

# British Medical Journal

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JUNE 6, 1936



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Ceylon, Dimbula Planters' Assoc. ....							
City of London Hospital, E.2. ....							
Colchester, Essex County Hospital .....							
Connaught Hospital, E.17. ....							
Cowbridge Rural District .....							
Darlington Memorial Hospital .....							
Derbyshire Hosp. for Sick Children .....							
Devonport, Prince of Wales's Hosp. ....							
Doncaster County Borough .....							
Doncaster Royal Infirmary .....							
Dreadnought Hospital, S.E.10. ....							
Dublin, Children's Hospital .....							
Edinburgh Hospital for Women, etc. ....							
Edmonton Urban District Council .....							
Elizabeth Garrett Anderson Hosp. ....							
Glasgow, Royal Faculty .....							
Halifax Royal Infirmary .....							
Hamstead General Hosp., N.W.3. ....							
Hendon Borough .....							
Holt, Kelling Sanatorium .....							
Hospital for St. John & St. Elizabeth .....							
Hospital for Sick Children, W.C.1. ....							
Hosp. for Tropical Diseases, W.C.1. ....							
Huddersfield County Borough .....							
Hull Corporation Health Dept. ....							

£175 - £125 = £50. The full out-of-pocket cost—that is, £178 - £125 = £53—cannot be claimed, because £3 represents some additional capital sunk in the equipment of the practice. "C. C. M.'s" reference to the "financial year" presumably means the year for which the practice accounts are prepared, and not the Government year. If the accounts run to December 31st the above holds good, but only the first transaction will affect this year's return.

#### *Entertainment Expenses*

"G. T." has been refused a deduction for entertainment expenses, though he regards them as essential for the success of his practice, and understands that such deductions are allowed to local solicitors.

\*\* The statutory rule requires that no deduction shall be made for expenses not incurred "wholly and exclusively for the purposes of the profession." The sort of expense in question usually has some private element, and it is difficult to bring it within a strict construction of the rule. At the same time the same applies to, for example, car expenses, and if entertainment expenses are being allowed to solicitors we do not see why they should not be allowed to medical practitioners. It is a point on which the practice seems to vary somewhat, and an appeal to the local commissioners might succeed, though we do not advise an appeal to the High Court.

#### *Motor Car Replacement*

"T. E." bought a second-hand car in 1933 for £100; in 1935 he sold it for £75 and bought another second-hand car for £225. This car was similar in make and power to the first one, but was "younger" and had a pre-selector gear. The inspector requires £50 of the last purchase price to be treated as "capital expenditure."

\*\* On the figures the inspector's attitude is justified. The replacement of a car by a better one normally involves two elements: the cost of replacing one car by a similar one, plus the cost of raising the standard of the car equipment. Where second-hand cars are concerned the division of the total cost between these two elements is difficult, but as the second car cost "T. E." £75 more than the first the addition of £50 for capital improvement seems, *prima facie*, not unreasonable.

#### *Travelling Expenses*

"F. C. B. G." is in practice in a provincial town, and holds a hospital appointment in London, which involves travelling to town by train once a week. He has been refused the cost of that travelling.

\*\* The root difficulty is that the emoluments from the hospital appointment are assessable under Schedule E, separately from the profits of his practice, and under the strict rules applicable to Schedule E the cost of travelling to the place where the duties of the office held are carried out are not admissible. The only way round the difficulty would be to explain to the inspector of taxes that the hospital and private work are so interconnected that they could reasonably be treated as one, and assessable as a whole under Schedule D. If he will agree to make the assessment on that basis the legal bar to the deduction of the travelling expenses would disappear.

#### *Necessity for Formal Notice of Appeal*

"Q. Q." was assessed under Schedule E as an officer of a public authority. Only three-quarters of the superannuation deduction was allowed for in the assessment, and within a few days "Q. Q." called at the inspector's office and pointed out the fact. She was assured by a clerk that the restriction imposed was correct, and that she had no case for an amendment of the assessment. It has now been decided in a similar case that the full allowance should have been made, but the inspector refuses to reopen the matter.

\*\* The legal position is governed by Section 136 of the Income Tax Act, 1918, which requires as a condition of appealing against an assessment notice in writing to the inspector within twenty-one days after the date of the notice of assessment. On that basis "Q. Q." is not now entitled to have the assessment corrected, but we suggest that in the circumstances she might put her case in writing before the Chief Inspector of Taxes, Somerset House, W.C., and request redress on equitable grounds.

## LETTERS, NOTES, ETC.

### *A Foreign Body's Long Stay*

Dr. J. ALLAN WHITE (Saltcoats) writes: Fourteen years ago, when working as an apprentice riveter at the age of 18, "J. B." was struck on the point of the nose by a piece of metal which broke from his hammer. He was seen shortly afterwards in the ambulance room of the shipyard, but no piece of metal could be found and no mark of injury could be observed. His only symptom was the appearance next morning of two "black" eyes, the discoloration of which faded in a few days. Skiagrams were negative. During these fourteen years he has had no pain, no headaches, no disturbance of vision, and had, in fact, forgotten about the incident. Recently he came to my surgery and asked me to look at a black spot below the inner canthus of the left eye. This proved to be the point of a piece of metal, and under a local anaesthetic I incised the skin and removed from the soft tissues the piece of hammer lost fourteen years ago. It measured three-eighths of an inch long, one-quarter of an inch broad, and was about one-eighth of an inch in thickness, and weighed 20 grains. Surely this is a lengthy period for a foreign body to be retained in such an "active" part of the body without showing a single symptom!

### *In Aid of Grenfell's Work*

Many readers will learn with regret that by reason of serious heart trouble Sir Wilfred Grenfell, K.C.M.G., F.R.C.S., is no longer able to continue the active work on the Labrador coast to which he has given his life. Since the financial support of the medical and social service work has hitherto been chiefly obtained through his personal efforts and lectures, the problem of its continuance without curtailment of many of its activities has to be faced. The committee of the Grenfell Association is anxious to relieve him so far as possible of anxiety for the future of the work for which he has laboured so long. The association has received a generous offer from two of Sir Wilfred's personal friends—Miss Ruth Draper and Madame Adila Fachiri. Miss Draper will give a special *matinée* at the Haymarket Theatre on Wednesday, June 10th, at 2.45 p.m. Madame Fachiri and Madame Jelly D'Aranyi will give a recital at the American Women's Club (46, Grosvenor Street, W.) on Thursday, June 25th, at 9.15 p.m. All who are interested in Sir Wilfred Grenfell's medical work in Labrador and North Newfoundland are asked to help in making these two benefits a success by taking tickets themselves and making them known among their friends. Leaflets and tickets may be had from the secretary of the Grenfell Association, 66 Victoria Street, London, S.W.1 (Telephone: Victoria 7782).

### *"Surgeons Hall"*

*Surgeons Hall* is the title of a new magazine to be issued thrice a year (price 6d.). It is the journal of the School of Medicine of the Royal Colleges of Physicians and Surgeons of Edinburgh. A faculty committee and a student committee are jointly responsible for its production, and a plea is made for full co-operation by past and present students. The first number includes contributions by the dean (Dr. John Orr), Dr. Douglas Guthrie, Mr. Henry Wade, Dr. John Eason, Dr. W. F. T. Haultain, Mr. A. Pirie Watson, Dr. J. D. Comrie, and notes by members of the Editorial Board on varied aspects of student life, with a page of correspondence from Glasgow. The magazine is well produced, with an abundance of illustrations. The annual subscription for past students is 3s., post free to any part of the world.

### *Medical Golf*

The Shropshire Medical Golf Association spring meeting was held at the Wrekin Golf Club on Thursday, May 28th, when Dr. John Lavelle of Shrewsbury won the Shropshire Medical Challenge Bowl with the score of 78-14=64 net. Other scores were: Mr. A. D. Haydon, 83-14=71; Dr. R. O. Smyth, 91-20=71; Dr. M. S. Harker, 78-6=72. The foursomes were won by Dr. J. Lavelle and Dr. J. C. Davies, closely followed by Dr. A. V. Mackenzie and Dr. T. R. Elliott. The next meeting was fixed for Sunday, October 4th, 1936, at Church Stretton.

### *Vacancies*

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 53, 54, 55, 56, 57, 58, 59, and 63 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 60 and 61.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 315.