M.R.O. 1—77,006—8-6-37.

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(3) Initials of the Referencer_____

MADRAS RECORD OFFICE.

Government of Madras.

Financial **DEPARTMENT.**

G.O. No. 631	Press / Mis.
121-123.	
Dated 12-1-	1873.

Not to be folded or roughly handled

TR

Proceedings of the Madras Government, Financial Department,
12*th May* 1873.

Read the following papers :—

No. 121. Proceedings of the Board of Revenue, dated 19th February 1873, No. 1041 (Miscellaneous).

Read the following letter from A. MacGREGOR, Esq., President of the Local-Fund Boards, Malabar, to J. GROSE, Esq., Secretary to the Board of Revenue, dated Calicut, 30th January 1873, No. 536 :—

With reference to G. O., dated 26th July last, No. 989, I have the honour to state, for the information of Government, that, at a meeting held by the Calicut Local-Fund Board, it has been decided to allow batta and travelling allowance to the Civil Surgeon when inspecting the Dispensaries under their control (*vide* District Gazette, dated 16th November last, paragraph 11). The Tellicherry Circle Board do not see the necessity for such inspection as their Dispensary at Manantoddy is under the charge of a qualified medical practitioner.

Submitted to Government, with reference to G. O., 26th July 1872, No. 989.

(True Copy and Extract.)

(Signed) H. E. STOKES,
for *Secretary.*

No. 122. From Inspector-General E. G. BALFOUR, Inspector-General of Hospitals, Indian Medical Department, to the Hon. W. HUDLESTON, Chief Secretary to Government, Fort St. George, dated 2nd April 1873, No. 122.

I have the honour to acknowledge receipt of the G. O., No. 103, of 21st January 1873, in which I am requested to submit my opinion on the subject of Local-Fund Dispensaries, viz., as to—

I. Whether periodical inspection by a professional officer is necessary when there is a Local-Fund Committee competent to look after financial and ordinary sanitary arrangements?

II. If such inspection be required, what class of officers will be available for the purpose, and what arrangements should be made during their absence for the performance of their ordinary duties?

III. What sum per visit (in addition to travelling allowance) would be a fair remuneration for the trouble of inspection? And I was, likewise, required to explain the practice which has hitherto prevailed with reference to outlying Dispensaries.

2. Seeing that much that I can say on these points has relation to the last question, I have the honour to report to the Right Honourable the Governor in Council that, from the earliest times, the Superintending Surgeons, who have now merged into the rank of Deputy Inspectors-General of Hospitals, have annually, or

oftener, inspected every medical establishment within their respective circles of superintendence, and up to the year 1868, in which year separate Veterinary Inspecting Officers were appointed, the duty likewise devolved on them of inspecting the hospitals of the Veterinary Department.

3. In order to carry out the inspection duties, His Excellency the Commander-in-Chief annually publishes in General Orders the period fixed for inspecting, and likewise indicates the Military Hospitals which have to be visited; and, when circulating that General Order, I sent to each Administrative Circle a list of the Civil Hospitals, &c., which have also to be inspected, so that the visits of the Deputy Inspectors-General to the Civil and Military medical institutions are made simultaneously. This is the system throughout all British India, and it has been found to be a very effective mode of supervising the hospitals of the country. The Inspection Reports which Deputy Inspectors-General make on all the Military and Civil institutions are identical in form and character. They are despatched from each station before the Deputy Inspector-General leaves it; and, when they are received by me, the points needing immediate disposal are attended to, and with other less pressing matters are afterwards noticed in the Annual Reports from this office.

In the questions put to me I recognise the expression of a wish on the part of Government that the new Dispensaries springing up should receive due inspection; but it will be observed by the above explanation that they are, as yet, receiving equal care with that bestowed on other hospitals. I have, however, been sensible that the day must come when additional inspecting power will be required to attend to them, and in that consciousness I have been watching their increasing numbers.

4. On this point, the question that I have had under my consideration has been, whether the present agency of Deputy Inspectors-General should be extended, or whether some other form of superintendence for the dispensaries should be introduced, and I observe, in the documents sent to me for perusal, that a proposal has emanated from the Madura Local Committee to employ Zillah Surgeons to inspect the Local-Fund Dispensaries; and, in order to aid in the disposal of these points, and in connexion with question II. in the order under reply, I have the honour to mention that there are insurmountable difficulties preventing Zillah Surgeons inspecting the dispensaries in their respective ranges. I regard Zillah Surgeons as an Inspecting Agency very inferior to that which is now in operation in the Madras Presidency, as introducing, as regards Madras, an unusual kind of expenditure, and rendering necessary considerable modifications in the Madras mode of working the Zillah Hospitals. I am of opinion that, in the rearrangement of the circles of inspection which was carried out in the year 1867, and owing to the additions to the hospitals which have been made since then, the inspecting work has got beyond the power of the administrative officers to perform. I consider that the numbers of the Deputy Inspectors-General of Hospitals need to be increased, or some other Inspecting Agency created, and I may mention that in two of the Madras Circles, viz., in those of Hyderabad and Nagpore, the latter step has been adopted by the India Government.

Proceedings of the Madras Government, Financial Department,
12*th May* 1873.

5. With reference to the question in clause I., I am of opinion that periodical inspection by a professional officer is indispensably necessary, on professional, sanitary, and financial grounds. It is carried on everywhere in British India, and its continuance seems to me to be a duty. I believe that, as a rule, no Local-Fund Board, however constituted, can have the requisite professional information for the performance of such inspecting duties; any control over a professional man, on professional matters, would be inadmissible from any unprofessional body, and would be very unacceptable even from a professional man unless of standing and experience. I am also of opinion that the officers best suited for the inspection of the medical institutions of the country are the Deputy Inspectors-General of Hospitals, because they are already performing such duties; they have been specially selected from amongst the seniors of the Medical Department for their known capabilities; the existing regulations provide them with a mileage allowance while travelling; and, while absent, the Senior Executive Medical Officer takes charge of their office without extra cost to the State. So long as the number of hospitals in the respective circles of superintendence is such as to admit of their due inspection by the existing Deputy Inspectors-General of Hospitals, I think it would be advisable to continue them in the duty.

6. In Northern India, however, in the Punjab, in the North-West Provinces, in Rajpootanah, in the Central Provinces, and in the Berars, there has been created a class of Inspecting Agents, styled Inspectors-General of Hospitals or Inspectors-General of Dispensaries; in some Provinces performing that sole duty, at others, as in the marginal instances,* with other offices combined. Though bearing nearly the same military designation as the Inspectors-General of Hospitals, they are Officers of the grade of Surgeon or of Assistant Surgeon, who have been selected for the staff duty of inspecting dispensaries. A Surgeon of the Madras Army is so employed (*c*) in the Seonee Districts, and a Bombay Surgeon is an Inspector-General of Dispensaries in Rajpootana. There is, also, as will be observed, one of this class in the Central Provinces, and whilst I was serving in the Circle of the Hyderabad Subsidiary Force, the Hyderabad Contingent and Hyderabad Assigned Territories, the duty of inspecting the Berar Dispensaries was added on to the work of the Central Province Officer. The appointment afterwards seemed to me to be premature, that it was so, I think, is shown by the fact that the inspection of dispensaries in the Central Provinces and in the Berars has since been disconnected, and in the latter Province the offices of Inspector-General of Jails and Dispensaries and Superintendent of Vaccination have been combined into one appointment.

* (*a.*) Inspector-General of Prisons and Dispensaries, North-West Provinces.
(*b.*) Do. Jails do. do. and Superintendent of Vaccination, Hyderabad Assigned Districts.
(*c.*) Civil Surgeon, Seonee Districts, Officiating Inspector-General of Prisons and Dispensaries, Central Provinces.
(*d.*) Surgeon Rajpootana, Political Agency, Superintendent-General of Dispensaries and Vaccination, Rajpootana, and Sanitary Officer for Ajmere and Mhairwarah.

7. Entertaining these views, the question of a Superintending Agency seems to me to be limited to the inquiry, shall we introduce into Madras the system of Inspectors-General of Dispensaries now in operation in Northern India, or shall the

Madras system of superintendence by Deputy Inspectors-General of Hospitals be continued?

8. In answer to these two questions, I have the honour to submit as my opinion that the inspections should, as hitherto, be carried on by the Deputy Inspectors-General of Hospitals, so long as the institutions to be inspected can be overtaken, and when they increase beyond that capability, the numbers of the Deputy Inspectors-General should be increased. The pay of a Deputy Inspector-General of Hospitals and that of the Inspector-General of Dispensaries are not very different, the former being Rupees 1,800, and for the dispensaries is Rupees 800 to 1,500. The former are men of ripe experience selected from amongst the senior officers; they have annually, or twice a-year, to visit all the institutions in their circle, and if other than the Deputy Inspector-General be appointed, two officers will annually, or six monthly, be going over the same ground, and I have no doubt that the Department would prefer the continuance of the present system.

9. It is proper to mention that this subject was several times discussed with the Right Hon. Baron Napier, and at his request I submitted a memorandum which will doubtless have been alluded to in some of the Minutes on the Medical Department that Lord Napier wrote. And I then mentioned that the work in the Presidency and Northern Circle of superintendence has, from its first amalgamation, been quite beyond the inspecting power of any single officer to overtake. Though the rearrangement of districts was only made in the year 1867, so early as 1868 my predecessor reported to His Excellency the Commander-in-Chief that serious inconvenience to the public service would be occasioned by the annual visits of the Deputy Inspectors-General to the Northern Districts, and it was then arranged that these should be visited only once in two years; and I, therefore, submitted to Lord Napier that a Deputy Inspector-General was needed for the Northern Districts alone. In illustration of this I may mention that the late Deputy Inspector-General Blacklock left Madras on his northern tour on the 19th December 1871, and when, at my telegraphed request, after an absence of 179 days, he returned to Madras on the 14th June 1872, to attend to urgent duties here, he had not overtaken all the Northern Hospitals; so that some of them will be visited after an interval of four years. Also, the Circle of the Southern Districts with Malabar and Canara is so large that only a strong energetic man can possibly overtake it all. Deputy Inspector-General Johnston who is now there began his tour. The increase of work has been owing to the circumstance that, since 1850, the three ranges of the Presidency, the Centre Division, and the Northern Division have been formed into one circle, and that of Malabar and Canara has been added to the Southern Division.

1868, 17th Sept., No. 3372, to Adjutant-Genl.
" 29th " " 3442, from do.

10. I think that such over-burthening is to be regretted. I entertain a very high opinion of the value of inspection of all Departments, but for the Medical Department in particular, because great sanitary, professional, and financial advantages are to be obtained by it. When I formed the Office of Examiner of Medical Accounts, the savings that I effected, and with advantage to the public service, were

large—that in firewood alone was great. For sanitary and professional reasons, also, inspection should be continuous, but it should be thorough, and be performed by officers of rank and standing and of acknowledged ability; and it is on these grounds that I would recommend Deputy Inspectors-General to be the Inspecting Officers.

11. If, however, changes be contemplated in the constitution of the Indian Medical Department of a kind preventing action on the above recommendation, I think that the practice in force in Northern India of having a class of Medical Staff Officers styled Inspectors-General of Dispensaries is the one to be adopted for Madras.

12. I observe that the Local-Fund Boards who have expressed opinions have not been unanimous in their views* as to the form which inspection should take but as to the suggestion that Zillah Surgeons should inspect, the difficulty of annually relieving twenty-five Zillah Surgeons or Civil Surgeons or the nearest Commissioned Officers from their substantive charges would be insurmountable, and I need not, therefore, notice their objections to such a scheme further than to observe that it is unadvisable to make frequent changes in any medical charge, and that a Zillah Surgeon might possibly not be a good Inspecting Officer. The proposal for Zillah Surgeons to inspect cannot, in my opinion, be compared with my first recommendation of additional Deputy Inspectors-General, or with that of a separate inspecting class of the kind in operation in Northern India, which I recommend if, under present circumstances, my first be not deem suitable.

* No opinion.	Desirable. By Zillah Surgeons.	Desirable. By nearer Commissioned Officer or Medical Officer.	Continue Deputy Inspectors-General.	Unnecessary.	Yes, Inspecting Officer not named.
Trichinopoly. Vizagapatam. Ghooty.	Cuddapah. Chingleput.	Bellary. Sydapet.	S. Coimbatore. N. Chittoor.	Pennakondali.	Dindigul.

13. In connexion with question II., this is a proper occasion to attach, for each of the years 1869, 1870, and 1871, a statement showing the marginal points of information. I constructed these statements in order to ascertain how these institutions were working; to keep all the medical officers informed of the work in their respective hospitals, and permit each of them

	Highest.	Lowest.
Average stay in Hospital	37¾ days.	3 days.
Average cost of dieting each in-patient..	Rs. 5 8 9¼	Rs. 0 5 5½
Do. per in-patient..	„ 37 9 3¼	„ 2 9 11¾
Average cost of medicines for each patient...	„ 0 10 7¾	„ 0 0 0 1/16
Average cost of wines and spirits for each patient...	„ 2 3 11¼	„ 0 0 6½
The death-rate...	1 in 127	1 in 3·58

to compare the results in their own institution with those of others. I distributed these statements to all, and I am aware that they have been of great value. The improvements in the year 1871 over that of 1869, as shown by the figured statements, have been marked, but even in 1871 as will be observed there has been a very unnecessary diversity in every point that comes under a medical officer's care; the average stay in hospital has ranged from three days to thirty-seven days, the diet cost ranged per patient from 5½ Annas to Rupees 5-8-9¼; the total cost of each patient varied from Rupees 2½ to Rupees 37½; the cost per patient for medicines, ranging from Rupees 0-0-0$_{1\frac{1}{6}}$ to Rupees 0-10-7¾; the cost per patient of wines from Rupees 0-0-6½ to Rupees 2-3-11¼; many hospitals had no wine expenditure at all, and the death-rate ran from 1 in 3·58 to 1 in 127. These varying rates show, alike for the country, for the Medical Officers, and for the patients, the need for a constant, intelligent superintendence and systematic inspection, and the necessity, also, for some one Central Office into which the data relating to them could be collected and compiled. In my opinion, as at present constituted, this office ought to be that Central Institution. In that view, and as there is no Medical Examiner for Civil Hospitals, I had ordered all of them to send me their monthly accounts, and I had already effected reductions of unnecessary items of expenditure, and made improvements in forms. But, whilst so engaged, it was mentioned in G. O., No. 1373, of 10th October 1872, that there was no necessity for a further check on the expenditure incurred in the Civil Dispensaries under the control of the Local-Fund Boards, on which my efforts to improve their condition and bring them all up to a general standard of perfection were stopped. But the varied rates of charges and of mortality which prevail, as are shown in the attached statement, will explain to the Right Honourable the Governor in Council how desirous I have been to improve these civil institutions, and how much importance I attach to their inspection. For such a task the Local-Fund Committees are not qualified as they do not possess the necessary data. In letter, No. 14, of 23rd April 1868, from Her Majesty's Secretary of State, there was sent, for the report of the Government of India, a volume of suggestions in regard to Sanitary works required for improving sanitary stations, and in paragraph 4 of Sir Stafford Northcote's letter, when noticing the establishment of Medical Sanitary Inspections, he asked what organization was proposed to secure, under these officers, the health and cleanliness of towns and villages, and how the Government would satisfy themselves that the work is done. On receipt of a letter from the Government of India my observations were asked for on the volume of "suggestions;" and, on that part relating to inspection, I replied that "It is only by supervision and the inspection of supervisors that Government can ascertain that the work is done." I think that this view is applicable to every Department but for none more than the Medical, whose officers have varied work to perform, and are widely scattered throughout the country. But in the present constitution of the Madras Medical Establishment, every member of which belongs to the army, it is certainly essential that those of them who have been lent to the Civil Department should continue to be inspected as carefully as if serving in Military Hospitals; though, as will have been gathered from my previous remarks, in my opinion, in this country inspection of hospitals, whether Civil or Military, should forever be continued.

Proceedings of the Madras Government, Financial Department,
12th May 1873.

14. In the previous parts of this letter, I have submitted* to Government answers to the questions asked of me as to the scheme of inspection hitherto followed; as to the necessity for its continuance and as to the form in which it should be continued; and, as the subject is one of importance at this period of change, I have endeavoured to place the subject fully before Government. I have, however, the honour to submit, for favourable consideration, the urgency of the need for appointing a Deputy Inspector-General of Hospitals for the Northern Districts. The Southern Districts, Malabar and Canara, can be deferred for another year or two; but the state of the Northern Districts is pressing. If, however, circumstances do not permit of the appointment of a Deputy Inspector-General of Hospitals for the Northern Districts, the adoption of the plan in operation in Northern India is the sole alternative which I feel able to recommend. It is not in my belief practicable to mobilize Zillah Surgeons.

* Name of Circle.	No. of Hospitals.	Whether possessing an Inspector-General of Dispensaries.
Presidency and Northern Districts ..	128	No.
Southern District, Malabar and Canara ..	114	No.
Pegu and British Burmah	66	No.
Mysore Division, Mysore and Ceded Districts	70	No.
Hyderabad Subsidiary Force, Hyderabad Contingent, and Hyderabad Assigned Territories ...	57	Yes.
Nagpore Force and Central Provinces..	37	Yes.

15. If, however, for any reason neither of the above suggestions be for the present deemed practicable, I have the honour to ask the permission of Government at the close of this year to detail for four months a Medical Officer on the pay of his rank, with the usual travelling allowance for the inspection of the hospitals in the Northern Districts, only a portion of which has been visited since the year 1869-70, and the more remote and outlying the medical institutions are the more needed is inspection.

16. I have mentioned in paragraphs 12 and 14, that, in the existing constitution of the Madras Zillah Surgeoncies, it would not be practicable nor advisable to make the Zillah Surgeons Inspecting Officers. In Northern India, however, the Civil Surgeons do inspect outlying dispensaries. In the Punjab, for instance, there are 110 dispensaries, and there are 32 districts. Of the 110 dispensaries, 57 received in the year 1871, from the Zillah Surgeons, 275 visits, some of them only once in a-year, but seven of them were seen once monthly. I have no doubt but that the Madras Zillah Surgeons could not make frequent visits to the outlying dispensaries, and that their leaving their own charges, in most of which the marginal Departments receive their care, would be attended with very great inconvenience, even risk. It is a change that I am not able to recommend. The difficulty as regards the Jails would be almost insuperable because the Zillah Surgeons, as a rule, are the Jail Superintendents, and the Jail authorities

Civil Hospital.
Jail.
Revenue Officers and Establishment.
Judicial do. do.
Police.
Public Works.
Post-office.
Telegraph.

would find it impossible to replace them temporarily. Nevertheless, if it be deemed advisable so to utilize the services of the Zillah Surgeons, I think that they should inspect at least once a quarter; that they should receive the usual mileage allowance besides the authorized batta of Rupees 5 daily; and 20 Rupees for each dispensary inspected.

17. In the Punjab and other Northern Provinces there is, as I have before mentioned, an Inspector-General of Dispensaries. If an officer of that class be created in Madras, the Inspection Report should be sent to him with a duplicate to the President of the Local-Fund Board. If there be no such office in Madras the Inspection Report should still be in duplicate—one copy to the Deputy Inspector-General of the Circle for this office, and one copy to the Board. But for the Madras Presidency three Inspectors-General of Dispensaries would be needed.

Designation.	Salary. Rs.
Punjab, Inspector-General of Prisons and Dispensaries	1,500
North-Western Provinces do. do.	1,500
Oudh.	
Central Provinces do. do. ...	1,000
Hyderabad Assigned Territories do.	1,200
Vaccination and Sanitary Inspector	800
Seonee Civil Surgeon	

From Surgeon-Major T. E. P. MARTIN, Secretary to the Inspector-General, Indian Medical Department, Bombay, to the Secretary to the Inspector-General, Indian Medical Department, Fort St. George, dated Bombay, 31st March 1873, No. 1146.

In reply to your letter, No. 2161, dated 26th instant, I am desired to state that in this Presidency there is no officer designated "Inspector-General of Dispensaries," and Surgeon-Major Moore holds his appointment as such under the Bengal Government.

2. Under the rules published for the management of dispensaries in November 1871, page 104, quarterly sheets, Civil Surgeons are made the ex-officio Inspectors of Dispensaries in their districts. This, however, has lately been modified, it being found that complications arose as regards the duties and emoluments of Civil Surgeons when absent on such duty. The present ruling is that Civil Surgeons shall make such inspections only when their own duties can be arranged for without extra charge to Government; and that ordinarily all dispensaries should be visited by Deputy Inspectors-General of Hospitals in the course of their annual tours and by Superintendents of Vaccination.

From A. K. McLEOD, Esq., Secretary to the Inspector-General of Hospitals, Indian Medical Department, Calcutta, to the Secretary to the Inspector-General of Hospitals, Indian Medical Department, Fort St. George, dated Fort William, 7th April 1873, No. 37.

In reply to your letter, No. 2160, of the 26th March 1873, I have the honour by direction of the Inspector-General of Hospitals, Indian Medical Service, Calcutta, to state that the following Medical Officers are employed in this Presidency as Inspectors-General of Dispensaries:—

Surgeon W. Walker, Officiating Inspector-General of Dispensaries and Prisons, North-West Provinces.

Do. A. M. Dallas, Inspector-General of Prisons and Dispensaries in the Punjab.

Do. Barter (Madras Establishment), Officiating Inspector-General of Prisons and Dispensaries, Central Provinces.

Do. W. J. Moore (Bombay Establishment), Superintendent-General of Dispensaries and Vaccination, Rajpootana, and Sanitary Officer for Ajmere and Mhairwarah.

Do. R. S. Abbot, Inspector-General of Jails and Dispensaries, Superintendent of Vaccination and Sanitary Commissioner of Hyderabad.

Proceedings of the Madras Government, Financial Department,
12th May 1873.

No. 123. ORDER THEREON, 12th May 1873, No. 631.

The Government agree with the Inspector-General of Hospitals in opinion that there are insuperable objections in the way of employing Zillah Surgeons in the inspection of outlying dispensaries in the Local-Fund Circles.

2. The final disposal of the matter will be reserved for consideration along with other questions now before Government.

(True Extract.)

W. HUDLESTON,
Chief Secretary.

To the Inspector-General of Hospitals, Indian Medical Department.
„ Board of Revenue.

Exd. J. Wright.

Copy of 1873 Warrant.

FINANCIAL.

To

THE INSPR.-GENERAL OF HOSPITALS,
INDIAN MEDICAL DEPARTMENT,
&c.,
&c.,
&c.

Dated May, 12th.

Read.

Rect.

G. O., 12th May 1873, No. 631.

MAY.
Nos. 121—123.

Agreeing with the Inspector-General of Hospitals that it is objectionable to require Zillah Surgeons to supervise the Local-Fund Dispensaries, and reserving the matter therefore for further consideration.

6

2 April 1873

My dear Hudleston,

I send my report on the subject of inspection of Dispensaries.

Though raised in connection with Civil Dispensaries, owing to the work having hitherto been done by Military Dy Insprs General of Hospitals, it has been necessary to notice that class and the character of their work hitherto.

I think that I have mentioned every point that is necessary to say on the subject fully before Govt. but, if there is any matter unnoticed I can see you

Yours
Balfour

Fin R No 645 31

W. Ryland XVI/4/73

Dorsy

My dear Henderson,

Kindly add this
to the Appendices
to my letter No. 22 dated
2 June 1873
They are out in Nonsteg ulation
Provinces.

Yrs

Statement showing the average Stay in Hospital of each In-patient, in the year 1869, *in the Civil Hospitals of the Madras Presidency, the Stay ranging from* 11 *days in the Madras Female Orphan Asylum to* 156 *days at Edyengoody.*

Hospitals.	Total In-Patients treated.	Total Expenditure.	Rate per Patient.	Diet rate per Patient.	* Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Madras Female Orphan Asylum ...	249	983 9 1	2 15 2¼	.....	11
Cuddapah	395	10,333 5 4	26 2 6¾	1 10 0¾	12
Kamptee	345	4,438 9 4	12 14 3½	2 12 2¾	12
Madras Male Asylum	179	1,676 11 3	9 5 10½	.....	12
Tellicherry	159	2,712 14 10	17 0 11¾	2 0 2	12
Cocanada	229	1,679 2 7	7 5 3½	1 8 2⅓	13
Ghooty	107	1,632 12 4	15 4 2	0 13 9¾	13
Madras, Vepery	536	14,098 12 6	26 4 10½	9 6 9¼	13
Madras Native Infirmary ...	1,593	11,208 2 11	7 0 6¾	4 8 2⅓	14
Ootacamund	252	3,957 12 6	15 11 3¾	3 5 10½	14
Cochin	789	3,446 14 0	4 5 10¾	0 8 0¾	15
Coonoor	185	3,577 15 3	19 5 5	2 8 7⅓	15
Cuddalore	183	3,430 1 4	18 11 10¾	6 2 0⅓	15
Masulipatam	71	3,476 14 3	48 15 6¼	8 7 8½	15
Trichinopoly	228	5,775 2 11	25 5 3¼	2 12 3¾	15
Manargoody	224	19,139 0 3	85 7 0¾	1 6 2½	16
Adonie	52	1,594 5 2	30 10 6½	2 14 7	17
Chittoor	333	2,746 7 1	8 3 8	1 11 6¼	17
Madras General Hospital ...	2,773	97,404 5 0	35 2 0	10 7 7	17
Goodaloor	277	4,053 2 1	14 10 11⅓	2 5 11¾	17
Kurnool	183	3,024 0 6	16 8 4¾	2 8 3¾	17
Negapatam	150	2,035 7 11	13 9 1⅓	2 13 10¼	17
Raneepett	715	6,166 13 10	8 9 11¾	3 2 10½	17
Madras, Triplicane	444	8,474 9 2	19 1 4¼	4 11 4	17
Nellore	351	5,073 8 7	14 7 3¼	2 14 1¼	18
Palghaut	180	1,243 10 5	6 14 6¾	3 9 2	18
Ponani	98	1,167 7 9	11 11 4	1 5 2½	18
Madras Lying-in-Hospital—Midwifery cases	1,469	27,222 3 5	18 8 5¾	3 6 1	19
Ramnad	351	4,154 13 5	11 8 10	2 15 3¼	19
Salem	184	4,324 9 2	23 8 0¾	2 9 0¾	19
Madras Lying-in-Hospital—Dispensary	263	5,966 0 11	22 10 11½	9 7 6½	20
Madura	347	5,735 4 11	16 8 5⅓	3 14 6	21
Mercara	207	4,484 3 11	21 10 7¼	4 0 3⅓	21
Rajahmundry	187	2,881 11 0	15 6 6⅔	3 0 5	21
Palamcottah	306	8,298 7 7	27 1 10¾	3 6 8¼	22
Pollachy	241	4,468 4 6	18 8 7¾	2 2 2⅓	22
Chingleput	63	1,311 12 10	20 13 1¾	2 9 11½	23
Coimbatore	157	3,196 1 8	20 5 9¼	5 1 10⅓	23
Cuddalore, old Town	78	3,449 5 8	44 3 6¼	5 3 6	23
Bellary	192	2,972 7 6	15 7 8½	2 5 9½	24
Vellore	227	3,699 9 10	16 4 9	4 11 5⅓	24
Palliport Lazaretto	47	2,036 5 8	43 5 2¾	24 4 0½	25
Secunderabad	351	3,821 2 9	10 14 2	3 6 1⅓	25
Combaconum	190	4,692 5 2	23 15 0¾	2 11 6¾	26
Cumbum	14	998 5 8	71 4 11	.....	26
Tranquebar	138	5,509 12 8	39 14 9⅓	4 14 2⅓	26
Vizagapatam...	216	3,383 2 11	15 10 7¼	3 15 2¼	27
Conjeveram	88	3,113 14 5	35 6 1¾	4 0 0	29
Berhampore	157	3,582 1 2	22 13 0½	4 14 9	30
Palcondah	4	225 8 0	56 6 0	.....	30
Chicacole	139	2,109 6 7	15 2 9⅓	4 11 9½	31
Munjeri	204	1,710 8 5	8 6 1½	3 2 3½	33
Guntoor	74	1,894 11 9	25 9 8	3 9 1¾	34
Tinnevelly	21	1,731 12 2	82 7 5	3 12 10	35
Mangalore	172	2,847 1 4	16 8 10	4 8 10	36
Kimedy	85	1,112 6 11	3 1 4¾	5 3 7½	38
Madras Eye Infirmary... ...	237	15,291 8 0	64 8 4	14 13 9	40
Hospett	45	1,265 11 8	28 2 0½	3 5 10½	56
Calicut	433	3,878 3 2	8 12 11½	3 7 9¼	62
Calicut Leper and Small-pox Hospital	76	2,891 7 9	38 0 7¾	15 11 7¾	81

Statement showing the average Stay in Hospital of each In-patient, &c.—(Concluded).

Hospitals.	Total In-Patients treated.	Total Expenditure.	Rate per Patient.	Diet rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Madras Leper Hospital... ...	214	18,024 11 0	84 3 7½	44 6 2	148
Edeyangoody (formerly Seeveseshupuram)	7	513 5 8	73 7 8	.....	156
Madras Lunatic Asylum ...	189	50,058 15 11	264 13 9½	92 5 8⅓	229
Anantapoor	.....	104 7 6	.....	.....	...
Chellumbrum	.....	1,817 10 11	.....	.....	...
Dindigul	43	1,437 15 7	33 7 6¾	0 9 11	...
Kotagherry	.....	3,681 0 7	.....	.....	...
Madanapally...	.....	2,163 1 2	.....	.....	...
Madras, Black Town, N. Side ...	.....	1,733 14 11	.....	.....	...
Cocanada Seamens' Hospital ...	45	914 11 2	20 5 2½	8 12 9½	...
Mayaveram	.....	564 0 4	.....	.....	...
Nellore Branch	.....	4,364 14 9	.....	.....	...
Ongole	.....	122 6 11	.....	.....	...
Sheally	.....	680 3 7	.....	.....	...
Madras, Sydapett	.....	107 9 11	.....	.....	...
Tritrapundi	.....	244 13 3	.....	.....	...
Total...	18,747	4,59,133 15 6	24 7 10	6 1 10¾	23

Statement showing the average Cost of Dieting each In-patient in each Civil Hospital of the Madras Presidency in the year 1869,—*the Cost ranging from* 8 *Annas* 0¾ *Pie in Cochin to Rs.* 14-13-9 *Pie in the Madras Eye Infirmary.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	* Diet rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Cochin	789	3,446 14 0	4 5 10¾	0 8 0¾	15
Dindigul	43	1,437 15 7	33 7 6¾	0 9 11	...
Ghooty	107	1,632 12 4	15 4 2	0 13 9¾	13
Ponani	98	1,167 7 9	11 11 4	1 5 2½	18
Manargoody	224	19,139 0 3	85 7 0¾	1 6 2½	16
Cocanada	229	1,679 2 7	7 5 3½	1 8 2½	13
Cuddapah	395	10,333 5 4	26 2 6¾	1 10 0¾	12
Chittoor	333	2,746 7 1	8 3 8	1 11 6¼	17
Tellicherry	159	2,712 14 10	17 0 11¾	2 0 2	12
Pollachy	241	4,468 4 6	18 8 7¾	2 2 2½	22
Bellary	192	2,972 7 6	15 7 8½	2 5 9½	24
Goodaloor	277	4,053 2 1	14 10 1½	2 5 11¾	17
Kurnool	183	3,024 0 6	16 8 4¾	2 8 3¾	17
Coonoor	185	3,577 15 3	19 5 5	2 8 7½	15
Salem	184	4,324 9 2	23 8 0¾	2 9 0¾	19
Chingleput	63	1,311 12 10	20 13 1¾	2 9 11½	23
Combaconum...	196	4,692 5 2	23 15 0¾	2 11 6¾	26
Kamptee	345	4,438 9 4	12 14 3½	2 12 2¾	12
Trichinopoly	228	5,775 2 11	25 5 3¼	2 12 3¾	15
Negapatam	150	2,035 7 11	13 9 1¾	2 13 10¼	17
Nellore	351	5,073 8 7	14 7 3¼	2 14 1¼	18
Adonie	52	1,594 5 2	30 10 6½	2 14 7	17
Ramnad	351	4,154 13 5	11 8 10	2 15 3¼	19
Rajahmundry	187	2,881 11 0	15 6 6⅓	3 0 5	21
Munjeri	204	1,710 8 5	8 6 1½	3 2 3½	33
Raneepett	715	6,166 13 10	8 9 11¾	3 2 10½	17
Hospett	45	1,265 11 8	28 2 0½	3 5 10⅓	56
Ootacamund	252	3,957 12 6	15 11 3⅓	3 5 10⅓	14
Madras Lying-in-Hospital—Midwifery cases	1,469	27,222 3 5	18 8 5¾	3 6 1	19
Secunderabad	351	3,821 2 9	10 14 2	3 6 1⅓	25
Palamcottah	306	8,298 7 7	27 1 10⅓	3 6 8¼	22
Calicut	433	3,878 3 2	8 12 11½	3 7 9¾	62
Guntoor	74	1,894 11 9	25 9 8	3 9 1¾	34
Palghaut	180	1,243 10 5	6 14 6¾	3 9 2	18
Tinnevelly	21	1,731 12 2	82 7 5	3 12 10	35
Madura	347	5,735 4 11	16 8 5½	3 14 6	21
Vizagapatam	216	3,383 2 11	15 10 7¼	3 15 2¼	27
Conjeveram	88	3,113 14 5	35 6 1¾	4 0 0	29
Mercara	207	4,484 3 11	21 10 7¼	4 0 3⅓	21
Madras Native Infirmary ...	1,593	11,208 2 11	7 0 6¾	4 8 2⅓	14
Mangalore	172	2,847 1 4	16 8 10	4 8 10	36
Triplicane	444	8,474 9 2	19 1 4⅓	4 11 4	17
Vellore	227	3,699 9 10	16 4 9	4 11 5⅓	24
Chicacole	139	2,109 6 7	15 2 9½	4 11 9½	31
Tranquebar	138	5,509 12 8	39 14 9½	4 14 2⅓	26
Berhampore	157	3,582 1 2	22 13 0½	4 14 9	30
Coimbatore	157	3,196 1 8	20 5 9¼	5 1 10⅓	23
Cuddalore old Town	78	3,449 5 8	44 3 6½	5 3 6	23
Kimedy	85	1,112 6 11	3 1 4¾	5 3 7½	38
Cuddalore	183	3,430 1 4	18 11 10¾	6 2 0½	15
Masulipatam...	71	3,476 14 3	48 15 6¼	8 7 8⅓	15
Coconada Seamens' Hospital ...	45	914 11 2	20 5 2½	8 12 9½	...
Madras, Vepery	536	14,098 12 6	26 4 10½	9 6 9¼	13
Madras Lying-in-Hospital—Dispensary	263	5,966 0 11	22 10 11½	9 7 6½	20
Madras General Hospital ...	2,773	97,404 5 0	35 2 0	10 7 7	17
Madras Eye Infirmary... ...	237	15,291 8 0	64 8 4	14 13 9	40
Calicut Leper and Small-pox Hospital	76	2,891 7 9	38 0 7¾	15 11 7¾	81
Palliport Lazaretto	47	2,036 5 8	43 5 2¾	24 4 0½	125
Madras Leper Hospital... ...	214	18,024 11 0	84 3 7½	44 6 2	248
Madras Lunatic Asylum ...	189	50,058 15 11	264 13 9½	92 5 8⅓	29
Anantapoor	...	104 7 6	.....	.....	...
Chellumbrum	...	817 0 11	.....	.....	...
Cumbum	14	998 15 8	71 4 11	.....	26

Statement showing the average Cost of Dieting each In-patient, &c.—(Concluded.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Edeyangoody (formerly Seeveseshupuram)	7	514 5 8	73 7 8	.....	156
Kotagherry	...	3,681 0 7	.....	.....	...
Madanapally...	...	2,163 1 2	.....	.....	...
Madras, Black Town, N. Side ...	...	1,733 14 11	.....	.....	...
Madras Male Asylum	179	1,676 11 3	9 5 10½	.....	12
Madras Female Asylum ...	249	983 9 1	2 15 2½	.....	11
Mayaveram	...	564 0 4	.....	.....	...
Nellore Branch	...	4,364 14 9	.....	.....	...
Ongole	4	122 6 11	.....	.....	...
Palcondah	...	225 8 0	56 6 0	.....	30
Sheally	...	680 3 7	.....	.....	...
Madras, Sydapett	...	107 9 11	.....	.....	...
Tritrapundi	...	244 13 3	.....	.....	...
Total...	18,747	4,59,123 15 6	24 7 10	6 1 10¾	23

Statement showing the average Cost per In-patient in each Civil Hospital, in the Madras Presidency for the year 1869, excluding in this calculation the Out-patients on whom falls only a part of the cost for Medicines.

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet rate per Patient.	Average stay in Hospital
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Madras Female Orphan Asylum...	249	983 9 1	2 15 2¼	.....	11
Kimedy	85	1,112 6 11	3 1 4¾	5 3 7½	38
Cochin	789	3,446 14 0	4 5 10¾	0 8 0¾	15
Palghaut	180	1,243 10 5	6 14 6¾	3 9 2	18
Madras Native Infirmary ...	1,593	11,208 2 11	7 0 6¾	4 8 2½	14
Cocanada	229	1,679 2 7	7 5 3½	1 8 2⅓	13
Chittoor	333	2,746 7 1	8 3 8	1 11 6½	17
Munjeri	204	1,710 8 5	8 6 1½	3 2 3½	33
Raneepett	715	6,166 13 10	8 9 11¾	3 2 10½	17
Calicut	433	3,878 3 2	8 12 11½	3 7 9¼	62
Madras Male Asylum	179	1,676 11 3	9 5 10½	.....	12
Secunderabad	351	3,821 2 9	10 14 2	3 6 1⅓	25
Ramnad	351	4,154 13 5	11 8 10	2 15 3¼	19
Ponani	98	1,167 7 9	11 11 4	1 5 2½	18
Kamptee	345	4,438 9 4	12 14 3½	2 12 2¾	12
Negapatam	150	2,035 7 11	13 9 1⅓	2 13 10¼	17
Nellore	351	5,073 8 7	14 7 3½	2 14 1¼	18
Goodaloor	277	4,053 2 1	14 10 1⅓	2 5 11¾	17
Chicacole	139	2,109 6 7	15 2 9½	4 11 9½	31
Gooty	107	1,632 12 4	15 4 2	0 13 9¾	13
Bellary	192	2,972 7 6	15 7 8½	2 5 9⅓	24
Rajahmundry.	187	2,881 11 0	15 6 6⅓	3 0 5	21
Vizagapatam	216	3,383 2 11	15 10 7¼	3 15 2¼	27
Ootacamund	252	3,957 12 6	15 11 3⅓	3 5 11⅓	14
Vellore	227	3,699 9 10	16 4 9	4 11 5⅓	24
Kurnool	183	3,024 0 6	16 8 4⅓	2 8 3¾	17
Madura	347	5,735 4 11	16 8 5⅓	3 14 6	21
Mangalore	172	2,847 1 4	16 8 10	4 8 10	36
Tellicherry	159	2,712 14 10	17 0 11¾	2 0 2	12
Madras Lying-in-Hospital—Midwifery cases...	1,469	27,222 3 5	18 8 5⅓	3 6 1	19
Pollachy	241	4,468 4 6	18 8 7¾	2 2 2⅓	22
Cuddalore	183	3,430 1 4	18 11 10¾	6 2 0⅓	15
Triplicane	444	8,474 9 2	19 1 4⅓	4 11 4	17
Coonoor	185	3,577 15 3	19 5 5	2 8 7⅓	15
Coconada Seamen's Hospital ...	45	914 11 2	20 5 2½	8 12 9½	...
Coimbatore	157	3,196 1 8	20 5 9¼	5 1 10⅓	23
Chingleput	63	1,311 12 10	20 13 1¾	2 9 11½	23
Mercara	207	4,484 3 11	21 10 7¼	4 0 3⅓	21
Madras Lying-in-Hospital—Dispensary	263	5,966 0 11	22 10 11½	9 7 6½	20
Berhampore	157	3,582 1 2	22 13 0½	4 14 9	30
Salem	187	4,324 9 2	23 8 0¾	2 9 0¾	19
Combaconum	196	4,692 5 2	23 15 0¾	2 11 6¾	26
Trichinopoly	228	5,775 2 11	25 5 3¼	2 12 3¾	15
Guntoor	74	1,894 11 9	25 9 8	3 9 1¾	34
Cuddapah	395	10,333 5 4	26 2 6¾	1 10 0¾	12
Madras, Vepery	536	14,098 12 6	26 4 10¼	9 6 9¼	13
Palamcottah	306	8,298 7 7	27 1 10⅓	3 6 8¼	22
Hospett	45	1,265 11 8	28 2 0½	3 5 10½	56
Adonie	52	1,594 5 2	30 10 6½	2 14 7	17
Dindigul	43	1,437 15 7	33 7 6¾	0 9 11	...
Madras General Hospital ...	2,773	97,404 5 0	35 2 0	10 7 7	17
Conjeveram	88	3,113 14 5	35 6 1¾	4 0 0	29
Calicut Leper and Small-pox Hospital	76	2,891 7 9	38 0 7¾	15 11 7¾	81
Tranquebar	138	5,509 12 8	39 14 9½	4 14 2⅓	26
Palliport Lazaretto	47	2,036 5 8	43 5 2¾	24 4 0½	25
Cuddalore, old Town	78	3,449 5 8	44 3 6½	5 3 6	23
Masulipatam...	71	3,476 14 3	48 15 6¼	8 7 8½	15
Palcondah	4	225 8 0	56 6 0	.....	30
Madras Eye Infirmary... ...	237	15,291 8 0	64 8 4	14 13 9	40
Cumbum	14	998 5 8	71 4 11	.....	26

Statement showing the average cost per In patient in each Hospital, &c.—(Concluded.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet rate per Patient.	Average stay in Hospital.
		Rs. A. P.	Rs. A. F.	Rs. A. P.	Days.
Edeyangoody (formerly Seeseshapuram)	7	514 5 8	73 7 8	.....	156
Tinnevelly	21	1,731 12 2	82 7 5	3 12 10	35
Madras Leper Hospital... ...	214	18,024 11 0	84 3 7½	44 6 2	148
Manargoody	224	19,139 0 3	85 7 0¾	1 6 2½	16
Madras Lunatic Asylum	189	50,058 15 11	264 13 9¼	92 5 8⅓	229
Anantapoor	.....	104 7 6	.....	.....	...
Chellumbrum	.....	817 10 11	.....	.....	...
Kotagherry	.....	3,681 0 7	.....	.....	...
Madanapally...	.....	2,163 1 2	.....	.....	...
Madras, Black Town, N. Side ...	.....	1,733 14 11	.....	.....	...
Mayaveram	.....	564 0 4	.....	.....	...
Nellore Branch	.....	4,364 14 9	.....	.....	...
Ongole	.....	122 6 11	.....	.....	...
Sheally	.....	680 3 7	.....	.....	...
Madras, Sydapett	.....	107 9 11	.....	.....	...
Tritrapundi	.....	244 13 3	.....	.....	...
Total ...	18,747	4,59,133 15 6	24 7 10	6 1 10¾	23

The Death Rate amongst the In-patients in the several Civil Hospitals and Dispensaries was as under.

	Of the treated 1 death in every
Kamptee	2·4
Palliport Lazaretto	3·9
Cumbum	4·3
Native Infirmary	5·6
Calicut	6·5
Mercara	6·6
Edeyangoodi	7·
Trichinopoly	7·1
Mangalore	7·3
Guntoor	7·3
Vepery	7·6
Triplicane	8·0
Berhampore	8·1
Ghooty	8·6
Kurnool	8·7
Coimbatore...	8·7
Palghaut	8·7
Coonoor	9·1
Ootocamund	9·4
Lunatic Asylum	9·4
Vizagapatam	9·5
Bellary	9·7
Salem	10·
Goodalore	10·1
Kimedy	10·3
Leper Hospital	10·6
Negapatam	11·8
Tellicherry	12·0
Ponani	12·2
Vellore	12·3
Masulipatam	12·8

	Of the treated 1 death in every
Palamcottah	13·1
Secunderabad	13·4
Tranquebar...	13·4
Nellore	13·8
Chittoor	13·8
Dindigul	14·3
General Hospital	15·7
Coconada	16·1
Adoni	16·6
Conjeveram	17·6
Munjeri	18·5
Cuddalore, Old Town	18·7
Madras Lying-in-Hospital—Dispensary ...	19·1
Pollachy	20·0
Rajahmundry	20·5
Tinnevelly	21·
Combaconum	21·2
Cuddapah	24·
Cochin	24·2
Manargoody	24·8
Leper and Small-pox Hospital	25·3
Cuddalore	26·
Chicacole	26·
Madura	26·6
Ramnad	27·0
Chingleput	30·
Madras Lying-in-Hospital—Midwifery Cases	42·7
Raneepett	44·6
Hospett	45·
Average...	11·2

Statement showing the Average Stay in Hospital of each In-patient in the year 1870 *in the Civil Hospitals of the Madras Presidency, the Stay ranging from four days at Dindigul to* 45½ *days at Cumbum.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	* Average Stay in Hospital
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Dindigul	31	1,443 4 1	46 8 1¾	1 4 8¼	4
Cocanada Seamen's Hospital	31	327 10 8	10 9 1¼	7 4 5¼	8¾
Ghooty	84	1,813 10 1	21 9 5¼	1 9 0¾	10¾
Ootacamund	269	4,114 3 6	15 4 8½	1 13 6¼	11½
Madras Female Asylum ...	313	983 9 1	3 2 3¼	... ...	12¼
Madras Male Asylum ...	114	1,665 12 1	14 9 9¼	... ...	12¾
Cuddapah	388	7,146 14 3	18 6 8½	1 10 4¾	13½
Goodaloor	253	3,881 8 3	15 5 5½	2 8 0	14
Negapatam	130	1,785 13 6	13 11 9½	2 15 6¾	14
Edeyangoody	25	... ...	... ...	... ...	14½
Raneepett	758	5,773 13 4	7 9 10½	2 11 6¾	14¾
Rajahmundry	183	2,267 4 7	12 6 2¾	1 12 10¼	15¼
Madras, Triplicane... ...	443	8,139 1 10	18 5 11½	3 11 6½	15½
Madras Native Infirmary ...	1,849	12,230 15 2	6 9 10	3 11 6¼	15½
Trichinopoly	237	6,080 5 5	25 10 5¾	3 1 11¾	15¾
Palghaut	220	... ...	... ...	... ...	16½
Ponani	151	1,304 2 6	8 10 2¼	0 15 1	16¾
Madras Lying-in Hospital—Midwifery cases	1,270	25,935 6 11	20 6 8¾	3 0 10¼	17
Madras General Hospital ...	2,540	1,01,095 3 7	39 12 9¾	11 11 7¾	17¼
Chittoor	248	5,956 9 3	24 0 3½	1 9 4¾	17½
Cocanada	149	1,723 3 1	11 9 0½	2 5 11½	17¾
Nellore	344	2,770 4 11	8 0 10	2 12 6¼	18
Cochin	772	2,389 3 6	3 1 6	0 4 6	18¼
Coonoor	145	2,911 6 5	20 1 3	3 10 10	18¼
Tellicherry	198	1,742 11 5	8 12 9¾	1 15 0	18¼
Cuddalore	142	3,168 2 3	22 4 11½	7 4 9¾	18½
Guntoor	112	2,008 9 3	17 14 11¼	2 14 5½	18½
Mannargoody	171	4,721 4 3	27 9 9	1 3 4	18½
Kurnool	164	2,251 1 11	13 11 7¼	2 5 1¼	18¾
Coimbatore...	186	3,222 6 2	17 5 2¼	4 5 11	19
Bellary	194	2,894 11 11	14 14 8¾	3 0 2	19¼
Kamptee	194	3,849 6 2	19 13 5½	5 0 5	19¼
Ramnad	312	4,899 7 8	15 11 3	4 0 6¾	19¼
Cuddalore, Old Town ...	93	3,664 12 9	39 6 6	5 2 4¼	19½
Madras Lying-in Hospital—Dispensary	230	5,628 9 7	24 7 6½	9 0 8¾	19¾
Madras, Vepery	717	16,454 13 7	22 15 2¼	8 13 7¾	20½
Mangalore	172	2,065 5 10	12 0 1½	3 1 2¼	20½
Adonie	52	1,514 7 9	29 1 11¾	2 10 8	21
Madura	296	5,283 13 3	17 13 7¼	4 8 10	22
Palamcottah	312	6,864 15 1	22 0 0½	5 12 11¾	22
Pollachy	311	4,832 5 7	15 8 7¼	2 0 11¼	22
Calicut	334	4,555 2 7	13 10 2½	4 8 9	22¼
Tranquebar...	150	2,819 12 3	18 12 9¼	4 4 11½	23
Combaconum	175	4,275 10 6	24 6 11	1 14 11	23¼
Madras Eye Infirmary ...	263	16,703 1 6	63 8 1¾	9 14 5¼	23½
Tinnevelly	89	1,677 4 2	18 13 6¼	2 12 4½	23½
Hospett	94	1,327 13 6	14 2 0	2 14 0½	24¼
Vizagapatam	232	3,616 11 1	15 9 5	3 3 8¾	24¾
Chingleput	46	980 15 8	21 5 2½	2 8 5¼	25¾
Secunderabad	210	3,594 12 6	17 1 10½	3 15 4¾	26¾
Vellore	237	3,667 15 2	15 7 7½	4 14 11½	26¾
Munjeri	284	1,754 13 6	6 2 10¼	2 6 0¼	27¼
Salem	161	4,529 2 0	28 2 1	4 5 11½	28¼
Masulipatam	89	3,919 3 8	44 0 6¾	13 9 7	29½
Conjeveram...	159	3,518 8 4	22 2 0¾	4 13 11¾	31½
Kimedy	84	1,240 5 11	14 12 3	4 1 7¼	32½

Statement showing the Average Stay in Hospital of each In-patient in the year 1870 in the Civil Hospitals of the Madras Presidency, the Stay ranging from four days at Dindigul to 45½ days at Cumbum.—(Concluded.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	* Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Berhampore	137	2,615 0 3	19 1 4¾	5 10 4½	35¼
Madanapully	97	4,823 2 11	49 11 6¾	2 1 10	36½
Chicacole	124	2,013 7 7	16 3 9½	4 5 8½	39
Cumbum	14	968 3 0	69 2 6	... ...	45½
Palcondah	26	625 8 0	24 0 11	... ...	...
Paumben	7	... ...	... ...	... ...	...
Anantapoor	...	129 7 6	... ...	... ...	...
Chellumbrum	...	795 8 0	... ...	... ...	...
Kotagherry	...	3,268 12 3	... ...	... ...	...
Madras, Black Town, North Side	...	1,240 4 5	... ...	... ...	...
Mayaveram	...	682 15 0	... ...	... ...	...
Nellore Branch	...	1,557 13 0	... ...	... ...	...
Ongole	...	221 1 2	... ...	... ...	...
Sheally	...	811 7 8	... ...	... ...	...
Madras, Sydapett	...	326 3 5	... ...	... ...	...
Tritrapundi	...	661 4 0	... ...	... ...	...
Total ...	17,815	3,55,727 12 11	19 11 2¾	4 14 2	20½

Special Institutions, the In-patients of which, from the nature of their disease, make a long stay in Hospital.

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	* Average Stay in Hospital.
		Rs. A. P.	RS. A. P.	RS. A. P.	DAYS.
Calicut Leper and Small-pox Hospitals	63	3,048 3 0	48 6 1¾	19 13 9	95½
Madras Leper Hospital ...	275	20,620 3 11	74 15 8½	47 8 9¼	146¾
Palliport Lazaretto ...	39	1,690 14 1	43 5 8¼	23 12 7¾	250¼
Madras Lunatic Asylum ...	171	56,262 5 2	329 0 3½	105 4 3	260½
Total ...	548	81,621 10 2	148 15 1¼	60 10 11½	188

Statement showing the Average Cost of Dieting each In-patient in each Civil Hospital of the Madras Presidency in the year 1870, the Cost ranging from 4 Annas 6 Pies at Cochin to Rupees 13-9-7 at Masulipatam.

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	* Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Cochin	772	2,389 3 6	3 1 6	0 4 6	18¼
Ponani	151	1,304 2 6	8 10 2¼	0 15 1	16¾
Mannargoody	171	4,721 4 3	27 9 9	1 3 4	18½
Dindigul	31	1,443 4 1	46 8 1¾	1 4 8¼	4
Ghooty	84	1,813 10 1	21 9 5¼	1 9 0¼	10¾
Chittoor	248	5,956 9 3	24 0 3½	1 9 4¾	17½
Cuddapah	388	7,146 14 3	18 6 8½	1 10 4¾	13½
Rajahmundry	183	2,267 4 7	12 6 2¾	1 12 10¼	15¼
Ootacamund	269	4,114 3 6	15 4 8½	1 13 6¼	11½
Combaconum	175	4,275 10 6	24 6 11	1 14 11	23¼
Tellicherry	198	1,742 11 5	8 12 9¾	1 15 0	18¼
Pollachy	311	4,832 5 7	15 8 7¼	2 0 11¼	22
Madanapully	97	4,823 2 11	49 11 6¾	2 1 10	36½
Kurnool	164	2,251 1 11	13 11 7¼	2 5 1¼	18¾
Cocanada	149	1,723 3 1	11 9 0½	2 5 11½	17¾
Munjeri	284	1,754 13 6	6 2 10¼	2 6 0¼	27¼
Goodaloor	253	3,881 8 3	15 5 5½	2 8 0	14
Chingleput	46	980 15 8	21 5 2½	2 8 5¼	25¾
Adonie	52	1,514 7 9	29 1 11¾	2 10 8	21
Raneepett	758	5,773 13 4	7 9 10½	2 11 6¾	14¾
Tinnevelly	89	1,677 4 2	18 13 6¼	2 12 4½	23½
Nellore	344	2,770 4 11	8 0 10	2 12 6¼	18
Hospett	94	1,327 13 6	14 2 0	2 14 0½	24¼
Guntoor	112	2,008 9 3	17 14 11¼	2 14 5½	18½
Negapatam	180	1,785 13 6	13 11 9½	2 15 6¾	14
Bellary	194	2,894 11 11	14 14 8¾	3 0 2	19¼
Madras Lying-in Hospital —Midwifery cases ...	1,270	25,935 6 11	20 6 8¾	3 0 10¼	17
Mangalore	172	2,065 5 10	12 0 1½	3 1 2¼	20½
Trichinopoly	237	6,080 5 5	25 10 5¾	3 1 11¾	15¾
Vizagapatam	232	3,616 11 1	15 9 5	3 3 8¾	24¾
Coonoor	145	2,911 6 5	20 1 3	3 10 10	18¼
Madras Native Infirmary ...	1,849	12,230 15 2	6 9 10	3 11 6¼	15½
Madras, Triplicane	443	8,139 1 10	18 5 11½	3 11 6½	15½
Secunderabad	210	3,594 12 6	17 1 10½	3 15 4¾	26¾
Ramnad	312	4,899 7 8	15 11 3	4 0 6¾	19¼
Kimedy	84	1,240 5 11	14 12 3	4 1 7¼	32½
Tranquebar	150	2,819 12 3	18 12 9¼	4 4 11½	23
Chicacole	124	2,013 7 7	16 3 9½	4 5 8½	39
Coimbatore	186	3,222 6 2	17 , 2¼	4 5 11	19
Salem	161	4,529 2 0	28 2 1	4 5 11½	28¼
Calicut	334	4,555 2 7	13 10 2½	4 8 9	22¼
Madura	296	5,283 13 3	17 13 7¼	4 8 10	22
Conjeveram	159	3,518 8 4	22 2 0¾	4 13 11¾	31½
Vellore	237	3,667 15 2	15 7 7½	4 14 11½	26¾
Kamptee	194	3,849 6 2	19 13 5½	5 0 5	19¼
Cuddalore, Old Town ...	93	3,664 12 9	39 6 6	5 2 4¼	19½
Berhampore	137	2,615 0 3	19 1 4¾	5 10 4½	35¼
Palamcottah	312	6,864 15 1	22 0 0½	5 12 11¾	22
Cocanada Seamen's Hospital	31	327 10 8	10 9 1¼	7 4 5¼	8¾
Cuddalore	142	3,168 2 3	22 4 11½	7 4 9¾	18½
Madras, Vepery	717	16,454 13 7	22 15 2¼	8 13 7¾	20½
Madras Lying-in Hospital —Dispensary	230	5,628 9 7	24 7 6½	9 0 8¾	19¾
Madras Eye Infirmary ...	263	16,703 1 6	63 8 1¾	9 14 5¼	23½
Madras General Hospital ...	2,540	1,01,095 3 7	39 12 9¾	11 11 7¾	17¼
Masulipatam	89	3,919 3 8	44 0 6¾	13 9 7	29½

Statement showing the Average Cost of Dieting each In-patient in each Civil Hospital of the Madras Presidency in the year 1870, the Cost ranging from 4 Annas 6 Pies at Cochin to Rupees 13-9-7 at Masulipatam.—(Concluded.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	* Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Cumbum	14	968 3 0	69 2 6	... ...	45¼
Edeyangoody	25	... ...	... ...	... ...	14½
Madras Female Asylum ...	313	983 9 1	3 2 3¼	... ...	12¼
Madras Male Asylum ...	114	1,665 12 1	14 9 9¼	... ...	12¾
Palcondah	26	625 8 0	24 0 11	... ...	...
Palghaut	220	... ...	... ...	... ...	16½
Paumben	7	... ...	... ...	... ...	...
Anantapoor...	...	129 7 6	... ...	... ...	...
Chellumbrum	...	795 8 0	... ...	... ...	...
Kotagherry...	...	3,268 12 3	... ...	... ...	...
Madras, Black Town, North Side	...	1,240 4 5	... ...	... ...	...
Mayaveram	...	682 15 0	... ...	... ...	...
Nellore Branch	...	1,557 13 0	... ...	... ...	...
Ongole	...	221 1 2	... ...	... ...	...
Sheally	...	811 7 8	... ...	... ...	...
Madras, Sydapett	...	326 3 5	... ...	... ...	...
Tritrapundi...	...	661 4 0	... ...	... ...	...
Total ...	17,815	3,55,727 12 11	19 11 2¾	*4 14 2	20½

* Obtained by dividing the total diet expenditure by the total number of such in-patients only as have the diet rate shown against them.

SPECIAL INSTITUTIONS.

The diet Cost pe Patient ranges from Rupees 19-13-9 in the Calicut Leper Hospital to Rupees 105-4-3 in the Madras Lunatic Asylum.

Hospitals.	Total In-Patients treated.	Total Expenditure.	Rate per Patient.	* Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Calicut Leper and Small-pox Hospitals	63	3,048 3 0	48 6 1¾	19 13 9	95½
Palliport Lazaretto... ...	39	1,690 14 1	43 5 8¼	23 12 7¾	250¼
Madras Leper Hospital ...	275	20,620 3 11	74 15 8½	47 8 9¼	146¾
Madras Lunatic Asylum ...	171	56,262 5 2	329 0 3½	105 4 3	260¼
Total ...	548	81,621 10 2	148 15 1¼	60 10 11½	188

Statement showing the Average Cost per In-patient in each Civil Hospital in the Madras Presidency for the year 1870, excluding in this calculation the Out-patients on whom falls only a part of the cost for medicines—the cost ranging from Rupees 3-1-6 at Cochin to Rupees 69-2-6 at Cumbum.

Hospitals.	Total In-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Cochin	772	2,389 3 6	3 1 6	0 4 6	18¼
Madras Female Orphan Asylum.	313	983 9 1	3 2 3¼	... ...	12¼
Munjeri	284	1,754 13 6	6 2 10¼	2 6 0¼	27¼
Madras Native Infirmary...	1,849	12,230 15 2	6 9 10	3 11 6½	15½
Raneepett	758	5,773 13 4	7 9 10½	2 11 6¾	14¾
Nellore	344	2,770 4 11	8 0 10	2 12 6¼	18
Ponani	151	1,304 2 6	8 10 2¼	0 15 1	16¾
Tellicherry	198	1,742 11 5	8 12 9¾	1 15 0	18¼
Cocanada Seamen's Hospital.	31	327 10 8	10 9 1¼	7 4 5¼	8¾
Cocanada	149	1,723 3 1	11 9 0½	2 5 11½	17¾
Mangalore	172	2,065 5 10	12 0 1½	3 1 2¼	20½
Rajahmundry	183	2,267 4 7	12 6 2¾	1 12 10¼	15¼
Calicut	334	4,555 2 7	13 10 2½	4 8 9	22¼
Kurnool	164	2,251 1 11	13 11 7¼	2 5 1¼	18¾
Negapatam	130	1,785 13 6	13 11 9½	2 15 6¾	14
Hospett	94	1,327 13 6	14 2 0	2 14 0½	24¼
Madras Male Asylum ...	114	1,665 12 1	14 9 9¼	... ...	12¾
Kimedy	84	1,240 5 11	14 12 3	4 1 7¼	32½
Bellary	194	2,894 11 11	14 14 8¾	3 0 2	19¼
Ootacamund	269	4,114 3 6	15 4 8½	1 13 6¼	11½
Goodaloor	253	3,881 8 3	15 5 5½	2 8 0	14
Vellore	237	3,667 15 2	15 7 7½	4 14 11½	26¾
Pollachy	311	4,832 5 7	15 8 7¼	2 0 11¼	22
Vizagapatam	232	3,616 11 1	15 9 5	3 3 8¾	24¾
Ramnad	312	4,899 7 8	15 11 3	4 0 6¾	19¼
Chicacole	124	2,013 7 7	16 3 9½	4 5 8½	39
Secunderabad	210	3,594 12 6	17 1 10½	3 15 4¾	26¾
Coimbatore	186	3,222 6 2	17 5 2¼	4 5 11	19
Madura	296	5,283 13 3	17 13 7¼	4 8 10	22
Guntoor	112	2,008 9 3	17 14 11¼	2 14 5½	18½
Madras, Triplicane ...	443	8,139 1 10	18 5 11½	3 11 6½	15½
Cuddapah	388	7,146 14 3	18 6 8½	1 10 4¾	13½
Tranquebar	150	2,819 12 3	18 12 9¼	4 4 11½	23
Tinnevelly...	89	1,677 4 2	18 13 6¼	2 12 4½	23⅓
Berhampore	137	2,615 0 3	19 1 4¾	5 10 4½	35¼
Kamptee	194	3,849 6 2	19 13 5½	5 0 5	19¼
Coonoor	145	2,911 6 5	20 1 3	3 10 10	18¼
Madras Lying-in Hospital—Midwifery cases.	1,270	25,935 6 11	20 6 8¾	3 0 10¼	17
Chingleput...	46	980 15 8	21 5 2½	2 8 5¼	25¾
Ghooty	84	1,813 10 1	21 9 5¼	1 9 0¼	10¾
Palamcottah	312	6,864 15 1	22 0 0½	5 12 11¾	22
Conjeveram	159	3,518 8 4	22 2 0¾	4 13 11¾	31½
Cuddalore	142	3,168 2 3	22 4 11½	7 4 9¾	18½
Madras, Vepery	717	16,454 13 7	22 15 2¼	8 13 7¾	20½
Chittoor	248	5,956 9 3	24 0 3½	1 9 4¾	17½
Palcondah	26	625 8 0	24 0 11	... ...	...
Combaconum	175	4,275 10 6	24 6 11	1 14 11	23¼
Madras Lying-in Hospital—Dispensary.	230	5,628 9 7	24 7 6½	9 0 8¾	19¾
Trichinopoly	237	6,080 5 5	25 10 5¾	3 1 11¾	15¾
Mannargoody	171	4,721 4 3	27 9 9	1 3 4	18½
Salem	161	4,529 2 0	28 2 1	4 5 11½	28¼
Adonie	52	1,514 7 9	29 1 11¾	2 10 8	21
Cuddalore, Old Town ...	93	3,664 12 9	39 6 6	5 2 4¼	19½

Statement showing the Average Cost per In-patient in each Civil Hospital in the Madras Presidency for the year 1870, excluding in this calculation the Out-patients on whom falls only a part of the cost for medicines—the cost ranging from Rupees 3-1-6 at Cochin to Rupees 69-2-6 at Cumbum.—(Concluded.)

Hospitals.	Total In-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Madras General Hospital...	2,540	1,01,095 3 7	39 12 9¾	11 11 7¾	17¼
Masulipatam	89	3,919 3 8	44 0 6¾	13 9 7	29½
Dindigul	31	1,443 4 1	46 8 1¾	1 4 8¼	4
Madanapully	97	4,823 2 11	49 11 6¾	2 1 10	36½
Madras Eye Infirmary ...	263	16,703 1 6	63 8 1¾	9 14 5¼	23½
Cumbum	14	968 3 0	69 2 6	... ...	45½
Edyangoody	25	... ...	... ...	... ...	14½
Palghaut	220	... ...	... ...	... ...	16½
Paumben	7	... ...	... ...	... ...	...
Anantapoor	...	129 7 6	... ...	... ...	...
Chellumbrum	...	795 8 0	... ...	... ...	...
Kotagherry	...	3,268 12 3	... ...	... ...	...
Madras, Black Town, North Side.	...	1,240 4 5	... ...	... ...	...
Mayaveram	...	682 15 0	... ...	... ...	...
Nellore, Branch	...	1,557 13 0	... ...	... ...	...
Ongole	...	221 1 2	... ...	... ...	...
Sheally	...	811 7 8	... ...	... ...	...
Madras, Sydapett	...	326 3 5	... ...	... ...	...
Tritrapundi...	...	661 4 0	... ...	... ...	...
Total ...	17,815	3,55,727 12 11	*19 11 2¾	4 14 2	20½

SPECIAL INSTITUTIONS.

The Average Cost per Patient ranges from Rupees 43-5-8¼ in the Palliport Lazaretto to Rupees 329-0-3½ in the Madras Lunatic Asylum.

Hospitals.	Total In-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Palliport Lazaretto ...	39	1,690 14 1	43 5 8¼	23 12 7¾	250¼
Calicut Leper and Small Pox Hospitals.	63	3,048 3 0	48 6 1¾	19 13 9	95½
Madras Leper Hospital ...	275	20,620 3 11	74 15 8½	47 8 9¼	146¾
Madras Lunatic Asylum ...	171	56,262 5 2	329 0 3½	105 4 3	260¼
Total ...	548	81,621 10 2	148 15 1¼	60 10 11½	188

* Obtained by dividing the total expenditure (after deducting the expenditure of those hospitals where no in-patients were treated) by the *actual* number of in-patients who shared in it, *i.e.*, the in-patients against whom no expenditure is shown have been omitted from the total treated.

The Death-rate amongst the In-patients in the several Civil Hospitals and Dispensaries was as under :—

Hospitals.	Of the treated 1 death in every	Hospitals.	Of the treated 1 death in every
Cumbum	2·80	Ootacamund	14·15
Kamptee	3·88	Coonoor	14·50
Trichinopoly	4·30	Nellore	14·95
Palcondah	4·33	Vellore	15·80
Mangalore	4·41	Madras General Hospital	16·28
Madras, Triplicane...	5·75	Do. Lunatic Asylum	17·10
Coimbatore	6·00	Adonie	17·33
Madras Native Infirmary	6·08	Palamcottah	17·33
Bellary	6·25	Combaconum	17·50
Chingleput	6·57	Mannargoody	19·00
Guntoor	7·00	Calicut Leper and Small Pox Hospitals.	21·00
Cocanada	7·84	Cuddalore, Old Town	23·25
Conjeveram...	7·95	Cuddalore	23·66
Rajahmundry	8·22	Munjeri	23·66
Madras, Vepery	8·24	Edyangoody	25·00
Madras Leper Hospital	8·59	Ponani	25·16
Kurnool	8·63	Goodaloor	25·30
Masulipatam	8·90	Madras Lying-in Hospital—Dispensary.	25·55
Tinnevelly	8·90	Pollachy	25·91
Berhampore	9·13	Ramnad	26·00
Vizagapatam	9·28	Cuddapah	27·71
Salem	9·47	Tranquebar	30·00
Madanapully	9·70	Hospett	31·33
Palliport Lazaretto	9·75	Madras Lying-in Hospital—Midwifery cases.	36·28
Ghooty	10·50	Cochin	40·63
Tellicherry	11·00	Raneepett	94·75
Calicut	11·13	Madras Female Orphan Asylum ...	104·33
Palghaut	11·57	Madras Eye Infirmary	263·00
Secunderabad	11·66		
Chittoor	12·40	Average ...	20·96
Negapatam	13·00		
Madura	13·45		
Chicacole	13·77		
Kimedy	14·00		

FOR THE YEAR 1871.

Statement showing the Average Stay in Hospital of each In-patient in the year* 1871 *in the Civil Hospitals of the Madras Presidency, the stay ranging from three days at Dindigul to* 37¾ *days at Berhampore.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient. **	Diet Rate per Patient.	* Average stay in Hospital.
		Rs. A. P.	Rs. A. P.	Rs. A. P.	Days.
Dindigul	99	3,416 12 10	34 8 2½	0 5 5½	3
Cocanada Seamen's Hospital	49	475 10 3	9 11 3¾	6 0 1½	9¼
Ghooty	56	2,103 13 2	37 9 3¼	1 7 6¾	11¼
Madras Female Orphan Asylum	345	905 9 4	2 9 11¾	... ...	11½
Goodaloor	217	2,617 0 4	12 0 11½	2 1 11	11¾
Ootacamund	344	5,004 14 2	14 8 9¼	2 0 11	11¾
Madras Native Infirmary ...	1,681	12,374 3 7	7 5 9¼	3 10 7	13
Cocanada	178	2,143 0 8	12 0 7½	2 1 1	13¼
Cuddapah	367	6,862 11 6	18 11 2¼	1 11 7½	13½
Palcondah	3	1,160 7 4	386 13 1¼	... ...	13½
Adonie	50	1,139 11 7	22 12 8½	1 7 2	14½
Raneepett	799	9,494 2 8	11 14 1¼	2 3 4½	14½
Coonoor	156	2,807 2 2	17 15 10¾	2 13 4	15
Masulipatam	96	3,010 6 2	31 5 8¾	4 3 9¾	15
Negapatam	124	3,514 1 7	28 5 5	2 3 3¼	15¼
Madras, Triplicane ...	474	6,670 6 8	14 1 1¾	3 8 5¾	15¼
Madras, Vepery	749	15,387 2 5	20 8 8¼	7 12 1¼	15½
Secunderabad	147	3,043 14 2	20 11 3½	2 12 2	15½
Madras Male Asylum ...	139	1,262 10 4	9 1 4	... ...	15¾
Calicut	230	2,659 11 2	11 2 0½	3 8 5½	16
Palamcottah	298	4,352 15 6	14 9 8½	4 15 0¾	16
Madras Lying-in-Hospital—Midwifery Cases	1,384	25,125 4 5	18 2 5½	2 13 0¾	16¼
Rajahmundry	228	2,115 12 5	9 4 5½	1 12 0½	16¼
Cuddalore, Old Town ...	116	2,365 8 5	20 6 3¼	1 7 5¼	17¼
Mangalore	188	1,792 10 7	9 8 6¾	2 7 9	17¾
Cuddalore	171	2,177 10 8	12 11 9	2 15 3¾	18
Tellicherry	166	2,288 6 7	13 12 6¾	3 3 3	18
Ponani	154	1,429 13 11	9 4 6½	1 6 4½	18¾
Bellary	211	3,525 0 3	16 11 3½	2 6 8½	19
Madras General Hospital ...	2,667	1,01,521 4 1	38 1 0½	12 3 2¾	19
Manargoody	227	5,337 5 6	23 8 2¼	1 1 4	19¼
Nellore	303	2,429 5 3	8 0 3¼	2 8 0¼	19¾
Pollachy	249	2,024 12 3	8 2 1¼	2 0 8	19¾
Ramnad	329	5,731 11 4	17 6 8¾	2 13 10¼	19¾
Hospett	41	1,105 2 1	26 15 3¼	2 0 7	20
Trchinopoly	216	6,048 1 2	28 0 0	3 2 1¼	20½
Coimbatore	163	3,267 12 2	20 0 9	3 10 7½	21¼
Madura	239	7,924 6 8	33 2 6	4 1 8½	21¾
Vizagapatam	237	2,718 0 7	11 7 5¾	2 15 10	23
Combaconum	223	5,910 2 2	26 8 0½	2 15 6¾	23¼
Cumbum	35	2,186 6 1	62 7 5¾	1 15 11¼	23¼
Madanapully	186	5,006 12 11	26 14 8¼	2 4 0¼	23½
Palghaut	186	1,315 15 4	7 1 2¼	4 1 1¾	23½
Tranquebar	127	2,757 1 3	21 11 4	4 4 9¾	23½
Guntoor	103	2,316 1 9	22 7 9¼	4 9 11½	23¾
Cochin	542	2,714 8 11	5 0 1½	0 8 2¾	24
Chittoor	244	2,433 13 8	9 15 7	2 7 5¾	24¼
Edyangoody	41	1,384 4 7	33 12 2½	... ...	24¼
Madras Eye Infirmary ...	293	23,333 7 3	79 10 2	8 13 6¼	24¼
Madras Lying-in-Hospital—Dispensary	274	5,114 11 6	18 10 8	9 12 5	24½
Tinnevelly	74	1,728 0 3	23 5 7½	3 5 8½	24½
Kurnool	88	1,878 11 3	21 5 7	3 5 3½	24¾
Kamptee	123	3,476 8 11	28 4 2¾	5 4 7¼	25
Vellore	298	2,633 8 9	8 13 4¾	1 14 2¾	25
Salem	177	6,196 15 7	35 0 2	5 0 9¼	26¾
Munjeri	341	2,673 15 11	7 13 5½	2 2 7½	27¼

Statement showing the Average Stay in Hospital of each In-patient in the year 1871 in the Civil Hospitals of the Madras Presidency, the stay ranging from three days at Dindigul to 37¾ days at Berhampore.*—(Concluded.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	Average stay in Hospital.
		Rs. A. P.	Rs. A. P.	Rs. A. P.	Days.
Conjeveram	146	3,766 6 0	25 12 9	3 1 6¾	28
Chingleput	58	1,305 0 0	22 8 0	5 8 9	28¼
Kimedy	86	1,217 0 4	14 2 5	3 10 3¼	28½
Anantapoor	15	407 3 9	27 2 4½	3 12 1½	30¼
Chicacole	132	2,676 12 7	20 4 5½	4 0 11¾	35¼
Berhampore	128	2,024 3 5	15 13 0¼	4 9 10¾	37¾
Paumben	1	319 15 6	319 15 6	... ...	...
Chellumbrum	...	1,070 15 8	... .	... .	...
Kotagherry	...	3,467 12 1	... ...	... ...	...
Madras, Black Town, North Side	...	1,195 5 5	... ...	... ...	...
Mayaveram	...	666 9 0	... ...	... ...	...
Nazareth	...	1,363 15 11	... ...	... ...	...
Nellore Branch	...	1,795 0 2	... ...	... ...	...
Ongole	...	192 6 11	... ...	... ...	...
Sheally	...	1,069 3 0	... ...	... ...	...
Streevulliputoor	...	2,251 4 1	... ...	... ...	...
Madras, Sydapet	...	628 10 2	... ...	... ...	...
Tripathy	...	2,092 12 2	... ...	... ...	...
Tritrapundi	...	672 1 6	... ...	... ...	...
Tuticorin	...	560 14 11	... ...	... ...	...
Total...	17,820	3,71,139 2 7	19 13 11¼	* 4 11 3¾	19¾

*Special Institutions, the In-patients of which, from the nature of their disease, make a long stay in Hospital, the Stay in * ranging from 101 days in the Calicut Leper Hospital to 266½ days in the Palliport Lazaretto.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	Diet Rate per Patient.	Average stay in Hospital.
		Rs. A. P.	Rs. A. P.	Rs. A. P.	Days.
Calicut Leper and Small-pox Hospitals...	65	3,098 12 3	47 10 9¼	19 3 10¼	101
Madras Leper Hospital ...	231	18,989 13 6	82 3 3¾	54 4 7½	177¾
Madras Lunatic Asylum ..	246	51,961 13 9	211 3 7½	92 11 2½	234
Palliport Lazaretto... ...	39	2,179 14 10	55 14 3¾	31 6 9½	266½
Total...	581	76,230 6 4	131 3 3¼	65 1 6¾	194¾

* Obtained by dividing the total diet expenditure by the total number of such in-patients only as have the diet rate shown against them.

Statement showing the Average Cost of Dieting each In-Patient in each Civil Hospital of the Madras Presidency in the year 1871,—the Cost ranging from 5 Annas 5½ Pice at Dindigul to Rupees 12-3-2¾ in the Madras General Hospital.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	*Diet Rate per Patient.	Average stay in Hospital.
		Rs. A. P.	Rs. A. P.	Rs. A. P.	Days.
Dindigul	99	3,416 12 10	34 8 2½	0 5 5½	3
Cochin	542	2,714 8 11	5 0 1½	0 8 2¾	24
Manargoody...	227	5,337 5 6	23 8 2¼	1 1 4	19¼
Ponani	154	1,429 13 11	9 4 6½	1 6 4½	18¾
Adonie	50	1,139 11 7	22 12 8½	1 7 2	14⅓
Cuddalore, Old Town ...	116	2,365 8 5	20 6 3¼	1 7 5¼	17¼
Ghooty	56	2,103 13 2	37 9 3¼	1 7 6¾	11¼
Cuddapah	367	6,862 11 6	18 11 2¼	1 11 7½	13½
Rajahmundry	228	2,115 12 5	9 4 5½	1 12 0½	16¼
Vellore	298	2,633 8 9	8 13 4¾	1 14 2¾	25
Cumbum	35	2,186 6 1	62 7 5¾	1 15 11¼	23¼
Hospett	41	1,105 2 1	26 15 3¼	2 0 7	20
Pollachy	249	2,024 12 3	8 2 1¼	2 0 8	19¾
Ootacamund...	344	5,004 14 2	14 8 9¼	2 0 11	11¾
Cocanada	178	2,143 0 8	12 0 7½	2 1 1	13¼
Goodaloor	217	2,617 0 4	12 0 11½	2 1 11	11¾
Munjeri	341	2,673 15 11	7 13 5½	2 2 7½	27¼
Negapatam	124	3,514 1 7	28 5 5	2 3 3¼	15¼
Rancepett	799	9,494 2 8	11 14 1¼	2 3 4½	14½
Madanapully	186	5,006 12 11	26 14 8¾	2 4 0¼	23½
Bellary	211	3,525 0 3	16 11 3½	2 6 8½	19
Chittoor	244	2,433 13 8	9 15 7	2 7 5¾	24¼
Mangalore	188	1,792 10 7	9 8 6¾	2 7 9	17¾
Nellore	303	2,429 5 3	8 0 3¼	2 8 0¼	19¾
Secunderabad	147	3,043 14 2	20 11 3½	2 12 2	15½
Madras Lying-in Hospital—Midwifery Cases	1,384	25,125 4 5	18 2 5½	2 13 0¾	16¼
Coonoor	156	2,807 2 2	17 15 10¾	2 13 4	15
Ramnad	329	5,731 11 4	17 6 8¾	2 13 10¼	19¾
Cuddalore	171	2,177 10 8	12 11 9	2 15 3¾	18
Combaconum	223	5,910 2 2	26 8 0½	2 15 6¾	23¼
Vizagapatam	237	2,718 0 7	11 7 5¾	2 15 10	23
Conjeveram	146	3,766 6 0	25 12 9	3 1 6¾	28
Trichinopoly	216	6,048 1 2	28 0 0	3 2 1¼	20½
Tellicherry	166	2,288 6 7	13 12 6¾	3 3 3	18
Kurnool	88	1,878 11 3	21 5 7	3 5 3½	24¾
Tinnevelly	74	1,728 0 3	23 5 7½	3 5 8½	24½
Calicut	239	2,659 11 2	11 2 0½	3 8 5½	16
Madras, Triplicane... ...	474	6,670 6 8	14 1 1¾	3 8 5¾	15½
Kimedy	86	1,217 0 4	14 2 5	3 10 3¼	28½
Madras Native Infirmary ...	1,681	12,374 3 7	7 5 9¼	3 10 7	13
Coimbatore	163	3,267 12 2	20 0 9	3 10 7½	21¼
Anantapoor	15	407 3 9	27 2 4½	3 12 1½	30¼
Chicacole	132	2,676 12 7	20 4 5½	4 0 11¾	35¼
Palghaut	186	1,315 15 4	7 1 2¼	4 1 1¾	23½
Madura	239	7,924 6 8	33 2 6	4 1 8½	21¾
Masulipatam	96	3,010 6 2	31 5 8¾	4 3 9¾	15
Tranquebar...	127	2,757 1 3	21 11 4	4 4 9¾	23½
Berhampore	128	2,024 3 5	15 13 0¼	4 9 10¾	37¾
Guntoor	103	2,316 1 9	22 7 9¼	4 9 11½	23¾
Palamcottah	298	4,352 15 6	14 9 8½	4 15 0¾	16
Salem	177	6,196 15 7	35 0 2	5 0 9¼	26¾
Kamptee	123	3,476 8 11	28 4 2¾	5 4 7¼	25
Chingleput	58	1,305 0 0	22 8 0	5 8 9	28¼
Cocanada Seamen's Hospital.	49	475 10 3	9 11 3¾	6 0 1½	9¼
Madras, Vepery	749	15,387 2 5	20 8 8¼	7 12 1¼	15½
Madras Eye Infirmary ...	293	23,333 7 3	79 10 2	8 13 6¼	24¼
Madras Lying-in Hospital—Dispensary	274	5,114 11 6	18 10 8	9 12 5	24½

Statement showing the Average Cost of Dieting each In-Patient in each Civil Hospital of the Madras Presidency in the year 1871,—the Cost ranging from 5 Annas 5¼ Pice at Dindigul to Rupees 12-3-2¾ in the Madras General Hospital.—(Concld.)

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	* Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Madras General Hospital ...	2,667	1,01,521 4 1	38 1 0¼	12 3 2¾	19
Edyangoody...	41	1,384 4 7	33 12 2½	... ...	24¼
Madras Female Orphan Asylum	345	905 9 4	2 9 11¾	... ...	11½
Madras Male Asylum ...	139	1,262 10 4	9 1 4	... ...	15¾
Palcondah	3	1,160 7 4	386 13 1¼	... ...	13½
Paumben	1	319 15 6	319 15 6	... ...	...
Chellumbrum	...	1,070 15 8	... ...	... ...	...
Kotagherry	...	3,467 12 1	... ...	... ...	...
Madras, Black Town, North Side	...	1,195 5 5	... ...	... ...	...
Mayaveram	...	666 9 0	... ...	... ...	...
Nazareth	...	1,363 15 11	... ...	... ...	...
Nellore Branch	...	1,795 0 2	... ...	... ...	...
Ongole	...	192 6 11	... .	... ...	...
Sheally	...	1,069 3 0	... ...	... ...	...
Streevulliputoor	...	2,251 4 1	... ...	... ...	...
Madras, Sydapett	...	628 10 2	... .	... ...	...
Tripathy	...	2,092 12 2	.. ..	... ...	...
Tritrapundi	...	672 1 6	... ...	... ...	...
Tuticorin	...	560 14 11	... ...	... ...	...
Total...	17,820	3,71,139 2 7	19 13 11¼	*4 11 3¾	19¾

Special Institutions, the Diet Cost ranging from Rupees 19-3-10¼ in the Calicut Leper Hospital to Rupees 92-11-2½ in the Madras Lunatic Asylum.*

Hospitals.	Total In-patients treated.	Total Expenditure.	Rate per Patient.	* Diet Rate per Patient.	Average stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	DAYS.
Calicut Leper and Small-pox Hospitals...	65	3,098 12 3	47 10 9¼	19 3 10¼	101
Palliport Lazaretto... ...	39	2,179 14 10	55 14 3¾	31 6 9½	266½
Madras Leper Hospital ...	231	18,989 13 6	82 3 3¾	54 4 7½	177¾
Madras Lunatic Asylum ...	246	51,961 13 9	211 3 7½	92 11 2½	234
Total...	581	76,230 6 4	131 3 3¼	65 1 6¾	194¾

* Obtained by dividing the total diet expenditure by the total number of such in-patients only as have the diet rate shown against them.

Statement showing the Average Cost per In-patient in each Civil Hospital in the Madras Presidency for the year 1871, excluding in this calculation the Out-patients on whom falls only a part of the cost for medicines—the cost ranging from Rupees 2-9-11¾ in the Madras Female Orphan Asylum to Rupees 386-13-1¼ at Palcondah.*

Hospitals.	Total In-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Madras Female Orphan Asylum.	345	905 9 4	2 9 11¾	... ...	11½
Cochin	542	2,714 8 11	5 0 1½	0 8 2¾	24
Palghaut	186	1,315 15 4	7 1 2¼	4 1 1¾	23½
Madras Native Infirmary ...	1,681	12,374 3 7	7 5 9½	3 10 7	13
Munjeri	341	2,673 15 11	7 13 5½	2 2 7½	27¼
Nellore	303	2,429 5 3	8 0 3½	2 8 0¼	19¾
Pollachy	249	2,024 12 3	8 2 1¼	2 0 8	19¾
Vellore	298	2,633 8 9	8 13 4¾	1 14 2¾	25
Madras Male Asylum ...	139	1,262 10 4	9 1 4	... ...	15¾
Rajahmundry	228	2,115 12 5	9 4 5½	1 12 0½	16¼
Ponani	154	1,429 13 11	9 4 6½	1 6 4½	18¾
Mangalore	188	1,792 10 7	9 8 6¾	2 7 9	17¾
Cocanada Seamen's Hospital.	49	475 10 3	9 11 3¾	6 0 1½	9¼
Chittoor	244	2,433 13 8	9 15 7	2 7 5¾	24¼
Calicut	239	2,659 11 2	11 2 0½	3 8 5½	16
Vizagapatam	237	2,718 0 7	11 7 5¾	2 15 10	23
Raneepett	799	9,494 2 8	11 14 1½	2 3 4½	14½
Cocanada	178	2,143 0 8	12 0 7½	2 1 1	13¼
Goodaloor	217	2,617 0 4	12 0 11½	2 1 11	11¾
Cuddalore	171	2,177 10 8	12 11 9	2 15 3¾	18
Tellicherry	166	2,288 6 7	13 12 6¾	3 3 3	18
Triplicane, Madras... ...	474	6,670 6 8	14 1 1¾	3 8 5¾	15½
Kimedy	86	1,217 0 4	14 2 5	3 10 3¼	28½
Ootacamund...	344	5,004 14 2	14 8 9¼	2 0 11	11¾
Palamcottah	298	4,352 15 6	14 9 8½	4 15 0¾	16
Berhampore...	128	2,024 3 5	15 13 0¼	4 9 10¾	37¾
Bellary	211	3,525 0 3	16 11 3½	2 6 8½	19
Ramnad	329	5,731 11 4	17 6 8¾	2 13 10¼	19¾
Coonoor	156	2,807 2 2	17 15 10¾	2 13 4	15
Madras Lying-in Hospital—Midwifery Cases.	1,384	25,125 4 5	18 2 5½	2 13 0¾	16¼
Madras Lying-in Hospital—Dispensary.	274	5,114 11 6	18 10 8	9 12 5	24½
Cuddapah	367	6,862 11 6	18 11 2¼	1 11 7½	13½
Coimbatore	163	3,267 12 2	20 0 9	3 10 7½	21¼
Chicacole	132	2,676 12 7	20 4 5½	4 0 11¾	35¼
Cuddalore, Old Town ...	116	2,365 8 5	20 6 3¼	1 7 5¼	17¼
Madras, Vepery	749	15,387 2 5	20 8 8¼	7 12 1¼	15½
Secunderabad	147	3,043 14 2	20 11 3½	2 12 2	15½
Kurnool	88	1,878 11 3	21 5 7	3 5 3½	24¾
Tranquebar	127	2,757 1 3	21 11 4	4 4 9¾	23½
Guntoor	103	2,316 1 9	22 7 9¼	4 9 11½	23¾
Chingleput	58	1,305 0 0	22 8 0	5 8 9	28¼
Adonie	50	1,139 11 7	22 12 8½	1 7 2	14½
Tinnevelly	74	1,728 0 3	23 5 7½	3 5 8½	24½
Manargoody...	227	5,337 5 6	23 8 2¼	1 1 4	19¼
Conjeveram	146	3,766 6 0	25 12 9	3 1 6¾	28
Combaconum...	223	5,910 2 2	26 8 0½	2 15 6¾	23¼
Madanapully...	186	5,006 12 11	26 14 8¼	2 4 0¼	23½
Hospett	41	1,105 2 1	26 15 3¼	2 0 7	20
Anantapur	15	407 3 9	27 2 4½	3 12 1½	30¼
Trichinopoly...	216	6,048 1 2	28 0 0	3 2 1¼	20½
Kamptee	123	3,476 8 11	28 4 2⅔	5 4 7¼	25
Negapatam	124	3,514 1 7	28 5 5	2 3 3¼	15¼
Masulipatam...	96	3,010 6 2	31 5 8¾	4 3 9¾	15

Submitted

Statement showing the Average Cost per In-patient in each Civil Hospital in the Madras Presidency for the year* 1871, *excluding in this calculation the Out-patients on whom falls only a part of the cost for medicines—the cost ranging from Rupees* 2-9-11¾ *in the Madras Female Orphan Asylum to Rupees* 386-13-1¼ *at Palcondah.* —(Concluded.)

Hospitals.	Total in-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Madura	239	7,924 6 8	33 2 6	4 1 8½	21¾
Edyangoody...	41	1,384 4 7	33 12 2½	... ...	24¼
Dindigul	99	3,416 12 10	34 8 2½	0 5 5½	3
Salem	177	6,196 15 7	35 0 2	5 0 9¼	26¾
Ghooty	56	2,103 13 2	37 9 3¼	1 7 6¾	11¼
Madras General Hospital ...	2,667	1,01,521 4 1	38 1 0½	12 3 2¾	19
Cumbum	35	2,186 6 1	62 7 5¾	1 15 11¼	23¼
Madras Eye Infirmary ...	293	23,333 7 3	79 10 2	8 13 6¼	24¼
Paumben	1	319 15 6	319 15 6	... ...	...
Palcondah	3	1,160 7 4	386 13 1¼	... ...	13½
Chellumbrum...	...	1,070 15 8	... ...	... ...	...
Kotagherry	...	3,467 12 1	... ...	... ...	...
Madras, Black Town, North Side.	...	1,195 5 5	... ...	... ...	...
Mayaveram ...	...	666 9 0	... ...	... ...	...
Nazareth	...	1,363 15 11	... ...	... ...	...
Nellore, Branch	...	1,795 0 2	... ...	... ...	...
Ongole...	...	192 6 11	... ...	... ...	...
Sheally	...	1,069 3 0	... ...	... ...	...
Streevulliputoor	...	2,251 4 1	... ...	... ...	...
Madras, Sydapett	...	628 10 2	... ...	... ...	...
Tripathy	...	2,092 12 2	... ...	... ...	...
Tritrapundi...	...	672 1 6	... ...	... ...	...
Tuticorin	...	560 14 11	... ...	... ...	...
Total...	17,820	3,71,139 2 7	*19 13 11¼	4 11 3¾	19¼

Special Institutions, the Rate per Patient ranging from Rupees 47-10-9¼ *in the Calicut Leper and Small-pox Hospitals to Rupees* 211-3-7½ *in the Madras Lunatic Asylum.*

Hospitals.	Total In-Patients treated.	Total Expenditure.	* Rate per Patient.	Diet Rate per Patient.	Average Stay in Hospital.
		RS. A. P.	RS. A. P.	RS. A. P.	Days.
Calicut Leper and Small-pox Hospitals.	65	3,098 12 3	47 10 9¼	19 3 10¼	101
Palliport Lazaretto... ...	39	2,179 14 10	55 14 3¾	31 6 9½	266½
Madras Leper Hospital ...	231	18,989 13 6	82 3 3¾	54 4 7½	177¾
Madras Lunatic Asylum ...	246	51,961 13 9	211 3 7½	92 11 2½	234
Total...	581	76,230 6 4	131 3 3¼	65 1 6¾	194¾

* Obtained by dividing the total expenditure (after deducting the expenditure of those hospitals where no in-patients were treated) by the total number of in-patients treated.

The Death-rate amongst the In-patients in the several Civil Hospitals and Dispensaries was in* 1871 *as under, ranging from* 1 *in every* 3·58 *in Secunderabad to* 1 *in* 127·00 *in Tranquebar.*

Hospitals.	Of the treated 1 death in every	Hospitals.	Of the treated 1 death in every
Secunderabad	3·58	Chingleput	14·50
Cumbum	4·37	Cuddalore, Old Town	14·50
Mangalore	5·08	Palamcottah...	14·90
Kurnool	5·50	Coonoor	15·60
Kamptee	5·59	Nellore	15·94
Trichinopoly	6·17	Adoni	16·66
Coimbatore	6·79	Palliport Lazaretto...	19·50
Negapatam	7·29	Madras Lying-in Hospital—Dispensary.	19·57
Madras Leper Hospital	7·45	Ootacamund	20·23
Anantapur	7·50	Calicut Leper and Small Pox Hospitals.	21·66
Madras Native Infirmary	8·00	Madras General Hospital	21·68
Salem	8·42	Chicacole	22·00
Berhampore...	8·53	Cochin	22·58
Madura	8·53	Madanapully	23·25
Calicut	8·85	Ponani	25·66
Guntoor	9·36	Cuddapah	26·21
Combaconum	9·69	Munjeri	26·23
Bellary	10·04	Ramnad	32·90
Cocanada	10·47	Hospett	41·00
Vizagapatam...	10·77	Pollachy	41·50
Ghooty	11·20	Madras Lying-in Hospital—Midwifery cases.	47·72
Conjeveram	11·23	Masulipatam...	48·00
Madras, Vepery	11·34	Cocanada Seamen's Hospital ...	49·00
Tellicherry	11·85	Dindigul	49·50
Goodaloor	12·05	Raneepett	57·07
Chittoor	12·20	Manargoody...	75·66
Tinnevelly	12·33	Kimedy	86·00
Palghaut	13·28	Tranquebar	127·00
Vellore	14·19		
Cuddalore	14·25	Average...	21·55
Rajahmundry	14·25		
Madras, Triplicane...	14·36		
Madras Lunatic Asylum	14·47		

Statement showing the Average Cost of Medicines for each Patient (In and Out included) in each Civil Hospital of the Madras Presidency in the year 1871, the cost ranging from $\frac{1}{16}$ Pie at Sydapett to Rupees 1-14-0 in the Leper and Small-pox Hospital, Calicut.*

Dispensaries.	Total In and Out Patients treated.	Total Cost of Medicines.	* Average per Patient.	In-Patients treated.	Cost of Wines and Spirits.	Average Cost per Patient.
		RS. A. P.	RS. A. P.		RS. A. P.	RS. A. P.
Madras, Sydapett ...	5,780	3 0 0	0 0 $0\frac{1}{16}$	...	3 13 4	... ...
Cuddalore, Old Town.	5,817	65 14 3	0 0 2	116	6 6 0	0 0 $10\frac{1}{2}$
Chellumbrum ...	4,093	60 15 8	0 0 $2\frac{3}{4}$	...	... ...	... ...
Conjeveram ...	8,986	181 5 7	0 0 $3\frac{3}{4}$	146	9 15 0	0 1 1
Ongole	3,320	72 6 11	0 0 4	...	... ...	... ...
Pollachy	3,181	68 6 8	0 0 4	249	8 7 0	0 0 $6\frac{1}{2}$
Cuddalore	6,080	142 12 7	0 0 $4\frac{1}{2}$	171	... ...	... ...
Madras, Black Town, North Side ...	8,987	235 13 6	0 0 5	...		
Anantapur	1,538	45 10 5	0 0 $5\frac{1}{2}$	15	... ...	... ...
Vellore	7,258	231 1 3	0 0 6	298	... ...	... ...
Mangalore	4,240	138 15 0	0 0 $6\frac{1}{4}$	188	... ...	... ...
Nellore Branch ...	6,181	205 7 6	0 0 $6\frac{1}{4}$	...	8 8 0	0 0 $8\frac{1}{2}$
Coimbatore	6,056	222 2 7	0 0 7	163	... ...	... ...
Kimedy	4,598	177 15 0	0 0 $7\frac{1}{4}$	86	... ...	... ...
Mayaveram... ...	2,361	91 2 4	0 0 $7\frac{1}{4}$	...	9 9 0	0 1 $9\frac{1}{4}$
Vizagapatam ...	8,766	341 3 6	0 0 $7\frac{1}{4}$	237	... ...	... ...
Madras, Triplicane...	15,345	619 0 4	0 0 $7\frac{1}{2}$	474	... ...	... ...
Rajahmundry ...	4,994	201 13 8	0 0 $7\frac{3}{4}$	228	20 0 0	0 0 8
Kurnool	7,674	326 5 5	0 0 8	88	... ...	... ...
Berhampore ...	2,240	102 2 11	0 0 $8\frac{3}{4}$	128	24 0 6	0 4 $4\frac{1}{4}$
Adoni	2,450	121 0 0	0 0 $9\frac{1}{4}$	50	19 10 0	0 2 $5\frac{1}{4}$
Palghaut	2,664	134 7 10	0 0 $9\frac{1}{2}$	186	3 11 0	0 1 2
Manargoody ...	7,519	395 12 0	0 0 10	227	... ...	... ...
Calicut	9,048	489 14 11	0 0 $10\frac{1}{4}$	239	... ...	... ...
Cochin	9,736	530 7 9	0 0 $10\frac{1}{4}$	542	... ...	... ...
Trichinopoly ...	8,080	470 7 0	0 0 11	216	83 4 10	0 6 2
Madras Lying-in Hospital—Dispensary	9,876	581 3 4	0 0 $11\frac{1}{4}$	274	212 12 0	0 12 5
Cuddapah	11,300	680 5 7	0 0 $11\frac{1}{2}$	367	21 11 4	0 0 $11\frac{1}{4}$
Kamptee	9,357	594 3 11	0 1 0	123	105 3 6	0 13 8
Ootacamund ...	5,943	371 9 9	0 1 0	344	23 0 0	0 1 $0\frac{3}{4}$
Cumbum	2,972	196 4 0	0 1 $0\frac{1}{2}$	35	... ...	... ...
Chittoor	7,531	511 11 4	0 1 1	244	... ...	... ...
Tranquebar... ...	3,139	224 5 5	0 1 $1\frac{1}{2}$	127	24 0 9	0 3 $0\frac{1}{4}$
Goodalore	2,236	161 3 9	0 1 $1\frac{1}{2}$	217	18 2 0	0 1 4
Tinnevelly	3,837	276 13 7	0 1 $1\frac{3}{4}$	74	... ...	... ...
Palcondah	1,839	134 9 5	0 1 $1\frac{3}{4}$	3	... ...	... ...
Ghooty	1,196	90 5 10	0 1 2	56	... ...	... ...
Chingleput	3,281	252 15 1	0 1 $2\frac{1}{2}$	58	... ...	... ...
Ramnad	7,211	555 3 5	0 1 $2\frac{3}{4}$	329	113 11 6	0 5 $6\frac{1}{4}$
Dindigul	4,796	378 4 9	0 1 $2\frac{3}{4}$	99	... ...	... ...
Hospett	2,157	175 7 0	0 1 3	41	... ...	... ...
Madura	12,115	993 10 8	0 1 $3\frac{1}{2}$	239	... ...	... ...
Sheally	2,662	230 9 6	0 1 $3\frac{1}{2}$	...	... ...	... ...
Madras Eye Infirmary	2,135	191 4 7	0 1 $4\frac{1}{2}$	293	... ...	... ...
Nellore	4,519	410 15 0	0 1 5	303	... ...	... ...
Madras, Vepery ...	3,904	386 11 0	0 1 $5\frac{1}{4}$	749	... ...	... ...
Secunderabad ...	3,518	350 9 10	0 1 7	147	44 7 1	0 4 10
Tuticorin	1,758	175 4 4	0 1 7	...	... ...	... ...
Chicacole	2,550	261 3 3	0 1 7	132	... ...	... ...
Madanapully ...	5,957	618 0 11	0 1 $7\frac{1}{2}$	186	... ...	... ...
Combaconum ...	5,965	622 6 9	0 1 $7\frac{3}{4}$	223	... ...	... ...
Negapatam ...	3,768	395 14 7	0 1 8	124	... ...	... ...
Salem	6,047	632 10 5	0 1 8	177	71 5 2	0 6 $5\frac{1}{4}$

Statement showing the Average Cost of Medicines for each Patient (In and Out included) in each Civil Hospital of the Madras Presidency in the year 1871, the cost ranging from $\frac{1}{16}$ Pie at Sydapett to Rupees 1-14-0 in the Leper and Small-pox Hospital, Calicut.—(Concluded.)

Dispensaries.	Total In and Out Patients treated.	Total Cost of Medicines.	* Average per Patient.	In-Patients treated.	Cost of Wines and Spirits.	Average Cost per Patient.
		RS. A. P.	RS. A. P.		RS. A. P.	RS. A. P.
Bellary	5,506	625 1 1	0 1 $9\frac{3}{4}$	211	11 10 0	0 0 $10\frac{1}{2}$
Edyangoody ...	2,032	258 6 2	0 2 $0\frac{1}{4}$	41	... ...	... ...
Guntoor	2,464	311 11 7	0 2 $0\frac{1}{4}$	103	18 12 0	0 2 $10\frac{3}{4}$
Madras Female Orphan Asylum ...	515	65 9 4	0 2 $0\frac{1}{4}$	345	... ...	... ...
Tellicherry	2,327	314 5 2	0 2 $1\frac{3}{4}$	166	... ...	... ...
Munjeri	2,629	420 10 10	0 2 $6\frac{1}{2}$	341	22 11 10	0 1 $0\frac{3}{4}$
Cocanada	2,379	481 13 6	0 3 $2\frac{3}{4}$	178	... ...	... ...
Madras General Hospital	10,467	2,347 14 9	0 3 7	2,667	5,992 5 7	2 3 $11\frac{1}{4}$
Streevulliputoor ...	555	128 11 9	0 3 $8\frac{1}{2}$	...	... ...	... ...
Coonoor	2,511	604 8 11	0 3 10	156	19 7 6	0 1 $11\frac{3}{4}$
Palamcottah ...	2,919	737 13 0	0 4 $0\frac{1}{2}$	298	18 11 11	0 1 0
Kotagherry... ...	1,274	341 8 10	0 4 $3\frac{1}{4}$	...	... ...	... ...
Madras Native Infirmary	1,681	517 4 2	0 4 11	1,681	456 15 11	0 4 4
Masulipatam ...	2,199	725 4 1	0 5 $3\frac{1}{4}$	96	140 0 0	1 7 4
Raneepett	7,729	2,606 12 0	0 5 $4\frac{3}{4}$	799	... ...	... ...
Madras Lying-in Hospital — Midwifery Cases	1,384	581 3 4	0 6 $8\frac{1}{2}$	1,384	212 12 0	0 2 $5\frac{1}{2}$
Madras Male Asylum	139	92 10 4	0 10 $7\frac{3}{4}$	139	... ...	... ...
Madras Leper Hospital	2 1	157 3 8	0 10 $10\frac{1}{2}$	231	119 8 0	0 8 $3\frac{1}{2}$
Madras Lunatic Asylum	246	183 5 8	0 11 11	246	1,697 2 0	6 14 $4\frac{1}{2}$
Palliport Lazaretto...	39	46 13 2	1 3 $2\frac{1}{2}$	39	... ...	... ...
Tripathy	595	1,076 15 8	1 12 $11\frac{1}{2}$	...	... ...	... ...
Leper and Small-pox Hospital, Calicut..	65	121 14 5	1 14 0	65	... ...	... ...
Seamen's Hospital, Cocanada... ...	49	... ...	... ...	49	... ...	... ...
Madras Black Town, and Royapooram Medical Missions..	11,232	... ...	... .	...	... ...	... ...
Nazareth	...	670 0 0	... ...	...	... ...	... ...
Paumben	601	... ...	... ...	1	... ...	... ...
Ponani	2,250	... ...	... ...	154	... ...	... ...
Tritrapundi ...	2,561	... ...	... ...	...	... ...	... ...
Total...	3,55,140	29,536 7 8	*0 1 $4\frac{1}{4}$	18,401	9,541 10 9	0 13 $6\frac{1}{2}$

* Obtained by dividing the total expenditure for medicines (after deducting the amount on that account at Nazareth where the number of patients treated is not given) by the total number of such patients only as have the medicine cost shown against them.

Submitted

Statement showing the Average Cost of Wines and Spirits for each In-patient in each Civil Hospital of the Madras Presidency during the year 1871, the cost ranging from 6½ Pies at Pollachy to Rupees 6-14-4½ in the Madras Lunatic Asylum.*

Dispensaries.	Total In and Out Patients treated.	Total Cost of Medicines.	Average per Patient.	Total In-Patients treated.	Total Cost of Wines and Spirits.	* Average Cost per Patient.
		RS. A. P.	RS. A. P.		RS. A. P.	RS. A. P.
Pollachy	3,181	68 6 8	0 0 4	249	8 7 0	0 0 6½
Madras, Triplicane...	15,345	619 0 4	0 0 7½	474	20 0 0	0 0 8
Mangalore	4,240	138 15 0	0 0 6¼	188	8 8 0	0 0 8½
Bellary	5,506	625 1 1	0 1 9¾	211	11 10 0	0 0 10½
Cuddalore, Old Town.	5,817	65 14 3	0 0 2	116	6 6 0	0 0 10½
Cuddapah	11,300	680 5 7	0 0 11½	367	21 11 4	0 0 11¼
Palamcottah ...	2,919	737 13 0	0 4 0½	298	18 11 11	0 1 0
Munjeri	2,629	420 10 10	0 2 6½	341	22 11 10	0 1 0¾
Ootacamund ...	5,943	371 9 9	0 1 0	344	23 0 0	0 1 0¾
Conjeveram... ...	8,986	181 5 7	0 0 3¾	146	9 15 0	0 1 1
Adoni	2,450	121 0 0	0 0 9¼	50	3 11 0	0 1 2
Goodaloor	2,236	161 3 9	0 1 1¾	217	18 2 0	0 1 4
Kimedy	4,598	177 15 0	0 0 7¼	86	9 9 0	0 1 9¼
Coonoor	2,511	604 8 11	0 3 10	156	19 7 6	0 1 11¾
Berhampore ...	2,240	102 2 11	0 0 8¾	128	19 10 0	0 2 5¼
Madras Lying-in Hospital — Midwifery Cases	1,384	581 3 4	0 6 8½	1,384	212 12 0	0 2 5½
Guntoor	2,464	311 11 7	0 2 0¼	103	18 12 0	0 2 10¾
Tranquebar... ...	3,139	224 5 5	0 1 1½	127	24 0 9	0 3 0¼
Madras Native Infirmary	1,681	517 4 2	0 4 11	1,681	456 15 11	0 4 4
Kurnool	7,674	326 5 5	0 0 8	88	24 0 6	0 4 4¼
Secunderabad ...	3,518	350 9 10	0 1 7	147	44 7 1	0 4 10
Ramnad	7,211	555 3 5	0 1 2¾	329	113 11 6	0 5 6¼
Trichinopoly ...	8,080	470 7 0	0 0 11	216	83 4 10	0 6 2
Salem	6,047	632 10 5	0 1 8	177	71 5 2	0 6 5¼
Madras Leper Hospital	231	157 3 8	0 10 10½	231	119 8 0	0 8 3¼
Madras Lying-in Hospital—Dispensary	9,876	581 3 4	0 0 11¼	274	212 12 0	0 12 5
Kamptee	9,357	594 3 11	0 1 0	123	105 3 6	0 13 8
Masulipatam ...	2,199	725 4 1	0 5 3¼	96	140 0 0	1 7 4
Madras General Hospital	10,467	2,347 14 9	0 3 7	2,667	5,992 5 7	2 3 11¼
Madras Lunatic Asylum	246	183 5 8	0 11 11	246	1,697 2 0	6 14 4½
Anantapoor... ...	1,538	45 10 5	0 0 5½	15	... ...	... ...
Calicut	9,048	489 14 11	0 0 10¼	239	... ...	... ...
Calicut Leper and Small-pox Hospitals	65	121 14 5	1 14 0	65	... ...	... ...
Chellumbrum ...	4,093	60 15 8	0 0 2¾	...	... ...	... ...
Chicacole	2,550	261 3 3	0 1 7½	132	... ...	... ...
Chingleput	3,281	252 15 1	0 1 2¾	58	... ...	... ...
Chittoor	7,531	511 11 4	0 1 1	244	... ...	... ...
Cocanada	2,379	481 13 6	0 3 2¾	178	... ...	... ...
Cocanada Seamen's Hospital ...	49	... ...	... ...	49	... ...	... ...
Cochin	9,736	530 7 9	0 0 10¼	542	... ...	... ...
Coimbatore ...	6,056	222 2 7	0 0 7	163	... ...	... ...
Combaconum ...	5,965	622 6 9	0 1 8	223	... ...	... ...
Cuddalore	6,080	142 12 7	0 0 4½	171	... ...	... ...
Cumbum	2,972	196 4 0	0 1 0½	35	... ...	... ...
Dindigul	4,796	378 4 9	0 1 3	99	... ...	... ...
Edyangoody ...	2,032	258 6 2	0 2 0¼	41	... ...	... ...
Ghooty	1,196	90 5 10	0 1 2½	56	... ...	... ...

Statement showing the Average Cost of Wines and Spirits for each In-patient in each Civil Hospital of the Madras Presidency during the year 1871, the cost ranging from 6½ Pies at Pollachy to Rupees 6-14-4½ in the Madras Lunatic Asylum.— (Concluded.)

Dispensaries.	Total In and Out Patients treated.	Total Cost of Medicines.	Average per Patient.	Total In-Patients treated.	Cost of Wines and Spirits.	* Average Cost per Patient.
		RS. A. P.	RS. A. P.		RS. A. P.	RS. A. P.
Hospett	2,157	175 7 0	0 1 3½	41	... ...	... ...
Kotagherry... ...	1,274	341 8 10	0 4 3¼	...	... ...	... ...
Madras, Black Town, North Side ...	8,987	235 13 6	0 0 5	...	... ...	... ...
Madras, Black Town, and Royapooram Medical Missions..	11,232	... .	... ...	...	... ...	... ...
Madras, Vepery ...	3,904	386 11 0	0 1 7	749	... ...	... ...
Madras Eye Infirmary	2,135	191 4 7	0 1 5	293	... ...	... ...
Madras Female Orphan Asylum ...	515	65 9 4	0 2 0¼	345	... ...	... ...
Madras Male Asylum	139	92 10 4	0 10 7¾	139	... ...	... ...
Madanapully ...	5,957	618 0 11	0 1 7¾	186	... ...	... ...
Madura	12,115	993 10 8	0 1 3½	239	... ...	... ...
Manargoody ...	7,519	395 12 0	0 0 10	227	... ...	... ...
Mayaveram... ...	2,361	91 2 4	0 0 7¼	...	... ...	... ...
Nazareth	...	670 0 0	... ...	...	... ...	... ...
Negapatam... ...	3,768	395 14 7	0 1 8	124	... ...	... ...
Nellore	4,519	410 15 0	0 1 5¼	303	... ...	... ...
Nellore Branch ...	6,181	205 7 6	0 0 6¼	...	... ...	... ...
Ongole	3,320	72 6 11	0 0 4	...	... ...	... ...
Palcondah	1,839	134 9 5	0 1 2	3	... ...	... ...
Palliport Lazaretto..	39	46 13 2	1 3 2½	39	... ...	... ...
Palghaut	2,664	134 7 10	0 0 9½	186	... ...	... ...
Paumben	601	... ...	... ...	1	... ...	... ...
Ponani	2,250	... ...	... ...	154	... ...	... ...
Rajahmundry ...	4,994	201 13 8	0 0 7¾	228	... ...	... ...
Raneepett	7,729	2,606 12 0	0 5 4¾	799	... ...	... ...
Sheally	2,662	230 9 6	0 1 4½	...	... ...	... ...
Streevulliputoor ...	555	128 11 9	0 3 8½	...	... ...	... ...
Madras, Sydapett ...	5,780	3 0 0	0 0 $0\frac{1}{10}$	...	3 13 4	... ...
Tellicherry	2,327	314 5 2	0 2 1¾	166	... ...	... ...
Tinnevelly	3,837	276 13 7	0 1 1¾	74	... ...	... ...
Tripathy	595	1,076 15 8	1 12 11½	...	... ...	... ...
Tritrapundi ...	2,561	... ...	... ...	...	... ...	... ...
Tuticorin	1,758	175 4 4	0 1 7	...	... ...	... ...
Vellore	7,258	231 1 3	0 0 6	298	... ...	... ...
Vizagapatam ...	8,766	341 3 6	0 0 7¼	237	... ...	... ...
Total...	3,55,140	29,536 7 8	0 1 4¼	18,401	9,541 10 9	*0 13 6½

* Obtained by dividing the total expenditure for spirits (after deducting the amount on that account at Sydapett where no in-patients were treated) by the total number of such in-patients only as have the wines charge shown against them.

Submitted

Read the following papers

MISCELLANEOUS No. 1041

REVENUE DEPARTMENT.

22

PROCEEDINGS OF THE BOARD OF REVENUE.

Dated 19th February —— 1873.

Read the following

№ 536

From

A. MacGregor Esqre,
President of the Local Fund Boards
Malabar

To

J. Grose Esqre,
Secretary to the Board of Revenue
Madras

SIR,

With reference to G. O. dated 26th July last. № 989, I have the honor to state for the information of Government that at a meeting held by the Calicut Local Fund Board it has been decided to allow batta and travelling allowance to the Civil Surgeon when inspecting the Dispensaries under their control (Vide District Gazette dated 16th November last para 11) The Tellicherry Circle Board do not see the necessity for such inspection as their Dispensary at Manantody is under the charge of a qualified Medical Practitioner.

Malabar Local Fund Board Office,
Calicut, 30th January 1873 ——

I have &c
(signed) J. B. Spenning
Sub Collector for President

Submitted

Submitted to Government with a
reference to Government Order 26th July
1872 No 989.

(True Copy & Extract)

H.E. Stokes

for Secretary

To,

The Chief Secretary to Government

Financial Department

Bombay 31st March 1873

No. 1146 of 1873

From

The Secretary to the Inspector General
Indian Medical Department

To

The Secretary to the Inspector General
Indian Medical Department
Madras

Sir,

In reply to your letter No. 2161 dated 26th Instant I am desired to state that in this Presidency there is no officer designated "Inspector or General of Dispensaries," and Surgeon Major Moore holds his appointment as such under the Bengal Government.

2. Under the rules published for the management of Dispensaries in November 1871 page 104 Quarterly sheets, Civil Surgeons are made the ex-officio Inspectors of Dispensaries in their Districts. This however has lately been modified, it being found that complications arose as regards the duties and emoluments of Civil Surgeons when absent on such duty. The present ruling is that Civil Surgeons shall make such inspections only when their own duties can be arranged for without extra charge to Government, and that ordinarily all Dispensaries should be

Rec'd 28 July 1873. Ans. 29th. Jul.

Rec'd 28 July 1873. Ans. 29th. Jul.

S.O. No 631

No 12 Aug 28th 1873

Rec'd 28 July 1873. Ans. 29th. Jul.

PROCEEDINGS OF THE BOARD OF REVENUE.

Rec. No. 1941

Dated 19th February 1873

Despatched 20th March 1873

Subject. Rs. 332

Submitting letter from the Presidency Surgeon dated 13th Inst. Recommending the decision of the Govt. on the question of inspection of Dispensaries by Civil Surgeons

should be visited by Deputy Inspectors General of Hospitals in the course of their annual tours and by Superintendents of vaccination.

I have &c.

(Signed) T. E. P. Martin

Surgeon Major, Secretary.

(True copy)

Edwin Galpin Inspector General

Inspector General of Hospitals
Indian Medical Department.

Enclosure in a letter to the
Chief Secretary to Government
Financial Department No. 122
dated 2nd April 1873 from the
Inspector General of Hospitals
Indian Medical Department.

Madras.

Financial 1873 April
No. 631
Recd. 5-4
Ans. 7-4-73

Surgeon Cowan
a letter from the Secretary to the Inspector Genl. of Hospitals Indian Medical Service Calcutta dated 26th March 1873 requesting that there is no objection to his being employed as Inspector General of Dispensaries

Financial 1873 April
No. 631
From Secretary Genl. of Hospitals
To Secretary to Government
Recd. 5-4
Ans. 7-4-73

No. 37.

From

The Secretary to the
Inspector General of Hospitals
Indian Medical Department.

To

The Secretary to the Inspector General
of Hospitals Indian Medl. Dept.

Fort St. George
~~Fort William~~ 7th April 1873.

Sir,

In reply to your letter No. 2160 of the 26th March 1873, I have the honor by direction of the Inspector General of Hospitals Indian Medical Service Calcutta to state, that the following Medical Officers are employed in this Presidency as Inspectors or General of Dispensaries.

Surgeon W. Walker Offg. Inspector General of Dispensaries and Prisons North West Provinces.

Surgeon A. M. Dallas Inspector General of Prisons and Dispensaries in the Punjab.

Surgeon Barter (Madras establishment) Offg. Inspector

Inspector General of Prisons and
Dispensaries. Central Provinces.

Surgeon W. J. Moore (Bombay Estatablish-
ment) Superintendent General of
Dispensaries and Vaccination Raj-
-putana and Sanitary officer for
Ajmere and Meywara.

Surgeon R. S. Abbot. Inspector General of Jails
and Dispensaries, Superintendent
of Vaccination and Sanitary Com-
missioner of Hyderabad.

/Signed/ A. K. Mc. Leod.
Secty. Inspr. General of Hosps.
Indian Medical Dept.

/True copy/

Edwar Malpas Inspector General
Inspector General of Hospitals
Indian Medical Department.

No. 122

952

OFFICE OF INSPECTOR-GENERAL, I. M. D.,
Fort Saint George, 2nd April 1873.

From

INSPECTOR-GENERAL EDWARD BALFOUR,
Inspector General of Hospitals,
Indian Medical Department,
Fort Saint George,

To

The Honorable William Hudleston
Chief Secretary to Government
Financial Department.

SIR,

I have the honor to acknowledge receipt of the Government Order No. 103 of 21st January 1873, in which I am requested to submit my opinion on the subject of Local Fund Dispensaries, viz: as to-

(i) whether periodical inspection by a professional Officer is necessary, when there is a Local Fund Committee competent to look after financial and ordinary sanitary arrangements;?

ii If such inspection be required, what class of Officers will be available for

1873.
No. 2540.
Received 12th April

for the purpose, and what arrangements should be made during their absence for the performance of their ordinary duties;?

iii. What sum per visit (in addition to travelling allowance) would be a fair remuneration for the trouble of Inspection;?

and, I was, likewise, required to explain the practice which has hitherto prevailed with reference to outlying Dispensaries.

2. Seeing that much that I can say on these points has relation to the last question, I have the honor to report to the Right Honorable the Governor in Council that, from the earliest times, the Superintending Surgeons, who have now merged into the rank of Deputy Inspectors General of Hospitals, have annually, or oftener, inspected every Medical Establishment within

within their respective Circles of Superintend-ence, and, up to the year 1868, in which year separate Veterinary Inspecting Officers were appointed, the duty likewise devolved on them of inspecting the hospitals of the Veterinary Department.

3. In order to carry out the in-spection duties, His Excellency the Command-er-in-Chief annually publishes in General Orders the period fixed for inspecting, and likewise indicates the Military Hospitals which have to be visited; and, when circu-lating that General Order, I send to each Administrative Circle a list of the Civil hospitals &c^a which have also to be in-spected, so that the visits of the Deputy Inspectors General to the Civil and Mili-tary Medical Institutions are made simultaneously. This is the system through-out all British India, and it has been found to be a very effective mode of Supervising the hospitals of the country.

The

The inspection Reports which Deputy Inspectors General make on all the Military and Civil Institutions are identical in form and character. They are despatched from each Station before the Deputy Inspector General leaves it; and, when they are received by me, the points needing immediate disposal are attended to, and with other less pressing matters are afterwards noticed in the Annual Reports from this Office.

In the questions put to me I recognize the expression of a wish on the part of Government, that the new Dispensaries springing up should receive due inspection; but it will be observed by the above explanation that they are, as yet, receiving equal care with that bestowed on other hospitals. I have, however, been sensible that the day must come, when additional inspecting power will be required to attend to them; and in that consciousness I have been watching their

their increasing numbers.

4. On this point, the question that I have had under my consideration has been, whether the present Agency of Deputy Inspectors General should be extended, or whether some other form of Superintendence for the Dispensaries should be introduced; and I observe, in the documents sent to me for perusal, that a proposal has emanated from the Madura Local Committee to employ Zillah Surgeons to inspect the Local Fund Dispensaries; and, in order to aid in the disposal of these points and in connection with question II in the order under reply, I have the honor to mention that there are insurmountable difficulties preventing Zillah Surgeons inspecting the Dispensaries in their respective ranges. I regard Zillah Surgeons as an inspecting Agency very inferior to that which is now in operation in the Madras Presidency; as introducing, as regards Madras, an unusual kind of expenditure and rendering necessary considerable modifications in the Madras mode of working the Zillah

Hospitals. I am of opinion that in the re-arrangement of the Circles of Inspection which was carried out in the year 1867, and owing to the additions to the hospitals which have been made since then, the inspecting work has got beyond the power of the Administrative Officers to perform. I consider that the numbers of the Deputy Inspectors General of Hospitals need to be increased, or some other inspecting Agency created, and I may mention that in two of the Madras Circles viz in those of Hyderabad and Nagpore the latter step has been adopted by the India Government.

5 With reference to the question in clause 1 I am of opinion that periodical inspection by a professional Officer is indispensably necessary, on professional, sanitary and financial grounds. It is carried on, everywhere, in British India and its continuance seems to me to be a duty. I believe that, as a rule, no Local Fund Board, however constituted, can

have

have the requisite professional information for the performance of such inspecting duties; any control over a professional man, on professional matters, would be inadmissible from any unprofessional body, and would be very unacceptable even from a professional man unless of standing and experience. I am also of opinion that the Officers best suited for the inspection of the Medical Institutions of the Country are the Deputy Inspectors General of Hospitals, because they are already performing such duties; they have been specially selected from amongst the Seniors of the Medical Department for their known capabilities; the existing regulations provide them with a mileage allowance while travelling; and, while absent, the Senior Executive Medical Officer takes charge of their Office without extra cost to the State. So long as the number of hospitals in the respective circles of Superintendence is such as to admit of their due

inspection by the existing Deputy Inspectors General of Hospitals, I think it would be advisable to continue them in the duty.

6. In northern India, however, in the Panjab, in the N. W. Provinces, in Rajpootanah, in the Central Provinces and in the Berars, there has been created a class of Inspecting Agents, styled — Inspectors General of Hospitals or Inspectors General of Dispensaries, in some provinces performing that sole duty, at others, as in the marginal instances,* with other offices combined. Though bearing nearly the same military designation as the Inspectors General of Hospitals, they are officers of the Grade of Surgeon or of Assistant Surgeon, who have been selected for the Staff duty of inspecting dispensaries. A Surgeon of the Madras Army is so employed (c) in the Seonee Districts, and a Bombay Surgeon is an Inspector General of

(a) Inspector Genl. of Prisons & Dispensaries N W Provinces.
(b) —— do —— Jails —— " do. & Supts of Vaccn Hydt Assigd Dists
(c) Civil Surgeon Seonee Dists. Offg Insp. General of Prisons and Dispensaries Central Provinces.
(d) Surgeon Rajpootana Political Agency, Supt. General of Dispensaries and Vaccination, Rajpootana & Sanitary Officer for Ajmere and Mhairwarahs

Dispensaries in Rajpootana. There is, also, as will be observed, one of this class in the central Provinces, and whilst I was serving in the circle of the Hyderabad Subsidiary Force, the Hyderabad Contingent and Hyderabad Assigned Territories the duty of inspecting the Berar Dispensaries was added on to the work of the Central Province Officer. The appointment afterwards seemed to me to be premature that it was so, I think, is shewn by the fact that the inspection of Dispensaries in the Central Provinces and in the Berars has since been disconnected, and in the latter province the offices of Inspector General of Jails and Dispensaries and Superintendent of Vaccination have been combined into one appointment.

7 Entertaining these views, the question of a superintending Agency — seems to me to be limited to the inquiry shall we introduce into Madras the syste

of Inspectors General of Dispensaries now in operation in Northern India, or shall the Madras system of superintendence by Deputy Inspectors General of Hospitals be continued?

8. In answer to these two questions, I have the honor to submit as my opinion, that the inspections should, as hitherto, be carried on by the Deputy Inspectors General of Hospitals, so long as the Institutions to be inspected can be overtaken, and when they increase beyond that capability the numbers of the Deputy Inspectors General should be increased. The pay of a Deputy Inspector General of Hospitals and that of the Inspector General of Dispensaries are not very different, the former being Rupees 1800. and, for the Dispensaries is Rs 800 to 1500 The former are men of ripe experience selected from amongst the Senior Officers: they have annually, or twice a year, to visit all the institutions in their circle, and if other than

? Eh.

than the Deputy Inspector General be appointed, two Officers will annually, or bi-monthly, be going over the same ground, and I have no doubt that the Department would prefer the continuance of the present system.

9. It is proper to mention that this subject was several times discussed with the Right Honorable Baron Napier, and at his request I submitted a Memorandum which will doubtless have been alluded to in some of the Minutes on the Medical Department that Lord Napier wrote. — And I then mentioned that the work in the Presidency and Northern circle of superintendence has, from its first amalgamation, been quite beyond the inspecting power of any single Officer to overtake. — Though the re-arrangement of districts was only made in the year 1867, so early as 1868 my predecessor reported to His Excellency the Commander-in-Chief that serious inconvenience to the Public

1868. 17th Sept. No. 3372 To Adjutant General
29th do 3442 from — do —

Service would be occasioned by the Annual visits of the Deputy Inspectors General to the Northern Districts, and it was then arranged that these should be visited only once in two years: and I therefore submitted to Lord Napier that a Deputy Inspector General was needed for the Northern Districts alone. In illustration of this I may mention that the late Deputy Inspector General Blacklock left Madras on his northern tour on the 19th December 1871, and when, at my telegraphed request, after an absence of 179 days, he returned to Madras on the 14th June 1872, to attend to urgent duties here, he had not overtaken all the northern hospitals; so that some of them will be visited after an interval of four years. Also, the Circle of the Southern Districts with Malabar and Canara is so large that only a strong energetic man can possibly overtake it all. Deputy-Inspector General Johnston who is now there began to inspect on the 20th September 72

and

and is still as I write (29th March 73) on his tour. The increase of work has been owing to the circumstance that, since 1850, the three ranges of the Presidency, the Centre Division and the Northern Division have been formed into one Circle, and that of Malabar and Canara has been added to the Southern Division.

10. I think that such overburthening is to be regretted. I entertain a very high opinion of the value of Inspection of all departments, but for the Medical Department in particular, because great Sanitary professional and financial advantages are to be obtained by it. When I formed the Office of Examiner of Medical Accounts the savings that I effected, and with advantage to the Public Service, were large, that in firewood alone was great. For sanitary and professional reasons, also, inspection should be continuous, but it should be thorough and be performed by Officers of rank and Standing and of acknowledged ability; and it is on these

grounds

grounds that I would recommend Deputy Inspectors General to be the Inspecting Officers.

11 If, however, changes be contemplated in the constitution of the Indian Medical Department of a kind preventing action on the above recommendation, I think that the practice in force in Northern India of having a class of Medical Staff Officers styled Inspectors General of Dispensaries is the one to be adopted for Madras.

12 I observe that the Local Fund Boards who have expressed opinions have not been unanimous in their views* as to the form which inspection should take, but as to the suggestion that Tillah Surgeons should inspect, the difficulty of annually relieving 25 Tillah Surgeons or Civil Surgeons or the nearest Commissioned Officers from their substantive charges would be insurmountable, and I need not therefore notice their objections to such

No opinion	Desirable By Tillah Surgeons	Desirable By nearest Commd Officers or Medl Officers	Continue Dy Insps General	Unnecessary	Yes. Insps Officer not named
Trichinopoly Vizagapatam Ghooty	Cuddapah Chingleput	Bellary Sydapet	S Coimbatore N. Chittoor	Penna-kondah	Dindigul

such a scheme further than to observe that it is unadvisable to make frequent changes in any medical charge and that a Tillah Surgeon might possibly not be a good inspecting Officer. The proposal for Tillah Surgeons to inspect cannot, in my opinion, be compared with my first recommendation of additional Deputy Inspectors General, or with that of a separate Inspecting Class of the kind in operation in Northern India, which I recommend if under present circumstances my first be not deemed suitable.

13 In connection with question 11 this is a proper occasion to attach, for each of the years 1869, 1870, and 1871, a statement shewing the marginal points of information. I constructed these statements in order to ascertain how these Institutions were working, to keep all the medical

	Highest	Lowest
Average Stay in Hospital	37 3/4 days	3 days
Average Cost of dieting each In patient	Rs. 5-8-9 1/4	Rs. 0-5-5 1/2
do per In-patient	. 37-9-3 1/4	. 2-9-11 3/4
Average Cost of Medicines for each patient	. 0-10-7 3/4	. 0-0-0 1/10
do of Wines and Spirits do	. 2-3-11 1/4	0-0-6 1/2
The death rate	1 in 127	1 in 3·58.

Officers informed of the work in their respective hospitals and permit each of them to compare the results in their own institution with those of others. I distributed these statements to all and I am aware that they have been of great value. The improvements in the year 1871 over that of 1869 as shown by the figured Statements have been marked, but even in 1871 as will be observed there has been a very unnecessary diversity in every point that comes under a medical Officer's care; the average stay in hospital has ranged from 3 days to 37 days; the diet cost ranged per patient from 5½ annas to Rs. 5-8-9¼; the total cost of each patient varied from Rs. 2½ to Rs. 37½; the cost per patient for medicines, ranging from Rs. 0-0-0/10 to Rs. 0-10-7¾, the cost per patient of Wines from Rs. 0-0-6½ to Rs. 2-3-11¼; many hospitals had no

wine

wine expenditure at all, and the death rate ran from 1 in 3·58 to 1 in 127. These varying rates show, alike for the Country, for the Medical Officers and for the patients, the need for a constant, intelligent superintendence and systematic inspection, and the necessity, also, for some one central Office into which the data relating to them could be collected and compiled. In my opinion, as at present constituted, this Office ought to be that central Institution. In that view, and as there is no Medical Examiner for Civil Hospitals I had ordered all of them to send me their monthly accounts, and I had already effected reductions of unnecessary items of expenditure, and made improvements in forms. But, whilst so engaged, it was mentioned in G. O. No 1373 of 10th October 1872, that there was no necessity for a further check on the expenditure incurred in the Civil Dispensaries under the control of the Local Fund Boards, on

which

which my efforts to improve their condition and bring them all up to a general Standard of perfection were stopped. But the varied rates of charges and of mortality which prevail as are shown in the attached statement will explain to the Right Honorable the Governor in Council how desirous I have been to improve these Civil institutions and how much importance I attach to their inspection. For such a task the Local Fund Committees are not qualified as they do not possess the necessary data.

In letter No. 14 of 23rd April 1868 from Her Majesty's Secretary of State there was sent for the report of the Government of India a volume of suggestions in regard to sanitary works required for improving sanitary stations, and in para 4 of Sir Stafford Northcote's letter, when noticing the establishment of Medical Sanitary Inspections, he asked

Ry D. 31st Aug 1868

asked what organization was proposed to secure, under these Officers, the health and cleanliness of towns and villages and how the Government would satisfy themselves that the work is done. On receipt of a letter from the Government of India my observations were asked for on the volume of "Suggestions" and, on that part relating to inspection, I replied that "it is only by supervision "and the inspection of Supervisors that "Government can ascertain that the work "is done." I think that this view is applicable to every department but for none more than the medical, whose officers have varied work to perform, and are widely scattered throughout the Country But in the present constitution of the Madras Medical Establishment every member of which belongs to the army it is certainly essential that those of them who have been lent to the

Civil

Civil Department should continue to be inspected as carefully as if serving in Military hospitals; tho', as will have been gathered from my previous remarks, in my opinion, on this country inspection of Hospitals whether civil or Military should for ever be continued.

14. In the previous parts of this letter I have submitted to Government answers to the questions asked of me as to the scheme of inspection hitherto followed; as to the necessity for its continuance and as to the form in which it should be continued; and, as the subject is one of importance at this period of change, I have endeavoured to place the subject fully before Government. I have, however, the

* Name of Circle	No of Hospitals	Whether possessing an Useful Grade of Dispensaries.
Presidency & Northern Districts	128	No
Southern District Malabar & Canara	114	No
Pegu & British Burmah	66	No
Mysore Dwn. Mysore & Ceded Dists	70	No
Hyderabad Subsidiary Force, Hyds Contingent & Hyderabad Assigned Territories	57	Yes
Nagpore Force & Central Provinces	37	Yes

the honor to submit for favorable consideration the urgency of the need for appointing a Deputy Inspector General of Hospitals for the Northern Districts. The Southern Districts. Malabar and Canara. can be deferred for another year or two. but the state of the Northern Districts is pressing. If, however, circumstances do not permit of the appointment of a Deputy Inspector General of Hospitals for the Northern Districts, the adoption of the plan in operation in Northern India is the sole alternative which I feel able to recommend. It is not in my belief practicable to mobilize Zillah Surgeons.

15. If, however, for any reason neither of the above suggestions be, for the present deemed practicable, I have the honor to ask the permission of Government at the close of this year to detail for four months a medical Officer

on

on the pay of his rank, with the usual travelling allowance for the inspection of the hospitals in the Northern districts, only a portion of which has been visited since the year 1869-70. and the more remote and outlying the medical institutions are the more needed is inspection.

16. I have mentioned in paras. 12 and 14, that, in the existing constitution of the Madras Zillah Surgeoncies, it would not be practicable nor advisable to make the Zillah Surgeons inspecting Officers. In Northern India, however, the Civil Surgeons do inspect outlying dispensaries. In the Panjab, for instance, there are 110 dispensaries, and there are 32 districts. Of the 110 dispensaries, 57 received, in the year 1871. from the Zillah Surgeons, 275 visits, some of them only once in a year, but seven of them were seen once monthly. I have no doubt but that the Madras

Zillah

Zillah Surgeons could not make frequent visits to the outlying dispensaries, and that their leaving their own charges, in most of which the marginal Departments receive their care would be attended with very great inconvenience, even risk. It is a change that I am not able to recommend. The difficulty as regards the jails would be almost insuperable because the Zillah Surgeons, as a rule, are the jail Superintendents, and the jail authorities would find it impossible to replace them temporarily. Nevertheless, if it be deemed advisable so to utilize the services of the Zillah Surgeons I think that they should inspect at least once a quarter, that they should receive the usual mileage allowance besides the authorized batta of Rs 5

Civil Hospital	
Jail	
Revenue Officers & Establishment	
Judicial " "	
Police	
Public Works	
Post Office	
Telegraph	

daily

daily and twenty rupees p[illegible] h Dis-
pensary inspected.

17. In the Panjab and other North
-ern Provinces there is, as I have
before mentioned, an Inspector General
of dispensaries. If an officer of that
class be
created
in Mad-
ras the
Inspection Report should be sent to
him with a duplicate to the President
of the Local Fund Board. If there be
no such Office in Madras the Inspection
Report should still be in duplicate, one
copy to the Deputy Inspector General of the
circle for this Office, and one copy to the
Board. But for the Madras Presi-
dency three Inspectors General
of Dispensaries would be needed.

Designation	Salary
Panjab Inspector Genl of Prisons and Dispensaries	Rs 1500
North Western Provinces do do do	1500
Oudh.	
Central Provinces do do	1000
Hyderabad Assigned Territories do do Vaccine & Sanitary Inspector	1200
Seone Civil Surgeon	800

I

No. 14

I have the honor to be
Sir
Your most Obedient Servant
Edward Balfour Insp. Genl.
Insp. Genl of Hospls. Md. D

Pro: 31 August 1868. No 246-47 M.S.
" 5 July 1869. " 9-14.
" 26 July 1872. " 207-208
" 10 October 1872. " 105-106
" 21 January 1873. " 124 M.S.

Fin 1873. Dept.

From

Inspector-General E. Balfour,
Inspector-General of Hospitals,
Indian Medical Department,
Fort Saint George,

To

The Chief Secy: to Govt.

Dated 2nd April 1873

~~Despatched~~

Received 3rd

No. 122

Subject. Ward 631

Submits the Insp^r Genl's Opinion relative to the inspection of Civil Dispensaries under Municipal & Local Fund Boards.

With Order

Read Nos 332 - 631 & 645
Encls

17

Order - Cota: amund. 12 May 1873. No 631

173

Hr Government agree with the Inspector General of Hospitals in considering that there are insuperable objections in the way of employing Zillah Surgeons in the inspection of outlying Dispensaries in the Local Fund Circles.

The final disposal of the matter will be reserved for consideration along with other questions now before Government.

J. D.

J. H.

× Does Dr B include these?

It may be omitted — But then I think Municp Committees is no Zillah Surgeon

To The Insp^r Genl of Hospitals
Indian Med^l Dept
Board of Revenue

C 3/5 R 9/5