wound in Mrs Cook's face. Without retiring from the box, a jury in the Criminal Court a guilty verdict and Wilson was remand-

ed for sentence.

After the jury had delivered its verdict Wilson's counsel said that Wilson was a returned soldier from the last war, had served with the A.M.F. in this war, and had only recently been discharged as medically unfit [38].

Dr Bercov appeared at a Perth Courthouse inquiry into the death of the patient, thirty-six-year-old Kathleen, before the coroner Mr. Christie spoke his mind plainly.

Bercov was giving an anaesthetic to Kathleen Carrington for a dental operation in which Mr Hill proposed to extract at least eight teeth. Mrs Carrington was given the usual pre-medication treatment, consisting of Nembutal and an injection of atropine. Before the procedure was completed Mrs Carrington stopped breathing. Bercov administered carbogen, a medical gas mixture of 5% medical carbon dioxide in 95% medical oxygen.

Carrington started breathing again and Dr Hill recommenced dental extractions. Unfortunately, another episode of apnoea followed. Carrington was given an injection of coramine and carbogen, following which artificial respiration was commenced. A Magill tube was inserted through the nostrils into the trachea She then had injections of picrotoxin and adrenalin but could not be revived.

Dr D. S. Mackenzie performed a post-mortem operation on Kathleen Carrington and found an occlusive blood clot in the trachea which caused the fatal asphyxia.

The coroner Mr. Christie considered that when the deceased collapsed and stopped breathing in the first instance the doctor and dentist jointly committed an act of grave indiscretion in proceeding at that stage with the further extractions, as there was no earthly reason the remaining teeth could not have been extracted at a later date and deceased allowed to return home and report at some later date. The coroner also stated that it was admitted that deceased was bleeding freely, and he was not satisfied on the evidence submitted as to the reason or explanation why a clot of blood was found congealed in the trachea, when perhaps it could have been sucked out to prevent death. The coroner forwarded his opinion to the Crown Law Department but there is no publication of further legal action against Dr Bercov [39]

Dr. J. Bercov in common with most of his contemporary colleagues was a competent amateur sportsman. He and Mr S. Harris won the four-ball event at the Royal Fremantle Golf Course finishing four up to win after a three-hole play-off [40].

Dr. J. Bercov, appeared in the Fremantle Police Court before Mr. A.G. Smith, S.M. on behalf of Robert Maurice Lang who was charged with drunken and dangerous driving.

Evidence was given that Lang had driven against a pointsman's signal. When interviewed, Lang stated that he had had only three drinks, however prosecution claimed that his breath had smelt of liquor, he had swayed on his feet and he had later failed a sobriety test. Lang said that he had not seen the pointsman in the heavy

Flower Day traffic and he had been rushing to get to Perth airport.

Bercov stated that Lang, who drew a war pension for anxiety neurosis, displayed symptoms that were consistent with those of a man suffering from neurosis. The drunken driving charge was dismissed but Lang was fined £10 for dangerous driving [41].

3.6. Dr William Heitland Godby

Godby graduated MBBS Melbourne 1914 and made the news with his new Humber Snipe, a model of luxury and comfort purchased from Skipper Bailey Motor Co. Ltd., in Hay Street [42].

Dr. Godby was therefore a well-experienced doctor when he was appointed medical officer to the Big Bell Hospital in 1947. He was also noted for his skills on the golf course. Godby of the Royal Perth Golf Club won the Summer Cup of the Bunbury Golf Club, covering the 18 hole course in a net seventy-one strokes [43].

By 1948 Dr R. Godby was working in the Concord Repatriation Hospital, New South Wales. There he participated in the early clinical use in Australia of Streptomycin for tuberculosis, a drug which like penicillin was produced from a variety of fungus mould.

Having been found in the laboratory to be an effective counter to the tuberculosis germ, Dr. R. Godby, said unfortunately, it had some toxic and irritating effects when administered to human beings, but its results when used in cases of tuberculous meningitis, an otherwise hopeless condition, and skin tuberculosis were encouraging [44].

3.7. Dr. S.V. Marshall

Dr. S.V. Marshall was medical officer to Big Bell Hospital in 1949. He had been resident doctor in Pinjarra in the 1930's and returning to Waroona township was amazed at the growth of the district and particularly the town. By 1948 he was specialising as an anaesthetist and had been attending a Medical congress in Perth [45].

Marshall was working at the Royal Perth Hospital when a patient under his care died and was subject to a coronial inquiry in August, 1948. City Coroner K. P. Rodriguez, explained that in the absence of any suggestion of criminal negligence in the evidence of four doctors called, testimony regarding possible negligence in Ducat's treatment at RPH did not come within his province as a coroner. But he told lawyer Max Kott (for Ducat's widow), assuming that there was any such negligence it was his opinion that an inquiry should be conducted into it.

Leslie Thompson Ducat, was seated in the front seat of the bus on the morning of 29th April 1948, when the bus swerved to avoid a trotting horse drawing a jog cart, left the road, tilted on an embankment and crashed into a telegraph pole. Ducat was thrown out. Ambulance driver Henry George Southall was called, and he thought Ducat was suffering from a fractured spine or ribs in the thoracic region, concluded he was very shocked and seriously hurt, and took him to RPH casualty ward. Ducat was first seen by to an RMO Dr. William Robert Davies who ordered morphia and asked for X rays of the skull, lumbar spine and chest. Soon after he went

off duty and Dr. Marshall, now practising at Big Bell, took over.

Dr. Marshall, said he perused Ducat's outpatient card made out by Dr. Davies, saw where Dr. Davies had examined him and found nothing seriously wrong, and examined the X-rays which, Dr. Marshall said, revealed nothing wrong. He told Ducat and his wife that in the absence of X-ray evidence of any fracture, the patient could not be admitted. Subsequently for the inquest, three other doctors agreed the fractures were not visible on the X-Rays. He did not examine Ducat because Dr. Davies had already done so. By May, Ducat was in a private hospital severely ill and he died on the 3rd June.

Cross-examined by Mr. Kott, Marshall admitted that in the light of subsequent events he had been wrong in refusing Ducat a bed in the hospital. However, he said, he had offered Ducat a bed in the observation ward. Ducat had declined.

District Medical Officer, Dr. A. T. Pearson, who conducted a post-mortem examination on Ducat, said death was due to an abscess on a lung, and that the 8th rib had punctured the chest cavity. He found incomplete fractures of the 6th to the 12th ribs. Coroner Rodriguez found that Ducat died of an abscess of the right lung caused by six fractured ribs [46, 47].

Dr Marshall would appear fortunate. Fractured ribs can be suspected on clinical grounds from localised severe tenderness. A pneumothorax is a well-recognised complication of a fractured rib, and an infected pleural effusion could have been detected and responded well in 1949 by drainage and penicillin had the X-Ray been repeated a few days later.

3.8. Dr. A. Eksteins

Dr Artur Eksteins graduated from the University of Riga, Latvia in 1937. He practised at Fremantle in Western Australia in 1950, at the Big Bell Hospital in 1954 and later went to Wiluna.

When Ekstein was absent from Meekatharra in 1953, Mrs. Hooper and her nine-year-old daughter, Justine, were admitted first to the Wiluna Hospital and then to the Big Bell Hospital with small puncture wounds near the rear of both legs. An explosion, believed to have been caused by a shotgun cartridge in the kitchen stove resulted in injuries! [48].

3.9. Dr. Foster

Dr Foster appears to have been the last doctor to work at the Big Bell Hospital. Herman Fusz, a miner employed at the Big Bell mine, was admitted to the Big Bell Hospital under the care of Dr Foster with a broken leg. While working at the 1,050ft. level Fusz was trapped by a large stone and jammed between heavy bars. The bars were cut by a welder in the presence of Dr. Foster and ambulance men. Fusz was subsequently taken by plane later to Perth for specialist orthopaedic treatment [49].

In summary, doctors were repudiated for incompetent anaesthesia, distortion of radiological evidence, membership of the Communist Party and adultery on two occasions. They appeared twice as <http://www.acmcasereport.com/>

expert witnesses in cases of underage sexual intercourse in which one was found guilty and one innocent, and one cause of deliberate termination of pregnancy by force was dismissed. They appeared twice following fatal motor vehicle accidents in which one driver was exonerated in spite of consuming at least four beers before driving and another where turning right across the path of oncoming cyclists was not deemed an offence.

On five occasions doctors appeared before inquiries into mining deaths which were deemed accidental with no blame attached and the word 'compensation' does not appear.

There were also two accidental drownings in a lake and one suicide with arsenic.

4. Big Bell Hospital

In 1937 a committee formed to plan, design, construct, finance and staff a new hospital of sixteen beds initially in Big Bell. Funds were raised with multiple events including a ball, a competitive musical concert and boxing contests when boxing was seen by the medical profession as a noble art rather than the cause of dementia pugilistica [50-54].

Mr D. L. Pitt, the manager of Big Bell Mine, spoke enthusiastically about the vital importance of a proximal hospital for miners in view of the hazardous nature of mining and hoped that the town citizens would support the hospital by becoming financial members.

Little progress was made during 1938. Further meetings of the committee reported limited support from the town citizens. The treasurer reported in March that £294 had been raised to date. Thirty-two out of eighty-three town businesses expressed a willingness to support the proposal and one hundred and twenty-three miners had agreed to pay the annual subscription of ten shillings once the hospital was open. Another night of boxing bouts was held to augment the collection.

A Mr James Cunningham wrote to the local paper suggesting that one large financially viable well-staffed hospital in Cue, only eighteen miles distant via the ambulance service, rather than two small hospitals with inadequate funds and limited staff and facilities. None the less the Hospital Committee continued optimistically with plans for a New Year's Eve Carnival and Casino Night to continue fund raising [55-60].



Figure 2: Ruins of Big Bell Hospital today

4.1. 1939

Two major events in 1939 brought the possibility of a hospital in Big Bell closer to fruition in addition to the usual local fundraising in which balls and boxing were the popular odd couple.

In February, Mr D.L. Pitt, the mine manager addressed the Big Bell Hospital Committee and announced that the mine would donate between £1,500 and £2,000 to the hospital fund, a large addition to the approximately £500 raised so far. Pitt added that he expected the government to fund the rest. [61]

The second event was the visit of Dr. Everett Atkinson, The Commissioner for Public Health and Mr. F. J. Heulin, the Under-Secretary, Medical Department. They spent several days visiting the Cue and Reedy Hospital and visiting Big Bell, then called for a public meeting in the Cue Hotel.

Dr. Atkinson appreciated the desire of Cue, Reedy and Big Bell to each have its own hospital, but the Department considered that two hospitals could sufficiently cater for the population in the area. He continued that as the Reedy hospital seemed capable of managing for itself, it was a question as to whether the second hospital should be at Cue or Big Bell.

Atkinson and Heulin visited the Cue Hospital which had for the past forty years given good service to the community with what amounted to worn out tools, but they came to the conclusion that in its present condition it would necessitate a big outlay to recondition and equip it to adequately serve the district.

Heulin stated that 60% of the patients admitted to the Cue Hospital came from Big Bell, and that the majority of the subscribers to the Cue hospital and Medical fund were located at Big Bell. They noted the opinion of Mr D.L. Pitt that there was a necessity for a hospital near the mine at Big Bell

They therefore considered it logical to scrap the Cue Hospital and erect a new one at Big Bell, and that on returning to Perth they would in their report to the Minister recommend that this action be taken.

Following this declaration, a surprise and shock to the people of Cue, many valid points were raised at the meeting.

Support for Big Bell was expressed by Mr. J Currie of Cue, who had spoken to several people on the subject and they did not seem to mind which centre had the Hospital, Mr, J. Campbell of Big Bell replied that the Big Bell people definitely wanted it at Big Bell.

Support for Cue was expressed by Mr. A. A. Haynes comparing the two towns said that Cue and its vicinity had a larger population than Bell. The population in the Cue area was around 1300, as against 800 at Big Bell. A feature he said should be remembered was the scattered nature of the population along several miles of railway track. and the substantial number of families for whom the hospital at present catered and that Cue was at the centre of a large district while Big Bell was situated at the end of a branch line.

Mr E.S. Baker of Cue asked Mr. Pitt if he could state the approximate life of the Big Bell Mine, on which the adjacent town depended for the continuance of its existence. Mr. Pitt in reply said that the company had ten years' ore reserves in sight and it was generally mines with such a reserve that enjoyed a long life.

Mr. Campbell said that mine patients were usually serious cases for the accommodation of whom it was necessary to have a hospital nearby. Cases from Cue would come principally in the sickness category and could be transported more conveniently. Mr Riddell of Cue disagreed as there were many families around about Cue who were not so well of and transport to hospital was a more serious consideration for them, while many of the people at Big Bell had the advantage of being on the mine pay roll. Riddell also stated that that there would also be a number of Indigenous people, pensioners, prospectors and indigents who could not afford being conveyed to Big Bell.

Mr. Baker, asked if Fingall Mine of Day Dawn or the Pinnacles near Cue might be reopened increasing the population in the Cue area. However Mr. Pitt said he considered that a great deal of capital and new methods, of mining would be required before Fingall could be reopened. He added the Western Mining Corporation had not seen fit to go on with the proposition.

Dr Atkinson was asked what the proposition would be if the mine and therefore the need for a hospital at Big Bell ceased in the future and said that modern hospitals could be dismantled and moved about.

Mr Williams asked if government funds would be available for an ambulance service for Cue. It was stated that such funds would not be available but the Lotteries Commission may be able to do something about that.

Dr Gilbert asked what the position of the Cue subscribers would if their local hospital closed, and. Mr Riddell said the whole matter would have to be placed before a proposed meeting of the Cue people shortly. [62]

4.2. 1940

In 1940 the planning and fund raising came to fruition. In February, two hundred and fifty residents of Big Bell attended a public meeting in the Picture Gardens at which plans of the proposed hospital to be built at that centre were exhibited. Mr. Dale Pitt gave details of the building which was costed at approximately £4,700. Mr. Pitt had previously approached all the Ministers of the State Parliament and eventually the Ministers agreed to listen to his proposals, though the first plan costed at £10,000 was rejected and significantly reduced. Freight costs to the remote mining town added another £1,000 to the cost. [63].

By May construction had begun on an elevated site midway between the mine and the town. The now estimated cost of £5,000 was to be funded by Big Bell Hospital Appeal Committee, Big Bell Mines, and the Government and the Lotteries Commission

in equal thirds. In June, the Board was informed they would need to give consideration to the construction of a road to connect the Hospital with the Big Bell Town. [64,65].

In September, the hospital construction was reported to be well advanced with a completion date expected by November or December. Plans to develop a hospital board and recruit medical and nursing staff were under consideration with the aid of the medical department. However Dr Gilbert, the Medical Officer of Cue Hospital intimated that he would be leaving the district in November to join the Army Medical Corps. [66].

Mr D. Pitt announced his future plans to move to America. His resignation was greeted with much regret as he had been the major supporter and influence behind the development.

Later that month the interior work inside the hospital by a firm of city contractors was in progress and a road to connect the town and hospital was being cleared. By October, an optimistic opening date of November 16th was proposed with a grand ball is to be arranged to celebrate the opening [67-69].

4.3. 1941

During the first three weeks of the new year, final preparations were made for the opening of the Big Bell Hospital. Medical equipment was arriving and satisfactory progress was made with the erection of the doctor's residence. [70]

Dr. T. M. Gilbert, formerly of Cue was appointed the resident medical officer at the Big Bell Hospital as he had not yet joined the armed forces as he had previously planned. The greater part of the necessary new equipment had arrived ready for the opening and the reception of patients next week. [71,72].

Shortly before the hospital opened in Big Bell, Dr. Gilbert reported that during the month of December he had two hundred and eighty five consultations at the consulting rooms and forty-three home attendances indicating the need for a town hospital. [73]

Matron Wheatley, formerly of Sandstone and Youanmi and recently the eastern States commenced duties at the new Big Bell! District Hospital. Her husband, Ray, was serving with the RAAF overseas. [74]

Sister Rowlands also joined the staff in the week prior to the opening. [75]

The Big Bell Hospital opened to patients on Saturday 25th, January 1941. The hospital was now staffed with expert professional and equipped to serve the community. A symbolic subsequent opening with bureaucrats, officials of the Department of Public Health, and politicians was proposed for April. [76]

The first published adult admission to the Big Bell Hospital was Mr. Bill Smith suffering from a poisoned hand, [77]

The first admitted child was Master Walter Gale, though no diagnosis was given. [78]

Dr Gilbert resigned from the position of Medical Officer to the Big Bell Hospital The Health Board received this with regret but noted that there were now two doctors in the Board's area, one at Reedy and another at Big Bell. It was decided to divide the district, paying one-third of the subsidy to Dr. McAuliffe at Reedy and two-thirds to the new doctor at Big Bell, who also served Cue. [79]

The first published death at the Big Bell Hospital was that of Mr. James Joseph Murphy, age fifty-nine. He had been in the retail and trading business in Cue for many years. No cause of death was given. [80]

The official opening of Big Bell Hospital occurred on 3rd May, 1941, the ostentatious politician's event rather than the commencement of service for the public by health care experts. Mr W. Marshall, M.L.A. supported by members of the State Health Department performed the ceremony. He congratulated the townsfolk and particularly Mr Pitt for their role in developing the concept, and he congratulated those involved in raising the necessary finance. An afternoon tea was held in the nurses' quarters, and an evening ball was held in which debutantes were presented to Mr Marshall. [81].

Mrs. E. Read died in the Big Bell Hospital aged ninety-five. No diagnosis was given. She left thirty-five grand-children, thirty-two great-grandchildren, and six great-great-grandchildren! [82,83].

Mr. Albert Ernest Chesson died in the Big Bell Hospital at the age of 64 years. He was one of the pioneers of mining and prospecting in the Murchison area, having lived in the area since 1894 and worked in the Little Bell, Big Bell and Great Fingall mines amongst others. It is not known if his death was due to occupation diseases as no cause of death is given [84,85].

A son was born to Joyce Ellen Langer (nee Dickson), on 19th August at the Big Bell Hospital [86].

Mr H. R. Connor's died shortly after admission in the Big Bell Hospital following an accident at the Big Bell Mine. Connor's, the foreman of the machine shop, was struck on the left side of the head by a large fragment of rock following blasting in the mine. He suffered a fractured skull and severe intracerebral injuries. First aid was given and he was conveyed to the hospital but succumbed shortly afterwards.

His wife was then recovering from a serious but unspecified operation in the Big Bell Hospital. Connor's funeral was attended by a large number of mourners with an honour guard. There is no mention of compensation for the family [87].

A Coroner's Inquest followed next month. Dr. L. R. Jury of Big Bell Hospital gave evidence. He was informed there had been a mine accident, where at 4.50pm he found Harold Rozelle Connor's in a moribund condition. Examinations of his injuries showed a gash on the left side of the head over a depressed fracture of the skull, from which there was a continuous haemorrhage. There was a bruise on the right side of the forehead and a cut on the right side of the head towards the back. Blood was issuing from the

nose and mouth and the patient was comatose. Death, which took place at 5.40 p.m., was caused by profound shock and respiratory failure, due to multiple fractures of the skull including at least one compound depressed fracture and a fractured base of the skull. The injuries were consistent with the having been struck by a rock falling from a great height.

The jury heard that warning whistles had been blown before the blasting and the injury was caused by a large fragment of rock crashing through the roof of the machine shop and fracturing Connor's skull. In the opinion of the jury, no blame was attachable to anyone. The word compensations fails to appear in the transcript. [88].

Ailsa Lynette was born at the Big Bell Hospital on 1st October, a daughter for Don and Alma (nee Pascoe) Hallinan [89].

Dr Jury informed the newly elected Big Bell Hospital Board committee meeting that he would be available to visit Mount Magnet on Sundays since their doctor had joined the armed services. Dr. Jury also advised the Board that he was obtaining a supply of anti-diphtheria serum and that as soon as this arrived be proposed to arrange a clinic for the immunisation of school children. Later that month Dr Jury announced the immunisation clinic was now functioning and that forty-eight children had already received their vaccine. [90,91].

Another fatality occurred at the Big Bell Mine. Lubermann Muson slipped and fell some one hundred and twenty feet down a mine shaft. Eight foot lengths of steel were being passed from man to man down a shaft. Ropes were used for safety, but although safety belts were attached to the ropes it was widespread practice not to use them. Muson was observed falling down the shaft endeavouring unsuccessfully to obtain a hand hold on the side. He was found deceased at the bottom and his body raised to the surface for examination by Dr Jury.

At the subsequent coroner's enquiry, Dr. L. R. Jury, of Big Bell, gave evidence of having examined the body of a male person in the first aid room at the Big Bell Mine. He was informed that the man was Lubermann Muson, but life was extinct when he arrived. On making an examination he found the back of the skull was caved in and the body was covered with scattered abrasions. The injuries were consistent with the man having fallen from a height. The body was then transferred to the morgue of the Big Bell Hospital and identified by witnesses as that of Lubermann Muson.

After a short retirement, the jury returned a verdict to the effect that the deceased, Lubermann Muson, came to his death through a depressed fracture of the skull caused by accidentally falling in No. 16 glory hole. There was no evidence to show the cause of the fall and no blame was attachable to anyone. Compensation as usual was not mentioned [92].

Big Bell Hospital subscribers requested that their X-rays taken in Big Bell should be charged at half-price, to which the board re-

plied that the charges would have to stand and that they would ask Dr Jury to use the Cue X-Ray department whenever feasible [93] Sister Thompson was welcomed to the staff of the Big Bell Hospital earlier in October [94].

Dr Jury replaced Dr Gilbert in the Big Bell Hospital and agreed to visit Cue twice weekly as they had been unable to retain a doctor in Cue [95].

Glennis Rosalie Heydon, the baby daughter of Mr. and Mrs. C. Heydon, sister of Phil, Keith, Charles, Kevin and Beryl of Cue, died on 3rd November at the Big Bell Hospital. After a successful operation the previous week, the child aged eleven and a half months, suffered a relapse from which she did not recover. [96,97].

Mr. Gerry Cannon has returned to work, after spending a fortnight in the Big Bell hospital.

Mrs Iris Walsh and Mr. L. Jones were both taken to Hospital during the week. No diagnoses were given [98].

Big Bell Hospital Board announced that the Cue Hospital Board would be charged the full rate of 10/6 per day in future for those of their subscribers who were treated at Big Bell. In view of this it was decided to ask Dr. Jury to treat as many as possible of the Cue patients at the Cue Hospital [99].

Dr. Jury was asked to make the best possible arrangements for carrying on the hospital in the matron's absence, as Matron Gordon had applied for two months' leave of absence in which to make a business visit to the Eastern States [100].

The Big Bell Hospital Board reported that electric fans which had been ordered but had to be procured from the Eastern States and were difficult to obtain, Mosquito nets which had also been ordered had been received, including those ordered by the Women's Auxiliary for the staff quarters.

In reply to queries forwarded to the Department of Native Affairs concerning Indigenous Patients, it was advised that when natives are employed on stations under license, the Department pays 5/- per day for their treatment. If no license is held the station owner is liable, but if unemployed, they must be treated free. It was pointed out that many natives declared that they were employed on stations, and that the owners disclaimed them, thus placing an unfair burden on the hospital. In reference to the question of finding separate accommodation for native patients, the Medical Department, while agreeing that this was desirable, placed the onus of erecting the building on the hospital authorities, which could not under present circumstances afford even the reasonable sum of £25 quoted. It was therefore reluctantly decided that the matter must be held in abeyance.

It was noted that the cook had used some bi-carbonate of soda from unmarked bags that was intended as the filling material for hospital fire extinguishers. The fire extinguishers were now unusable but the cook was reported to have made a good batch of cakes!

Dr. Jury reported that the B.M.A. did not approve the suggested

alterations in his contract which could not therefore be made. Matron Wheatley resigned with effect at the end of the month and Sister Corker had been called up for military service to the regret of all the staff.

The application of the rule that operations, other than urgent cases, were not included in the benefits of the hospital and medical fund, was discussed. It was pointed out that in some cases the doctor had not advised that the operation was urgent until after the account had been sent out, therefore Dr. Jury was asked to note in the admission book whether an operation was urgent or not immediately it was performed.

The Board was disturbed by the serious position of the hospital finances and its inability to meet its obligations and pay the hospital tradesmen. It was reported that Dr. Jury would be away on holidays for a month, and that Dr. Fletcher had arrived to function as locum tenens [101].

4.4. 1942

Sister N. Corker, of the staff of the Big Bell Hospital, was called up for military service, and departed for Perth [102].

The January meeting of the Big Bell Hospital Board welcomed Miss Hammond as the new matron. Previously she had been in charge of the Pinjarra Hospital for the past nine years [103].

Sister Moore, of the staff of the Big Bell Hospital, also left for Perth [104].

Vena Joy Laurisch was born at the Big Bell Hospital on 15th March, a daughter for Mr. and Mrs. W. Laurisch [105].

Madeline Gail Hymus was born at the Big Bell Hospital on 28th March, a daughter for Mr W. Hymus and Mrs. Madge (nee McNaught) Hymus [106].

Mrs. N. Constantino, wife of the licensee of the Cue Hotel, was discharged from the Big Bell Hospital, though her diagnosis on admission was not stated. [107].

Mr. B. Bombardieri, formerly of Lake Austin, died at the Big Bell Hospital, his age and diagnosis were not published [108].

The local Big Bell butcher refused to supply meat to the Big Bell Hospital. probably because the hospital were unable to pay his account. The Big Bell Hospital Board agreed that the Board had no authority to deal with the matter and agreed to refer it to the Medical Department [109].

G.A. Parker died in the Big Bell Hospital on 8th July [110]. His age and diagnosis were not published. His children and friends commemorated his life and passing a year after his death.

Mr. Jim Adams was admitted to the Big Bell Hospital, where he was detained for treatment of a broken leg. No further anatomical or surgical details were given. While driving a sulky, his horse shied breaking the shafts of a sulky throwing the occupants over the front of the sulky which then passed over Mr. Adams leg. The other occupants only suffered abrasions [111].

Leonie Madeline was born at the Big Bell Hospital on 17th June, to Archie and Dorothy (nee Christensen) Spencer [112].

Dr McAuliffe reported that serum for Diphtheria Immunisation had been despatched for use at Reedy and that approximately seventy children had been vaccinated [113].

June Margaret Fisher was born at the Big Bell Hospital on 1st August, a daughter for Norma and Chas Fisher.114

Edith Gwendoline McNaught was born in the Big Bell Hospital on 5th August, a daughter for Frem and Eva (nee Cornell) McNaught [115].

A son for Joyce Ellen(nee Dickson) Langer was born at the Big Bell Hospital on 19th August. [116].

The Government Gazette of Western Australia of 15th May, 1942, published that his Excellency the Lieutenant-Governor in Council, acting pursuant to section 23 of the Hospitals Act, 1927, has been pleased to approve of the amendment by the Big Bell Hospital Board of Management of its by-laws for the control of the Medical Fund of the Big Bell Hospital as set out in the resolution contained in the Schedule hereunder.

The by-laws for the control of the Medical Fund of the Big Bell Hospital, as made by the Big Bell Hospital Board of Management under section 23 of the Hospitals Act, 1927, and published in the Government Gazette on the 11th day of July, 1941, are amended as follows: By-law 7 is amended by deleting therefrom the words 'Major operations, with the exception of urgent operations (an urgent operation is one where the postponing of the operation for more than twenty-four hours after the decision to operate has been made would in the opinion of the medical officer be detrimental to the health of the patient)' where they appear in lines 12 to 18 of the said by-law, and inserting in lieu thereof the following words: 'Dental operations and major surgical operations (for which the fees to be paid shall be subject to private arrangement between the member and the medical officer) provided that the following surgical procedures, namely opening boils or abscesses, suturing wounds, setting fractures and other similar minor operations, when performed without the use of a general anaesthetic, shall not be deemed to be major surgical operations, and shall be free of charge.

A daughter was born to Mr and Mrs F Maloney on 3rd September in the Big Bell Hospital [117].

Leslie Hammond and Jeanette Anne Johns were born in the Big Bell Hospital on 15th September, twins for Mr and Mrs R. S. Johns [118].

Bob Muir, originally of Ayr in Scotland, died in the Big Bell Hospital a few days short of his eighty-second birthday of unspecified causes [119].

Beverly Gail Parker was born in the Big Bell Hospital on 21st November, a daughter for Harold and Bidy (nee Ryan) Parker [120].

Eileen Margaret Buckley, the wife of C. J. (Con) Buckley died in the Big Bell Hospital, on 18th November. Age and diagnosis were not published [121].

Robert Clayton Walsh was born at the Big Bell Hospital on 26th November, a son for Mr. and Mrs (nee Bette Denner) R. C. Walsh [122].

An unidentified friend or relative of Mr C.J. Buckley and his son Allen died in the Big Bell Hospital. They conveyed their thanks for all expressions of sympathy and were especially grateful to the doctor, matron and staff of the hospital for their expert care. In 1942 there eight births and five death reported in the Big Bell Hospital [123].

4.5. 1943

An unidentified friend or relative of Mrs Chivers died in the Big Bell Hospital of an unknown cause and she wrote to the papers thanking all for their expressions of sympathy and also thanking Dr Bercov and nursing sisters of the hospital for their care and attention. [124].

Phil Heydon was admitted to the Big Bell Hospital with a severe but unspecified illness, from which he was showing slight improvement. His parents, Mr. and Mrs C. Heydon had previously lost their baby daughter, Glennis Rosalie Heydon, in the Big Bell Hospital to post-operative complications in November 1941 [125].

Matron Doyle of Big Bell Hospital departed for Wiluna to commence the position of matron at the Wiluna Hospital, as the Big Bell Hospital has been closed down. This surprising development was unheralded apart from regular comments about financial difficulties. The hospital had only been open for just over two years. The apparent change from the previous matron, Miss Hammond to Miss Doyle is unreported [125].

Dr. Bercov, Medical Officer at Big Bell Hospital prior to its closure inspected the Mount Magnet Hospital, then departed for Perth to function as a locum tenens in Leederville [126].

4.6. 1944

Big Bell Hospital remained closed until Dr J.G. Hislop from the State Department of Health inspected the area hospitals. He considered that the building at Cue Hospital were old and that modernisation would be expensive and difficult, that the hospital lacked sewerage and that the nurses quarters were inadequate.

Hislop noted that Mt Magnet were unable to find a doctor to staff their hospital, that the hospital lacked satisfactory sterilisation equipment or a hot water system and that both the doctor's and nurses' quarters were inadequate. The health department considered it was undesirable to reside doctors in a hotel for lengthy periods.

On the other hand, Hislop considered the much newer Big Bell Hospital was equipped with every modern electrical device of sterilization. It was seweraged and had a shock proof X-ray plant. It

also had a room which could be used for a laboratory. There were certain difficulties in the reopening of the Big Bell Hospital, one of which was the provision of power over a 24 hour period. The chief accountant of the Big Bell Mines Limited suggested that this difficulty can be overcome by the expenditure of £136.

Hislop noted that patients from Reedy could be treated at Big Bell and no longer make the longer journey to Meekatharra [127].

Hislop considered that from every angle the treatment of the patient would be on a higher plane at the Big Bell Hospital. Inevitably the Cue and Mt Magnet hospital boards and citizens preferred to retain their own hospitals. Mt Magnet estimated that £1,500 would be adequate to correct the deficiencies of their hospital [128].

4.7. 1945

There was some residual unused air raid precautions equipment in Big Bell following both the end of the war in Europe and the approaching Japanese surrender. The Hospital Board agreed to accept and store this equipment, though this does not clarify the functional status of the hospital [129].

4.8. 1946

The reopening date of the Big Bell Hospital is elusive, but it was clearly open by May 1946, having been closed for over two years. A Mr E. J. Wade had a bad accident whilst working at his mine. He put in an explosive shot, and when it did not go off, like miners everywhere he decided unwisely to see what had happened without waiting the prescribed time. While he was down the mine the shot exploded and blew him against the wall. When he was brought to the surface it was found that he had a fractured leg. He was taken to Big Bell Hospital, where he was reported as usual to be progressing satisfactorily [130].

The following month the Big Bell Hospital advertised for the service of two sisters, double or single certificated, with applications to the matron. [131]

Anne Paterson was born at the Big Bell Hospital on 3rd August, a daughter for Georgie and Pat Paterson [132].

4.9. 1947

J. P. Meehan died in the Big Bell Hospital. His age and diagnosis were not stated but thanks were given to Dr. Godby, Mrs. Godby, the matron, and staff by his sons and daughter for their kindness and attention during his terminal illness [133].

Richard Maxwell Nancarrow was born at the Big Bell Hospital on 11th December, a son for to Isobel and Blue (Bill) Nancarrow [134].

In February 1947, the Lotteries Commission reported a donation, amongst many others, of £33/10/- to the Big Bell Hospital [135].

A small child died in the Big Bell Hospital, though no name, age, sex or diagnosis were specified. A family were travelling to Port Hedland when the child became ill, so the mother dismounted at Cue to go to the hospital, while the father continued on the train

with a small son. Sadly, another of their children had died a few months earlier. [136].

A woman in Big Bell Hospital was in a critical but unspecified condition dependent on an immediate transfusion of a rare blood group and plasma. A Dragonfly plane chartered from Airlines (W.A.) Ltd. took off from Perth containing blood of the rare group which had been donated the previous night by a member of the Red Cross Blood Transfusion Service [137].

Thora Pember died in the Big Bell Hospital, The cause and age were not stated but her husband, Mr L. Pember expressed his gratitude to the doctor and staff of Big Bell Hospital [138].

The engagement of Winifred Waterman, the Matron of Big Bell Hospital, the youngest daughter of Mr. and Mrs. W. Waterman of Glen Forrest, to Murray Wade, elder son of Mrs. A. Wade. of Busselton, was announced. The previous published Matron of Big Bell Hospital, Miss Doyle had departed to assume the position of matron at the Wiluna Hospital, as the Big Bell Hospital has been closed down in 1943. [139]

Renee Eileen Florence Tregear died suddenly of an unspecified diagnosis in the Big Bell Hospital to the grief of many relatives and friends [140].

Carrolynn Cannon was born in the Big Bell Hospital on 28th April, a daughter for Olga and Jack Cannon [141].

Two patients injured in mining accidents were admitted to the Big Bell Hospital in May 1947, but details of names, age and injuries were not published. However it was felt they may require penicillin and hospital stocks were low. Therefore a consignment of six million units was arranged by the Medical Department and left for Big Bell aboard the Perth to Port Hedland Rapide flight of Airlines (W.A.) which was be diverted from its usual route to make a brief landing at Cue to deliver that consignment of penicillin to the Big Bell Hospital.

As is well known, the Scottish physician, Alexander Fleming at St Mary's Hospital in London in 1928 was the first to show that the *Penicillium rubens* mould appeared to kill a bacterial culture of *Staphylococcus aureus*. In 1940, the Australian scientist Howard Florey and a team of researchers were able to produce more concentrated penicillin which was used in 1941 to treat a policeman with a severe face infection. He improved, but then died when supplies of penicillin ran out. The first successful use of pure penicillin was when Fleming treated Harry Lambert of fatal infection of the nervous system (streptococcal meningitis) in 1942.

In the next few years American Laboratories took over developing and manufacturing industrial quantities of penicillin inspired by WW2 and the imminent D-Day invasion, such that by 1945, over six hundred billion units were being manufactured annually.

The six megaunits of penicillin sent to Big Bell Hospital is equivalent to 3,600mg, perhaps seen today as adequate for one patient for

one day's dosage, hopefully their infections were not too severe! [142].

Owing to a shortage of blood plasma at the Big Bell Hospital, an Anson of Airlines (W.A.) was diverted from its usual route to Wittenoom Gorge to deliver a supply of plasma in a specially-packed container from the Red Cross in Maylands to Big Bell [143].

Blood transfusions have a history dating back over half a millennium. The Spanish conquistadors witnessed human to human blood transfusions performed by the Incas as early as the 1500s where the high prevalence of type O blood among Indigenous people of the Andean region reduced the risk of adverse side effects.

The first animal to human blood transfusion from were administered by Dr. Jean-Baptiste Denys, eminent physician to King Louis XIV of France. In 1667 he transfused the blood of a sheep into a 15-year-old boy, who survived the transfusion. Denys performed another transfusion into a labourer, who also survived. Survival was probably thanks to the small volume of blood that was transfused into these people.

Denys's third patient to undergo a blood transfusion was the Swedish Baron Gustaf Bonde. He received two transfusions, but after the second he died. Denys also transfused Antoine Mauroy with calf's blood, and after third transfusion he also died. The first human to human blood transfusion for the treatment of haemorrhage was performed by British obstetrician, Dr. James Blundell in London in 1818. When confronted with a patient suffering a severe postpartum haemorrhage, Blundell extracted four ounces of blood from the patient's husband's arm, and successfully transfused this into his wife.

During the years 1825 and 1830, Blundell published the result of ten transfusions, five of which were beneficial. He also invented a number of instruments for the transfusion of blood, making a substantial amount of money from this endeavour equivalent to over \$70 million AUD.

The discovery of the three human blood groups (O, A, and B) in 1901, by the Austrian Karl Landsteiner enabled scientific cross-matching and much safer blood transfusions. This was further improved by the discovery in 1939-1940 of the Rhesus (Rh) blood group system.

Landsteiner, Florey and Fleming all won Nobel Prizes in Medicine and their work benefited patients in Big Bell Hospital within a few short years [144].

The Big Bell Hospital received a donation of £164 from the Lotteries Commission amongst its distribution of £8847/13/2 to many worthy causes [145].

Bert and Kath Bastian's son was stillborn at Big Bell Hospital on 12th October 12 [146].

Lorraine Dawn Henderson was born at the Big Bell Hospital on 26th October 26, a daughter for Eileen and Don Henderson [147].

4.10. 1948

Helen Alice Grant was born at the Big Bell Hospital on 1st February, a daughter for Owen and Minnie (nee Stewart) Grant [148].

Ailsa Winifred Stone was born at the Big Bell Hospital on 18th April, a daughter for Murray and Nurse Win (nee Waterman) Stone [149].

Robert Edward Atkins was born at the Big Bell Hospital on 5th June, a son for Betty (nee Walker and Eddie Atkins [150].

Mary Winsome Atkinson was born at the Big Bell Hospital on 2nd July 2, a daughter for Mr. and Mrs L. C. Atkinson [151].

Eileen McGuinness died at the Big Bell Hospital on 8th July, her age and diagnosis were not published [152].

Kenneth William Sturrock was born at the Big Bell Hospital on 5th August 5, a son for Mavis and Ken Sturrock. [153].

Margaret Cecelia Bowman was born at the Big Bell Hospital on 31st July, a daughter for Violet (nee Dressler) and Arthur Bowman [154].

Anne Rutter was born at the Big Bell Hospital on 5th August, a daughter for Mr. and Mrs. H. Rutter [155].

Ms Scarpf was born at the Big Bell Hospital on 13th October a daughter for Elaine (nee Sampson and Noel Scarpf, a sister for Richard [156].

Dawn Sylvia Harris was born at the Big Bell Hospital on 28th October, a daughter for Pearl and Lal Harris, and the ninth baby of the year for the Big Bell Hospital [157].

The Big Bell Hospital Board invited applications from qualified Medical Practitioners for appointment as Medical Officer to the Big Bell Hospital. They noted that a comfortable residence at a nominal rental was provided for the use of the Medical Officer by Big Bell Mines Limited [158].

Ivan Dheevich, a sixty-one year old miner, was admitted to the Big Bell Hospital, two months previously with a fractured left hip following a truck accident underground in the Big Bell mine. He was transferred to Royal Perth Hospital presumably with failure to unite or perhaps infection [159].

Big Bell Hospital advertised for a Matron [160].

4.11. 1949

Robert John Allen was born at the Big Bell Hospital on 15th January, a son for Mr. and Mrs. Bob Allen [161].

Terence Norman Stanton was born at the Big Bell Hospital, on 20th January, a son for Phyl and Jerry [162].

The Lotteries Commission donations included £7/13/- for the Big Bell Hospital from a total of donations totalling £ 16.46314/7 [163].

Mrs. Ivy Pearce commenced nursing at the Big Bell Hospital and apologised as an abundance of overtime left no time to reply to

her many friends and well-wishers. This is a curious event as the 'Marriage Bar' was in place in Australia until the 1960s [164].

Edward Atkins, a miner at the Big Bell Mine, was admitted to the Big Bell Hospital with a severe fracture of the skull sustained when he was struck by a piece of falling timber while working underground on the night shift. Owing to the severity of his injury a call was put through to the Flying Doctor Service at Kalgoorlie and arrangements were made for Atkins to be transferred to Perth to undergo specialist treatment. No further news was published so the outcome is uncertain [165].

Jack Smith, aged about thirty-four, was admitted to the Big Bell Hospital in a serious, condition following a shooting accident. Smith, who is employed on Nookawarra Station, was driving a vehicle about fifteen miles from the station in the company of another person when a rifle which was lying between them with the breech open and a bullet in the chamber was accidentally knocked. This closed the breech and discharged the bullet, which entered Smith's left chest and came out under the left shoulder blade. One week later it was deemed necessary to transfer Smith to Geraldton for X-ray examination, though his condition was reported to be satisfactory. There are no further reports published so an uneventful recovery was the desired outcome [166, 167].

The Lotteries Commission donations included £7/13/- for the Big Bell Hospital [168].

Alfred Benson Coles aged forty-nine died at the Big Bell Hospital on the afternoon of 30th April from a fractured skull and internal cerebral haemorrhage. He was fatally injured when riding between Cue and Day Dawn and being thrown to the ground on his head from his horse. Mr. L. J. Regan, the district coroner was notified [169].

The Lotteries Commission donations included £33 for the Big Bell Hospital out of total donations of £19, 396/16/8 since 2nd June, 1949 [170].

Big Bell Hospital invited applications from qualified nurses, either double certificated or single certificated, advising salary at award rates plus Goldfields allowance, in a modern hospital employing a full domestic staff [171].

A new-born baby in the Big Bell hospital believed to be suffering from rhesus incompatibility received a blood transfusion after the Red Cross chartered a Tiger Moth to deliver a refrigerated container of blood. The pilot had to battle strong headwinds all the way between Perth and Big Bell [172].

Lynnette Mary Smith was born at the Big Bell Hospital on 20th October. 1949, a daughter for Mary and Noel Smith. Sincerely thanks were expressed to Dr. Marshall, matron and staff [173].

Anthony William Ryan was born at the Big Bell Hospital, on 30th November, a son for Tommy and Pearl (nee Pearl Barham) Ryan. In 1949, four births and one death were reported [174].

The Lotteries Commission donations included £201/15/- for the Big Bell Hospital out of a total of £60,367/-[175].

4.12. 1950

Wayne Robert Regan was born at the Big Bell Hospital on 20th. January, a son for Cass and Bob Regan [176].

Giovanni Pantarelli a thirty-year-old recent migrant from Italy, died in the Big Bell Hospital, from internal injuries sustained the previous night when a motor truck in which he was a passenger overturned. The victim was en route to Austin Downs station when the truck, driven by Giuseppe Di Paolo, failed to negotiate a bend in the road about a mile from Cue last night on the 'Big Bell Road. The injured man was immediately rushed to hospital to no avail. He left a widow and, small daughter in Italy [177].

James Henry Johns was born at the Big Bell Hospital, on 7 February, a son for Mary and Dick Johns. 178

Antonio Eadigiacommo, an Italian migrant aged forty-eight died in the Big Bell hospital, as a result of injuries sustained in an accident at the Mountain View gold mine, Day Dawn, on March 15.

Eadigiacommo was hit by a bucket which was carrying ore while working at the mine. He fell to one side and dropped about sixty feet down a shaft. He was taken to hospital suffering from severe and ultimately fatal head injuries.

His relatives in Italy will be contacted [179].

Lorna Jones died in the Big Bell Hospital. her age and diagnosis were not published but she was described as 'our dear pal, a dear little friend, best little pupil ever,' implying a school-girl [180].

Lesley May Stemp was born in the Big Bell Hospital on 9th April, a daughter for Mr. and Mrs. John Stemp [181].

Claire Theresa Spencer was born at the Big Bell Hospital on 9th May, a daughter for Mr. and Mrs. Archie Spencer [182].

Cheryl Gaye Long was born at the Big Bell Hospital on 8th July, a daughter for Joan (nee Ryan) and Harry (Mick) Long [183].

Joseph William Armstrong died in the Big Bell Hospital. Age and diagnosis were not specified though his death notice mentioned five grand-children [184].

The Lotteries Commission donated £14,000 to Big Bell Hospital, from total donations of £36,563/8/9 [185].

Mrs Cardell Oliver, the State Minister for Health, approved financial assistance towards the installation of a cooling system at the Big Bell Hospital [186].

Dame Annie Florence Gillies Cardell-Oliver, DBE (née Wilson; 11th May 1876-12th January 1965) became the first woman in Australia to be appointed to a cabinet or ministry when she was made the Western Australian Minister for Health, Supply and Shipping in 1949.

For many years until 2011, she was the longest-serving female State Parliamentarian in Western Australia, serving in parliament

from 15 February 1936 to 7 April 1956.

Her second husband, Arthur Cardell-Oliver, was a doctor who served in England as an honorary captain in the Army Medical Corps Reserve. Subsequently he set up a medical practice in South Melbourne. Both Arthur and Annie are buried in St Columb Minor Churchyard, Newquay, Cornwall.

A daughter for Georgie and Pat Paterson was born at the Big Bell Hospital [187].

4.13. 1951

Patricia Ann Murphy was born at the Big Bell Hospital on 27th January, a daughter for Betty and Reuben Murphy [188].

George Edward Swain died in the Big Bell Hospital. His age and diagnosis were not published though he left a wife and three children [189].

Peter Munroe Scott was born at the Big Bell Hospital, on 6th January, a son for John and Jean Scott [190].

A boy was born at Big Bell Hospital on 10th February, a son for Ailsa and George Borg [191].

The Lotteries Commission approved a grant of £170 to the Big Bell Hospital out of total grants of £8,625/10/11 [192].

An unnamed relative of Mrs. D. Swain and Family died in the Big Bell Hospital of an unpublished disease, but the family expressed their sincere thanks for all the floral tributes, telegrams, cards and personal expressions of sympathy in their recent sad bereavement, especially thanking Dr. Marshall, matron, and sisters of the hospital [193].

Trevor Wellman Turner was born at the Big Bell Hospital on 8th February, a son for Ethel and Fred Turner [194].

Mrs. Cardell-Oliver, the Minister for Health, approved the expenditure of transferring materials from the closed Reedy Hospital to Big Bell Hospital to provide additional staff accommodation [195].

Lauri Fassi a forty-two-year-old miner, was admitted to the Big Bell Hospital with a compound fracture of his left leg sustained when a huge rock rolled on him while working at the Big Bell Mine. Following medical treatment his condition was reported to be favourable. That era of surgical sterility and antibiotics now permitted surgical fracture repair without amputation [196].

Maureen Dorothy Triffett was born at the Big Bell Hospital on 13th March, a daughter to Dot and Ted Triffett [197].

Don Berry, a twelve-year-old was admitted to the Big Bell hospital with a fractured leg sustained when he was walking along the railing of his home veranda and fell. However, the fracture could not be set with the limited equipment available there, so he had to be flown to Perth by Dove aircraft. and admitted to the Princess Margaret Hospital to place his leg in a Hamilton-Russell extension sling, indicating that the fracture was trochanteric.

This was not the first time Don has been in hospital. Last year he

was trying to open a bottle of “home-brew” ginger beer when the top flew off gashing his chin, knocking out one tooth and loosening another leaving a scar. Apparently, Don regarded his stays in hospital as a holiday! [198].

Francis Robert Salmon was born at the Big Bell Hospital on 3rd April, a son for Rona (nee Martin) and Phil Salmon [199].

Allan Molloy, a two and a half-year-old boy was certified deceased on arrival at the Big Bell Hospital, fatally injured when he apparently fell head-first into a wastewater drain at the home of his parents at Big Bell to-day. The child was missed by his parents, and Mrs. Molloy found him with his feet protruding from a drum sunk level with the ground. An autopsy was to be held [200].

Paul Beevor Steele was born at the Big Bell Hospital on 4th June, a son for Jean and Reg Steele [201].

Penelope Eleanor Clarkson was born in the Big Bell Hospital on 7th June, a daughter for Thelma and Jack Clarkson [202].

Dame Florence Cardell, the Minister for Health, approved of an additional £282 funding for the Big Bell Hospital for the financial year 1950-51 [203].

George Vincent McGowan, a twenty-two year-old assistant welder at Big Bell was admitted to the Big Bell Hospital suffering from a possible rupture of a kidney sustained when he fell from the pillion seat of a motorcycle when it skidded on a part of the road which had been severely damaged by heavy rains about ten miles from Cue.

Owing to the complexity of the trauma he was transferred to the Royal Perth Hospital. Because the Big Bell airstrip was waterlogged he was taken in an ambulance to Cue, flown in a chartered aircraft to Guildford Airport and driven to the Royal Perth Hospital in a St. John ambulance [204].

Mrs. W. Pigden was admitted to the Big Bell Hospital having sustained a gunshot injury to her in the calf. While cleaning the bathroom, a 22-calibre rifle fell off a rack and discharged, wounding her in the calf. Her condition was reported to be favourable [205].

Alexander Myles Sexton, a twenty-four year old single miner was admitted to the Big Bell Hospital suffering from a bullet wound in his forehead but died an hour later. Sexton was seen sitting on the back steps of the flat where he lived and was apparently cleaning his rifle. In the kitchen, only a few feet away, several women were talking. They heard a shot and found Mr. Sexton with a bullet wound in the centre of his forehead. Subsequently Mr. L. M. Sweet, the Acting-Coroner, delivered an inquest verdict of suicide through a self-inflicted gunshot wound [206, 207].

Mr L. Aldus died in the Big Bell Hospital. His age and diagnosis were not specified, but his wife and family thanked all for their expressions of sympathy. They also thanked Dr Marshall and all the hospital staff for their care and attention [208].

Dame Florence Cardell, the Minister for Health approved of financial assistance from the Lotteries Commission in the provision of improvements or amenities for several hospitals including Big Bell Hospital [209].

The Lotteries Commission approved a grant of £30 to the Big Bell Hospital out of total grants since 31st July of £43,767/5/3 [210].

Big Bell Hospital Board invited immediate applications from duly qualified nurses preferably with double certificates, for vacancies at the Big Bell Hospital. Salaries at award rates plus the Goldfield allowance were offered. This was the eleventh time nursing vacancies were offered in 1951 indicating the problem of staffing remote areas [211].

4.14. 1952

Robert Warren Gray, aged fourteen was admitted to the Big Bell Hospital suffering from a gunshot wound in the back sustained in a shooting accident while on a kangaroo hunt. He was later flown to Perth for further treatment at the Royal Perth Hospital [212].

William Anglesby was admitted to the Big Bell Hospital suffering from a lacerated scalp, shock and a fractured right wrist sustained when a motorcycle he was riding collided head-on with a motor car [213].

Michael John Turner was born at the Big Bell Hospital, another son for Ethel and Fred Turner and a brother for Trevor Wellman Turner was born at the Big Bell Hospital on 8th February 1951 [214].

Bruce Hicks, a pastoralist aged about thirty was admitted to the Big Bell Hospital with severe lacerations of the mouth and face having fallen off the balcony of the Murchison Club Hotel, Cue at midnight, ironically striking his head on his own parked motor wagon. About the same time, Maurice Oakley, a railway employee, was admitted to the hospital with severe abrasions, which he received when he fell from a moving vehicle on to a gravel roadway [215].

J. P. McCoy, was admitted to the Big Bell Hospital with severe abrasions sustained when he was thrown from his motorcycle on the Cue-Berringarra road [216]

Christine Kay Johnson was born at the Big Bell Hospital on 13th May, a daughter for Connie and Ken Johnson. [217].

Desda Faye Ardagh was born at the Big Bell Hospital on 17th May, a daughter for Coral (nee Oldfield) and Keith Ardagh [218].

James Ritchie, a thirty year old shearer was admitted to the Big Bell Hospital with unspecified but severe injuries sustained when a motor car carrying four shearers overturned on the Cue-Big Bell Road. The other three men escaped with cuts and bruises, but Ritchie was on the danger list [219].

Bozo Vucak, a thirty-eight year old single miner, was admitted to the Big Bell Hospital with facial lacerations caused by a premature explosion at the Big Bell mine. That evening his condition was

satisfactory [220].

Russel Peter Canestrini was born at the Big Bell Hospital on 12th Sept, a son for Kath and Lew Canestrini [221].

The recent death of Mr. W. M. Marshall, the state member of parliament for Murchison was followed by a selection ballot conducted by the Australian Labour Party for a candidate to contest the vacant seat. Mr. F. M. O'Brien was declared elected with a majority of votes cast. He had previously worked at the Big Bell Mine and had some acquaintance with medical matters having been a member of the Big Bell Hospital Board [222].

Patricia Beryl Lodge was born in the Big Bell Hospital on 28th October, a daughter for Audrey and Bob Lodge. [223].

A daughter for Betty and Eddie Atkins was born at the Big Bell Hospital. Her brother, Robert Edward Atkins had been born at the Big Bell Hospital on 5th June 1948.

During 1952 there were six published births, three motor vehicle accidents and one each of a gunshot wound and a mining accident [224].

4.15. 1953

Staff recruitment in remote hospitals was a problem seventy years ago and remains so today when real estate agency is more profitable. The Big Bell Hospital advertised for three nursing sisters, preferably with double certificate, offering excellent conditions and amenities, with applications to the matron [225].

Lynette Kaye Garrett was born in the Big Bell Hospital on 16th February, a daughter for Thelma and Jack Garrett [226].

Matron Bancroft of the Big Bell Hospital requested urgent donations of medicine bottles, suggesting it was an opportunity to clear out the domestic medicine chest and do the hospital a good turn at the same time [227].

A typical example of the hours of work intermittently expected of professional hospital staff occurred when Matron Hanlon of Mount Magnet Hospital had to remain on duty from Friday night to Monday night to deal with a serious case because of the lack of another trained sister. Then when a patient had to be transferred to Big Bell Hospital, and required a trained accompanying person, the Matron left at 5 a.m. on the Tuesday morning in the ambulance for the seventy mile trip to Big Bell, arriving back at Mt. Magnet about midday. Matron Hanlon had worked for over four days with only a few hours break in total [228]

Mrs. Hooper and her nine-year-old daughter Justine were admitted to the Wiluna Hospital with small puncture wounds near the back of both legs. Sustained in an explosion, believed to have been caused by a shotgun cartridge, in the kitchen stove of a house in Wiluna. In the absence of Dr. Eksteins, of Meekatharra, the flying doctor aircraft stationed at Meekatharra was due to convey the two patients to the Big Bell Hospital later that night [229].

Some time off was also permitted! Miss Mary Bancroft, matron of Big Bell Hospital, won the Mt. Magnet Golf Club Lady Members eighteen-hole flag competition on 17th June. A thirty-six handicapper, she carded a hundred and two, six strokes better than her handicap [230].

Charles Donald Allen, a twenty-eight year old single male, was admitted to the Big Bell Hospital an injury to his right hand, sustained when it became accidentally caught in the engine fan of a post-boring machine while working at the Meka station. In 1953, there was only one recorded birth and three admissions with accidents [231].

Harold John Parker was born in the Big Bell Hospital on 7th September, a son for Bid and Harold Parker [232].

Big Bell Hospital advertised that a matron was urgently required to work with excellent conditions and staff [233].

Sandra Louise Lush was born in the Big Bell Hospital on 25th September, a daughter for Norma (nee Phillips) and Hal Lush [234].

4.16. 1954

Big Bell Hospital advertised again for a matron, the first of eight such advertisements in the next half year, indicating the lack of appeal of remote positions on the pay scale offered to expert professionals [235].

Mrs. Elizabeth Blanch Baxter, age seventy-five, died in the Big Bell Hospital having recently suffered a stroke [236].

W. Clinch was admitted to the Big Bell Hospital with a probable femoral fracture. A tipper at the Big Bell Mine bumped him as he was doing repair work at the top of a ladderway and he fell forty feet down a mine shaft [237].

Herman Fusz, a grizzleyman working on the 1050 level of the Big Bell Mine, was admitted to the Big Bell Hospital having sustained a broken and otherwise severely injured leg when a large stone fell and pinned him between the grizzley bars. A grizzle is a grate to impede the flow of rocks falling down a shaft following blasting. The bars were cut with an oxytorch in the presence of the doctor and a first aid man. He was subsequently flown to Perth for specialist management [238].

The Big Bell Hospital Board passed a resolution that the subscribers of Big Bell Hospital should become members of the Goldfields Hospital Fund, as it had advantages over the old scheme. The Goldfields Hospital Fund was founded in Kalgoorlie in 1953 and subsequently was absorbed into HBF in 2016 [239].

Robina Charlotte Gibbings, age sixty-five, died in the Big Bell Hospital of an unspecified disease. Her husband, the late Cecil Theodore Gibbings was killed in action while serving as a captain with the 28th Battalion of the A.I.F. at Pozieres, in 1916 leaving her a widow for thirty-eight years [240].

Russell Frederick Turner was born at Big Bell Hospital on 3rd

May, a third son in three years for Ethel and Fred Turner and a brother for Trevor and Michael [241].

Mrs. Nancy Ogden to was admitted to the Big Bell Hospital with an injured foot sustained when a taxi in which she was riding overturned on the main road between Day Dawn and Cue. Her foot was trapped under the vehicle and shortly released by Constable Gilchrist and some railway employees lifting the vehicle. Mark Hilburn, her fellow passenger in the taxi, was also taken to the Big Bell Hospital, both suffering from shock. The taxi driver Laurence Spencer Branch was shaken up and the car which was lying on its side sustained extensive damage [242, 243].

Geraldine McKinnon died in the Big Bell Hospital, she was well remembered by her extensive family and many friends. Her age and diagnosis were not stated [244].

Ian Pead, a nineteen-year-old railway employee, was admitted to the Big Bell Hospital suffering from shock and abrasions sustained when his motorcycle struck a kangaroo [245].

Mr. E. M. Schmidt died in the Big Bell Hospital though his age and diagnosis were not published. Gratitude was expressed to the doctor, matron and staff for their kind attention [246].

Peter Roe of Mt. Magnet was admitted to the Big Bell Hospital following a mining accident. The nature of his injuries was not specified but he was reported to be making a good recovery [247].

Mrs. Elizabeth Booy died in the Big Bell Hospital. Her age and diagnosis were not specified but her family expressed gratitude to Dr. Foster, the matron and staff [248, 249].

Mrs Gillespie was admitted briefly to the Big Bell Hospital and then discharged, however her age and diagnosis were not published [250].

4.17. 1955

Big Bell mine closed in 1955. In January there were about a hundred men remaining on the mine for salvage and cleaning up. Eighty men had been paid off the previous week and the train out of Big Bell on the previous Friday had been crowded with people leaving the town and the mine. Many houses were now being dismantled at Big Bell.

The Postmaster Bob Kerr was about to leave Big Bell as the post office went to a "non-official" status from 1st February. Mr. Gordon Anderson, Assistant Manager of the Big Bell mines, was also about to leave with Mrs. Anderson to take a position as manager of the Kathleen Uranium Mine. Mary Kathleen in Queensland is another fascinating, deserted, atmospheric ghost town.

Mr. Bert Cousins, of the Club Hotel, Cue, was admitted to the Big Bell Hospital with a serious but unspecified condition. It was proposed that he should be flown to Perth the following day for further medical attention [251].

Sister J. Boyd, who until recently was acting matron at the Big Bell hospital, departed to spend time with her family and tour the

Southwest [252].

Ronald D. Poletti, a railway employee was admitted to the Big Bell Hospital in a serious condition with a gunshot wound through the upper part of the body. He had been carrying a loaded gun while cycling when it discharged.

This is the final entry in Trove Newspapers under the search term 'Big Bell Hospital' thus the hospital closes with a bang, not a whimper!

Between 1941 and 1955 the Big Bell Hospital recorded fifty-two births including one pair of twins and one stillbirth, a reflection of the many young families resident in town, thirty-one deaths including three accidental deaths in the mines and twenty non-fatal accidents, some occurring in the mines [253].

The Big Bell Mine had yet another fatality to claim, Rodney George Criddle, a Jumbo operator at Big Bell, died and another man Anthony John Hyde was injured on 2nd September 2000 in an underground rock fall [254].

5. Conclusion

The Big Bell Hospital had a short lifespan from 1941-1955. It lived and died with the Big Bell Mine. Births outnumbered deaths. Diagnoses were mostly not published in the cases of admissions and deaths without trauma. Other hospitals of a similar era recorded monthly admissions, discharges and deaths with diagnoses recorded more frequently, thus limiting available data for interest and analysis in this paper [255-257].

All fatal and non-fatal accidents, whether in the mines, on the roads, or elsewhere were deemed accidental with no blame attached to any company or individual. The concept of compensation for widows and families was yet to come.

Infectious diseases were common in the mining area in the half century before Big Bell Hospital opened and the scourge of mines in the second half of the nineteenth century. In Kalgoorlie in the 1880s some two thirds of inpatients had typhoid with nearly one in five dying of that disease [258, 259].

In 1894, when Cue Hospital had been opened for four years, Sister May of the Sisters of the People commenced a nursing outreach service. Nurses travelled to the more remote mining areas where typhoid, dysentery, influenza and pneumonia were prevalent with significant morbidity and mortality in spite of the best nursing care of the period [260].

In 1916, Mr. A. B. Smith, Mining Registrar and Clerk of Courts at Cue, was seriously ill in Cue Hospital with enteric fever (typhoid), while Mr. C. Cook who entered the hospital, also with typhoid, about the same time was reported to be progressing satisfactorily [261].

In 1921, an isolated case of diphtheria was reported in Cue [262].

In 1923 there were some reported cases of infectious diseases within the Geraldton Municipality, four with typhoid fever, one

with tuberculosis, and one with diphtheria

At the same time dengue was seen in the Meekatharra area [263].

Just before the Big Bell Hospital opened, there were outbreaks of Chicken pox and Measles amongst the school children of Big Bell, but strangely there were no publications of infectious disease cases being hospitalised in the Big Bell Hospital between 1941 and 1955. The advent of clean water, antibiotics and diphtheria inoculations would have made a significant difference [264].

As with rural and remote hospitals of the twenty-first century, medical and particularly nursing staff were difficult to recruit in adequate numbers. The big city offered better salaries and improved schooling for families. Nurses, all female at this time were mostly not employed once married, and the cities were more attractive for most young women. Higher salaries and shorter hours could be found in the business sector, though school achievement, tertiary training and community need and appreciation were and still are greater in the professional sphere.

The doctors, for the most part, worked long hours to the best of their ability and were appreciated by patients and families, but not all lived professional or private lives of unblemished virtue.

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