M.R.O. 1—77,500—8-6-31.

(1) Number of pages

(2) Date of repair

(3) Initials of the Referencer

MADRAS RECORD OFFICE.

Government of Madras.

Financial DEPARTMENT.

G.O. No. 101-02 Press / Mis.

Book-No. 42.61

Dated 7-5-1875.

327/328

Not to be folded or roughly handled

Government of Madras.

FINANCIAL DEPARTMENT.

Recd. } 1875. *Enclosures*

Regd. *Spare copies*

G.O. Nos. 1001-2, 7th May 1875.

Medical.

Orders passed on the subject of the organization of a Civil — Subordinate establishment for Provincial and Local Services in this Presidency, and the sanction of the Government of India requested thereto.

GOVERNMENT OF MADRAS.

FINANCIAL DEPARTMENT.

Read—the following papers:—

I

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. W. Hudleston, Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 23rd October 1873.
No.—407.

G.O., No. 930, of the 5th September 1873, ordered a report to be made as to the Medical requirements of the Civil Department in excess of the supply obtainable from the Military Department. Also ordered a report to be made as to the arrangements proper for meeting the additional demand.

2. I have appended to this letter a statement showing, in detail, the requirements of the Provincial Services, and I beg to mention that, after providing for the Imperial Service, the marginal numbers of attested medical subordinates remain surplus, and, therefore, available for the Provincial Services and for Local employ. Of these surplus subordinates the Provincial Services need the quantities as per margin. But as the correspondence in Proceedings of Government, No. 930, dated 5th September 1873, ordered that an addition of twenty-five per cent. should be allowed to the Military Establishment to meet its contingencies, any spare portion of which was ordered to be loaned to the Civil Department, I have assumed ten per cent. as the spare portion which will allow twelve * to be thus borrowed, and the numbers of the hospital assistants to be required to be provided in the Civil Department will thereby be reduced from 196 to 184.

Apothecary—41. *Assistant Apothecary*—54. *Passed Hospital Apprentice*—46. *Hospital Assistant*—244.

Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.
31	39	4	196
...	..	...	*12
31	39	4	184

3. I further beg to place, below, an abstract to show that, after duly supplying the Imperial Department and providing for the Provincial Services of the State, there are 125 attested medical subordinates, surplus, available for Local employ under Municipalities :—

—	Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.	Total.
Numbers actually present on 15th October 1873	73	113	64	395	644
Imperial requirements ...	32	60	18	151	
Provincial requirements	31	39	4	184	
Surplus available for Local employ	10	13	42	60	125

4. On the other point on which I am required to report, viz., as to the arrangements proposed to meet the additional demand, I have the honor to mention that there is no necessity to recruit either for Imperial or Provincial Services, because the 125 of existing surplus with the apprentices and pupils who are in College and out of College will be sufficient for nine or ten years to come to meet all casualties both in the Imperial and in the Provincial Departments, and, as mentioned in last paragraph, the 125 surplus educated medical men can, in the meantime, be lent to Municipalities for Local employ.

Enclosure.

Establishment of Medical Subordinates as it stood after revision under the Orders of Government, Public Department, No. 960, of the 11th September 1873.

—	Revised Establishment. Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.
Provincial Service.				
Governor's Household	...	1	...	2
General Hospital, Madras	1	3	...	..
Eye Infirmary	1	...	...	1
Lying-in-Hospital and Dispensary	1	2	...	
Lunatic Asylum, Madras		1	...	1
Do. Calicut	1	...	...	1
Do. Vizagapatam	...	...	...	1
Do. Trichinopoly	...	1	...	1
Leper Hospital, Madras	...	...	...	...
Do. Palliport	1	...	...	3
Port and Marine Surgeon's Department ...	...	...	...	...
First, Second, and Fourth Districts, Presidency ...	1	...	...	...
Third District and Civil Orphan Asylum	...	1	...	..
Lawrence Asylum, Ootacamund	1	...	...	1
Penitentiary	...	...	...	1
Her Majesty's Grand Jail	1	...	...	3
Medical College				
Lock Hospital, Madras				1
Civil Dispensaries at				1
Anjengo	...	...	..	...
Coonoor	...	...	...	...
Gooty	...	1	...	1
Kamptee	...	...	...	2
Ketagherry	...	...	...	1
Mercara	...	...	...	...
Ootacamund	...	...	...	
Secunderabad	...	...	...	
Revenue Establishments.				
Arcot, North { Chittoor, Collector	...	...	...	1
Arcot, North { Vellore, Sub-Collector	...	...	...	1
Arcot, South { Cuddalore, Collector	...	..	..	..
Arcot, South { Virdachellum, Sub-Collector ...	...	...	...	...
Arcot, South { Tindevanam, Head Asst. Collr. ...	...	1	...	1
Bellary ... { Bellary, Collector	...	..	...	1
Bellary ... { Anantapore, Sub-Collector	...	...	...	1
Bellary ... { Pennacondah, Head Asst. Collr. ...	...	...	...	1
Canara, South Mangalore, Collector	...	...	...	1
Coimbatore { Coimbatore, Collector	...	...	...	1
Coimbatore { Caroor, Sub-Collector	...	...	...	1
Cuddapah ... { Cuddaph, Collector	...	...	...	1
Cuddapah ... { Madanapally, Sub-Collector ...	...	...	...	1
Ganjam ... { Chetterpore, Collector	...	...	...	1
Ganjam ... { Chicacole, Sub-Collector	...	...	...	1
Godavery { Cocanada, Collector	...	...	...	1
Godavery { Rajahmundry, Sub-Collector ...	...	..	...	1
Kistna ... { Masulipatam, Collector	...	...	...	1
Kistna ... { Guntoor, Sub-Collector	...	...	...	1
Kistna ... { Yinnkondah, Deputy Collector ...	...	...	...	1
Kurnool { Kurnool, Collector	...	...	...	1
Kurnool { Cumbum, Head Asst. Collector ...	...	...	...	1
Madras ... { Cuddalore, Collector	...	...	...	1
Madras ... { Sydapet, Collector	...	...	...	1
Madura ... { Madura, Collector	...	..	...	1
Madura ... { Dindigul, Sub-Collector	...	...	...	1
Madura ... { Ramnad, Head Asst. Collr.	...	...	...	1
Malabar ... { Calicut, Collector	...	...	...	1
Malabar ... { Palghaut, Head Asst. Collr.	...	...	...	1

Establishment of Medical Subordinates, etc.—*continued.*

	Revised Establishment.			
	Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.
Provincial Service—(continued).				
Revenue Establishments—(continued).				
Nellore ... Nellore, Collector	...	...	...	1
Ramlapatam, Sub-Collector	...	...	...	1
Salem ... Salem, Collector	...	1	...	...
Ossoor, Sub-Collector	...	...	...	1
Tripatore, Head Asst. Collr.	...	...	...	1
Namkal, Deputy Collector	...	...	...	1
Tanjore ... Tanjore, Collector	...	...	...	1
Negapatam, Sub-Collector	...	...	...	1
Tinnevelly ... Tinnevelly, Collector	...	...	...	1
Tharmadam, Sub-Collector	...	...	...	1
Trichinopoly. Trichinopoly, Collector	...	...	...	1
Vizagapatam. Vizagapatam, Collector	...	1	...	...
Princl. Asst. Collr.	...	...	...	1
Senior Asst. Collr.	...	...	...	1
Jeypore, Assistant Agent	...	...	...	1
Provincial Jails at				
Bellary	...	...	...	1
Berhampore	...	...	...	1
Calicut	...	...	...	1
Cannanore (Central)	...	...	...	2
Chingleput	...	...	...	1
Chittoor	...	...	...	1
Coimbatore (Central)	...	...	...	2
Cuddalore	...	...	...	1
Cuddapah	...	...	...	1
Guntoor	...	...	...	1
Guindy	...	...	...	1
Kurnool	...	...	...	1
Madura	...	...	...	1
Mangalore	...	...	...	1
Masulipatam	...	...	...	1
Nellore	...	...	...	1
Nilgiris, Ootacamund	...	1	...	...
Rajahmundry (District)	...	...	...	1
Do. (Central)	...	...	...	2
Salem (Central)	...	...	...	1
Tanjore	...	...	...	1
Tinnevelly	...	...	...	1
Tranquebar	...	...	...	1
Tellicherry	...	...	...	1
Trichinopoly (District)	...	...	...	1
Do. (Central)	...	...	...	2
Vellore (Central)	...	...	...	2
Vizagapatam	...	...	...	1
Police at				
Balliguda (and Assistant Agent's Establishment)	1	...	...	1
Calicut	...	...	...	1
Collegal	...	...	...	1
Coimbatore	...	...	...	1
Cuddalore	...	...	...	1
Cuddapah	...	...	...	1
Ellore	...	...	...	1
Goonipore	...	...	...	1
Korapet (Goomsoor)	...	...	...	1
Kurnool	...	...	...	1
Madura	...	1	...	1
Mangalore	...	...	...	1
Masulipatam	...	...	...	1
Nursipatam	...	...	...	1
Nursapore	...	...	...	1
Ootacamund	...	...	...	1
Parvatipore	...	1	...	...
Rajahmundry	...	...	...	1
Ramnad	...	...	...	1
Salem	...	1	...	...
Suttlamungalum (and Revenue Establishment)	...	...	...	1
Trichinopoly	...	...	...	1
Trinnamallay	...	...	...	1
Vellore	...	...	...	1
Vizianagram	...	...	...	1
Vizagapatam	...	...	...	1

Establishment of Medical Subordinates, etc.—*concluded.*

	Revised Establishment.			
	Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.
Provincial Service—(concluded)				
Miscellaneous.				
Engr.'s Estab., Luckadie (Wynaad)	...	...	...	1
Do. Tambracherry Pass	...	...	...	1
Do. Suttiamungalum	...	1	...	1
Do. Berwarrah (and Civil Dispy.)	...	...	...	1
Do. Dowlaishweram	...	...	...	9
Resident at Travancore	...	...	...	1
Revenue Survey, Settlement and Demarcation	...	...	...	1
Geological Survey	...	...	...	1
Trigonometrical Survey	...	...	...	...
Vaccine Depot, Madras, as Superintendent	...	...	...	...
Do Laccadive Islands	1	...	...	...
Civil Station of Chicacole	1	...	...	...
Do. of Chetterpore	1	...	...	140
Do. of Rajahmundry	19	16	...	21
Add fifteen per cent. for reserve	3	2	...	161
Total Madras Civil Department	22	18	...	11
Foreign Governments.				
Mysore Commission	4	6	...	7
Nagpore Commission and Central Provinces	1	1	...	6
Pegu Commission including Andamans	2	4	...	2
Govt. of India { Upper Godavery Works	...	...	...	...
Govt. of India { Surveyor-General's Dept.	...	1	2	...
Hyderabad Contingent and Assigned Districts	...	2	1	9
Cochin Sirkar	2	7	1	...
Foreign Governments	9	21	4	35
Madras Government	22	18	...	161
	31	39	4	196
Deduct the extra ten per cent. reserve provided in the Military Department for loan to the Civil Department	...	...	...	12
Total for Provincial Service	31	39	4	184

II

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.

To—the Hon. W. Huddleston, Chief Secretary to Government, Fort St. George.

Dated—Fort St. George, the 23rd October 1873.

No.—409.

In paragraph 9 of G.O. No. 960, of the 17th September 1873, the Right Honorable the Governor in Council expressed the opinion that the orders then issued would materially affect the calculations as to the future needs of the Subordinate Medical Department, and, therefore, resolved to refer back the general question as to the numbers of recruits needed for it in future.

2. In the marginal letters I have already reported on all relating to the recruiting for the Military Department and for the Provincial Services of the State, and the only point that remains to be reported on is as to the future wants of local funds and Municipal requirements.

No. 401, dated 18th October 1873.
" 407 " 23rd " "
" 408 " 23rd " "

3. With reference to this, I have the honor to mention that the Right Honorable the Governor in Council correctly judged that alterations require to be made on the former report as regards the numbers of medical men needed; but, besides that, the source from which the supply shall be received in future, and the qualifications of the men entering for local medical employ, have been altered by the Orders of Government, No. 960 of the 17th September 1873, paragraph 7 of which commands that all hospital assistants, who are in sole or chief charge of dispensaries, shall, with as little delay as possible, be recalled to general duty; that no men of the hospital-assistant grade be in future entrusted with this responsible duty; and that Government will not, in future, sanction the employment in a dispensary, of any man of the hospital-assistant grade or class of qualifications, except in the capacity of an assistant or subordinate to a properly-qualified Medical officer. Under these orders of Government there will be required for civil employ medical men with two distinct classes of qualifications—the one of men educated to an extent sufficient for them to be appointed to the medical charge of the local civil dispensaries, and another class of men with inferior qualifications to be employed in these local dispensaries as subordinates, or assistants to the properly-qualified Medical officers. I understand the present orders to indicate that an education equal to, or approaching, that which the warrant grade are now receiving shall suffice for the medical charge of civil dispensaries, and that instruction to an extent equal to what the hospital assistants are now receiving shall qualify for the subordinate or assistant position.

4. In the matter of the numbers of each class required, I have the honor to place on the margin an abstract statement showing that, at the present moment, there are seven warrant medical officers surplus to all State and local requirements, but there is, on the other hand, a deficiency of two in the hospital-assistant grade so that five of surplus is that all is on hand to meet the casualties for the next twelve months, and the Subordinate Medical Department will be as much tightened in the coming year as it has been for the last two years.

—	Apothecary.	Assistant Apothecary.	Passed Hospital Apprentice.	Hospital Assistant.
Local employ requirements	6	13	35	62
Imperial Service do.	32	60	18	151
Provincial do. do. ...	31	39	4	184
Order, not yet complied with ...	...	...	4	...
	69	112	61	397
Actual present	73	113	64	395
	+4	...	+3	—2

5. With this information before Government, I beg to report that the numbers with higher qualifications that will annually be needed to take charge of civil dispensaries will be thirty, and this amount is based on the calculation that there will be about twenty new dispensaries every year, also three casualties annually amongst the officers in charge of civil dispensaries, and a final outturn of only seventy per cent. of the number entertained. In the subordinate or assistant class for civil employ, who are not in independent charge, there are now thirty-three men serving, and to meet the decrement amongst them the surplus pupils under pre-collegiate training and at college * will suffice.

* Under training.		Hospital Apprentices.	Native Medical Pupils.
In College	3rd year	9	...
	2nd "	5	20
	1st "	10	32
In Hospital	2nd "	10	60
	1st "	...	...
	Total ...	34	111

6. The entertainment for the class with higher qualifications must be immediate because the men for the higher qualifications will require to be retained in College for a longer period.

7. I, therefore, beg to recommend that, if the above views be approved, I be permitted to submit hereafter a notification, in suitable terms, calling for candidates for the higher-qualified class. I think it will be recognised that the more highly-qualified medical men should receive a higher rate of salary, but it will be observed in paragraph 2 of Financial Resolution

of Government of India, No. 1808 of the 22nd July 1873, that the whole of the non-Military medical men are ordered to be designated Civil Hospital Assistants, and their salary is required to be less than that of Military Hospital Assistants. Nevertheless the Local Governments are required to fix the various rates. On this point I may allude to my letter, No. 395, dated 8th December 1871, in which I arranged the whole of the local medical charges into three classes, and I think that that was a reasonable mode of remunerating the higher-qualified Civil Hospital Assistants, who will hereafter be in independent medical charge. The views I then expressed were to have three classes of towns, with three classes of Civil Medical officers on Rupees 100, Rupees 80, and Rupees 70. Under the views expressed by Government the designation of the Civil medical men in charge might be "Medical officer," and they might have Rupees 20 monthly with charge allowances to make up to the above salaries, and the Civil medical men not in charge might be styled Civil Hospital Assistants, with salaries of Rupees 20 to begin with, and the pre-collegiate and collegiate stipends of both classes might be commensurate.

III

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. W. Hudleston, Chief Secretary to Government, Fort St. George (through the Director of Public Instruction).
Dated—Fort St. George, the 10th November 1873.
No.—428.

The Proceedings of Government of the 18th September 1873 contained one letter from the Director of Public Instruction, and two from the Principal of the Madras Medical College, on the educating capabilities of that institution.

2. On the subjects submitted in the Director's letter I had, in 1871, a long consultation with him, and two meetings with the Acting Principal of the College, at one of which Mr. Powell was present; and my two letters to Government, recommending that a larger number of medical men should be educated, were written with their entire concurrence. Indeed, Mr. Powell sent on my first letter with his approval, and subsequently, when my letter of the 10th January 1872 was ready, he intimated to me his approval of it. These two letters were, in fact, joint communications.

1871, No. 813, 28th September.
1872 „ 10, 12th January.

3. The G.O. No. 372 of the 6th December 1871, in paragraph 4 approved of all that we had then recommended; authorized the entertainment of thirty-five additional pupils; gave authority for employing an additional assistant teacher, and ordered the needed expenditure to be budgeted for. The Educational Department, as well as this office, received copies of that Government Order. I took all action needed on my part; had the candidates examined, their papers valued by the Educational Department; I entertained the qualified pupils, had them reported upon monthly by Medical officers, sent to the Principal of the Medical College for valuation their half-yearly examination-papers and, finally, whilst I was on sick leave the sanctioned numbers were about to be ordered into the College, and the Principal was warned accordingly. Then, however, on this, the last step being taken, objections to the numbers were taken both by the Director of Public Instruction and by the Principal of the Medical College.

4. In all my representations to Government my aim has ever been to submit practical reports; with this object I had consulted with the Director of Public Instruction and the Acting Principal of the Medical College, had submitted to these officers my letters and obtained their approval before despatching them to Government. Nevertheless, in the middle of 1873, when the final action had been taken, with the object of carrying out the orders that Government had issued in December 1871, and the lads had to be warned to enter College, Mr. Powell, in paragraphs 2, 3, and 4 of his letter, styles the batch to be sent to College an extraordinarily large influx; says it will be necessary to put another assistant to the College; and suggests that the batch for this year be reduced to twenty-seven. The Principal of the Medical College, amongst other points, also names twenty-seven as the

average of annual entries, asks for additional teaching power for so large a class, an extra assistant teacher, thinks it would be better for the lads themselves and for the convenience of the Medical College if the batch be restricted to the average number of pupils, and in his second letter he adds that "the Medical College cannot undertake to act as a substitute for the proposed Provincial Medical Schools without material amplifications, involving very considerable expenditure on the part of Government."

5. I have the honor to submit to the Right Honorable the Governor in Council, with reference to the objections now taken that it was in the power of both officers to make any representations that might occur to them during any part of the interval that had elapsed since sanction for the increased numbers was given by G.O. of the 6th December 1871; and by the examinations that have been going on, the subject has been constantly before the Acting Principal of the College, and the Principal who returned from leave to Europe in the autumn of 1872. The objections, however, now reopen the question of the capabilities of the Madras Medical College to supply the country with medical men, in numbers sufficient to meet the current demand, and as it has been reopened, I beg to submit to Government the following summary of previous correspondence.

6. In the year 1867, the Government of India asked if the Madras Medical College could undertake the education of a number of youths for service in Burmah, and my predecessor reported that such could not be done, because the Principal of the College had intimated his inability to receive more than thirty-three pupils each session. On this, Government asked the Director of Public Instruction why only thirty-three pupils could be received into the junior class of the Medical College in 1868, and what arrangements would be necessary in order to increase, by about twenty, the number of pupils either from this Presidency or from Burmah. To that question the Principal of the Medical College replied, that "the question is one simply of assistants." And he added . . . . "were the services, however, of another assistant apothecary placed at my disposal, satisfactory arrangements could be made to meet, without trouble, the requirements of Government.

1867, No. 414, dated 23rd October, Inspector-General to Government.
1867, No. 1501, dated 28th November, Proceedings of Government.
1867, No. 167, dated 6th December, Principal, Medical College.
1868, No. 11, dated 7th January, Proceedings of Government.

7. In the past two years, I have, on two occasions, had the honor of submitting to Government the subject of the educating power of the Medical College in connexion with the demands of the country for educated medical men, and on both occasions, in paragraphs 10 and 11 of my letter, No. 313 of 1871, and paragraph 5 of my letter, No. 144 of 1873, I based all my calculations on the statement which the Principal of the Medical College had made in 1867, that the power to turn out a larger number of medical men was simply one of assistants, and relying on that intimation the Government in 1871 issued all needed orders to admit of a larger number being educated.

1871, No. 313, dated 25th September.
Do. 6th December G.O.
1872, No. 10, dated 12th January. } undisposed of.
1873 „ 10 „ 18th April, }

8. The subject is one of importance, because, with the increasing demands from the country for medical men, when considering how to supply them, a primary point is to know where they can be educated. In September 1871 I brought to the notice of Government that the Education Committee, which had been appointed in 1864 to inquire into the working of the system of education pursued in the Madras Medical College, did not "consider that the Senior Department has fulfilled the objects of Government in instituting it." And I may now mention that of the pupils who, in the past twenty-six years, have been under training in the Senior Department, only twenty-one have as yet been sent out of College with medical decrees; and now when it had all been arranged for the education of a larger number in the Junior Department, at the moment of sending them to the Medical College, the Principal intimates other requirements than those stated by him in 1867, points to other expenditure, and advises that the numbers to be now sent in shall be restricted to twenty-seven.

9. This intimation that an addition to the number of pupils would involve very considerable expenditure on the part of Government introduces a new element into the question of the Medical College education, and as in my letters of September 1871 and 12th January 1872 I had gone minutely into the money requirements, the Right Honorable the Governor in Council may perhaps deem it desirable to request the Director of Public Instruction to submit, for the information of Government, the highest number of each grade, senior, second, and junior, that the College can in each year suitably receive, and furnish for same an estimate of all needed money outlay. This is a mere numerical question, but it is one upon which since 1871 all the calculations of Government have been made and all the action of this office has been taken, and until certain as to the numbers that can be educated at this institution and the cost of their education there cannot be formed even an approximate estimate as to the extent to which it can be made to supply the demands of the country.

10. I have the honor to submit to the Right Honorable the Governor in Council that, in 1867, my predecessor reported that the number which the Principal had stated, viz., thirty-three fresh entries annually, was a quantity "found inadequate to meet the ordinary requirements of the Army and Civil Departments of this Presidency." I now beg to report that the twenty-seven fresh entries, to which the Principal has now suggested the entries for the current year should be restricted, are still more inadequate to meet existing increased demands. In the greater progress now making in all parts of the country, it is not possible to indicate with certainty the actual numbers that may be required from year to year, but the Education Committee, in 1869, estimated that 4000 educated medical men were then needed for the country, and my predecessor named 8500 as the number required, and these are quantities which the average of twenty-seven entries a year would never overtake, as, indeed, such a limited number would not even meet the current requirements.

To Government, No. 414, of 23rd October 1867, paragraph 5.

Committee's of 1869 Report, paragraph 4, page 5. Inspector-General to Government, No. 17, of 19th January 1870, paragraph 2.

11. As in all my previous letters on this subject in 1871 and 1873 the Director of Public Instruction and the Acting Principal of the Medical College and myself were in consultation, and my two letters received approval of both officers, the Right Honorable the Governor in Council may prefer that this should be sent through Mr. Powell, who will doubtless wish at the same time to submit data on which Government can come to a decision.

IV

Letter—from E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
To—the Hon. W. Huddleston, Chief Secretary to Government, Fort St. George.
Dated—Madras, the 27th November 1873.
No.—2375.

I have the honor to submit a letter to your address from the Surgeon-General, Indian Medical Department, No. 428, of the 10th instant, which that officer forwarded to me for transmission.

2. On receiving Dr. Balfour's communication, I sent it to the Principal of the Medical College for his remarks and for the supply of the information which Government would require to come to a decision upon the subject under discussion. I now submit a letter from Dr. Smith, No. 203, of the 25th instant, furnishing such explanation as he considered necessary.

3. I think it right to remark that in my letter, No. 1688, of the 26th September 1871, on which among other papers G.O., No. 372, of the 6th December 1871, was passed, I took care to point out that the question under consideration was not simply one of assistants, and that, because a certain addition might be made to the number of pupils in one of the Departments of the Medical College with no further action than the posting of a fresh assistant to the institution, it by no means followed that a double or treble addition could be made to the number of students provided a proportionate number of assistants were provided.

4. The point I went upon in my letter, No. 1617, of the 4th August last, in questioning the advisability of increasing the admissions as proposed by the Acting Surgeon-General, was that the pre-collegiate training of the youths had not been completed. I was quite prepared to recommend the appointment of an extra assistant if the short period of pre-collegiate training was not deemed sufficient ground for keeping back the new pupils for a year; but on the 24th September last, the Acting Surgeon-General wrote to me stating that there would be no necessity for strengthening the teaching staff of the College during the Session 1873-74.

5. It will be seen that the Principal of the College bases his limit of the number of pupils that can be received upon the means available for clinical instruction. I must own this is an element of the calculation which I did not take into account; but it is evidently an element of the highest importance.

Enclosure.

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
Dated—Madras, the 25th November 1873.
No.—203.

With advertence to the Proceedings of the Director of the Public Instruction, No. 2275, dated 11th November 1873, giving cover to copy of a communication addressed to the Chief Secretary to Government by the Surgeon-General, Indian Medical Department,* I have the honor to submit the information and remarks therein called for.

* No. 428, dated 10th November 1873.

2. In paragraph 9 of the communication referred to, it is stated to be a matter of importance that Government should be "informed as to the highest number of each grade, senior, second, and junior, which the College can in each year suitably receive," and that "an estimate of all needed money outlay" should be placed before it.

3. The maximum number of students of all departments which the Medical College can educate efficiently, under existing rules, is 115. Distributed in departments this aggregate would represent ten students under training for the University; forty-five European and East Indian apprentices under training for the Apothecary grade; and sixty native pupils under training for the grade of Hospital Assistant. The expense to Government of this maximum number would amount per student to Rupees 508 per annum.* The annual entrants of the Senior, Second, and Junior Departments, under the specified conditions, would amount to two, fifteen, and thirty, respectively.

* This sum does not include the expenses of the pre-collegiate classes or those of the major professorships.

4. The aggregate of 115 is thus arrived at. All students of the Medical College in the several departments are required to pass through courses of clinical instruction as an indispensable part of their medical education. This practical training is carried on at the Clinical Hospitals marginally noted by the Clinical Professors. *The capabilities of these institutions for clinical instruction determine the number of students which the Medical College can undertake to train efficiently.* The maximum number of students which can be so trained at the General Hospital is seventy, at the Eye Infirmary, fifteen, and at the Lying-in-Hospital, fifteen; total 100 students.

General Hospital, two Clinical Professors.
Eye Infirmary, one.
Lying-in-Hospital, one.

5. A reference to the appended curriculum of study for Session 1873-74 will show that certain deficiencies of this training-field are supplemented, in the case of first year apprentices of the Second Department, by utilizing the several non-Clinical Hospitals of the Presidency.† By this arrangement, not an entirely satisfactory one, fifteen additional clinical students are secured, thus raising the aggregate from 100 to 115.

† Native Infirmary.
Royapett Dispensary.
Vepery "
Penitentiary.
Fort Dispensary.
Body Guard.
Native Regimental Hospitals.

6. The following table illustrates the combined working of the three Departments of the College as regards the proposed annual number of entrants, and the maximum numbers which will ultimately come under instruction in College. It may be remarked that the curricula of the Senior, Second, and Junior Departments extend over five, three, and two years, respectively:—

Designation.	First year, number of entrants.	Second year, number in College.	Third year, number in College.	Fourth year, number in College.	Fifth year, number in College.
Senior Department	2	4	6	8	10
Second "	15	30	45	45	45
Junior "	30	60	60	60	60

This table gives the maximum number possible, for it takes for granted that all entrants shall pass through their respective curricula—a result seldom if ever arrived at. The percentage of lapses in the Second and Junior Departments, calculated from the experience of the last five years, may be stated as two and three, respectively, per annum.

7. From these remarks it will be observed that no increase of the teaching power of the College can act as a substitute for the neccessary training in Clinical Hospitals, and consequently that, if it be contemplated to extend the operations of the Medical College in the direction indicated by the Surgeon-General, the first provision to be considered must have reference to a corresponding extension of the existing clinical opportunities. Other elements must also be considered, such as the teaching power of the College; its actual accommodation; its arrangements by which three different Departments are educated, partly at least, in common; and its supply of material for instruction, such, for example to specify one item, as that for practical anatomy

8. In paragraph 6 of the communication under consideration the Surgeon-General refers to a letter of mine, No. 167, dated 6th December 1867, in which, to the question put to the Director of Public Instruction as to "what arrangements would be necessary in order to increase by about twenty the number of pupils either from the Presidency or from Burmah," the reply is given, that "the question is one simply of assistants," and, further, that "were the service of another assistant apothecary placed at my disposal satisfactory arrangements could be made to meet, without trouble, the requirements of Government." In connexion with this expression of opinion it will be remarked that the question in 1876 was one affecting simply the admission of twenty *additional students* to the Junior Department, and that this proposal preceded the alterations which added new subjects to the curriculam of that Department, and preceded also the revised arrangements for clinical instruction at the General Hospital, which were brought into operation in 1868, shortly after I became Physician to that institution.

9. The marginal extract from a letter, No. 157, dated 9th March 1869, addressed to the Director of Public Instruction, shows that the authorities have had before them a more recent expression of my views; and so late as the 1st of May 1871 the Acting Principal, Mr. Chipperfield, brought the same views urgently to the notice of the Surgeon-General in a demi-official letter from which the following paragraphs are extracted: "Clinical instruction is perhaps the most difficult point in this somewhat difficult matter. At present there are thirty students attending the Medical and thirty-two the Surgical Clinique at the General Hospital. Any augmentation of these numbers is most unadvisable. A question of this kind arose before, and Dr. Smith suggested that the Native Infirmary be utilized for this purpose, and that the Surgeon of that institution be paid Rupees 200 per mensem, the salary of a minor professorship, for giving clinical instruction. If this were done I think the pre-collegiate students must be withdrawn from the institution.

6. "I am, however, of opinion that to prevent the overcrowding of the General Hospital, to which upwards of sixty young men are at present attached, it will be absolutely necessary largely to utilize the clinical advantages of the Native Infirmary, in which case it would be necessary to remunerate the Surgeon in charge of that institution, on condition of undertaking the clinical training of these students, and possibly also to provide for an additional medical subordinate being attached to that institution.

7. In addition to these various items of expenses, I would solicit attention to the greatly increased expenditure of medicines in the practical pharmacy classes; of apparatus for the minor surgery classes; of stationery (including paper, journals, pens, ink); to the increased expenditure on account of prizes; and to the increased clerical labor which will fall upon my office in consequence of the operations of this scheme. These sums I have approximately stated in Appendix No. 2."

Then there comes the whole question of cost. The Municipal students must be paid during their college course and during their pre-collegiate course, if they have one (and here let me say again, it would be an unfortunate interference with our College regulations, a retrograde step, to admit lads without any previous training). The staff pay of extra assistants must be taken into account, and unless there are supernumeraries their regular pay would have to be included. In fact the latter would have to be drawn at College and would be considered as a part of its expenses. Add the expense to be incurred for clinical instruction, and you have a goodly annual sum."

10. Having placed on record my opinions in 1869, and having shown that these opinions were brought pressingly to the notice of the Surgeon-General in 1871, I do not feel that I can be held responsible for conclusions arrived at during my absence in England, or blamed, in 1873, for placing the question in what appeared to me to be its true light (when fifty-six students instead of twenty-seven were on the point of being drafted into the Junior Department in October of that year), even though my action ran counter to the arrangements of the Surgeon-General, and led to the suspension of the order issued, on the recommendations of that officer, by Government.

Vide letters, dated 24th July and 2nd August 1873, Nos. 89 and 98.

11. The question now, be it observed, is no longer one affecting the admission to College of some twenty extra members of the Junior Department, but it is one which, as described by the Surgeon-General, involves the capabilities of the College "*to supply the country with medical men*," to supply, in other words, those 8,500 medical men for the training of whom the Committee, in their report,* recommended the organization of four Provincial Vernacular Medical Schools, with their professional staff, and colligated dispensaries and hospitals.

* *Vide* Proceedings and Order of Government, No. 1037, dated 30th July 1869.

12. I trust you will now be satisfied that the opinion I expressed in my letter noted in the margin, to the effect that "the Medical College cannot undertake to act as a substitute for the proposed Provincial Medical Schools without material amplifications, involving very considerable expenditure on the part of Government," is one fully justified by the facts of the case.

No. 98, dated 2nd August 1873.

V

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. W. Hudleston, Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 2nd February 1874.
No.—43.

In paragraphs 3 and 4 of my letter, No. 409, of the 23rd October 1873, I had the honor to indicate the action that would be needed to carry out the orders of Government, as expressed in paragraphs 4, 7, and 8 of G.O., No. 960, of the 17th September 1873. I then mentioned that there would be required for civil employ medical men with two distinct classes of qualifications, the one consisting of men educated to an extent sufficient for them to be appointed to the medical charge of the local civil dispensaries, with another class of medical men of inferior qualifications, as subordinates or assistants to the more highly-educated Medical officers, and the orders of the 17th September indicated the opinion of Government to be, that, for the one, an education equal to, or approaching, that which the warrant grade are now receiving shall suffice for the medical charge of civil dispensaries, and instruction equal to what the hospital assistants are now receiving shall qualify for the subordinate or assistant position. I mentioned, in paragraph 4, that of those with the higher qualifications, thirty would be annually needed, and, in paragraphs 5 and 6, I requested permission to call for thirty candidates, because their entertainment was immediately required.

In paragraph 6, I pointed to the Financial Resolution of the Government of India, No. 1808, of the 22nd July 1873, in which a body of civil medical men were ordered to be styled Civil Hospital Assistants, with salaries smaller than are allowed for Military Hospital Assistants, but for the highly-educated men, whom Government had now ordered to be trained for civil employ, I again recommended the proposal which I had made in my letter, No. 395, of the 8th December 1871, to arrange the local medical charges into three classes, on Rupees 100, Rupees 80, and Rupees 70, or that their pay should be Rupees 20, when not in charge, with allowances, when in charge, up to Rupees 100, Rupees 80, and Rupees 70. I further recommended that, while under training as pre-collegiate and as collegiate students, their stipends should be commensurate with their higher education, and that their designation, when educated, might be "Medical officers."

2. Since then, I have been in communication with the Principal of the Medical College, through the Director of Public Instruction, and the Principal and I have, on one occasion, conferred in order to dispose of a doubtful point. In the letter which I addressed to the Principal, I explained the future standard of acquirements that Government had indicated, mentioned that about thirty of the higher educated men would be annually needed, and I submitted for the Principal's approval two alternative courses of curricula, and, at the same time, if he did not approve of either, I invited him to propose one of his own. I also mentioned that I would propose to the University to re-establish a degree of Licentiate of Medicine.

1873, No. 6939, of 15th Nov. to the Principal.
" " 214, of 5th Dec. from "
" " 7878, of 16th " to "
1874, " 233, of 13th Jan. from "

3. The Principal, in his reply, has mentioned that the existing curriculum, for the Second Department in the Medical College, fulfils all the conditions prescribed for the new class of civil medical men, and in following that, he says, there can be no difficulty in the way of supplying annually thirty passed students, for which number no addition to the existing establishment is needed; he considers that the entrance test should be the matriculation certificate, with which there should be one year's pre-collegiate training, but, if adhering to the present examination for the Second Department, the pre-collegiate training should extend to two years. And he suggests that the medical title of those who shall be thus educated shall be that of "Civil Sub-Assistant Surgeon," and that they shall receive a certificate of license from the Medical College.

4. In order to carry out the views of Government, as detailed in Order, No. 960, of the 17th September last, I do not think it advisable immediately to make the matriculation certificate the sole educational test for admission. I am of opinion that, for the next three years, *i.e.*, until the issue of a notification, in the year 1877, for the entries into College in October of that year, candidates for this class should undergo the examination test which is now applied to candidates for the Second Department. On and after the year 1877, only such candidates should be accepted as may have matriculated. I consider it highly desirable that, so far as, and so soon as, may be possible, the educational tests for entrance into the medical service of Government should be those of the Madras University, and I regard it as a mistake to have retained, till this time, a separate test for the medical entrants.

5. In the matter of physical development, candidates possessing matriculation certificates should not be under eighteen, nor above nineteen years of age; those who are to be examined by the Second Department test should not be under fifteen nor above eighteen years of age, which is the rule, at present; and, as at present, candidates should furnish proof of age, of moral character, and of physical fitness for Government employ.

6. In the matter of education, I recommend that the candidates on and after the years 1877, in possession of matriculation certificates, have one year's pre-collegiate training, but that those with the departmental literary test shall have, as now, two years, and that the college course shall extend to three winter and three summer sessions; the subjects to be taught and the Professors and Assistant Professors teaching being precisely similar to the present teaching of the Second Department classes. At the close of that period of instruction, the students should undergo a test of their professional acquirements, conducted as now by a Committee of Officers, and those who are successful should receive a certificate or license from the Medical College.

7. In the matter of salary, as these men are intended to be Government servants, I recommend that, while they are in the pre-collegiate classes and under instruction at the College, the money payments to them shall be identical with the present money payments to those in the present Second Department, less ration money, house-rent, bedding, and clothing of the Second Department students. The marginal parallel columns will show what is now given to the Military students of the Second Department, and what I now propose for these students in the Civil Department. It will be observed from the above that the salary which I propose for the Civil Medical officers of Government is much smaller than what is now allowed for the Military students, and this is in accordance with existing rules. For those who receive certificates of qualification, the civil hospitals of the country will be open, and I propose that, from the date of receiving their certificate of qualification, their salary, while not in independent medical charge, shall be Rupees 50, and while in independent medical charge shall be Rupees 100, with two septennial increments of Rupees 50, as per margin. I mention these rates because the salaries submitted in my letter No. 395, of the 8th December 1871, have not as yet received sanction, and may not have been approved of.

		Military Students.	Civil Students.
Pay.	*Pre-collegiate.*		
	First year	16	16
	Second year	20	20
	In College.		
	First year	20	20
	Second year	25	25
	Third year	30	30
Ration money		10	...
House-rent		7½	...
Bedding and Clothing, annually ...		30	...

	Subordinate charge.	Independent charge.
	Rs.	Rs.
Under seven years' service ...	50	100
Seven years, and under fourteen years	100	150
Fourteen years and upwards.	150	200

8. In the matter of pension, I propose that the rules of the Uncovenanted Civil Service apply to the Civil medical men also.

9. I would further propose, as regards the races from whom these candidates should be drawn, that the best qualified be taken, without reference to descent.

10. Government are aware that, hitherto, with very few exceptions, the entire body of Medical Officers, who have been educated, have been enlisted for Military service, and the bulk of them lent for the civil duties of the country. It, therefore, has happened that there is a very great excess of Military medical servants, and some of these may be willing to volunteer into civil employ. I recommend that those who may wish to volunteer be allowed to apply for transfer, and those of the hospital-assistant grade be allowed to study for one year, and at its close submit themselves to examination for civil employ; and when fairly transferred to the Civil Department that those who come from the warrant grade be on the pay and allowances of the above Department. And in the matter of pension, that those who come from the warrant grade retain their right to Military pensions, and Lord Clive's Fund, and those who come from the hospital-assistant grade, even now, are pensioned under the Uncovenanted Service Rules, and this mode of pensioning them should be continued.

11. In all the above remarks, I have written on the supposition that the students who will be attending the classes in the curriculum which I have proposed, are intended to be servants of Government, and have come under a bond to serve Government. I propose that the bond should be entered into after the departmental literary test has been made, and the successful candidates declared, and that the individuals becoming servants of Government shall be apprenticed, until they pass through the College, and that they shall bind themselves to serve the State for ten years, after receiving their certificate of qualification. This is in accordance with existing rule as regards the hospital-assistant grade, with the difference that these Civil medical men are proposed to serve the State longer.

12. It may, however, happen that students may present themselves willing to study through this curriculum, on their own resources, without binding themselves to be Government servants, in which case I recommend that permission be given.

13. If a private student fail to pass at the final examination, I recommend that he be permitted to continue to study further, or to abandon medicine as a profession; the permission to study further will, in no way, be prejudicial to the individual, or to the country, and the State will lose nothing by the concession.

14. Government may wish to have submitted a statement to show the relative cost of educating a Military student, as at present, to that which I estimate the now projected Civil class may require. It is, as per margin, showing for the Military Medical officer Rupees 2,667, and for the Civil Medical officer Rupees 1,332, both of them being exclusive of the pay of their share of the expenses of the College Establishment.

			Military.	Civil.
			Rs.	Rs.
Pay.	*Pre-collegiate.*			
	1st year,	at 16 × 12 =	192	192
	2nd „	at 20 × 12 =	240	240
	In College.			
	1st year,	at 20 × 12 =	240	240
	2nd „	at 25 × 12 =	300	300
	3rd „	at 30 × 12 =	360	360
Rations,	at 10 Rs., for 5 yrs. =		600	...
House-rent,	at 7½ „ for 2 „ =		180	...
„	at 11¼ „ for 3 „ =		405	...
Bedding and Clothing, at Rs. 30 per annum, for five years			150	...
	Total ...		2,667	1,332

15. In the cost of the Civil students, as will be observed, I have placed the expenses of two years' pre-collegiate study, but if matriculation be accepted as the test, and the pre-collegiate training be then reduced to one year, then one year's expenses, say, Rupees 240, will be diminished.

VI

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. W. Huddleston, Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 5th February 1874.
No.—51.

During the past six years, Government has had repeatedly under consideration questions bearing on the supply of medical men for the country, viz., as to the numbers needed, how best and soonest to supply them, and how far the educational powers of the Madras Medical College could be further utilized, in order to turn out a greater number of trained practitioners.

2. With a view to obtain data as to the College capabilities, when I was writing the letter, No. 428, of the 10th November last, which had to be sent through the Director of Public Instruction, I mentioned in its ninth paragraph that it was important for Government to be informed as to the highest number of each grade, senior, second, and junior, which the College can, in each year, suitably receive; also to have an estimate of all money outlay needed to be made in providing for additional numbers.

3. In order to ascertain these two points, I have been in communication with the Educational Department; and, in the last letter which I received, I was referred to the Principal's letter, No. 203, of the 25th November. This is now before Government, and in it I observe stated that 115 students is the maximum number which the College can educate efficiently under existing rules.

1873, 15th Nov., No. 6039, to Principal.
„ 5th Dec., „ 214, from „
„ 16th „ „ 7578, to Director of Public Instruction.
1874, 15th Jan., No. 233, from Principal.

4. The maximum that the College can be made to attain is, however, not mentioned in that letter, and though, in order to obtain still larger results, mention is made of the need for increased clinical opportunities, for increased teaching power, for increased accommodation, and for more material for instruction, the probable extent, or cost, of the needed increments are not particularized. The estimate is not given either there or in the twelfth paragraph, where the Principal merely repeats what he wrote on the 2nd of August last, viz., that "the Medical College cannot undertake to act as a substitute for the proposed Provincial Medical Schools without material amplifications, involving very considerable expenditure on the part of Government." To a subsequent request from me for precise data, however, the Principal has replied that "the addition of two clinical teachers to the staff of the General Hospital would nearly double the present number of clinical students at that institution, without necessitating any addition to the College building beyond what, indeed, is already required, increased accommodation for the practical anatomy and practical pharmacy classes. If the increment took place in the Senior or Second Departments, no additional teaching power would be required, but that," he says, "would not hold good in the event of the increment being made in the Junior Department of the College. The following tables will show the results:—

"I.

"*Existing Clinical Training-field with two additional Teachers*—

Medical Wards,			25 + 25 =	50	pupils
Surgical „			25 + 25 =	50	„
Lying-in Hospital	...	...	...	15	„
Eye Infirmary	...	...	...	15	„
				—	130
Non-Clinical Hospitals	...	...	...	...	30
			Total ...		160

"II.

"*Medical College.*

Senior Dept.,	5	Classes,	2 each,	10 pupils.
Second „	3	„	30 „	90 „
Junior „	2	„	30 „	60 „
			Total ...	160."

"Any number in excess of this would," he says, "require increased clinical opportunities, considerable additions to the building, and a greater supply of practical anatomy material than is at present available for the anatomical classes of the institution. As an element of efficient training the experience of the practical departments is as valuable and as necessary as the clinical practice of the hospitals. These are the main points on which the training of the students must turn."

5. I am not able to concur in the opinion of the Principal, that this great Collegiate institution, with its Professors and its Assistant Professors, can only have 160 students under training, and consider that it is possible, without any great increments of cost, so to adapt its work as to permit more entrants, to have more students, and to turn out more than its previous numbers. It is very unadvisable to have an unwieldy number, but the recent communications from the Civil Departments of Government have shown that the country is craving for a supply of medical men; that the people will take any persons to whom such a term can be

applied; and with the country needing 8,000 or 10,000 qualified men, to limit the work of the College to teaching 115 students, as at present, is not advantageous. And, though I consider that the 160 now named by the Principal is nothing equal to the maximum number that could be studying at that institution, small as the number 160 is, with the country more bare of professional medical men than it is of any other professional body, I recommend the immediate grant of the additional aid of two clinical Professors, now indicated by the Principal as necessary. I will, in a very few days, submit to Government an acceptable arrangement of the Medical Institutions here, which will place at the Principal's disposal greatly enlarged means for clinical instruction, and of the two Clinical Professors asked for the Imperial Service can furnish one, and another is even now available in the resident Surgeon of the General Hospital. That officer is employed every day for nearly two hours, from about 7 to 9 A.M., in attending to out-patients. I propose to relieve him by Honorary Assistant-Surgeon Mohi-ud-din Sheriff, who is available. He has been employed during the past fifteen years in a similar duty at the Triplicane Dispensary, where the numbers of out-patients are even greater than those attending at the General Hospital; he is known to every person, Christian, Mahomedan, and Hindoo, in this great city; he is a physician in whose judgment and discretion every reliance may be placed; and when I last visited the Medical College Hospital, Calcutta, at the time the out-patients were being seen, I found a native physician attending to them. I am able to predict that, marked as have been the urbanity, gentleness, and patience evinced by Surgeons Brockman and Wright, both of whom I have seen on duty at the out-patients room, there will not, under Assistant-Surgeon Mohi-ud-din Sheriff's care, be any falling off of attendance.*

6. If more accommodation be indeed needed in the Medical College, I recommend that the practical anatomy class be removed out of the college block into a structure of a kind similar to those that I have had to erect at the Lying-in-Hospital. This removal is already needed for the health of the Professor, who has been unwell, as is believed from too prolonged work within the dissecting-room, and the officer similarly occupied in Bombay, when he called last week at my office, mentioned that he had been ailing similarly. Its removal from the block is very advisable, would give more room, and a leaf pavilion sufficient to protect the interior would be better for the Professor and the students.

7. I am satisfied that the adaptations which I have as above submitted would fulfil all the requirements which the Principal in his letters has indicated, and I submit them for the consideration of Government, and, as the subject is one of much importance, I beg to attach the Principal's letters.

Enclosures.

(i)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
Dated—Madras, the 5th December 1873.
No.—214.

I have the honor to resubmit for your consideration, along with this my reply, a communication to my address from the Surgeon-General, Indian Medical Department.

2. You will observe that it is stated in paragraph 2 of the letter under remark, that "for the next six or seven years there will not be any enlistments for the Imperial Service of the State." This is equivalent to the announcement that, for the time specified, the Second and Junior Departments of the College will be entirely suspended.

3. The Surgeon-General proposes that the Medical College shall undertake to turn out annually, "Medical men suited for independent medical charge," to the number of thirty, and he further indicates that their education should "be equal or nearly equal to that now bestowed on the students of the Second Department." There is, moreover, the further stipulation that the College training shall "be conducted by Professors and Assistants as the students in the Second Department are now being taught." The Surgeon-General also submits two curricula for report, adding, "if neither of the appended curricula meet your views, I ask the favor of your framing a curriculum, such as you can recommend, of a kind such as you deem suitable for the country, and in following which the number thirty might annually be sent out of College."

* These proposed rearrangements are meant to suit the views of the Physician and ex-officio Principal. I consider that an apothecary should see the out-patients, relieving the resident Surgeon and Dr. Mohi-ud-din Sheriff for clinical instructing.

4. Under the circumstances referred to by the Surgeon-General, viz., the suspension for the next six or seven years of the Second and Junior Departments of the College, there can be no real difficulty in the way of meeting the wishes of that officer, for, in the first place, the existing curriculum of the Second Department fulfils all the conditions advanced by the Surgeon-General and, in the second place, there can be no difficulty in the way of supplying thirty passed students annually, unless the number of lapses during the three years' course exceeds that of the batches hitherto educated in the Second and Junior Departments.

5. The number of annual entrants, in order to secure thirty passed students at the close of the third year, cannot be reckoned safely at a lower figure than forty, inasmuch as a decrement of three lads at the close of the first and second years of study and a failure of four at the final examination would leave precisely the number required.

6. The question of clinical training for the large possible class of $40+40+40=120$ is one of the real difficulties in this arrangement. It may, however, be obviated by posting the students, in their first year, to the hospitals and dispensaries marginally noted, and by arranging that six months be passed at the Native Infirmary, and six months at the other hospitals and dispensaries. Were a course of careful training at the Native Infirmary superadded, the defects of the arrangement would be still further lessened.

	Students.
Native Infirmary	20
Fort Dispensary	3
Vepery "	6
Penitentiary	3
Body Guard	2
Native Regimental Hospitals	6
Total ...	40

7. The remaining students, viz., those of the second and third years, numbering about seventy, lapses being deducted, could be trained at the General Hospital (fifty-six), Eye Infirmary (ten), and Lying-in Hospital (ten), without inconvenience. Thus an annual supply of well-educated young men could be trained for the service of the dispensaries now being erected under the Municipal and Local Funds Acts.

8. The Surgeon-General makes no allusion either to the preliminary literary examination which these lads are to pass before entering College, or to the nature and duration of their pre-collegiate course. Both points must be determined before I can venture to state definitely whether or not the proposed College curriculum will suffice for the efficient training of these Municipal students. If I may be permitted to express an opinion on the point, I would indicate the matriculation examination of the University as the proper standard of general educational requirements, and one year of pre-collegiate training as the minimum which it would be advisable to sanction.

9. From my letter, number and date as per margin, 115 is given as the number which, under existing circumstances, can be efficiently educated in College; according to calculations already given the number of Municipal students actually present in College will never exceed 111, more probably will it fall short of this aggregate somewhat, leaving room still for the few students of the Senior Department, who, until outlets are available for them, are little likely to increase much above their present numbers.

No. 203, dated 25th November 1873.

10. I am unable to hazard any opinion as to the light in which the Syndicate and Senate of the University may regard the Surgeon-General's proposal to reconstitute a Licentiateship of Medicine, in connexion with the University, in order to meet the requirements of these young men but I can see no objection to conferring the power of issuing to them certificates of qualification as Sub-Assistant Surgeons in connexion with the Medical College. This well-known grade would, I think, meet all the necessities of the case.

(ii)

Forwarded to the Surgeon-General, Indian Medical Department, in reply to his letter No. 6939, of the 15th November last.

E. B. Powell,
Director of Public Instruction.

9th December 1873.

(iii)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
Dated—Madras, the 13th January 1874.
No.—233.

With advertence to the Proceedings of the Director of Public Instruction, No. 2537, dated 19th December 1873, giving cover to copy of a communication* from the Surgeon-General, Indian Medical Department, I have the honor to submit the information and remarks called for.

* No. 7578, dated 16th December 1873.

2. In paragraph 8 the Surgeon-General remarks as follows: "Whilst replying to this letter, it would be of value, in all future inquiries of this kind, if the Principal would now state the highest numbers which the present staff of the Medical College, in any year, can

receive to teach in the Senior, Second and Junior Departments, and whether, and what, additional numbers could be taught by additions to the staff; and what additions to the building of the College, and what such additions might be." To the first of these questions I have already given a distinct reply in my letter, No. 203, dated 25th November 1873, paragraphs 3 *et seq.*, and have also given the grounds upon which the conclusions are based. The total number of students, which, under existing circumstances, can be efficiently educated in College is 115, viz., ten Senior Department students; forty-five Second Department apprentices, and sixty Junior Department pupils. The capabilities for clinical instruction at the disposal of the College determine the aggregate number of students admissible to College.

3. To the second of the questions it is less easy to furnish a satisfactory reply, as the terms of the query are somewhat indefinite. The addition of two clinical teachers * to the staff of the General Hospital would nearly double the present number of clinical students at that institution, without necessitating any addition to the College building beyond, what indeed is already required, increased accommodation for the practical anatomy and practical pharmacy classes. If the increment took place in the Senior or Second Departments no additional teaching power would be required; but this would not hold good in the event of the increment being made in the Junior Department of the College. The following tables will show the results:—

* Proceedings of Madras Government, dated 27th August and 18th September 1873.

Existing Clinical Training-field with two additional Teachers.

Medical Wards	25 + 25 =	50	pupils.
Surgical „	25 + 25 =	50	„
Lying-in Hospital		15	„
Eye Infirmary		15	„
		130	
Non-Clinical Hospitals		30	
Total ...		160	pupils

Medical College.

Senior Department, 5 Classes, at 2 each			10	pupils.
Second „ 3 „ at 30 „			90	„
Junior „ 2 „ at 30 „			60	„
Total ...			160	

Any number in excess of this would require increased clinical opportunities; considerable additions to the building; and a greater supply of practical anatomy material than is at present available for the anatomical classes of the institution. As an element of efficient training the experience of the practical departments is as valuable and as necessary as the clinical practice of the hospitals. These are the main points on which all efficient training of the students must turn.

4. In paragraph 5 the Surgeon-General remarks: "I beg the favor of the Principal's decision as to the curriculum which, in his opinion, is needed to be followed by young men in the process of education, to be civil medical practitioners, and in view to their holding independent medical charge of civil hospitals." I have already stated in my communication marginally noted, that, "the existing curriculum of the Second Department fulfils all the conditions advanced by the Surgeon-General," and to that opinion I adhere.

No. 214, dated 5th December 1873, paragraph 4.

5. It is proposed by the Surgeon-General that the young men, who are to hold independent medical charge of the civil hospitals under the Municipalities, be required to pass a preliminary literary examination not exceeding that at present fixed for candidates for the Second Department of the College, and that subsequent to this examination they should pass through a course of pre-collegiate training for one year.

English.—A portion not exceeding thirty lines in length, selected from a standard English author, will be given as an exercise in dictation. Ten errors in spelling exclusive of technical and other unusual words which will not be counted, will exclude the candidate from further competition. Bad marks will be assigned to defective handwriting. Meaning of words and phrases in grammatical construction of sentences and in grammar generally.

Vernacular.—A colloquial examination in one of the following vernaculars at the option of the candidate:—

Hindustani.
Tamil.
Telugu.

Care will be taken to ascertain the facility passed by each candidate of making himself understood in the Vernacular which he has selected.

6. I am decidedly of opinion that the matriculation of the University should be fixed upon as the standard of preliminary general education. If this be sanctioned, then one year's pre-collegiate course will suffice, but if the present special examination be made applicable to this new class of Medical students, then two years' pre-collegiate course will be required to supplement the very low demands in English which characterize the said examination.

7. The matriculation examination is to be preferred, because its general education requirements are higher, because these higher requirements are necessary for young men who are to be educated scientifically, through the medium of English, so as to be qualified to assume independent charge as Principals of Civil Hospitals, because the matriculation examination offers a definite standard of qualification,* whereas the special examination has practically no standard at all, because there is no lack of candidates for matriculation, as the yearly experience of the University proves, because all fairly efficient schools educate up to the matriculation standard, thus rendering it easier for a young student to pass on with the school stream, than to make separate arrangements, for the lower course demanded by the special preliminary test.

History.—The leading facts of the Histories of England and of India.
Geography.—General Geography and the Geography of India in particular.
Arithmetic.—The first four rules of Arithmetic, Vulgar and Decimal Fractions, and Proportions.
Algebra.—Algebra including Addition, Subtraction, Multiplication, and simple Equation.
Euclid.—The first book of Euclid.

* *Vide* Calendar, page 81, Bye-Law 45.

8. The platform of general education from which the young aspirant should start must be determined, not by the uncertainties of his salary, position or pension, but by the pressing gravity of the work he has to perform when in independent medical charge of a civil hospital and so responsible for human life.

9. The recommendations I have hazarded may be summarized as follows:—

(*a*) Matriculation examination
(*b*) One year's pre-collegiate course.
(*c*) Curriculum of Second Department.
(*d*) Designation, Civil Sub-Assistant Surgeon. To which I would add.
(*e*) Certificate License from the Medical College.

VII

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 26th February 1874.
No.—84.

In my letter, No. 43, dated 2nd February 1874, I submitted a plan for carrying out the scheme of Medical Education ordered in G.O. No. 960 of the 17th September 1873; but, as the standard of education then ordered by Government is, in my belief, beyond the present power of the country to afford, I have now the honor of placing before the Right Honorable the Governor in Council, as my opinion, that the studies, which the Junior or Hospital Assistant Department pursue, furnish the kind of medical education for which the people generally, in the South of India, are, at the utmost, able to pay. During the two and three-quarters years that I have been the Head of the Madras Medical Department, I have not addressed Government on this subject; my silence has not, however, been from any inattention to the subject, nor from any want of acquaintance with the requirements of the country, but because I considered that (except as to the numbers that are being educated, and to which I have constantly recommended additions) the degrees of education which the various students of medicine are receiving in the Second and Junior Departments are sufficient for all the present wealth of this people, and because the great point to be aimed at, is to fill the country with a number of men sufficient for the country's wants, and trained to such a degree of knowledge of western medical science as shall fit them to attend to the physical ailments of the people.

2. *As to the numbers needed.*—At the present moment there are in the territories ruled over by the Government of Madras about 8,000 practitioners, of whom only 450 are educated servants of Governments, attached to the Army, or lent to the Civil Hospitals, and the remaining are the Hindu Vaidyan, the Hindu Baid or Herbalist, and the Mahomedan Hakim, who practise as physicians, while the potter and the barber are the surgeons of the country, and the barber's wife and shoemaker's wife are the midwives, the great bulk of all these practitioners being uneducated, and their treatment of disease often barbarous, causing loss of life and limb. Only on the 16th ultimo a man was brought into the Madras General Hospital with his leg so mortified as to necessitate its removal, this had been occasioned by the application to it of some powerful substance, and every Medical officer who has practised amongst the people can tell of terrible misdoings.

3. A certain number of highly educated men are needed for the most important duties of the Medical Department, and also for the Medical Educational Department,

and, in my opinion, the people generally ought to have doctors with the highest attainments for which they can afford to pay, or whom the State may be willing gratuitously to supply; but, in whatever view the subject of Medical Education may be regarded, the point which stands prominently forward for attention is that the people have, at present, very few educated physicians or surgeons or midwives, and how to provide such in sufficient numbers, and with the necessary qualifications, should be the aim. Any progress over the present state of the country is to be valued, and if those whom the Madras Educational Department send out possess only such a medical education as will enable them to treat with success cases imperilling life or limb, this would be a step in advance and would be of very great value to the people who are now in the hands of illiterate, rash men. In countries little civilized or largely agricultural or pastoral medical men are few, compared with their numbers in kingdoms possessing a large civic population. In Russia, for instance, it is stated that there is but one medical man to every 14,116 inhabitants; in Hungary, one to every 5,492; in Austria, one to every 4,355; and in Prussia, one to every 3,230, and amongst the towns of Great Britain the proportion has been about one to every 1,000, but in the Madras Presidency the number who have been educated in the western medical science is about one to every 60,000, and Southern India needs to be supplied with 8,000 or 10,000 educated men to take the place of the 8,000 Vaidyans and Hakims, whom the country is now supporting.

4. *As to the needed Curriculum.*—Having stated the numbers needed, what should be the medical curriculum through which medical men suitable for the country should pass is the next question left for decision. At present there are three grades of pupils under tuition at the College, designated the Senior Department, the Second Department, and the Junior Department. The students in the Senior Department receive a training of the very highest order, quite beyond the present wants of Southern India, but they are few in number; at present there are only three students, and their tuition is effected at so great a cost that even if those who receive their education there chose to practise in the country they would not find remuneration for their labor and knowledge. Recently there were trained here four young men in the Senior Department, who proceeded in 1873 to the Royal College of Surgeons and Physicians of Edinburgh, from which they obtained the double qualification in Medicine and Surgery. The public press states that, out of a batch of twenty-two candidates for the double diploma, the Madras four came out at the top. This is a result undoubtedly showing favorably the capability of the College teachers, but at the same time proving that their work in that department is far beyond all the present requirements of this country. The Second Department is the next lower in educational training, and it may be stated, with confidence of general assent, that those who issue from it have received an education amply sufficient for the more responsible offices in this country, but the numbers of them that can be educated under the present arrangements of the College are insufficient for the wants of the country, and the cost of their education is greater than the people are able or willing to meet. Descending to the Junior Department, in which the hospital assistants are educated, the curriculum, though susceptible of modifications as to the mode of teaching, is, as regards the subjects taught, in my opinion, ample for all the ordinary requirements of this people, as they are at the present day, and, as the machinery for training them is in perfect order and capable of an immediate large extension, it is to this that I recommend Government to adhere for the present until the people grow able to pay for more highly-educated men, and until the Educational Department can supply a sufficient number of them. In the order, No. 960 of 1873, it has been indicated as the opinion of Government that the Medical officers of civil dispensaries shall have an education somewhat similar to that now afforded to the Second Department at the College, but the applications, reports, and appeals from Local Fund Boards and Municipalities

Madras Medical Students.—We have been informed, on reliable authority, that Messrs. Lancaster, Barron, Martin, and Warder, all late students of the Senior Department of the Medical College, Madras, have successfully and very creditably passed their examination at the Royal College of Surgeons and Physicians of Edinburgh, for the double qualifications in Medicine and Surgery. These young gentlemen only lately left Madras in the *Fiorrey* on her last homeward trip, and presented themselves for examination soon after their arrival in Scotland. Out of a batch of twenty-two candidates for the double diploma, the Madras four came out at the top. This is a fact highly creditable to the Madras Medical College, and is as honorable to its teachers as it is to those who have so well sustained the credit of their "*Alma Mater*."—*Athenæum and Daily News.*

have shown that, though the communities wish to be provided with medical men many of them are unwilling, others of them are really unable, to pay large salaries, and nearly all prefer natives as their professional attendants. Cheapness and numbers cannot at present be combined with high professional attainments; for, though the country requires to have medical men by thousands, the Principal of the Madras College has now intimated

1875, 25th November.

that 160 students is the largest proportion that the College can have under instruction, and the outturn from that number of students will not be sufficient both to replace casualties in the existing establishment, and also meet the growing wants.

5. With my knowledge of the state of the country, the wishes of the people, and the educating powers of the College, the standard ordered in No. 960 of 1873 will prove too costly, and the numbers obtainable by it too limited for requirements, and these two defects can only be remedied by adhering to a lower standard, and thereby extending the means of medical education. And, as the subject has been prominently before Government, during many past years, and the Towns Improvement and Local Funds Acts have recently become law, the present seems a suitable time for Government to consider what should be the medical education of the Civil medical practitioners, who will be made available for Municipalities. I have already explained to Government that, hitherto, the Madras attempt to educate the highest order of men for medical civil employ has failed, and the country, for its civil wants, has had to depend upon receiving the surplusage of the men who have been trained by Government for military employ. When this was brought to the knowledge of Government, by a member of the Education Committee of 1864, Government then denounced the practice as improper; but ten years have since passed by, the sole scheme proposed for educating village practitioners has not received the sanction of Government, and the system of employing Military Medical officers in the civil duties of the country has continued down to the present day.

6. It may not be in the recollection of Government that the education of the Junior Department students has been greatly improved, since the Committee sat in 1864, and this body of medical men cannot, in my opinion, now be spoken of as Government then wrote. In explanation of the change, I would mention that, in the year 1868, the subordinate medical department was reorganized, the designation of dressers was altered to that of hospital assistants, and a great improvement was made in the standard of education given to that class of public servants. Nevertheless, G.O., No. 960, of the 17th September 1873, considers them still to be insufficiently instructed for independent medical employ, and has ordered, for civil charges, a standard of education similar to that received by the warrant students in the Second Department. In so doing, however, Government has, in my opinion, fixed the standard at a height beyond what the people are willing or able to pay for, and in issuing that Order the Report of the Education Committee of 1869 seems to have been forgotten. It is desirable, therefore, that the facts of the case should now be placed before Government. I may, accordingly, mention that, in the year 1869, subsequent to the improvement in the hospital assistants' education, a Committee was appointed to draw up a scheme for the training of village practitioners, and they then proposed a curriculum very greatly inferior to that which a few months before had been sanctioned for the Military Hospital Assistants, but, on being presented to Government, its consideration was postponed until the Towns Improvement Bill should become law. When, however, that Bill passed, I placed the whole subject again before Government, and showed successfully how the views of Government could be at once more cheaply and effectively carried out, by adhering to the greatly higher curriculum followed at the Medical College, for the training of the Junior Department. My suggestions received the approval both of the Director of Public Instruction and of the Acting Principal of the Medical College, who recorded their opinions that the College is the best Medical School, and when in G.O., No. 372, of the 6th December 1871, Government desired further information, I furnished it in my subsequent letter No. 144, of the 18th April 1873. That correspondence does not seem to have been before Government when the Order, No. 960, of the 17th September 1873, was issued. It, therefore,

1871, 25th September, No. 213.

seems desirable that I should now place before Government the fact that, in the year 1869, on the recommendation of the Principal of the College, Government authorized an improved curriculum for the Junior Department, the men coming from which have been employed in various Civil and Military medical duties, and subsequently, in the same year, the Committee, of which the Principal was a Member, proposed a greatly inferior curriculum for the education of village or district doctors, who were to be scattered solitarily over the country, remote from all other medical men, and left to rely on their own strength—an isolation which to some persons is very trying. Government will perceive the important bearing of this fact on the question of the future education of the country's medical men, and will recognise that, if the greatly inferior degree of training which the 1869 Committee proposed for district doctors was deemed by the Committee ample for the country, it is legitimate to conclude that the greatly higher curriculum, which the Principal had previously proposed and obtained for the Junior Department, is still more adequate. And that the curriculum proposed by the 1869 Committee, though very much lower than that which had previously been adopted for the Junior Department, was deemed ample for the medical requirements of the country is proved by the fact that, when my predecessor forwarded the report, he considered * the Committee's standard over-high, recommended that the three years' study which they had proposed should be reduced to two years, and advised that midwifery should be struck out of their curriculum. This is a matter of so much importance for the Government to be acquainted with, when considering the education of the country's future medical men, that I give here the curriculum proposed in 1869, by the Principal, for the Junior Department, which is now in use, and that proposed in 1869, for the district doctors, by the Committee of which the Principal of the College was a member :—

1868, 18th July, No. 58, Principal to Government.
1869, 20th February, No. 63, G.O.
" 30th July, No. 1058, G.O.
1870, 3rd March, No. 260, "

* 1870, 19th January, No. 17, paragraph 3, to Government.

Curriculum adopted in 1869 for the Junior (Hospital Assistant) Department.	*Curriculum proposed in 1869 for District Doctors by the Committee of 1869.*
(1) Entrance Examination.	(1) None.
(2) Pre-collegiate.	(2) Do.
(3) 1st *Examination*, after six months, of properties and uses of drugs in common use.	(3) Do.
(4) 2nd *Examination*, after twelve months, Practical Pharmacy.	(4) Do.
(5) 3rd *Examination*, after eighteen months, Pharmacopœia and Minor Surgery.	(5) Do.
(6) 4th *Examination*, after twenty-four months, same subjects, with Elements of Osteology (see Medical Code, pages 83 to 86, Volume I., Section V.).	(6) Do.
1st Year.	1st Year.
Winter. By *Professors and Assistants.* (7) Anatomy. (8) Materia Medica. (9) General Hospital.	(8) Materia Medica, and (11) Practical Pharmacy. (7) Elements of Anatomy, and (10) Physiology. (9) Hospital training, including the compounding and dispensing of medicines, &c.
Summer. By *Assistants.* (10) Outlines of Physiology. (11) Practical Pharmacy. (12) Minor Surgery. (9) General Hospital.	Examination.
2nd Year.	2nd Year.
Winter. By *Professors and Assistants.* (13) Medicine. (14) Clinical Medicine. (15) Surgery. (16) Clinical Surgery. (17) Midwifery. (18) Dissections. (9) General Hospital. (19) Eye Infirmary. (20) Lying-in Hospital. (21) Vaccination.	(8) Materia Medica, and (11) Practical Pharmacy. (7) Revision of the Elements of Anatomy, and (10) Physiology. (15) Elements of Surgery, (16) Clinical Surgery, and (12) Minor Surgery. Manufacture of necessary surgical apparatus and appliances.
Summer. (22) Hygiene. Professor and Assistant. (12) Minor Surgery Assistant. (9) General Hospital. (19) Eye Infirmary. (20) Lying-in Hospital. (21) Vaccination.	Examination.
	3rd Year.
	(13) Elements of Medicine, and (14) Clinical Medicine. (17) Elements of Midwifery, and (20) Diseases of Women and Children. (22) Elements of Hygiene. (21) Vaccination. (9) Dispensary Practice.
	Certificates of qualifications.
	(18) None. Dissections. (19) Eye Infirmary. None. (20) Lying-in Hospital. None.

7. In order to facilitate reference, I have numbered each subject of the studies which the hospital assistants now pursue and those that the Committee recommended for the district doctors, and a glance will suffice to detect the

greatly inferior character of the curriculum proposed for the district doctors for whom no pre-collegiate training was arranged, and who besides were to be taught by means of the vernacular tongues. I have no doubt whatever that, for the present condition of the mass of the people of this country, the existing subjects in the curriculum for the Junior Department are ample, and that they are so, I will furnish further proofs by comparing the Madras Junior Department curriculum with the courses of study followed in the Grant Medical College, Bombay, for the Military and Civil Departments, and in the Bengal Medical College, Calcutta, for training their vernacular licentiates and native apothecaries. I will, therefore, place the curricula of the three Colleges together, and, to facilitate examination, I have preserved on the subjects the same numbers :—

MADRAS.	BENGAL.	BOMBAY.
Curriculum adopted in 1869 for the Junior (Hospital Assistant) Department.	*Bengali and Hindustani.*	*Mahratti Class.*
(1) Entrance Examination.	(1) ?	(1) ?
(2) Pre-collegiate.	(2) ?	(2) ?
(3) 1st *Examination*, after six months, of properties and uses of drugs in common use.	(3) ?	(3) ?
(4) 2nd *Examination*, after twelve months, Practical Pharmacy.	(4) ?	(4) ?
(5) 3rd *Examination*, after eighteen months, Pharmacopœia and Minor Surgery.	(5) ?	(5) ?
(6) 4th *Examination*, after twenty-four months, same subjects, with Elements of Osteology (see Medical Code, pages 83 to 86, Volume I, Section V).	(6) ?	(6) ?
1st Year.	1st Year.	1st Year.
Winter. *By Professors and Assistants.* (7) Anatomy. (8) Materia Medica. (9) General Hospital.	(7) Anatomy. (23) Chemistry. (8) Materia Medica. (18) Dissections.	Winter Session. (7) Anatomy, Skeleton, Articulations, muscle viscera. (23) Chemistry. (13) Medicine. (15) Surgery.
Summer. *By Assistants.* (10) Outlines of Physiology. (11) Practical Pharmacy. (12) Minor Surgery. (9) General Hospital.		Summer Session. (8) Materia Medica. (11) Pharmacy. (10) Physiology.
2nd Year.	2nd Year.	2nd Year.
Winter. *By Professors and Assistants.* (13) Medicine. (14) Clinical Medicine. (15) Surgery. (16) Clinical Surgery. (17) Midwifery. (18) Dissections. (9) General Hospital. (19) Eye Infirmary. (20) Lying-in Hospital. (21) Vaccination.	(7) Anatomy. (23) Chemistry. (8) Materia Medica. (18) Medicine. (15) Surgery. (17) Midwifery. (24) Medical Jurisprudence. (18) Dissections. (9) Out-door patients. (14) Medical Wards. (16) Surgical Wards. } In Clinical instruction and lectures.	(7) Anatomy, Lectures with Dissections. (23) Chemistry. (13) Medicine. (15) Surgery. (8) Materia Medica. (11) Pharmacy. (10) Physiology.
Summer. (22) Hygiene. Professor and Assistant. (12) Minor Surgery, Assistant. (9) General Hospital. (19) Eye Infirmary. (20) Lying-in Hospital. (21) Vaccination.		
	3rd Year.	3rd Year.
	(7) Anatomy. (23) Chemistry. (8) Materia Medica. (13) Medicine. (15) Surgery. (17) Midwifery. (24) Medical Jurisprudence. (16) Surgical Wards. (14) Medical Wards. (19) Ophthalmic Wards. (20) Midwifery Wards. } Four months, with clinical lectures and clinical instruction.	(13) Medicine (15) Surgery. (17) Midwifery. (24) Medical Jurisprudence.
(22) None (Chemistry). (24) None (Medical Jurisprudence).	(11) None (Pharmacy). (21) None (Vaccination). (22) None (Hygiene).	(18) None (Dissections). (10) None (Vaccination). (22) None (Hygiene).

8. It will be seen from these columns that both in Bengal and Bombay the pupils are taught through three years of study, and have chemistry and medical jurisprudence additional to the curriculum of Madras, but have no dissections, vaccination or hygiene, as in Madras, though all other subjects of education are the same. In Madras, however, it is conducted through the medium of the English language, by Professors and Assistant Professors, but is restricted to two years. If the wants of Madras were less urgent than they now are, I would recommend the three years' courses of Bengal and Bombay. I consider that the candidates for the Madras Junior Department should have matriculated, or should have one year of pre-collegiate training with two years of college, and that a brief course of chemistry (so much of it as will facilitate the study of hygiene), and the elements of jurisprudence, as now taught in Bengal and Bombay, should be added to the Madras curriculum, of which G.O. No. 63 of the 20th February 1869, approved; and with that slight modification in the existing curriculum, I am of opinion that it is perfectly suited to the present condition of the country, and to its people's wants, wishes and means.

9. In thus stating my views, it is proper to make known to Government that, for some years past, medical educationalists have been so constantly adding to the subjects to be studied, and to the period of study, that the quantities have grown beyond the power of ordinary student intellect to overtake; but, whilst this has been going on, the appendix to my present letter will show that some of the most eminent men of Great Britain have been remonstrating against the vain attempt to cram into a student's mind the vast knowledge which each Professor possesses of his own speciality.

And in mentioning this, I would recall to the remembrance of Government what the Madras Revenue Board wrote in the year 1869.

In paragraph 26 the Board said: "There are 45,790 villages in the Presidency, and it would obviously be impracticable for many years to come to bring medical aid within reasonably facile reach of each, or to train up a body of moderately-competent practitioners to meet the wants of a population of twenty-six millions. The Board think that there are certain measures which the Government can and ought to adopt to meet the great want. In the first place, the Government should, in their opinion, afford the means of obtaining a suitable medical education. The Medical College at Madras cannot be said to do this. The education is entirely in English, the standard is extremely high, and employment by the State is the aim of all who enter it. The few who devote themselves to private practice expect (and with justice, considering their attainments) a far higher rate of remuneration than the people can afford to give. They would attach a few scholarships, in no case exceeding what is sufficient for the decent maintenance of men whose future sphere is to be practising in the towns and villages of the country (for they think it most essential not to foster extravagant expectations). The pupils should entirely support themselves or be supported by the villagers under arrangements with which Government need not meddle."

10. In viewing this subject, it is necessary to keep in mind that the people in the Madras Presidency are poor, even in the towns; and, with the greater part of the country in very small holdings, the agricultural population have not the means to pay for the services of an expensively educated medical man, and what the State has to consider is the extent of professional education for which the people can pay. This, as regards the town and country population, is of as much importance as a consideration of the attainments needed for the purposes of Government, and it was distinctly indicated in the despatch from Her Majesty's Secretary of State, No. 6, dated 30th December 1865, in which it was mentioned that—

"(2) The course of education given in each department should be fitted to qualify the young men under training for the duties of the particular class of appointments which they are destined to fill, and it is not expedient to aim at qualifying them for higher duties which some of them may, under exceptional circumstances, be called on to discharge.

"(5) It is to be feared that there is, at present, no such prospect of private medical practice among the native society at your Presidency, as would induce

Proceedings of 27th April 1869, No. 2831, printed in Proceedings of Government of 4th May 1870, page 6.

many young men of education to aim at high medical qualifications, or to take a medical degree at the University, without the prospect of Government employ."

Also, the Right Honorable Lord Napier in a Minute, dated 26th April 1868, says: It has often been remarked that if European medical treatment is to be rendered applicable to the natives of this country, it must be through native agencies, already accredited and familiar and that no better instrumentality offers itself than the hereditary popular physician. The native doctor or his son should be attached to a European school, in which he might be disabused of his gross superstitions, and instructed in the minor operations of surgery as well as in the use of common medicines for prevailing maladies. Instruction might also be afforded to the native midwife."

Also, when the Committee of 1869 were proposing a curriculum for the village doctors, how humble the Committee deemed the position of that practitioner may be judged of, by their remarks in paragraph 15, where they say that "As regards his pay, it does not seem unreasonable to place the dresser on the same footing as that of a skilled labourer, who draws from 8 to 12 Annas per diem, which sum, deducting time lost owing to sickness, holidays, etc., amounts to from Rupees 10 to Rupees 15 a-month. The Committee propose that the Government pay shall be Rupees 10 per mensem for the first five years, Rupees 12 per mensem, after a professional examination, for the next five years, and Rupees 15 per mensem, after a professional examination, for the remainder of service, house-rent at 8 annas per mensem being a permanent monthly allowance to all village dressers."

11. In the previous paragraphs, I have shown that a very high education for the medical men at present needed for the country has never been contemplated by Her Majesty's Secretary of State, by the Madras Revenue Board, or by the Education Committee specially appointed in 1869 to consider the subject; that the curriculum of education through which the Madras hospital assistants now pass is very greatly superior to what the 1869 Committee proposed for the village doctors; that it is, as regards subjects, as high as the courses of study given in Bombay and in Calcutta to the class of vernacular licentiates and native apothecaries, with this great advantage that, in Madras, the teaching is by means of the English language, while in Bombay Mahratti is used, and in Calcutta the Bengali and Hindustani; and I am satisfied that, in the present state of the country, the education which the hospital assistant is receiving is the highest for which the masses at present can be brought to pay.

12. The Medical Education Committee of 1864 reported in their paragraphs 49 to 55 that the University of Madras was demanding for their medical degree more study than British Colleges. What that Committee stated ten years ago is true up to the present time. In Great Britain the Medical Council accepts as a perliminary test the Madras Matriculation standard (with Latin as the optional language), and requires for a degree or license to practise only four years' professional study, but at Madras, for the degree of M.B. the F.A. test is insisted on, with five years, subsequent professional study. And the result has been that, during the past twenty-seven years, only twenty-one civil students have obtained the medical degree of the University, or its equivalent, the diploma of graduate of the Medical College. With such small results to show, it need not be added in words, that the Madras Medical College, as a nursery for providing professional men for the people, has not been a success, and the people of Southern India, who have till now been depending on the loan of surplus Army Medical officers of the warrant and hospital-assistant grades, must, unless a remedy be provided, still have to look the same military source, because their is no reason to doubt that the cause of this College failure is the very high standard which the University has fixed for the Civil Medical practitioners. It is not possible to believe that the framers of the present exacting rules for training civil practitioners can have been aware of the humble circumstances of the people in the towns and rural districts of this Presidency, can have realized the fact that medical men are needed by thousands, or can have known that, of all the three-and-a-quarter millions of ryot-farmers on the rent-roll of this Presidency, the holdings are so small that one-third of them pay a rent to Government of less than 10 Rupees a-year.

13. The question of the education necessary for the medical requirements of the country has been under disposal ever since the year 1864. I had hoped that the sanction given to my letter, No. 313, of the 25th September 1871, had almost disposed of one part of it, and that the communication, still before the Government, No. 144, of the 18th April 1873, would have finally set it at rest. When I entered on my present office, and found that this subject had, in various forms, been under the consideration of Government continuously since 1864, I endeavoured to make myself master of all that had been done before my time; and the proposals in my letters of September 1871 and of April 1873 were simply submitted as containing a practical scheme evolved out of a huge mass of writings. But, as the question of the medical education requisite for civil practitioners has again come before Government, I can but repeat that it is no longer an educational question for an Academy or a College or a University to prescribe the standard which they would wish their students to attain, but it has become one to be disposed of by legislators acquainted with what the country requires, what it is able to afford, and what is capable of attainment.

1864, 4th December Education Committee Report.
" 7th " Surgeon G. Smith's Memorandum.
" 12th " No. 660, Mixed Board's Report.
1865, 29th March, " 84, Madras Government.
" 17th May, " 1145, Mr. Powell's Report.
" 6th June, " 140, Madras Government.
" 30th December, No. 6, Her Majesty's Secretary of State.
1867, 23rd October, No. 414, Inspector-General.
" 6th December, No. 167, Principal of the Medical College.
1868, 23rd April, Her Majesty's Secretary State.
" 29th " the Right Honorable the Governor.
" 18th July, No. 58, Principal of the Medical College.
" 10th October, Sanitary Commissioner.
1869, 20th January, No. 35, Inspector-General.
" 20th February, " 62, Madras Government.
" 26th July, Report of Committee.
" 30th " No. 1359, Madras Government.
1870, 19th January, No. 17, Inspector-General.
" 3rd March, " 260, Madras Government.
" 12th April, " 313, Revenue Board.

14. There are, at present, six medical curricula from amongst which Government can select for the education of the Civil Medical men for the country, viz:—

(1) The curriculum for the Senior Department, who are studying for degrees in medicine, in accordance with the regulations of the Madras University and this I regard as altogether beyond the present requirements of this country.

(2) The curriculum which has been followed by students in the Second Department, enlisted for warrant medical officers, and authorized by G.O., No. 84, dated 29th March 1865; and this I regard as ample for the small number of the higher educated medical men whom this country can at the present day absorb.

(3) The curriculum prescribed for the hospital-assistant class who aspire to be Sub-Assistant Surgeons, and this I regard as equal to No. 2.

(4) The curriculum for the hospital-assistant grade, sanctioned by G.O., No. 63, of the 20th February 1869, and I regard its subjects as ample for the country in its present condition, but needing some slight modification in the manner and period of teaching.

(5) The curriculum for village doctors, proposed by the Education Committee of 1869, but postponed by G.O., No. 260, dated 3rd March 1870, till the passing of the Local Fund Act; this is the most inferior of all the six curricula.

(6) The curriculum which I have proposed in paragraphs 1, 8 and 11 of this present letter, viz., that now in force for the hospital-assistant grade, but modified to one year of pre-collegiate and two years of collegiate study.

Appendix.

Professor Huxley says: "I entertain a very strong conviction that any one who adds to medical education one iota or tittle beyond what is absolutely necessary is guilty of a very grave offence," *

Dr. Latham says: "What we want still was put very concisely nearly forty years ago by my venerable and distinguished namesake in his lectures: 'a well-weighed scheme of professional education, sound and practical, comprehensive yet moderate in its requirements and adapted to all.'" †

Professor Alison says: "In reference to the practical objects for which medical science is cultivated, it seems important that the whole extent of the studies most intimately connected with the study of medicine should be fairly laid before the student in as small a compass as possible." ‡

* Professor Huxley on Medical Education.—*Lancet*, January 4th, 1870, page 797.
† Dr. P. M. Latham, in *Lancet* of 18th October 1873, page 573.
‡ Professor Alison, quoted by Alexander Harvey, M.D., Professor of Materia Medica, in the University of Aberdeen, in *Lancet* of the 22rd November 1873, in an address to the Aberdeen University Medical Society.

The late *Dr. John Murray*, of Middlesex Hospital, in a letter to Dr. Harvey, says: "As things are, there is no such thing, nowadays, among our medical students, as real genuine, thorough study, nothing but cramming or cramwork." *

Professor Harvey further says of those who are so adding to a student's labors that, "They forget that the students they have to deal with, want to be medical practitioners, having a competent and a sound scientific knowledge, not simply and solely anatomists, physiologists, and chemists. I would be the last person in the world to decry the value of a sound scientific training for the medical practitioner. I appreciate it fully. But what I maintain is that an intimate acquaintance with all the above subjects cannot be acquired in for years. The process has not yet been discovered of driving into a British skull, in so short a period, the knowledge of half-a-dozen German Professors. The attempt is impossible; and while striving after the impossible we lose the possible. The student's mind, under the present system, is crammed with ill-digested facts and crude notions about the most recent theories. These he disgorges at some examination board, famed, perhaps, for high-standard questions and indifferent answers. He receives his certificate, and is qualified (?) to practise his profession. Yet, when he comes to his real work, he is surprised to find how little his knowledge serves him. His studies must begin afresh." †

VIII

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 1st April 1874.
No.—149.

The Order of the 10th February 1874 requested me to state what, if any, additional cost is involved in the proposals contained in my letter, No. 51, of the 5th February.

2. On the 12th idem, I forwarded to the Director of Public Instruction copy of that order, also copy of my 5th February letter, and asked that the cost might be stated by the Principal of the College, whose reply containing the required information I beg to enclose.

3. In paragraph 5 of my letter of the 5th February, in order to obtain an increase of students from 115 as now to 160, I recommended compliance with the Principal's suggestion to have two more clinical teachers, by bringing one Commissioned Officer and Surgeon Mohi-ud-Din Sherif from outside, utilizing the services of the resident Surgeon, and to carry out this, the Principal names from Rupees 830 to Rupees 1,380 monthly.

4. In the other proposal, I mentioned that an apothecary might see the out-patients, and relieve the resident Surgeon and Dr. Mohi-ud-din Sherif for clinical instructing, and the Principal mentions Rupees 130 as the cost for carrying out this proposal, but in this there is some misapprehension on his part, as the apothecary is already there, and it would cost nothing.

5. Under either proposal, however, he names Rupees 2,060 as required for increased accommodation and furniture, also annually Rupees 610 for the chemicals, etc., to the increased number of students (from 115 to 160), and a monthly increase of Rupees 20 to the clerk's pay, for which last item the Principal gives no reasons.

6. On the other point, on which Government in the Order of the 10th February require information, viz., where funds are to be obtained for carrying out the proposed change, I have the honor to mention that the number of students hereafter to be entertained for civil employ will not, at present, be greater in number than those hitherto attested for military employ, and if my second scheme be adopted, there will be no extra expense incurred, but if adopting my first proposal, which has been framed to suit Surgeon-Major Smith's views, then the Educational Department will require to increase their budget sufficient to meet the additional amount which is then to be allotted.

* *Lancet*, November 23rd, 1878, page 765.
† Dr. A. Harvey, M.D., on Evils in Medical Education, in *Lancet*, December 6th, 1873, page 801.

Enclosure.

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
Dated—Madras, the 24th March 1874.
No.—295.

I have the honor to acknowledge receipt of the documents marginally entered, and to submit for your consideration a portion of the information called for in the Order of Government, dated 10th February 1874.*

Proceedings of the Director of Public Instruction, No. 255, dated 16th February 1874.
Letter, No. 806, dated 12th February 1874, from the Surgeon-General, Indian Medical Department, to the Director of Public Instruction.
Office draft of letter, No. 51, dated 5th February 1874, from the Surgeon-General, Indian Medical Department, to the Chief Secretary to Government.
Order of Government, No. 51, dated 10th February 1874.
Letters, Nos. 214 and 233, dated 5th December 1873, and 13th January 1874, respectively, from the Principal, Medical College, to the Director of Public Instruction.
Returned.

2. The proposals submitted to Government by the Surgeon-General in his letter, No. 51, dated 5th February 1874, are two in number.

3. In the first proposal the addition of two Clinical Professors to the General Hospital is thus provided for—

(*a*) by obtaining one clinical Professor from the Imperial Service;
(*b*) by utilizing, as a Clinical Professor, the services of the resident Medical officer; and
(*c*) by entrusting the duties of the Out-patients Department to Honorary-Surgeon Mohdeen Sheriff.

4. The cost of this proposal would be approximately as follows:—

		Rs.	Rs.
One Clinical Professor according to rank, monthly, from	...	700	1,250
One Assistant Apothecary, pay and house-rent, monthly	...	130	130
Total	...	830	1,380

5. In the second proposal the desiderated arrangement is thus secured:—
(*a*) by appointing the Resident Medical Officer a Clinical Professor; and
(*b*) by appointing Honorary-Surgeon Mohdeen Sheriff, Resident Medical Officer and Clinical Professor; and
(*c*) by appointing Mr. O'Keeffe, the Apothecary of the Hospital, to the charge of the Out-patients Department.

6. The approximate cost of this proposal would be as follows:—

	Rs.
One Assistant Apothecary's pay and house-rent, per mensem	130

(The Surgeon-General has assured me that no extra allowances will be made to Honorary-Surgeon Mohdeen Sheriff.)

7. Under either proposal the following additional expenditure, in connexion with the College, must be met:—

	Rs.
(*a*) Cost of increasing the accommodation of the Practical Pharmacy Room	1,400
(*b*) Cost of improving and enlarging the Practical Anatomy Room...	160
(*c*) Additional Furniture for Laboratory	500
Total ...	2,060
Annual increase.	
(*a*) Increased expenditure of Chemicals	350
(*b*) Do. of Pharmaceuticals	100
(*c*) Do. of Stationery	10
(*d*) Do. of Prizes	150
Total ...	610
Monthly increase.	
(*a*) Increase to Clerk's pay	20

8. These approximate calculations show the extra expenses which will have to be met in the event of Government electing either of the Surgeon-General's proposals. The calculations have been made on the understanding that the classes of students intended for the service of the Municipalities shall join College after one year's pre-collegiate training in the Second Department, and shall pass through the three years' curriculum of that department, and, further, that the total number of students *of all classes* attending College shall at no time exceed 160.

9. In connexion with the first proposal the Surgeon-General remarks that the rearrangements "are meant to suit the views of the Physician and ex-officio Principal." I would respectfully rectify this misconception, by stating that, in my opinion, the presence of a Commissioned Medical officer is necessary to the success and well-working of the Out-patients Department. To the second proposition I take grave exception, inasmuch as it leaves the General Hospital in a more inefficient state than it is at present, by removing from the Out-patients Department the resident Medical officer; by placing the said department under the apothecary; and by appointing to the responsible post of Clinical Professor of Surgery or of Medicine a gentleman, who, with all his laudable qualities and professional experience, is, in my opinion, unequal to the duties to be imposed upon him. A physician of mid-age, who has had no experience of teaching, is to be transferred from a position which he fills to the satisfaction of all, in order that he may occupy a professorship, where he has to teach, not only aspirants to Municipal appointments, and the lads qualifying as assistant apothecaries and hospital assistants, but also the advanced candidates for University honors in a language foreign to his own. Such a proposal I cannot view without grave apprehension as to the results.

10. In paragraph 6 of the letter under reply the Surgeon-General remarks as per margin. This proposal to abandon the present dissecting-room, and to erect "a leaf pavilion" in the neighbourhood for the use of the Practical Anatomy classes, is one which I believe to be unnecessary in itself, and objectionable on grounds of sanitation, exposure, expense, defective light, insufficient protection, and general safety. The present Practical Anatomy-room can, at small expense, be enlarged, by taking in the Southern veranda, and, if more were required, by raising the roof and putting in ventilating sky-lights; after which additions it would meet all the possible wants of the Practical Anatomy classes, without losing that Privacy, security, and general sanitary recommendation which it is most desirable should be retained in a dissecting-room.

"I recommend that the Practical Anatomy class be removed out of the college block into a structure of a kind similar to those that I have had to erect at the Lying-in Hospital. This removal is already needed for the health of the Professor who has been unwell as is believed from too prolonged work within the dissecting-room, and the officer similarly occupied in Bombay, when he called last week at my office, mentioned that he had been ailing similarly. Its removal from the block is very advisable, would give more room, and a leaf pavilion sufficient to protect the interior would be better for the Professor and the students."

IX

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 1st April 1874.
No.—150.

With my letter No. 51 of the 5th February 1874, I had the honor of submitting to the Right Honorable the Governor in Council a letter from the Principal of the Madras Medical College, in which that officer mentioned that, with the present staff of teachers, 115 is the highest number of students that can be taught at that institution, but that, with two additional clinical teachers, he could teach up to 160 students.

2. In my covering letter, I mentioned that, "with the country needing 8,000 or 10,000 qualified men, to limit the work of the College to teaching 115 students as at present is not advantageous." And I considered that the 160 now named by the Principal is nothing equal to the maximum number that could be studying at that institution; but, as the wants of the country are great and urgent, I recommended compliance with the Principal's request for two additional teachers; and in my letter No. 149 of this date, I resubmit this subject, with the additional information since asked for by Government in the Order of the 10th February.

3. I have been in communication with the Surgeons-General and the Principals of the Medical Colleges of the Bombay and Calcutta, in which cities there are classes of medical students taught by means of the English language, and classes taught in the vernacular tongues, Mahratti, Bengali, and Hindustani, and I wish to submit the Government points in the correspondence relating to the teaching powers of the Madras College.

4. It will be remembered that, while I was absent on short leave to Europe, there was ordered into College forty-four of the students whose entertainment had been sanctioned by the marginal order, as approved of in 1871 by the Acting Principal and the Director of Public Instruction, but in 1873 the Principal and the Director objected to receiving them into College, and only twenty-two of them were ordered in. As this appeared to be a very small number, I asked the Principal of the Calcutta College what numbers that institution is receiving for instruction, and he has informed me that, in the year 1872, the Calcutta College admitted twenty-eight into the Hindustani or Military class, and 299 into the Bengali class.

G.O. No. 272 of 6th December 1871.

5. Subsequent to this, on my requesting the Madras Principal to state the numbers that he could teach, with his present staff, he named to me 115, but said that, with two additional teachers, he could undertake to teach 160. With a view to obtain full information on this subject, I made further inquiries of the Principal of the Calcutta College, who writing to me on the 13th January last, mentioned that his Bengali class alone was upwards of 800 strong, and writing again on the 18th instant, he mentions that in 1873 they had altogether 1,394 students in that College, viz:—

English Class	486
Bengali ,, ...	772
Hindustani Class	136

and he intimates the intention, in future, of keeping up the strength of the English classes at about 500.

6. These Calcutta numbers are so greatly beyond the 115 that the Principal of the Madras College considers can be educated here (and to admit of teaching up to 160 a fresh demand for two additional teachers is made) that, while I recommend compliance with this request, I consider it desirable that Government should ascertain why it is that in the Calcutta College 1,394 students can be educated, while in the Madras institution 115 is the limit, or 160, if additional teaching power in the form of two Clinical Professors be now given.

7. I beg to mention that, for several years past, my predecessors have had to be continuously informing Government that the College was not turning out sufficient medical men for the wants of the Government and the country, and I regard the present as a favorable time for ascertaining whether this institution can be so rearranged as to produce something nearer to the extent of the Calcutta College work, than it has hitherto been doing. The tendency here has seemed to me to be a constant augmenting of the numbers of teachers, without a corresponding increment of results. I give these on the margin for the thirteen years from 1860-61 to 1872-73, and may mention that in 1862-63 a Professor of Jurisprudence was appointed, in 1863-64 a Professor of Midwifery, in 1867-68 a Professor of Pathology, also extra Professor for Hygiene, Comparative Anatomy, and an Assistant Professor in Medicine, when required.

Came out of College

Years.	Apothecary or Warrant.	Dressers or Hospital Assistants.
1860-61	20	21
1861-62	18	25
1862-63	11	31
1863-64	7	24
1864-65	1	27
1865-66	11	31
1866-67	8	33
1867-68	10	23
1868-69	10	24
1869-70	20	24
1870-71	19	13
1871-72	15	11
1872-73	19	23
Average ...	13	23½

Under all these circumstances, I have the honor to recommend that Government permit me to detail a Medical officer to visit Calcutta and examine into the details of the work at that institution.

As the Right Honorable the Governor in Council will desire to be informed whether the teaching staff of the Madras College is greatly less than that of Calcutta, I subjoin the numbers and designations of the Professors and Assistants

in each of these institutions, by which it will be observed that, though Madras is teaching only 115 and Calcutta 1,394 Calcutta (excluding Dentistry) has only one Professor more than Madras, *viz.*, of Descriptive and Surgical Anatomy, and four Assistants more:—

STAFF OF MEDICAL COLLEGE.

Calcutta.	Madras.
Principal and Professor of Medicine.	Principal and Professor of Medicine.
Professor of Ophthalmic Medicine and Surgery.	Professor of Ophthalmic Surgery and of Physiology.
,, of Surgery.	,, of Surgery and Clinical Surgery.
,, of General Anatomy and Surgery.	,, of Anatomy.
,, of Descriptive and Surgical Anatomy and Clinical Surgery.	,, of Chemistry and Chemical Examiner.
,, of Chemistry and Chemical Examiner.	,, of Midwifery.
,, of Midwifery.	,, of Materia Medica.
,, of Materia Medica.	,, of Pathology.
,, of Pathology	,, of Botany (when required).
Minor Professors: Professor of Botany.	,, of Medical Jurisprudence.
,, of Medical Jurisprudence.	,, of Comparative Anatomy (course of lectures when required).
,, of Dentistry.	,, of Hygiene (when required).
,, of Comparative Anatomy.	
,, of Hygiene.	
Assistants to Professors.	*Assistants to Professors.*
1. First Demonstrator of Anatomy.	1. Demonstrator and Curator, Museum.
2. Second do. do.	2. Assistant to Professor of Medicine.
3. Assistant Demonstrator, Anatomy.	3. ,, ,, of Materia Medica and Botany.
Teachers, Vernacular Classes.	4. Assistant to Professor of Chemistry.
4 Anatomy.	5. Native Assistant. (Teachers certain subjects to medical pupils.)
5. Medicine.	
6. Materia Medica.	
7. Surgery.	
8. Midwifery	
9. Chemistry and Medical Jurisprudence.	

E. G. Balfour.

Enclosures.

(i)

Calcutta, 13*th January* 1874.

. . . . My Bengali class, upwards of 800 strong, has been removed to a suburb of this city, and occupies what you will, hereafter, hear of as the Sealdah or Campbell Medical School. Again, this College having grown beyond all reasonable proportions, our Military or Hindustani or Native Medical Pupil class is to be removed at the end of this session to Patna where they will have a school of their own. There is also to be a vernacular class at Dona.

Norman Chevers.

(ii)

Medical College, Calcutta, 18*th March* 1874.

My Dear Balfour,—Pray pardon my delay in replying to your inquiries, but the answers require some detail, and work here has been almost overwhelming of late.

In 1873, we had altogether 1,394 students in this College, 486 English class, 772 Bengali, and 136 Hindustani.

We intend, in future, to keep up the strength of our English classes at this College at about 500.

Our English class will then be divisible into the English class and the Assistant Apothecary class.

We have no information of the number of beds at Patna, but I know of no large hospital there. At Dona, the students will attend the Milford Hospital, a fine institution for the Mofussil. The number of beds at the Sealdah Hospital is 400.

Originally, the College gave a gratuitous medical education to all students, and some came with scholarships from (educational) Schools and Colleges, and some gained scholarships as prizes in this College. Up to the present time, the Hindustani class, whose destination it is to become native doctors, chiefly with Native Corps, have been supported, as soldiers in barrack, on the premises. So also the hospital apprentices, who come here for three years' study, are similarly supported and lodged on the College premises. A student of the Primary or English class has always had the option, on passing, of either taking service as a Sub-Assistant Surgeon or of becoming a private practitioner.

Here, then, was the germ of the system of providing medical men "for the country."

Some years ago, it was felt that a humble class of practical but unlearned private practitioners was needful in the villages. These were provided in the Bengali Licentiate division of the Bengali class, the residue of which forms the Bengali Apothecary class, lads educated as native doctors for jails, dispensaries, and other civil duties in Bengal. Then the time came at which Lord Canning revolted at the "eleemosynary character" of our medical education, as he termed it, and it was arranged that all but ten free students and forty scholarship-holders of the English class and two others should pay for their education here. We have two sets of paying students in the English class:—First, the paying student proper who pays Rupees 15 admission fee, and 5 Rupees per mensem for five years; and second, the casual student whose object it usually is to study here for three years and then after another year in London or Edinburgh to pass there. His three years' study here costs him about Rupees 810.

The Bengali Licentiate class has thirty-six free students (who, however, pay 1 Rupee per mensem for their midwifery). The Bengali Apothecary class have thirty free students subjected to the same small deduction. These two classes have sixty-six scholarship-holders (college), and are liable to the same tax. Of the remainder, the Bengali Licentiate class pay entrance Rupees 9 and 3 Rupees a month for three years. The Apothecary class pay 1 Rupee on entrance and 2 Rupees monthly for the same term. By our last calculation we had of *paying students*—

English Class	338
Bengali Licentiates	228
„ Apothecary	193

Thus, in 1872-73, we received from paying students, of all classes, a total of Rupees 30,568. In the year, our College cost Government Rupees 1,52,652-15-3, in which the last-named sum is not included.

This gives a slight but clear idea of the manner in which Government provide private practitioners for this Presidency. Believe me, yours very sincerely,

Norman Chevers.

X

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.

To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.

Dated—Fort St. George, the 18th April 1874.

No.—178.

In my letter No. 150, dated 1st instant, I had the honor of submitting to the Right Honorable the Governor in Council that 115 is the number of students which the Principal of the Madras College has reported that the College, with its present staff, can teach, and I at the same time brought to notice that the Calcutta College, with only two Professors (one of whom is for Dentistry) and four Assistant Professors more than in Madras, had last year 1,394 students.

2. At the time I wrote that letter, my information as regards Bombay was incomplete, and I applied for the requisite data from the Principal of the Grant Medical College, copy of whose reply to me, as the subject is still before

Government, I beg to subjoin, from which it will be seen that in 1873 the Grant College had 303 students in the following classes, viz.:—

Graduates and Under-graduates	130
Hospital Apprentices	92
Vernacular and Native Medical Pupils	76
Assistant Apothecaries	3
Hospital Assistants	2
Total ...	303

3. As in my previous letter, No. 150, I placed in paralled columns the College Staffs of Calcutta and Madras, so, now similarly, I give the staffs of Bombay and Madras, to show that, though Bombay in 1873 was teaching 303 students, the number of Professors and Assistant Professors was identical:—

STAFF OF MEDICAL COLLEGE.

Bombay.	Madras.
1. Principal and Professor of Physiology.	1. Principal and Professor of Medicine.
2. Professor of Ophthalmic Surgery and Comparative Anatomy.	2. Professor of Ophthalmic Surgery and Physiology.
3. Professor of Surgery and Dental Surgery.	3. Professor of Surgery and Clinical Surgery.
4. „ of Anatomy.	4. „ of Anatomy.
5. „ of Chemistry and Medical Jurisprudence.	5. „ of Chemistry.
6. Professor of Midwifery.	6. „ of Midwifery.
7. „ of Materia Medica.	7. „ of Materia Medica.
8. „ of Pathology.	8. „ of Pathology.
9. „ of Botany.	„ of Botany (lectures when required).
See No. 5.	9. „ of Medical Jurisprudence.
„ „ 2.	„ of Comparative Anatomy (lectures when required).
	„ of Hygiene when (required).
Assistants to Professors.	*Assistants to Professors.*
1. Demonstrator of Anatomy.	1. Demonstrator of Anatomy.
2. Teacher of Materia Medica and Chemistry, Vernacular Class.	2. Assistant to Professor of Materia Medica and Botany.
3. Teacher of Medicine and Midwifery, Vernacular Class.	3. Assistant to Professor of Medicine and Midwifery.
4. Teacher of Surgery and Medical Jurisprudence, Vernacular Class.	4. Assistant to Professor of Chemistry.
5. Teacher of Anatomy and Physiology, Vernacular class.	5. Native Assistant (Surgery and all native classes).

Enclosure.

Letter—from Surgeon-Major W. G. Hunter, M.D., Principal of the Grant Medical College, Bombay.

To—Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department, Fort St. George.

Dated—Bombay, the 14th April 1874.

There are in the College graduates and under-graduates 130, hospital apprentices ninety-two, vernacular and native medical pupils seventy-six, assistant apothecaries three, and hospital assistants two, making a total of all classes 303. The first named corresponds to your senior class. The hospital-apprentice class remain in College for three years, and are taught along with the University students, and on leaving (after passing their examination) are designated Assistant Apothecaries. The medical pupils belong to the subordinate medical department, the vernacular students are admitted by competition, and both are taught through the medium of the Mahratti language, have a three years' course of study, and on passing their examination become third-class hospital assistants. The three assistant apothecaries and the two hospital assistants are undergoing a College course under paragraphs 46 and 47 of G.G.O. No. 392, of the 17th June 1868. They are taught with the University students, have a two years' course, and should they pass become Sub-Assistant Surgeons, or rather Assistant Surgeons. Kindly excuse brevity, as I am busily engaged with class examinations. Should I have omitted to supply you with any information, I shall be happy on application to make good the deficiency.

XI

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.
Dated—Fort St. George, the 29th May 1874.
No.—235.

With reference to paragraph 4 of G.O. No. 803, of the 8th instant, I have the honor to mention that the scheme for educating Civil Medical men, there asked for, was submitted in paragraphs 3, 4, and 6 of my letters, No. 409, of the 23rd October 1873, and paragraphs 6 and 13 of No. 43 of the 2nd February 1874.

2. In those letters I recommended that the curriculum for the training of the better-qualified medical men, to be styled "Civil Medical officers," suited to be "Medical officers" in independent medical charges, should correspond with that now followed in teaching the Military warrant grade in the Second Department of the Medical College; the education for the "Civil Hospital Assistants," who were to fill subordinate positions, being made to correspond with that now imparted to the Military Hospital Assistants.

3. My recommendations as to the education needed for the more highly-qualified practitioners, the "Civil Medical officers," were given in detail in my letter, No. 43, of the 2nd February 1874; but I observe that, when writing, I did not enter into all the details necessary to admit of immediate disposal of the "Civil Hospital-Assistants'" case. I, therefore, now beg to recommend that they shall nearly pursue the curriculum at present followed for the training of Military hospital assistants, by being subjected as now to a preliminary departmental examination, then trained for one year in pre-collegiate duties and studies, and for two years in collegiate studies, and then examined as to qualifications and receive certificates as to fitness. During their pre-collegiate, collegiate, and working service, their monthly salaries to be as per margin. And after four years, when the present great pressure of medical men is lightened, the collegiate studies to be pursued the same as now, but pursued for three successive years.

	Rs.
One year of pre-collegiate studies	7
Two years of collegiate studies	9
In subordinate employ, 3rd class	20
Do. 2nd class	30
Do. 1st class	40

4. Neither of these two classes of Civil Medical men to be attested, and their pensions to be in accordance with the Civil Uncovenanted Rules.

5. If reference be made to the paragraphs of my letters, as per margin, there will be found recommendations as to the stipends of the two classes while under pre-collegiate and collegiate instruction, and as to their salaries while in employ as medical practitioners. In paragraph 13 of my letter, No. 43, the pro-collegiate and collegiate stipends, *for the students of the higher qualification*, were proposed as under:—

No. 409 of 1873, paragraph 6.
" 43 of 1874, paragraphs 6 and 13.

		Rs.
Pre-collegiate	First year	16
	Second year	20
Collegiate	First year	20
	Second year	25
	Third year	30

and I still consider the stipends which I there recommended to be suitable, and such as would attract young men of European and Native origins to the profession. I did not, however, name the stipends which I would propose for the subordinate "Civil Hospital Assistants," and I now do so:—

		Rs.
Pre-collegiate ...	First year	6
Collegiate	First year	8
	Second year	9

6. In the matter of salary, when working, I proposed, in paragraph 6 of No. 409, Rupees 20 per mensem, for the subordinate Civil Hospital Assistant, and I consider that as a suitable salary for a subordinate "Civil Hospital Assistant," when first passed out of College, and he might then be styled of the third class; the salaries of the three classes that I would propose being as under—

	Rs.
Civil Hospital Assistant, third class under 7 years	20
Do. second class, under 14 years	30
Do. first class, of 14 years and upwards	40

7. The salaries submitted by me, in my two letters, Nos. 409 of 1873 and 43 of 1874, were framed on two different principles; that in my letter, No. 409 of 1873, was constructed on the principle of classifying charges in three grades, as under:—

			Rs.
Civil Medical Officer	in charge of	third-class Dispensary	70
Do.	do.	second-class Dispensary	80
Do.	do.	first-class Dispensary	100

and I think it probable that applicants of average ability, etc., could be had for these rates.

The recommendation in my letter, No. 43 of 1874, was based on the principle of years of service and on being in subordinate or independent charge as under:—

			In Subordinate charge.	Independent charge.
			Rs.	Rs.
Civil Medical Officers,	under 7 years		50	100
Do.	do.	7 to 14 years	100	150
Do.	do.	14 and upwards	150	200

and I have no doubt whatever, from all the inquiries made by me, that applicants of good ability, etc., can be had for these terms, and I recommend that these money rates be adhered to, and be granted on the service principle.

8. With reference to the question put to me in the concluding part of paragraph 4, I had the honor, on a former occasion, to mention that few medical men can be selected from amongst those who have been discharged or pensioned from the service, and, there is, at present, in the South of India, only one unemployed medical man with the degree of M.B. from the Madras University. It is Mr. Henry Nailer, M.B., who tells me that he would accept a salary of Rupees 200 monthly.

9. I beg to place on the margin the numbers of entries during the past fourteen years of civil students into the Senior Department of the Madras Medical College, in order to explain to the Right Honorable the Governor in Council why there are so few Civil Medical men.

Year.	Numbers entering College.	Numbers qualifying.
1859-60	4	1
1860-61	3	...
1861-62	2	...
1862-63	2	1
1863-64	...	1
1864-65	2	2
1865-66	4	...
1866-67	2	1
1867-68	6	2
1868-69	2	...
1869-70	2	...
1870-71	...	1
1871-72	...	3
1872-73		

10. In the above proposals of schemes for educating Civil Medical practitioners, it will be observed that, after omitting the attestation which has hitherto been applied to the Military Medical students, the curricula, through which I propose that the Civil Medical students should pass, are almost identical with those now followed in Madras College, in the Second and Junior Departments, in training for the warrant and hospital-assistant grades; and I advise this course because the curricula are ample, and the existing college arrangements would in no way be disturbed.

11. In the foregoing paragraphs of this letter and in my letters, No. 409 of 1873, and No. 43 of 1874, I have been writing solely on the supposition that the Civil Medical men, whose education I have been proposing, are to be stipended during their course of pre-collegiate and collegiate instruction. I have considered the possibility of young men studying on their own resources, in the hope of subsequently obtaining professional employment in India, either from Government, or amongst the community, but I am satisfied that there cannot at present be entertained any hope of obtaining a sufficiency of medical practitioners in that manner. I think that the day will come, probably is not far distant, when young men will see their way to a useful career in life, by acquiring a degree or license in medicine, but I have shown above, in paragraph 9, that, in the past fourteen years, only thirty-one students have entered, and twelve students have qualified in the Senior Department of the Madras College, and this fact will prove to Government that, for the present at least, the needed quantity for Civil Medical practitioners must not only have stipends allotted to them, as inducements to study, but also have a certainty that, on obtaining their degrees or certificates of qualification, there shall be employment provided for them.

12. The permission, which is now partially in force, for private students to attend certain classes of the College on payment of fees, should, however, be made general; and I may mention that the curriculum for the higher-qualified men, which I propose in this letter, is identical with the curriculum which, in my letter, No. 158, of the 10th April, I reported to Government had received the assent of the entire Faculty of Medicine of the Madras University. I consider this uniformity of value, because, if the proposed curriculum receive University sanction, a private student may, at the close of his studies, obtain a university degree. The Bombay and Bengal Colleges and Universities are educating many private medical men, and, so soon as this Presidency shall have a few such to counterpoise, and help each other, there will not be any difficulty in their obtaining a fair livelihood in the practice of their profession.

13. There are, at present, several scholarships available for the Senior Department students. It may be desirable to make them available for the private medical students following the curricula which I now propose.

14. I recommend that the two Civil Medical offices, now proposed, be open to all persons applying, with good moral character, who pass the tests.

15. The Military Medical students at the commencement of their pre-collegiate training are all attested, and the question of placing the civil students under a bond has to be considered. I am of opinion that the Civil Medical men should be bound over to serve Government for ten years after obtaining their certificate of fitness.

16. In my letter, No. 409, dated 23rd October 1873, I mentioned thirty as the number needed of students for the more highly-qualified class of Civil Medical officers. Since then, another session of the College has come to a close, and the casualties and requirements of another year have to be provided, and I now name forty as the number needed of students for the higher qualified grade of Civil Medical officers. Even if the candidates can be in time sufficient to commence their pre-collegiate studies on the 1st October of the current year, the students will not complete their curriculum until June 1878, by which time employment for the number that I now name will certainly be found. For the inferior qualified men—the "Civil Hospital Assistants"—fifty-six is the number that I calculate to be now required, and they will leave College in June 1878.*

*The numbers of students here recommended to be entertained, I have the honor to suggest, should be applied for immediately by a notification to be issued by me. If not now entertained, owing to non-action on my letter, No. 409, dated 23rd October 1873, there will be no entrants in the Madras Medical College for the session commencing October 1875. The number, fifty-six, now indicated as needed to be notified for entry as "Civil Hospital-Assistant" pupils, has been arrived at after careful calculation. The deficiency of this subordinate class in all departments is at present twenty-four. The annual decrement is about twelve; about twenty new institutions will be opened annually, and, if ordered to be entertained today, they will not leave College till June 1878 at soonest, and by that time their number will have been decreased to forty.
E.G.B.

17. I am of opinion that, until the 1877–78 candidates be called for, the admission to study as Civil Medical officers should be either by Departmental Examination, or by Matriculation, but for and after the 1877–78 Session, Matriculation should be the sole test for admission.

18. The numbers which I now give as required for the wants of the country will place at the College students greatly in excess of the 115, which the Principal has stated in his letters as the highest number that the College, with its present teaching staff, can have at one time under training, but I have shown in my letters now before Government that the Bombay Medical School, with the same number of Professors and Assistants as in Madras, had last year 305 students, and the Calcutta College had 1,394 students, though with only one Medical Professor and four Assistants more than Madras, and there cannot be any difficulty here in educating greater numbers, if the Madras Educational Department will but conform to the practice in the sister Universities.

19. As it is of importance that Government should have in its possession a clear statement of the curricula of the studies, which I have advised should be followed by the future Civil Medical students, and also a statement of the stipends and salaries which I recommend should be given to them when at College and afterwards when employed in their profession, I place below all that I have already submitted in my letters as per margin, and in the present communication :—

1873, No. 409 of October.
1874, No. 43 of February.

I. Civil Medical Officer—

Stipends and Salaries. Departmental or Matriculation test, until the year 1866-67, afterwards Matriculation only.

A. Pre-collegiate course, two years, viz.—

	Rs.
First year, monthly stipend	16
Second year, monthly stipend	20

B. Collegiate course, three years, viz.—

First year, monthly stipend	20
Second year, monthly stipend	25
Third year, monthly stipend	30

C. After leaving College with a certificate of qualification, when in Government employ—

	In subordinate medical charge.	In independent charge.
	Rs.	Rs.
Under 7 years	50	100
„ 7 to 14 years	100	150
„ 14 and upwards	150	200

II. Civil Hospital Assistants—

Stipends and Salaries. Departmental test.

A. Pre-collegiate course, one year, viz.—

	Rs.
First year, monthly stipend	6

B. Collegiate course, two years, viz.

First year, monthly stipend	8
Second year, monthly stipend	9

C. After leaving College with a certificate of qualification, when in Government employ—

	Rs.
Third Class, under 7 years	20
Second Class, under 14 years	30
First Class of 14 years and upwards	40

III. Course of Study—

A. Civil Medical Officer.

Entrance Examination up to Session 1876–77 inclusive, at option, Matriculation or Departmental Examination as at present. From Session 1877-78 inclusive Matriculation.

Pre-collegiate studies, two years.

COLLEGIATE STUDIES AT MEDICAL COLLEGE 187 -7 .

Curriculum of Study—Winter Session.

Entrance Examination up to 1866-67 inclusive, optional, Department as now, or Matriculation.

On and after 1867-68 Matriculation.

For Civil Medical men same as per Second Department.

First Year.

Winter — Anatomy, Chemistry, Materia Medica.

Summer — Practical Chemistry, Practical Pharmacy, Examinations by the Assistants.

Hospital Attendance.

Second Year.

Winter — Anatomy, Physiology, Surgery and Clinical Surgery, Medicine and Clinical Medicine, Dissection and Demonstrations.

Summer — Practical Pharmacy, Minor Surgery, Examinations by the Assistants.

Surgical and Medical Wards.

Third Year.

Winter — Medicine and Clinical Medicine, Surgery and Clinical Surgery, Midwifery, Ophthalmology, Diseases and Demonstrations, Medical Jurisprudence.

Summer — Hygiene, Diseases of Women and Children, Operative and Minor Surgery.

General Hospital, Eye Infirmary and Lying-in Hospital.

It will be optional, as now, to restrict the pre-collegiate studies to one year and to add it to the collegiate course.

B.—Civil Hospital Assistant—
Pre-Collegiate studies, one year.
Collegiate Studies.
Curriculum of Studies.
Entrance Examination. Department as now.

For Civil Hospital Assistants same as Junior Department.

First Year.

Winter — Anatomy, Materia Medica, Examinations by the Assistants.

Summer — Outlines of Physiology, Practical Pharmacy, Minor Surgery. By the Assistants.

Attendance at the General Hospital during both Sessions.

Second Year.

Winter — Medicine, Clinical Medicine, Surgery, Clinical Surgery, Midwifery, Dissections, Examinations by the Assistants.

Summer — Hygiene, Minor Surgery by the Assistants, Examinations by the Assistants.

General Hospital, Eye Infirmary and Lying-in Hospital during both Sessions.

Daily Order of Instruction.

Days.	6 to 10.	10 to 11.	11 to 12.	12 to 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.
Monday ...	Dissections ...	Botany ...	Pathology ... ... Materia Medica ...	Anatomy ...	Chemistry ... ... Examination in Anatomy, 2nd class.	Physiology ... ... Midwifery	Medicine ... ... Examination in Anatomy, junior class.	Surgery. Examination in Chemistry.
Tuesday ...	Do. ...	...	Materia Medica	Do. ...	Do. Ophthalmology ...	Physiology ... Midwifery ...	Do.	Surgery. Examination in Materia Medica.
Wednesday ...	Do. ..	...	Pathology ... .. Materia Medica ..	Do. ...	Chemistry	Physiology	Medicine ... ... Examination in Materia Medica.	Surgery. Examination in Chemistry.
Thursday ..	Do. ...	Botany ...	Materia Medica	Do. ...	Chemistry ... ... Examination in Anatomy, 2nd class. Ophthalmology ...	Physiology ... ... Midwifery	Medicine ... . Examination in Anatomy, junior class.	Surgery. Examination in Materia Medica.
Friday ...	Do. ...	...	Materia Medica .. Pathology	Do. ...	Chemistry ... ... Examination in Anatomy, 2nd class.	Midwifery	Do.	Surgery. Examination in Chemistry.
Saturday ...	Do. ...	...						

The Winter course commences on the 1st of October and terminates on the 31st of March; the Summer course commences on the 1st of April and terminates on the 30th of June.

The proportion of Examinations to Lectures shall not fall below one in three in the several courses, whether these courses be delivered during Winter or Summer Sessions. Towards the close of each course of Lectures there shall be held a "conversational course," which shall include examinations in all the subjects lectured upon.

Recorded Examinations of all the Junior Students shall be made by Committees of Professors at the end of every Session. These are not to exempt the students from such examinations in Chemistry and Materia Medica as the Final Examination Committee may consider necessary to elicit the student's knowledge of the application of these sciences to practice, or to satisfy it that he has not neglected these studies during the interval.

Civil Medical Officer same as Senior and Second Departments.

Daily Order of Instruction for the Summer Session.

Days	11 to 12.	12 to 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.
Monday ...	Diseases of Women and Children. Examination in Medicine, 2nd class.	Hygiene ...	Examination in Physiology.	Medical Jurisprudence. Examination in Surgery.	Operative and Minor Surgery.	
				Practical Chemistry.		
Tuesday ...	Diseases of Women and Children.	Hygiene ...	Examination in Anatomy, 2nd class.	Medical Jurisprudence.	Operative and Minor Surgery.	
	Pharmacy.					
Wednesday ...	Examination in Medicine, 2nd class.	Hygiene ...	Examination in Physiology.	Medical Jurisprudence. Examination in Surgery.	Do.	
				Practical Chemistry.		
Thursday ...	Diseases of Women and Children.	Hygiene ...	Examination in Anatomy, 2nd class.	Medical Jurisprudence.	Operative and Minor Surgery.	
	Pharmacy.					
Friday ...	Diseases of Women and Children. Examination in Medicine, 2nd class.	Hygiene ...	Examination in Physiology.	Medical Jurisprudence. Examination in Surgery.	Do.	
Saturday ...	Operative Surgery as material is available.			Practical Chemistry.		

The Summer course commences on the 1st of April and terminates on the 30th of June.

The proportion of Examinations to Lectures shall not fall below one in three in the several courses. Toward the close of each course there shall be held a "*Conversational course*," which shall include examinations in all the subjects lectured upon.

Recorded Examinations of all the junior students shall be made by a Committee of Professors at the end of the Session. These shall not exempt students from such examinations in Chemistry and Materia Medica as the Final Examination Committee may consider necessary, either to elicit their knowledge of the application of these sciences to practice, or to satisfy the Committee that they have not neglected these studies during the interval.

E. G. Balfour, Surgeon-General,
Indian Medical Department.

XII

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.

To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.

Dated—Fort St. George, the 4th July 1874.

No.—295.

The Right Honorable the Governor in Council is aware that the existing curriculum of study for the Military candidates for the Subordinate Medical Department requires that they shall pass two years of the period in hospitals under the designation of pre-collegiate Medical Students, and then be transferred, as students to study at the Madras Medical College.

2. I beg to bring to the recollection of Government that, after the Municipal and Local Fund Acts became law, Government, in order to meet the increased demands for medical men which it was considered that these Acts would create, authorized the entertainment of thirty-five additional medical pupils, and

G.O. No. 372 of 6th December 1871, paragraph 4.

the employment of an additional Assistant in the Medical College to admit of their due instruction.

3. When in 1871 I recommended the entertainment of the additional number which the G.O. No. 372 of the 6th December 1871 has sanctioned, it was my intention, as stated in paragraph 11 of my letter, that they should enter College in the Session of 1873, so as to leave it qualified in June 1875. But during my brief absence in England last year, when the officer acting for me submitted a list of the forty-eight pupils, who should enter the College at the forthcoming session, the Principal of the Medical College as also the Director of Public Instruction took exception to that large number, both of these officers indicating that to teach such a large number, an additional Assistant in the College would be required, and they took this objection seemingly from their not being aware or forgetting that Government had in 1871 already sanctioned that addition. The result, however, of the objections then taken was that only twenty-two pre-collegiate pupils were taken into the Medical College on the 1st October last, and, at the present moment, there are ten pre-collegiate hospital apprentices, and fifty-eight pre-collegiate native medical pupils, awaiting orders as to their being, or not, drafted into the College on the 1st October next.

G.O. No. 288 of 18th September 1873.

4. I may mention that it is usual at this period of the year for the Principal of the Medical College to inquire of this Office what number of students it is intended to send into College at the beginning of the October Session, and, in reply to the usual request, I mentioned the above numbers.* On this he represented to me that the number of native medical pupils, which I had proposed to send, when added to eight pupils expected from Mysore, would make an aggregate of sixty-six pupils, equal, as he says, to two whole batches of thirty-three pupils each, and the Principal added that clinical instruction could only be provided for one of these batches at the Medical College, and for the clinical instruction of the other batch arrangements would need to be made, either by securing two additional clinical teachers at the [illegible] or by making arrangements for the requisite training at one or other of the Hospitals at the Presidency.

* Ten Hospital Apprentices.
Fifty-eight Native Medical Pupils.

5. On receipt of this communication, I asked the Director of Public Instruction and the Principal of the Medical College to meet me in consultation, and, as the result of the meeting, I handed to the Principal six questions, the replies to which would need to be my guide in laying the subject before Government for orders. I may, therefore, briefly mention that, with the present teaching staff of the College, the Principal reports—

(*a*) that he can take the ten hospital apprentices, but only twenty-six of the fifty-eight native medical pupils;

(*b*) that, with the addition of an hospital assistant, he can take into the College an additional number of thirty medical pupils, but that he cannot undertake to teach them clinically in the General Hospital, with its existing staff, and he thinks the required clinical instruction might be given at the Native Infirmary; and

(*c*) he shows that, during the past five years, from Rupees 7,500 to Rupees 10,000 have been saved from the expenditure in the Educational Department, from which money might be made available to pay the Medical officer of the Native Infirmary for the additional duty that would be thrown upon him of imparting clinical instruction to the batch of extra students placed under his care.

6. I have already submitted to Government that I do not concur in the views of the Principal of the Medical College as to the inelastic character of the teaching agency under his orders in the Madras Medical College, and in the Madras General Hospital, and I have mentioned that, in the past Session in the Calcutta College, the number of students was 1,394, and in the Grant Medical College, Bombay, it was 303, while in the Madras institution last year, in the beginning of the Session, it was only ninety-four. But at the present moment, the need for additional Medical officers is so very urgent, and, compared with the importance

of having them, the additional expense that will be necessitated by acceding to the Principal's suggestions is so small that I hope sanction will be given to the Principal's suggestions. I, therefore, recommend that the entire number of pre-collegiate Medical students, viz., ten hospital apprentices and fifty-eight native medical pupils, be permitted to be drafted into the College on the 1st October next; that the extra numbers whom the Principal cannot take for teaching in the General Hospital be posted for that purpose to the Native Infirmary, and that the Medical officer of that institution be allowed Rupees 200 per mensem for the nine months of each of the Sessions 1874-75 and 1875-76, during which they will be under his care, this amount being debited to Medical College savings.

7. I recommend the above arrangements for the favorable consideration of Government, but if not acceded to, the only alternative, so far as I see, is to allow the extra number to remain as pre-collegiate students for another year. But, as mentioned above, when in 1871 Government authorized the entertainment of this batch, though my intention was that they should qualify from the College in June 1875, owing to the discussions * this time last year, they cannot now leave College earlier than June 1876, and unless entered next October, they cannot come out of College until June 1877.

* G.O. No. 288 of 18th September 1873.

8. I do not know that any further reference is needed to the Principal of the Medical College, or to the Director of Public Instruction, in anything connected with my present reference. Already a month as passed in obtaining from the Principal of the Medical College the information on which this letter is based, and if the pupils are to come into College, there is only to the end of September to make all subsidiary arrangements. I, therefore, attach the letters which I have received from the Principal of the Medicial College, in order that Government may have before them all available information, and I solicit the early orders of Government on this subject.

9. I have mentioned above in paragraph 6 my belief as to the elastic character of the teaching agency, and in support have referred to the larger numbers under training at Calcutta and Bombay, from which it would seem possible to readjust the working of the College and General Hospital officers, so as to receive a larger number of students. Indeed the numbers admitted in bye-gone years have been greater than in more recent times. I am somewhat doubtful of the correctness of the data in my possession as to the entrants into the Medicial College during the past years, because, besides the Military students who are passed in through this office, there have also been private, remanded, and foreign admissions, but if not absolutely so, the figures on the margin give almost a correct statement of the entrants and of the numbers under instruction during the fifteen years 1859-60 to 1873-74 inclusive, and it will be observed that the admissions into College in that period have ranged from thirty to sixty-five, and the numbers under instruction from ninety-four to 156. These totals refer to entrants in the three Departments of the College, senior, second, and junior, for whose education the arrangements are modified but in the period under notice the annual entrants in the Senior Department ranged from one to six, those of the Second Department from nine to thirty, those of the Junior Department from sixteen to forty-two. During the same period the numbers under instruction in the Senior Department ranged from seven to sixteen; in the Second Department, from nineteen to eighty-seven; and in the Junior Department, from thirty-eight to 101; and in the bye-gone Session of the College, both the entrants and the numbers under instruction were greatly below the average.

Years.	Entrants.	Under instruction.
1859-60	53	156
1860-61	42	140
1861-62	30	115
1862-63	63	129
1863-64	47	141
1864-65	60	140
1865-66	54	103
1866-67	65	121
1867-68	52	120
1868-69	55	126
1869-70	62	132
1870-71	43	107
1871-72	41	111
1872-73	44	113
1873-74	43	94
Average ...	50·2	117·1

43

Enclosures.

(i)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department, Fort St. George.
Dated—Madras, the 5th June 1874.
No.—71.

I have the honor to request that you will be good enough to favor me with the numbers of hospital apprentices and native medical pupils who will join College on the 1st of October next.

(ii)

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—Surgeon-Major G. Smith, M.D., Principal of the Medical College.
Dated—Fort St. George, the 6th June 1874.
No.—3464.

		No.
Apprentices entertained on 1st November 1872	...	10
Pupils entertained ... { 1st June 1872	...	22
{ 1st November 1872	...	36
Total ...		68

I have the honor to place on the margin the numbers which I propose to send into College on the 1st of October next.

2. The allotment sanctioned in 1872 will, it is presumed, be available.

(iii)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department, Fort St. George.
Dated—Madras, the 11th June 1874.
No.—84.

With reference to your letter No. 3464, dated 6th June 1874, I have the honor to represent that the number of pupils which you propose to send to College, when added to the probable contribution of pupils (eight) from Mysore,* will make an aggregate of sixty-six pupils, i.e., of two whole classes of thirty-three pupils each.

* G.O. No. 144, dated 27th April 1874.

2. Clinical instruction can be provided only for one of these batches at the Medical College; for the other batch arrangements for clinical instruction will have to be made, either by securing two additional clinical teachers at the General Hospital, or by making arrangements for the requisite training at one or other of the Hospitals at the Presidency.

Vide Proceedings of Government, dated 18th September 1873, No. 288.

3. If these arrangements be made an additional Assistant, as you suggest, will be required at the College.

(iv)

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—E. B. Powell, Esq., M.A., C.S.I., Director of Public Instruction.
Dated—Fort St. George, the 12th June 1874.
No.—3673.

The Principal of the Medical College asked the number of students to be sent into College in October, and sixty-six were named.

2. The Principal now states he needs two Medical officers and one Assistant for that number.

3. I beg an interview of yourself and the Principal at your convenience.

(v)

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—Surgeon-Major G. Smith, M.D., Principal of the Medical College.
Dated—Fort St. George, the 18th June 1874.
No.—3739.

Subject.—In addition to the several points of information, notes of which were yesterday evening furnished, favor is requested of the following.

Numbers of Medical Students in 1873-74 Session.

	At the commencement of the Session.			At the close of the Session.		
	Department.			Department.		
	Senior.	Second.	Junior.	Senior	Second	Junior.
Private Students	* 1 L. S.	...	...	1	...	...
Madras Government Students ...	4	27	52	3	27	52
Other Government Students in detail ...	...	† 1	‡ 9	...	1	9
Total ...	5	28	61	3	28	61

* Lone scholar.
† One Singapore Government student.
‡ Eight Mysore students and one Pondicherry student.

(vi)

Memorandum No. 100.

Returned with the numbers required duly filled in.

Medical College,
19th June 1874.

G. Smith, M.D.,
Principal.

To the Surgeon-General, Indian Medical Department.

(vii)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department, Fort St. George.
Dated—Madras, the 25rd June 1874.
No.—103.

I have the honor to reply, seriatim, to the several questions which you handed to me on the 17th instant :—

Questions.	Replies.
1. What number can the College take with its present staff, of (*a*) Native Medical Pupils ? (*b*) Hospital Apprentices ?	1. The maximum number of students of all departments which the Medical College can educate efficiently under existing rules is 115. Distributed in departments this aggregate would represent ten students under training for the University; forty-five European and East Indian apprentices under training for the Apothecary grade; and sixty Native pupils under training for the grade of Hospital Assistant.
2. What number can the College take with the addition of the Hospital (*College* ?) Assistant, sanctioned in G.O. No. 372, of the 6th December 1871, of (*a*) Native Medical Pupils ? (*b*) Hospital Apprentices ?	2. An additional number of thirty Native Medical pupils; but it cannot undertake to train them clinically in the General Hospital with the existing staff.
3. What arrangements can be proposed that will enable *any number* of the sixty-six to be educated by means of the already existing strength and of the sanctioned Hospital (College ?) Assistant ?	3. Any arrangement by which clinical teaching external to the General Hospital can be secured.
4. What will be the duties of the two clinical teachers and the pay ?	4. Clinical teaching will form part of their duties; their remaining duties and pay must be determined by Government.

Questions.	Replies.
5. At what Hospital do you propose that they be taught clinically ?	5. Acting Surgeon-General Ranking proposed that the required clinical instruction might be given at the Native Infirmary (*vide* Proceedings of Government, 18th September 1873, paragraph 5 of Dr. Ranking's letter). I think the suggestion a good one.
6. Sums available as savings in the Educational Budget ?	6. The subjoined table shows the Budget Estimates for five years of the minor professor-ships of the College, and the actual expenditure; whether the balance is available or not I cannot say, but the Accountant-General would doubtless furnish the information.

(viii)

Table showing the Budget Estimate for five years of the Minor Professorships of the College, the actual Expenditure, and the presumed Savings.

Years.	Estimated Expenditure.	Actual Expenditure.	Presumed Savings.
	rs.	rs.	rs.
1869-70	12,000	3,100	8,500
1870-71	12,000	4,500	7,500
1871-72	12,000	3,800	8,200
1872-73	12,000	2,000	10,000
1873-74	12,000	2,800	9,200

(ix)

Letter—from Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
To—Surgeon-Major G Smith, M.D., Principal of the Medical College.
Dated—Fort St. George, the 25th June 1874.
No.—3962.

I regret to mention that the reply, No. 1, with which you have obliged me in your letter, No. 103, of the 23rd of June 1874, does not contain the information needed by me.

2. There are, at present, the marginally-indicated numbers of pre-collegiate students awaiting orders to be summoned into the Madras Medical College, and the question as per margin asked relates solely to the numbers that can, on the 1st of October next, be taken into College of these two classes of attested pre-collegiate Military pupils. If unable to take all the sixty-eight Government students, I beg you will favor me with explanation as to why these sixty-eight Government students cannot be taken. I beg this information at your very earliest convenience.

Pre-collegiate.	No.
Hospital Apprentices	10
Native Medical Pupils	58
Total ...	68

1. What number can the College take with its present staff ?
(*a*) Native Medical Pupils.
(*b*) Hospital Apprentices.

(x)

Letter—from Surgeon-Major G. Smith, M.D., Principal of the Medical College.
To—Surgeon-General E. G. Balfour, Surgeon-General, Indian Medical Department.
Dated—Madras, the 1st July 1874.
No.—116.

No. 3962, dated 25th June 1874.

With advertence to your letter, number and date as per margin, I have the honor to reply to the questions proposed to me.

1st. What number can the College take with its present staff ?

Pre-collegiate.	No.
Hospital Apprentices	10
Native Medical Pupils	58
Total ...	68

2. On the 1st of October next the College will be prepared to admit to its Second Department the ten hospital apprentices indicated, and to its Junior Department a batch of twenty-six native medical pupils, which batch will be raised to thirty by the addition of four Mysore students, whose admission has been directed by Government.*

* *Vide* Order No. 358, dated 7th November 1870.

3. The reason why the remaining extra class of thirty-two native medical pupils cannot be taken under instruction arises from a deficiency of teaching power in connexion with the Junior Department, and from the *impossibility* of providing, at the General Hospital, efficient clinical instruction for numbers so much in excess of its capabilities.

XIII

Letter—from Surgeon-Major W. R. Cornish, F.R.C.S., Sanitary Commissioner for Madras.
To—the Hon. D. F. Carmichael, Acting Chief Secretary to Government, Fort St. George.
Dated—Coonoor, the 7th July 1874.
No.—118.

The present condition of medical education, in connexion with the acknowledged want of qualified agents for the medical and sanitary administration of the country, is a subject that I have had for a long time past under consideration, and now that the Census work and the Annual Report for the past year are completed, I have the honor to crave the attention of Government to the following remarks.

2. In the Report of the Census, Vol. I, page 181, I noted that upwards of 9,000 persons were returned as engaged in the practice of medicine in this Presidency, and I called attention to the fact that of these persons only a few hundreds connected with Government service had given any evidence of their qualifications to engage in a profession that deals directly with human life and human suffering, and that, as regards the law of the land, the qualified practitioner, and the "devil-driver" or exorcist, stood on precisely the same level.

3. The indigenous medical profession in this part of India remains very much as it was, before the English exercised any authority in the country. The ancient systems of medicine of the Greeks and Arabians are to some extent practised, and in Northern India, the profession, as regards the Hindus, is to a certain extent in the hands of one of the mixed castes of fair social standing, but amongst the aboriginal races of the south it does not stand in high esteem, and here the herbalist, the potter, and the barber, to a great extent, provide the people with physicians, surgeons, and midwives.

4. This was the condition of affairs on our assuming the Government of the country, and, so far as the rural populations are concerned, there has been no improvement up to the present time. It is true that, for the last forty years, the subject of medical education has been before the Government, and that a large number of young men have been trained to the medical profession in the Madras Medical School and College, but the ostensible object in founding this school was to provide a Subordinate Medical Service for the Military and Civil Departments of the Government, and it was no part of the original scheme to undertake the education and training of the indigenous practitioners of the country. When the Medical School (now College) of the Presidency was established in 1835, its primary object was to supply a professional training for the Apothecaries and Dressers required for Army Service. At this time there were no civil hospitals or dispensaries in the Mofussil, nor had Government recognised in any way the duty of providing for the sick poor of the land; but, as the training of Eurasians and Natives of the country in medicine and surgery progressed, it was found that the people flocked around those who had acquired a reputation for skill, and in course of time dispensaries for the benefit of the civil population sprung up in every district, and a medical staff, selected from the Military subordinate medical service, was authorized for each hospital and dispensary, as founded.

5. So long ago as 1848 the late Court of Directors began to urge upon Government the necessity of educating a superior class of native practitioners or practice among their countrymen, and authorized the Madras Government to afford employment to eighteen "Native Surgeons," one in each Revenue District, but from circumstances with which I am unacquainted, the whole number of vacancies of this grade have never been filled up, so that the very necessary encouragement of Government employment has been wanting, in this part of India, to the establishment of a body of educated and intelligent medical men. In Bengal and Bombay, however, a different policy has prevailed, and the "Sub-Assistant

Surgeons," as they are termed, are numerous in Government employ, while many have commenced private practice independently of Government aid. In those Presidencies, in fact, the medical profession, independently of the State's necessities, has been encouraged, while in Madras the claims of the State have been alone considered, and the advancement of the profession for the benefit of the civil population has been strangely lost sight of.

6. Of recent years there has been a great development in public feeling as to the duties of a Government towards its people. The interference of a State for the protection of its subjects from avoidable sources of disease, is for the most part a practice of modern times, and in India the duty has been officially recognised only since the year 1864, when departments for the supervision of public health were instituted. For a period of ten years these Public Health departments have had their functions confined to inspecting, and reporting, and registering the causes of mortality in their several groups of population, and their labours would have been of much more value to the public if, in each subdivision of the territory under supervision, they could have had the aid and co-operation of intelligent and educated officers minutely acquainted with the peculiarities of the localities and populations.

7. Following upon the introduction of Public Health departments in the various Governments and Administrations of India, we have subsequently experienced the working of the great scheme of local taxation for local purposes, and amongst other things to which the Government have most wisely decided to apply the proceeds of local cesses, are (first) a comprehensive system of medical relief to the poor, and (second) the sanitary improvement of towns and villages, and (third) the extension of vaccination amongst the people. All these objects are distinctly recognised in the Local Funds Act of 1870, and there can be no two opinions in regard to the wise and humane policy of the Government in thus making provision for the welfare of the mass of the people, who are too poor, and too ignorant, to exercise care and forethought for themselves in the prolonged strife against misery and disease.

8. But while the State provision for public health is in itself admirable, and in advance even of that of many so-called "civilized" nations, we have now to deal with the practical fact that the executive machinery at our disposal is wholly inadequate to the gigantic task which is comprehended in the scheme of the Local Funds Act. The training of youths for the Medical profession has hitherto been regulated in accordance with the authorized establishment of the Civil and Military Departments of the State, and the demands for officials of this class to occupy places under the several Local Funds Boards are more than can be complied with. In many of the Districts the Local Funds Board would gladly employ on a moderate salary one or more medical practitioners in each taluq, to superintend vaccination, and afford medical aid to the poor, but there are no men of the class required available in the public service, and, in consequence of the past policy in regard to the medical profession, the local authorities are unable to seek for qualified candidates in civil life. As a matter of fact, the military subordinate medical service of the country, which in its organization was intended only for Imperial Service, is now unable to provide for the new and extensive requirements of the Local Boards (medical and sanitary) in addition to its own special functions, and as a consequence the intention of the Legislature in framing measures for the sanitary welfare of the people are, for the time being, either nugatory, or scarcely at all fulfilled.

9. The altered condition of affairs seems to point to the need of revising the existing regulations of the Subordinate Medical Service. As Government are aware the whole of the existing establishment of Apothecaries and Hospital Assistants of various grades is enlisted, or attested, for Military Service; and, although nearly the whole of their time may be engaged in purely civil functions, the members are paid, promoted, and ultimately pensioned, just as if they had done no other than military duties.

10. When I served in Calcutta in 1866, as a member of a Commission for the reorganization of the Subordinate Medical Service we recommended, and the Supreme Government approved of the recommendation, that admission to all

grades of the Subordinate Medical Service should be open to persons of any caste or creed. In consequence of this recommendation several natives in Madras subsequently obtained admission into the Apothecary grade, but a few years ago an order from the Supreme Government appeared cancelling the admission of natives to the Apothecary grade, on the ground that the latter was intended solely for service in connexion with European troops. But more recently, the Madras Government has seen fit to declare that no one who has not been educated according to the curriculum laid down for the education of Apothecaries shall be deemed qualified to hold an independent civil medical charge, such as that of a Dispensary, etc., and as a consequence of this order the European and East Indian classes of the Subordinate Medical Service are at present, or are soon to be, the sole holders of independent civil charges, where the duties are almost entirely connected with the native civil population.

11. The Order of the Government of India prohibits the admission of natives to the Apothecary grades, and, under the ruling of the Madras Government, no native practitioners (except the few who have already entered the Apothecary grade), can be employed in independent charges under the Local Fund authorities.

12. I have been informed that the Madras Government was led to take this most serious step, as regards the prospects of native members of the Subordinate Medical Service, by representations to the effect that the style of education afforded to the classes of the "junior" department of the Medical College was inadequate to fit them for independent practice, and that there was no option left to the Government but to direct that no one under the grade of "passed Hospital Apprentice" (the lowest of the Apothecary grade) should in future be appointed to an independent charge.

13. Whatever were the reasons leading to the decision, I hope I may be pardoned if I venture to question the expediency of a policy which in its action bears especially hard upon the natives of this Presidency who have chosen the medical profession as the field of their life's labour, and if I point out in what way a great injustice has been done to a humble, though most deserving, class of public servants.

14. I am quite prepared to admit that the range of subjects taught in the "junior" classes of the Medical College is not wide enough to turn out Physicians and Surgeons accomplished in every nicety of diagnosis and operative skill. It was never the intention to train the men otherwise than as useful assistants to superiors, nor was it ever supposed that the education of such men ended when they left the College portals, armed with certificates of competency in their grade. The regulations of the Department provide for their practical knowledge being tested from year to year, by public examinations, independently of special examinations for promotion from third to second class, and from second to first class, and besides these official incentives to practical work, the greater part of the younger men had all served for lengthened periods under Commissioned Medical Officers in hospitals and dispensaries before they were advanced to positions of independence, so that, however defective their College training might have been, it happened in practice that a fair number of men, of good practical skill, were always available for these semi-independent charges. And I think I can safely appeal to the records of the Medical Department, to the Officers of the Revenue, Police, and to the Native public generally, in testimony of the fact that the services of such men have been appreciated, and that in a large number of instances they have endeared themselves to their official superiors, and the native public, by the exercise of their professional skill, tact, and practical knowledge of their work. In these days I am afraid there is too great a tendency to exalt a knowledge of the abstract sciences in medical education, in forgetfulness of the fact that medicine never can be an exact science, and that its practice must always be founded on experience and observation. In this way it seems to me that too much importance has been attached to the acquirement of a meagre smattering of a few scientific subjects, such as are taught in the Second Department of the Medical College. I say "smattering" advisedly and without in any way questioning the quality of the education imparted, for it is utterly impossible that a medical student in

the course of collegiate career can derive anything beyond the most elementary knowledge of branches of science, which to know in their entirety, is beyond the work of a lifetime.*

15. Owing to the fact that natives are now denied admission to the Hospital Apprentice and Apothecary grades, it follows that the practical, experienced natives of the Hospital Assistant grades are, under the recent order, being gradually displaced from Civil Dispensaries by youths (mostly of the Eurasian class) fresh from College; inexperienced in practice; it may be full of crude theories, and but imperfectly acquainted with the languages and modes of thought of the people, and alien to them in social life. From my knowledge and experience of the working of Civil Hospitals in this country, and of the influence which a native subordinate can bring to bear on an institution of this kind, and of the respect and esteem which fall to his lot when his fellow-countrymen get to appreciate him, I am forced to the conclusion that the recent change has been not only a grave political error, but that the intentions of the Government, as regards the extension of medical aid to the people, will be frustrated by the employment of an executive staff, between whom and the people to be benefited, there is a great social gulf fixed.

16. I would wish here to guard myself against being misunderstood in regard to the Apothecary grades of the Subordinate Medical Department. The training of the members of this grade is an excellent one, and as a class of public servants they are worthy of the highest respect. It has been my good fortune in times past, as Secretary to the Commission for the Reorganization of the Department in 1866, to advocate successfully the claims of this highly-important body of officials to the consideration which they now enjoy, in regard to pay, prospects, promotion, and pension, and if I now record my conviction that the employment of Europeans and Eurasians as the sole professional advisers of the native community is a grave mistake, I trust that it will be understood that my objection is one founded on public policy only, and that nothing derogatory to the professional repute of the warrant grade is in question. The state of public feeling on the question might be ascertained if necessary, by confidential reference to native gentlemen of eminence, but so far as my knowledge goes, the supplanting of natives of experience (though of inferior educational acquirements) by young men of the Eurasian class, is everywhere looked upon with disfavor. European Medical Officers have always had many difficulties to contend against in regard to the professional charge of native patients, and in the case of Eurasians the difficulties are, in very many cases, aggravated by the caste prejudices of the people. I do not say that the difficulties are of such a nature that they might not be overcome by a person of tact and ability, but that their existence should be recognised in any scheme of intended application to the native population of the country.

17. If the present regulations regarding the exclusion of natives from the Warrant grades of the Subordinate Medical Service are to continue, then I would suggest that, as the warrant grades are an exclusively military establishment, no more admissions into them should be permitted than will suffice for the wants of purely military establishments, and that a new order of Civil Apothecaries, Sub-Assistant Surgeons, or (now that the rank of Assistant-Surgeon is abolished in the commissioned ranks) "Assistant-Surgeons" be established, to which natives, as well as other classes, might find admission, and that the duties of this class should be purely of a civil nature.

18. By a series of miscalculations in past years as to the future strength of the warrant grades of subordinates, it happens at the present time in Madras that there is a superfluity of young men of the "Hospital Apprentice" grade, who, although primarily enlisted for military service, are now being employed in Civil Medical charges. While Madras has more of this expensive class of subordinates than it has military occupation for, there is, if I am correctly informed, a great deficiency of this class for military duty in Bengal.

* In the science of Chemistry, for instance, the range of subjects is so wide that no man can hope to attain excellence in it, unless he devotes his whole time and study to one of its two great branches, organic, or inorganic.

19. One great consideration in regard to the separation of the Medical Subordinate Establishment into district Civil and Military branches would be a saving of expense.

The whole of the accepted recommendations of the late Commission for the reorganization of the Subordinate Medical Service, were based on the supposition that the establishment was a purely military one, and the rates of pay, pensions, &c. were framed as applicable to a class of persons liable to military risks. Now as in future about four-fifths of the duty of the Subordinate Medical Service will be purely civil in its nature, there would seem to be solid reasons for suggesting that a civil establishment, with civil rates of pay, pension, &c., would be much more economical to the State than the present mixed service, which is paid and pensioned entirely on military rates.

20. A somewhat lower scale of pay and pension than that of the Military warrant grades would suffice to attract educated and respectable natives to enter as Civil "Apothecaries" or "Assistant Surgeons" or whatever designation may be given to them, and such men would find fitting employment under the various Local Boards, or directly under the Government, in civil medical duties. Their education should be of the same character as that afforded to the corresponding military class of Apothecaries.

21. Owing to the exclusion of natives from the Apothecary class, there are, I believe, no candidates of the description now under tuition in the College, and if Government decide upon separating the service into Civil and Military branches and opening the former to natives, no time should be lost in making known the conditions of the Civil Subordinate Service, and in forming classes to fill it, in the Medical College, as the period of training (collegiate and extra collegiate) extends over four years.

22. I might extend these observations more in detail, but the subject falls naturally within the province of the Head of the Medical Department, and I have only to place before Government what seems to me both politic and expedient in dealing with the general question of the education and organization of the future executive establishments, that must constitute the working machinery for the prevention and cure of disease in Government and Municipal Institutions.

23. And I now have to lay before Government my opinion that the time has come when this subject, of medical education and training, should be dealt with on broader grounds than those of mere expediency and policy in regard to the necessities of State institutions, and that the assistance of Government is essential to foster and encourage the medical training and education of the indigenous practitioners of the country, who notwithstanding the multiplication of hospitals and educated practitioners in Government or Municipal employ, must, from the very nature of things, be still the doctors of nine-tenths of the rural population.

24. Ever since the year 1863, when as Secretary to the head of the Medical Department I first drew attention to the needs of the country in regard to the education of its native practitioners and midwives, the matter has been before Government and a great deal has been said and written in regard to the establishment of Provincial Medical Schools. I do not propose to traverse any of this ground again, or to refer to the mass of official papers in which the subject lies entombed, but I will offer one or two suggestions that seem to me within the power and ability of the Government to entertain, in the disposal of the great question of what can be done by a Government to aid its people in providing themselves with medical men in some degree fitted for the responsibilities they undertake.

25. If we consider for a moment what has already been accomplished by Government in regard to the efficiency of its own servants in the several branches of administration, in requiring all classes to show special knowledge before they can advance to situations in which such special knowledge is required, it does not seem to be wholly impracticable to apply a similar procedure to a class of men, whose duties call them to deal with the health and lives of the people at large.

26. It is very properly required of the vakeel or pleader that he shall show some aquaintance with legal procedure, and the laws of evidence, before he is

permitted to receive money from the public for his services in a Judicial Court. The schoolmaster is required to pass certain standards of examination before he is eligible to receive a Government grant-in-aid. The Revenue and Judicial subordinates of the State are, in like manner, required to know something of the duties of their appointments, and the general public in their dealings with all these classes have the satisfaction of knowing that the Government have been at some pains to ascertain the fitness of the individuals for the special work devolving upon them.

27. But when we come to examine the actual condition of the medical profession in India, we find that the public, whose health and wordly prospects may be absolutely dependent on the skill and knowledge of their medical advisers, are wholly unprotected by the State, and that any ignorant charlatan may practise upon them with impunity. He may ruin their health by the misuse of poisonous drugs, or bind up fractured limbs in such a manner that they rot away and perish, or cause the death of mother and child in labor, from sheer ignorance of the methods of saving life. Whatever may be the amount of human suffering incurred through the ignorance of pretenders to medical skill, a Government, which makes no attempts to regulate and improve the conditions of medical practice, is in some degree responsible for. If it be incumbent upon a State to pass ordnances for the regulation of candidates for the legal profession, it is surely no less a public duty to ensure that all those who exercise the calling of a medical practitioner shall afford some evidence of their fitness to be entrusted with the lives of the people.

28. The condition of the medical profession in India, at the present time, is somewhat similar to what it was in England and Wales before the passing of the Apothecaries Act in 1815, with this difference, that the unfitness of the Indian practitioner is more universal than that of the bygone English Apothecary. The European officials of the Medical Service and the limited number of men trained in the Indian Colleges, represent the Physicians and Surgeons of those times, who had chartered privileges, while the indigenous practitioners represent the old race of Apothecaries, who were the general practitioners of the country, and who prior to the year 1815 got no other professional training than was to be obtained by servitude, or apprenticeship, with persons of the same calling.

29. To attempt the enlightenment of the existing race of medical practitioners of India would be a task beyond the powers of any Government. A similar difficulty was encountered and acknowledged by the British Government in its efforts to introduce a uniformity of qualification amongst the general practitioners of Great Britain. Legislation in the latter case had to be directed to the future, rather than to the present, as must be the case in India whenever the subject of medical qualification is to be brought within the cognizance of the law. The Apothecaries Act distinctly exempted all those who were in practice before the year 1815 from its operations, and the mere fact of a person being engaged in practice before the date defined in the Act, was subsequently held to be a qualification for that person to practise and recover fees, or charges, for medical attendance and drugs, and was held by the Poor Law Board as a qualification for the medical charge of a union district.

30. And with regard to the existing race of medical practitioners in India, a similar practice will be absolutely necessary, whenever the Government deem it advisable to legislate on the subject of the future status of the medical profession.

My earnest advice to the Government is, that, as the subject of the medical education of the natives of India has been under discussion in this Presidency for upwards of eleven years, no more time should be lost in bringing before the Legislative Council a Bill to regulate the qualifications of medical practitioners. As regards the means of medical training, Madras is behind the other Presidencies; Provincial schools are being established at Patna and Dacca, in Bengal, while the Native State of Hyderabad has for years past had its medical school, and the comparatively junior Government of the Central Provinces has instituted a school in Nagpore. The means of medical education should be provided at some four or five selected stations in the Provinces, in addition to the existing college.

31. I believe legislation to be necessary, because until Government is pleased to define the privileges of the profession in the future, we cannot reasonably expect young men of education and intelligence to seek a livelihood in a profession that has no existing status, or dignity in native esteem; and further, because in all civilized countries it is the concern of the State to see that those engaged in occupations involving the responsible charge of the health and lives of the people, are fitted for their duties, and protected by the law from the competition of mere pretenders to knowledge, who have shown no qualifications for their calling.

32. Legislation, in my opinion, should precede, or at any rate should not be deferred beyond, the establishment of Provincial Schools of Medicine for the training of young men for the profession. It is necessary that the native public should become familiarized with the idea that the future race of medical men are to undergo a training and examination as to their fitness to practice, and nothing will bring the fact home to them in such a practical form as an enactment intended to take effect from a prospective date. If an act, such as is here contemplated, could be passed during the next Legislative session, its practical operation might be deferred until the 1st January 1880, and meanwhile all candidates for admission to the qualified ranks of the profession would have ample time to shape their education in accordance with the requirements of the law. I have entered in an appendix the principal heads for a draft Act, suitable to the circumstances.

33. While nothing short of legislative interference will, in my view of the case, raise the social and professional status of the medical profession in India, I must not omit to point out that simultaneously with legislation there must be means and opportunities provided for the natives of complying with the requirements of the law in regard to their training and education. Medical Schools will have to be established in the provinces, so as to meet the convenience of candidates, and for some years to come it will be necessary for Government to take an active part in their maintenance. In Europe medical schools are, for the most part, self-supporting, but I apprehend that many years must elapse before they will become so in India. The people will require to see clearly before them the advantages of the medical profession before they will seek admission to it, and pay for their education, and the Government cannot afford to wait for an indefinite period for this amount of enlightenment, as its own material interests are immediately involved in augmenting the number of agents required for the sanitary and medical administration of the country. In process of time, when the medical profession is actually established and protected by the law, it is quite possible that medical schools for the benefit of the general population will become independent of Government aid.*

34. One of the most difficult questions connected with the subject is the standard of qualification to be expected of future practitioners of medicine. Theoretically, I suppose we could all desire to see the Indian practitioner a man imbued with the scientific spirit of the age, and acquainted, not only with the literature of modern medicine, but practically skilled in modern methods of diagnosis and treatment. But we have to consider what is practicable with the material available to our hands, and to remember above all that, while we are striving after perfection, thousands of our fellow-creatures are daily cut off in their youth and prime, for want of a very moderate amount of skill on the part of their medical attendants, such as it is quite competent for the Government to demand of those who are to be the practitioners of the future.

35. My own impression is that the standard of qualification, in the first instance, should be a very moderate one, such as might be obtained by any youth of ordinary intelligence after a period of three years' study, and that the education instead of being diffused over a great variety of subjects, should be thorough and complete in regard to a few points of every day practical importance. I should expect the candidates, for instance, to be able to recognise and treat, according to

* The progress of the Calcutta Medical College in this respect is most gratifying. Out of a total 1,441 students in the past year, 1,076 were paying fees, and Rupees 35,736 were realised from the payments of private students.—W.R.C

our present knowledge, the most common diseases of the country, such as fevers, dysentery, cholera, small-pox, syphills, common diseases of the skin, &c., but I should not expect them to have a minute acquaintance with diseases that are not seen by the average practitioner more than half-a-dozen times in a long career of practice, and in surgery, I should expect to find them acquainted with ordinary and every day simple operations, such as bandaging, setting of fractures, reducing dislocations, using the catheter, opening abscesses, and minor surgery generally; but I should not except them to be experts in tying the subclavian artery, removal of the lower jaw, cutting for the stone, or any of the greater operations in surgery. The same observation would apply to the subjects of midwifery and materia medica. In the latter department I should expect to find a fair knowledge of the uses and preparations of indigenous drugs, and of perhaps a dozen other important remedies which are not indigenous to the country, but whatever the subjects of examination for a qualification to practice, I regard it as of the very greatest importance that there should be a definition beforehand of the subjects to be taught, and a limitation of the examinations to the actual teaching.

36. A caution in regard to this matter is every necessary in the present day, when the tendency of every author, and more or less of every teacher, is to magnify the importance of his own particular subject, and to go on adding to the burden of the students, tasks far beyond his limited powers of mental assimilation. The modest "handbooks" of my own student days have, in subsequent editions, developed into ponderous tomes, which might more fitly be moved in wheel-barrows than lifted by the "hand," and there seems to be no limit to the accumulation of verbose stumbling-blocks in the paths of students. The evils of the present system of medical education have already attracted the attention of some of the wisest of living physicians, who deplore the mistake of expecting too much from a limited course of training, and it seems not at all improbable that the future reform in medical education at home will lie, not in the direction of extending the present range of subjects, but in curtailing them, and enforcing thoroughness within a narrower range.

37. In dealing with the subject of the standard of qualification for practice I think the Government would do well to adopt the views of men practically acquainted with the needs of the country, and the means of the people, and that it should not be settled entirely on the authority of those who have acquired experience as professors and teachers. There is a wide gap between the possible and the practicable in this matter, and it would be a ruinous mistake to pitch the standard so high that men of the class wanted by the people should be unable to reach it. In my opinion every subject, and branch of a subject, not bearing directly on the prevention and cure of the more ordinary diseases of the human frame, should be rigorously excluded from the list of subjects in which examinations for qualifications to practice are held. The aim of the Government should be to increase the number of persons able to prevent or relieve human suffering, and not to make of them bad chemists, indifferent botanists, &c., and unpractical medical men. In course of time it might be advisable to raise the standard of requirements, and in the scheme I have outlined power would be reserved to the controlling authorities to make changes from time to time

38. The Madras University, which should properly have been the *alma mater* of the medical profession in Southern India, has cut itself adrift from the profession, by fixing too long a period of probation, and too high a literary and professional standard for its degrees in medicine. The University has done but little to foster and encourage medical education in the seventeen years of its existence, and chiefly for the reason that it has laid too much stress upon mere literary acquirements, forgetful of the fact that young men who have to earn their living cannot afford to wait five years for a medical degree, after passing the F. A. Examination. The University of London (the degrees of which take the first rank in medical examinations) requires only four years of special study, after matriculation, for the M.B. degree, while the Madras University, which has to deal with poor students, and a population unable to remunerate medical men at a high rate, holds out for the F.A. Examination as a preliminary to a

five years' course of scientific study for the M.B. degree. Under these circumstances it is no cause for surprise that the few graduates who have complied with the requirements of the University should be chiefly young men of European extraction, whose friends have availed themselves of the opportunity of getting their sons gratuitously educated at the Medical College, with the view of ultimately competing for admission into the commissioned ranks of the Indian Medical Service. Of the thirty-one millions of native inhabitants in this Presidency only one,* I believe, has taken a medical degree.

39. The Surgeon-General of the Indian Medical Department recently proposed to the Senate of the University that a lower degree or license should be established, accepting the Matriculation Examination as the literary standard, with four years of subsequent professional study. The proposition was lost, but I believe the Surgeon-General will bring it forward again in a modified shape. But whatever decision the University may come to regarding the question, it will still be necessary for Government to take under its own charge the regulation of the qualifications of the native practitioners of the country, for it will be hopeless to expect, any time within the present century, that the bulk of these practitioners will be able to attain to the standard of a University degree.

40. While the improvement of the lower ranks of the medical profession seems to me the most important question in the interests of the Government and the people, I should at the same time be glad to see a more liberal encouragement given to the higher medical education, so that educated natives might have something to look forward to beyond the precarious resources of private practice. I think it would be to the interests of Government that a certain number of the Civil Surgeoncies of the country should be reserved for selected candidates possessing the University degree, and I think there is ample employment for at least one person of this class in every district of the country.

41. It has always seemed to me a great defect in the sanitary and medical administration of the country that the knowledge and experience of our Civil Surgeons should be restricted to the headquarter stations of their districts. Most of these officers are also Superintendents of District Jails, which duties involve constant residence in the locality in which the jails are—a work which might be as well, or better, done by persons of no special professional training. It results from this disposal of the Civil Medical Staff, that the members have no opportunity of becoming acquainted with the medical and sanitary needs of the people away from the headquarter station of the district, and that they are unable, from practical knowledge, to advise the Local Fund Boards as to the most judicious expenditure of money for new hospitals and sanitary improvements. The Civil Surgeon, or Health Officer, of a district should know every taluq and every large village or town, by personal inspection, to be able to advise judiciously in Local Fund expenditure, and this he could, and ought to do, if he were provided with a qualified Assistant to whom he could entrust the executive medical duties of his charge, while he was absent in the inspection of his district.

I mention this circumstance, briefly, to show that there is ample room in the Government service for well-qualified native medical men, and I am quite sure that some respectable Government employment is essential to the establishment of such a class of practitioners.

Amongst the few native Surgeons who in this Presidency has found Government employ, I need only allude to Honorary-Surgeon Moodeen Sheriff, M. Iyasawmy, Civil Surgeon of Cuddapah, and M. Mootoosawmy of Mansargoody, to show that under due encouragement there is no difficulty in securing the services of men, who are as remarkable for their practical professional eminence, as they are for social tact and sound sense, whereby they have secured alike the respect and esteem of European officials, and of their own countrymen.

42. With regard to the class of native practitioners for whom I would propose a minimum qualification before entitling them to practice, there would be not only private employment in their own districts, and amongst their own people,

* There are three native graduates, but one is an inhabitant of Travancore, and the other from Ceylon.

but I would have all public vaccinators and hospital assistants, employed and paid out of Local or Municipal Funds, obtain this qualification. The required numbers of such persons will in a few years be considerable. As hospitals are established, and vaccination extended, we shall require, at the least, three such men in every taluq, besides one or more in each town of from 5,000 to 10,000 inhabitants.

43. Indeed, if the subject of the control of medical education and qualifications be dealt with by Government in its legislative capacity, all classes of the Subordinate Medical Service should be required to qualify in a standard according to the nature of the duties expected of them, and the present system of appointing annual Committees of Examination for the issue of certificates of qualification as Assistant Apothecaries and Hospital Assistants might then be discontinued.

44. The medical faculty of the University in rejecting Mr. Balfour's proposition for the establishment of Licentiates in Medicine, were of opinion that the power of granting licenses to practice should be conferred on the Medical College. But it seems to me that there are many, and grave, objections to entrusting such powers to a simple educational institution, and that the more dignified course would be for the Government to create an independent Board to which should be entrusted the duty of prescribing from time to time the course of study, and the nature of the several standards of qualification. Such a Board would also be empowered to appoint examiners, to keep a register of all qualified practitioners, showing the nature of their qualifications, to receive and account for all fees received from candidates on receiving licenses to practice, or on entering their names on the Medical register, and to inquire into, and adjudicate in all cases of professional misconduct on the part of registered practitioners. Duties of this nature could not with dignity or propriety be delegated to the officials of a single educational institution, like that of the Medical College.

45. There is, moreover, a further objection in appointing the teachers of one college or school the sole authorities for granting certificates of qualification to the pupils of other schools. It is generally recognised that the teachers or professors of a school should not be also the examiners. Such a practice obtains in the University of Edinburgh, but is well known that it leads to jealousy and heart burnings, on the part of rival schools, and in founding a new order of things here, we should do well to steer clear of all possible difficulties. It would never do for the students of Provincial Schools to get an impression that Medical College pupils in Madras had an advantage over themselves in the personal tuition of the examiners for a license to practice.

46. To sum up the main points of this communication I advocate—

1*st.*—The limitation of the warrant grades of the Subordinate Medical Department to the numbers required for Military duties.

2*nd.*—The separation of the Civil and Military Subordinate Medical Services, with distinct rates of pay, pension, etc., for the former.

3*rd.*—The admission of natives to the Civil Subordinate Medical Service and especially for the charge of Civil Hospitals, etc., in the provinces.

4*th.*—The provision, by legislation, for the proper qualification of all persons practising the medical profession either on behalf of, or independently of the Government.

5*th.*—The encouragement of the higher medical education of the natives of India, by providing a fair proportion of official appointments, for those who obtain University degrees, and are otherwise qualified for official positions.

6*th.*—The appointment of a Board of high officials and others to regulate all questions connected with Medical examinations, appointment of examiners, granting licenses to practice, the registration of medical practitioners, and the disqualification of those guilty of disgraceful conduct.

47. The present period seems to me to be most favorable for Government action in this important matter. The educational policy of the last eighteen years has tended to produce a vast number of young men who have satisfied the requirements of the State as to their educational fitness for official service, but for whom no appointments are ready. The candidates for the legal and educational professions are already over-stocked, and every branch of the Government service has

at the least a dozen hungry applicants for every vacant place that occurs. Under these circumstances all that is wanted to establish the medical profession on a sound basis is the opening out of official employment to properly-qualified persons, and the due protection of those who have to compete in private practice with unlicensed and ignorant pretenders to professional knowledge. I believe that the preliminary test of the Uncovenanted Civil Service in English might be now demanded of all young men entering the medical profession (excepting only those who comply with University regulations, and who would have to pass the highest standard of the Matriculation, or F.A.). The time has gone past when a vernacular training in this part of India was essential to the scheme as above proposed, and there are many weighty reasons why the medical practitioners of India should be able to drink at first hand, from the fountains of western medical literature. The number of young men who are able to read and understand English is increasing in a ratio much greater than the State can find employment for them, and, looking to the fact that the existence of a class of men educated beyond their position and prospects is a source of weakness rather than of strength to the State, the opening out of a new career (such as the medical profession would be under Government auspices) is a subject of no mean importance in a political point of view, and the Government would at the same time be strengthened in its action by the assurance that the measure was one of great public utility, and calculated to benefit many millions of subjects, who in their apathy and ignorance are unable to help themselves.

48. In the twenty years of my service in India, the unsatisfactory condition of the medical profession, and the evils arising from the want of recognition of the profession by the State, have been constantly before me, and as the official adviser of Government on sanitary matters, I am thankful to have this opportunity of pointing out what, in my judgment, may be done for the profession and the public by a broad and liberal recognition of the needs of both. I am satisfied that the question is one that should be settled on broad grounds, applicable to the profession as a whole, rather than on the narrow and restricted necessities of the public service, and that action is essential before the public health in India can be cared for in accordance with the progress of knowledge and experience in such matters. It is scarcely probable that any officials of the present generation will remain in India to see the effects of these legislative measures, but we may rest satisfied in the conviction that future generations of the people will live to bless the administration that has opened a new career to the educated, and that has fostered the art of preserving life, and helped to lessen the aggregate of pain and suffering of a considerable section of the human race.

Enclosure.

Heads for a draft Act to regulate the Medical Profession in Southern India.

Objects and Reasons.

The practice of medicine, surgery, midwifery, and pharmacy, being for the most part in the hands of ignorant and illiterate persons, amongst whom gross malpractice is common, whereby the health and lives of the people are endangered, and their being no law or regulation existing to define the qualifications of persons practising as physicians, surgeons, health officers, midwives and druggists, or to restrict incompetent persons from practising in these capacities, and the growing necessities of the country as regards the working of the Local Funds Act of 1870, requiring that provision should be made for the training, education, and employment by local authorities of duly qualified medical men and officers of health, and for the training and education of medical practitioners engaging in private practice, it is deemed expedient to include in one Act, to be called "The Medical Profession Act of ( )" the following regulations.

Title. Bill to be called "The Medical Profession Act of ( )."

Object of the Act. (*a*)—To provide qualified medical practitioners for the people.

(*b*)—To define the nature of the qualifications for licenses to practise as medical or health officers both of Government servants, and of persons engaging in private practice.

(*c*)—To provide for the registration of all degrees, licenses, etc., of qualified practitioners.

(*d*)—To suppress or control unlicensed practitioners.

(*e*)—To provide further for the qualifications of midwives and persons dealing in poisonous drugs.

Government to depute these duties to a Board of Health.

It shall be lawful for the Government to appoint a Board of Health to carry out the purpose of the Act. The Board of Health may frame bye-laws for —

(1) defining the nature and degree of education to be required of candidates for licenses to practice as medical officers, health officers, midwives, and vendors of poisonous drugs;

(2) for the appointment and remuneration of duly qualified examiners to conduct the examination of candidates for licenses, and for defining the nature and extent of such examinations;

(3) for the issue of diplomas, certificates, or licenses of qualification in medicine, surgery, midwifery and pharmacy;

(4) for the official registration of all persons entitled to practice as medical men, health officers, midwives, and vendors of poisonous drugs, and the periodical publication of lists of qualified persons residing within the limits of the Madras Presidency;

(5) for the cancelling of licenses, and removal from the register of the names of practitioners proved guilty of disgraceful or immoral conduct; and

(6) for the supervision and examination of chemical preparations and poisonous drugs kept for sale for licensed druggists, and for regulating the sale of poisonous substances.

All bye-laws framed by the Board of Health to be published in four consecutive issues of the Official Gazette and to receive the sanction of Government.

Constitution of Board of Health.

The Board of Health shall consist of the Surgeon-General, British Medical Service, the Surgeon-General, Indian Medical Department, the Sanitary Commissioner for Madras, the Director of Public Instruction, the Principal of the Madras Medical College, as *ex-officio* members, and of four other members to be selected by Government from duly qualified medical practitioners residing in the Town of Madras. The Board to meet as often as may be necessary for the transaction of business. The Senior Official Member of the Board to be President, and to have a casting vote only when the number of votes on any question may be equal. The Board to have the services of a Registrar, Secretary, and such other establishment as may be necessary. Government to provide office accommodation for the Board, in which examinations for diplomas and licenses may be held, and registration of medical practitioners may be carried on.

To account for all moneys received for fees.

The Board of Health to receive and account for all moneys received on issuing licenses or certificates of qualification, and for entering names of qualified persons in the official register, and to disburse all expenses connected with the examination of candidates, and the maintenance of the establishments required by the Board, and to submit annual statements of income and expenditure to Government.

Preliminary education of medical practitioners.

It shall be lawful for the Board of Health to require of all persons who propose to study medicine, midwifery, or pharmacy, such preliminary general education as may from time to time be judged expedient. A competent knowledge of English will be expected of all candidates who wish to qualify as medical practitioners or health officers.

Examination for diplomas or licenses to practice.

The Board of Health is empowered to examine all candidates, or to appoint public examiners for the purpose, and to grant certificates of qualification for (first) the grade of Assistant Surgeon, Apothecary or Assistant Apothecary in the public service, (second) the grade of Native Doctor and Hospital Assistant of the first and second class, (third) a diploma or license to practice midwifery, (and fourth) a license to deal in chemicals and drugs of a poisonous nature.

No unqualified person to be permitted to practice.

From and after ( ) no person shall be permitted to engage in medical or surgical practice or to hold any medical or sanitary public appointment, or the appointment of a public vaccinator, or any such appointments under a Municipality or Local Funds Board, who has not received a certificate of qualification and license to practice from the Board of Health, or who has not registered in the Board's Office his diploma or certificate of qualification obtained elsewhere, and no person shall engage in practice as a midwife, or as a vendor of drugs of a poisonous nature after the date above mentioned, without first obtaining certificates of qualification and licenses to practice from the Board of Health, under a penalty of fine, or imprisonment, or both.

Exemption of all persons *bona fide* engaged in practice before a certain date.

It shall be lawful for Government to exempt from the penalties of this Act all persons of the full age of twenty-one years and upwards, who may be *bona fide* practising the professions of Medicine, Surgery, Midwifery, and Pharmacy at the time when clause ( ) comes into force. But all persons engaged in practice before this Act comes into force shall be required to furnish to the Board of Health their names, ages, places of residence, and professional calling in order that the same may be entered on the official register, and every person neglecting to furnish such information to the Registrar appointed by the Board of Health, and taking the necessary steps to have his

All such persons to be registered.

or her name entered in the official register, for a period of ( ) months after the date above specified will be liable to a penalty of ( ) Rupees. All vendors of poisonous drugs will be required from the date this Act comes into force to comply with the bye-laws of the Board of Health framed for such purposes, and any person infringing the regulations issued by the Board of Health for the sale and safe custody of poisonous drugs will be liable to a fine, or imprisonment, or both.

Registration of practitioners.

A fee of ( ) Rupees shall be paid by every person who registers a degree, diploma, certificate, or license to practice, and the Registrar of the Board of Health shall, on payment of such fee, and on production of the degree, diploma, certificate, or license, enter the name and qualification of such person in the official register, and issue a certificate to the holder of such degree, diploma, certificate or license, stating that his qualifications have been registered.

All persons actually in practice before ( ) will be registered as "engaged in practice before ( )" on payment of the registration fees; all such persons will be required to register their names within twelve months of the date above specified.

Privileges of registered practitioners.

All medical practitioners whose names are entered in the official register shall be entitled to sue and recover in Courts of Law reasonable fees for medical and surgical attendance and medicines supplied. All registered midwives also shall be entitled to sue and recover reasonable charges for attendance on women in labor, and registered druggists shall be entitled to sue and recover for drugs and medicines supplied.

Registered practitioners to be exempted from serving on juries, or as assessors, Courts of Inquests, etc.

Unregistered persons cannot recover charges for medical attendance.

Persons who practice without registration of their qualifications may not recover charges for professional attendance, medicines, etc., and to be further liable on conviction to a penalty of ( ) Rupees for every offence.

Medical Register.

The Official Register of the medical profession in Madras to be published periodically by the Board of Health, and corrected from time to time, shall be the guide of all Government and local authorities in selection of candidates for medical and sanitary appointments in the Government service, or service of Local Boards and Municipalities, and no person shall hereafter be appointed to any situation requiring medical and sanitary knowledge under Government, Local Boards or Municipalities who has not received a certificate of qualification as a graduate of the Medical College, Apothecary, Dresser, Hospital Assistant, or Native Doctor, and who has not registered the same in the Office of the Board of Health.

Medical graduates of any Indian, British, or Australian University, and members and licentiates of any British College of Physicians and Surgeons, or licentiates of the Apothecaries Company of London or Dublin, or the possessors of American degrees recognised by the British Medical Council, will not be required to submit to any further examination for a license to practice within the limits of the Madras Presidency, but all such persons shall register their degrees, diplomas, or licenses, and pay the registration fees for their several qualifications. It may be competent for the Government to exempt from this rule all Commissioned Officers of the British or Indian Medical Services in Military employ.

Removal of names from Register.

The Board of Health shall erase from the register the name of any practitioner who may be proved guilty of felony, or crime of a disgraceful nature, and such person shall cease to be entitled to the privileges of a registered practitioner from the date of the removal of a his name by the Board of Health. The Board of Health will erase from the register the names of all persons whose decease is authenticated.

Names may be removed for proved immorality or disgraceful conduct.

The Board of Health are empowered to inquire into all alleged professional misconduct, or disgraceful or immoral behaviour on the part of registered practitioners, and to call upon them to disprove such charges, or failing to do so, the Board to be empowered to erase their names from the Official Register, and to deprive the guilty parties of the privileges of registered practitioners.

Penalty for falsely pretending to be registered.

Persons falsely pretending to be registered medical practitioners, midwives, or druggists, or falsely pretending to and using the titles of Physician, Surgeon, Apothecary, Hospital Assistant, or Native Doctor on conviction to be liable to fine or imprisonment.

Midwives.

The Board of Health are empowered to issue certificates or diplomas authorising females who comply with the bye-laws of the Board to practice midwifery.

Druggists.

The Board of Health may issue licenses to persons to deal in drugs and chemicals of a poisonous nature on such persons satisfying the Board as to their knowledge of the uses and doses of such drugs. All licensed druggists will be required to obey the regulations of the Board of Health regarding the safe custody and sale of poisons, and any infringement of the regulations will render the druggist liable to have his license cancelled, and to suffer a fine, and any person who sells or keeps or offers for sale, drugs mentioned in schedule ( ) without obtaining a license from the Board of Health shall be liable to have them confiscated and to pay a penalty of ( ) Rupees for every such offence.

(*Note.*—These are the main points requiring legislation, but the drafting of an Act would be best accomplished in consultation with the Secretary to Government in the Legislative Department.)

XIV

Minute by the Hon. J. D. SIM, C.S.I., dated 12th November 1874.

In the correspondence on which we must now come to a decision, two important but distinct questions are involved, viz.:—

(1) The creation of a separate subordinate medical establishment for Civil, as distinguished from Military, requirements; and,

(2) The provision of private medical practitioners for the people.

2. The Government have, for some time past, considered the first measure very desirable; it has now become a necessity, owing to the Supreme Government having lately fixed the strength of the establishment to be henceforth maintained for Military service.

3. It fortunately so happens that the existing establishment is considerably in excess of this strength, and the surplus is available for Civil employ; time is thus afforded for the gradual formation of a separate service for Civil requirements. Last year the gross surplus was 383, of whom 244 were then in Civil employ, leaving 139 still available, besides those under instruction. There is, therefore, no immediate dearth of men to be apprehended, and the task before us is to lay the foundations of the future service, which is to supply men to take the places of those now borrowed from the Army establishment as these gradually are absorbed, retire, or die, and to meet the wants of Municipalities and Local Fund Boards.

—	Gross Surplus.	In Civil employ.	Net Surplus.
Apothecaries	41	28	13
Assistant Apothecaries ...	52	37	15
Passed Hospital Assistants.	46	4	42
Hospital Assistants ...	244	175	69
Total ...	383	244	139

4. The things to be done are to determine the conditions of the new service as to pay, pension, etc., to prescribe the qualifications required, and to form an approximate estimate of the strength of the new establishments.

5. We evidently must, as hitherto, have two classes of subordinates: one qualified to have charge of hospitals and dispensaries at places where the control and supervision of a Commissioned Officer are not available, and to fill certain special offices; the other, to discharge subordinate duties under superior officers. The qualifications of the first class must be of a superior character, and we ought not, I think, to be satisfied with less than the curriculum of the Second Department in the Medical College. Some not essential subjects, as Botany and Chemistry, might, however, be made optional, and the time of the students be devoted as much as possible to those important subjects, Anatomy, etc., requisite to make them good general practitioners. For admission into the College, it would, I think, be premature now to require the Matriculation Test, though this should be done as soon as it may be found practicable; for a good general education is the best foundation for subsequent special education. For the present, we must be content with such a knowledge of English as will enable the student intelligently and readily to receive instruction through the medium of English, to understand the text-books, and so forth; the preference should, however, be given to those who have passed the Matriculation standard, if otherwise equally eligible. The College must not be converted into a school for learning the English language. A pre-collegiate course of one or two years is advised, and should be adopted, though, if proper lads are selected, one year should, I think, be enough. The College course should certainly extend over three years, including hospital attendance and instruction; and I think every student should, after passing out of the College, be

attached for a year or two at least to some of our large hospitals at Madras before being sent up-country.

6. For the second class of subordinates, the curriculum of the Junior Department, with one year's pre-collegiate and two years' collegiate instruction, as proposed by Dr. Balfour, seems amply sufficient; in fact, were it not that some of these officers are attached to jails, where medical officers are not residents, to the camps of officers travelling about, etc., I should think the programme rather too ambitious. Non-essentials should be excluded as far as possible.

Ex. gr., is Midwifery necessary?

7. It is not easy at present to fix, with any confidence, the number of subordinates of each class likely to be required permanently hereafter. In order to avoid stagnation in promotion, expenditure beyond our means, and other embarrassments, our admissions into the College must be moderate, until we see our way more clearly; and especially we must be careful not to over-tax the means of the Medical College in affording clinical instruction, which is a matter of the first importance. From the statement appended to Dr. Balfour's letter of the 23rd October 1873, it appears that Provincial Services then absorbed thirty-five subordinates of the grade of Apothecary and Assistant Apothecary. The distribution list requires careful revision. Two Collectors, for instance, have Apothecaries attached to their establishment; another has an Assistant Apothecary; while all others have only Hospital Assistants. On the other hand, some remote and unhealthy stations, now supplied only with Hospital Assistants, should have men of higher qualifications. Making allowance for all such cases, and looking to future requirements and contingencies, I think fifty subordinates of the higher class will be an ample provision for Provincial Services. We now supply thirty Warrant Officers and four passed Hospital Assistants to foreign Administrations. If it be the case that these must be supplied from the Civil Establishment, instead of from the Military, the number will be increased to eighty-four. To this we must add the wants, present and prospective, of Municipalities and Local Fund Boards at places where there are no Commissioned Officers. Judging from their number and the means likely to be at the disposal of Local Fund Boards, I should say that sixty to seventy men would be a sufficient provision. Then a total of 150 men of the higher class if foreign requirements are included, and of 120 if these are excluded, would seem to be a sufficient strength, when the present surplus of Military subordinates is absorbed or otherwise becomes unavailable. An annual admission of fifteen students is, therefore, as much as we can now safely venture on. If this estimate proves too low, it can easily be raised, but it is very necessary, in my opinion, that we should keep on the safe side at the outset.

8. Of the lower class, we seem now to be employing 140, and thirty-five others are supplied to foreign Administrations, so that we may safely assume that we shall require 200 men of this class eventually.

9. These, of course, are merely estimates; our actual demands must be closely watched, and the admissions into the College regulated by experience. It is necessary, however, to fix the probable strength of the service as well as we can, in order that the financial results may be foreseen. As regards emoluments of the higher class of practitioners, Dr. Balfour has suggested two methods: one based on a classification of charges; and the other (to which he gives the preference) on the principle of a graduated salary according to service with an additional allowance for independent charge. Under the first arrangement, Dr. Balfour divided the charges into three classes on Rupees 70, Rupees 80, and Rupees 100; and he thinks it "probable that applicants of average ability, etc., could be had for these rates." Under the second system, Dr. Balfour proposes salaries of Rupees 50, Rupees 100, and Rupees 150, after each septennial period of service, with an allowance of Rupees 50 for independent charge, and he has "no doubt whatever, . . . that good ability, etc., can be had for these terms;" and he strongly recommends the adoption of this principle. This latter system has some undoubted advantages, but the great expense it eventually involves, when adopted without some restriction as to the numbers receiving each rate, is a very serious objection. A very large proportion of these men will hold independent charges, and thus the rates of salary will practically range from 100 to 200 Rupees. These rates are, I apprehend, for

beyond our means, for these, whether derived from Provincial or Local Funds, are limited in amount, and not susceptible of great or rapid increase. They are also considerably in excess of the emoluments of other branches of the public service. In no other branch of the Civil administration does an officer on entry receive such high allowances, and in none is he assured such certain promotion to higher rates. It must be remembered also that these men not only receive a costly education gratuitously, but are paid during the five years they are receiving instruction, and are sure of fairly lucrative employment with pension, and other incidental advantages. Above all, we must remember that we must begin as we may reasonably expect to be able to continue, and not leave our sucessors a legacy of financial embarrassment. I do not think any allowance should be guaranteed for independent charge, inasmuch as it is for this very purpose that these men are educated and employed. Where special cause may be shown for extra remuneration, an exception may be made of course; but the rule, I think, should be that the sanctioned rates of pay cover everything. I would give the lowest rate of pay proposed by Dr. Balfour, viz., Rupees 50 per mensem, for the first two years while, as I have suggested, the passed student is serving his apprenticeship in a large hospital, and then divide the service into six classes with salaries ranging from Rupees 75 to Rupees 200. Until the full establishment is raised, it will be necessary to prescribe certain minimum periods of service in each grade, but after that promotion from class to class would be given only on the occurrence of vacancies, and be dependent, as now, on periodical examination. Free quarters or house-rent should be allowed. Private practice should be permitted under certain regulation, and leave and pension assured under the Uncovenanted Civil Service Rules. The pay should, as I have said, cover all duties assigned by Government.

		For a Service of 150.	For a Service of 120.
		Rs.	
First two years	... 50	50	40
2nd to 7th	... 75		
7th to 14th	... 100	40	30
14th to 21st	... 125	25	20
21st to 25th	... 150	15	10
25th to 30th	... 175	10	10
30th to 35th	... 200	10	10
	Total ...	150	120

Some such classification as that marginally noted might suffice, the periods of service appended regulating the promotion during the formation of the service. Such an establishment of 150 members would cost about Rupees 2,00,900 annually, irrespective of pensions, etc., and I do not think we can hold out better inducements with the means likely to be at our disposal. The new service will consist almost entirely of Natives, and the exemption from Military service will tend to make it popular.

10. The Hospital-Assistant Class should be similarly graded, the rates of pay ranging from 20 to 60 Rupees, instead of stopping at 40 Rupees, as proposed by Dr. Balfour.

11. The pre-collegiate and collegiate allowances proposed for the higher class of practitioners seem to me too high. We are giving these men a valuable education free from charge with a certainty of employment and pensions on retirement, and a reasonable subsistence is all that should be given. Even this should eventually be unnecessary. I should think 15 Rupees for pre-collegiate and 20 Rupees for collegiate stipends would be sufficient. The allowance proposed for Hospital Assistants might be 7 and 9 Rupees, respectively. The stipend will, of course, be suspended if the student is idle, and no stipendiary student, unlikely to pass the final examination, should be retained, except as a private student. Immoral or dishonorable conduct should entail immediate expulsion.

Note.—Dr. Balfour states that each Military student now costs the State 2,667 Rupees, and each Civil student will cost, at his rates, Rupees 1,332, *exclusive* altogether of education.

12. All students should engage to serve for a certain period, say five or seven years, with the power, however, of purchasing release at any prior period for stated sums. Retirement at the age of fifty-five or after 35 years' service should be the rule in both branches of the service. From the character of the employment, transfer will not be very frequent, but both classes must go wherever ordered within the Presidency. The age of candidates for the higher grade, on entry into the college should not, I think, be under eighteen; they will then enter the service at twenty-one, which is surely young enough for their responsible office. The

most convenient arrangement financially will probably be to debit the entire cost of the new establishment, in the first instance, to "Provincial," and charge each department, Municipality, and Local Fund Circle, with the average cost of each officer of the two grades employed by it This is a matter, however, which may be left for future consideration.

13. The second question, viz., the provision of private medical practitioners, has engaged the attention of Government since 1869, when the subject was referred to the Board of Revenue and also to a Committee of medical officers.

Board's Proceedings, dated 27th April 1869, No. 2931.

14. The Board of Revenue advised—

I.—The opening of four medical schools in the provinces for the education of these practitioners. The instruction was to be in the vernaculars entirely, and limited to what is necessary in native practice; a few scholarships were to be allowed, but otherwise the pupils were to maintain themselves, or be maintained by private bodies or inviduals. On completion of the course of instruction, those students who attained the prescribed standard of qualification were to receive diplomas, and be set up with instruments and medicines to make their own way in life.

II.—The attaching to selected medical officers competent to teach in the vernacular a few pupils who were to receive a certain amount of primary and simple instruction. The medical officer was to receive a moderate fee, payable at the outset from public funds. The pupils were to support themselves.

III.—The extensive institution of hospitals and dispensaries.

IV.—The opening of Midwifery Classes in every hospital wherein proper instruction could be afforded.

V.—The translation of approved medical works into the vernaculars.

Thus the Board's recommendations were limited to affording the means of obtaining a suitable medical education.

15. The Medical Committee, on the other hand, based their scheme on the principle of a regular service of village doctors, to be paid during their education, and subsequently during their employment, from the proceeds of a local cess to be eventually imposed throughout the country. At first, the expenses of education and employment were to be defrayed by the State. The village doctor, "in addition to his duties as village physician or surgeon," was to be "virtually the Sanitary Inspector of his Circle, the reporter of cases of sudden death, the willing helper of the vaccinator and the professional adviser and attendant of the community, when epidemic disease breaks out." He was not to be debarred from private practice, and the Committee hoped that, as his personal influence increased, the more intelligent and wealthy members of the Native community would voluntarily help him in his various plans for the public good, commencing with a village hospital. They proposed five provincial schools,—the first to be opened at Cuddapah. The Committee further proposed that a Midwifery Class and an Obstetric Ward should be established in connexion with each provincial school, and a nurse trained at the Lying-in-Hospital attached to assist in the instruction and training of a class of native midwives and nurses.

G.O., 3rd March 1870.

16. The principle which the Medical Committee adopted seems to me erroneous. Even if financial considerations did not forbid its acceptance, it would, I think, be a grave mistake to render the practice of medicine in this country a close State service. All that the Government can, as I think, properly or advantageously attempt is, as the Board have proposed, to supply the means of obtaining a medical education, which, as a matter of fact, the people cannot provide for themselves, or otherwise procure. It is, as the Board have justly remarked, "a blot on our administration," that we have hitherto done practically nothing in this direction. Our hospitals and dispensaries, useful and valuable as they are, cannot possibly meet the requirements of a population of thirty millions scattered over so vast a territory. Numerically, we have but one skilled medical officer to every 60,000 of the people. The mass of our native subjects are as much in the hands of ignorant quacks as they ever were, and no prospect of improvement is apparent, without the intervention of the Government. Our only school of

medicine—the Madras Medical College—cannot possibly afford the amount of education needed, besides which its *locale* is inconvenient, its curriculum too high, and the attendant expenses too great for those who are to be the doctors of the "people," and must live on such fees as the people can give. It should be utilised to the fullest extent compatible with efficiency, but it can never meet the demands of the country.

17. I would, therefore, adopt measures, without further delay, for opening schools of medicine at the four stations suggested by the Board, and give immediate intimation of the intention. The course of study need not, I think, exceed two years, the curriculum should be restricted to absolute essentials, and clinical instruction be especially attended to. The cost of each school was roughly estimated by Dr. Mackenzie at about Rupees 8,000 annually. I doubt the sufficiency of this sum, and would rather fix a gross sum of Rupees 50,000 per annum for four schools. On the other hand, eachschool must turn out more than eight students yearly. I am not quite clear as to the expediency of stipends during education, but it may be necessary at the outset; and, if local officers are of this opinion, I would give very moderate subsistence allowances. In some instances, wealthy individuals and public bodies will probably provide scholarships or maintain students. I would, however, avoid the stipendiary system if possible.

18. In one respect I differ from the Board, while they propose instruction in the vernaculars only and the education of men of a very humble position in life. I would, in these schools, afford it in English, and aim at the education of men of higher culture and social status whose field of practice would be among the middle classes. It will be a matter of considerable difficulty to afford a sound medical education in the vernaculars; and medicine is not a science that men of inferior education and capacity canacquire. I am apprehensive, too, of the consequences of our sending out inefficient men as the exponents of English medical science. Much of prejudice still exists against our system of medical treatment, which will only be strengthened if the men we educate are not thoroughly efficient so far as that education extends. Moreover, our only hope of making the profession what it ought to be and is in more advanced countries depends on its proving lucrative, and this is most likely to be the case when it is practised by men of some social position among the middle classes. A knowledge of English will undoubtedly facilitate and expedite the acquisition of medical knowledge by the student and enlarge the field from which instructions can be obtained. It is very rapidly spreading, and is already very general, and it gives its possessor a certain weight with the Native community in the provinces. I would, therefore, make English the medium of instruction in the provincial schools.

19. For the instruction of inferior men in the mere elements of medical practice provision may be made in the district hospitals. Several Municipalities and Local Fund Boards have lately adopted this plan, and it may, I think, be most advantageously left to such bodies at all events for the present.

20. I would further provide in some of our best provincial colleges and schools for the teaching of some of the subjects, Chemistry, for instance, which, though forming part of a Medical education, need not of necessity be learnt in a Medical School. The students acquiring these subjects would perhaps imbibe an inclination, and would certainly be *pro tanto* prepared to adopt medicine as their future profession. It is a great defect in our system of education that it is so purely literary, and produces men whose ambition is so often limited to employment in the public service. Of late years the law has proved somewhat attractive, and I would hope that by instituting classes for what I may term professional subjects, we may open fresh pursuits and honorable employments for our educated youths.

Such as the Combaconum College.

21. These measures provide only for the male and infant population of the Presidency. We have still to think of females, the great mass of whom are prevented by social and religious prejudices from resorting to the aid of male practitioners. The lamentable loss of life and the sufferings entailed on the female population of the country by the utter ignorance of the only class from which they

can obtain assistance is notorious and absolutely indisputable. We ought, if only as an act of simple humanity, endeavour to afford some relief.* In the current year, six ladies, European and East Indian, have sought admission into the Medical College, with the view of qualifying for private practice. Arrangements,—the best within our means,—have been made for their instructions, and others will doubtless follow the example thus set. But we cannot look to this source for a sufficiency of suitable female practitioners; their numbers will certainly be too small, and their employment beyond the means of all but the wealthier section of the Native community. But they can be utilised as teachers, and I am informed on good authority that at least one of their number premises to attain a very high degree of proficiency. What I would suggest is the establishment of a school of medicine for Native females entirely under female management. If we are to alleviate the sufferings which we know prevail amoig the female population of this Presidency from the absence of skilled medical attendants, it can only be by training Native female doctors.

22. Europeans and Eurasians are too few and too expensive, and not equally acceptable. But the Native female doctor must be a person of a respectable position in life and of good character. Such persons wil not attend our schools, where all instruction is given by male professors in the presence of male students. This difficulty can only be overcome by opening a school, as I have suggested, entirely under female management. The course of sudy would be specially designed for the direction in which the chief work of the pupils will lie, viz., the treatment of women and children. Clinical instruction could be afforded in the Women's and Lying-in-Hospitals. A suitable Superintendent could be obtained from among the ladies now studying in our college or failing this could be obtained from England, though the former is preferable as a knowledge of at least one vernacular language and of the customs and habits of Natives are of great value. Assistants could certainly be procured locally. A rented house in a convenient locality and a moderate establishment of servants, with provision for a certain number of boarders (in addition to day-scholars) would suffice. No expense would be incurred which could not be possibly curtailed or abandoned if the experiment proved or threatened to be a failure. There would probably be some difficulty at first in getting suitable pupils, but this will wear off. I feel sure that such a scheme would have the most hearty sympathy of our Native gentry, who would give us the advantage of their influence. Without in the slightest degree ignoring or under-rating the difficulties to be encountered, I am sanguine of ultimate success, and I know no object more worthy of hearty and sustained effort.

23. I would call upon the Surgeon-General to elaborate a scheme within a maximum cost of Rupees 20,000 annually after conference with such gentlemen, European and Native, as are likely to take an interest in the matter and can afford useful information.

24. The two grants which I have suggested, aggregating £7,000, can be met from our Provincial assignment for medical purposes, and are but a trifling contribution from our large revenue towards the beneficent object of saving life and lessening suffering.

XV

Minute by the Hon. W. ROBINSON, C.S.I., dated 12th December 1874.

Our Honorable Colleague, Mr. Sim, has summarized and treated the subject of this voluminous correspondence in so exact and exhaustive a manner that it seems to me that his Minute, dated 12th November, naturally becomes the basis of any further discussion of which it is susceptible.

2. At the same time I think that Dr. Cornish's letter, dated 7th July, must be at once brought on record as a valuable contribution to the discussion. I

* It is almost hopeless to expect the dissipation of the prejudices which bar the admission of the male practitioner. Indeed, my own belief is that even among ourselves, before many years are passed, female doctors will be the rule for all ordinary practice among females.

agree generally with the views propounded by Dr. Cornish, though I doubt whether the time has come for legislation of the professional character advocated by him. Be this as it may, I think that his draft Bill will be more in place as a chapter of a General Public Health Act, which will no doubt, sooner or later, have a place on the Statute Book.

3. The matter before the Government is, as it appears to me, the separation of the Military Subordinate Medical Establishment through all grades (down to the Stipendiary Student in the College) from a Civil Medical Service now practically in existence, but which has still to be officially constituted. It seems to me that it would simplify matters for the future if this separation could be carried out at once by allowing those now engaged in Civil duties to elect—with the sanction of the Military authorities—for Provincial and Local Medical Service under such conditions as may now be decided on. When such a separation is complete, both departments will know precisely what they have to deal with, and we shall be better able to calculate what provision has to be made by each for the education of the annual supply required to keep up the establishment.

4. I must admit that I take up the matter with great reluctance without a careful examination of its details by a mixed Committee, as recommended by me in a former note.

5. The new Civil Medical Service is intended to meet the requirements of the State (Civil) and Provincial Services in which must for the present be included the requirements of Municipalities and Local Fund Boards. The arrangement to be made must, under the circumstances, also include provisions for preliminary education more or less on the gratuitous principle hitherto applicable to the State Military Establishment. On this point I shall have some remarks to make further on.

6. The constitution of the Service—in two branches—proposed by Mr. Sim is in accordance with existing conditions, which must, I think, for the present be followed, and I would accept his moderate calculation as to requisite strength—viz., 150 higher-grade and 200 lower—of each grade, and also the classes he proposes with the minimum of service required to qualify for promotion—subject to examination. But I am exceedingly doubtful whether it will answer to withhold special allowance for independent charge. The principle is equitable and is admitted in the Military Medical Subordinate Service, and sooner or later will be carried out as respects the service we are now constituting. I would prefer to admit it at once and reduce substantive pay to meet the financial difficulty.

7. The other proposal as regards minimum period of service, general service within the Presidency, retirement at 55 years of age, pension, etc., should likewise be accepted.

8. As regards preliminary education, I agree generally with Mr. Sim under present exigencies. Any violent change would, perhaps, seriously affect the supply of entrants to the College course; but the question of gratuitous Medical education is a very serious one, and it will so continue until something is done to place the medical profession on the proper basis as suggested in Dr. Cornish's letter. For the present we must offer the Civil Medical Subordinate Service similar terms to those enjoyed by the Military Service, to train them for Government Service. But I must confess that I should prefer to see them pay for their own education, and come to the Government with their qualifications in hand. I would therefore rather see a considerable number of stipends given to youths in College in the form of "Scholarships," limiting the number, and, by and bye, as the Service attains popularity, either diminish, or increase the scholarships.

9. I see from the Calcutta papers that they make nearly all their Civil Students pay something for their Medical education, and I am quite sure that if lads saw any prospects before them, Government need not long bother itself about gratuitous education and charges of maintenance while the lads are qualifying. It is most inconvenient that we should go on paying boys to learn a profession which would give them a good livelihood.

10. But to inaugurate the change, I should advise Government to allot a certain number of Stipendiary Scholarships every year, and make each boy of the Senior Department pay 5 or 6 Rupees a month out of it to the College for tuition fees, and the Junior Department 3 or 4 Rupees. I would then throw open the College freely to all lads of a certain preliminary education and admit them on payment of the College fees, giving them the chances of succeeding to vacant scholarships according to their ability and merit.

11. The papers seem clearly to indicate that some considerable changes are required in the working of the Medical College and places for Clinical instruction to adapt them to future requirements. I would call on the Principal to draw up, in communication with Dr. Balfour, a scheme for the instruction, etc., of the two branches—Military and Civil—of Public Service, and also for the increased admission of private students.

12. I entirely agree with Mr. Sim as regards opening Medical Schools in the Provinces for the instruction of private practitioners, and other matters set out in his Minute on this behalf; and I would order it to be done, as already decided, so soon as arrangements can be made for class teaching and clinical instruction at the different stations. The Surgeon-General should be requested to prepare to inaugurate the measure at once, and submit a scheme and estimate of cost. I endorse also Mr. Sim's views in regard to teaching through English in preference to the Vernacular in the Provincial Schools. If a commencement is to be deferred until teaching in the vernacular can be managed, it will be deferred *sine die*, and considering how fast the language is spreading, I should hope there may not be much difficulty in getting lads who know it. The difficulties of teaching scientific subjects, which have peculiar terms of their own, in a native language are almost insuperable.

13. Scholarships should be provided for Provincial Schools by Local Boards, Municipalities, and by Government and private individuals. The whole expense should be met as suggested in my Minute, dated 8th September 1874.

14. I would adopt the measures proposed by Mr. Sim for inaugurating female medical instruction by starting a school in Madras under an efficient female medical teacher when she can be procured—the expense of which (I should hope it will prove less than he anticipates) like that of general female education, should be borne entirely by Provincial Funds.

15. I am not sanguine of brilliant or early success amongst the native female population in general—though I think that in Madras women educated in Missionary Schools, etc., may be found to join the classes readily—for the scientific education of the women of this country must for long be pursued under extraordinary difficulties. The mental development of women in India is very low, and time is an essential element in the outcrop of intellectual powers. They are further so far behind the men in general knowledge that the endeavour to teach any number of them a scientific profession must meet with much disappointment. It is far more difficult for women to rise superior to caste and the prejudices of the youth than for men, and in their case the indifference and neglect of ages has to be repaired. Still it is worth a trial (at almost any cost) to supply the native female community with even a small number of educated medical attendants of their own sex.

W. Robinson.

XVI

Minute by the Right Hon the President, dated 21st December 1874, No. 57.

The number of "Medical Subordinates" now employed in Military and Civil duties in this Presidency, but who are all now on the Military establishment, and who are all trained in the Medical College, is 629. The Government of India has recently limited the number of Medical Subordinates, who are to be on the Military establishment of the Presidency, to 259. In the future, therefore, of the total

number of pupils entertained at the Medical College, a sufficient number to provide 370 trained Medical officers must be admitted and trained no longer as Military, but as Civil officers. The number so to be admitted and trained for civil duties, whatever it may be, will of course bear (other things remaining the same) to the whole number now educated in the College the proportion of 370 to 629.

2. Such being the state of the case, all that is at present necessary to determine is as to the conditions on which the pupils, who are henceforth to be civil officers, are to be admitted, including of course the terms of their service after leaving the College. On this question I agree with the Honorable Mr. Sim, and think that the scheme which he has suggested may be adopted, with any such modifications in detail as may hereafter appear desirable.

3. As regards the number of pupils to be in future admitted annually to the College—which is another of the questions discussed in the Honorable Mr. Sim's Minute—the change made by the Government of India affords no reason for considering it what did not before exist. It may, however, be considered as affording a convenient opportunity for raising that question. It was, however, decided in Council, after full discussion with Surgeon-General Balfour, that the most expedient course was to leave this question for decision, from time to time, on the recommendation of the Surgeon-General, who would be guided by the varying circumstances of the case and the probable requirements of the service as developed in the process of time.

4. The question of providing, by means of the Medical schools throughout the country, a staff of trained medical practitioners intended to meet the wants in this respect of the population at large is a distinct and very serious question. For my own part I confess that I am not prepared to admit that an object so costly, so ambitious, and, I believe, so unprecedented is within the proper province of the Government. Either the medical assistance so provided will be gratuitous, in which case the Government will have to pay not only for the education, but for the maintenance of the medical practitioners provided, or it will not be gratuitous, in which case the people must pay for the medical attendance supplied. In the first case, the cost must ultimately be very great, and it is an expense which in no country of which I have yet heard has been assumed by the Government. There seems to be no reason, for instance, why the people of India should be provided at the cost of the Government with gratuitous medical attendance, while the people of England, who require it more, are (except as regards absolute paupers) altogether without such aid. In the second case, the measure, while entailing upon Government the cost of the medical education, would fail of its object; for the people would prefer the cheap and ineffectual medical advice which they now possess to the more expensive and better advice which they might thus obtain. The Honorable Mr. Sim estimates the expense to be incurred at £7,000. But this could only be the *preliminary* cost. The scheme implies the ultimate provision of medical advice for the whole Presidency: and the cost of this would be something very different, and which would seriously add to the fiscal burden of the people. In any case the £7,000 must fall upon our Provincial Budget: and I do not know of any object which is now a charge upon that Budget, and to which the object now proposed could, consistently with sound principle, be preferred. If we are to divert any of our Provincial expenditure to other purposes than those for which it is now incurred, I consider that elementary education (to name any one instance), is an object of expenditure far more defensible in principle than that now advocated, which indeed (as motives to trial) cannot in principle be defended at all.

5. My Honorable Colleague observes that the sum proposed is not much to give for the relief of suffering. But to relieve suffering from money which belongs to ourselves is one thing: to relieve it from money which belongs to other people is another. There is a temptation to the latter course from which the former is entirely free. The proposition that the satisfaction of the material requirements of the community is not one of the proper objects of taxation is (however widely it may have been departed from in practice) admitted by all but communistic politician. To this proposition there are no doubt exceptions: but the question

where to draw the line, as between the rule and the exception, is extremely difficult. I have always considered that in India the tendency has been to draw it too far in the direction unfavourable to the tax-payer, who cannot be consulted on the subject: and that what is required is not to encourage but to repress that tendency. Disguise it as we may, every proposal of the kind now under consideration means either an increase, or an unnecessary maintenance, of fiscal burdens: and what ought now to be our object is to diminish these burdens, rather than to invent new reasons, from motives however benevolent, for increasing them.

Hobart.

XVII

Minute by the Hon. J. D. SIM, C.S I., dated the 27th January 1857, No. 58.

The scheme which I have proposed is, of course, only experimental and preliminary. If it succeeds—and I have myself no doubt of its successful issue—its extension will naturally and necessarily follow; but what I have suggested will be sufficient for the next three or four years, and we may well leave the future to our successors. They will be under no obligation to go beyond what I have recommended; they need not even maintain the five schools I have proposed; they will be as free to act according to circumstances and their own judgment as we are. My proposition does not in any way irrevocably pledge the Government —now or hereafter—or fetter their freedom of action. Dr. Balfour assures me that all that I seek can be accomplished for less than I have estimated, but even if a school were established in each district, the expense would not be alarming, nor more than, in my judgment, the importance of the subject to our native subjects would fully justify. This, however, is a question for our successors rather than for us. The grant I have proposed can be met almost entirely from the Provincial assignment for Medical Services, which is primarily applicable to such purposes.

2. I should be glad indeed if the action of Government were unnecessary; but we have before us the fact that the people have not taken the initiative, and the extreme difficulty of their organizing Schools of Medicine is patent. Owing to the dearth of teachers and other causes we cannot, in my opinion, apply to Southern India the principles which guide the policy and practice of England, for the circumstances of the two countries and the character of their inhabitants are widely different. Here the Government must initiate and do very much that in England is wisely and well left to the people. In this particular matter, unless the Government take the initiative—and all I plead for is a beginning—nothing will be done for years and years, as nothing has yet been done, and meanwhile all the loss of life, and the suffering which medical skill could prevent or allay will be going on unheeded and unchecked. I have no apprehension on the score of medical skill being unappreciated by the people; the rapid extension of Hospitals and Dispensaries, and the increasing resort of the people to them, evince the contrary, but such institutions can never meet the wants of a population, or supply the place of private practitioners, and I am confident that if we only afford the means of education—which is all that I advocate—we shall lay the foundation of a medical profession for the country, which hereafter will prove a blessing to the people. But besides the beneficence of the attempt, it is I think a matter of great and increasing importance to open fresh pursuits and occupations for those to whom we are now giving the advantages of a sound and liberal education, and who from lack of such rely on State employ and being, as so many must be, disappointed, become discontented and unprofitable members of the community. The Church, the Army, the Arts—indeed almost every career open to the youth of England, save the Law and Teaching—are closed to the youth of India. Medicine is, I think, one source of useful and honorable employment which we may endeavour to open to them.

3. I regret very much the conclusion at which His Lordship has arrived, but in the face of His Lordship's strongly-expressed opinion as to the policy of the Government in such matters, I forbear to press my own personal views further.

XVIII

Minute by the Hon'ble Mr. W. ROBINSON, C.S.I., dated 11th February 1875.

I should wish to have seen the matter of Medical Education at the College put on a still more complete footing than will result I think from this discussion, for I think that we should aim at something beyond educating just enough young men to keep up the future Civil Medical Establishment or rather that portion of the existing Military Establishment which has been handed over to Civil duty and has practically become permanently severed from the Army by the reduction ordered by the Government of India. However what is proposed will suffice for a few years.

2. But I share very cordially my Honorable Colleague Mr. Sim's regret that the establishment of a few Medical Schools in the Mofussil as first steps towards the diffusion of the means of medical instruction in the country should be further postponed. The measure was long since decided on and is urgently needed by the country. There is of course no idea of supplying gratuitous medical aid to the population as conjectured by his Lordship. The object is merely to put the people in the way of helping themselves by placing the means of learning within their reach, and I think that it is really to be deplored that this should still be deferred, for it is simply impossible that the medical practice of the country should improve by a movement from within. The baneful consequences and continued evils of existing things are sad in the extreme, and at this time learned professions are so sorely needed that there is every reason to anticipate success of the measure which would provide a new means of honorable and beneficent employment.

3. There can be no difficulty about the ways and means and no aid from Provincial Funds is needed. The establishment of such schools was one of the objects which the Legislature had in view when passing the Local Fund Act, and Section 27 provides for contribution from all surrounding Circles and Municipalities which may be likely to benefit by such Central institutions. The share of the land-cess—one-sixth—which pertains to sanitation is between £50,000 and £60,000, and certainly a tenth or a much larger contribution would be a moderate charge on this branch of taxation for such a boon as the gradual diffusion of sound medical science in a country where its absence inflicts such terrible disasters on the people.

Order—No. 1001, Financial, dated 7th May 1875.

The papers above recorded involve several distinct questions, but all so intimately connected that the Surgeon-General appears to have found it convenient to deal with them together.

2. In G.O. dated 3rd March 1870, No. 260, the Government deferred taking action on the report of the committee appointed in 1869 to consider the best means of utilizing the Provincial Dispensaries as Popular Schools of Medicine, which report contemplated the establishment of several Provincial Primary Schools of Medicine in connection with existing Dispensaries for the instruction of Village Dressers, upwards of 4,000 of which would be required to meet the wants of the Presidency. In his covering letter forwarding the report, the late Inspector-General, Indian Medical Department, estimated that 8,500 village practitioners might ultimately find employment in the Presidency, and recommended the establishment of five Provincial Schools at Cuddapah, Vizagapatam, Trichinopoly, Madura, and Cochin or Calicut.

3. In his letter, dated 25th September 1871, No. 313, the present Surgeon-General (Dr. Balfour), while applying for permission to select thirty-five additional candidates as native medical pupils in the Medical College, intimated to Government that, in his opinion, the Medical Officers required for the provinces could be educated in the College better, and more cheaply and in greater numbers, than in the Provincial Schools proposed by the Committee of 1869. In G.O. dated 6th December 1871, No. 372, the Government sanctioned the entertainment of the

thirty-five additional candidates for native medical pupils, and remarked, with reference to the larger question, that they would be glad to receive from Dr. Balfour a further report after he had had an opportunity of further consultation with the Director of Public Instruction and the Principal of the Medical College.

4. In August 1873, the Government of India intimated to this Government that the number of Hospital Assistants to be enlisted in the Military Department must be regulated on military considerations only, and that separate arrangements must be made for the entertainment of any medical subordinates who might be required for the Civil Department, such arrangements being made on the principle laid down in the memorandum of the Military Department, No. 922, dated 27th June 1873, this principle being, briefly, that the practice of enlisting any native medical pupils specially for the Civil Department would be discontinued, but that any Hospital Assistants available from the Military Reserve would be allotted to the Local Governments and Civil Departments, who must make their own arrangements for any further requirements.

5. Thus the Government were called upon to raise a Civil Subordinate Medical Establishment irrespective altogether of the scheme for the provision of "Village Dressers" dealt with by the Committee of 1869, and the necessary information was called for in G.O. dated 5th September 1873, No. 930.

6. In his letters, dated 5th September 1873, Nos. 332 and 337, the Acting Surgeon-General (Dr. Ranking) reported on the subject of providing immediately for the prospective wants of the Civil (Imperial) Branch of the Service as regards medical subordinates, and on the formation of a distinct establishment for Civil duties other than Imperial. From these letters, and other papers before them, the Government gathered that Medical Officers of the grade of Hospital Assistant were not qualified for the independent charge of dispensaries, and that, at the same time, the General Service had been greatly inconvenienced by their withdrawal from their proper duties. It was therefore directed * that all Hospital Assistants in independent charge of Civil Dispensaries should be relieved by men of the Hospital Apprentice or warrant Grade, and as that step would materially affect the calculations as to the future needs of the Subordinate Medical Department, the general question was referred back for reconsideration. It may also be remarked here that Dr. Ranking's proposals appear to have been based upon orders issued prior to the receipt of the instructions of the Government of India above quoted.

* G.O. dated 17th September 1873, No. 960.

7. In his letter, dated 23rd October 1873, the Surgeon-General replies to G.O. dated 5th September 1873, No. 930, calling for a report to be made as to the medical requirements of the Civil Department in excess of the supply obtainable from the Military Department, and reports that no steps need be taken to recruit for either Imperial or Provincial Services until after the absorption of the existing military surplus of 383 medical subordinates which suffices for the present wants of the Provincial Services, and leaves a further balance of 125 men available for loan to Municipalities and Local Fund Boards.

8. In another letter of the same date, Dr. Balfour reports on the future wants of Local Fund Boards and Municipalities in the matter of Medical Subordinates, and assuming, in accordance with G.O. dated 17th September 1873, No. 960, that only men with an education equal to that received by men of the warrant grade would be allowed to be put in sole charge of a Dispensary, he estimates that the annual requirements would be thirty Medical Officers of that class, and that their entertainment must be immediate. As regards men of lower qualifications to be employed as Assistants, he considers that the surplus pupils under pre-collegiate training and at College would suffice to meet all requirements. He also submits suggestions regarding the designation and pay of the new class of Civil Medical Officers.

9. In his letter, dated 27th November 1873, No. 2375, the Director of Public Instruction submits, with his observations, a letter from the Surgeon-General, remarking on the small number of pupils admitted into the Medical College, together with a letter on the subject from the Principal of the Medical College.

10. In his letter, dated 2nd February 1874, Dr. Balfour submits detailed recommendations regarding the nature of the education to be given to the new class of medical subordinates, and the stipends to be allowed them while under instructions, and suggests that a portion of the existing excess of Military Medical servants should be allowed to volunteer into Civil employ.

11. In his letter, dated 26th February 1874, No. 84, Dr. Balfour enters into the question of providing 8,000 or 10,000 educated medical men to take the place of the 8,000 Vaidyans and Hakims whom the country is now supporting. He also states that he considers that in G.O. dated 17th September 1873, No. 960, the Government have insisted on a higher standard of qualification for Medical Officers in charge of Dispensaries, than Local and Municipal Funds are able to afford, and submits in detail his views and recommendations on the subject.

12. In his letter, dated 1st April 1874, No. 149, Dr. Balfour submits information regarding the cost involved in the arrangements considered necessary by the Principal of the Medical College, in order that the number of students may be increased from 115 to 160, and in another letter of the same date he repeats his views regarding the educating capabilities of the Medical College, and submits in their support certain information regarding the working of the Calcutta Medical College.

13. In his letter, dated 18th April 1874, he submits similar information regarding the Bombay Medical College.

14. In his letter, dated 4th July 1874, No. 295, Dr. Balfour recapitulates the recommendations contained in his letters of the 23rd October 1873, No. 407, and 2nd February 1874, No. 43, and enters into further details necessary to admit of the disposal of the question of the entertainment of the lower of the two grades of Civil Medical Officers recommended by him.

15. In his letter, dated 1st July 1874, No. 118, the Sanitary Commissioner for Madras submits proposals with regard to Medical Education and the regulation of the Medical Profession in Southern India, and also offers some observations on the practical effects of the Order of Government above quoted that officers of the Hospital Apprentice or Warrant Grades should alone be considered qualified for independent charge of Hospitals and Dispensaries.

16. The first question calling for decision is the provision of Medical Officers for the existing Provincial Services, for the old Provincial Dispensaries lately transferred to Municipalities and Local Fund Boards, and for the Dispensaries of the same kind recently established by these bodies. The Government consider that for the present, at any rate, no distinction need be made between those entertained for Provincial and for Local Service, all being entertained on one establishment for General Service. The provision of pay and pension from the various sources presents no difficulty under existing rules, though a few matters of detail will probably present themselves for decision from time to time, and it may also eventually be necessary to consider whether the Local bodies shall be called on to pay any portion of the cost of training.

17. As regards the nature of the education required for the new class of medical subordinates, there seems to be no reason why the qualifications possessed by the present incumbents of the posts which they will be required to fill should not be adopted. That at least two classes of officers are required seems unquestionable, and the question of the class which shall be entrusted with the charge of Dispensaries can be more conveniently considered when deciding on the number of each class to be employed. Both classes must be entertained for service either under the Government directly or under Municipal or Local Fund Boards, the higher class being styled "Civil Apothecaries" and the lower "Civil Hospital Assistants," their education being in accordance with the course at present prescribed for the Second and Junior Departments in the Medical College, respectively. The entrance test for the higher grade shall be as a rule the Matriculation certificate with a pre-collegiate training for one year, but in the event of a sufficiency of matriculated candidates not being forthcoming, the Government will not object to Dr. Balfour's recommendation that the present Departmental Examination test should be accepted, it being however understood that, in the latter case, the candidates shall be required to undergo a second year of pre-collegiate training. The present rules as regards age, certificates of moral character and physical

fitness, etc., should be followed generally, but no candidates for the higher grade should be accepted under the age of eighteen. For the lower grade, the Departmental test and two years pre-collegiate training will be retained, as it is hardly likely that matriculated candidates will be available.

18. The stipends to be allowed to students need not, in the opinion of Government, be so high as recommended by Dr. Balfour, and the following rates only will be sanctioned for the present:—

Civil Medical Officer Grade.

Pre-collegiate, Rupees 15 (per mensem).
Collegiate, Rupees 20 (per mensem).

Civil Hospital Assistants.

Pre-collegiate, Rupees 7 (per mensem).
Collegiate, Rupees 9 (per mensem).

19. The Governor in Council thinks it probable that the experience of a few years will show that the practice of granting stipends to Civil Students may safely be dispensed with altogether.

20. As regards the emoluments of the higher class of practitioners, Dr. Balfour has suggested two methods—one based on a classification of charges, and the other (to which he gives the preference) on the principle of a graduated salary according to service with an additional allowance for independent charge. Under the first arrangement Dr. Balfour divided the charges into three classes on Rupees 70, Rupees 80, and Rupees 100, and he thinks it "probable that applicants of average ability, etc., could be had for these rates." Under the second system Dr. Balfour proposes salaries of Rupees 50, Rupees 100, and Rupees 150 after each septennial period of service, with an allowance of Rupees 50 for independent charge and he has "no doubt whatever [illegible] that good ability, etc., can be had for these terms," and he strongly recommends the adoption of this principle. This latter system has many undoubted advantages, but the great expense it eventually involves when adopted without some restriction as to the numbers receiving each rate is a very serious objection. A very large proportion of the men will hold independent charges, and thus the rates of salary would practically range from 100 to 200 Rupees, rates which are considerably in excess of the emoluments of other corresponding branches of the Public Service. In no other such branch of the Civil Administration does an officer on entry receive such high allowances, and in none is he assured such certain promotion to higher rates. It must be remembered, also, that for the present, at any rate, these men are not only to receive a costly education gratuitously, but are to be paid during the five years they are receiving instruction, and are sure of fairly lucrative employment with pension and other incidental advantages. The Government are, therefore, of opinion that the following rates will suffice for Civil Apothecaries, the promotion from grade to grade being determined by periods of service until the establishment becomes more fully developed, after which restrictions will be made regarding the number of each grade, and promotion given only on the occurrence of vacancies. In any case promotion must be made dependent on periodical examination:—

	Pay.	Charge Allowance.
	Rs.	Rs.
First two years	50	...
3rd to 7th year	50	25
8th to 14th „	75	50
15th to 21st „	100	50
22nd to 28th „	125	50
28th to 35th „	150	50

21. The Civil Hospital Assistants will be similarly graded with salaries of Rupees 20, Rupees 30, and Rupees 40, respectively, and a charge allowance of Rupees 10, promotion being for the present determined by septennial periods of service subject to periodical examination of fitness.

22. It will be understood that the above scale of salaries is subject to the sanction of the Government of India who have already decided that the salaries

of Civil Medical Officers should be somewhat lower than those drawn by Military Medical Subordinates.

23. Dr. Balfour's recommendation that successful candidates should be apprenticed until they pass through College and bound over to serve Government for a series of years after receiving their certificate of qualification is approved, and the Governor in Council would fix the period of such service at seven years. The suggestion that the best qualified candidates shall be selected without reference to descent is also approved.

24. As regards the number of pupils to be in future admitted annually to the College, the most expedient course will be to leave the question for decision from time to time on the recommendation of the Surgeon-General, who will be guided by the varying circumstances of the case, and the probable requirements of the service as developed in the process of time. In G.O. dated 14th September 1874, No. 1009, the Government, pending further consideration of the papers now recorded, sanctioned the entertainment of twelve students for the higher, and thirty students for the lower grade of Civil Medical Subordinates. This number is far below what is recommended * by Dr. Balfour in paragraph 16 of his letter, dated 2. th May 1874, No. 239, but it was arrived at after careful consideration of his proposals which appeared to Government to be in excess of what is necessary, *first*, in assuming that Local Funds were elastic enough to permit of the continued establishment of twenty new Dispensaries per annum, a number which the Government believe has never yet been reached in any one year; and, *second*, in taking into consideration the full number of new Dispensaries in estimating the number of students required for each grade,† while the vast majority of newly-established Dispensaries will not give employment for more than one medical subordinate.

* Higher grade 40
Lower „ 66

† Letter, dated 23rd October 1873, No. 609, paragraph 5.
Letter, dated 29th May 1874, No. 239, paragraph 16.

25. To enable the Surgeon-General to estimate satisfactorily the number of students to be entertained in the ensuing year, it seems necessary to come to a decision on the question again raised as to whether the charge of Dispensaries must be restricted to the officers of the higher grade as decided in G.O. 17th September 1873, No. 960, or whether such charges may not in some cases be safely entrusted to those of the lower grade. The principal objections to the recent decision of Government appear to be—

First.—That the higher grade, as at present constituted, consists almost entirely of Europeans and Eurasians enlisted for service with European troops, and who are not well qualified for the charge of Dispensaries, attended almost entirely by natives; and

Secondly.—That the pay drawn by officers of the higher grade is more than can be afforded by the Local bodies on whom the extension of the Dispensary system depends.

As the best qualified candidates are now to be selected, irrespective of race or creed, the first-mentioned objection need not be considered in calculating future requirements, but the second is a practical difficulty. Dr. Balfour has pointed out in his letter, dated 26th February 1874, No. 84, that under G.O. dated 20th February 1869, a considerable improvement was made in the course of instruction given to Hospital Assistants, while in his letter, dated 7th July 1874, No. 118, Dr. Cornish draws attention to the fact that a practical experienced officer of the Hospital Assistant grade may be more suited to the charge of a Dispensary than a youth of the higher grade fresh from College. On receipt of somewhat similar representations in individual cases, the restriction laid down in G.O. dated 17th September 1873, No. 960, has already been waived, and as the funds available for the establishment of new Dispensaries are yearly becoming less, the Governor in Council considers that, under all the circumstances of the case, the entertainment of officers of the higher grade may be restricted for the present to the number required to make good the annual decrement, and the absorption for military purposes.

26. The second question involved in these papers, viz., that of providing, by means of Medical Schools throughout the country, a staff of trained medical practitioners, to meet the wants in this respect of the population at large, is a distinct and very serious question involving grave financial considerations which for the present, at any rate, preclude the Government from inaugurating any scheme which may seem to pledge them to an indefinitely-increasing annual expenditure. A small step towards the attainment of the object desired has been made by the issue of G.O. dated 11th January 1875, No. 6, and G.O. dated 23rd February 1875, No. 418, the former of which provides for the education of female Medical students at the Medical College, while the latter authorizes the entertainment of apprentices at District Hospitals and Dispensaries.

27. As the existing surplus of Military Medical Subordinates is so great that it will not be necessary to enlist new students for several years to come, it appears that, for the present, almost the whole teaching staff of the College will be available for Civil students, and that consequently, in the absence of any considerable increase in the number of private students, no immediate measures are called for in the direction of increasing the College Staff or altering present arrangements as recommended by Dr. Balfour, for the fuller utilization of the existing teaching power. The question may be brought forward again on occasion requiring.

D. F. Carmichael,
Offg. Chief Secretary.

Letter—**from D. F. CARMICHAEL, Esq., Officiating Chief Secretary to the Government of Madras.**
To—**the Secretary to the Government of India, Home Department.**
Dated—**Fort St. George, the 7th May 1875.**
No.—**1002, Financial.**

In reply to your letter, dated 13th August 1873, No. 39—2606, I am directed to forward the marginally-noted Proceedings of this Government, passing orders on the organization of a Civil Medical Subordinate Establishment for Provincial and Local Services, and to state that the scale of pay recommended is as follows :—

G.O. dated 7th May 1875, No. 1001.

Civil Apothecary Grade.

	Pay.	Charge Allowance.
	Rs.	Rs.
First two years	50	0
3rd to 7th year	50	25
8th to 14th „	75	20
15th to 21st „	100	50
22nd to 28th „	125	50
28th to 35th „	150	50

Civil Hospital Assistant Grade.

First two years	20	0
3rd to 7th year	20	10
8th to 14th „	30	10
After 14 years' service	40	10

2. I am further directed to state that promotion to a higher grade on the completion of septennial periods of service is recommended only as a temporary arrangement until the service becomes fully developed, when it is proposed to introduce restrictions as to the number of each grade, and to give promotions only on the occurrence of vacancies.

15

Establishment of Medical Subordinates as it stood after revision under the orders of Government Public Department No 960 of 11th September 1870.

	Revised Establishment			
	Apothecary	Asstt Apothy	Recrd Hospl Appts	Hospl Asstt.
Governor's Household	"	1	"	"
General Hospital Madras	1	3	"	2
Eye Infirmary	1	"	"	"
Lying in Hospital and Dispensary	"	2	"	1
Lunatic Asylum Madras	1	1	"	"
Do. Calicut	"	"	"	1
Do. Vizagapatam	1	"	"	1
Do. Trichinopoly	"	"	"	1
Lepers Hospital Madras	"	1	"	"
Do. Pallipoor	"	"	"	1
Port and Marine Surgeon's Department	1	"	"	"
1st, 2nd and 4th Districts Residency	"	"	"	3
3rd District and Civil Asylum Asylum	1	"	"	"
Lawrence Asylum Octacamund	"	1	"	"
Penitentiary	1	"	"	"
W. M's Grand Jail	"	"	"	1
Medical College	4	"	"	1
Lock Hospital Madras	1	"	"	3
Civil Dispensaries at				
Nuggur	"	"	"	1
Cochin	"	"	"	1
Cooty	"	1	"	"
Kampta	"	"	"	1
Kolagherry	1	"	"	"
Mercara	"	"	"	1
Octacamund	"	"	"	2
Secundrabad	"	"	"	1
Carried over	13	10	-	22

			Revised Establishment			
			Apothy	Asst Apothy	Vaccr & Hospl Apprs	Hospl Assts
Provincial Jails (continued)			13	10	"	22
Revenue Establishments						
Arcot, North	Chittoor	Collector	"	"	"	1
	Vellore	Sub Colr	"	"	"	1
Arcot, South	Cuddalore	Collector	"	"	"	1
	Vindachellum	Sub Colr	"	"	"	1
	Tindevanum	Md Asst Colr	"	"	"	1
Bellary	Bellary	Collector	1	"	"	"
	Anantapore	Sub Colr	"	"	"	1
	Penconda	Md Asst Colr	"	"	"	1
Canara, South	Mangalore	Collector	"	"	"	1
Coimbatore	Coimbatore	Collector	"	"	"	1
	Erode	Sub Colr	"	"	"	1
Cuddapah	Cuddapah	Collector	"	"	"	1
	Muddanapilly	Sub Colr	"	"	"	1
Ganjam	Chatterpore	Collector	"	"	"	1
	Chicacole	Sub Colr	"	"	"	1
Godavery	Cocanada	Collector	"	"	"	1
	Rajahmundry	Sub Colr	"	"	"	1
Kistna	Masulipatam	Collector	"	"	"	1
	Guntoor	Sub Colr	"	"	"	1
	Vinnikondah	Sp. Colr	"	"	"	1
Kurnool	Kurnool	Collector	"	"	"	1
	Cumbum	Md Asst Colr	"	"	"	1
Madras	Sydapet	Collector	"	"	"	1
Madura	Madura	Collector	"	"	"	1
	Dindigul	Sub Colr	"	"	"	1
	Ramnad	Md Asst Colr	"	"	"	1
Malabar	Calicut	Collector	"	"	"	1
	Tanlghat	Md Asst Colr	"	"	"	1
Carried over			14	10	"	49

			Revised Establishment			
			Apothy	Asst Apothy	Vaccr & Hospl Apprs	Hospl Assts
Provincial Jails (Continued)			14	10	"	49
Nellore	Nellore	Collector	"	"	"	1
	Ramnapatam	Sub Colr	"	"	"	1
Salem	Salem	Collector	1	"	"	"
	Coimbatore	Sub Colr	"	"	"	1
	Tripatore	Md Asst Colr	"	"	"	1
	Namkul	Deputy Colr	"	"	"	1
Tanjore	Tanjore	Collector	"	"	"	1
	Negapatam	Sub Colr	"	"	"	1
Tinnevelly	Tinnevelly	Collector	"	"	"	1
	Shermadevi	Sub Colr	"	"	"	1
Tricliniopoly	Tricliniopoly	Collector	"	"	"	1
Vizagapatam	Vizagapatam	Collector	"	1	"	"
		Md Asst Colr	"	"	"	1
		Do Asst Colr	"	"	"	1
	Jeypore	Asst Agent	"	"	"	1
Provincial Jails at						
Bellary			"	"	"	1
Berhampore			"	"	"	1
Calicut			"	"	"	1
Cannanore (Central)			"	"	"	2
Chingleput			"	"	"	1
Chittoor			"	"	"	1
Coimbatore (Central)			"	"	"	2
Cuddalore			"	"	"	1
Cuddapah			"	"	"	1
Guntoor			"	"	"	1
Guindy			"	"	"	1
Kurnool			"	"	"	1
Carried over			15	11	"	76

	Revised Establishment			
	Apothy	Asstt Apothy	Lascar Hospl Appts	Hospl Asstts
Provincial Service (Continued)	15	11	-	71
Provincial Jails (continued)				
Madura	.	.	.	1
Mangalore	.	.	.	1
Masulipatam	.	.	.	1
Nellore	.	.	.	1
Nilgherries Ootacamund	.	1	.	.
Rajahmundry (district)	.	.	.	1
Do (Central)	.	.	.	2
Salem (Central)	.	.	.	2
Tanjore	.	.	.	1
Tinnevelly	.	.	.	1
Trangambar	.	.	.	1
Trichinopoly (district)	.	.	.	1
Do (Central)	.	.	.	2
Vellore (Central)	.	.	.	2
Vizagapatam	.	.	.	1
Police at				
Baliguda (& Asstt: agents Asstt)	1	.	.	4
Calicut	.	.	.	1
Collegal	.	.	.	1
Coimbatore	.	.	.	1
Cuddalore	.	.	.	1
Cuddapah	.	.	.	1
Ellore	.	.	.	1
Coonipore	.	.	.	1
Koraput (Assistant)	.	1	.	1
Kurnool	.	.	.	1
Carried over	16	13	-	108

	Revised Establishment			
	Apothy	Asstt Apothy	Lascar Hospl Appts	Hospl Asstts
Provincial Service (Continued)	16	13	-	108
Police (continued)				
Madura	"	"	"	1
Mangalore	"	"	"	1
Masulipatam	"	"	"	1
Nursipatam	"	1	"	.
Nursapore	"	"	"	1
Ootacamund	.	"	"	1
Sawatipore	"	1	"	.
Rajahmundry	"	"	"	1
Rannad	"	"	"	1
Salem	"	"	"	1
Sulliamungalam (& Revenue Asstt)	"	"	"	1
Trichinopoly	"	"	"	1
Tinnanallay	"	"	"	1
Vellore	"	"	"	1
Vizianagrum	"	"	"	1
Vizagapatam	"	"	"	1
Miscellaneous				
Engineers Asstt: Luckadie (Wynaad)	"	"	"	1
Do Tambrachurry Pass	"	"	"	1
Do Sulliamungalam	"	"	"	1
Do Bezwanada (& Civil Dispy)	"	1	"	.
Do Ponalaishweram	"	"	"	1
Resident at Travancore	"	"	"	1
Revenue Survey, Settlement & Demarcation	"	"	"	9
Geological Survey	"	"	"	1
Trigonometrical Survey	"	"	"	1
Vaccine Depot Madras as Superintendent	"	"	"	1
Do Laccadive Islands	"	"	"	1
Carried over	16	16	"	140

	Ranks	Regtl Staff Apptts	Regtl Staff Hospl	Hospl Assts
Carried Forward	16	11	.	140
Miscellaneous (continued)				
Civil Station of Chicacole	1	.	.	.
Do Chittoor	1	.	.	.
Do Rajahmundry	1	.	.	.
	19	11	.	140
Add 15 per cent for reserve	3	2	.	21
Total Madras Civil Department	22	13	.	161
Foreign Governments				
Mysore Commission	4	6	.	11
Nagpore Commission & Central Provinces	1	1	.	7
Pegu Commission including Andamans	2	4	.	6
Govt of India — Upper Godavery Works	.	.	.	2
Govt of India — Surveyor Genl's Department	.	1	.	.
Straits Government	.	2	2	.
Vizagapatam & Contingent & assigned Districts	3	7	1	9
Cochin Service	.	.	1	.
Foreign Governments	9	21	4	36
Madras Government	22	13	.	161
	31	39	4	196
Deduct the extra 10 per cent reserve provided in the Military Department for loan to the Civil Department	.	.	.	12
Total for Provincial Service	31	39	4	184

Fort Saint George
23rd October 1875

Edwd Balfour
Surgeon General
Surgeon General Med. Dept. Offg

12-2346

83

No. 407

Surgeon
OFFICE OF ~~INSPECTOR~~-GENERAL, I. M. D.,
Fort Saint George, 23rd October 1873.

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

To

The Chief Secretary to Government.
Public Department

SIR,

G. O. No. 930 of 5th September 1873 ordered a report to be made as to the Medical requirements of the Civil Department in excess of the supply obtainable from the Military Department. Also ordered a report to be made as to the arrangements proper for meeting the additional demand.

2. I have appended to this letter a statement showing in detail the requirements of the Provincial Services, and I beg to mention that, after providing for the Imperial Services the marginal numbers of attested Medical Subordinates remain surplus and therefore

Assistant Apothecary	Passed Hospl. Apprentice	Hospital Assistant.
52	46	244

therefore available for the Provincial Services and for Local Employ. Of these surplus subordinates the Provincial Services require the quantities as per marginal Note as the correspondence in Proceedings of Government No. 930 dated 5th September 1873 ordered that an addition of 25 per cent should be allowed to the Military establishment to meet its contingencies, any share portion of which was ordered to be loaned to the Civil Department, I have assumed 10 p.c. as the share portion which will allow * 12 to be thus borrowed, and the numbers of the Hospital Assistants to be required to be provided for the Civil Department will thereby be reduced from 196 to 184.

	Apothecary	Assistant Apothecary	Passed Hospital Apprentices	Hospital Assistant
	31	39	4	196
				* 12
	31	39	4	184

4. I further beg to place on the margin an abstract to shew that, after duly supplying the Imperial department and providing for the Provincial Services of the State, there are 125 attested Medical Subordinates, Surplus, available for Local Employ

	Apothecary	Assistant Apothecary	Passed Hospl. Apprentices	Hospital Assistant	Total.
Numbers actually present 15th October 1873	73	112	64	395	644
Imperial requirements	32	60	18	151	261
Provincial requirements	31	39	4	184	258
Surplus available for Local Employ	10	13	42	60	125

-ment Municipalities.

5. On the other point on which I am proposed to meet the additional demand, I have the honour to mention that there is no necessity to recruit either for Imperial or Provincial Services, because the 125 of existing Surplus with the apprentices and pupils who are in College and out of College will be sufficient for 9 or 10 years to come to meet all casualties both in the Imperial and in the Provincial Departments, and, as mentioned in last para, the 125 Surplus educated medical men can in the meantime be sent to the Municipalities

for

No 409

Office of Surgeon General Gun
Fort Saint George 23rd October 18

From

Surgeon General C. G. Balfour
Surgeon General Gun

To

The Chief Secy to Government
Public Department

Sir,

In para 9 of G.O. No 960 of 17th Septem
-ber 1876 the Right Honorable the Governo
in Council expressed the opinion, that
the order then issued would materially
affect the calculations as to the future
needs of the subordinate Medical De-
partment, and therefore resolved to refer
back the general question as to the num
-bers of recruits needed for it in future.

In the marginal letters I have
already reported on all relating to the
recruiting for the Military Department
and for the Provincial service of the State,
and the only point that remains to be
reported

No 401 / 18th Octr 1876 2.
No 407 / 23rd —do—
No 408 / 23rd —do—

* not in duty
in Pub. Dept

reported on is, as to the future wants of Local Funds and Municipal requirements.

3. With reference to this, I have the honor to mention that the Right Honble the Governor in Council correctly judged that alterations require to be made on the former report as regards the numbers of Medical men needed; but, besides that, the source from which the supply shall be received in future and the qualifications of the men entering for Local Medical Employ have been altered by the orders of Government N: 960 of 17th September 1875, para 7 of which commands that all Hospital Assistants, who are in sole or chief charge of Dispensaries, shall, with as little delay as possible, be recalled to general duty; that no men of the Hospital Assistant grade be in future entrusted with this responsible duty, and that Government will not in future sanction the employment

employment in a Dispensary of any male of the Hospital Assistant grade or class of qualifications, except in the capacity of an Assistant or Subordinate to a properly qualified Medical Officer. Under these orders of Government there will be required for Civil employ Medical men with two distinct classes of qualifications, the one of men educated to an extent sufficient for them to be appointed to the Medical charge of the Local Civil Dispensaries, and another class of men with inferior qualifications to be employed in these Local Dispensaries as Subordinates or Assistants to the properly qualified Medical Officers. I understand the present orders to indicate that an education equal to, or approaching, that which the Warrant grade are now receiving shall suffice for the Medical charge of Civil Dispensaries, and that instruction to an extent equal to what the

the Hospital Assistants are now receiving shall qualify for the Subordinate or Assistant position.

4. In the matter of the numbers of each class required I have the honor to place on the margin an abstract statement showing that, at the present moment, there are 7 Warrant Medical Officers surplus to all State and Local requirements, but there is, on the other hand, a deficiency of 2 in the Hospital Assistant grade, so that 5 of surplus is all that is on hand to meet the casualties for the next 12 months, and the Subordinate Medical Department will be as much tightened in the coming year as it has been for the last 2 years.

	Apothy	Assist Apothy	Asst Surg & Apothy	Hosp Assts
Local Employ requirements	6	13	85	62
Imperial do do	32	60	18	161
Provincial do do	31	39	4	184
Actually present	69	112	61	397
	70	112	64	395
	+4	-	+3	−2

5. With this information before Government I beg to report that the numbers with higher qualifications that will annually be needed to take charge of Civil Dispensaries will be 30, and this amount is based on the calculation that there will be about 20 new dispensaries every year, also 3 casualties annually amongst the Officers in charge of Civil Dispensaries, and a final out-turn of only 70 per cent of the number entertained. In the subordinate or Assistant class for Civil employ, who are not in independent charge, there are now 33 men serving, and to meet the decrement amongst them the surplus pupils under pre-

Hospital Apprentices	Native Medical Pupils
3rd year	9	-
2nd "	15	29
1st "	10	22
2nd "	10	60
1st "	-	-
		111

collegiate training and at College ⊗ will suffice.

6. The entertainment for the class with higher qualifications must be immediate, because the men for the higher qualifications will require to be

be retained in College for a longer period.

7. I therefore beg to recommend that if the above views be approved, I be permitted to submit hereafter a Notification, in suitable terms, calling for candidates for the higher qualified class. I think it will be recognized that the more highly qualified medical men should receive a higher rate of salary, but it will be observed in para 2 of Financial Resolution of Government of India № 1808 of 22nd July 1873, that the whole of the non Military Medical men are ordered to be designated Civil Hospital Assistants, and their salary is required to be less than that of Military Hospital Assistants. Nevertheless the Local Governments are required to fix the various rates. On this point I may allude to my letter № 695 dated 8th December 1874 in which I arranged the whole of the Local Medical charges into 3 classes, and I think that that was a reasonable mode of remunerating

Pub Dep't Sept 73–920

Pub Dep 13 May 72–340

remunerating the higher qualified Civil Hospital Assistants, who will hereafter be in independent Medical charge. The views I then expressed were, to have three classes of towns, with three classes of Civil Medical Officers on Rupees 100, Rupees 80 and Rupees 70. Under the views expressed by Government the designation of the Civil Medical men in charge might be "Medical Officer", and they might have Rupees 20 monthly suitable charge allowances to make up to the above salaries; and the Civil Medical men not in charge might be styled Civil Hospital Assistants, with salaries of Rupees 20 to begin with, and the pre-collegiate & collegiate stipends of both classes might be commenced.

I have the honor to be
Sir
Your most Obed^t & Hum^ble Serv^t

Edwar Balfour, Surgeon General
Surgeon General Ind. Med. Dep^t

Through the Director of Public Instruction

No 428

185

Office of Surgeon General &c.
Fort Saint George 10th November 1875.

From

Surgeon General R. G. Balfour
Surgeon General &c.

To

The Chief Secretary to Government
Educational Department.

Sir,

The Proceedings of Government of the 18th September 1875 contained one letter from the Director of Public Instruction and two from the Principal of the Madras Medical College on the educating capabilities of that Institution.

2. On the subjects submitted in the Director's letter I had, in 1871, a long consultation with him, and two meetings with the Acting Principal of the College, at one of which Mr Powell was present; and my two letters to Government, recommending that a larger number of medical men should be

1871 No 3125 25th Septr
1872 — 10, 12th Jany

No 43 —

From the 1875 Oct
Surgeon General
Chief Secretary to Govt
Public Department

No 428 dated 10th Nov 1875

Acct 25 —

Establishing Surgeons Assistant Surgeons &c. for the Lunacy Asylum for the Presidency

2

Expunged in future.

be educated, were written with their entire concurrence. Indeed Mr. Powell sent on my first letter with his approval, and subsequently, when my letter of 10th January 1872 was ready, he intimated to me his approval of it. These two letters were, in fact, joint communications.

3. The G.O. No. 572 of 6th December 1871 in para 4 approved of all that we had then recommended; authorised the entertainment of 55 additional pupils, gave authority for employing an additional assistant teacher, and ordered the needed expenditure to be budgetted for. The Educational Department, as well as this Office, received copies of that Government order. I took all action needed on my part; had the candidates examined, their papers valued by the Educational Department; entertained the qualified pupils, had them reported upon monthly by medical officers, sent to the

the Principal of the Medical College for valuation their half yearly examination papers, and finally whilst I was on sick leave the sanctioned numbers were about to be ordered into the College, and the Principal was warned accordingly. These, however, on this, the last step being taken, objections to the numbers were taken both by the Director of Public Instruction and by the Principal of the Medical College.

4. In all my representations to Government my aim has ever been to submit practical reports; with this object I had consulted with the Director of Public Instruction and the Acting Principal of the Medical College, had submitted to these officers my letters and obtained their approval before despatching them to Government. Nevertheless, in the middle of 1873, when the final action had been taken, with the object of carrying out the orders that Government

Government had issued in December 1871,
and the lads had to be warned to enter
College. Mr Lovell in paras 2, 3 and 4 of his
letter styles the batch to be sent to College
an extraordinarily large influx; says it
will be necessary to put another
assistant to the College, and suggests that
the batch for this year be reduced to 27.
The Principal of the Medical College,
amongst other points, also examines & says
the average of annual entries, asks for addition-
al teaching power for so large a class,-
an extra assistant teacher,-thinks it
would be better for the lads themselves
and for the convenience of the Medical
College if the batch be restricted to
the average number of pupils, and in
his second letter he adds, that "the
"Medical College cannot undertake to
"act as a substitute for the proposed
"Provincial Medical Schools without
"material amplification, involving very
"considerable expenditure on the part
"of Government."

5. I have the honor to submit to the
Right Honorable the Governor in Council
with reference to the objections now taken
that it was in the power of both Offi-
to make any representations that might
occur to them, during any part of the
interval that had elapsed since sanctio
for the increased numbers was given
by G.O. of 6th December 1871; and by the
examinations that have been going
on, the subject has been constantly
before the Acting Principal of the College
and the Principal who returned from
leave to Europe in the autumn of 187
The objections, however, now reopen
the question of the capabilities of the
Madras Medical College to supply the
country with Medical men, in number
sufficient to meet the current demand,
and as it has been reopened, I beg to
submit to Government the following
summary of previous correspondence
6. In the year 1867, the Government
of

of India asked if the Madras Medical College could undertake the education of a number of youths for service in Burmah, and my predecessor replied that such could not be done, because the Principal of the College had intimated his inability to receive more than 25 pupils each session. And this Government asked the Director of Public Instruction, why only 25 pupils could be received into the junior class of the Medical College in 1868, and what arrangements would be necessary in order to increase, by about twenty, the number of pupils either from this Presidency or from Burmah. To that question the Principal of the Medical College replied, that "the question is one simply "of assistants." And he added "x x" more the services, however, of another Assistant Apothecary placed at my disposal, satisfactory arrangements could be made to meet, without trouble, the requirements "of

1867 No. 414 dated 20th October. Suptdt to Government
—"— 1501 —"— 28th November Proof —"—
—"— 167 —"— 6th December. Principal Med. College
1868 —"— 11 —"— 7th January. Bor of Government.

"of Government"

7. In the past two years, I have, on two occasions, had the honor of submitting to Government the subject of the educating power of the Medical College, in connection with the demands of the country for educated Medical men, and on both occasions, in paras. 10 and 11 of my letter No. 313 of 1871 and para 5 of my letter No. 144 of 1872, I based all my calculations on the statement which the Principal of the Medical College had made in 1867, that the power to turn out a larger number of medical men was simply one of Assistants, and relying on that intimation the Government in 1871 issued all needed orders, to admit of a larger number being educated.

1871 No. 313 dated 20th September
—"— —"— 1st December &c.
1872 No. 10 dated 12th January
1873 No. —"— 18th April
} undisposed of.

8. The subject is one of importance, because, with the increasing demands from

from the country for medical men, when considering how to supply them, a primary point is to know where they can be educated. In September 1871 I brought to the notice of Government that the Education Committee which had been appointed in 1864 to inquire into the working of the system of education pursued in the Madras Medical College did not "consider that the Senior Department has fulfilled the objects of Government in instituting it." And I may now mention that of the pupils who, in the past 26 years, have been under training in the Senior Department, only 21 have as yet been sent out of College with medical degrees; and now when it had all been arranged for the education of a larger number in the Junior Department, at the moment of sending them to the Medical College, the Principal intimates other requirements than those stated by him in 1867,

points to other expenditure, and advises that the numbers to be now sent in shall be restricted to 27.

9. His intimation that an addition to the number of pupils would involve very considerable expenditure on the part of Government introduces a new element into the question of the Medical College education, and as in my letters of September 1871 and 12th January 1872 I had gone minutely into the money requirements, the Right Honorable the Governor in Council may perhaps deem it desirable to request the Director of Public Instruction to submit for the information of Government the highest number of each grade, Senior, Second and Junior, that the College can in each year suitably receive, and furnish for same an estimate of all needed money outlay. This is a pure numerical question but it is one upon which since 1871 all the calculations of Government have been made

made and all the action of this office has been taken, and until certain as to the numbers that can be educated at this institution and the cost of their education, there cannot be formed even an approximate estimate as to the extent to which it can be made to supply the demands of the country.

10. I have the honor to submit to the Right Honorable the Governor in Council that in 1867, my predecessor reported that the numbers which the Principal had stated, viz 35 fresh entries annually, was a quantity "found inadequate to "meet the ordinary requirements of the "Army and Civil Departments of this "Presidency". I now beg to report that the 27 fresh entries, to which the Principal has now suggested the entries for the current year should be restricted, are still more inadequate to meet existing increased demands. In the greater progress now making in all parts of the

To Government No 414 of 20th October 1869, para 8.

trained at the General Hospital is 70, at the Eye Infirmary 15, and at the Lying-in-Hospital 15= total 100 students.

5. A reference to the appended curriculum of study for Session 1873-74 will show that certain deficiencies of this training field are supplemented, in the case of 1st year apprentices of the Second Department, by utilizing the several non-clinical Hospitals of the Residency*. By this arrangement not an entirely satisfactory one - 15 additional clinical students are secured, thus raising the aggregate from 100 to 115.

* Native Infirmary
Royapet Dispensary
Vepery Dispensary
Penitentiary
Fort Dispensary
Body Guard
Native Regimental Hospitals.

6. The following table illustrates the combined working of the three Departments of the College as regards the proposed annual number of entrants, and the maximum numbers which will ultimately come under instruction in College. It may be remarked that the curricula of the Senior, Second, and Junior Departments extend over 5, 3, and 2 years respectively.

Designation	1st year No of entrants	2nd year No in College	3rd year No in College	4th year No in College	5th year No in College
Senior Department	2	4	6	8	10
Second — do	15	30	45	45	45
Junior — do	30	60	60	60	60

This table gives the maximum number possible, for it takes for granted that all candidates shall pass through their respective curricula, a result seldom if ever arrived at. The percentage of lapses in the Second and Junior Departments - calculated from the experience of the last five years - may be stated as 2 and 3 respectively per annum.

7. From these remarks it will be observed that no increase of the teaching-power of the College can act as a substitute for the necessary training in clinical Hospitals, and consequently that, if it be contemplated to extend the operations of the Medical College in the direction indicated by the Surgeon General, the first provision to be considered must have reference to a corresponding extension of the existing clinical opportunities. Other elements must also be considered, such as the teaching-power of the College, its actual accommodation, its arrangements by which three different departments are educated, partly at least, in common, and its supply of material for instruction - such, for example to specify one item, as that for Practical Anatomy.

Education 1873. Dept.

From

The Surgeon General

Encl.

To The Chief Secy to Govt

Department

No. 428 No. 456

Dated 10 November

18 —

Submitting remarks

on the small number

of Pupils admitted

into the Madras Med. C.

College in this year,

whilst a larger number

can be Educated and

arrangements for.

Finl. G.O. 442/1011 8/11/73 Se

C. 29-11-73

No. 44-

MEDICAL COLLEGE—1873-74.

CURRICULUM OF STUDY—WINTER SESSION.

SENIOR DEPARTMENT.

1st Year.	2nd Year.	3rd Year.	4th Year.	5th Year.
Winter ... Anatomy, Chemistry, Botany. Summer ... Practical Chemistry, Practical Pharmacy. — Dispensary and Surgical Wards	Winter ... Anatomy, Physiology, Materia Medica, Surgery, Clinical Surgery, Dissection. Summer ... Clinical Surgery, Practical Pharmacy. — Surgical Wards	Winter ... Physiology, Surgery, Clinical Surgery, Dissection. — Hospital Wards. Summer ... Clinical Ophthalmology, Operative and Minor Surgery, Comparative Anatomy, Microscopy. — Eye Infirmary.	Winter ... Pathology, Midwifery, Clinical Medicine, Operative and Operative Surgery. Summer ... Diseases of Women and Children, Organic Chemistry, Clinical Medicine, Medical Jurisprudence, Microscopy. — Medical Wards	Winter ... Medicine, Ophthalmology, Clinical Medicine, Dissection and Operative Surgery. Summer ... Clinical Ophthalmology, Operative Surgery, Hygiene. — Eye Infirmary.

SECOND DEPARTMENT.

1st Year.	2nd Year.	3rd Year.
Winter ... Anatomy, Chemistry, Materia Medica. Summer ... Practical Chemistry, Practical Pharmacy, Examinations by the Assistants. — Hospital Attendance	Winter ... Anatomy, Physiology, Surgery and Clinical Surgery, Medicine and Clinical Medicine, Dissection and Demonstrations. Summer ... Practical Pharmacy, Minor Surgery, Examinations by the Assistants. — Surgical and Medical Wards	Winter ... Medicine and Clinical Medicine, Surgery and Clinical Surgery, Midwifery, Ophthalmology, Dissection and Demonstrations, Medical Jurisprudence. Summer ... Hygiene, Diseases of Women and Children, Operative and Minor Surgery. — General Hospital, Eye Infirmary, and Lying-in Hospital

JUNIOR DEPARTMENT.

1st Year.	2nd Year.
Winter ... Anatomy, Materia Medica, Examinations by the Assistants. Summer ... Outlines of Physiology, Practical Pharmacy, Minor Surgery. — By the Assistants. — Museum, Laboratories of the General Hospital, Dining Table Discussions	Winter ... Medicine, Clinical Medicine, Surgery, Clinical Surgery, Midwifery, Dissection, Examinations by the Assistants. Summer ... Hygiene, Minor Surgery by the Assistants, Examinations by the Assistants. — General Hospital, Eye Infirmary, Ophthalmic, Lying-in Hospital, Dissecting Room

DAILY ORDER OF INSTRUCTION

Days.	8 to 10.	10 to 11.	11 to 12.	12 to 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.
Monday	Dissections	Botany	Pathology, Materia Medica	Anatomy	Chemistry, Examination in Anatomy, 3rd Class	Physiology, Midwifery	Medicine, Examination in Anatomy, Junior Class	Surgery, Examination in Chemistry
Tuesday	Do.		Materia Medica	Do.	Do. Ophthalmology	Physiology, Midwifery	Do.	Surgery, Examination in Materia Medica
Wednesday	Do.		Pathology, Materia Medica	Do.	Chemistry	Physiology	Medicine, Examination in Materia Medica	Surgery, Examination in Chemistry
Thursday	Do.	Botany	Materia Medica	Do.	Chemistry, Examination in Anatomy, 3rd Class, Ophthalmology	Physiology, Midwifery	Medicine, Examination in Anatomy, Junior Class	Surgery, Examination in Materia Medica
Friday	Do.		Materia Medica, Ophthalmic	Do.	Chemistry, Examination in Anatomy, 3rd Class	Midwifery	Do.	Surgery, Examination in Chemistry
Saturday	Do.							

The Winter course commences on the 1st of October and terminates on the 31st of March; the Summer course commences on the 1st of April and terminates on the 30th of June.

The proportion of Examinations to Lectures shall not fall below one in three in the second session, whether those courses be delivered during Winter or Summer Session. Towards the close of each course of Lectures there shall be held a "concentrated review," which shall include Examinations in all the subjects lectured upon.

Searched Examinations of all the Junior Students shall be made by Committees of Professors at the end of every Session. These are not to interrupt the Students from such Examinations in Chemistry and Materia Medica as the Final Examining Committee may consider necessary to elicit the Student's knowledge of the Application of those sciences to practice, as no credit is due to him for not exercising those studies during the interval.

GEORGE ARTIS, M.D.

Principal.

Jean de Serv. Mem. Hist. de 45-

de Thou. 4 to 3.

the country, it is not possible to indicate with certainty the actual numbers that may be required from year to year, but the Education Committee, in 1869, estimated that 4,000 educated medical men were then needed for the country, and my predecessor named 8,500 as the number required, and these are quantities which the average of 27 entries a year would never overtake, - as, indeed, such a limited number would not even meet the current requirements.

Committees of 1869. Report para 4. page 6. Inspectors Report to Government No 17 of 17th January 1870 Para 2.

11. As in all my previous letters on this subject in 1871 and 1872 the Director of Public Instruction and the Acting Principal of the Medical College and myself were in consultation, and my two letters received approval of both officers, the Right Honorable the Governor in Council may prefer that this should be sent through Mr. Powell, who will doubtless wish at the same time to submit data, on which Government

Government can come to a decision.

I have the honor to be
Sir
Your most obed.t Servt.

Edwd. Balfour Surgeon General
Surgeon General Indn. Med.l Depn.

No 203. Madras Medical College
25th November 1873

From The Principal
Medical College

To The Director of Public Instruction
Madras

Sir,

With adverteence to the Proceedings of the Director of Public Instruction, No 2275 dated 11th November 1873, giving cover to copy of a communication addressed to the Chief Secretary to Government by the Surgeon General Indian Medical Department No 4208 dated 10th October 1873 I have the honor to submit the information and remarks therein called for.

2. In para 9 of the communication referred to it is stated to be a matter of importance that Government should be "informed as to the highest number of each grade Senior, Second, and Junior which the College can, in each year, suitably receive" and that "an estimate of all needed money outlay" should be placed before it.

3. The maximum number of students of all departments which the Medical

College can educate efficiently, under existing rules, is 115. Distributed in Departments this aggregate would represent 10 students under training for the University, 45 European and East Indian Apprentices under training for the Apothecary grade, and 60 native pupils under training for the grade of Hospital Assistant. The expense to Government of this maximum number would amount, per student, to Rs 508 per annum.* The annual entrants of the Senior, Second, and Junior Departments, under the specified conditions, would amount to 2, 16, and 30 respectively.

4. The aggregate of 115 is thus arrived at. All students of the Medical College in the several Departments are required to pass through courses of clinical instruction as an indispensable part of their Medical education. This practical training is carried on at the clinical Hospitals, marginally noted by the 4 clinical Professors. The capabilities of these institutions for clinical instruction determine the number of students which the Medical College can undertake to train efficiently. The maximum number of students which can be so

*This sum does not include the expenses of the pre-collegiate classes or those of the Surgical Professorship.

General Hospital 2
Clinical Professors
Eye Infirmary — 1
Lying in Hospital — 1

115 Nos.

8. In para 6 of the communication under consideration the Surgeon General refers to a letter of mine, No. 167 dated 6th December 1867, in which, to the question put to the Director of Public Instruction as to "what arrangements would be necessary in order to increase by about 20 the number of pupils either from the Residency or from Burmah," the reply is given, that "the question is one simply of Assistants", and further, that "were the services of another Assistant Apothecary placed at my disposal satisfactory arrangements could be made to meet, without trouble, the requirements of Government." In connection with this expression of opinion it will be remarked that the question in 1867 was one affecting simply the admission of 20 additional students to the Junior Department, and that this proposal preceded the alterations which added new subjects to the Curriculum of that Department, and preceded also the revised arrangements for clinical instruction at the General Hospital, which were brought into operation in 1868, shortly after I became Physician to that Institution

Q. The marginal extract from a letter No 157 dated 9th March 1869, addressed to the Director of Public Instruction shews that the authorities have had before them a more recent expression of my views and so late as the 1st of May 1871 the acting Principal Mr Chisholm brought the same views urgently to the notice of the Surgeon General in a demi-official letter from which the following paras are extracted.

"Clinical Instruction is perhaps the most difficult point in this somewhat difficult matter. At present there are 30 students attending the Medical and 32 the Surgical Clinique at the General Hospital.

"Any augmentation of these numbers is most inadvisable. A question of this kind arose before and Smith suggested that the Native Infirmary be utilized for this purpose and that the Surgeon of that Institution be paid Rs 200 per mensem the salary of a Minor Professorship for giving clinical instruction. If this were done I think the precollegiate students must be withdrawn from the Institution.

Then there comes the whole question of cost. The Precollegiate students must be paid during their College course and during their precollegiate course, if they have one. [And here let me say again, it would be unfortunate interference with our College regulations a retrograde step to admit lads without any previous training.] The staff for (of extra apistants must be taken into account, and unless there are supernumeraries their regular pay would have to be included. In fact the latter would have to be drawn at College and would be considered as a part of its expenses. Add the expense to be incurred for clinical

x 6th I am however of opinion that to prevent the overcrowding of the General Hospital (to which upwards of sixty young men are at present attached, it will be absolutely necessary largely to utilize the clinical advantages of the Native Infirmary in which case it would be necessary to remunerate the Surgeons in charge of that Institution, and conditions of undertaking the clinical training of these students, and probably also to provide for an additional Medical Subordinate being attached to that Institution. Besides these various items of expenses, I would solicit attention to the greatly increased expenditure of medicines in the Practical Pharmacy classes; of apparatus for the Minor Surgery classes; of stationery (including paper, journals, pens, ink)) to the increased expenditure on account of prizes; and to the increased clerical labour which will fall upon my Office in consequence of the operations of this scheme.

These sums I have approximately stated in Appendix No 3"

Instructions and you have a goodly annual sum.

10. Having placed on record my opinions in 1869, and having shewn that those opinions were brought prepingly to the notice of the Surgeon General in 1871, I do not feel that I can be held responsible for conclusions arrived at during my absence in England, or blamed, in 1873, for placing the question in what appeared to me to be its true light (when 56 students instead of 27 were on the point of being ~~to be~~ drafted into the Junior Department in October of that year), even tho my action ran counter to the arrangements of the Surgeon General, and led to the suspension of the Order opposed, on the Recommendations of that Officer, by Government.

11. The question now, be it observed, is one longer one affecting the admission to College of some 20 extra members of the Junior Department, but it is one which - as described by the Surgeon General - simulates the capabilities of the College "to supply the Country with Medical men" to supply, in other words, those 8,500 medical men for the training of whom the Committee in their

Vide Letters dated 24th July and 2d August 1873 Nos 89 & 98.

19 225

Report, recommended the organization of four Provincial Vernacular Medical Schools, with their professional staff, and collegiated dispensaries and hospitals -

12. I trust you will now be satisfied that the opinion I expressed in my letter noted in the margin, to the effect that "the Medical College cannot undertake to act as a substitute for the proposed Provincial Medical Schools without material and pecuniary considerable expenditure on the part of Government" is one justified by the facts of the case.

I have the honor to be,
Sir,
Your most Obed[t] servant

R. Lamb, M.D.
Principal

× Vide Proceedings and Order of Government No. 1057 dated 30th July 1869.

× No 98 dated 2d August 1873

Office of the Director of
Public Instruction,

No. 2375. Madras, 27th November 1873

From

THE DIRECTOR OF PUBLIC INSTRUCTION,
Madras.

To

THE CHIEF SECRETARY TO GOVERNMENT,
Fort Saint George.

Sir,

I have the honor to submit a letter to your address from the Surgeon General Indian Medical Department, No 428 of the 8th instant, which that officer forwarded for same for consideration.

2 On receiving Dr Balfour's communication I sent it to the Principal of the Medical College for his remarks and to be laid before the Syndicate which Government would be pleased to constitute for the purpose of considering Dr Smith's No 208 of the 20th instant forwarding such evidence as he considered necessary.

3 I think it right to remark that, in my letter No 1808 of the 28th September 1871

1871, in which among other Papers Government Order No. 372 of the 6th December 1871 was handed

I took care to point out that the question under consideration was not simply one of assistants, and that because a certain addition might be made to the number of pupils in one of the Departments of the Medical College with no further action than the posting of a fresh assistant to the institution, it by no means followed that a double or treble addition could be made to the number of students provided a proportionate number of

I then pointed out to you in my letter No 1617 of the 17th August last, in answering the advisability of increasing the admissions as proposed by the Acting Surgeon General, to the necessity for the training of the pupils had not been completed. I therefore pressed to recommend the appointment of an extra assistant if the short period of 6 months for the training was not deemed sufficient

granted for keeping back the new pupils for a year; that on the 21st September last, the Acting Surgeon General wrote to me stating that there would be no necessity for increasing the teaching staff of the College during the session 1873/74.

5. It will be seen that the Principal of the College bases his limit of the number of pupils that can be received upon the means available for clinical instruction. I must say this is an element of the calculation which should not be taken into account; but it is evidently an element of the highest importance —

I have the honor to be,
Sir,
Your most obedient servant

W. B. Powell
Director of Public Instruction

No. 43

Surgeon
OFFICE OF INSPECTOR-GENERAL, I. M.
Fort Saint George, 28 February 1

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

To

The Chief Secretary to Government,
Public Department,
Fort Saint George.

Sir,

In paras 3 and 4 of my letter, No 409 of 23d Octo
1873, I had the honor to indicate the action that wo
be needed to carry out the orders of Government, as
set in paras 6, 7 and 8 of G.O. No 900 of 17th September
I then mentioned that there would be required for Civ
employ, Medical men with two distinct classes of qualifi
tion one consisting of men educated to an extent sufficie
for them to be appointed to the Medical charge of the
Local Civil Dispensaries, with another class of medic
men of inferior qualifications, as subordinates & assista
to the more highly educated medical officers, and the
orders of the 17th September indicated the opinion of Gover
ment to be, that, for the one, an education equal to, o
approaching, that which the Warrant Grade are now r
ceiving shall suffice for the Medical charge of Civil
Dispensaries, and instruction equal to what the Hospital
Assistan

Dept 1873.
From
The Director of Public Instruction,
Madras.
To
The Chief Secretary to Government,
Fort Saint George.
Dated 27th December 1873.
Received 29th " 1873.

No. 1035.
Enclosures 1
No. 3376

Jan 6th 1874.

Surgeon

Assistants are now receiving shall qualify for the sub-
-ordinate or Assistant position. I mentioned
in para 4. that of those with the higher Qualifications, thirty
would be annually needed, and, in paras 5 and 6, I
requested permission to call for 30 Candidates, because
their entertainment was immediately required.

In para 6, I pointed to the Financial Resolution of
the Government of India, № 1808 of 22d July 1873, in which
a body of Civil Medical men were ordered to be styled
Civil Hospital Assistants, with salaries smaller than are
allowed for Military Hospital Assistants; but for the
highly educated men, whom Government had now
ordered to be trained for Civil employ, I again re-
commended the proposal which I had made in
my letter, № 395 of 8th December 1871, to arrange the
Local Medical Charges into three classes on Rupees 100,
Rupees 80, and Rupees 70, or that their pay should be Rs 20,
when not in charge, with allowances, when in charge, up to
Rupees 100, Rupees 80, and Rupees 70. I further recommend-
-ed that, while under training as pre-collegiate and as
Collegiate students, their stipends should be commensu-
-rate with their higher education, and that their
designation, when educated, might be "Medical
Officers."

2. Since then, I have been in communi-
-cation with the Principal of the Medical College, through

1873	№ 6939	of 15th November	to the Principal	
"	" 214	" 5th December	From	"
"	" 3578	" 16th	" To	"
1874	" 233	" 13th January	From	"

the Director of Public Instruction
and the Principal and I ha
on one occasion conferred, in
order to dispose of a doubtful point. In the letter which
I addressed to the Principal, I explained the pres
standard of requirements that Government had
indicated, mentioned that about 30 of the higher
educated men would be annually needed, and
submitted for the Principal's approval, two alternative
courses of Curricula, and, at the same time, if he did
not approve of either, I invited him to propose me
the University to re-establish a degree of Licentiate
of Medicine.

3. The Principal, in his reply, has mentioned
that the existing curriculum for the second Department
in the Medical College, fulfils all the conditions pre-
-scribed for the new class of Civil Medical men,
and, in following that, he says there can be no
difficulty in the way of supplying annually
30 passed students, for which number no ad-
-dition to the existing establishment is needed; he
considers that the entrance test should be the
Matriculation Certificate, with which there should be
one

Department that those who come from the warrant grade be on the pay and allowances of the [illegible] above Department. And in the matter of pension, that those who come from the warrant grade retain their right to Military pensions and Lord Clive's Fund, and those who come from the Hospital Assistant Grade even now are pensioned under the Uncovenanted Service Rules, and this mode of pensioning them should be continued.

11. In all the above remarks I have written on the supposition that the students who will be attending the classes in the Curriculum which I have proposed, are intended to be servants of Government and have come under a bond to serve Government. I propose that the bond should be entered into after the departmental literary test has been made, and the successful candidates declared, and that the individuals becoming servants of Government shall be apprenticed, until they pass through the College, and that they shall bind themselves to serve the State for ten years after receiving their Certificate of Qualification. This is in accordance with existing rules as regards the Hospital Assistant Grade, with the difference that these civil medical men, are proposed to serve the State longer.

12. It may, however, happen, that students may present themselves willing to study through this curriculum, on their own resources, without binding themselves to be Government servants

servants, in which case I recommend that permission be given.

13. If a private student fail to pass at the final Examination I recommend that he be permitted to continue to study further, or to abandon Medicine, as a profession,— the permission to study further will in no way be prejudicial to the individual, or to the Country, and the State will lose nothing by the concession.

14. Government may wish to have submitted a statement to show the relative cost of educating a Military student, as at present, to that which I estimate the new projected civil class may require. It is as per margin shown for the Military Medical Officer Rs. 2,667, and for the Civil Medical Officer Rs. 1,332 both of them being exclusive of the pay & of their share of the expenses of the College Establishment.

		Military	Civil.
Pay	1st Year @ 8×12 =	192	- 192.
	2nd Year @ 20×12 =	240	- 240.
	3rd Year @ 20×12 =	240	- 240.
	4th Year @ 25×12 =	300	- 300.
	5th Year @ 30×12 =	360	- 360.
Rations, at 8 As. pr. 5 years. =		600.	- "
Bedding and Clothing at Rs. 30 per annum pr. 5 years =		150.	- "
		Rs. 2,667.	Rs. 1,332.

In the cost of the Civil Student as will be observed, I have placed the expenses of two years' precollegiate study, but if matriculation be accepted as the test, and the precollegiate training be then reduced to one year, then one year's expenses, say Rs. 240, will be diminished

I have the honor to be,
&c.
Your most obedient servant,

Edwin Lawrence Surgn. Genl.
Surgeon General.
Indian Medical Dept.

No. 214

Madras Medical College
5th December 1873.

From

The Principal Medical College

To

The Director of Public Instruction
Madras

Sir

I have the honor to resubmit for your consideration, along with this my reply, a communication to my address from the Surgeon General Indian Medical Department.

2. You will observe that it is stated in para 2 of the letter under remark, that "for the next six or seven years there will not be any enlistments for the Imperial Service of the state." This is equivalent to the announcement that for the time specified, the second and Junior Departments of the College will be entirely suspended.

3. The Surgeon General proposes

that the Medical College shall undertake to turn out annually "Medical men suited for independent medical charge" to the number of 30, and he further indicates that their education should "be equal or nearly equal to that now bestowed on the students of the second Department." There is, moreover, the further stipulation that the college training shall "be conducted by Professors and Assistants as the students in the 2nd Department are now being taught." The Surgeon General also submits two curricula for report, adding "if neither of the appended curricula meet your views, I ask the favor of your framing a curriculum, such as you can recommend, of a kind such as you deem suitable for the country, and in following which the

number thirty might annually be sent out of College."

4 Under the circumstances referred to by the Surgeon General, namely, the suspension for the next 6 or 7 years of the second and junior Departments of the College, there can be no real difficulty in the way of meeting the wishes of that Officer, for in the first place the existing curriculum of the second Department fulfils all the conditions advanced by the Surgeon General, and in the second place there can be no difficulty in the way of supplying thirty passed students annually, unless the number of lapses during the three years course exceeds that of the batches hitherto educated in the second and junior Departments.

5. The number of Annual entrants, in order to secure thirty

passed students at the close of the third year, cannot be reckoned safely at a lower figure than 40, inasmuch as a decrement of 3 lads at the close of the 1st and 2d years of study and a failure of 4 at the final examination would leave precisely the number required.

6. The question of clinical training for the large possible class of 40+40+40=120 is one of the real difficulties in this arrangement. It may however be obviated by posting the students in their first year to the Hospitals and Dispensaries marginally noted, and by arranging that 6 months be passed at the Native Infirmary, and 6 months at the other hospitals and dispensaries. With a course of careful training at the Native Infirmary as per added, the defects of the arrangement would

	Students
Native Infirmary	20
Sub Dispensary	3
Leper "	6
Penitentiary	3
Dockyard	2
Native Regt Hospitals	6
	40

be still further lessened.

7. The remaining students, namely those of the second and third years, numbering about 70, lapses being deducted, could be trained at the General Hospital (56), Eye Infirmary (10) and Lying in Hospital (10) without inconvenience. Thus an Annual supply of well educated young men could be trained for the service of the Dispensaries now being erected under the Municipal and Local Funds Act.

8. The Surgeon General makes no allusion either to the preliminary literary examination which these lads are to pass before entering College, or to the nature & duration of their precollegiate course. Both points must be determined before I can venture to state definitely, whether or not the proposed College curriculum will suffice for the

1891 351

efficient training of these Municipal students. If I may be permitted to express an opinion on the point, I would indicate the matriculation examination of the University as the proper standard of general educational requirements, and one year of pre-collegiate training as the minimum which it would be advisable to sanction.

9 From my letter No. and date as per margin, 115 is given as the number which, under existing circumstances, can be efficiently educated, in College, according to calculations already given. The number of Municipal students actually present in College will never exceed 80, more probably will it fall short of this aggregate somewhat, leaving room still for the free students of the Senior Departments, who, until outlets

No 203 dated 25 Nov 1875

are available for them, are little likely to increase much above their present numbers.

10 I am unable to hazard any opinion as to the light in which the Syndicate and Senate of the University may regard the Surgeon Generals proposal to reconstitute a Licentiateship of Medicine, in connection with the University, in order to meet the requirement of these young men. I can see no objection to conferring the power of issuing to them certificates of qualification as Assistant Surgeons in connection with the Medical College. This well known grade would, I think, meet all the necessities of the case.

I have &c.a

(Sig.d) G. Smith LL.D.
Principal.

Forwarded to the Surgeon General
Indian Medical Department in
reply to his letter № 6939 of the 16th
November last.

Sd/ E. B. Powell
Director of Public Instn

9/12/73.

/ True Copies /

Sd/ Wm Lyon Surg Genl

Surgeon General
Indian Medical Service

Madras Medical College
№ 233 13th January 1874

From

The Principal
Medical College.

To

The Director of Public Instruction
Madras.

Sir

With advertence to the Proceedings of the Director of Public Instruction № 2537 dated 19th December 1873, giving cover to copy of a communication from the Surgeon General № 6939, I have the honor to submit the information and remarks called for.

2. In para 8 the Surgeon General remarks as follows "whilst replying to this letter, it would be of value, in all future inquiries of this kind, if the Principal would now state the highest numbers which the present staff of the Medical College, in any year, can receive to teach in the Senior, Second, & Junior Departments, and whether, and

what additional numbers could be taught by additions to the staff, and what additions to the building of the College, and what such additions might be. To the first of these questions I have already given a distinct reply in my letter No 203, dated 25th November 1873, paras 3 et seqq, and have also given the grounds upon which the conclusions are based. The total number of students which, under existing circumstances, can be efficiently educated in College is 115, viz 10 Senior Department students, 45 Second Department Apprentices and 60 Junior Department pupils. The capabilities for clinical instruction at the disposal of the College determine the aggregate number of students admissable to College

3. To the second of the questions it is less easy to furnish a satisfactory reply as the terms of the query

145

* Proceedings of Madras Government dated 27 August & 18th Sept 1873.

are somewhat indefinite. The addition of two clinical teachers to the staff of the General Hospital would nearly double the present number of clinical students at that Institution, without necessitating any addition to the College building, beyond what indeed is already required, increased accommodation for the Practical Anatomy and Practical Pharmacy classes. If the increment took place in the Senior and Second Departments no additional teaching power would be required, but this would not hold good in the event of the increment being made in the Junior Department of the College. The following tables will show the results.

existing clinical training field with 2 additional teachers.

Medical Wards.	25+25 =	50 pupils
Surgical "	25+25 =	50 "
Lying in Hospl		15 "
Eye Infirmary		15 "
Non clinical Hospitals		30
	Total	160 pupils

Medical College

Senior Department 3 classes at 2 each - 10 pupils
Second " 3 " 30 " 90 "
Junior " 2 " 30 " 60 "

Total 160 pupils

any number in excess of this would require increased clinical opportunities, considerable additions to the building, and a greater supply of practical Anatomy material than is at present available for the Anatomical classes of the Institution. As an element of efficient training the experience of the practical departments is as valuable and as necessary as the clinical practice of the Hospitals. These are the main points on which all efficient training of the students must turn.

4. In para 5 the Surgeon General remarks "I beg the favor of the Principals decision as to the curriculum which, in his opinion, is needed to

be

be followed by youngmen in the process of education, to be Civil Medical practitioners, and in view to their holding independent medical charge of Civil Hospitals." I have already stated in my communication marginally noted that "the existing curriculum of the second Department fulfils all the conditions advanced by the Surgeon General" and to that opinion I adhere.

1st 214 dated 5th Dec 1873 para 4.

5. It is proposed by the Surgeon General that the young men, who are to hold independent medical charge of the Civil Hospitals under the Municipalities, be required to pass a preliminary literary examination not exceeding that at present fixed for Candidates for the second Department of the College, and that subsequent to this examination they should pass through a

"English. A portion not exceeding thirty lines in length, selected from a standard English author will be given as an exercise in dictation. Ten errors in spelling (exclusive of technical and other unusual words which will not be counted) will exclude the Candidate from further competition. Bad marks will be

course of preliminary training for one year

6. I am decidedly of opinion that the Matriculation of the University should be fixed upon as the standard of preliminary general education. If this be sanctioned, three one years pre-collegiate course will suffice, but if the present special examination be made applicable to this new class of Medical students, then 2 years pre-collegiate course will be required to supplement the

assigned to defective handwriting

Meaning of words and phrases in grammatical construction of sentences and in grammar generally

Vernacular. Colloquial examination in one of the following vernaculars at the option of the Candidate.

Hindustani
Tamil
Telugu

Care will be taken to ascertain the facility passed by each candidate of making himself understood in the Vernacular which he has selected.

History. The leading facts of the History of England and of India

Geography. Geography of India in particular

Arithmetic. The first four rules of Arithmetic, Vulgar and Decimal fractions, & Proportion

Algebra. Algebra including Addition, Subtraction, Multiplication and simple Equation.

Euclid. The first book of Euclid.

very low demands in English which characterize the said examination

7. The matriculation examination is to be preferred, because its general education requirements are higher because these higher requirements are necessary for young men who are to be educated scientifically through the medium of English, so as to be qualified to assume independent charge as principals of Civil Hospi because the matriculation examination offers a definite standard of qualification, where as the special examination has practically no standard at all, because there is no lack of candidates for matriculation, as the yearly experience of the University proves, because all fairly efficient schools educate up to the Matriculation standard, thus rendering it easier for a young student to pass on with the school stream than to make separate arrangements for the

lower course demanded by the special preliminary test

8. The platform of general education from which the young aspirant should start must be determined, not by the uncertainties of his salary position or pension, but by the pressing gravity of the work he has to perform when in independent medical charge of a Civil Hospital and so responsible for human life.

The recommendations I have hazarded may be summarized as follows:-

(a) Matriculation examination

(b) One years pre-collegiate Course

(c) Curriculum of second department

(d) Designation - Civil Sub Assistant Surgeon. To which I would add.

(e) Certificate - License from the Medical College

Shaw & Co

(Sgd) G Smith M.D.

Principal.

True Copy

Sgd/ E B Powell

Director of Public Instruction.

To

Surgeon General E G Balfour.

True Copy

Edwin Balfour Surgeon General

Surgeon General I M S.

28 153

No. 51

Surgeon
OFFICE OF INSPECTOR-GENERAL, I. M. D.,
Fort Saint George, 5 Febry 1874.

From

Surgeon
THE INSPECTOR-GENERAL OF HOSPITALS,
Indian Medical Department,
Fort Saint George.

To

The Chief Secretary to Government
Educational Department.

SIR,

During the past six years Govern-
-ment has had repeatedly under considera-
-tion questions bearing on the supply of
Medical men for the country, viz. as to
the number needed, how best and soonest
to supply them, and how far the education-
-al powers of the Madras Medical College
could be (altered) utilized, in order to turn out
a greater number of trained practitioners.

2 With a view to obtain data as
to the College capabilities, when I was
writing the letter No 428 of 10th Novem-
-ber last, which had to be sent through
the Director of Public Instruction,
I mentioned in its ninth paragraph,

1873 22 Nov 9/4

that it was important for Government to be informed as to the highest number of each grade, Senior, Second, and Junior, which the College can, in each year, suitably receive; also to have an estimate of all money outlay needed to be made in providing for additional numbers.

3. In order to ascertain these two points, I have been in communication with the Educational department, and in the last letter, which I ... received, I was referred to the Principal's "letter No. 203 of the 25th November. This is now before Government, and in it I observe stated, that 115 students is the maximum number which the College can educate efficiently, under existing rules.

1873 15th Nov. 6939 & Principal
" 5th Dec. 214 from do
" 16 " 7678 to Principal
1874 15 Jany 233 from Principal

Instructions & Dr Balfour's letter of 10 Nov/73

4. The maximum that the College can be made to attain is, however, not mentioned in that

letter, and though, in order to obtain still larger results, mention is made of the need for increased clinical opportunities, for increased teaching power, for increased accommodation, and for more material for instruction, the probable extent or cost of the needed increments are not particularised. The estimate is not given either there or in the twelfth paragraph, where the Principal, merely repeats what he wrote on the 2nd of August last "that the "Medical College cannot undertake "to act as a substitute for the proposed "provincial Medical schools, without "material amplifications, involving very "considerable expenditure on the part "of Government." To a subsequent request from me for precise data, however, the Principal has replied, that "the addition of two clinical teachers "to the staff of the General Hospital "would nearly double the present

"number of clinical students at that
"Institution, without necessitating any
"addition to the College building, beyond
"what, indeed, is already required, en-
"-creased accommodation for the practical
"Anatomy and practical Pharmacy
"classes. If the increment took place
"in the senior or second Departments
"no additional teaching power would
"be required, but that he says would
"not hold good in the event of the
"increment being made in the junior
"Department of the College. The following
"tables will show the results:

I		II	
"Existing clinical training Field		"Medical College.	
"with two additional teachers			
"Medical Wards 25+25 - 50 pupils		"Senior Depart^t 5 classes, 2 each, 10 pupils	
"Surgical " 25+25 - 50 "		"Second " 3 " 30 - 90 -	
"Lying in Hospital ___ 15 "		"Junior " 2 " 35 - 60	
"Eye Infirmary 15 - 130			
"Non clinical hospitals 30		" " Total 160	
" Total 160			

"any number in excess of this would," he says,
"require increased clinical opportunities,
"considerable additions to the building
"and a greater supply of practical ana-
"-tomy material, than is, at present, avail-
"-able for the anatomical classes of the
"institution. As an element of efficient
"training the experience of the practical
"departments is as valuable and as
"necessary as the clinical practice of the
"Hospitals. These are the main points
"on which the training of the students
"must turn."

5. I am not able to concur in the opinion of the Principal, that in his great Collegiate Institution, with its Professors and its Assistant Professors can only have 160 students under training, and consider that it is possible without any great increments of cost, so to adapt its work as to permit more entrants, to have more students, and

to turn out more than its previous numbers.
It is very unadvisable to have an unwieldy
number, but the recent communications
from the Civil Departments of Govern-
ment have shown that the country is
craving for a supply of medical men;
that the people will take any persons
to whom such a term can be applied;
and with the country needing 8,000 or
10,000 qualified men, to limit the work
of the College to teaching 115 students
as at present, is not advantageous. And,
though I consider that the 160 now
named by the Principal is nothing
equal to the maximum number that
could be studying at that institution,
small as the number 160 is, with the
country more bare of professional medical men
than it is of any
other professional body, I recommend
the immediate grant of the additional
aid of two clinical professors now indicated
by the Principal as necessary. I will

in a very few days, submit to Government
an acceptable arrangement of the Medical
Institutions here, which will place at the
Principal's disposal greatly enlarged means
for clinical instruction, and of the two
clinical professors asked for, the imperial
service can furnish one, and another
is even now available in the Resident
Surgeon of the General Hospital. That
Officer is employed every day for nearly
2 hours, from about 7 to 9 a.m. in attending
to Out-patients. I propose to relieve him
by Honorary Assistant Surgeon Mohiuddin Sheriff, who is available. He has been
employed during the past 15 years in a
similar duty at the Tiptipicane Dispen-
sary, where the numbers of out-patients are
even greater than those attending at the
General Hospital, he is known to every
person, Christian, Mahomedan, and Hindoo
in this great city, he is a physician in
whose judgment and discretion every

reliance may be placed, and when I last visited the Medical College Hospital Calcutta, at the time the out patients were being seen, I found a native physicians attending to them. I am able to predict that, marked as have been the urbanity gentleness and patience evinced by Surgeons Brockmans and Wright both of whom I have seen on duty at the out patients room, there will not under Assistant Surgeon Mohiud. Din Sheriff's care, be any falling off of attendance.

If more accommodation be indeed needed in the Medical College, I recommend that the Practical Anatomy class be removed out of the College block into a structure of a kind similar to those that I have had to erect at the Lying in Hospital. This removal is already needed for the health of the Professor, who has been unwell

* Three proposed rearrangements are meant to suit the views of the Physician and ex officio Principal. I consider that an Apothecary should do the full duties relieving the Resident Surgeon & Dr Mohiu-din Sheriff for clinical instruction

is believed from too prolonged work within the dissecting room, and the Officer similarly occupied in Bombay, when he called last week at my Office, mentioned that he had been ailing similarly. His removal from the block is very advisable, would give more room, and a leaf pavilion sufficient to protect the interior would be better for the professor and the students.

I am satisfied that the adaptations which I have as above submitted would fulfil all the requirements which the Principal in his letters has indicated, and I submit them for the consideration of Government, and as the subject is one of much importance I beg to attach the Principals letters.

I have the honor to be
Sir
Your most Obedt Servant

Surgeon General &c &c

No. 84

Surgeon
OFFICE OF INSPECTOR-GENERAL, I. M. D.,
Fort Saint George, 25th February 1874.

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

The Chief Secretary to Government
Public Department.
Fort Saint George.

In my letter No. 43 dated 3d February 1874 I submitted a plan for carrying out the scheme of Medical Education ordered in G.O. No. 960 of 17th September 1873. but, as the standard of education then ordered by Government is, in my belief, beyond the present power of the country to afford, I have now the honor of placing before the Right Honorable the Governor in Council, as my opinion, that the studies which the Junior or Hospital Assistant Department pursue furnish the kind of Medical Education for which the people generally in the South of India, are, at the present, able to pay. During the 2 3/4 years that I have been the head of the Madras Medical Dep

partment, I have not addressed Government on this subject: my silence has not, however, been from any inattention to the subject nor from any want of acquaintance with the requirements of the country, but because I considered that, (vide as to the numbers that are being educated, and to which I have constantly recommended additions,) the degrees of education which the various students of Medicine are receiving in the Second and Junior Departments, are sufficient for all the present wealth of this people, and because the great point to be aimed at, is to fill the country with a number of men sufficient for the country's wants, and trained to such a degree of knowledge of western medical science as shall fit them to attend to the physical ailments of the people.

2. At the present moment, there are in the territories ruled over by the Government of Madras about 8000 practitioners, of whom only 450 are educated servants of Government, attached to the Army or sent to the Civil Hospitals and the remainning are the Hindu Vaidyan, the Hindu Baid or herbalist, and the Mahommedan Hakim who practise as physicians, while the Potter and the Barber are the Surgeons of the country and the barber's wife and Shoe-maker's wife are the midwives, the great bulk of all these practitioners being uneducated, and their treatment of disease often barbarous, causing loss of life and limb. Only on the 16th Ultimo, a man was brought into the Madras General Hospital, with his leg so mortified as to necessitate its removal, this had been occasioned by the application to it of some powerful substance, and every Medical Officer who has practised amongst the people can tell of terrible misdoings.

3. A certain number of highly educated men are needed for the most important duties of the Medical department, and also for the Medical educational department, and, in my opinion, the people generally ought to have doctors with the highest attainments for which they can

afford to pay, or whom the state may be willing gratuitously to supply; but in whatever view the subject of Medical Education may be regarded the point which stands prominently forward for attention is that the people have, at present very few educated physicians or surgeons or Midwives and how to provide such in sufficient numbers, and with the necessary qualifications should be the aim. Any progress over the present state of the country is to be valued and if there, whom the Madras Educational department send out, possess only such a medical education as will enable them to treat, with success, cases imperilling life or limb, this would be a step in advance & would be of very great value to the people who are now in the hands of illiterate, rash empirics. In countries little civilized or largely agricultural or pastoral, medical men are few compared with their number in Kingdoms possessing a large civic populations. In Russia, for instance, it is stated that there is but one medical man to every 4b, 116 inhabitants; in Hungary one to every 5,492; in Austria, one to every 4,355, and in Russia one to every 3,230 and amongst the towns of Great Britain, the proportion has been about one to every 1000, - but in the Madras Presidency, the number who have been educated in the western medical Science is about one to every 60,000, and Southern India needs to be supplied with 8000 or 10,000 Educated men to take the place of the 8000 Vaidyans and Hakeems whom the country is now supporting.

As to the needed curriculum &c. Having stated the numbers needed the Medical Curriculum, through which medical men suitable for the country should pass is the next Question left for decision. At present there are three grades of pupils under instruction at the College, designated the Senior Department, the Second Department, and the Junior Department: The students in the Senior Department receive a training of the very highest order, quite beyond the present wants of Southern India but they are few in number, at present there are only three students, - and their instruction is effected at so great a cost, that, even if there

Bell way cooks

who resume their education here chose to practise in the country they would not find remuneration for their labour and knowledge. Recently there were trained here four young men in the Senior Department, who proceeded, in 1873 to the Royal College Physicians and Physicians of Edinburgh, from which they obtained the double qualification in Medicine and Surgery. The public press state that, out of a batch of twenty-two Candidates for the double diploma, the Madras four came out at the top. This as a result undoubtedly showing favourably the capabilities of the College teachers, but at the same time, proving that their work in that department is fine beyond all the present requirements of this country.

The second department is the next lower in educational training, and it may be stated with confidence of general assent that those who issue from it have received an education amply sufficient for the more responsible offices in this country, but the numbers of them that

Madras Medical Students.— We have been informed, on reliable authority, that Messrs Lancaster, Cowen, Martin and Harden, all late students of the Madras Medical College, Madras, have successfully passed their examination at the Royal College of Surgeons and Physicians of Edinburgh for the double qualification in Medicine and Surgery. These young men only lately left Madras in the Norway on her last homeward trip and presented themselves for examination soon after their arrival in Scotland. Out of a batch of twenty-two candidates for the double diploma, the Madras four came out at the top. This is a fact highly creditable to the Madras Medical College, and is as honorable to its teachers as it is to those who have so well sustained the Credit of their Alma Mater.— Athenæum and Daily News.

can be educated under the present arrangements of the College are insufficient for the wants of the country and the cost of their education is greater than the people are able or willing to meet. Descending to the Junior Department, in which the Hospital Assistants are educated, the curriculum, though susceptible of modifications as to the mode of teaching, as regards the subjects taught, is in my opinion, ample for all the ordinary requirements of this people, as they are at the present day, and, as the machinery for training them is in perfect order and capable of an immediate large extension, it is to this that I recommend Government to adhere for the present and until the people grow able to pay for more highly educated men, and until the educational Department can supply a sufficient number of them. In the order, No. 960 of 1873, it has been indicated, as the opinion of Government, that the medical Officers of Civil Dispensaries shall have an education somewhat similar to that now afforded to the second department at the College, but the applications, reports

and appeals from Local Fund Boards and Munici-
-palities have shown that though the Communities
wish to be provided with medical men, many of
them are unwilling, others of them are really una-
-ble, to pay large salaries, and nearly all prefer
natives as their professional attendants. Cheapness
and numbers cannot at present be combined with
high professional attainments; for, though the country
requires to have medical men by thousands, the
Principal of the Madras College has now intimated
that 100 students is the largest proportion that the
College can have under instruction, and the ret-
-urn from that number of students will not be suffi-
-cient both to replace casualties in the existing establish-
-ment, and also meet the growing wants.

5. With my knowledge of the state of the country, the wishes of the people and the educating powers of the College, the standard ordered in Rs 960 of 1873 will prove too costly and the numbers ob-
-tainable by it too limited for requirements and these two defects can only be remedied by adhering

to a lower standard, and thereby retarding the pro-
-gress of medical education. And, as the subject has been
prominently before Government during many past
years, and the Towns Improvement and Local
Funds Acts have recently become law, the present
seems a suitable time for Government to consider
what should be the Medical education of the Civil
Medical practitioners who will be made available
for Municipalities. I have already explained to
Government that hitherto the Madras attempt to
educate the highest order of men for
Employ has failed, and the country, for its civil
wants, has had to depend upon receiving the sur-
-plusage of the men who have been trained by
Government for Military Employ. When this
was brought to the knowledge of Government by
a member of the Education Committee of 1864-5,
Government then denounced the practice as im-
-proper; but ten years have since passed by, the
sole scheme proposed for educating village practitioners
has not received the sanction of Government, the system

of employing military medical Officers in the Civil duties of the country has continued down to the present day.

6. It may not be in the recollection of Government that the Education of the Junior department students has been greatly improved since the Committee sat in 1864, and this body of medical men cannot in my opinion now be spoken of as Government then wrote. In explanation of the change I would mention that in the year 1868 the subordinate Medical department was reorganized, the designation of Dressers was altered to that of Hospital Assistants, and a great improvement was made in the standard of Education given to that class of public servants. Nevertheless, G.O. No 960 of 17th September 1873, considers them still to be insufficiently instructed for independent medical employ, and has ordered, for civil charges, a standard of education similar to that received by the warrant students in the Second department. In so doing however Government has in my opinion

The mean with whose qualifications the G.O. specially deals are those educated under the old curriculum. H.L.

fixed the standard at a height beyond what the people are willing, or able to pay for, and, in issuing that order, the report of the Education Committee of 1869 seems to have been forgotten. It is desirable, therefore, that the facts of the case should now be placed before Government. I may accordingly mention that in the year 1869 subsequent to the improvement in the Hospital Assistants Education, a Committee was appointed to draw up a scheme for the training of village practitioners, and they, then, proposed a curriculum very greatly inferior to that which a few months before had been sanctioned for the Military Hospital Assistants, but, on being presented to Government, the consideration was postponed until the Towns Improvement bill should become law. When however, that Bill passed, I placed the whole subject again

313. before Government, and showed successfully how the views of Government could be, at once, more cheaply and effectively carried out, by adhering to the greatly higher curriculum followed at the Medical College for the training of the Junior depart-

-ment. Key suggestions received the approval both of the Director of Public Instruction and of the acting Principal of the Medical College, who recorded their opinions that the College is the best Medical school and, when in G.O. No. 372 of 6th December 1871 Government desired further information, it furnished it in any subsequent letter, No. 1 & 2 of 8th April 1873. That correspondence does not seem to have been before Government when the order No. 760 of 17th September 1873 was issued. It therefore, seems desirable that I should now place before Government the fact that, in the year 1869, on the recommendation of the Principal of the College Government authorized an improved curriculum for the junior department, the men coming from which have been employed in various civil and military medical duties, and subsequently, in the same year, the Committee, of which the Principal was a member, proposed a greatly inferior curriculum for the education of Village or District Doctors, who were to be scattered, solitarily, over the country, remote from all other medical men, and left to rely on their own strength; - an isolation which to some persons, is very trying. Government will perceive the important bearing of this fact on the Question

1868. 18th July. No. 58. Principal to Government.
1869. 20th February, No. 632. G.O.
1869. 30th July, No. 1059. G.O.
1870. 3rd March, No. 260. G.O.

of the future education of the country's medical men, and will recognize that, if the greatly inferior degree of training which the 1869 Committee proposed for District Doctors was deemed by the Committee ample for the country, it is legitimate to conclude that the greatly higher curriculum which the Principal had previously proposed and obtained for the junior Department, is still more adequate. And that the curriculum proposed by the 1869 Committee, though very much lower than that which had previously been adopted for the junior Department, was deemed ample for the medical requirements of the country is proved by the fact that, when my predecessor forwarded the Report, he considered the

1870. 19th January, No. 17, para 3. to Government.

Committees standard overhigh, recommended that the three years study which they had proposed, should be reduced to two years, and advised that Midwifery should be struck out of their curriculum. This is a matter of so much importance for the Government to be acquainted with, when considering the education of the country's future medical men, that I give here the Curriculum proposed in 1868, by the Principal, for the junior Department, which is now in use, and that proposed in 1869 for the District Doctors, by the Committee of which the Principal of the College was a member.

Curriculum adopted in 1869 for the Junior (Hospital Assistant) Department. - Civil Doctors, by the Committee of 1869.

(1). Entrance Examination (1)- None
(2). Pre-Collegiate (2)-
(3). 1st Examination - after 6 months - Properties and uses of drugs in common use. (3)-
(4). 2d Examination - after 12 months - Practical Pharmacy. (4)-
(5). 3d Examination - after 18 months - Pharmacopœia and Minor Surgery. (5)-
(6). 4th Examination - after 24 months - same subjects with Elements of Osteology. (see Medical Code - p.p. 83-86. Volume 2d Section V) (6)-

1st Year.

Winter.
By Professors & Assistants.
(7). Anatomy
(8). Materia Medica
(9). General Hospital

Summer.
By Assistants.
(10). Lectures of Physiology
(1). Practical Pharmacy
(2). Minor Surgery
(3). General Hospital.

1st Year.
(4). Materia Medica & (1) Practical Pharmacy
(7). Elements of Anatomy & (10). Physiology
(3). Hospital training, including the compounding and dispensing of medicines, &c.
Examination.

2d Year.

Winter.
By Professors & Assistants
(11). Medicine
(12). Clinical Medicine
(5). Surgery
(6). Clinical Surgery
(13). Midwifery
(14). Dissections
(15). General Hospital
(16). Eye Infirmary
(17). Lying-in Hospital
(18). Vaccination

Summer.
(22). Hygiene - Professor & Assistant
(2). Minor Surgery - Assistant
(15). General Hospital
(16). Eye Infirmary
(17). Lying-in Hospital
(18). Vaccination

2d Year.
(8). Materia Medica & (1) Practical Pharmacy
(7). Revision of the Elements of Anatomy and (10). Physiology
(5). Elements of Surgery (6). Clinical Surgery
(2). Minor Surgery
Manufacture of necessary Surgical Apparatus and appliances.
Examinations.

3d Year.
(11). Elements of Medicine & (12). Clinical Medicine
(13). Elements of Midwifery & Diseases of Women & Children
(22). Elements of Hygiene
(18). Examination.
(19). Dispensary Practice.
Certificates of qualifications.
(20). Nine Districts - (21). Specification of home -

Curriculum proposed in 1869 for District Doctors, by the Committee of 1869.

In order to facilitate reference, I have numbered each subject of the studies which the Hospital Assistants now pursue, and those that the Committee recommended for the District Doctors, and a glance will suffice to detect the greatly inferior character of the Curriculum proposed for the District Doctors for whom no preCollegiate training was required, and who, besides, were to be taught by means of the Vernacular tongues. I have no doubt, whatever that, for the present condition of the mass of the people of this country, the existing subjects in the curriculum for the Junior Department, are ample, and that they are so; I will furnish further proofs, by comparing the Madras Junior Department Curriculum with the courses of study followed in the Grant Medical College, Bombay, for the Military and Civil Departments, and in the Bengal Medical College, Calcutta, for training their Vernacular Licentiates and Native Apothecaries. I will, therefore, place the curricula of the three Colleges together, and, to facilitate examination, I have preserved, in the subjects, the same numbers.

Madras.

Curriculum adopted in 1869 for the Senior (Hospital Assistant) Department.

(1)- Entrance Examination.
(2)- Pre-Collegiate.
(3)- 1st Examination - after 6 months - of properties and uses of drugs in common use.
(4)- 2nd Examination - after 12 months - Practical Pharmacy.
(5)- 3rd Examination - after 18 months - Pharmacopoeia and Minor Surgery.
(6)- 4th Examination - after 24 months - Same subjects with Elements of Osteology - (see Medical Code, p.p. 83-86. Art. I. Sect. II)

1st Year.

Winter	Summer
By Professors & Assistants.	By Assistants.
(7)- Anatomy.	(10)- Outlines of Physiology.
(8)- Materia Medica.	(6)- Practical Pharmacy.
(9)- General Hospital.	(12)- Minor Surgery.
	(9)- General Hospital.

2nd Year.

Winter	Summer.
By Professors and Assistant	
(13)- Medicine.	(22) Hygiene - Professor & Assistant.
(14)- Clinical Medicine.	(12)- Minor Surgery - Assistant.
(15)- Surgery.	
(16)- Clinical Surgery.	
(17)- Midwifery.	
(18)- Dissections.	
(19)- General Hospital.	(19)- General Hospital.
(19)- Eye Infirmary.	(19)- Eye Infirmary.
(20)- Lying-in-Hospital.	(20)- Lying-in Hospital.
(21)- Vaccination.	(21)- Vaccination.

3rd Year.

(23)- None - (Chemistry).
(24)- None - (Medical jurisprudence).

(6)- None - (Pharmacy).
(21)- None - (Vaccination).
(22)- None - (Hygiene).

Bengal

Bengali and Hindustani.

(1)- ?
(2)- ?
(3)- ?
(4)- ?
(5)- ?
(6)- ?

1st Year.

(7)- Anatomy.
(23)- Chemistry.
(8)- Materia Medica.
(18)- Dissections.

2nd Year.

(7)- Anatomy.
(23)- Chemistry.
(8)- Materia Medica.
(13)- Medicine.
(15)- Surgery.
(17)- Midwifery.

3rd Year.

(7)- Anatomy.
(23)- Chemistry.
(8)- Materia Medica.
(13)- Medicine.
(15)- Surgery.

Bombay.

Marathi Class.

(1)- ?
(2)- ?
(3)- ?
(4)- ?
(5)- ?
(6)- ?

1st Year.

Winter Session.	Summer Session.
(7)- Anatomy, Skeleton, Arteriations, muscle viscera.	(8)- Materia Medica.
(23)- Chemistry.	(9)- Pharmacy.
	(10)- Physiology.

2nd Year.

(7)- Anatomy, lectures with dissections.	(8)- Materia Medica.
(23)- Chemistry.	(9)- Pharmacy.
(13)- Medicine.	(10)- Physiology.
(15)- Surgery.	

3rd Year.

(24)- Medical jurisprudence.	(13)- Medicine.
(15)- Surgery.	(17)- Midwifery.

(18)- None - (Dissections).
(21)- None - (Vaccination).
(22)- None - (Hygiene).

It will be seen from these columns that both in Bengal and Bombay the pupils are taught through three years of study and have Chemistry and Medical Jurisprudence additional to the Curriculum of Madras, but have no Dissections, Anatomy or Hygiene as in Madras, though all other subjects of Education are the same. In Madras however it is conducted through the medium of the English language by Professors and Assistant Professors but so restricted to two years. If the wants of Madras were less urgent than those of Bengal and Bombay, I would recommend the three years' course of Bengal and Bombay. I consider that the Candidates for the Madras Junior Department should have matriculated, or should have one year of pre-collegiate training with two years of College, and that a brief course of Chemistry, so much of it as will facilitate the study of Hygiene, and the Elements of Jurisprudence, as now taught in Bengal and Bombay, should be added to the Madras Curriculum, to which G.O. No 63, of 10th February by

approved; and with that slight modification of the existing curriculum, I am of opinion that it is perfectly suited to the present condition of the country, and to its peoples' wants, wishes and means.

9. In thus stating my views, it is proper to make known to Government, that for some past Medical Educationalists have been constantly adding to the subjects to be studied, to the period of study, that the quantities have grown beyond the power of ordinary student intellect to overtake; but, whilst this has been so, the Appendix to my present letter, will show that some of the most eminent men of Great Britain have been remonstrating against the vain attempt to cram into a students mind the vast Knowledge, which each professor possesses of his own speciality.

And in mentioning this, I would recall to the remembrance of Government, what the Madras Revenue Board wrote in the year 1839

In para 26 the Board said "there are 5[illegible]
"villages in the Presidency and it would
"obviously be impracticable for many
"years to come to bring medical aid within reason-
"ably facile reach of each or to train up a body
"of moderately competent practitioners to meet the
"wants of a population of 26 millions. The Board
"think that there are certain measures which the
"Government can and ought to adopt to meet the
"great want. In the first place the Government
"should in their opinion, afford the means of ob-
"taining a suitable medical Education. The
"Medical College at Madras cannot be said to do
"this. The Education is entirely in English the standard
"is extremely high, and employment by the State is the
"aim of all who enter it. The few who devote
"themselves to private practice expect (and with
"justice, considering their attainments) a far higher
"rate of remuneration than the people can afford
"to give. They would attach a few scholarships
"in each case proceeding what is sufficient for the

Proceedings of 3rd April 1874
printed in Proceedings of Govt
of 4th May 1874 page 6.

decent maintenance of men whose future sphere
is to be practising in the towns and villages of the
country, for they think it most essential not to
foster extravagant expectations. The pupils should
entirely support themselves or be supported by the
villagers under arrangements with which Government
need not meddle."

10. In viewing this subject it is necessary
to keep in mind that the people in the Madras
Presidency are poor even in the towns and in
the greater part of the country in very small holdings
the agricultural population have not the means to
pay for the services of an expensively educated
medical man; and what the State has to consider
is the extent of professional education for which
the people can pay. This, as regards the town
and country population, is of as much importance
as a consideration of the attainments needed for
the purposes of Government and it was distinctly
indicated in the Despatch from Her Majesty's Secretary
of State, N.6 30th December 1868 in which it was mentioned that

"(2). The course of Education given in each department
"should be fitted to qualify the young men under
"training for the duties of the particular class of
"appointments which they are destined to fill and
"it is not expedient to aim at qualifying them
"for higher duties which some of them may under
"exceptional circumstances be called on to discharge.
"(3). It is to be feared that there is at present no such
"prospect of private medical practice among the
"Native Society at your Presidency, as would induce
"many young men of education to aim at the
"medical qualifications or to take a medical degree
"at the University without the prospect of Govern-
-ment Employ."

Also the Right Honorable Lord Napier, in a
Minute, dated 26th April 1868 says, "It has often
"been remarked that if European medical treat-
-ment is to be rendered applicable to the Natives
"of this country it must be through native agency
"already accredited and familiar, and that no
"better instrumentality offers itself than the hereditary

"popular physician. The native doctor or his son
"should be attached to a European School, in which
"he might be disabused of his gross superstitions
"and instructed in the minor operations of surgery
"as well as in the use of common medicines for
"prevailing maladies. Instruction might also be
"afforded to the Native Midwife."

Also when the Committee of 1869 were proposing
a Curriculum for the Village Doctors, how humble
the Committee deemed the position of that practitioner
may be judged of by their remarks in para 10
where they say that "As regards his pay, it does
"not seem unreasonable to place the dresser on
"the same footing as that of a skilled labourer, who
"draws from 8 to 12 annas per diem, which sum,
"deducting time lost owing to sickness, holidays, &c.
"amounts to from Rupees 10 to Rupees 15 a month.
"The Committee propose that the Government pay
"shall be Rupees 10 per mensem for the first five
"years, Rupees 12 per mensem after a professional ex-
-amination for the next five years, and Rupees 15 per

the diploma of graduate of the Medical College
with small pecuniary benefits to above it must
be added an inducement that the Madras Medical
College, as a nursery for providing professional men
for the people, has not been a disappointment to
the people of Southern India, who have the very keen
appending on the Grant of Surplus Army Medical
Officers of the Warrant and Hospital Assistant
Grades must unless a remedy be provided, still have
to look to the same Institution for their
supply. We are happy to think that the success of this
College, failure in the very high standard which
the University has fixed for the final Medical
practitioners, it is not possible to believe that the
powers of the present existing rules for having
Civil practitioners even have been aware of the
humble circumstances of the people in the
town and rural districts of this
presidency — even have realized the
fact that Medical men are needed by thousands

19 Sept

or can have known that of all the 3½ millions
upon partners on the seaboard of this presidency
the holdings are so small that neither of them
a part to Government of less than Rs rupees
73. The Question of the education necessary for
Medical requirements of the country has been under
Report over since the year 1852. I had hoped that
the quotation given in my letter No 313 of 25th Octo
1871 had almost disposed of one part of it and that

1852	6th December	Education Committee Report
	7th "	Surgeon Smith's memorandum
	25th "	1852 Board Report
	31st May	Madras Government
	28th October	Mr Keighley's letter
1853	30th October	Inspector General
	8th January	Principal Medical College
1854	22nd April	Mr Keighley letter
	20th "	Mr Elliot's remarks to Governor
	27th July	1854 Principal Medical College
	8th October	Sanitary Commissioner
1856	15th January	1856 Inspector General
	25th February	63 Madras Government
	25th July	Report of Committee
	25th July	1859 Madras Government
1862	9th January	1862 Inspector General
	3rd March	62 Madras Government
	2nd April	1863 Council Board

the examination
before the Governme
letter No 313 of 25th Octo
would have finally
set it at rest. When
entered on my pres
office and found that
this subject had
various forms has
the examination of
most extraordinary
Mr. Henderson to
write myself made
all that had been done

before my time; and the proposals in my letters of September 1871 and of April 1873, were simply submitted as containing a practical scheme evolved out of a huge mass of writings. But as the question of the medical education requisite for Civil practitioners has again come before Government, I can but repeat that it is no longer an educational question for an Academy or a College or a University to prescribe the standard which they would wish their students to attain, but it has become one to be disposed of by legislators acquainted with what the country requires, what it is able to afford, and what is capable of attainment.

4. There are, at present, six Medical Curricula from amongst which Government can select for the Education of the Civil Medical men for the country, viz:-

I. The Curriculum for the Senior department, whose studying for degrees in Medicine, in accordance with the regulations of the Madras University,- and this, I regard

II. The Curriculum which has been followed by students in the second department enlisted for warrant medical officers and authorized by G.O. N° 80, dated 29th March 1865; and this, I regard as ample for the small number of the higher educated medical men whom this country can, at the present day, absorb.

III. The Curriculum prescribed for the Hospital Assistant Class, who aspire to be Sub Assistant Surgeons; and this, I regard as equal to N° II.

IV. The Curriculum for the Hospital Assistant Grade sanctioned by G.O. N° 63 of 20th February 1869, and I regard its subjects as ample for the country in its present condition, but needing some slight modification in the manner and period of teaching.

V. The Curriculum for Village Doctors, proposed by the Education Committee of 1869, but postponed by G.O. N° 260 dated 3rd March 1870, till the passing of the Local Fund Act;- this is the most inferior of the six curricula.

VI. The Curriculum which I have proposed in paras 1, 8 & 11 of this present letter, viz, that now in force for the Hospital Assistant Grade, but modified to one year of precollegiate and two years of collegiate study

I have the honor to be
Sir
Your most obedient Servant

Surgeon & Major

Surgeon General
Indian Medical Dept.

Appendix.

Professor Huxley says

"I entertain a very strong conviction that any "one who adds to medical education one iota or tittle "beyond what is absolutely necessary, is guilty of a "very grave offence." *

Dr. Latham says.

"What we want still was put very concisely near- "-ly forty years ago by my venerable and distinguished "namesake in his lectures. "A well weighed scheme of "professional education, sound and practical, - com- "-prehensive yet moderate in its requirements and "adapted to all." ⊗

Professor Alison says.

"In reference to the practical objects for which "medical science is cultivated, it seems important "that the whole extent of the studies most intimate- "-ly connected with the study of medicine should be "fairly laid before the student in as small a com- "-pass as possible." ‡

The late Dr. John Murray of Middlesex Hospital, in letter to Dr. Harvey says,

"As things are, there is no such thing, now "a days, among our medical students, as real "genuine thorough study, - nothing but cram- "-ming or gammon." ⊙

Note: * Professor Huxley on Medical Education. Lancet, January 4th 1870, page 797.

Note: ⊗ Dr. P. M. Latham, in Lancet of 18th October 1873, page 573.

Note: ‡ Professor Alison, quoted by Alexander Harvey M.D., Professor of Materia Medica, in the University of Aberdeen, in Lancet of November 23rd 1873, in an address to the Aberdeen University Medical Society.

Note: ⊙ Lancet, November 23rd 1873, page 765.

Professor Harvey further says of those who are re-
adding to a students labours that

"They forget that the students they have to
"deal with want to be medical practitioners
"having a competent and a sound scientific
"knowledge; not simply and solely anatomists
"physiologists and Chemists, I would be the
"last person in the world to decry the value
"of a sound scientific training for the medi-
"cal practitioner. I appreciate it fully. But
"what I maintain is, that an intimate ac-
"quaintance with all the above subjects can-
"not be acquired in four years. The process
"has not yet been discovered of driving into a
"British skull, in so short a period, the know-
"ledge of half a dozen German professors.
"The attempt is impossible, and while striving
"after the impossible we lose the possible. The
"students mind, under the present system,
"is crammed with ill-digested facts and
"crude notions about the most recent theories
"then he disgorges at some examination board
"famed perhaps for high-standard questions and
"indifferent answers. He receives his certificate
"and is qualified (?) to practise his profession.
"Yet when he comes to his real work he is sur-

"prised to find how little his knowledge
"serves him. His studies must begin afresh." *

* Dr A. Harvey M.D. on Girls in Medical Education in
Lancet, December 6th 1873, page 301.

No. 295. Madras Medical College. 1874
24th March 1874.

From The Principal,
Medical College.

To The Director of Public Instruction,
Madras.

Sir,

I have the honor to acknowledge receipt of the

*Proceedings of the Director of Public Instruction No 253 dated 16th February 1874. Letter No. 866 dated 12th July 1874 from the Surgeon General I. M. D to the Director of Public Instruction. Office Draft of Letter No 57 dated 5th July 1874 from the Surgeon General I. M. D to the Chief Secretary to Govt: Order of Govt No 57 dated 10th February 1874. Letters Nos 214 & 253 dated 5th December 1873 and 31st Jany 74 respectively from the Principal Medical College to the Director of Public Instruction.	documents, marginally entered, and to submit for your consideration a portion of the information called for in the Order of
*The Surgeon General is requested to state what if any additional cost is involved in his proposals, and how he proposes to meet it"	

Government, dated 10th February 1874.

2. The proposals submitted to Government by the Surgeon General, in his letter No 57 dated 5th February 1874, are two in number.

3. In the first proposal the addition of two clinical professors to the General Hospital is thus provided for:—

(a) by obtaining one clinical professor

from the Imperial Service;

(b) by utilizing, as a clinical professor, the services of the Resident Medical Officer; and

(c) by entrusting the duties of the out-patients department to Honorary Surgeon Mohdeen Sheriff.

4. The cost of this proposal would be approximately as follows:—

1 Clinical Professor - according to rank - monthly, grade Rs 700 — 1250

1 Assistant Apothecary - pay and house rent - monthly — 130 — 130

Total Rs 830 — 1380

5. In the second proposal the residential arrangement is thus secured:—

(a) by appointing the Resident Medical Officer a clinical professor;

(b) by appointing Honorary Surgeon Mohdeen Sheriff Resident Medical Officer and clinical professor; and

(c) by appointing Mr Keeffe, the apothecary of the Hospital, to the charge of the out-patients' department.

6. The approximate cost of this proposal would be as follows:—

1 Assistant Apothecary's pay and house rent, per memorandum - Rs — 130

(The Surgeon General has assured me that no extra allowances will be made to Honorary Surgeon Mohdeen Sheriff).

7. Under either proposal the following additional

additional expenditure, in connection with the College, must be met. 201

(a) Cost of increasing the accommodation of the Practical Pharmacy room Rs 1,400

(b) Cost of improving and enlarging the Practical Anatomy room - - - - Rs 160

(c) additional Furniture for Laboratory Rs 500

Total Rupees 2,060

Annual increase

(a) increased expenditure of Chemicals - - Rs 350

(b) - - - - - - - of Pharmaceuticals Rs 100

(c) - - - - - - - of Stationery - - Rs 10

(d) - - - - - - - of Prizes - - - Rs 150

Rupees — 610

Monthly increase

(a) Increase to Clerk's pay - - - - - - - Rs 20.

8. These approximate calculations shew the extra expenses which will have to be met, in the event of Government electing either of the Surgeon Generals proposals. The calculations have been made, on the understanding that the classes of students intended for the service of the Municipalities shall join College after one year's pre-collegiate training - in the Second Department, and shall pass through the three years' curriculum of that Department, and further, that the total number of students of all classes attending College shall, at no time, exceed 160.

9. In connection with the first proposal of the Surgeon General remarks that the rearrangements "are meant to suit the views of the Physician and Surgeon's Principals". I would respectfully correct this misconception, by stating that, in my opinion, the presence of a Commissioned Medical Officer is necessary to the success and well-working of the out-patients' Department. As to the second proposition I take grave exception, inasmuch as it leaves the General Hospital in a ~~far~~ more inefficient state than it is at present, by removing from the out-patients' Department the Resident Medical Officer, by placing the said Department under the Apothecary, and by appointing to the responsible post of Clinical Professor of Surgery & of Medicine a gentleman, who, with all his laudable qualities and professional experience, is, in my opinion, unequal to the duties to be imposed upon him - a Physician of mid-age, who has had no experience of teaching, is to be transferred from a position which he fills to the satisfaction of all, in order that he may occupy a professorship, where he has to teach, not only aspirants to Municipal appointments, and the last qualifying

as assistant Apothecaries and Hospital assistants, but also the advanced candidates for University honors in a language foreign to his own. Such a proposal I cannot view without grave apprehension as to the results.

10. In para 6 of the letter under reply the Surgeon General remarks as per margin*. This proposal to abandon the present dissecting room and to erect** a leaf pavilion" in the neighbourhood for the use of the Practical Anatomy classes is one which I believe to be unnecessary in itself, and objectionable on grounds of sanitation, exposure, expense, defective light, insufficient protection, and general safety. The present Practical Anatomy room can, at small expense, be enlarged, by taking in the Southern verandah, and, if more were required, by raising the roof and putting

* "I recommend that the Practical Anatomy class be removed out of the College block into a structure of a kind similar to those that I have had to erect at the Lying-in-Hospital. This removal is already needed for the health of the Professor who has been unwell as is believed from too prolonged work within the dissecting room, and the Officer similarly occupied in Bombay when he called last week at my Office mentioned that he had been ailing similarly. Its removal from the block is very advisable, would give more room & a leaf pavilion sufficient to protect the interior would be better for the professor & the students."

in ventilating skylights; after which additions, it would meet all the possible requirements of the Practical Anatomy classes, without losing that privacy, security, and general sanitary recommendation which it is most desirable should be retained in a dissecting room.

I have the honor to be

Sir,

Your most obedient servant.

R. Swain Gad

Principal.

No. 149

Surgeon
OFFICE OF ~~INSPECTOR~~-GENERAL, I. M. D.,
Fort Saint George, 1st April 1874

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

To

The Chief Secretary to Government.
Educational Department.
Fort Saint George.

SIR,

The Order of the 10th February 1874
requested me to state what, if any, additional ca
is involved in the proposed
No 51 of 5th February.

2. On the 12th idem, I forwarded to the Director of Public Instruction copy of that Order, also copy of my 5th February letter, and asked that the cost might be stated by the Principal of the College, whose reply containing the required information, I beg to enclose.

3. In para 5 of my letter of 5th February, in order to obtain an increase of students from 115, as now, to 160, I recommended compliance with the Principal's suggestion to ha[illegible] more clinical

teachers, by bringing me commissioned Officer and Surgeon Mohi ud Din Sheriff from outside, utilizing the services of the Resident Surgeon, and to carry out this the Principal requires from Rupees 830 to Rupees 1380 monthly.

4 In the other proposal, I mentioned that an Apothecary might see the out-patients and relieve the Resident Surgeon and Dr. Mohi ud Din Sheriff for clinical instructing, and the Principal mentions Rupees 30 as the cost for carrying out this proposal, but in this there is some misapprehension on his part as the Apothecary is already there, and it would cost nothing.

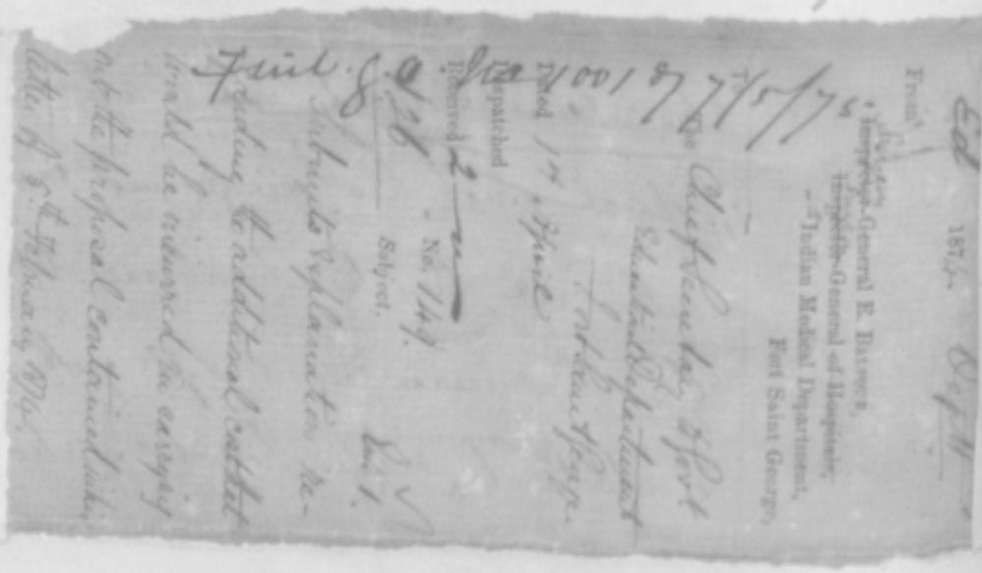
5 Under either proposal, however, he names Rupees 2060 as required for increased accommodation and furniture, also annually Rs. 610 for the Chemicals, &c., to the increased number of students (from 115 to 160) and a monthly increase of Rs. 20 to the Clerks' pay, for which last item, the Principal gives no reasons.

6 On the other point, on which Government in the Order of 10th February, require information, namely where funds are to be obtained for carrying out the

proposed change, I have the honor to mention that the number of students hereafter to be entertained for the Employ will not, at present, be greater in number than those hitherto attested for Military Employ, and if my second scheme be adopted, there will be no extra expense incurred, but if adopting my first proposal, which has been framed to suit Surgeon Smith's views, then the educational department will require to increase their budget sufficient to meet the additional amount which is then to be allotted.

I have the honor to be,
Sir,
Your most obedient Servant,

Edward Lawrence Surgeon General
Surgeon General
Indian Medical Dept



No. 150

Surgeon
OFFICE OF ~~INSPECTOR~~-GENERAL, I. M. D.,
Fort Saint George, 1st April 1874

From

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

To

The Chief Secretary to Government.
Educational Department.
Fort Saint George.

SIR,

With my letter, No. 51 of the 5th February 1874 I had the honor of submitting to the Right Honorable the Governor in Council, a letter from the Principal of the Madras Medical College, in which that Officer mentioned that, with the present staff of teachers, 115 is the highest number of students that can be taught at that Institution, but that, with two additional clinical teachers, he could teach upto 160 students.

2. In my covering letter, I mentioned that, "with the country needing 8000 or 10,000 qualified men, "to limit the work of the College to teaching 115 students "as at present, is not advantageous." And I coincided that the 160 now named by the Principal is nothing

equal to the maximum number that could be study-
-ing at that Institution; but, as the wants of the
country are great and urgent, I recommended com-
-pliance with the Principal's request for two additional
teachers; and, in my letter No 1869 of this date, I re-
-submit this subject, with the additional informatio
since asked for by Government in the Order of
the 10th 7th February.

3- I have been in communication with the
Surgeon-General and the Principals of the Medical Colleges
of Bombay and Calcutta, in which cities there are classes
of medical students taught by means of the English language
and classes taught in the Vernacular tongues, Mahratti
Bengali and Hindustani - and I wish to submit to
Government points in the correspondence relating to the
teaching powers of the Madras College.

4- It will be remembered that, while I was
absent on short leave to Europe, there was ordered into
College 46 of the Students whose entertainment had
been sanctioned by the marginal order, 1871. G.O. No 372, of 6th December
as approved of in 1871 by the Acting Principal and the
Director of Public Instruction, but, in 1873, the Principal and
the Director objected to receiving them into College, and only

twenty-two of them were ordered in. As this ap-
-peared to be a very small number, I asked the
Principal of the Calcutta College what numbers that Insti-
-tution is receiving for instruction, and he has in-
-formed me that in the year 1872, the Calcutta College
admitted 28 into the Hindustanee or Military class,
and 299 into the Bengali class.

5- Subsequent to this, on my requesting
the Madras Principal to state the numbers that he
could teach with his present staff, he named to me
115, but said that, with two additional teachers he
could undertake to teach 160. With a view to obtain
full information on this subject, I made further
inquiries of the Principal of the Calcutta College,
who writing to me on the 13th January last, men-
-tioned that his Bengali class alone was upwards
of 800 strong, and writing again on the 18th instant,
he mentions that in 1873, they had altogether 1394
students in that College, namely,

English Class.. 486
Bengali Class.. 772
Hindustanee Class.. 136.

and he intimates the intention, in future, of keeping up

the strength of the English classes at about 500.

6. These Calcutta numbers are so greatly beyond the 115 that the Principal of the Madras College considers can be educated here, (and to admit of teaching up to 160, a fresh demand for two additional teachers is made) that while I recommend compliance with this request, I consider it desirable that Government should ascertain why it is that in the Calcutta College 394 students can be educated while in the Madras Institution, 115 is the limit, without [illegible] additional teaching power in the form of two clinical professors, be now given.

7. I beg to mention that for several years past, my predecessors have had to be continuously informing Government that the College was not turning out sufficient medical men for the wants of the Government and the country, and I regard the present as a favorable time for ascertaining whether this Institution can be so re-arranged as to produce something nearer to the intent of the Calcutta College work than it has hitherto been doing. The tendency here has seemed to me to be constant augmenting of the numbers of teachers, without corresponding increment of results. I give these on the margin for the 13 years from 1860-61 to 1872-73, and may mention that in 1862-63 a professor of Jurisprudence was appointed, in 1863-64 a professor of Midwifery, in 1867-68 a professor of Pathology also Extra professor for Hygiene, Comparative Anatomy and an Assistant Professor in Medicine, when required.

Year	Students in attendance	Dressers Paid	Dressers Unpaid
1860-61	20	21	
1861-62	18	25	
1862-63	11	31	
1863-64	7	24	
1864-65	1	27	
1865-66	11	31	
1866-67	8	23	
1867-68	10	22	
1868-69	10	24	
1869-70	20	24	
1870-71	19	23	
1871-72	5	11	
1872-73	19	23	
Average	13	23 10/13	

Under all these circumstances, I have the honor to recommend that Government permit me to detail a Medical Officer to visit Calcutta and examine into the details of the work at that Institution.

To the Right Honorable the Governor in Council will desire to be informed whether the teaching staff of the Madras College is greatly less than that of Calcutta, I subjoin the numbers and designations of the Professors and Assistants in each of these institutions, by which it will be observed that though Madras is teaching only 115, and Calcutta 1394, Calcutta (excluding dentistry) has only one professor more than Madras, namely, of Descriptive and Surgical Anatomy, and four Assistants more.

Calcutta.

Staff of Medical College.

Principal and Professor of Medicine
Professor of Ophthalmic Medicine and Surgery
Professor of Surgery
Professor of General Anatomy and Surgery
Professor of Descriptive and Surgical Anatomy and Clinical Surgery
Professor of Chemistry and Chemical Examiner
Professor of Midwifery
Professor of Materia Medica
Professor of Pathology
Professor of Botany
Professor of Medical Jurisprudence
Professor of Dentistry
Professor of Comparative Anatomy
Professor of Hygiene.

Assistants to Professors.

1. 1st Demonstrator of Anatomy
2. 2d ___ do. ___ do.
3. Assistant Demonstrator, Anatomy.
4. Anatomy
5. Medicine
6. Materia Medica
7. Surgery
8. Midwifery
9. Chemistry and Medical Jurisprudence

Madras.

Principal and Professor of Medicine.
Professor of Ophthalmic Surgery and of Physiology.
Professor of Surgery and Clinical Surgery.
Professor of Anatomy.

Professor of Chemistry and Chemical Examiner.
Professor of Midwifery.
Professor of Materia Medica
Professor of Pathology.
Professor of Botany. (when required)
Professor of Medical Jurisprudence.

Professor of Comparative Anatomy. (Course of lectures when required)
Professor of Hygiene. (when required)

Assistants to Professors.

1. Demonstrator and Curator Museum.
2. Assistant to Professor of Medicine.
3. Assistant to Professor of Materia Medica and Botany.

4. Assistant to Professor of Chemistry.
5. Native Assistant. (teaches certain subjects to medical pupils)

I have the honor to be,
Sir,
Your most obedient Servant,

Edward Balfour Surgeon General.
Surgeon General
Indian Medical Dept.

29. 67

Medical College, Calcutta
January 13th, 1874.

* * * My Bengali class, upwards of 800 strong, has been removed to a suburb of this city and occupies what you will hereafter, hear of as the Sealdah or Campbell Medical School. Again, this College having grown beyond all reasonable proportions, our Military or Hindustani or Native Medical Pupil class is to be removed at the end of this session to Patna where they will have a school of their own. There is also to be a vernacular class at Dona.

/Signed/ Norman Chevers.

—

Medical College, Calcutta.
March 18th 1874.

My dear Balfour,

Pray pardon my delay in replying to your inquiries, but the answers require some detail, and work here has been almost overwhelming of late.

In 1873, we had, altogether 1394 students in this College, 486 English class, 772 Bengali and 136 Hindustani.

We intend, in future, to keep up the strength of our English classes at this College at about 500.

Our English class will then be divisible into the English class and the Assistant Apothecary class.

We have no information of the number of beds at Patna, but I know of its large hospital there. At Dacca, the students will attend the Milford Hospital, a fine institution for the Hospitals. The number of beds at the Calcutta Hospital is 400.

Originally, the College gave a gratuitous medical education to all students, and some came with scholarships from (Educational) schools and Colleges, and some gained scholarships as prizes in this College. Up to the present time, the Hindustani class, whose destination it is, to become Native Doctors, chiefly with Native Corps, have been supported, as soldiers in barrack, in the premises. Lastly the Hospital Apprentices, who come here for three years' study are similarly supported and lodged on the College premises. A student of the Primary or English class has always had the option, on passing, of either taking service as a Sub-Assistant Surgeon or of becoming a private practitioner.

Here then, was the germ of the system of providing medical men for the country.

Some years ago, it was felt that a humble class of practical but unlearned private practitioners was needful in the village. These were provided in the Bengali Licentiate division of the Bengali class, the residue of which forms the Bengali Apothecary class, both educated as Native Doctors for Jails, Dispensaries, and other civil duties in Bengal.

Then the time came at which Lord Lansdowne rem
at the "Eleemosynary character" of our medical Ed
as he termed it, and it was arranged that all
ten free students and forty scholarship holders of
English class and two others, should pay for the
education here. We have two sets of paying studen
in the English class. 1st the Paying student proper w
pays Rs. 15 admission fee, and 5 rupees per mensem
for five years; and 2d the casual student whose ca
it usually is to study here for 3 years and then ap
another year in London or Edinburgh, to pass ther
His 3 years' study here costs him about Rs. 810-

The Bengali Licentiate class has 36 free st
who, however, pay one rupee per mensem for their bo
The Beng. Apothecary class have 30 free students s
-jected to the same small deduction. These two clas
have 66 scholarship holders (College) and are liab
to the same tax. Of the remainder, the Bengali Li
-tiate class pay entrance Rs. 9 and three rupees a
month for 4 years. The Apothecary class pay one rup
on entrance and two rupees monthly for the same
term. By our last calculation, we had of Paying students

Eng. Class. 338.
Beng. Licentiate 228.
Apothecary 193

Thus, in 1872-73, we received from paying students of all classes, a total of Rs. 39,568—n—. In the year, our College cost Government Rs. 152, 652-15-3, in which the last named sum is not included.

This gives a slight but clear idea of the manner in which Government provide private practitioners for this Presidency.

Believe me,
Yours very truly,
(Sd) Norman Chevers.

True Copies

Edw Balfour Surgeon Genl

Surgeon General
Indian Medical Dept

No. 178

Surgeon
OFFICE OF ~~INSPECTOR~~-GENERAL, I. M. D.,
Fort Saint George, 18th April 1874.

From

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

To

The Chief Secretary to Government.
Educational Department.
Fort Saint George.

SIR,

In my letter, No. 150 dated 1st instant, I had the honor of submitting to the Right Honorable the Governor in Council that 115 is the number of students which the Principal of the Madras College has reported that the college with its present staff, can teach; and I at the same time, brought to notice, that the Calcutta College, with only two professors (one of whom is for dentistry and four Assistant professors more than in Madras, had last year 394 students.

2. At the time I wrote that letter, my information as regards Bombay was incomplete, and I applied for the requisite data from the Principal of the Grant Medical College, copy of whose reply to me, as the subject is still before Government, I beg to subjoin, from which it will be seen that in 1873, the Grant College had 303 students, in the following classes, namely,

Graduates and Under-Graduates	130.
Hospital Apprentices	92
Vernacular & Native Medical pupils	78
Assistant Apothecaries	3
Hospital Assistants	2
	303.

3. As in my previous letter, No. 150, I placed in

parallel columns the College Staffs of Calcutta and Madras so now similarly, I give the staff of Bombay and Madras to show that, though Bombay, in 1870, was teaching 303 students the number of professors and Assistant Professors was identical.

Bombay.

Staff Medical College

		Masters
1.	Principal and Professor of Medicine	
2.	Professor of Materia Medica, Surgery & Superintendent	
3.	" Surgery and Clinical Surgery	2. Professor of Anatomy
4.	" Anatomy	3. " Chemistry
5.	" Chemistry & Medical Jurisprudence	4. " Physiology
6.	" Physiology	5. " Materia Medica
7.	" Materia Medica	6. " Pathology
8.	" Pathology	7. " Botany
9.	" Botany	8. Demonstrator of Anatomy
		9. Curator of Museum
		10. Assistant to Professor of Chemistry

	Assistants to Professors	
1.	Demonstrator of Anatomy	1. Demonstrator of Anatomy
2.	Curator of Museum & Assistant to Professor of Materia Medica & Botany	2. Assistant to Professor of Materia Medica & Botany
3.	" " Chemistry, remarks above	3. Assistant to Professor of Chemistry
4.	" " Medicine & Physiology, remarks above	4. Assistant to Professor of Medicine & Physiology
5.	" " Surgery & Medical Jurisprudence, remarks above	5. Assistant to Professor of Surgery & Medical Jurisprudence
6.	" " Anatomy & Physiology, remarks above	6. Assistant to Professor of Anatomy & Physiology

1.	Compounder (Native, when required)	—
2.	Lecturer on Anatomy (Native when required)	—
3.	Native Assistant to Professor of Surgery (Native when required)	—
4.	Native Assistant to Professor of Anatomy & Physiology	—
5.	Native Assistant to Professor of Materia Medica	—

Staff Medical College

1.	Principal and Professor of Medicine	1. Principal and Professor of Medicine
2.	Professor of Materia Medica, Surgery & Superintendent	2. Professor of Surgery & Superintendent
3.	" Surgery and Clinical Surgery	2. Professor of Anatomy
4.	" Anatomy	3. " Chemistry
5.	" Chemistry & Medical Jurisprudence	4. " Physiology
6.	" Physiology	5. " Materia Medica
7.	" Materia Medica	6. " Pathology
8.	" Pathology	7. " Botany
9.	" Botany	8. Demonstrator of Anatomy
		9. Curator of Museum
		10. Assistant to Professor of Chemistry

	Assistants to Professors	
1.	Demonstrator of Anatomy	1. Demonstrator of Anatomy
2.	Curator of Museum & Assistant to Professor of Materia Medica & Botany	2. Assistant to Professor of Materia Medica & Botany
3.	" " Chemistry, remarks above	3. Assistant to Professor of Chemistry
4.	" " Medicine & Physiology, remarks above	4. Assistant to Professor of Medicine & Physiology
5.	" " Surgery & Medical Jurisprudence, remarks above	5. Assistant to Professor of Surgery & Medical Jurisprudence
6.	" " Anatomy & Physiology, remarks above	6. Assistant to Professor of Anatomy & Physiology

1.	Compounder (Native, when required)	—
2.	Lecturer on Anatomy (Native when required)	—
3.	Native Assistant to Professor of Surgery (Native when required)	—
4.	Native Assistant to Professor of Anatomy & Physiology	—
5.	Native Assistant to Professor of Materia Medica	—

3rd I have the honor to be,
Sir
Your most obedient servant
Edwar Mayhew Surgn Genl
Surgeon General
Indian Medical Dept.

Grant Medical College, Bombay 14/6/71

Dear Sir,

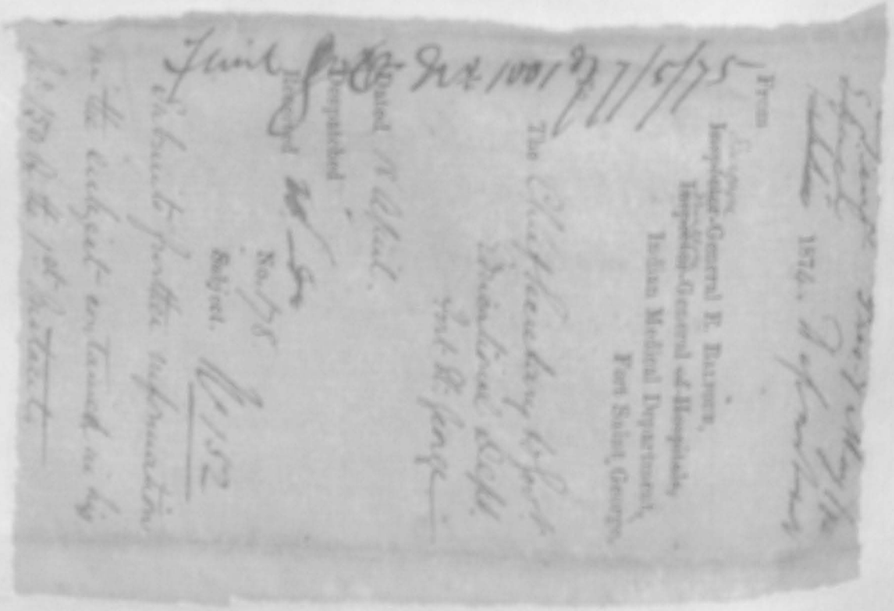
There are in the College, Graduates & under graduates 130, Hospital Apprentices 92 - Vernacular and Native Medical Pupils 76, Assistant Apothecaries 3 and Hospital Assistants 2. making a total of all classes of 303 - The 1st named corresponds to your senior class - the Hospital Apprentice class remain in College for 3 years and are taught along with the University students, and on leaving (after passing their examination) are designated Asst. Apothecaries. The Medical Pupils belong to the Subordinate Medical Department, the Vernacular students are admitted by competition, and both are taught through the medium of the Marathi language, have a 3 years course of study and on passing their examination, become 3d Class Hospital Assistants - The 3 Asst. Apothecaries and the 2 Hospital Assistants are undergoing a college course under Rules 46 and 47 of G.G.O. No. 392 of 17th June 1868. They are taught with the University students, have a 2 years course and should they pass, become Sub-Asst. Surgeons, or rather Asst. Surgeons. Kindly excuse brevity, as I am busily engaged with class examinations. Should I have omitted to supply you with any information, I shall be happy, on application, to make good the deficiency.

Believe me
Dear Sir
Yours faithfully,
Sd/ R. G. Hunter.

True Copy

Edwar Mayhew Surgn Genl

Surgn Genl
Indian Medical Dept.



No. 239

Surgeon
OFFICE OF INSPECTOR-GENERAL, I. M. D.,
Fort Saint George, 29th May 1874

From

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

To

The Chief Secretary to Government.
Public Department.
Fort Saint George.

SIR,

With reference to para. 4 of G.O. No. 803 of 8
Instant, I have the honor to mention, that the sche
for educating Civil Medical men, there asked for
was submitted in paras 3, 4 and 5 of my letter No.
409 of 23rd October 1873, and paras. 6 and 13 of No. 4
of 2nd February 1874.

2. In those letters, I recommended that the
Curriculum for the training of the better qualified
Medical men, to be styled "Civil Medical Officers," suite
to be "Medical Officers" in independent Medical cha
should correspond with that now followed in teachi
the Military Warrant grade in the Second Depart
-ment of the Medical College; - the education for the
"Civil Hospital Assistants," who were to fill subordinate posi
being made to correspond with that now imparted to the
Military Hospital Assistants.

3. My recommendations, as to the education needed for the more highly qualified practitioners, the "Civil Medical Officer," were given in detail in my letter N°43 of 2nd February 1870; but I observe that, when writing, I did not enter into all the details necessary to admit of immediate disposal of the "Civil Hospital Assistants" case. I therefore, now beg to recommend, that they shall nearly pursue the curriculum at present followed for the training of Military Hospital Assistants, by being subjected, as now, to a preliminary departmental examination, then trained for one year in precollegiate duties and studies, and for two years in Collegiate studies, and then examined as to qualifications and receive Certificates as to fitness. During their precollegiate, Collegiate, and working service, their monthly salaries to be, as per margin. And, after four years, when the present great pressure of medical men is lightened, the Collegiate studies to be pursued the same as now but pursued for three successive years.

One year Precollegiate studies — Rs 7
Two years of Collegiate studies — " "
Re-subordinate Supply, 3rd Class Rs. 20
2nd Class Rs 30
1st Class Rs 40

4. Neither of these two classes of Civil Medical men to be attested, and their pensions to be in accordance with the Civil Uncovenanted Rules.

5. If reference be made to the paras of my letters as per margin, there will be found

N° 409 of 870 para 6
N° 43 of 870 paras 3 and 12

recommendations as to the stipends of the two classes, while under precollegiate and Collegiate instruction, and as to their salaries, while in employ as Medical practitioners. In para. 13 of my letter, N°43, the precollegiate and collegiate stipends, for the students of the higher qualification, were proposed as under;

Precollegiate - { 1st year at Rs. 16. / 2d year at Rs. 20.

Collegiate - { 1st year at Rs. 20. / 2d year at Rs. 25 / 3d year at Rs. 30.

And I still consider the stipends which I there recommended to be suitable, and such as would attract young men of European and Native origin to the profession. I did not, however, name the stipends which I would propose for the subordinate "Civil Hospital Assistants," and I now do so;-

Precollegiate - 1st year Rs. 6.

Collegiate - { 1st year Rs. 8 / 2d year Rs. 9.

Being stipends different from those proposed in margin of last para - 12

6. As the matter of salary, when working, I proposed, in para 6 of N°409, rupees 20 per mensem, for the subordinate Civil Hospital Assistant, and I consider that as a suitable salary for a subordinate "Civil Hospital Assistant," when first passed out of College, and he might then be styled of the 3d Class, the salaries of the three classes that I would propose being as under,

Civil Hospital Assistant, 3d Class, under 4 years - Rs. 20.
2d Class under 14 years. Rs. 30.
1st Class of 14 years & upwards. Rs. 40.

7. The salaries submitted by me, in my two letters Nos 409 of 1873 and 43 of 1874 were framed on two different principles, - that in my letter, No 409 of 1873, was constructed on the principle of classifying charges in three grades as under:

Civil Medical Officer in charge of 3d Class Dispensary Rs 70
2d Class Dispensary Rs 80.
1st Class Dispensary Rs 100

and I think it probable that applicants of average ability &c, could be had for these rates.

The recommendation in my letter, No 43 of 1874 was based on the principle of years of service and on being in subordinate or independent charge, as under:

	In subordinate charge	Independent charge
Civil Medical Officers, under 7 years	Rs 50.	Rs 100.
" " 7 and under 14	" 100.	" 150.
" " 14 and upwards	" 150.	" 200.

and I have, no doubt, whatever, from all the inquiries made by me, that applicants of good ability, &c, can be had for these terms, and I recommend that these money rates be adhered to, and be granted on the service principle.

8. With reference to the Question put to me in the concluding part of para 4, I had the honor on a former occasion, to mention that few medical men can be selected from amongst those who have been discharged, or pensioned from the service, and there is, at present, in the South of India, only one unemployed medical man with the degree of M.B from the Madras University. It is Mr. Henry Raikes who tells me that he would accept a salary of Rs. 200. monthly. -

Years	Numbers entering College	Numbers qualifying
1859 — 60	4	1
1860 — 61	5	—
1861 — 62	2	—
1862 — 63	2	—
1863 — 64	2	1
1864 — 65	—	1
1865 — 66	2	2
1866 — 67	4	—
1867 — 68	2	1
1868 — 69	6	2
1869 — 70	2	—
1870 — 71	2	—
1871 — 72	—	1
1872 — 73.	—	3

9 I beg to place on the margin, the numbers of entries during the past fourteen years, of Civil students into the Senior Department of the Madras Medical College, in order to explain to the Right Honorable the Governor in Council, why there are so few civil medical men.

10. In the above proposals of schemes for educating Civil medical practitioners, it will be observed that, after omitting the attestation which has hitherto been applied to the military medical students, the Curricula, through which I propose that the Civil medical students should pass, are almost identical with those now followed in the Madras College in the second and junior departments, in training for the warrant and Hospital Assistant grades, and I advise this course, because the curricula are ample, and the existing College arrangements would, in no way, be disturbed.

11. In the foregoing paras. of this letter and in my letters, No 409 of 1873 and No 43 of 1874, I have been writing solely on the supposition that the Civil Medical

men, whose education I have been proposing, are to be
dispended, during their course of pre-collegiate and Collegiate
instruction. I have considered the possibility of young
men studying on their own resources, in the hope of
subsequently obtaining professional employment in
India either from Government, or amongst the Commu-
-nity, but I am satisfied that there cannot, at present,
be entertained any hope of obtaining a sufficiency
of medical practitioners in that manner. I think that
the day will come, probably is not far distant, when young
men will see their way to a useful career in life, by ac-
-quiring a degree or licence in Medicine, but I have shown
above in para 9, that, in the past fourteen years, only
31 students have entered, and 12 students have quali-
-fied in the Senior Department of the Madras Colge,
and this fact will prove to Government that for the present
at least, the needed quantity for Civil Medical practitioners
must not only have stipends allotted to them, as in-
-ducements to study, but also have a certainty that on
obtaining their degrees or certificates of qualification, there
shall be employment provided for them.

12. The permission which is now partially in
force for private students to attend certain classes of the
College on payment of fees, should, however, be made
general, and I may mention that the curriculum for
the higher qualified men, which I propose in this letter,

is identical with the curriculum which, in my letter
No. 158 of 10th April, I reported to Government had re-
-ceived the assent of the Entire Faculty of Medicine
of the Madras University. I consider this uniformity
of value, because if the proposed curriculum receive Uni-
-versity sanction, a private student may, at the close of
his studies, obtain a University degree. The Bombay
and Bengal Colleges and Universities are educating
many private medical men, and, so soon as this
Presidency shall have a few such to countenance,
and help each other, there will not be any difficulty
in their obtaining a fair livelihood in the practice
of their profession.

13. There are, at present, several scholar-
-ships available for the Senior Department students.
It may be desirable to make them available for the
private Medical students following the curricula
which I now propose.

14. I recommend that the two Civil Medi-
-cal Offices, now proposed, be open to all persons offering
with good moral character, who pass the tests.

15. The Military Medical students at the com-
-mencement of their precollegiate training are all attested,
and the question of [illegible] placing the Civil students under a
bond has to be considered. I am of opinion, that the Civil
Medical men should be bound over to serve Government for ten

years after obtaining their Certificate of fitness.

6. In my letter No 109 dated 23rd October 1875 I mentioned 30 as the number needed of students for the more highly qualified class of Civil Medical Officers. Since then another session of the College has come to a close, and the casualties and requirements of another year have to be provided, and I now name 40 as the number needed of students for the higher qualified grade of Civil Medical Officers. Even if the candidates can be in time sufficient to commence their preliminary studies on the 1st October of the current year, the students will not complete their curriculum until June 1878, by which time employment for the number that I now name will certainly be found for the inferior qualified men – the "Civil Hospital Assistants" – 56 the number that I calculate to be now required, and they will leave College in June 1878.*

7. I am of opinion that until the 1877 Candidates be called for, the admission to study as Civil Medical Officers should be either by Departmental Examination or by Matriculation, but for and after the 1877-78 session, Matriculation should be the sole test for admission.

8. The numbers which I now give as required for the wants of the country will place at the

College students greatly in excess of the 115, which the Principal has stated in his letters as the highest number that the College, with its present teaching staff, can have, at one time, under training; but I have shown in my letters now before Government, that the Bombay Medical School, with the same number of Professors and Assistants, as in Madras, had last year 305 students, and the Calcutta College had 1394 students, though with only one Medical Professor and four Assistants more than Madras; and there cannot be any difficulty here in educating greater numbers, if the Madras Educational Department will but conform to the practice in the sister Universities.

9. As it is of importance that Government should have in its possession a clear statement of the Curricula of the studies, which I have advised should be followed by the future Civil Medical students, and also a statement of the stipends and salaries, which I recommend should be given to them, when at College, and, afterwards, when employed in their profession, I place below all that I have already submitted in my letters as per margin, and in the present communication.

* The numbers of admissions should be limited to 40 annually for a Civil Medical College to the extent commencing October 1877 dated 20 October 1877 the number to be admitted annually to the Civil Hospital College to the extent commencing October 1877 the number to be admitted annually to the Civil Hospital College to the extent commencing October 1877 dated 20

I. Civil Medical Officer.

Stipends and Salaries. Departmental or Matriculation test, until the year 1879-80, afterwards Matriculation only.

A. Precollegiate Course, two years, viz:

1st year monthly stipend Rs. 16.

2d year monthly stipend Rs. 20.

B. Collegiate Course, 3 years, viz.

1st year, monthly stipend, Rs. 20.

2d year monthly stipend Rs. 25.

3d year monthly stipend Rs. 30.

C. After leaving College with a Certificate of Qualification, when in Government employ.

	In subordinate medical charge.	In independent charge.
Under 7 years.	Rs. 50	Rs. 100.
7 & 14 years.	" 100	" 150.
14 & upwards.	" 150	" 200.

II. Civil Hospital Assistants.

Stipends and Salaries. Departmental test

A. Precollegiate Course, one year, viz.

1st year monthly stipend Rs. 6.

B. Collegiate Course, two years, viz.

1st year monthly stipend, Rs. 8.

2d year monthly stipend Rs. 9.

C. After leaving College with a Certificate of Qualification, when in Government employ.

3d Class, under 7 years. Rs. 20.

2d Class, under 14 years Rs. 30.

1st Class, of 14 years and upwards Rs. 40.

III. Course of Study.

A. Civil Medical Officer.

Entrance Examination up to Session 1876-77 inclusive, at option, Matriculation or Departmental Examination at present. From session 1877-78

medicine Matriculation

Precollegiate Studies 2 years

Collegiate Studies at

MEDICAL COLLEGE—187□-7□.

CURRICULUM OF STUDY—WINTER SESSION.

Entrance Examination up to 1876-77 inclusive, optional

Departmental as now or Matriculation. On and after 1877-8

Matriculation.

For Civil Medical Men, same as for

SECOND DEPARTMENT.

1st Year.		2nd Year.		3rd Year.	
Winter ...	Anatomy. Chemistry. Materia Medica.	Winter ...	Anatomy. Physiology. Surgery and Clinical Surgery. Medicine and Clinical Medicine. Dissection and Demonstrations.	Winter ...	Medicine and Clinical Medicine. Surgery and Clinical Surgery. Midwifery. Ophthalmology. Dissection and Demonstrations.
Summer.	Practical Chemistry. Practical Pharmacy. Examinations by the Assistants.	Summer.	Practical Pharmacy. Minor Surgery. Examinations by the Assistants.	Summer ...	Medical Jurisprudence. Hygiene. Diseases of Women and Children. Operative and Minor Surgery.
Hospital Attendance.		Surgical and Medical Wards.		General Hospital, Eye Infirmary, and Lying-in Hospital.	

For Civil Hospital Assistantships

JUNIOR DEPARTMENT.

1st Year.		2nd Year.	
Winter ...	Anatomy. Materia Medica. Examinations by the Assistants.	Winter	Medicine Clinical Medicine. Surgery. Clinical Surgery. Midwifery. Dissections. Examinations by the Assistants.
Summer ...	Outlines of Physiology. Practical Pharmacy. Minor Surgery. By the Assistants.	Summer	Ophthalmology. Minor Surgery by the Assistants. Examination by the Assistants.
Attendance at the General Hospital during both Sessions.		General Hospital, Eye Infirmary, and Lying-in Hospital during both Sessions.	

DAILY ORDER OF INSTRUCTION

Days.	6 to 10.	10 to 11.	11 to 12.	12 to 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.

Monday	Dissections	Botany	{Pathology / Materia Medica}		{Examination in Anatomy, 2nd Class / Physiology}	{Physiology / Midwifery}		Examination in Chemistry.
Tuesday	Do.		Materia Medica	Do.	{Do. / Ophthalmology}		Do.	{Surgery. / Examination in Materia Medica.
Wednesday	Do.		{Pathology / Materia Medica}	Do.	Chemistry	Physiology	{Medicine / Examination in Materia Medica}	Surgery / Examination in Chemistry.
Thursday	Do.	Botany	Materia Medica	Do.	{Chemistry / Examination in Anatomy, 2nd Class / Ophthalmology}	Physiology / Midwifery	Medicine / Examination in Anatomy, Junior Class	Surgery / Examination in Materia Medica.
Friday	Do.		{Materia Medica / Pathology}	Do.	{Chemistry / Examination in Anatomy, 2nd Class}	Midwifery	Do.	{Surgery. / Examination in Chemistry.
Saturday	Do.							

The Winter course commences on the 1st of October and terminates on the 31st of March; the Summer course commences on the 1st of April and terminates on the 30th of June.

The proportion of Examinations to Lectures shall not fall below one in three in the several courses, whether these courses be delivered during Winter or Summer Sessions. Towards the close of each course of Lectures there shall be held a "conversational course," which shall include Examinations in all the subjects lectured upon.

Recorded Examinations of all the Junior Students shall be made by Committees of Professors at the end of every Session. These are not to exempt the Students from such Examinations in Chemistry and Materia Medica as the Final Examination Committee may consider necessary to elicit the Student's knowledge of the Application of these sciences to practice, or to satisfy it that he has not neglected these studies during the interval.

Civil Medical [illegible] SENIOR AND SECOND DEPARTMENTS.

DAILY ORDER OF INSTRUCTION FOR THE SUMMER SESSION.

Days.	11 to 12.	12 to 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.
Monday	Diseases of Women and Children / Examination in Medicine, 2nd Class	Hygiene	Examination in Physiology	Medical Jurisprudence / Examination in Surgery	Operative and Minor Surgery.	
				Practical Chemistry.		
Tuesday	Diseases of Women and Children	Hygiene / Pharmacy.	Examination in Anatomy, 2nd Class	Medical Jurisprudence	Operative and Minor Surgery.	
Wednesday	Examination in Medicine, 2nd Class	Hygiene	Examination in Physiology	Medical Jurisprudence / Examination in Surgery	Operative and Minor Surgery.	
				Practical Chemistry.		
Thursday	Diseases of Women and Children	Hygiene / Pharmacy.	Examination in Anatomy, 2nd Class	Medical Jurisprudence	Operative and Minor Surgery.	
Friday	Diseases of Women and Children / Examination in Medicine, 2nd Class	Hygiene	Examination in Physiology	Medical Jurisprudence / Examination in Surgery	Operative and Minor Surgery.	
				Practical Chemistry.		
Saturday	Operative Surgery as material is available.					

The Summer course commences on the 1st of April and terminates on the 30th of June.

The proportion of Examinations to Lectures shall not fall below one in three in the several courses. Toward the close of each course there shall be held a "*Conversational Course*," which shall include examinations in all the subjects lectured upon.

Recorded Examinations of all the Junior Students shall be made by a Committee of Professors at the end of the Session. These shall not exempt Students from such examinations in Chemistry and Materia Medica as the Final Examination Committee may consider necessary to elicit their knowledge of the application of these sciences to practice, or to satisfy the Committee that they have not neglected these studies during the interval.

Have the honor to be,

No 71

Madras. Medical College
5th June 1874

From
The Principal
Medical College

To
The Surgeon General
with Government
Indian Medical Department
Fort St. George

I have the honor to request
that you will be good enough
to favor me with the number
of Hospital Apprentices and Natives
Medical Pupils who will join
College on the 1st of October next.

I have the honor to be,
Sir,
Your most Obedient Servant

W. Smyth M.D
Principal

243

81

No 52

Fort St. George, 22nd June 1874.

From
The Surgeon-General with the Government,
Inspector-General F. Dumont,
Inspector-General of Hospitals,
Indian Medical Department,
Fort Saint George.

Dated 5th July 1874.
Despatched
Received 9th July 1874.
No. 2339
Subject.

The Superintendent
Madras Medical College
Fort St. George.

Sir,

With reference to your letter No. 71, dated 5th June 1874, I have the honor to request that you will be good enough to favor me with the number of Hospital Apprentices and Native Medical Pupils who will join College on the 1st of October next.

I have the honor to be,
Sir,
Your most Obedient Servant

Surgeon-General with the Government

245 84

No 84 Madras Medical College
11th June 1874

From,
The Principal
Medical College

To
The Surgeon General
Indian Medl Department
Fort Saint George

Get from Letter

Sir,

With reference to your letter No 3464 dated 6th June 1874. I have the honor to represent that the number of pupils which you propose to send to College when added to the probable contribution of pupils (8) from Mysore* will make an aggregate of 66 pupils i.e of two whole classes of 33 pupils each.

Vide Proceedings of Govt dated 18 September 73 No 288.

2. Clinical Instruction can be provided only for one of these batches at the Medical College; for the other batch, arrangements for clinical instruction will have to be made, either by securing two additional

* Q.A. No 154 dated 27th April 1874.

No 3464

6th June 1874 To the Principal Madras Medical College

Proposing to send to College the number of pupils mentioned in the margin

Pupils entered 1st June 72 — 22
" " 1st Nov 72 — 36
58

Reading 1874
Principal Madras Medical College
Letter No 84 dated 11th June 1874
Submitting a statement of the number of pupils which he proposes to send to College when added to the probable contribution of pupils (8) from Mysore will make an aggregate of 66 pupils i.e of two whole classes of 33 pupils each.
Recommending that arrangements be made for clinical instruction for one batch at the Medical College and for the other batch either by securing two additional Pupils or by sending

Clinical Teachers at the General Hospital, or by making arrangements for the requisite training at one or other of the Hospitals at the Presidency.

5. If these arrangements be made an additional Assistant, as I suggest, will be required at the College.

I have the honor to be,

Sir

Your most Obed.t Servant

Fr. Smith Mus

Principal

No 1672 Madras 12/11/74

From, Surgeon Major Partridge
Acting Surgeon General

To, The Principal & the Members of the Committee attached to the Madras Medical College

Sir,

I have the honor to forward herewith a Return of the number of Students attending the Madras Medical College during the year 1874.

I have the honor to be
Sir
Your most obedient Servant
Surgeon Major
Acting Surgeon General

No 3557 - 13-74 -

From The Principal Madras Medical College
To The Surgeon General of Fort St George

Sir,

I have the honor to forward herewith a Return of the number of Students attending the Madras Medical College during the year 1874.

I have the honor to be
Sir
Your most obedient Servant
Principal

Dr 85.

Returning the accompanying return of the number of students attending the Madras Medical College during the year 1874.

I am
Sir
Your most obedient Servant
Surgeon General

Rec 9/12/74

following:-

249 ✓ 83

Number of Medical Students in 1873-4 Session

	At the commencement of the Session			At the close of the Session		
	Department			Department		
	Senior	Second	Junior	Senior	Second	Junior
Private Students	12-8	"	"	1	"	"
Madras Government Students	4	27	52	2	27	52
Other Government Students in detail	"	1+	9*		1	9
Total	5	28	61	3	28	61

Surgeon General.

Late Sola Lar. Surgeon General & Ex. Department

+ Singapore Govt student

* 8 Mysore students and 1 Pondicotta student

No 3739. 1874. 22

187/p

FROM

~~SECRETARY TO SURGEON-GENERAL,~~

INDIAN MEDICAL DEPARTMENT.

To the Principal, Medical College Madras

To

No. 3775

Dated 18th } June

Received 19 }

Rec'd do.

REFERENCE.

SUBJECT.

In addition to the several points of information, notice of which were yesterday evening furnished, I am now requested, by the following

H/206 pt

No 103 Memo

Returned with the numbers required duly filled in

Geo Smith Lieut
for Med Coll Prin
19th June 1874

257 / 84

No 103

Madras Medical College
23rd June 1874

From

The Principal
Medical College

To.

The Surgeon General
with the Govt
Fort St George

Sir.

I have the honor to reply seriatim to the several questions which you handed to me on the 17th instant;-

Questions	Replies.
1. What number can the College take with its present Staff. of a. Native Medical Pupils b. Hospital apprentices?	1. "The maximum Number of Students of all departments which the Medical College can educate efficiently under existing rules is 115. distributed in departments this aggregate would represent 10 Students under training for the University, - 45 European & East Indian apprentices under

training for the Apothecary grade, and 60 native pupils under training for the grade of Hospital Assistant."

2. What number can the College take with the addition of the Hospital (College?) assistant sanctioned in G.O. No 372 of 6th December 1871 Q.
   a. Native Medical Pupils
   b. Hospital appointments?

2. An additional number of 30 native Medical Pupils but, it cannot undertake to train them clinically in the General Hospital with the existing staff.

3. What arrangements can be proposed that will enable any number of the 60 to be educated by means of the already existing strength and of the sanctioned Hospital Assistant? (2nd Qu. 3)

3. Any arrangement by which Clinical teaching external to the General Hospital can be secured.

4. What will be the duties of the two Clinical teachers and the pay?

4. Clinical teaching will form part of their duties; their remaining duties and pay must be determined by Government.

5. At what Hospital do you propose that they be taught clinically?—

5. Acting Surgeon General Rowlins proposed that

The required clinical instruction might be given at the Native Infirmary (vide Pro. of Govt. 15th Sept. 1873. para 5 of Dr. Rowlings letter) I think the suggestion a good one.

6. Sums available as savings on the Educational Budget?—

6. The subjoined table shows the Budget estimates for five years of the Minor Professorships of the College, and the actual expenditure: whether the balance is available or not I cannot say, but the Accountant General would doubtless furnish the information.

Table showing the Budget Estimate for five years of the Minor Professorships of the College, the actual expenditure, & the presumed savings.

Years	Estimated Expenditure	actual Expenditure	Presumed savings.	
	Rupees			
1869'70	12,000	3,100	8,900	
70'71	12,000	4,500	7,500	
71'72	12,000	3,800	8,200	
72'73	12,000	2,000	10,000	
73'74.	12,000.	2,800.	9,200.	

Have the honor &c

Sir,
Your most Obed Servt
Geo. Smith M.D
Principal -

No 3962 25 86

To The Principal Medical College

Sir I beg to mention that the Return which you have asked for in your letter No 163 of 23 June 1874, does not contain the information needed by me—

2. There are, at present, the undermentioned indicated numbers of Pre Collegiate Students, and it is ordered as per margin as per margin that the Medical Students shall be entered as follows to the number of that Can enter the College

Pre Collegiate		No 10
Hospital Apprentices — ~~entered on the 1st July~~	1st July 72	22
Native Medical Pupils — do	1st Nov 72	56
		68

summoned into the Medical College and the question arises

1 What number can the College take under its present staff

a Native Medical Pupils

b Hospital Apprentices

If unable to take all the 68 Can any of these three classes of Pre Collegiate Students be entered at once

Military Surgeon will give you this information

Answer (1)

Pupil 2 yrs — 22
Apprentice 3 yrs — 10
— 2 yrs — 5
— 1 yr — 10
47

25 June 1874

68

No 3962 /1874

From The Principal Medical College

To The Surgeon General

Sir I beg to request that you will be pleased to inform me whether the Pre Collegiate Students are entered at once or after one year's study

Answer

Subscribing Explain to whom it may concern the Pre Collegiate Students are entered at once

Pub 9/7/74

Rec'd 9/8/74

Rec'd 9th Sept.
Sub Inspr
Pt Medl College

259 87

No 116 Madras Medical College
1st July 1874

From The Principal
Medical College

To The Surgeon General
Indian Medical Department
Fort Saint George

Sir.

With adverstence to your letter, No 3962 dated 25th June 1874 and date as per margin, I have the honor to reply to the questions proposed to me.

2. On the 1st of October next the College will be prepared to admit to its Second Department the ten Hospital Apprentices indicated, and to its Junior Department a batch of 26 Native Medical Pupils, which batch will be raised to 30 by the addition of 4 Mysore students, whose admission has been directed by Government.*

1st What number can the College take with its present staff? Preintegrate Hospital Apprentices No 10
Native Medical Pupils 1st - 58
Total 68.

* Vide Order No 338 dated 7th November 1870.

3. The reason why the remaining extra

extra class of 32 Patients instead
Pupils cannot be taken under
instruction arises from a deficiency
of teaching-power in connection
with the Junior Department, and
from the impossibility of providing,
at the General Hospital, efficient
clinical instruction for numbers
so much in excess of its contract-
ities. I have the honor to be,

Sir,

Your most obed't Servant

Fra. Sewall, M.D.

Principal

No. 295.

OFFICE OF ~~INSPECTOR~~-GENERAL, I. M. D.,
Fort Saint George, 4 July 1874.

From

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

To

The Chief Secretary to Government.
Educational Department.
Fort Saint George.

SIR,

. The Right Honorable the Governor in Council is aware that the existing curriculum of study for the Militar Candidates for the Subordinate Medical Department requi that they shall pass two years of the period in hospital under the designation of pre-collegiate medical students, and then be transferred, as Students, to study at the Madra Medical College.

2. I beg to bring to the recollection of Government that after the Municipal and Local Fund Acts became law, Government, in order to meet the increased demands for medical men which it was considered that these Acts would create, authorized the entertainment of thirty-five additional medical pupils, and the employment of an additional Assistant in the Medical College to admit of their due instruction.

G.O. No. 372 of 6th December 1871. para 4.

3. When, in 1871, I recommended the entertainment of the additional number which the G.O. of 5th October 1871, has sanctioned, it was my intention, as stated in para 11 of my letter, that they should enter College in the session of 1873, so as to leave it qualified in June 1875. But during my brief absence in England last year when the Officer acting for me, submitted a list of the 58 pupils who should enter the College at the forthcoming session, the Principal of the Medical College as also the Director of Public Instruction took exception to that large number. Both of these Officers indicating that to teach such a large number, an additional Assistant in the College would be required, and they took this objection seemingly from their not being aware or forgetting that Government had, in 1871, already sanctioned that addition. The result however of the objections then taken was that only 22 precollegiate pupils were taken into the Medical College on the 1st October last and at the present moment there are 10 pre-collegiate Hospital Apprentices and 58 pre-collegiate Native Medical pupils awaiting orders as to their being or not drafted into the College on 1st October next.

G.O. No 288 of 10th September 87

4 I may mention that it is usual at this period of the year for the Principal of the Medical College to inspire of this Office what number of students it is intended to send into College at the beginning of the October Session, and ; in reply to the usual request, I mentioned the above numbers.* On this, he represented to me that the number of Native Medical Pupils, which I had proposed to send when added to 8 pupils expected from Mysore, would make an aggregate of 66 pupils equal, as he says, to two whole batches of 33 pupils each, and the Principal added that clinical instruction could only be provided for one of these batches at the Medical College, and for the clinical instruction of the other batch, arrangements would need to be made either by securing two additional clinical teachers at the General Hospital or by making arrangements for the requisite training at one or other of the Hospitals at the Residency.

10 Hospital Apprentices.
58 Native Medical Pupils.

5 On receipt of this communication, I asked the Director of Public Instruction and the Principal of the Medical College to meet me in consultation, and as the result of the meeting, I handed to the Principal 6 Questions, the replies to which would need to be my guide in laying the subject before Government for orders. I may therefore, briefly mention that, with the present teaching staff of the College, the Principal reports

(a) that he can take the 10 Hospital Apprentices, but only 26 of the 58 native medical pupils.

(b) that with the addition of an Hospital Assistant he can take into the College an additional number of 30 medical pupils but that he cannot undertake to teach them clinically in the General Hospital with its existing staff, and he thinks the required clinical instruction might be given at the Native Infirmary, and

(c) he shows that during the past five years from Rs 7,500 to Rs 10,000. have been saved from the Expenditure on the Educational Department from which money might be made available to pay the Medical Officer of the Native Infirmary for the additional duty that would be thrown upon him of imparting clinical instruction to the Extra students placed under his care.

6. I have already submitted to Government that I do not concur in the views of the Principal of the Medical College as to the inelastic character of the teaching agency under his orders in the Madras Medical College, and in the Madras General Hospital, and I have mentioned that in the past Session in the Calcutta College, the number of students was 134, and in the Grant Medical College Bombay, it was 303, while in the Madras Institution last year, in the beginning of the Session, it was only 94. But at the present moment, the need for additional Medical Officers is so very urgent, and, compared with the importance

of having them, the additional Expense that will be necessi-
-tated by acceding to the Principal's suggestions is so
small that I hope sanction will be given to the Principal's
suggestions. I, therefore, recommend that the entire
number of pre-collegiate Medical students, viz. 10 Hospital
Apprentices and 58 Native Medical Pupils, be permitted
to be drafted into the College on 1st October next, that the
Extra numbers whom the Principal cannot take for teaching
in the General Hospital, be posted for that purpose to the
Native Infirmary, and that the Medical Officer of that Insti-
-tution be allowed Rs. 200 per mensem for the 9 months of
each of the sessions 1874-75 and 1875-76, during which the
will be under his care, the amount being debited to
Medical College savings.

7. I recommend the above arrangements for the favorable consideration of Government, but if not ac-
-ceded to, the only alternative so far as I see is to allow
the Extra number to remain as pre-collegiate students
for another year. But, as mentioned above, when in
1871, Government authorized the entertainment of this
batch, though my intention was that they should qualify
from the College in June 1875, owing to the discussions
this time last year, they cannot now leave College earlier
than June 1876, and unless entered next October, they cannot

G.O. No 288 of 18th Sept. 1873.

come out of College until June 1877.

8. I do not know that any further reference is needed to the Principal of the Medical College, or to the Director of Public Instruction in anything connected with my present reference. Already a month has passed in obtaining from the Principal of the Medical College the information on which this letter is based, and if the Pupils are to come into College there is only to the end of September to make all subsidiary arrangements. I, therefore, attach the letters which I have received from the Principal of the Medical College in order that Government may have before them all available information and I solicit the early orders of Government on this subject.

9. I have mentioned above in para 6, my belief as to the elastic character of the teaching agency, and in support have referred to the larger numbers under training at Calcutta and Bombay from which it would seem possible to readjust the working of the College and General Hospital Offices as to receive a larger number of students. Indeed the numbers admitted in bygone years have been greater than in more recent times. I am somewhat doubtful of the correctness of the data in my possession as to the entrants into the Medical College during the past years, because besides the Military students who are passed in through this Office there have also been private, remanded and foreign

adventurers, but if not absolutely so the figures in the margin

767

Years	Entrants	Under Instruction
1859-60	53	156
60-61	42	140
61-62	30	115
62-63	63	129
1863-64	47	141
64-65	60	149
1865-66	64	163
66-67	65	121
67-68	52	120
1868-69	55	126
1869-70	62	132
70-71	43	107
71-72	45	111
1872-73	44	113
1873-74	42	94
Average	50.2	127.1

1864-65 47 136
65-66 46 115

give almost a correct statement of the Entrants and of the numbers under instruction during the 15 years 1859-60 to 1873-74 inclusive, and it will be observed that the admissions into College in that period have ranged from 30 to 65 and the numbers under instruction from 94 to 156. These totals refer to the Entrants in the three Departments of the College, Senior Second and Junior, for whose Education the arrangements are modified, but in the period under notice the annual entrants in the Senior Department ranged from 1 to 6, those of the Second Department from 9 to 30 those of the Junior Department from 16 to 42, during the same period the numbers under instruction in the Senior Department ranged from 7 to 16, in the Second Department from 19 to 37 and in the Junior Department from 38 to 107 and in the bygone Session of the College both the Entrants and the numbers under instruction were greatly below the average.

I have the honor to be,
Sir
Your most obedient Servant,
Edward Balfour Surgeon
Surgeon General
Indian Medical Dept.

C.D.

Fort Saint George 187 . Department

From

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

To

The Secretary to Govt
Educational Dept
Fort St George

Dated 4th Feb

Despatched — do —

Received 7th —

No. 295

Subject.

No. 987

I recommend for favourable
attention arrangements suggested
by the Principal Med. College for the purpose
of the wife of the Asst Surgeon & Asst Surgeon
while being drafted into the Med. College
in October next. &c &c &c.

12

Directors, began to urge upon Government the necessity of educating a superior class of native practitioners for practice among their countrymen, and authorised the Madras Government to afford encouragement to "native" Surgeons, one in each Province District, but from circumstances with which I am unacquainted, the whole number of vacancies of this grade, have never been filled up, so that the very necessary encouragement of Government employment, has been wanting in this part of India, to the establishment of a body of educated and intelligent medical men. In Bengal and Bombay however a different policy has prevailed, and the "Sub-Assistant Surgeons", as they are termed, are numerous in Government employ, while many have commenced private practice independently of Government aid. In those Presidencies, in fact, the medical profession, independently of the State necessities, has been encouraged, while in Madras the claims of the native have been overlooked, and the advancement of the profession for the benefit of the native population has been strangely lost sight of.

6. Of recent years there has been a great development in public sentiment as to the duties of a Government towards its people. The interference of a State in the protection of its people from avoidable causes of disease, is for the most part a practice of modern times, and in England the duty has been officially recognised only since the year 1864, when departments for the supervision of public health were instituted. For a period of ten years these public health departments, have had their functions confined to inspecting and reporting, and registering the causes of mortality in their several districts of population, and their labors would have been of little

and Military Departments of the State, the demands for Officers of the class to be placed on the new establishment of the Local Boards are more than can be complied with. In many of the Districts the Local Boards would gladly employ moderately paid medical practitioners to take charge of the extended rural areas, and afford medical aid to the poor, but there are no men of the class required available in the public service, and in consequence of the past policy in regard to the medical profession, the local authorities are unable to entice qualified candidates from civil life. As a matter of fact the subordinate branches of the Army which prior to 1870 were intended only for foreign stations, are unable to provide for the new and extensive requirements of the Local Boards for sanitary service in addition to their own special functions, and as a consequence the intentions of the Legislature in passing measures for the sanitary welfare of the people are, for the time being, either purposely, or reluctantly at all frustrated.

Q. — The actual condition of affairs seems to point to the needs of providing the following regulations of the subordinate Medical Services. As Government are aware the whole of the existing establishment of Apothecaries and Hospital Assistants of various grades is enlisted, or attested, for Military service - and although nearly the whole of their time may be engaged in purely Civil functions, the members are unable to provide for the new and extensive requirements of the Local Boards for sanitary service in addition to their own special functions, and as a consequence the intentions of the Legislature in passing measures for the sanitary welfare of the people are, for the time being, either purposely, or reluctantly at all frustrated.

just as if they had done no other than military duties.

10. When I served as a member of a Commission for the reorganization of the Subordinate Medical Service, in Calcutta in 1866, we recommended, and the Supreme Government approved of the recommendation, that admission to all grades of the subordinate Medical Service should be open to persons of any caste or creed. In consequence of this recommendation several natives in Madras subsequently obtained admission into the Apothecary grade, but a few years ago an Order from the Supreme Government appeared cancelling the admission of natives to the Apothecary grade, on the ground that the latter was intended solely for service in connection with European troops. But more recently the Government has seen fit to declare that no one who has not been educated according to the curriculums laid down for the education of Apothecaries, shall be deemed qualified to hold an independent Civil medical charge, such as that of a Dispensary &c., and as a consequence of this Order the European and East Indian classes of the Subordinate Medical Service are, at present, or are soon to be, the sole holders of independent civil charges, where the duties are almost entirely connected with the native civil population.

11. The Order of the Government of India prohibits the admission of natives to the Apothecary grades, and under the ruling of the Madras Government, no native practitioners, except the few who have already entered the Apothecary grade, can be employed in independent charge

under the Local Funds authorities.

12. I have been informed that the Madras Government was led to take this most serious step as regards the prospects of native members of the Subordinate Medical Service, by representations to the effect that the style of education afforded to the classes of the "Junior" department of the Medical College was inadequate to fit them for independent practice, and that there was no option left to the Government but to direct that no one under the grades of "passed hospital apprentice" / the lowest of the Apothecary Grade / should in future be appointed to an independent charge.

13. Whatever were the reasons leading to the decision, I hope I may be pardoned if I venture to question the expediency of a policy which in its action bears especially hard upon the natives of this Presidency who have chosen the Medical profession as the field of their life labours, and if I point out in what way a great injustice has been done to a humble, though most deserving, class of public servants.

14. I am quite prepared to admit that the range of subjects taught in the "Junior" class of the Medical College is not wide enough to turn out physicians and Surgeons accomplished in every niceety of diagnosis and operative skill. It was never the intention to train these men otherwise than as useful assistants to Superiors, nor was it ever supposed that their education of practical men ended when they left the College portals, armed with certificates of competency in their grades. The regulations of the department provide for their practical

knowledge being tested from year to year, by public
independent & strictly examinations
examinations for promotion from 3rd to 2nd class, and
from 2nd to 1st class, and besides these officials in
charge to practical work, the greater part of the
younger men had also served for lengthened periods,
under supervision, as Medical Officers in Hospitals
and dispensaries before they were advanced to
positions of independence, so that however defective
their college training might have been, it happened
in practice that a fair number of men of good prac-
tical skill were always available for these re-
sponsible charges. And I think I can safely
appeal to the records of the Medical Department,
to the officers of the Revenue, Police, and to the native
public generally, in testimony of the fact that the
services of such men have been appreciated, and
that in a large number of instances they have ris-
en and themselves to their official superiors, and the
general confidence of their professional skill,
zeal, and practical knowledge of their work. In these
days I am afraid there is too great a tendency to
exalt a knowledge of the abstract sciences in Medical
Education, and to forget sufficiently the fact that medicine
never can be an exact science, and that its practice
must always be founded on experience and ob-
servation. In this way it seems to me that too
much importance has been attached to the
acquirement of a meagre smattering of a few
scientific subjects, such as may be acquired
in the 2nd Department of the Medical College.
I say "smattering" advisedly, and without in
any way questioning the quality of the education
imparted, for it is utterly impossible that any
medical student in the course of a collegiate
career, can derive anything beyond the most
elementary knowledge of branches of science, which
to know in their entirety, is beyond the world's

of a life time *

15. Owing to the fact that natives are now
denied admission to the Hospital Apprentice
and Apothecary grades, it follows that the practically
experienced, natives of the Hospital Assistant grades
are, under the recent order, being gradually displaced
from Civil Dispensaries by young youths mostly of the
Eurasian classes, fresh from college, & inexperienced
in practice; it may be full of crude theories, and
much but imperfectly acquainted with the langua-
ges and modes of thought of the people, and
alien to them in caste and social life. From
my knowledge and experience of the working
of Civil Hospitals in this country, and of the influ-
which as native subordinate can bring to bear on
an institution of this kind, and of that respect and
esteem which falls to his lot when his fellow coun-
men get to appreciate him, I am forced to the
conclusion that the recent change has been not
only a grave political error, but that the interests
of the Government, as regards the extension of medical
aid to the people, will be frustrated by the employ-
of an executive staff, between whom and the people
to be benefited, there is a great social gulf fixed.

16. I would wish here to guard myself against
being misunderstood in regards to the Apothecary
grade, of the subordinate Medical Department.
The training of the members of this grade is an
excellent one, and as a class of public servants
they are worthy of the highest respect. It has been
my good fortune in times past, as Secretary to
the Commissions for the reorganization of the de-
partment in 1866, to advocate successfully the
claims of this highly important body of officials
to the consideration which they now enjoy, and
would to pay, (pro rata) for promotion, and pensi-
and if I may records my conviction that the sys-

* In the science
of chemistry for in-
stance, that range
of subjects to be under-
that no one can
hopes to attain ex-
cellence in it unless
he devotes his
whole time and
study to one of its
two great branches,
organic, or inorganic.

employment of Europeans and Eurasians as the sole professional advisers of the native community is a grave mistake. I trust that it will be understood that my objection is one founded on public policy only, and that nothing derogatory to the professional repute of the Warrant Grade is in question. The state of public feeling on the question might be ascertained if necessary by confidential returns to native gentlemen of eminence, but so far as my knowledge goes, the supplanting of natives of experience (though of inferior educational acquirements) by young men of the Eurasian class, is everywhere looked upon with disfavor. European medical officers have always had many difficulties to contend against in regard to the professional charge of native patients, and on the score of Eurasians, the difficulties are aggravated by the caste prejudices of the people. I do not say that the difficulties are of such a nature that they might not be overcome by a person of tact and ability, but that the existence should be recognized in any scheme of extended application to the native population of the country.

14. If the present regulations regarding the exclusion of natives from the warrant branch of the subordinate medical Service are to continue, then I would suggest that as this warrant grade is an exclusively military establishment, no more a division with it should be permitted than suffices for the wants of purely military establishments, and that a new order of Civil Apothecaries, or Sub Assistant Surgeons, be established, to which natives as well as others might find admission, and that the duties of this class should be purely of a civil nature.

15. By a series of miscalculations as to the future strength of the Warrant Grade of subordinates, it happens at the present time in Madras that there is a superfluity of young men of the "Hospital Apprentice" grade, who although primarily enlisted for military purposes are now being employed in Civil Hospitals. While Madras has more of this unnecessary class of subordinates than it has military occupation for, there is, if I am correctly informed, a great deficiency of this class for Military duty in Bengal.

16. One great consideration in regard to the separation of the Medical subordinate establishment into distinct Civil and Military branches would be a saving of expense. The whole of the accepted recommendations of the late Commission for the reorganization of the subordinate Medical Service, were based on the supposition that the establishment was a purely military one, and the rates of pay, pensions &c. which it awards as applicable to a class of persons liable to military risks. Now as the future about four fifths of the duty of the Subordinate Medical Service will be purely Civil in its nature, there seem to be solid reasons for suggesting that a Civil establishment, with Civil rates of pay, pensions &c, would be much more economical to the State than the present mixed Service, which is paid and pensioned entirely on Military rates.

20. A somewhat lower scale of [illegible] pensions than that of the Military Warrant

grade, would suffice to attract educated and respectable natives to enter as Civil "Apothecaries" or "Assistant Surgeons" or whatever designation may be given to them, and such men would find fitting employment under the various Local Boards, or directly under the Government, in Civil Medical duties. — This education should be of the same character as that afforded to the corresponding military class of Apothecaries.

21. Owing to the exclusion of natives from the Apothecary class, there are I believe no candidates of this description now under tuition in the college, and if Government decide upon separating the Service into Civil and Military branches and opening the former to natives, no time should be lost in making known the conditions of the Civil Medical Service, and in forming classes to fit it, in the Medical Colleges. The period of training Collegiate and extra Collegiate should extend over four years.

22. I might extend these observations more in detail, but the details of the subject fall naturally within the province of the Heads of the Medical Department and I have only to lay before Government what seems to me both politic and expedient in dealing with the general question of the education and organization of the future preventive establishments, that must constitute the working machinery for the prevention and cure of disease, in Government and Municipal institutions.

23. And I now have to lay before Government my opinion that the time has come when the subject of medical education and training should be dealt with on broader grounds than those of mere expediency and policy in regard to the necessities of State institutions, and that assistance of Government is essential to foster and encourage the medical training and education of the indigenous practitioners of the country who notwithstanding the multiplication of the and educated natives in Government employ, must, from the very nature of things, be the doctors of nine tenths of the rural population.

24. Ever since the year 1863, when as Secretary to the Medical Department I first drew attention to the needs of the country in regard to the education of its native practitioners and midwives, the matter has been before Government and a great deal has been said and written in regard to the establishment of provincial medical schools. I do not propose to traverse any of this ground again, or to refer to the mass of official papers which the subject has entombed, but I will offer a few suggestions that may test something of the power and ability of the Government to entertain the discussion of the great question of what can be done by a Government to aid its people in providing themselves with medical men in part adequately fitted for the responsibilities they undertake.

25. If we consider for a moment what has already been accomplished by Government in regards to the efficiency of its own servants in the several branches of Administration, in requiring all classes to show special knowledge before they can advance to situations in which such special knowledge is required, it does not seem to be wholly impracticable to apply a similar procedure to a class of men, whose duties call them to deal with the health and lives of

his consent upon a State to pass ordinances for the regulation of candidates for the legal profession, it is surely no less a public duty to see that all those who exercise the calling of a medical practitioner, shall afford some evidence of their fitness to be entrusted with the lives of the people.

28. The condition of the medical profession in India, at the present time, is somewhat parallel to what it was in England and Wales before the passing of the Apothecaries Act in 1815, with the difference, that the unfitness of the Indian practitioner is more universal, that that of the by-gone English Apothecary. The European officials of the Government, and the limited number of men trained in the Indian Colleges, represent the physicians and Surgeons of those times, who had chartered privileges, while the indigenous practitioners represent the old race of Apothecaries who were the general practitioners of the country and who prior to the year 1815 got no other professional training than was to be obtained by service as apprenticeship, with persons of the same calling.

29. — To attempt the enlightenment of the existing medical practitioners of India would be as idle as to go beyond the powers of any Government. This difficulty was encountered and acknowledged by the British Government in its efforts to introduce an uniformity of qualifications amongst the general practitioners of Great Britain. Legislation in the latter case had to be directed to the future, rather than to the present, as must be the case in India whenever the subject of medical qualification is to be brought within the cognizance of the law. The Apothecaries Act distinctly exempted all those who were in practice

countries it is the concern of the State that those engaged in occupations involving the responsible charge of the health and lives of the people, are fitted for their duties, and protected by the law from the competition of mere pretenders & knowledge, who have shown no qualification for their calling.

32. Legislation in my opinion should proceed at any rate should not be deferred beyond the establishment of Provincial schools of medicine for the training of young men for the profession. It is necessary that the native public should become familiarised with the idea that the future native medical men are to undergo a training and examination as to their fitness to practice, and nothing will bring the fact home to them in a practical form as an enactment into deed to take effect from a future date. Such an act, such as is here contemplated, could be passed during the next legislative session, its practical operation might be deferred until the 1st January 1886, and so ample time would be given to all candidates for admission to the qualified ranks of the profession would have ample time to shape their education in accordance with the requirements of the law. I have entered in an appendix the principle heads for a draft Act, suitable to the circumstances.

33. While nothing short of legislative interference will, in my view of the case, raise the social and professional status of the medical profession in India, I must not omit to point out that simultaneously with legislation there must be means and opportunities provided for the natives of complying with the requirements

of the law in regard to their training and education. — Medical schools will have and to be established in the provinces, so as to meet the examinees of candidates, and for some years to come it will be necessary for Government to take an active part in their maintainance. — In Europe medical schools are, for the most part, self supporting, but I take it for granted that many years must elapse before they will become so in India. — The people will require to see clearly before them the advantages of the medical profession before they will seek admission to it, and pay for their education, and the Government cannot afford to wait for an indefinite period for the amount of skilled assistance, as its own medical officers are immediately involved in augmenting the number of agents required for the sanitary and medical administration of the country. — In process of time, when the medical profession is actually established and practised by the law, it is quite possible that medical schools for the benefit of the general population will become independent of Government aid.

24. One of the most difficult questions connected with the subject is the standard of qualification to be expected of future practitioners of medicine. Theoretically, I suppose we should all desire to see the Indian practitioner a man imbued with the scientific spirit of the age, and acquainted, not only with the literature of modern medicine, but practically skilled in modern methods of diagnosis and treatment. But we have to consider what is practicable with the material available to our hands, and to remember above all that while we are striving after perfection, thousands of our fellow creatures are dying out of the

youths and primes, for want of so very moderate amount of skill on the part of their medical attendants, such as it is quite competent for the Government to demand of those who are to be the practitioners of the future.

25. — My own impression is that the standards of qualification, in the first instance, should be a very moderate one, such as might be obtained by any youth of ordinary intelligence after a period of three years study, and that the education instead of being diffused over a great variety of subjects, should be thorough and complete in regards to a few points of every day practical importance. — I should expect the candidates, for instance, to be able to recognise and treat, according to our present knowledge, the most common diseases of the country such as fevers, dysentery, cholera, small pox, syphilis, common diseases of the skin &c. but I should not expect them to have a minute acquaintance with diseases that are not seen by the average practitioner more than half a dozen times in a long career of practice, and in Surgery I should expect to find them acquainted with ordinary and every day simple operations, such as bandaging, setting of fractures, reducing dislocations, using the catheter, opening abscesses, and minor surgery generally — but I should not expect them to be experts, in tying the subclavian artery, removal of the lower jaw, cutting for the stone, or any of the greater operations in surgery. — The same observations would apply to the subjects of midwifery and materia medica. In the latter department I should expect to find a fair knowledge of the uses and preparations of indigenous drugs and of perhaps a few

needs of the country, and the progress of the people and that it should not be settled entirely on the authority of those engaged as professors and teachers. There is at wide gap between the possible and the practicable in this matter, and it would be as grievous a mistake to pitch the standard too high that men of the class wanted by the people should be unable to reach it. In my opinion every subject, and branch of a subject, not bearing directly on the prevention and cure of the more ordinary diseases of the human frame, should be rigorously excluded from the list of subjects in which examinations for qualifications to practice are held. The aim of the Government should be to increase the number of persons able to prevent or relieve human suffering and not to make of them bad Chemists, and indifferent botanists and inferior practical Anatomists. In course of time it might be advisable to raise the standard of requirements, and for the scheme I have outlined power would be reserved to the controlling authority to make changes from time to time.

38. The Madras University, which should properly have been the Alma mater of the medical profession in Southern India has cut itself adrift from the profession, by fixing too long as period of probation, and too high a literary and professional standard for its degrees in medicine. The University has done nothing to foster and encourage medical education in the seventeen years of its existence, and chiefly for the reason that it has laid too much stress upon mere literary acquirement

other important remedies which are not indigenous to the country, but whatever the subjects of examination for a qualification to practice, I regard it as of the very greatest importance that there should be a definition beforehand of the subjects to be taught, and a limitation of the examinations to the actual teaching.

36. I mention in regard to this matter as very necessary on the present day, when the tendency of every author, and more or less of every teacher, is to magnify the importance of his own particular subject, and to go on adding to the burden of the student, tasks far beyond the limited powers of mental assimilation. The modest "Hand books" of my own student days, have in subsequent editions developed into ponderous tomes which might more fitly be moved on wheelbarrows than lifted by the examinations of these serious stumbling blocks in the paths of students to. The evils of the present system of medical education have already attracted the attention of some of the wisest of living physicians, who deplore the mistakes of subjecting too much from a limited course of training, and it seems not at all improbable that the future reforms in medical education at home will be, not in the duration of attending the present range of subjects, but in curtailing them, and confining them within a narrower range.

37. In dealing with the subject of the standard of qualification for practice I think the Government would do well to adopt the views of men practically acquainted with the

forgetful of the fact that young men who have t
their living cannot afford to wait five years
for a medical degree, after passing the F. A.
Examination. The University of London, the
degree of which takes the first rank in medical
examinations requires only four years of special
study after matriculation for the M. D. degree, while
the Madras University, which has to deal with
poor students, and a population unable to re-
munerate medical men at a high rate, sticks out
for the F. A examination as a preliminary to a
five years course of scientific study for the M. D
degree. Under these circumstances it is no cause
for surprise that the few graduates who have complied
with the requirements of the University should be chiefly
young men of European extraction, whose friends do
not avail themselves of the opportunity of getting
their sons cheaply educated at the Medical College,
with the view of ultimately competing for admission
to the Commissioned ranks of the Indian Medical Service. Of the 31 millions of native inhabitants in
this Presidency only one is believed, has taken a
Medical degree.

* There are three native graduates but none are now habitant of Jaffna one and the other from Ceylon.

50. The Surgeon General of the Indian Medical Department recently proposed to the Senate of the University that a lower degree should be established, accepting the matriculation ex-
amination as the literary standard, with four years of subsequent professional study. The pro-
position was lost, but I believe the Surgeon General will bring it forward again in a modified shape.
Be that whatever decision the University may come
to regarding the question, it will still be necessary
for Government to take under its own charge
the population of the municipalities

practitioners of the country, for it will be hopeless
to expect, any time within the present century,
that the bulk of these practitioners will be able
attain the standard of a University degree.
40. While the improvement of the lower pro-
of the Medical profession seems to me the most
important question in the interests of the Govern-
ment and the people, I should at the same
be glad to see a more liberal encouragement
given to the higher medical education, so that
educated natives might have something
to look forwards to beyond the precarious uncer-
of private practice. I think it would be to the
interests of Government, that a certain number
of the Civil Surgeoncies of the country should be
reserved for the selected candidates possessing
the University degree, and I think there is room
employment for at least one person of this class
in every district of the country.
41. It has always seemed to me as a great
defect in the Sanitary and Medical Administ-
tration of the country, that the knowledge and
experience of our Civil Surgeons, who were per-
attached to Judicial courts, should be wasted
the head quarter stations of their districts.
most of these officers are also Superintendents
district Jails, which duties involve close re-
striction to the locality in which the jails are
a work which might be as well, or better, d
by persons of no special professional train-
ing. It results from this dispersal of the Civ
Medical Staff, that the members have no o
portunity of becoming acquainted with the spe
and sanitary needs of the people away from
Cantonment stations, and that they are unable

practical knowledge, to advise the Local Fund Boards as to the most judicious expenditure of money for new hospitals, and to sanction establishments. The Civil Surgeon or Health Officer of each district should in every large station, or town, by seventh application, be able to advise judiciously on Local Fund expenditure, and this he could and ought to do, if he were provided with a qualified assistant to whom he could entrust the executive medical duties of his charge, while he was absent on the inspections of his district.

In illustration of this circumstances, briefly, I may state that there is a Native Surgeon on the Government employment for each qualified native medical practitioner for whom I am quite sure that some practical Government employment is essential to the retention of such a class of practitioners.

Amongst the five native Surgeons who in this Presidency have passed Government examinations, I need only allude to Honorary Surgeon Moordeen Sheriff, Mr. Vasavayya, Civil Surgeon of Cuddapah and Mr. Narsingrao Surgeon of Kurnool, as men that under due encouragement there is no difficulty in securing the services of men who are remarkable for their practical proficiency as they are for social tact and good sense, whereby they have secured alike the respect and confidence of Europeans officials, and of their own country men.

42. With regards to the class of native practitioners for whom I would propose as a minimum qualification before entitling them to practice, there would be not only a written

employment in their own districts, and amongst their own people, but I would have all public vaccinators and hospital assistants, employed and paid out of Local Funds, obtain this qualification. The required number of such persons will in a few years be considerable. As hospitals are established, and vaccination extended, two shall require at the least, three such men in every taluq, besides one in each [illegible] of from 5,000 to 10,000 inhabitants.

43. Indeed if the subject of the entire medical education and qualification is to be dealt with by Government on its Hospital establishments, all classes of the subordinate medical service should be required to qualify in a standard according to the nature of the duties expected of them, and the present system of appointing annual committees of examination for the issue of certificates of qualification to Assistant Apothecaries and Hospital Assistants, might then be discontinued.

44. The medical faculty of the University in rejecting Mr. Balfour's proposition for the establishment of Licentiates in medicine, were of opinion that the power of granting licenses to practice should be confined to the Medical College. But it seems to me that there are many, and grave, objections to entrusting such powers to a simple educational institution, and do that the more dignified course would be for the Government to create an independent Board to which should be entrusted the duty of prescribing from time to time the courses of study, and the nature of the several standards of qualification. Such a Board would also be empowered to appoint Examiners to

a register of all qualified practitioners, showing the nature of their qualifications, to receive and account for all fees received from candidates on receiving licenses to practice, or on entering their names on the general register, and to approve rules, and adjudicate on all cases of professional misconduct on the part of qualified practitioners. Duties of this nature could not be with dignity or propriety relegated to the officials of an ample educational institution like that of the Madras College.

15. There is however a further objection to appointing the teachers of one college or school the sole authorities for granting certificates of qualification to the pupils of other schools. It is generally required that the teachers or professors of a school should not be also the examiners. This is the practice in the University of Edinburgh, but it is well known that it leads to jealousy and heartburnings on the part of rival schools, and in founding a new order of things here, we should do well to steer clear of all possible difficulties. It would never do for the students of Provincial schools to get an impression that Medical College pupils in Madras, had an advantage over themselves, in the personal bition of the examiners for admission to practice.

16. I sum up the main points of this Communication I advocate;

1st The limitation of the Warrant Grades of the Subordinate Medical Department, to the numbers required for Military establishments

2nd The separation of the Civil and Military Subordinate Medical Services, with distinct rules

of pay, pension &c for the former.

3rd The admission of natives to the Civil Subordinate Establishments and especially for the Charge of Civil Hospitals &c in the provinces.

4th The provision by legislation for the proper qualification of all persons practicing the Medical profession, independently of the Government.

5th The encouragement of the higher Medical education of the natives of India, by providing a fair proportion of official appointments for those who obtain, University degrees, and are otherwise qualified for official position.

6th The appointment of a boards of high Medical officials to regulate all questions connected with Examinations, appointment of Examiners, granting licenses to practice, the registration of Medical practitioners, and the disqualification of those guilty of disgraceful conduct.

4th. The present seems to one to be more favorable for Government action in this important matter. The educational policy of the last eighteen years has tended to produce a vast number of young men who have satisfied the requirements of the State as to their education fitness for official service, but for whom no appointments are ready. The candidates for the legal and educational professions are already overstocked, and every branch of the Government Service has at the least a dozen hungry applicants for every vacant place that occurs. Under these circumstances all that is wanted to establish the Medical profession on a sound basis is the opening out of official employment to properly qualified persons, and the due protection of those who have to compete in private practice

am thankful to have this opportunity of pointing out, what in my judgement may be done for the profession and the public by a broad and liberal recognition of the needs of both. I am satisfied that the question is one that should be settled on broad grounds applicable to the profession as a whole, rather than on the narrow and restricted necessities of the public service - and that action is essential before the public health in India can be cared for in accordance with the progress of knowledge and experience in such matters. It is scarcely probable that any officials of the present generation will remain in India to see the effects of these legislative measures but we may rest satisfied in the conviction that future generations of the people will live to bless the administration that has opened a new career to the educated, and that has fostered the art of preserving life, and helped to lessen the aggregate of pain and suffering of a considerable section of the human race.

I have the honor to be
Sir,
Your most obed.t Servt.
W. H. Cornish I.M.S.
Sanitary Commissioner
for Madras.

Heads for a draft Act
to regulate the Medical profession
in Southern India.

Objects and Reasons

The practice of medicine, surgery and mid-
wifery and Pharmacy is for the most part in the
hands of ignorant and illiterate persons, amongst
whom gross malpractice is common, whereby the
health and lives of the people are endangered,
and there being no law or regulation existing to
define the qualifications of persons practising as
physicians, Surgeons, Health Officers, and duties
and druggists, or to restrict incompetent persons
from practising in these capacities, and the
growing necessities of the country as regards the
working of the Local and Mundo Act of 1870, requiring
that provision should be made for the training,
education, and employment by local authorities
of duly qualified medical men, and officers of
health, and for the training and education of
medical practitioners engaging in private practice,
it is deemed expedient to include in one Act, to be
called "The Medical Profession Act of
the following regulations.

Title

Bill to be called "The Medical Profession
Act of 1 "

Object of the Act.

(a) To provide qualified medical practitioners
for the people:

(b) To define the nature of the qualifications
for licensees to practise as medical or health offic-
ers of Government servants, and of persons engag-
ing in private practice.

(c) To provide for the registration of all duly
qualified licensees &c. of qualified practitioners.

(d) To suppress or control unlicensed
practitioners.

C. — To provide further for the qualifications of midwives and persons dealing in poisonous drugs.

Government to delegate these duties to a Board of Health.

It shall be lawful for the Government to appoint a Board of Health, to carry out the purposes of the Act. The Board of Health may frame bye laws for (1) defining the nature and degree of education to be required of candidates for licenses to practice, as medical men, health officers, midwives and vendors of poisonous drugs.

(2) For the appointment and remuneration of duly qualified examiners to conduct the examination of candidates for licenses, and for defining the nature of such examinations.

(3) For the issue of diplomas certificates or licenses of qualification in medicine, surgery midwifery and Pharmacy.

(4) For the official registration of all persons entitled to practice as medical men, health officers, midwives, and vendors of poisonous drugs, and the periodical publication of lists of qualified persons residing within the limits of the Madras Presidency.

(5) For the cancelling of licenses, and removal from the registers of the names of practitioners proved guilty of disgraceful or immoral conduct.

(6) For the supervision and examination of Chemical preparations and poisonous drugs kept for sale for licensed druggists, and for regulating the sale of poisonous substances.

All bye laws framed by the Board of Health to be published in four consecutive issues of the official gazette, and to receive the sanction of Government.

Constitution of Board of Health.

The Board of Health shall consist of the Surgeon General British Medical Service, The Surgeon General Indian Medical Department, The Sanitary Commissioner for Madras, The Director of Public Instruction, The Principal of the Madras Medical College, ex officio members and of four other members to be selected by Government from duly qualified medical practitioners residing in the town of Madras. The Board to meet as often as may be necessary for the transaction of business. The senior official member of the Board to preside, and to have a casting vote only when the number of votes on any question may be equal. The Board to have the services of a Registrar, secretary, and such other establishments as may be necessary. Government to provide office accommodation for the Board, in which examinations for diplomas and licenses may be held.

To account for all monies received &c &c.

The Board of Health to receive and account for all monies received on issuing licenses or certificates of qualification, and for entering names of qualified persons in the official register, and to disburse all expenses connected with the examination of candidates and the maintenance of the establishments required by the Board, and to submit Annual statements of income and expenditure to Government.

Preliminary education of Medical practitioners

It shall be lawful for the Board of Health to require of all persons who propose to study medicine, midwifery, or Pharmacy, such preliminary general education as may from time to time be judged expedient. A competent knowledge of English will be expected of all candidates who wish to qualify as medical practitioners or Health officers.

Examination for diplomas or licenses to practice

The Board of Health is empowered to examine all candidates, or to appoint public examiners for the purpose, and to grant certificates of qualification for (1) the grade of Apothecary or assistant Apothecary in the public service,

2nd/ for the grade of Native Doctor of the 1st and 2nd class /3rd/ a diploma or license to practice midwifery /and 4th/ for a license to deal in Chemicals and drugs of a poisonous nature,

From and after ( ) no person shall be permitted to engage in the said practice or to hold any medical or other public appointment, or the appointment of a public Vaccinator or any such appointment under a Municipality or Local Boards, who has not received a certificate of qualification and license to practice from the Board of Health, or who has not registered in the Boards office his diploma or certificate of qualification obtained elsewhere, and no person shall engage in practice as aforesaid after the date above mentioned, without first obtaining certificates of qualification and licenses to practice from the Board of Health, under a penalty of fine, or imprisonment or both.

Exemptions of all persons bonafide engaged in practice before a certain date.

It shall be lawful for Government to exempt from the penalties of this Act all persons of the full age of 21 years and upwards who may be bona fide practising the profession of medicine, Surgery, midwifery, and Pharmacy at the time when clause ( ) comes into force. But all persons engaged in practice before this Act comes into force shall be required to furnish to the Board of Health, their names, ages, places of residence, and professional calling in order that the same may be entered on the official register and every person neglecting

All such persons to be registered.

Registration of practitioners

3D7

to furnish such information to the Registrar appointed by the Board of Health, and taking the necessary steps to have his or her name entered on the official register for a period of ( ) after the date above specified will be liable to a penalty of ( ) Rupees / All vendors of poisonous drugs / will be required from the date this Act comes into force to comply with the by-laws of the Board of Health and to take out licenses and pay fees and Board of Health for the sale and safe custody of any person infringing the rules issued by the poisonous drugs will be liable to a fine, or imprisonment, or both.

A fee of ( ) Rupees shall be paid by every person, who registers a degree, diploma, certificate, or licenses to practice, and the Registrar of the Board of Health shall on payment of such fee, and on production of the degree, diploma, certificate, or licenses enter the name and qualification of such person in the official register, and shall forthwith give to the holder of such degree, diploma, certificate, or license, stating that his qualifications have been registered.

All persons actually in practice before / will be registered as "engaged in practice before / on payment of the registration fee; all such persons will be required to register their names, within twelve months of the date above specified.

Privileges of registered practitioners

All medical practitioners whose names are entered in the official register shall be entitled to sue and recover in Courts of Law reasonable fees for medical attendances and medicines supplied. All registered midwives also shall be entitled to sue and recover reasonable charges for attendances on women in labor, and registered druggists shall be entitled to sue and recover for drugs and medicines supplied.

Registered practitioners to be exempted from serving on Juries, or as assessors, Courts of inquiry

Persons who practice without registration of their qualifications may not recover charges for professional attendance, medicines, and to be further liable on conviction to a penalty of Rupees for every offence

Unregistered persons cannot recover charges for medical attendance.

The official register of the medical profession in Madras to be published annually by the Board of Health and corrected to the latest time, shall be the sole guide of all Courts and local authorities in the exercise of powers for medical and sanitary appointments in the Government services or services of Local Boards and Municipalities and no person shall hereafter be appointed to any situation requiring medical and sanitary knowledge under Government or Local Boards who has not received a certificate of qualification as graduate of the Medical College, Apothecary, Dresser, Hospital Assistant, or Native Doctor, or who has not registered his name in the office of the Board of Health.

Medical graduates of any Indian, British or Australian University, and members and licentiates of any British College of Physicians and Surgeons, or licentiates of the Apothecaries Company of London or Dublin, or the possessors of American degrees recognised by the British Medical Council, will not be required to submit to any further examination for a license to practice within the limits of the Madras Presidency, but all such persons shall register their degrees, diplomas or licenses, and pay the registration fees for their several qualifications.

It shall be competent for the Board of Health to register any medical degree or license issued by a European or American University provided that the Board is satisfied that such degree or license has been conferred upon the individual seeking registration after examination, and as regular course of professional study.

Medical Registers

Removal of names from Registers

The Board of Health shall enquire into the case of any practitioner who may be found guilty of felony or crime of a disgraceful nature, and such person shall cease to be entitled to the privileges of a registered practitioner from the date of the removal of his name by the Board of Health. The Board of Health will omit from the Register the name of all persons whose decease

The Board of Health are empowered to enquire into all alleged professional misconduct or disgraceful or immoral behaviour on the part of registered practitioners, and to call upon them to disprove such charges, or failing to do so, the Board to be empowered to erase their names from the official registers, and to deprive the guilty parties of the privileges of registered practitioners.

Names may be removed for proved immorality or disgraceful conduct.

Penalty for falsely pretending to be registered.

Persons falsely pretending to be registered medical practitioners, midwives, or druggists, or falsely pretending to the titles of Physician, Surgeon, Apothecary, Hospital Assistant or Native Doctor, shall on conviction be liable to fine or imprisonment

Midwives

The Board of Health are empowered to issue certificates or diplomas authorising females to practice midwifery, who comply with the bye-laws of the Board.

Druggists.

The Board of Health may issue licenses to persons to deal in drugs and chemicals of a poisonous nature, on such persons satisfying the Board as to their knowledge of the uses and doses of such drugs. All licensed druggists will be required to obey the regulations of the Board of Health regarding the safe custody and sale of poisons, and any infringement of the regulations will render the druggist liable to have his license cancelled, and to suffer a fine, or any person who sells or keeps or offers for sale, drugs mentioned in schedule without obtaining a license

fur: the Board of Health shall be liable to have them confiscated and to pay a penalty of Rupees for every such offence.

Note — There are the main points requiring legislation, but the drafting of the Act would be best accomplished in consultation with the Secretary to Government and the Legislative Department.

J. Monteith

Rec'd 1st May 1874
Public Department

From

The Sanitary Comm.r
for Madras

To

The Chief Secy: to Govt
Public Dept.

Dated 4th July
Rec'd 8th — } 1874

No. 996

No 118.

Calling the attention of
Govt to the present condition
of medical education in the
Madras Presidency.

No 57

313

The papers relating to the
creation of civil medical
establishments are recirculated
for the information of the Members

Two questions are involved
1st The organization of a
Civil Medical subordinate
establishment
2d The organization of a
means of medical
which will meet the natural
want of the people.

The first requires
immediate orders as to
the entertainment of
Military students has been
discontinued under the
orders of the Govt of India
and it is already past the
usual time of the year
at which medical pupils

Although a telegraph despatch
had gone on 10th Sept entertain
10 hospital apprentices and 25 Native
Medical pupils
The entertainment of Military Students
need not be applied to the arrange
for reorganization of the Provincial

are entertained for their
pre-collegiate course.

The second question is
not so immediately calling
for orders and the information
on the subject thereto
considerably augmented by
the letter received from
Dr Cornish to Sanitary
Commissioner. - The Hon.ble
Sir Robinson proposes that
this should be brought on
for proceedings and of this
I draw there are four
more letters from Dr Balfour
which have been printed
and may also be considered.
This however will probably
considerably delay the issue
of orders on the more
important question of the
organization of a civil
establishment for ordinary
Provincial and Local purposes
on which point there is not

little difference of opinion be-
tween the members of Govt.-
It is therefore submitted
that the present Draft may
rest the question so far as it deals with
the Provincial Service being
held until reference to the
Govt. and the orders will be
passed on the consideration
of the other papers when received.

Dr Balfour's letter deals with
in the Draft will be printed
in full when the orders issued
These proceedings can then be
read again together with Dr
Cornish's letter and the four
letters from Dr Balfour above
alluded to and a decision come
to as to whether any action is
requisite with reference to
supplying the means of education
for a body of private medical
practitioners.

The necessity of doing some-
thing at once ~~in~~ in the
way of providing civil medical

subordinates renders it incumbent on Govt to decide what pay and what education shall be given them - but all details of this kind must be provisional and consequently decision on the question of its being decided that a Committee shall be appointed.

In connexion with reference a few replies to marginal remarks of the Govt the Wilson have been noted on the margin of the draft.

H
9/9

I would give the order (as here proposed) so far as A. deals with the L. question

H
10/9

Medical Education

Surgical

I have no objection to the issue of a provisional order such as over the immediate difficulty - or to enable the trainees - Sketch to procollegiate or Collegiate grade - to be made by the 1st of Oct - But I think that the reorganization of the future Civil Medical Service & the Collegiate training of future private practitioners - with pay prospects & requirements can best be examined by persons who have adequate special knowledge & can collate fact & explain special & public opinion

The two things are not really separate - they act and react - and should not be so treated

I would ask Mr Sturrock to prepare a provisional order having reference to the Regulations of October - & put the whole in circulation again

9/9

Memorandum

317

In a recent draft order on a number of letters from Dr Balfour it was proposed, under instructions, to appoint a committee to report on certain important points both to pass at the same time definite orders such as would suffice to set a going the new Civil Medical subordinate establishment, and also enable a reply to be sent to the order of the Govt of India that the proposed new scale of pay should be submitted to them for sanction. This order was of 13th August 1873 and five reminders have been received.

When the draft was circulated into circulation the Committee was considered unnecessary by the Govt but Sir. Sim (who has however since recalled his note) who preferred immediate action on the report of a previous Committee; in addition to the action proposed in the draft.

H.E. the Governor directed

of the Committee on the ground that nothing more was called for than what was proposed in the draft Ord. at once.

The Govr. & Mr. Robinson thought a Committee necessary even for the issue of orders on the organization of the new Civil medical establishment, and also thought that a letter from Dr. Cornish on the subject of medical education generally should be brought on the record before the matter was disposed of.

An intermediate order having been passed in Council sanctioning the entertainment of students for the new Civil establishment, the whole of the undisposed of Medical papers which could lay hands on, have been printed and are now submitted for orders. They form more than 100 pages of printed matter and comprise a variety of subjects, several of which are often treated of in one letter.

In the original draft it was proposed to deal only with such letters as required consideration before orders were passed on the new civil medical establishment, and that the remainder of the letters (forming the 2d printed bundle put up) should merely be referred to the Committee with instructions regarding the points on which report was desired.

It is submitted that this arrangement may be adhered to. If so a slightly modified draft will be circulated after final orders have been received as to the appointment of a Committee.

With reference to M.G. the Governors remarks it is submitted that a great deal of the difficulty in disposing of the papers for a mere Govt. order arises from eager haste on the one hand of the Head of the Medical Department to provide immediately for 8000 Medical practitioners, and the obstinate refusal on the other hand of the Head of the Medical College

to admit that the the existing means of instruction are more than barely sufficient for the wants of the services. Granting that Dr Balfours views are Utopian and that 8000 medical practitioners can never be provided at public expence, it does not follow that the existing state of things is right, under which no means whatever are provided for the education of private medical practitioners either at their own expence or at that of Local Fund Boards means of whom seem willing to provide funds annually for the medical education of young men within their inspection circles. It may fairly be hoped that a Committee of professional and experienced men ~~might~~ will find a rational mean between the extreme views of Drs Balfour and Smith.

J.L.

C14/10

In the original orage

Memorandum
for Dr Balfour

"Medical"

Please send
home at
Your convenience

Dr
14/10

321

In full consideration, I am opposed, ~~to~~ to the appointment of a Committee ~~or~~ ordered by the Draft. The main ~~object~~ purpose (as I understand it) of the Committee is to report upon which the Committee is to report as to the best means of instituting a practical and elaborate system of medical education, the purpose of which is to provide the country generally with well-instructed medical men. What appears

to admit that the the existing
means of instruction are more
than barely sufficient for the
wants of the services. Granting

Mem
for 8.

when funds can be found
found sufficient for objects indispensable in importance

overburdened with taxation
I presume indeed that there can be
no reasonable idea of throwing the
expence of these schools
upon Local Funds or "Paternal
Government"; I admit it
would be an extreme injustice, as
even in such a country as this,
Spectacles is principle, and
dispensable only in carefully selected
cases for exception to general rule;—
it becomes altogether mischievous

attended
We intended is to supply a good
medical education for no less than
5000 persons, as a substitute
for nearly the same number of
unqualified untrained doctors
by whom the people of the Presidency
are now attended. The expence
of such a scheme must be very
great: and it must be paid for
in some sense or other by the
people themselves, who are already

C14/10
In the original wrapper

I propose the Draft
with the slight modifications
which I propose. But
I submit that Dr Cormack's
valuable letter of the
7th July should be
brought on record and
favourably noticed in
the G.O. and that
Dr Balfour be thanked
for his useful reports
on the College as well
as the general requirements
of the Country.

We have had
before

& admit that the existing
means of instruction are more
than sufficient for the
wants of the services. Granting

Memo
for 8.

Suspended
by letter
Private
received
for Statistics

when it is applied so as to increase
the already unnatural pressure
of the people, for a purpose of which
known denuncle, is such unseparately
unjust. But as Provincial Funds
cannot be misused, and My assent
to Senior / Junior or Medical
wills, to be so appropriated that
any large diversion of them to a purpose
such as this wd be calculated prejudicial
to the general interest.
I am am unable therefore to assent to
the Draft Act unless the passage relating
to the appointment of Surg Cmmittee is omitted. 4/6/74 Hobart

H.

C14/10
In the original Despn

before us a striking
illustration of the
utterly barbarous Condition
of things throughout
the length and breadth
of the land in the case
of one of its first
noblemen (the Rajah
of Venkatagiri) surrounded
by 18 Native Doctors
Empiric treatment
would have caused
his death but for the
intervention of Surgical
Skill - and I consider
that blame lies on
Government for so
long deferring action,
for which the Legislature
has provided, in the
direction of diffusing
Simple

Simple Medical
instruction amongst
the people. I therefore
agree with the Honorable
Mr Sim that no time
should be lost in
organizing Medical
Schools at the Central
Stations named by him
in accordance with the
the Scheme recommended
in 1869. These Schools
will doubtless develop
into Colleges (as did the
Madras Medical School)
in the course of time.
I hold that a serious
error & injustice to the
Country will be committed
if the means of acquiring
Medical

Medical Education
be confined to the
town of Madras with
its large country-born
European & Eurasian
classes & natives
of the lower orders is
amongst whom we
have hitherto too exclusively
recruited the native
subordinate service
I think that our plan
of medical teaching
in these schools up country
should go beyond
the "Village Dresser"
for I agree with Dr Cormick
that nothing can be
made out of Village
Potters & barbers.

I agree with Dr Sims
as to the means of
providing

providing the cost
of Medical Education in
— both in the Madras
College (so far as the
Provincial Branch
is concerned) and
up country. The Legislature
has provided for it
in the Local Funds and
Municipal Acts, and
it only remains for
Government to apportion
the share. In general
I think that a considerable
part — probably one-fourth
would not be too much —
of the one-sixth Land Cess,
which properly belongs
to the Sanitation of the
Country, should be
assigned to this important
branch

branch of the object
of the Law. It will
not be difficult to
adjust the claims
amongst the Departments
and bodies which
are to benefit by the
measure, when we
have the Schemes for
the up country Medical
Schools and the
proposed Reorganization
of the Madras College
before us with an
Estimate of the cost
at the hands of the
Committee.

As regards the
College at Madras I
would direct the
attention of the Committee
to the points specially
noticed by Dr Balfour.

the great cost of Education
and the inadequate
(& declining) result as
regards numbers turned
out and Comparison
with Similar institutions
Elsewhere I would
direct them to consider
what alteration or organization
is required to enable
it to meet the wants
wants of the Country
and Civil Service.
Some general direction
might be added as to
the sense of Govt should
minde in respect
to Entrance Examination
and qualifications,
Subsistence allowances
or Stipends, curriculum
of instruction & the like.

Dr J Robertson

331

the important Question which
forms the subject of His Lordship's
Minute has engaged my attention
for several years - and as a Member
of the Board of Health I was a party
to the recommendations contained
in their proceedings of the 27 April 1869.

I have now carefully con-
sidered the report of the Committee of
Medical Officers, to whom the subject
was referred in July 1869. but
it is not to be found to have been
furnished in to the Board's pro-
ceedings or to have communicated
with the Board. The Committee of the Board
on Epidemics [illegible]

have consequently regarded the subject in different aspects.

The ~~the~~ object of the Act of Parl. was to create a body of private practitioners. who should receive their Education at the Expence of the State - and then rely on their own exertions - i.e. on "private practice" for their livelihood.

The Medical Corps, on the other hand, contemplate the formation of a regular "Service" - to be employed & paid by the State, with permission however to practice.

Sir Lewis Pelly asked the latter was - in the Queens Civil

that the allowances of these men are to be ~~withheld~~ drawn by from Local Funds - and assigns reasons for this Instruction to them -

With all deference, I must express my decided preference for the Policy advocated by the Board of Trade We are, I think, to strive now-a-days to create Departmental Establishment, the members of which, attured of at least a tolerable comfortable subsistence, do not, as a rule, exert themselves as they would do, if dependent for their livelihood on their own Exertions & acceptability 6

2/

[illegible] beyond their duties to the
people as of secondary importance
and perform them empirically
& perfunctorily. The State or
Local Corporations may employ them-
selves & their selves of the services
of these men - and pay for the
performance of the same
duties that may be assigned
to them - but all this should be
secondary to the important
principle that these men are
to be the Physicians of the
people - and to look to them for

the people. I deprecate any measure
tending to encourage the people to
look - as they are now too apt to do -
to the State for employment, in-
stead of relying on their own resources
and I should regret to see the
the conversion of another professor
into a pet service. The pet must,
For the present [illegible] the
means of Education gratuitously -
and even Student's stipends during
Education may be necessary - but
beyond this, I would not go. For the
result, I feel assured, will be no
more than the creation of a host
of [illegible] Stipendiaries, who

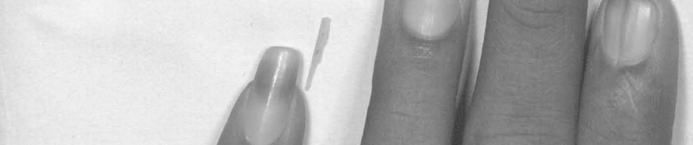
their subsistence. It is only in the
way that we can hope to raise the
body of
a Medical Profession for the benefit
of the country - the work will be
slow - but it will be permanent - The picture
drawn by the Medical Com^r. is -
sad & sickening - a pleasing one. Their village
doctor "respectable - intelligent
& active" is to be "the sanitary in-
spector of his circle. the reporter of
cases of sudden death - the willing
helper of the vaccinator, and the
professional adviser & attendant
of the community when epidemic
more than ordinary
of [illegible]

3/ Chadwick breaks out - his "position
& work" are to be "occupied by the
Civil Constabulary." His general in-
fluence is to increase & consolidate
the power intelligent & concentrate
patronage "& [illegible] power in [illegible] his
various plans for the Public Good."
The picture, as I have said, is
sickening - but its effect is [illegible]
inspired by the fact that, according
to the calculations of the Com^r.
this Medical Millennium cannot
arrive till A.D. 1900 - and that
"nothing short of a code enacted by
legislature enactment in the Ultimo

for the Re-establishment of these ~~Hospitals~~ hospitals
physicians, I am heard by the
Public are to be only "Not deterred
from private practice." I feel
confident that our only hope to
success lies in merely attending
the means of medical & practice
and leaving the rest, to Education
cated - to rely on their own resources
to ensure their livelihood by making
their services acceptable ~~by~~
~~by~~ of the people -

We shall I think, need

of ~~Hospitals~~ Attendants



2 classes of medical Officers in the
Provinces - One class would require
a Collegiate high range of attain
ments & Experience - like our Phys
cians - & It was men we would have
the salaried employés of Municipalities - and would have charge
of the Hospitals & Dispensaries
series. We maintained in our
larger towns which ~~we~~ are - or
soon will be the municipalities - The
staff will be ~~by~~ for Clinical teaching in connection
and being in charge of Hospitals
employing most of their time &

tention, private practice will be
of secondary importance - This
class should I think be trained
in the Medical College at Madras
I presume its entire curriculum
of study - The other class - the rural
doctors of the country - would com-
prise those who taught be sufficiently to
be able to treat the ordinary diseases
of the country & the common ac-
cidents of life. They would
be taught in the vernaculars -
and, at first, a two years course
of study would be sufficient -
Their attainments thus limited

of ~~the~~ the standard

would be far higher than those
of the present village Doctors -
and a higher standard
would be first aimed for in each
years. ~~an standards~~ They would
at all events at first receive
practical education & be
made more thoroughly trustworthy -
hence - and would then be
left to rely on their own practical
& their villages & whether they
could try their fortune - The
1st class schools must be
confined to the Provinces - The

Board of Med. Education constituted according to Municipal Schools and also to utilise the services of competent Medical Officers by attaching a few pupils to each - the expenses being borne by the State. Under the present Financial System the Expenses must devolve on a very great measure on Local & Municipal Funds - for the Principal part from Imperial Funds is quite unable to afford material help. Even Districts & Presidency Towns

of [illegible] Medical

with a view to maintain Medical Education efficiently for their own use - Others would like to combine for a School in some convenient situation for their joint accommodation - the Medical College at Madras might, & ought to, be utilised - as suggested by Dr Balfour - and also the services of Resident Medical Officers as suggested by his Inspectorates in Tanjore - The Hospitals in Tanjore & other Districts - are to be utilised for training Students & Servants & which can be made available. As the

Knowledge, be of immediate practical
value - When in pursuance of
their duties & suggestions, the
Subject comes before Council &
a special Committee or
Committee deals with it, according
to circumstances -

J. D. Lees

Since the above was written,
we have received the Annual Reports
in the Provinces and the Reports
of Surveys in Municipalities - The cost of

of Medical schools would
therefore devolve chiefly on
Provincial Funds - but I have
no doubt that by economising
in other Directions a sufficient
Sum may be made available
for this very important purpose
I would therefore respectfully suggest that
measures be adopted in hand
delay to establish Medical
Schools at Trichinopoly (for
the Southern Districts) Cannanore
for the Western - Bellary for the

Ceded Districts & the Vizagapatam for the Northern - These
places seem to have local
advantages, owing to there being
several Medical Officers - as
well as Hospitals & public
Each of them - sufficient
number of Students being
there or will able.

I.D.

I think that
these letters suggest
that the time has
fully come when in
the words of Mr Simes
Note on papers in
L.G.O. dated 18 September
1875 No 288 - "we must
"immediately consider
"the future of Medical
"Education in this
"Country":

From the papers
before us it seems
that the Head of the
Department - impressed
with

with the obviously
rapidly increasing
demand for Medical
Education in the
Country had made
arrangements some
time back to bring
into the Medical College
a larger batch of
Students than usual
(in all 56 this autumn)
under GO dated
6th December 1871 No 573
These young men
have been under
pre Collegiate training
for periods varying
from 16 months to two
and a quarter years
at, as I suppose, public

Expense

Expense. This has
been done with the
full cooperation and
approval of Dr Smith's
locum tenens while
on leave, and since
his (Dr Smith's) return
from Europe with the
knowledge of the
Principal.

The time had
arrived, as it was
thought, to transfer these
young men to the College
for professional Study.
But when this final
step was proposed
recently to the Principal
of the College, he hesitated

or

m Vacancies from do
to receive so many
and finally suggested
that the number of
Entrants be kept
within the average
of the previous 5 years
Viz 27. He practically
added that the
College cannot meet
the requirements of
the Country as Contem-
plated by Government
without great Modi-
fication.

Without entering
into the merits of
Dr Balfour's plans
or Dr Smith's objections
the result cannot
fail to cause reflection
for

for the demand and
need for Educated
Medical men is
great and increasing
and it is clear,
if Dr Smith is right,
that the Country is
utterly unprepared
with the means of
supplying almost
any popular Military
need as may be supplied
demand for Medical
Education.

Under these Conditions
the matter requires early
and anxious attention
for means must
be devised to overcome
the difficulty.

Dr Balfour submits
no

no definite plans
toward the Enforcement
and I would Call
on the Director of
Public Instruction
and the Principal
of the College to submit,
as suggested in Parag
of Dr Balfour's letter,
Estimates containing
the required information
with as little delay
as possible. I think
also that tomorrow
later, a Committee
of Medical Officers
will have to be
appointed to consider
and report on the
whole subject of
Medical Education
and the Standard
of

35
of qualification for
practice in this Country
in Communication
with the Educational
Department.

4/12 AD

This Correspondence
refers to a matter of
great importance - viz
the Education of
Medical Men for the
ordinary purposes
of the Country.
It is certainly treated
with ability and completeness
So far as the head of
the Department is concerned
But I hesitate about
accepting the proposals
as they stand; for Dr Balfour's
judgment does not always
Command the respect
and Concurrence of his
professional brethren
while Dr Smith is perhaps
too much of the Professor
and College Principal
for

for the present state of the Country.

I would submit that a thoroughly reliable and influential Committee might be appointed to examine the whole subject of medical Education & Schools for this Country with a view to placing them on a proper & permanent footing.

A member of the Revenue Board, Mr Poole, Dr Cornish and one of the Professors of the College should be on the Committee and I would call in one or two Presidents of Local Fund Boards and a medical officer of wide Country experience

Perhaps

361 Grosse

Perhaps one of the Scudders or Ontario Managers

of medical institutions

27/4

It would appear that the recent Order affecting Hospital visiting Hospital Assistants pro tem dieties & duties

the redistribution of "Assistants" pro tem has led to the enquiry of an elaborate scheme for remodelling & extending the Curriculum of medical Education.

The connection between this order and the scheme does not appear to me very direct: for it is

not (as I understand) expected that there are required not officers in sufficient numbers & available or that are not for pro tem duty.

No doubt the medical education is capable of improvement & extension: but I think post-graduate rather than special Hospital appointments are the best

scheme

Desp with 5 Encl[s] letter No 1002 363

To the Secretary to the Govt of India

Home Department

Sir

In reply to your letter
dated 13th August 1875 No 39-2606
I am directed to forward
the marginally noted pro-
ceedings of this Govt passing
orders on the organization of
a Civil Medical Subordinate
Establishment for Provincial
and Local Services and to
state that the scale of pay
recommended is as follows:-

G.O. 877 dated 17 April 1875 No 1001

Civil Apothecary Grade

		Pay	Charge allowance
First two years	Rs	50	"
3d to 7th year	"	50	25
8th to 14th	"	75	50
15th to 21st	"	100	50
22d to 28th	"	125	50
28th to 35th	"	150	

Civil Hospital Assistant Grade 17

365

	Pay	Charge Allowance
First two years	Rs 20	"
3d to 7th year	" 20	10
8th to 14th "	" 30	10
After fourteen years service	" 40	10

I am further directed to state that promotion to higher grade on the completion of each biennial period of service is recommended only as a temporary arrangement until the service becomes fully developed when it is proposed to introduce restrictions as to the number of each grade and to the promotions only on the occurrence of vacancies.

Fort St George
7 May 75

22/4

18C

15-35-90

30-1-50-226-227

367

OFFICE OF SANITARY COMMISSIONER,

No. 344.

Madras, 6 February 1873.

From

The Sanitary Commissioner
for Madras.

To

The Chief Secretary to Government
Public Department

Sir

I have the honor in reference to order of Govt
as per margin to suggest the necessity for an early
decision on the question of extending the advantages
of medical education to the natives of the mofussil
so as to secure as many numerous class of candi-
dates for employment under the several Local
Funds Boards.

2. While the employment of pensioned officers may
to a certain extent, be resorted to on the present
dearth of men, I would venture to point out that such
employment can only be of a temporary character,
owing to the age and feeble healths of such men, and
that the demands for the services of medical men
in connection with Local Funds Boards is daily
increasing and likely to increase far beyond
our means of compliance.

3. In the estimates of the Vizagapatam Local
Funds Circle, now before me, I see that the Boards
are anxious to employ as vaccinators, men of the
Hospital Assistant grade, under the supervision
of a member of the Apothecary class, and I know
that other Local Funds Boards are anxious to
have, at the least, one man of this kind located
in each taluq in connection with vaccination
and public health.

January 1873
N° 105
Enclosures.

From

The Sanitary Commissioner

for Madras.

To

Dated
Despatched } 18 .
Received

No.

Enclosures.

Dr Lyons -
Attn on this
must offer this
in - Forward them
with the papers -
W Inman D S Surgn

I have also the honor to be,
Sir,
Your most obed't Serv't
W. M. Corrie Surgeon & A. P. C's.
Sanitary Commissioner
for Madras.

4 While adopting all these hints and pointing out all points of the economy, we are making no adequate provision for the training of youths fitted for such employment; and of arrangements are now made to commence this particular medical school, which have been postponed, we shall hardly be prepared to meet the demands for educated medical men for some years to come & hinder therefore that it may be several years again ranging this subject prominently to notice.

Pres. 29 Jan 73 Nos 97-98
" 6 March 70 — 20-21
" 7th " 72 — 9-10
" 30 July 69 — 204
" 4th Sept 72 — 24 to 63
" 6 Dec 71 — 16-18
No 2596 B 4/71 (Indian press Minute)

Fort St. George

Public 1873 DEPARTMENT.

Recd 7th May 1873 No 1001.

From

The Sanitary Commissioner for Madras

No. 344.

Dated 6th May 1873
Received 10th " "

No.

Enc.

S. C.

Suggests the necessity of an early decision on the question of extending the advantages of Medical Education to the Ryotwar districts of the Presidency, so as to secure a more numerous class of candidates for employment under the several Local Fund Boards.

371

From

The Inspector General of Hospitals, Indian Medical Department,

To

The Chief Secretary to the Government of Madras

Fort William, the 1st July 1873.

Sir,

I have the honor to acknowledge receipt of your letter No 750 dated 29th May requesting information with regard to the extent to which the Medical Schools of Bengal are educating Medical Practitioners for private practice among Native Communities.

2. In reply I beg to enclose a series of Answers to the questions annexed to * Letter No 224 dated 21st June 1873 from the Offg Principal Medical College Calcutta annexed. } your letter furnished by the Officiating Principal of the

3. I also send a pamphlet in which the history and statistics of the various Medical Schools of this Presidency are set forth in considerable detail. The table printed at Page 20 of this pamphlet shows correctly how many of the passed pupils of the Calcutta Medical College have entered the Service of Government. Those who have

not entered the service of Government have set up as private practitioners in some part of Bengal. A great many students also who have failed to pass the examinations of the College establish themselves as private practitioners and all who are dismissed from, or resign Government service.

4. From the various sources enumerated in the last paragraph private medical practitioners are very numerous in Bengal more particularly in the neighbourhood of Calcutta. There is not a Native town of any size in the Presidency and Burdwan Divisions which has not its "Medical Hall" and its Native Medical Practitioner.

5. The other schools have not as yet done much in the way of training private medical practitioners. No doubt many rejected pupils and dismissed or resigned Hospital Assistants have become private practitioners but the great majority of the youths trained at these schools have been educated for and passed direct into the public service. The Lahore College is however, annually educating a certain number of "local" students, and classes are now being formed for the instruction of "hakims", and their sons in European Medicine and Surgery. These men return to their previous fields of practice after having undergone a certain amount of training in the Lahore Medical School.

373

I have the honour to be
Your most obt servant

Denis Hewson

Inspector Genl of Hosps
Indn Med Dept

No. 224

From

The Offg Principal Medical College

To

The Secretary Inspector General of Hosps.
Indian Medical Dept.

Fort William, 21st June 1873.

Sir,

I have the honor to forward Replies to the seven questions sent along with your Memo: No 1152 A dated the 10th instant.

1st There is no information in this Office as to how many of these annually turned out by the Institution take Government employ.

The total number passed will in the course of five (5) years be found to amount to 408 as per margin.

2nd There are 40 Students in the English Class who get Scholarships - 20 at the rate of Rupees 8/ per month, and 20 at the rate of Rupees 12/ per month.

In the Bengali class there are 66 stipends of Rupees 5/ per month, and in the Native Medical Pupils Class all the students get stipends at the rate of Rupees 6, 7, 8, 9, & 10 per month.

3rd The following is the curriculum of study for the students of the English Class who graduate at the Calcutta University

1st

1st Year

Descriptive and Surgical Anatomy
General Anatomy and Physiology
Dissections
Chemistry
Botany
Materia Medica
Practical Pharmacy

2nd Year

Descriptive and Surgical Anatomy
General Anatomy and Physiology
Dissections
Chemistry
Botany
Materia Medica
Practical Chemistry
Hospital Attendance
Medical Wards — 6 months } with Clinical
Surgical Wards 6 D. } lectures and Clinical instructions

3rd Year

Medicine
Surgery (including) operations
Obstetrics
Medical Jurisprudence
Dissection of regions and preparations
of operations on the dead body
Medical Wards — 6 months } with Clinical
Surgical Wards — 6 D. } lectures and Clinical instructions

5th Year

Medicine
Surgery (including operations
Ophthalmic Medicine & Surgery
Midwifery
Medical Jurisprudence
Dissections of Regions, including
Operations on the dead body.
Hospital Attendance
Practical Chemistry
Medical Wards 3 months } with Clinical
Surgical Wards 3 D. } lectures and
Eye Infirmary 3 D. } Clinical
Ent. Ear Dispy 3 D. } instructions

The following is the curriculum of
Studies for the Students of the Bengal
Medical College to obtain a Diploma

1st Year

Anatomy
Chemistry
Materia Medica
Dissections

2nd Year

Anatomy
Chemistry
Materia Medica
Medicine
Surgery
Midwifery
Medical Jurisprudence
Dissections

Hospital Attendance

Out door Dispensary 6 months

Surgical Wards 6 do } with clinical lectures and clinical instructions

Medical Wards 6 do

Ophthalmic Wards 2 do } lectures and clinical instructions

Midwifery Wards 2 do

Native Medical Pupils' class.

The same as the above with the exception of Midwifery which is optional to the Students.

4th The number of Students annually attending the College for the last five years is as follow.

1868-69	753
1869-70	730
1870-71	919
1871-72	1046
1872-73	1226

Instruction is communicated to the three classes of Students through the medium of English Bengali and Urdu

In the English class there are 11 Professors and the Demonstrators of Anatomy and the annual cost is Rs 12,450

In the Bengali and Native Medical Pupils Class there are 6 Teachers, and the annual cost is Rupees 21,600.

5th Graduates of the English class and Vernacular Scientific may make the choice of taking Government employment after they have obtained their Diplomas. Native Medical Pupils and Native Apothecaries enter into an agreement to serve Government for a certain period upon their admission into the College in the case of the former for 7 years, and in the case of the latter for 3 years.

6th Although there is no official information existing regarding the success or otherwise of the independent Medical Practitioners yet from information received from trustworthy and reliable sources it can be safely asserted that Medical practitioners who have established themselves in the interior of the Country are much respected by those among whom they practice.

7th There seems no reason to doubt that the Medical College could if its staff were increased turn out Medical practitioners sufficient

institution has, however, already outgrown
manageable dimensions, and it seems
probable that other Musical Colleges
will before long be established in
different parts of the Country.

I have &c
(Sd) J. E. Charles Mus. D.
For the Philharmonic
Musical College

True Copy

Alfred Allen
Secretary to the Incorporated
Law Society
London Feb. 6th 1865

Financial 1873 Oct.

From

The Inspector General I.M.D.

Calcutta

No 408

Dated 30th July 1873

Rec'd 10th —

2 Σ No 1201

Furnishes information with regard to the extent to which the Medical Schools & Hospitals are teaching Medical practitioners the principle practice adopted in Europe Communicates

383

No 30

Office of Surgeon General Stud.

Fort Saint George 21st January 1874.

From

Surgeon General C.B. Balfour

Surgeon General Stud.

To

The Chief Secretary to Government

Educational Department

Sir,

In anticipation of the establishment of the District schools of medicine, which Reading of Govt. Order 22nd July 1874 were recognized by the marginal Proceedings, Reading of Govt. Order 3rd March 1870 one of the languages used in instructing being the vernaculars in the district, I have been gathering together as many as could find of Medical works, in the languages of Southern India, and have been enquiring as to the books available in the other provinces of India.

2 The Principal of the Medical College Calcutta has obligingly sent me a list of 13 books, in the Hindustani or Hindustani, which may come of use hereafter

hereafter, and such possession to terminate
but copies of each one copy to be lodged
in this Office and one in the Library
of the Madras Medical College, value
about Rs. 150.

I have the honor to be
Sir
Your most obed.t Servt.

J. Wilson Surgeon General
Surgeon General Stationery

385

My dear Sturrock

This can be
disposed of as the Question
of Remitting the Fees
in the case of
Inventions - a Circular
is now in Circulation.
is

1. Nadim-ut-Talba	(Agra)	Rs.5		1. On Anatomy
2. Nya Materia Medica	(Lahore)	-5	? Supplied	2. On Materia Medica
3. Ilm-i-Ilm-i-Tibb	(Hyderabad)	-8		3. On Practice of Medicine
4. Ilm-ul-Amraz	(Calcutta)	-6		4. On Practice of Medicine
5. Tib-i-Rahimi	(Lahore)	-6	? Supplied	5. On Practice of Medicine
6. Risalah-i-ilaj-i-Haizah	(Calcutta)	-2	? Supplied	6. On the Cure of Cholera
7. Ilm-i-Jarrahi		-10	In the Press supplied	7. On Surgery
8. Miah-ut-Talba	(Agra)	-2¾		8. On Health minor Surgery
9. Dastur-ul-Habilah	(Agra)	-4	? Supplied	9. On Hand book of Midwifery
10. Amraz-ul-Nubla-o-ul-Malumd	(Lahore)	-5	? Supplied	10. On Diseases of pregnancy
11. Amraz-us-Safian	(Lahore)	-5	? Supplied	11. On Diseases of Children
12. Risalah-i-Kimia	(Agra)	-3	? Supplied	12. On Elements of Chemistry
13. Ilm-i-Kimia	(Calcutta)	-2	? Supplied	13. On Elements of Chemistry

No. 190

Surgeon
OFFICE OF INSPECTOR-GENERAL, I. M. D.,
Fort Saint George, 28 April 1874.

From

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

To

The Chief Secretary to Government.
Educational Department.
Fort Saint George.

SIR,

In my letter No. 409 of 23rd October last I had the honor of submitting a scheme for educating Civil Medical men for the country, and mentioned in its 6th paragraph, the need for the immediate entertainment of Candidates, because students for the higher qualifications will be required to be retained in the College for a longer period, and in paragraph 6, I asked permission to issue a Notification in suitable terms.

2. I have since, on the 24th Ultimo, mentioned in a D.O. communication that, unless entertainments be made now, the Education Department in October 1875 will have no pupils in the second Department of the College, and in July 1878 there will be no out-turn of educated Medical men. And as the interval is becoming very brief, I ask the

favor of orders on the subject. The need for orders is the more urgently required, because the recent order of the Government of India has forbidden the employment of Military Medical Officers in Civil situations.

No 1003 dated 26th March 1874. Military Department - Madras.

3 I have recently, in my letter No 43 dated 2nd February 1874 submitted to Government, that the Education to be given to the higher qualified Civil Medical men is recommended to be identical with that which is now being imparted to students for the Apothecary Grade.

I have the honor to be,

Sir

Your most obedient Servant,

Edwd Balfour Surgeon General.

Surgeon General.

Indian Medical Dept.

12-2-74 4404

No. 25 Dundigul, April 17th, 1874.

395

From

The Vice President
Dundigul Municipality

To

W. Mc Gibbon Esquire
President, Dundigul Municipality

Sir,

I have the honor to acknowledge the receipt of your letter, No 21, dated 6th April 1874, requesting the Commissioners to communicate their views to you on the subject of training Medical pupils, in the Dundigul Dispensary, as referred to in GO dated 11th February 1874. No 235 - Financial Depts.

2 In the absence of the Commissioners, at their Meeting held on March 5th, 1874, which preceded the passage of the Resolution already forwarded to you, "That if the plan in question is to be carried out, the Municipality can only act in the matter, in connection with the Local Fund Board." The Commissioners were of opinion that while it would be well to make the experiment of establishing Provincial Medical schools, such schools would be for the benefit of the entire District, rather than a single town and that therefore the Local Fund Board Dundigul Circle should first decide whether any

Dated 29th April 1874.
Despatched —do—
Received 1st May 1874.
No. 790

To
The Chief Secretary to Government,
Educational Department,
Fort St. George.

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

Dated 29th April 1874.

Subject.

Requests sanction, &c.

Sanction of Government to the establishment of a Medical School at Dundigul.

any of its funds could be granted for such a purpose, and if so what portion of the entire estimated expense.

3. The Commissioners were further of opinion that no decided action could be taken by them, until the subject of Provincial Medical schools had been so far matured by the Surgeon General Indian Medical Dep^{t}, as to enable him to send to the Municipality a general plan of the working, size & expense of the proposed schools.

I have &c &c

(Signed) Edward Chester

Vice President

(True Copy)

W McDuluc

President

Proceedings of the Local Fund Board, Dindigul
Circle No 32 of 1874 dated 19th March 1874

Read Proceedings of the Dindigul Municipal Commissioners dated 5th Inst, and remarking that they can act upon G.O. 11th February 1874, No 295, Financial Dept. as to the Establishment of a Medical School at Dindigul only with the concurrence of the Local Fund Board.

With reference to para 8 of the Surgeon General's letter embodied in the G.O above mentioned, the Local Fund Board consider that the discussion of the subject is at present premature.

(Signed) H W Bliss
Vice President

(True Copy)

W Mc Luhose
President

Enclosure No 2 in a letter from the Civil Surgeon, Dindigul
To
The Secretary to Government
Medical Department
Dated 1st October 1874
No 186.

Copy of Proceedings of the Dindigul Municipal Commissioners
Letter No 285 dated 1st October 1874.

Rect 10/10/74.

No 26

Circle & Office
at Erode
(Cuddapah) Chingleput
17th March 1874

297
401

From

W. M. Gubbins Esquire
President, Municipal Commissioners
Madura

To

The Honorable D. F. Carmichael
Offg Chief Secretary to Government
Fort Saint George

Sir,

I have the honor to report that I requested the Municipal Commissioners of Dindigul to favor me with their remarks on the Surgeon Generals letter embodied in the Proceedings of Government in the Financial Department dated 11th February 1874 No 23 but they thereby expressed an opinion that they could take no action for the establishment of a training school for Medical pupils without the assistance of the Local Fund Board of the Circle. This Board to whom I referred to considered that the discussion of the subject was premature. I therefore again addressed the Commissioners and I beg to submit a copy of the Vice Presidents reply dated April 17th 1874. The Commissioners approve of the proposal to establish Provincial Medical Schools to be maintained out of Local and Municipal Funds but think that

x Copy of Proceedings enclosed.

Enclosure No 1 in a letter from the Vice President of the Municipal Commissioners for Dindigul to the Secretary to Government Financial Department No 26 dated 17th March 1874

Copy of Proceedings of the Municipal Commissioners for Dindigul at a meeting held on the 8th April 1874.

Read 10/2/74

Revenue Department

403

Proceedings of the Board of Revenue
Dated 26th October 1874
Read the following:-

No. 94

From,

W. E. Stokes Esquire
Ag. President of the
L. I. Board & Chingleput
District

To J. Grose Esquire
Secretary to the Board
of Revenue, Madras

Sir,

With reference to the Board's
Proceedings dated 9th January
1874, I have the honor to
forward Copy of a letter from
the Vice President of the
Chingleput Circle, dated 8th
Instant No. 294 requesting
that early orders may be
obtained

Revenue Department

Proceedings of the Board of Revenue
Dated 26th October 1874
Read the following:-

No. 94

From,

W. E. Stokes Esquire
Ag. President of the
L. I. Board & Chingleput
District

To J. Grose Esquire
Secretary to the Board
of Revenue, Madras

Sir,

With reference to the Board's
Proceedings dated 9th January
1874, I have the honor to
forward Copy of a letter from
the Vice President of the
Chingleput Circle, dated 8th
Instant No. 294 requesting
that early orders may be
obtained

obtained on the question of
training Medical Practitioners.

Chingleput District
Local Funds Board's
office, Saidapet
15th October 1874

/Sign.d/ A. E. Stokes
Ag President

No. 294

From,

C. L. Crole Esquire
Vice President Local Fund
Board Chingleput Circle

To,

A. E. Stokes Esquire
President Local Fund
Board Chingleput
Dist.
District

In accordance with
Resolution No. 22 of this
Circle Board at their last
meeting, I have the honor to
request that you will be good
enough to cause the Govern-
ment to be reminded that
the question of training
Medical practitioners Sub-
mitted for favourable consi-
deration of Government
by

by the Board of Revenue in
their Proceedings dated 9th
January 1874 No. 23 has not
yet been disposed of.

I have &c

Chingleput
2-7 P.O. Office
8th October 1874

/Sign.d/ C. L. Crole
Vice President

/True Copy/

/Sign.d/ A. E. Stokes
Ag President

Submitted to Government
with reference to Board's
Proceedings 9th January
1874 No. 23.

/True copy & Extract/

J. Grose
Secretary

To,

The Chief Secretary to
Government Financial
Department.

C. & D. Syd. & Co. Stab.

Hieronimi 1874 Respm
R. 2257

Proceedings of the
Board of Guardians

Read 26th October 1874
Receipt £26 — — —
Rec £30 — — —

Mr Smith
to Lord Colchester from
Colchester to Hieronimo Post
Carpenting one from
Lee Broad Oak Beds
Hieronimo Post Carpenter
Mr Pullen order
Mr Queen Mowers
Hieronimo Needle
Leatherdresser

Find Dec 7 May 1875
£1001

Mr Stanmark

To 5

Municipalities.

Bellary				1	1800	1	675	2	1260	4	3735
Chingleput	1	2250						1	300	2	2550
Cuddapah	1	1800						*2	1320	3	3120
Coimbatore						1	675			1	675
Ganjam								3	2160	3	2160
Godavery								2	1440	2	1440
Kistna								2	1440	2	1440
Kurnool						1	675	1	720	2	1395
Madura								4	2220	4	2220
North Arcot								1	480	1	480
Nellore	1	1800						1	360	2	2160
South Arcot	1	1350						1	720	2	2070
Salem	1	1800						1	720	2	2520
Tanjore	1	2385	1	2070		1	675	3	1260	6	6390
Trichinopoly	1	1800						3	1320	4	3120
Tinnevelly					1	900		2	1440	3	2340
South Canara								1	480	1	480
Malabar								5	1965	5	1965
Madras	1	3350	2	7110	1	1920		*5	3660	9	15940
Vizagapatam					1	1440		*2	1560	3	3000
										61	59250

* The Hospital Assistant is employed as Deputy Superintendent of Vaccination on a salary of Rs. 70 per mensem, and his pay is included under this head, as the Amount is debitable to Municipality.

Office of Surgeon General
Indian Med. Dept.
Fort St. George 18th Dec. 1874

Edward Balfour Surgeon

Surgeon General
Indian Med. Dept.

C.W.

Local Fund.

Ganjam	1 1020	1 300	2 1320	
Vizna	1 900	3 2700	4 3600	
Nellore				
Cuddapah	1 2760	1 1800	1 300	3 4860
Bellary		3 2700		3 2700
Kurnool			1 480	1 480
Chingleput		1 900	1 720	2 1620
North Arcot	1 1500		2 1080	3 2580
South Arcot			2 960	2 960
Tanjore	1 1530	2 1800	1 720	4 4050
Madura	1 2250	1 900	1 900	3 2160	6 5310
Tinnevelly		1 900	1 720	2 1620
Coimbatore	1 1440	2 1368	1 225	4 3033
Salem		2 1800	1 720	3 2520
South Canara		4 3600		4 3600
Malabar			2 1080	2 1080
				45 39,333

115 Civil — Provincial

1st District			1 720	1 720
2d "			1 480	1 480
3d "		1 2160		1 2160
4th "			1 300	1 300
Governor's Household		1 1920		1 1920
Ganjam		1 2520	6 2760	7 5280
Vizagapatam		1 2160 — 3 4920	6 2776	10 9856
Godabery			6 3840	6 3840
Kistna			3 1500	3 1500
Nellore			1 780	1 780
Bellary			1 300	1 300
Kurnool			2 780	2 780
Cuddapah			2 960	2 960
North Arcot			4 1740	4 1740
Chingleput			3 1500	3 1500
South Arcot			2 1020	2 1020
Tanjore			2 1200	2 1200
Trichinopoly			4 1920	4 1920
Madura			3 1680	3 1680
Tinnevelly			1 300	1 300
Salem			3 1320	3 1320
Coimbatore		3 752	2940	10 10,512
Madras		5 16530 — 7 11040	6 3000	18 30570
Malabar			12 5439	12 5439
South Canara			3 1380	3 1380
Kamptee			1 720	1 720
Secunderabad			1 720	1 720
Add amount of 1/4 Jaghire, as contribution to the said from Provincial funds towards the salaries of Medical Subordinates				104 88897 17112
				104 106009
Medical College		4 6080	1 1320	5 17,400
Marine		1 3300		1 3300
				6 20700

E/13

Civil-Imperial

Arcot, North		4 2640	4 2640
" South		4 2400	4 2400
Bellary	1 3120	2 960	3 4080
Canara, South		2 960	2 960
Coimbatore		2 1200	2 1200
Cuddapah	1 1800	2 1200	3 3000
Ganjam		2 1440	2 1440
Godavery		3 1920	3 1920
Kistna		4 2160	4 2160
Kurnool		3 1920	3 1920
Madras		2 1440	2 1440
Madura		2 1440	2 1440
Malabar		2 960	2 960
Nellore		4 1980	4 1980
Salem	1 3520	3 2160	4 4680
Tanjore		2 1200	2 1200
Tinnevelly		3 2160	3 2160
Trichinopoly		2 1200	2 1200
Vizagapatam	1 3120	3 1260	4 4380
Revenue Survey & Settlement		9 4380	9 4380
			64 45,540

Statement showing the cost of the existing Medical Subordinate Establishments, and the Amount debitable to each of the following heads.

	Native Surgeons		Apothecaries		Acting Apothecaries		Passed Hospital Apprentices		Hospital Assistants		Total Amount £.
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	
5/15 Military											
Brigades of Artillery Head Quarters		3 12,000				3 2592		3 4440			9 16032
Batteries of Artillery				20 33840		1 864		5 2220		26	36924
Cavalry		2 8240		4 4800		3 2592		10 4080		19	17772
Infantry		9 26280		8 10.020		11 9504		75 28440		103	74844
Depôt at Ponamallee		1 3120		1 1440		1 864				3	5124
" Wellington		1 3120		1 1440		1 864		1 480		4	5904
" Ramandroog						1 1800				1	1800
Remount Depôt, Doresoor		1 3120								1	3120
Detachment at Salem						1 1800				1	1800
" Mallapooram						1 1800				1	1800
" Fort Blair						1 1500				1	1500
" Trichinopoly		1 2520								1	2520
" Secunderabad						1 1800				1	1800
Garrisons		7 2520		8 11340						15	37800
Medical Depôt at Madras		1 720		1 1440						2	7200
" Rangoon		1 2520								1	2520
" Secunderabad		1 720								1	3120
Sappers and Miners		1 2520						2 780		3	3300
European Artillery Nos 3 Native Hoffy Depôt Arcot						1 1800		2 1020		3	2820
Field Train Doresoor						1 1800				1	1800
Fort Powder Steam factory						1 2160				1	2160
Governor's Body Guard								1 720		1	720
Native Details						1 1500		4 1560		5	3060
Civil Hospitals								13 6730		13	6730
Invalids & Extra Duty		8 22920		4 11460				22 1908		57	16860
										90	70248
										307	312528

No. 374.

OFFICE OF SURGEON-GENERAL, I. M. D.,
Fort Saint George, 8th December 187 .

From

SURGEON-GENERAL EDWARD BALFOUR,
Surgeon-General,
Indian Medical Department,
Fort Saint George,

To

The Chief Secretary to Government,
Public Department,
Fort Saint George.

SIR,

With reference to your Special Memoranda Nos. and dates as per margin, I have the honor to submit for the information of Government, a Statement of the sanctioned Establishments of the Medical Department, and the amount thereof to be drawn monthly:

Military	12,528 — —
Civil - Provincial	45,540 — —
Civil - Provincial	100,000 — —
" " Medical College, &c.	20,700 — —
"	39,333 — —
Local Funds	59,250 — —
Municipalities	5,783,350 — —

No. 314 dated 9th November 84.
" 341 " 5th December "

I have the honor to be
Sir,
Your most obedient Servt.
Edward Balfour Surgeon and
Surgeon-General
Indian Medical Dept.

C.S.

From

Surgeon-General E. Balfour,
Surgeon-General,
Indian Medical Department,
Fort Saint George,

To

The

Dated

Despatched

Received

No.

Subject.

a member and added that the entertainment "must be immediately"
I do not think that any one could have
written more correctly, nevertheless,
up to this time, there has not been
any order - I have before written on
this point in this D. O. manner
in official manner, warning that
there will not be any students for
the 1875-6 Session and I trust
that will in a sure manner be
than I have already done.
The letter N° 295 sent to day
I have written Clearly yet briefly, and
I think it is correct - Please
that orders as it can be issued also.
For both these subjects the
time is so brief that even an
hour can be of value and I
beg of you to telegraph when
I can take action on them.
I am Sir
Your
Obt Servt

Madras XXX May 8/74
421
To
The Revd Cornelius Caldwell
Bangalore
Dear Sir
In my letter No
of the 25th October 1873
I asked permission
to advertise for 30 Na
tive Medical Students
As orders are yet wan
ting I send herewith
a new urgent request
form (open) to you
and a month after date
I shall ask officially
to be informed according to

425 419

Financial Department,

No. 1007

From The Pres[t] Municp[l] Comm[rs] Madura.

Dated 1[st] May 1874.

FOR ORDERS.

together with the other correspondence on the subject to the Sanitary Commissioners with the request that he will give his early attention to the whole subject – as one of urgent importance to the well being of the people.

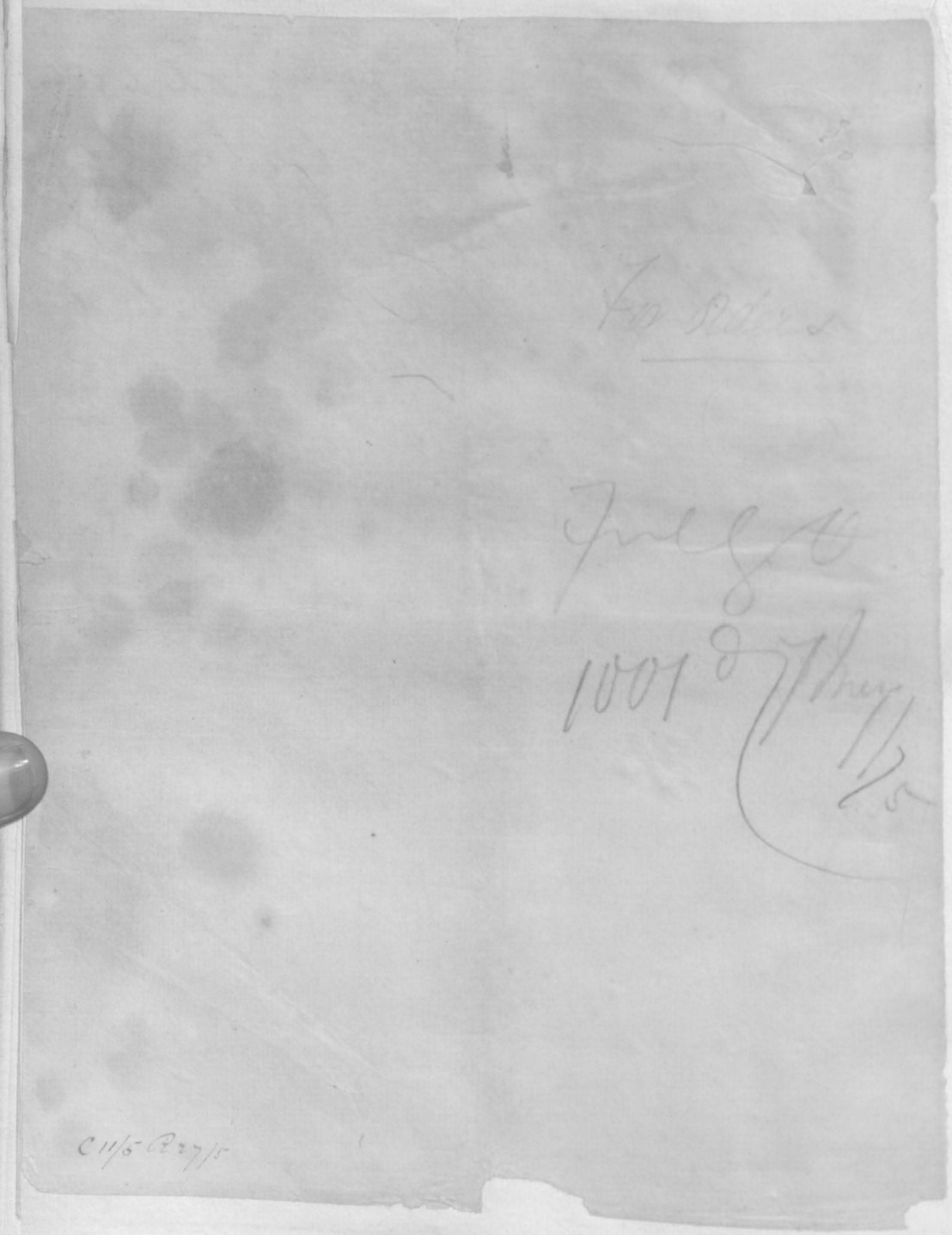
The Local Board Act has provided for the Sanitation of the Country by assigning a share of the Grants one third landlords to that purpose and I consider the creation of a popular Medical profession would the wants of the vast population by the general establishment of Medical Schools for instruction in the Elements of Medical Science is one of the very first steps to be taken in the direction of true popular Sanitation

The

The thing was discussed 4 years ago, but as yet nothing has been done with a view to laying a foundation of some practical system. I would therefore earnestly submit that it is the duty of Government to lose no time in adopting a measure with this view.

[427] [428]

Dr Mapother



C11/5 R27/5

No. Minute by the Hon. J. Sinclair dated 12 Nov 1874

Medical College

Minute

429

In the event hereafter of the Medical College being established in this City, two distinct Examining Boards are required - viz:-

1. the Examination of candidates for ordinary Medical Establishments & for Civil or Distinguished from Military Departments &

2. the Examination of private Medical practitioners for the Public.

The first Board to consist of three Medical

measure very desirable - it has now become a necessity - owing to the Supreme Govt having lately fixed the strength of the establishment to be hence for the maintained for Military Service - And in pursuance of the Warrant both of the Govt the Army has also been restricted to European & East Indians.

It fortunately so happens that the existing Establishment is sufficiently strong, in Europeans, and there

	Gross Surplus	In Civil Employ	Net Surplus
Apothecaries	41	28	13
Asst Do	52	37	15
Passed Hospital Asst	46	4	42
Hospl: Assts	244	175	69
Total	383	244	139

Surplus being available for Civil employment there is no intended for the gradual formation of a separate Service for Civil employment. Out of the Gross number 383 - there were 244 employed in Civil Employ, leaving 139 still available. In this there are under instruction. There is therefore no immediate depth of men to be drawn upon, and the task before us is to lay the foundations of the future Service which is to supply men to

take the Classes
of ~~the~~ these Men
barracked from the
Army Establishment
as their pay daily
are stopped - Extra
Pay & the to
meet the wants
of Municipalities
& Local Funds
Grants..

The Higher things
to be done are to
~~formulate~~ ~~the~~
~~and~~ determine
the Conditions of
the new Service
as to Pay - Pensions &
to prescribe the
Qualifications required
and to form an

4383

approximate Estimate of the strength
of the new Establishments.

The Civil Authority
must, as hitherto,
have two classes of
Subordinates - one
Qualified to have
charge of Hospitals
& Dispensaries &
Classes & have the
control & Inspection
of a Commissariat
Officer and not civil
- able & to fill certain
Special Offices -
the other to discharge
subordinate duties
under the senior Officers
The Qualifications of
the first class must

be of a scholastic character & have aught not, I think, to be satisfied with less than the curriculum of the Second Dept. in the Medical College. Some not essential subjects - as Botany & Chemistry - might however be made optional. and the time of the students be devoted as much as possible to those important subjects. An attempt to make them form general practitioners. For admission into the College it would I think be premature now to require the Matriculation Test. That must then stand as it now does I found Greek could, for a good general Education is the best foundation for the Profession - For the present we must be content with such a knowledge of English as will enable the Student intelligently and readily to receive instruction through the medium of English

to undertake the Text books & to
instruct. The College
must not be confined into a school
for learning the English
language. The Collegiate course of
ten or two years
is advisable. and should
be adopted. Except
if Professors books are
selected, one year should
I think be enough.
The College course
should certainly
extend over three
years, including Hospital attendance
& instruction. And
I think every student
should after finishing

the preference should
however be given to
those who have passed
the Matriculation
standard, if otherwise
equally eligible.

out of the College
be attached for
a year or two at least
to some of our large
Hospitals at Madras
before being sent up
Country trips.

For the second
duties of the Principal
the curriculum
of the previous Debt
is the one year Collegiate. and two
years collegiate in
structure - as bombed
by Dr. Balfour Committee
in fact were it just
that time of those
officers are attached
to pick. whose medical
officers are not resident.

5

to the Causes of
delicacy travelling
about &c. I should
think the the same
rather true as writers.
Nos. 2 & 3 essentially
should be excluded
as for an Institute.

It is not easy
at present to form
into any confidence
the number of Rel.
Ministers of Each
class likely to
be required, per.
haps the best plan
would be to
In order to avoid
the necessity in pres.
-ent time. Experience
may and can the same
& other can for ascertain

24: Gr. Is this Inquiry necessary?

4983 6

our admissions in
the Colonies must
be moderate until
we see our way
more clearly, and
especially we must
the case fully not
new. turn the Mem
of the Medical (
ing a Hon Brig Chair
in Straits - a Lun
is a matter of
first importance
From the Statem
appended to D.
Walpoles letter of
the 23rd ult it ap
pears that at Prom
tories the absol
35 Protestants of
the grade of Collec

Books at places
where there are no
Commissioned Officers
judging from their numbers
and the means likely
to be at the disposal
of Local Fund Boards
I should say that
50 to 70 men would
be not insufficient
provision - There a
total of 150 men of
the higher class - if
Foreign Regiments
are included - &
of 120, if these are
excluded, would
seem to be a sufficient
strength, when
the present surplus

of Military Stations
or Districts is stated
or otherwise became
available - An
annual addition
of 15 students is
therefore as much
as we can hope
safely venture on -
If this estimate
proves too low, it
can easily be raised
but it is very necessary
carefully in every opinion
that we should keep
in the safe side
at the outset -

Of the lower class
we seem to require
employing 140 - and
35 men who are not
qualified to Foreign Regd -

- ministration so
that we may safely
assume that we
shall be giving 200
men of this class
eventually.

These of course
are merely estimates.
Our actual demands
must be closely
watched and the
administration of
the College regulated
by experience. It
is necessary however
to fix on the probable
strength of the service
as well as we can
in order that the
financial results
may be forecasted.

5/ 645

- of the higher class
of practitioners Dr
Balfour

As regards expenditure, he suggested two methods, one based on a classification of charges & the other - according to which he fixes the professorial on the principle of a graduated scale according to service, with the addition of allowance for incidental charges. Under the first arrangement Dr Balfour divided the charges into 3 classes a R. 70. 80 & 100 Rs, and he thinks it "desirable that applicants of approved

ability to could be had for that salary."
Under the second System Dr Walford has been salaries of Rs 50 - 100 & 150 the 2nd being the Provincial [Provincial] standard, with an allowance of Rs 50 for incidental charge - and he has "no doubt whatever ... that first ability to can be had for those terms" and he strongly recommends the adoption of this principle. This latter by the way has been understood advantages - but the

447

#10

present system of Provincial allowances & Salaries [Salaries] with the exception of the 2nd class Provincial Service [Service] is a very serious & very large - yearly - charge. Although [Although] the Inspectors of Schools will be [will be] held in the incidental charge and [and] the salaries of Schools will be practically [practically] same from 100 to 200 Rs. These salaries are I submit [submit] the lowest for any grade we [we] require - for those, which [which] cannot obtained [obtained] for Provincial or Local [Local] funds

are limited in
amount & not
to a title to
seat or a ballot
in cases. They are
also considerably
in the case of the
enslavement of
other branches of
the public service.
in the other branch
of the civil administration
does an African
entry become a test
by which all persons are.
& in home
is in the ballot?
of such certain
persecution & high
rates. It must be
remembered also
that these men

11

but only to give a
certificate of protection by
an Indian during
the 5 years they are
receiving instruction
of fairly to ex-
tend an employment
in the factories, and
this incidental
advantage. Above
all we must re-
member that we
must begin as
we may & slowly
expect to be able
to continue, and
not leave an Indian
nation of helpless

financial entitlement. I do not think any allowance should be given on account of independent charges inasmuch as it is for the very purpose that the Khan and education staff and Engineering staff are employed. Where special cases may be there for extra remuneration, an exception may be made of course, but the rule I think should be that the sanctioned rates of pay cover every thing. I would fix the scale of pay [illegible] by the Board for Rs 50 beginning for the first year, while as I have suggested, the [illegible] student is [illegible] leaving his [illegible] practice this is a hospital - and [illegible] the [illegible] in to [illegible] classes in the [illegible] ranging from Rs 75 to Rs 200. The title [illegible] ment is [illegible] it will be [illegible] to [illegible] [illegible] [illegible] [illegible]

that promotion from class to class should be given only on the occurrence of vacancies, and be dependent, as now, on periodical examination. Head quarters or the next should be allocated - Private practice should be prohibited except in certain specialities, and care taken to discourage the U.C.S. Rules. The pay should, as I have said, cover all duties assigned by post - Some

7/

	Rs.	Pay in Service	Pay in Civil
First 2 years	50	50	40
2d to 7th —	75		
7th to 14 —	100	40	30
14th to 21st —	125	25	20
21st to 25 —	150	15	10
25th to 30 —	175	10	10
30th to 35 —	200	10	10
		150	120

such classification as that as nearly as noted might be sufficient, the period of service absorbed in regulating the pay during the former of the term. Such an establishment would cost about Rs 200,000 annually - irrespective of pensions &c. and I do not think it would be considered likely to be necessary. The new service would consist almost entirely of natives, and the

exemption from
Military service
will tend to make
it unpopular.

The Hospital
Assistant class
should be similarly
marked, the rate
of pay ranging from
20 to 60. in stead
of starting at 40 as
proposed by Dr. Balfour.

The Precollegiate
& collegiate
allowances can be based
for the higher class
of practitioners seem
to me too high. We are
giving these men a
valuable Education free
from charge with a
certainty of [illegible]

Note. Dr Balfour states
that 2nd Military Stu-
dent has cost the State
2667 Rs - and 2nd
Civil student will cost
at the rate Rs 1332 - Et
cluding allowances for
Education.

employment & pensions
on retirement - and
I believe the distinction
is able that should be
given - Even this should
in course of time be
necessary. I should
think 15 Rs for pre
collegiate & 20 Rs for
collegiate allowances
would be sufficient -
The allowances now
proposed for Hospital
Assistants might be
reduced to 7 to 9 Rs
All the students
should pay up to some
for a certain period,
say 5 or 7 yrs, in the
power however of Gov
reducing release at
any prior period for
State

The stipend will
if ceased to be continued
if the student is idle
and no stipendiary student un-
to have the
likely
final Examination
should be detained,
exact as a private
student - Removal or
dismissal for
misconduct should
entail immediate expulsion.

Saml.

Statist. Retire-
ment at the age
of 55 or after 35 years
service should be the
rule, in both branches
of the service. From
the character of that
employment transfers
will not be frequent, but both classes
must be provided with
relief in the
Presidencys. The age
of candidates for the
higher grades, on
entry into the College
should not be less than
under 18. they may
then enter the service
at 21 - which is young
young enough for them
to fulfil their

8/

The most conve-
nient arrangement
would probably be
for Govt to defray
the entire cost of
the new Establish-
ment in the first
instance to "Provin-
cial" and
Municipal Dept
charge cost to
Municipality &
G. G. Circle with
the arrears cost
of each Officer
of the two Grades
~~which it charge~~
employed by it.
This is a matter
however which

Mr. Jones 27 April 1869. M.S. 2831.

may be left for future consideration.

The second question - viz the admission of Irish Medical practitioners - has engaged the attention of the Council since 1867 when the subject was referred by the Ld. Lt. & a Committee of Medical Officers.

The Ld. Lt. has advised

1. The drawing of four Medical

Schools in the Provinces, for the Education of Irish practitioners - the instruction now & to be in the Provincial Colleges entirely and limited to what is necessary in Native practitioners - Scholarships to be allowed now to be attended but thereafter the Candidates are to maintain themselves or be maintained by private funds or in Dispensaries - On completion of the Course of instruction, there

9/ to receive a lec-
ture fee, together
at the rate of pro-
vided for public
schools and to
III. The Extension
institution of
hospitals & Dis-
tributaries
IV The opening of
Medical faculties
in every hospital
where in future it
structure could be
a market.
V. The translation
of approved Medical
books in to the ver-
naculars.

Student who at-
tained the pre-
scribed standard
of qualification to
receive Diploma
and to set aside
in the instrument
& medicines to
make them over
living in life.
II. The attaching
of selected Medi-
cal Officers compe-
tent to teach in
the Vernaculars
a fees benefit ob-
tain to receive a
certain amount
of pecuniary & Rank
in structure. The
Medical Officers em-

That the Hyth Re-
-commendations
were limited to
attending the Exam
of Training in
Scientific Medical
Education.

The Medical
Com.ee on the Mem
-orand based their
Scheme on the
principle of an
Expulsion Series of
Village Doctors, to
be paid during
their education &
to be chosen by the Govg
their employment
from the Records
of a village Local

A.03 March/70

Sects. to be carried
into Effect Throughout
the Country. "At
first the Services
of Educated Em-
ployment were to
be sought by
the State. The
Village Doctor,
"in addition to
his Duties as Village
Physician or Sur-
geon" was to be "vis
ited" annually, the Sanitary
inspector of his
circle, the Coroner
of Cases of Sudden
death, the Village
Watchman of the Vac
cinator and the

18/45

professional advice
and attendance of
the Committee of the
Epidemic Hospital
Institution. The Hospital
not to be debarred
from private practice
of the Committee
before the at an in
fectious and in Rooms
in the adult. The more
intelligent & wealthy
members of the Native
Community would
voluntarily help
him in his various
plans for the better
work, commencing
with a Village hospital.
They pro-bably first Pro-
vincial School. the

10/ first Dispensary
at Cuddapah. The
~~Committee~~ The Committee
from the Husband that
a Midwifery class
& an obstetric Ward
should be established
in connection with the
Each Provincial School
and a nurse trained
at the Leper Hospital attached
-pital attached
to assist in the in
struction & training of a
class of native mid
wives & Nurses.

The principle
on which the Medical
Committee acted
Secure the services

Even if Financial
Considerations did
not forbid its ac-
ceptance, it would
I think be a grave
mistake to render
the practice of
Medicine in the
Country, a close
State service. All
that the Govt. can, as
I think, honestly or
advantageously attempt
is, to see that persons
employed to do duty
the means of obtaining
a Medical Education
with which, as a
matter of fact - the

persons come pro-
-vide for themselves
or otherwise procure.
It is as the Govt.
have justly remarked
"a duty to demand
Ministration" that
we have practically
[illegible] in the
Army Service
direction - Our Hospi-
tals & Dispensaries
should & will be
as they are cannot
possibly meet the
requirements of a
Population of 30
millions - Scattered
over so vast a terri-
-tory - Numerically as
have but few skilled

Besides which the whole is in course of erection. It contains 40 lecture rooms, and the Faculty have to pay for them as well as to keep the Faculty. and must live on what fees the Faculty can get. It should be utilized to the profit and [illegible] in the object of its erection but it can never meet the demands of the country.

I would transfer

medical officers to every 60.000 of the people - The wants of the native subjects are as much in the hands of foreign Surgeons as they ever were - and the best part of improvement is apparent, [illegible] the intervention of the Govt. The only school of the dying - the Madras Medical College, - cannot satisfy the wants of Education needed

admit the attached
list at present for three
to delay for drawing
schools of medicine
at the 4 stations by
-tested by the Board
and give immediate
diate intimation
of the intention.
The course of study
need not. I think,
exceed 2 yrs. - the
curriculum shd
be restricted to
absolute essentials,
and directed in
structions be given.
-bers ably attended
to. The cost of each
school can only be

estimated by Dr.
Mackenzie at about
Rs 8000 annually -
I doubt the desirability
of the term exceeding
exceeding 2 years fixing
a pop limit of Rs
50,000 per annum
for four schools. I
do not quite clearly
see to the scholarships
of stipends during
education - but it
may be necessary
at the outset - and
of local officers and
of this description I
would very moderate
subsistence allow-
-ances. In time in-
stances wealthy in-

On the other hand
each school must
have at least
8 students yearly

education of men
of higher culture
& social status
& take field &
practice would be
among the middle
classes. It will
be a matter of
considerable difi
culty to a Hindu
sound medical
education in the
Vernaculars. And
Medicine is not
a Science that
men of infer[illegible]
Education &c.
-lucity can ac.
-quire. I am also

Residents & public
bodies with [illegible] privately
-ride scholarships
or maintain stu.
-dents. I would here
avoid the stipen.
-diary system if
possible.

In one respect
I differ from the
Report - which they
prefer in attending
in the vernaculars
only, and the
education of those
who can afford it
long have to go.
-ther in life. I
would, in these schools,
teach it in English
and aim at the

- the die to of the
consequences of
our denying out
existence & even
as the Elements of
English Medical
Science - Much
of the pain & dis-
ease that exists
in any system of
Medical treatment
which only be stemmed
if the true cause
& Character can be
clearly & distinct
& for an Unit & Edu-
cation & Study -
None can we only
Judge of Healing &
the Means for it in it

ought to be and is
in more advanced
countries, declared
as its Burning Sin
& Curse - and then
is most likely to
be the case when
its true practical
& social
by men of time to
time and any the
Middle classes -
A Knowledge of English
will undoubtedly
facilitate & Ex
dite the acquisi
tion of Medical
Knowledge by the
Student and en-
large the field
from which its
Structure can be
Obtained - it is very

13/.

calculated to encourage
and is always
very general - and
it gives its best
- talent a certain
weight in the
Profession.
I would therefore
make English
the medium of
instruction in
the Provincial
Schools.
For the instruction
of inferior men in
the more elementary
Principles might be
made in the District

Hospitals - Local
Municipalities &
Local Funds
have lately abolished
this Scheme, and it
may, I think, be
most advantageously
left to the Profession
at all events for
the present.
I would further
Provide in some
principal
of our best Colleges
& Schools for the
teaching of some
of the subjects - Che-
mistry for instance,
which the wife forms
part of a Medical
education. Until it
is necessity be learnt

such as the
Cambrian (Ab.

in a medical
school. The students
acquiring these ob-
-jects would be
taken in like an
inoculation - and
would certainly
be less tax to the
health to admit
medicine as these
for the protection,
It is a great de-
-fect in our system
of education, that
it is so purely li-
-terary - and for.
-tunes men where
ambition is so often
limited to embark
much in the public
service. Of late

years the law has
~~there~~ proved the
what attractive -
and I would take
that by ~~pursuing~~ what I
classes for ~~other~~
many term professional
objects we have
there perhaps but still
and honorable
training ments for
an educated gentle.

The vacations
provide only for
the male sex in
part the Institution
of the Presidency.
be have still to
think of females.
the most part of
whom are prevented

by social & religious
prejudices from
resorting to the
aid of male practi-
tioners. The lament-
able loss of life
and the suffering
entailed on the
female inhabitants
of the country by
the want of assistance
of the only class to
which they can
obtain admittance
is notorious & talked
of daily in Parliament.
Heretofore - if only
as an act of
simple humanity
endeavour to check

+ It is almost useless
to expect the dissi-
pation of the prejudices
which bar the ad-
mission of the
male practitioner.
indeed my own
belief is that even
among ourselves, be-
fore many years
are passed - female
doctors will be
the rule for ordi-
nary diseases
among females.

some relief. In
the current year
ladies, Europeans &
East Indians, have
brought admission
into the Medical
College, with the
view of qualifying
for private practice
Arrangements
exist in their re-
moval from
wards for their in-
struction - and
others will be built
here & now the Ex-
amples there set.
But we cannot
look to this source

for a sufficiency of suitable female practitioners - their numbers will certainly be too small and their employment be confined the means of obtaining wealth in relation to the native community. But while they can be utilized as teachers - and I am informed on high authority that at least one of their number is desirous to attain a degree of proficiency - that I would suggest is the establishment of a school of medicine for native females entirely under female management. If we are to alleviate the suffering which we know the women among the female population of this Presidency from the absence of skilled medical attendants, it can only be by training native female doctors - for the men of Europe to fear - and to

entirely under the Female Management. The course of study would be specially designed for the direction in which the chief ~~work~~ work of the pupils will lie, viz the treatment of women & children. Clinical instruction could be had at the Women's Hospitals. A suitable Supervision could be obtained from among the Ladies who study

Extension and not equally easy to obtain. But the native female doctor must be a question of her position in life & of good character. Such ladies will not attend our Schools. Without clinical instruction it is impossible to make Lecturers in the Universities of Male Students. This difficulty can only be overcome by training a School, as I have suggested

ing in an College,
or pursuing Studies could
be obtained from
England - Whilst
the former is beneficial
as a knowledge of
at least one Foreign
or two Foreign Languages
and of the customs
& habits of Nations
are of very great
value to - Architecture
could certainly
be learned locally -
as certain books
in a Course of
Locality - and
a knowledge of Editing
would of course
into practice for
a certain number

of Pounds, (viz and
-dition to Day-Scholars)
would be Price - He
& Home would be
in course would be
could not be brought
constant or abs-
-Dread. if the Ex
Hamiltons Council
or the climate &
a prison - There
would certainly be
some Difficulty
at first in getting
pupils to the Works
but this in time would
do - I feel sure
that such a Scheme
would have the
direct hearty Approbation
of His Holiness
Pontiff - who would
give

pie on the advantage
of their influence.
We think in the
slightest degree
yielding or underrating the difficulties
to be encountered.
I am sanguine of
ultimate success,
and I know no
object more worthy
of hearty & ons.
support. 2 ~~sheets~~

I would call
upon the Surgeon
Genl. to draw out
a scheme - either
a increase on cost
of Rs. 20.000. an.
annually - or else on

34/485

for in the Red
Sea Ports & Aden
as well as by to
take an interest
in the matter &
send useful
information.

In the Hands
of which I have ref-
-erred - appropriating
£7000 — can be
met from our Pro-
vincial estimates
for Medical Stores
&c - and we
shall
a trifling pro rata
in turn
Large increase

the beneficent object of
saving life &
lessening suffering.

L. D. Shaw

12. 11. 74

Enquiry should
I think be instituted at once
into the working
of the Lancet Ref.
of the Medical
Dept. We learn to
be educating very
highly a few Europeans
Eurasians & East Indians
from whom Civil Hospitals
though acquired at
their Expense. The
public of the country
derive no advantage.
But what I do not

father & brother
any large landed property
pendicular - how can his
Cover know for, if at all,
the means of affording a
less ambitious but more useful
& longer course
Education are lessened or crippled
by it. On these points further
enquiry is desirable.
Dr Cormack's Memorial
to prevent unqualified persons
from practising medicine - from
visiting the poor & exercising pretended
practitioners - is strongly recommended.
Not only are duly qualified persons
sometimes wanting - but we do not
at present afford sufficient persons desirous
of qualifying the means of acquiring
qualifying at the Medical Education
giving the official

No 56 Minute by the Hon W Robinson Esq dated 11 Dec 1876

General College

Our Honorable Colleague Mr Linn has summarized and treated the subject of this voluminous Correspondence in so Exact and Exhaustive a manner that it seems to me that his Minute dated 12th Nov naturally becomes the basis of any further decision upon which it is susceptible.

At the same time I think that Dr Cornish's letter dated 7 July must be

engaged in Civil duties to elect with the sanction of the Military Authorities for Provincial and local Civil Service under such Conditions as may now be decided on. When such a Separation is complete both Departments will know precisely what they have to deal with and we shall be better able to calculate what provision has to be made by Parliament for the Education of the annual supply required to keep up the Establishment

I must admit that

that I take up the matter with great reluctance without a careful Examination of its details by a mixed Committee as recommended by me in my former Note

The new Civil Medical Service is intended to meet the requirements of the State (Civil) and Provincial Service in which must for the present be included the requirements of Municipalities and Local Fund Boards. The arrangement to be made must under the circumstances also include provision for

for preliminary Direction
more or less on the
Gratuitous principle
hitherto applicable
to the State Military
Establishment. On this
point I shall have
some remarks to make
further on

The Constitution of
the Service - in two
branches - proposed
by Mr Sim is in accordance
with existing Conditions
which must, I think, for
the present be followed
and I would accept
his moderate calculation
as to requisite strength
- viz 150 higher grade and
200 lower - of Each Grade
and also the charges

Can we attest Civil
Employés for Service
with foreign Administrations?

the proposes with the
minimum of service
required to qualify
for promotion - subject
to examination - But
I am expending doubtful
whether it will answer
to withhold special
allowance for independent
charge. The principle
is Equitable and is
admitted in the Military
Medical Subordinate
Service and sooner or
later will be carried
out as respects the
Service we are now
constituting. I would
prefer to admit it at
once and reduce
substantive pay to meet
the financial difficulty

The

The Sttes proposal as regards minimum period of Service, Guard Service within the Presidency, Retirement at 55 years of age, Pension &c. should likewise be accepted

As regards preliminary Education I agree generally with Mr Lim under present Exigencies. Any violent change would perhaps seriously affect the supply of Entrants to the College Course; but the question of Gratuitous Medical Education is a very serious one, and it will to continued until something is done

Might not the General Test (in English) be accepted as the Standard of preliminary education?

done to place the Medical profession on the proper basis as suggested in Dr Cornish's letter. For the present we must offer the Civil Medical Subordinate Service similar terms to those enjoyed by the Military Service to train them for Govt. Service. But I must confess that I should prefer to see them pay for their own Education and come to the Govt. with their qualifications in hand. I would rather see a considerable number of Stipends given

given to youths in
College in the form of
"Scholarships" limiting
the number and by and
bye, as the Service is
attains popularity,
either diminish, or
increase the Scholarships.

As Certain Govt: cannot have much
Control of those men
in Compelling them
to serve the Govt: for
a terms of Years. It
would be much better
if we could say to
these youths:- "We will
"give so many Scholarships
"Every year, with which
"you can pay your Expenses
"of attending classes
"at the Medical College.
If at the end of a
"certain time you are
"in good health, of
"good character, and
"pass a certain standard
"of Examination we
"will employ you in
"an uncovenanted Capacity
"or find Employment
"for you in Local Fund
"Circles or Municipalities,
"on certain scale of pay.
"If you behave properly
"and fulfil your duties
"to our satisfaction we
"will pension you according
"to U.C.S. rules".

I see from the Calcutta
papers that they make
nearly all their Civil
Students pay something
for

for their medical Education and I am quite sure that if lads saw any prospects before them, Govt: need not long bother itself about gratuitous Education and charge of maintenance while the lads are qualifying It is most inconvenient that we should go on paying boys to learn a profession which would give them a good livelihood

But to inaugurate the change I should advise Govt: to select a certain number of Stipendiary Scholarships

Every year and make Each boy of the Senior Dept. pay 5 or 6 Rs a month out of it. The College for tuition fees, and the junior Dept. 3 or 4 Rs. I would then throw open the College freely to all lads of a certain preliminary Education and admit them on payment of the College fees, giving them the chances of succeeding to Vacant Scholarships according to their ability & merit

The papers seem clearly to indicate that some

some considerable
changes are required
in the working of the
Medical Colleges and
places for clinical
instruction to adapt
them to the future
requirements. I would
call on the Principal
to draw up in com=
=munication with
Dr Balfour, a scheme
for the instruction
of the two Branches
- Military & Civil - of
public Service and
also for the increased
admission of private
Students.

I entirely agree
with Mr Sim as regards
opening

opening Medical
Schools in the Provinces
for the instruction of
private practitioners
and other matters set
out in his minute on
this behalf - and I
would order it to be
done, as already decided,
so soon as arrangements
can be made for
class teaching and
clinical instruction
at the different Stations.
The Surgeon Generals
should be requested
to prepare to inaugurate
the measure at once,
and submit a scheme
& Estimate of cost.

I

I endorse also Mr Sim's views in regard to teaching through English in preference to the Vernacular in the Provincial Schools. If a commencement is to be deferred until teaching in the Vernacular can be managed, it will be deferred sine die and considering how fast the language is spreading, I should hope there may not be much difficulty in getting lads who know it. The difficulties of teaching Secretaries Subjects, which have peculiar terms of their own, in a foreign language are almost insuperable

Scholarships should be provided for Provincial Schools by Local Boards, municipalities and by Govt: and private individuals. The whole expense should be met as suggested in my minute dated 8th September 1874.

I would adopt the measures proposed by Mr Sim for inaugurating female medical instruction by starting a

a School in Madras under an efficient female Medical teacher (by the time she can be procured - the expense of which (I should hope it will prove less than be anticipated) like that of General female Education should be borne entirely by Provincial funds.

I am not sanguine of brilliant or early success amongst the native female population in General - tho' I think that in Madras women Educated in Missionary Schools, if may be found to join the classes readily -

for the scientific Education of the women of this country must for long be pursued under extraordinary difficulties. The mental development of women in India is very low and tone is an Essential element in the enterprise of intellectual powers. They are further so far behind the men in General knowledge that the endeavour to teach any number of them a Scientific profession must meet with much disappointment. It is far more difficult for

for women to rise superior to caste and the prejudices of the youth than for men: and in their case the indifference and neglect of age has to be retained: Still it is worth a trial (at almost any cost) to supply the native female community with even a small number of Educated Medical attendants of their own sex.

12/12 J. Robinson

Transmit to Rt. Right Hon. Medical College. President duly 41

The number of Medical Subordinates now employed in the Hospitals and Civil dutied in the Presidency, but who are all on the Medical Establishment, and who are all trained in the Medical College, is 629. The Govt. of India has recently limited the number who are of Medical subordinates to be employed on the Medical Establishment of the Presidency to 259. In the future there

Received 19th Dec. 1845
Read 1st Jan. 1846
Minute by the Governor General
Rejection to be made
9/12 Dec. 1845
Sent to Court
12 Despatches

If the total number of pupils
entertained at the Medical
College is supposed number to
provide 370 trained medical
officers must be admitted
and trained no longer as
substary, but as civil officers.
The number to be admitted
and trained per civil whatever it may be
of course bear (other
things remaining the same) to
the whole number now educated
in the College the proportion of

370 to 629.

Such being the state of the case all
that is at present necessary to determine
is on what conditions medical
the pupils who are henceforth
civil officers are
admitted - including of course
the terms of service after
leaving the College - I agree with
the Army Med Dept; and think that
the scheme which he has
suggested may be adopted with

any such modifications in detail
as may hereafter appear desirable.

As regards the number of pupils
to be in future admitted annually
to the College – should it continue
of the present limit fixed in the
Ann.d Est.s of Civil Charges, – the change
made by the Govt. of India affords
no reason for considering it should
did not before exist. It may
however be considered as affording
a convenient opportunity for

raising that question. It was,
however, decided in Council, after
full discussion with Sir Surgeon
Genl. Balfour, that the most
expedient course was to leave
this question for decision pro-
tempore, as the immediate act of
the Surgeon Genl., who would be
guided by the varying circumstances
~~of the case~~ and requirements of the case and
the probable requirements of the
service as developed in the

proofs of these -

The question of providing by means of
~~the~~ schools throughout the country
the Medical advice, a staff
of trained medical practitioners
intended to meet the wants
in this respect of the population at
large in a distinct and direct
manner is quite - For myself
I confess that I am
not prepared to deprecate such

should that one object to confine
to such duties, and believe
to be implemented in letting
the present practice of the
Govt. Either the medical
officers to provided with
the practitioners, in which case
the Govt will have to pay and
only for the services
but for the remuneration of
the medical practitioners
provided: - or it will not
be practicable, in which case

the people must pay for the
medical attendance supplied.
In the first case, the cost would
attend it very great, and
it is an expense shrunk in no
country of which I have yet
read how it is expended by the
Govt. How many we learn for
instance, why the people of India
shd be provided at the cost of
the Govt with gratuitous medical
attendance, while the people of
England, who spend it more, are

(except in the case of epidemics
paupers) altogether without such
aid. In the second case, the measure,
which entails upon Govt the
cost of the medical education,
would fail of its object: for the
people will prefer the cheap &
ineffectual medical treatment
which they now possess to the more
expensive and better remedy which
they would thus obtain. The
Govt by this estimates the
expense to be incurred at £7000

But this could only be the preliminary
act. The whole question still remains
provision by judicial advice for the whole
Revenue: and this act of this
would be nothing very different
and which would necessarily
add to the pecuniary burdens of
the people. In any case, the
£ 7000 must fall upon our
Provincial Budget: and the real
issue of any object whether
new a charge upon that Budget

and by which the object was proposed
could, consistently with sound
principle, be proposed. Economy
administration If we are to direct any
from Provincial expenditure to
other purposes than those for
which it is now incurred - I
consider that denouncing abandoning
[illegible] of our existence is
an object of expenditure for
more defensible in point of
than that was advocated, which

indeed ~~any~~ neither to Christ's account—is punishable or defended at all.

By Paul. to Hooper observes, that the same proceed is not-meet & fair for the relief of suffering. But to relieve suffering from causes which belongs to ourselves is one thing:— to relieve it from causes which belongs to other people is another. There is a temptation to the latter course from which the former is entirely free. The suspension

that the satisfaction of the material requirements of the community is not one of the proper objects of taxation is (however widely it may have been departed from in practice) admitted by all but communistic publicists. To this proposition there are no doubt exceptions: but the question where to draw the line, as between the rule & the exception, is satisfactory

dispositions. I have always considered that in India the tendency has been to draw lines too far ↑ the direction unfavorable to the Europeans, who cannot be consulted or be useful: and that what is required is not to encourage but to repress that tendency. Despise it as we may, every proposal of this kind now under consid-

eration either in this country, or in Europe, or in India, for facilitating the acquisition of land by Europeans, should be viewed with jealousy, rather than to invite new resorts, for natives knowing how to avail themselves of increasing them.

Robert

Mar 21/74

Financial 1875 Despw

Minute by the Noble
the President Dy 21-12-76-
Recd 7th May 1875
No 57.

419

Minute

525

The scheme which I have
the honor to submit is of course, only
Experimental & preliminary.
If it succeeds - and I have
myself no doubt of its success
issue - its extension will
naturally & necessarily follow -
but what I have suggested
will be sufficient for the
present three or four years - and

revocably
plish the first - how it has altered
or fallen their standard of action.
Dr. Bedford addresses me that
all that I ~~am~~ such can be
accomplished for less than
I have Estimated - but even
if a school was established
in Each District, the Expense
would not be alarming - nor
even then, in my judgment -
the importance of the subject
& our Country subjects would fully

he may take from the
future to our successors.
They will be under no Obliga-
tion to pay beyond what I
have recommended - they need
not even maintain the free
schools I have established - they
will be as free to act according
to circumstances & their own
judgment as we are - they be-
-lieve we act in any way

justifying - This however is a question
for our Executive Authorities than for
us - the point I have endeavored
can be met almost entirely
from the Provincial Establishment
for Medical Services - which
is primarily applicable to
such purposes.

I should be glad indeed
if the action of Parliament were un-
necessary - but we have before
us the fact that the humble &

not taken the initiative - and
the extreme difficulty of their
organizing Schools of Medicine
is patent - owing to the dearth
of teachers & other causes - he
cannot, in my opinion, advisedly
& Southern Indians the Mis-
sion, which ~~was~~ guide
the Policy and Practice of
England - for the circumstances
of the two Countries and the

character of their inhabitants are widely different. Here the pt. must initiate and do very much that in England is widely & rightly left to the Parish. In this particular matter unless the pt. take the initiative — and all I claim for it is a beginning — nothing will be done for years & years. as nothing has yet been done — and I maintain while all the Cases

for. and the suffering which
531
medical skill could prevent
always will be going on un-
checked & unchecked - I have
a perfect conviction on the same
medical skill being em-
ployed by the Parish -
valid extinction of Hosp.
Hospitals & Dispensaries - and
increasing extent of the
people & them since the Con-
last Parliamentary

can never meet the wants of
a population or do fully the
duties of private practitioners.
and I am confident that
if we only attend the means.
of Education - which is all
that I advocate - we shall
lay the foundation of a
medical profession for the
country. which hereafter will
form a blessing to the people.
but besides the beneficence

of the attempt. it is I think
a matter of fact & incontestable
instance to show that
persons & associations for
that purpose when we are now
living the advantages of a
sound & liberal education
and who from lack of
such help as State enabling
and having - as to many have

Richmond - became Richmond
Central and members hitherto
Members of the Community - the
Church - the Army - the Arts -
indeed almost every ~~opening~~ career
open to the youth of England.
save the Law & Teaching - are
closed to the youth of India -
Medicine is, I think - one
~~to~~ source of useful and honourable
employment which we may
endeavour to open to them.

57

535

I regret very much that
circumstances at which this
Lordship has arrived -
~~Lordship~~
has not in the power of this ~~Government~~
Lordship
strongly to recommend decisive
action to the policy of the past
in such matters - I forbear
to press my own views on all
their ~~Lordships~~ further.

I. D. Lee

27. 1. 75

537

No Minute by the Hon W Robinson C.S. dated 11th Feb 1875

Montreal College

I should wish to have seen the matter of Medical Education at the College put on a still more complete footing than will result I think from the deliberations for I think that we should aim at something beyond Educating just Enough young men to keep up the future Civil Medical Establishment or rather that portion of the Medical Military Establishment which has been handed over

over to Civil duty and has practically become permanently severed from the Army by the reductions ordered by the Government of India. However what is proposed will suffice for a few years.

But I share very cordially my Honorable Colleague Mr Sim's regret that the Establishment of a few Medical Schools on the Mofussil a first steps towards the diffusion of the means of Medical instruction in the Country should be further postponed. The measure was long since decided on and is urgently needed by the Country. There is of course no idea of supplying gratuitous Medical aid to the population as conjectured by His Lordship. The object is merely to put the people in the way of helping themselves by placing the means of learning within their reach and I think that it is really to be deplored that this should still be deferred, for it is simply impossible that the Medical practice of the Country should improve by a movement from within. The beneficial consequences and

and Continued Evils of Existing things are laid in the Entrance and at this time learned professions are so sorely needed that there is Every reason to anticipate Success of the measure which would provide a new means of honorable and beneficent Employment.

There can be no difficulty about the ways and means. The Establishment of such Schools was one of the objects which the legislature had in view when passing the Local Fund Act and Section 27 provides for contribution from all

And no aid from Provincial Funds is needed

all surrounding Cities and Municipalities which may be likely to benefit by such Central institution. The share of the land Revenue — one sixth — which pertains to Vancouver is between £50,000 & £60,000 and certainly a tenth or a much larger Contribution would be a moderate charge on this branch of taxation for such a boon as the gradual diffusion of sound Medical Science in a Country where its absence inflicts such terrible disasters on the people.

W. J. Robertson

Points for discussion

515

Where is the money to come from - & how much. -

In order to determine this - it will be necessary to frame some distinct proposal - a scheme which beginning moderately is capable of expansion.

This will, in so far as the Govt contributes, have to be submitted to the Govt of India

In so far as the scheme is to be supported from Local Funds it will have to be discussed & adopted by Local & Municipal Boards. -

The qualifications to be required from the new order of Medical practitioners and the time required for training.

Dr Balfour would maintain the standard fixed for the Hospital Assistant class. - This occupies four years.

The Committee advise a distinct curriculum - requiring three years.

Dr Mackenzie would The Board of Revenue, modify the curriculum and shorten the term of Education to two years.

Financial Dept
Rec'd 7 May 15

Minute by the Hon'ble
Mr Robertson C.S.I.
dated the 5th February 1915. —

No 59. —

No 59

Dr. Mackenzie - the Committee and the Board contemplate the preparation of the necessary Manuals in the Vernacular languages. and that the instruction should be in these languages.

Dr. Balfour, would continue as at present to teach Medical science in English

Dr. Balfour advises that the education should be given at the Medical College Madras on the grounds that it affords greatin facilities for instruction, for clinical study & on the grounds of Economy His calculations are believed to be wanting in accuracy as he has undervalued the proportion of professional agency required.

Dr. Mackenzie, the Com.e and

Shall the education be carried on in English or in the Vernaculars

Shall the future practitioners be trained entirely at the Medical College Madras or shall the education be given at four or more Medical colleges distributed in divisions of the Presidency

The Board of Revenue contemplate and support the plan of Medical Colleges in the provinces

Where is the additional teaching power to come from under either plan. - will it be rapidly available & will Medical Normal schools be required.

The exact status of pupils during probation and instruction - and after they have obtained their diplomas

Are they after receiving diplomas to depend entirely on native practice - or are they to receive a Salary or account of their attendance on the Native poor. -

Dr. Balfour postpones the consideration of this part of the question -

The Committee contemplate supporting the students while under instruction & giving them afterwards a salary of 15 Rs. per mensem and a yearly travelling allowance.

It is necessary that the station question should be clearly laid down. This is the first question which will be asked by the parents of pupils and by pupils themselves.

Public Department.

508

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letter from the Surgeon General India Medical Dept 8th July 1874 No 295.

Order thereon. 10 July 74. No 776.

Ordered that the following telegram be despatched:—

+ "Ten (10) pre. collegiate Hospital Apprentices and 26 pre. collegiate native medical pupils may be drafted into the Medical College on 1st October next."

501
9/7

8/7-4

Note.

It appears that

+ Tel. dispd on 10-7-74.

E.

£3600 for two sessions.
£4140 do do
£7740

required in order that there may be time for some necessary fore-liminaries. Dr Balfour wishes the temporary collegiate Hospital Appointments & 5 pre. collegiate medical pupils to be drafted into the College, but the Principal states that this can only be done by dis-placing existing arrangements and incurring additional expense for extra clinical instruction + as well as for an additional assistant.

From papers which will be sent into circulation in a day or two with a draft order it appears that the probable demand for medical ordinaries is very much exaggerated + by Dr Balfour and that there is really no necessity for making any more additions than are compatible with existing College arrangements and it seems inadvisable to take any steps in anticipation of the report of the Committee which it has been proposed should consider the general question of the existing capabilities of the College.

Should the Govt. not agree with me when the other papers referred to are considered, there can be given for a larger draft on the chance of the sanction coming in time & no harm will have been done by the despatch of the telegram as Dr Balfour seems afraid that delay may make it impossible to make any draft at all into the College.

+ It is hard on the supposition that 20 new local fund dispensaries will be opened annually. This is above any known demand yet and the inspectors given & the instructions of the Local fund act must cease as funds are not

plastic enough to permit of an indefinite extension of dispensary provision for dispensaries.

In reviewing the local fund budgets for 1874-75 the number of new dispensaries sanctioned was only nine, and two additional Hospital Assistants were sanctioned in the Municipal budget making eleven in all and it is likely that the number will be less each succeeding year.

Rec'd 6 Oct 1875.
27 May 1875

Drafting of Pupils into the Medical College —

Extract from Letter

Govt. of India, Military Department, Medical Branch, No. 1187, dated 27th May 1875.

To

Dated

Rec'd

No.

Subscribe Asst Surgeon Balfour recommends the transfer to the Medical College of a Student who has been rusticated some years ago & is wanted — at least within the moderate number now named.

It is the desire of the Medical authorities at Bombay that Dr Balfour should be appointed to the College, as he is considered a good teacher & Dr Smith has become unfit for duty & cannot be removed from Bombay. But he does not wish to join this before the end of the College year & accepts Dr Balfour's recommendation — but does not admit teaching & Dr Smith should be selected in any case.

1875 MH

Telegram to be dispatched

Reference to Dr Cornish to be delayed for a few days as papers are now in circulation which may render it unnecessary.

C/7 R/7

Public Department.

+ drawn up by Mr Hammett + my apt.

Memorandum.

Medical & Subordinates.

A letter from Surgeon General, Indian Medical Dept., Dated 23d October 1873, No 407.
" 23d " No 409.
" 2d February 1874, No 43.
" 26th " No 333.

In order, dated the 17 September 1873, No 960, to the difficulty in calculating the requirements of Provincial and Local Funds Services as regards Medical Subordinates, the Government remarked that no reliance could be reposed on the qualifications of Hospital Assistants for the independent charge of dispensaries

dis pensaries, and that, in fact the community were exposed to great risk by employing them in this capacity - adding:

"At the same time, the general Service has been greatly inconvenienced by the with-drawal of these men from their proper duties, so that at the present time there is a serious deficiency in the number of Hospital Appren- -tices required and available for general duty, while there is an excess in the superior grade of Hospital apprentice and Warrant officer, the absorption of which under the present system, must greatly hamper the ar- -rangements for supply -ing the prospective needs of the subordinate Medical Department."

"The Governor in Council consider that the first step proper and absolutely necessary to be taken is to with-draw all Hospital Apprentices from the sole or chief charge of dispensaries, and to supply their places by men of the Hospital Apprentice or Warrant grade."

2. The letters from the Surgeon General, Indian Medical Dept, above noted, all bear on the Order in question, and the future education of men to supply local wants. The letters will be noticed in the order of dates.

3. This letter, No 407, dated 23rd October 1893, the Surgeon General submits a statement showing

showing in detail, the re-
-quirements of the Provin-
-cial Services. According
to the abstract given in
para 4 of the letter, the
total strengths of the
subordinate Medical
staff on the 15th October
1873 was 644, of which
number 261 were taken
for Imperial purposes,
& 258 for Provincial
Services, leaving 125
available for employ-
-ment under Municipal-
-ities and Local Fund
Boards. The Surgeon
General thinks that
with the existing sur-
-plus of 125 Medical
Subordinates, there would
be no necessity to recruit
either for Imperial or
Provincial Services.

It
being understood that the surplus
now available for Municipalities
and Local Funds should be
gradually utilized for Imperial
and Provincial purposes, there
must be new provision made
for Municipalities & Local Funds

4. In his letter, dated
the 23d October 1873,
No 409, the Surgeon General
states that under the
Orders of Government,
dated 17th September 1873,
"there will be required for
"Civil Employment medical
"men with the distinct
"classes of qualifications,
"the one of men educated
"to an extent sufficient
"for them to be appointed
"to the Medical charge of
"the Local Civil Dispensaries,
"and another class of men
"with inferior qualifications
"to be employed in these Local Dispensaries
"as subordinates or assis-
-tants to the properly
"qualified Medical
"officers". He estimates
the number of men with the
higher qualifications
required annually to

take

take charge of Civil Dispensaries at 30, and requests permission to call for the required number of Candidates, 9 shapers but 33 men are serving in the Sub-division or Assistant class in Civil employ, who could be supplied from the surplus pupils under pre-collegiate training. He is of opinion that the more highly qualified medical men should receive a higher rate of pay, but that in para 2 of Financial Resolution of the Govt of India, dated 22d July 1873, No 1808, it has been ruled that the pay of Civil Hospital Assistants should be less than that of Military Hospital Assistants.

The

I should approve of the

most reasonable mode of remunerating the higher qualified Civil Hospital Assistants, it is suggested, "would be if it is suggested, "would be
"to grant three classes of
"Surgeon pupils two classes of
"Civil Medical officers
"on Rs 100- Rs 80- Rs 70."

5 In the letter of the 2d February 1874 No 43, the Surgeon General refers to the letter cited in the preceding paragraph, and states that since it was written, he has been in communication with the Principal of the Medical College, through the Director of Public Instruction. That the Principal is of opinion that the existing Curriculum, for the second department fulfils all the conditions prescribed for the new

new class of Civil Medical men, that there will be no difficulty in supplying annually 30 passed students from the existing Establishment, and that the Entrance test should be the Matriculation Certificate, and one year's pre-Collegiate training, but if the present standard of examination is adhered to, the pre-collegiate training should extend to two years, and the designation of those thus educated should be "Civil Sub-Assistant Surgeon," and that they should receive a Certificate of License from the Medical College. The Surgeon General is of opinion that

that for the next three years, i.e., "until the "issue of a Notification "in the year 1877 for the "Entries into College "in October of that year "Candidates for this class "should undergo the examination test which is "now applied to Candidates "for the second Department." The Candidates should not be under 18, nor above 19 years of age, and that those who are to be examined by the second department test should not be under 15 nor above 18 years of age; the Candidates in possession of Matriculation Certificates to have one years' pre-Collegiate training, but those with the

Department of

departmental library test should have, for now, two years, and the College Course extends to three winter & three Summer Sessions. In the matter of pay, the Surgeon General would recommend for—

The Collegiate	1st year	Rs 16	per month
	2nd Do.	Rs 20-	
In College —	1st Do.	Rs 20-	
	2nd Do.	Rs 25	
	3rd Do.	Do. 30-	

For those receiving Certificates of qualification, who do not undergo Medical Charge, Rs 50, while in undergoing Medical Charge, Rs 100, with two Triennial increments of Rs 50. viz-

	Subsidiary Charge.	Surgical Charge
Under 7½ years	50-	100
7½ & under 14 years	100-	150
14½ & upwards.	150-	200

The best qualified Candidates to be taken without regard to Seniority. The relative cost of educating a Military Student, & a Civil Student, under the proposed scheme would be Rs 2,667 & Rs 1,332 respectively, but if the Matriculation test be accepted & the pre collegiate Course reduced to one year, the cost for the latter class of Student will be reduced by Rs 240-

6. In his letter, dated the 26th February 1874, No 84, the Surgeon General referring to his letter of the 2nd idem, No 63, noted in the preceding paragraph of this Memo, states that as the standard of Education ordered in G. O. of 17th Sept 1873, No 960, is in his belief "beyond the present power of the Country to afford", he

tee Students, as his opinion that the studies which the Junior or Hospital Assistant Department pursue, furnish the kind of Medical Education which the people generally in the South of India, are, at the utmost, able to pay". He divides his letter under the following heads:-

1st. As to the numbers needed.
2d. As to the needed Curriculum.

7. Under the 1st head, the Surgeon General states that there are about 8000 practitioners in this Presidency, of whom only 450 are educated Servants of Government, attached to the Army or Civil Department, the remainder are the "Window Vaidyan, the "Window Ward or Barbatich" and the "Patamar and Bakini", while the Potter & the Barber are the Surgeons of the Country, & the Barber's wife & Shoe-maker's wife are the midwives, whose places should be supplied by educated persons.

8. "As to the needed Curriculum", the Surgeon General writes in great detail & gives the past history connected with the subject. His recommendations will be noted to admit of orders being passed upon them. It is stated that at present there are three classes

classes of pupils under tuition at the College designated.

1st Senior Department.
2nd Second Department
3rd Junior Department.

The students in the 1st Department receive a training of the very highest order. Those in the 2nd an education amply sufficient for the more responsible officers in the Country. & those in the Junior Department in subjects "ample for all the ordinary requirements of the people."

9. The cost of the 1st Department is very great and that of the 2nd greater than the people are able or willing to meet. The Surgeon General would recommend, for the present, the extension of the 3rd Department, for which the machinery is complete. He considers that the Candidates for this Department should have matriculated, or should have one year of pre-Collegiate training with two years of College, with a brief Course of Chemistry (so much of it as will facilitate the study of Hygiene) & the elements of jurisprudence, as is taught in Bengal and Bombay being added to the Madras Curriculum approved in G. O. No 63, of 20th February 1869.

Curriculum adopted in 1869 for the Junior (Hospital & Assistants) Department.

(1) Entrance Examination.
(2) Prov. Collegiate.
(3) 1st Examination after 6 months. of properties & uses of drugs in Common use.
(4) 2d Examination - after 12 months - Practical Pharmacy.
(5) 3d Examination - after 18 months - Pharmacopoeia and minor Surgery.
(6) 4th Examination - after 24 months - same subjects with elements of Obstetrics (see Ord. (Ordo pp. 83-86 Vol I, Section V.)

1st year.

Winter	Summer
By Professors & Assistants.	By Assistants
7th Anatomy.	(10) outlines of Physiology.
(8) Materia Medica	(11) Practical Pharmacy.
(9) General Hospital.	(12) Minor Surgery.
	(9) General Hospital

2d year.

Winter	Summer
By Professors & Assistants	(22) Hygiene - Professors & Assistants
(13) Medicine	(12) Minor Surgery - Assistants
(14) Clinical medicine	
(15) Surgery	

(16) Clinical Surgery.
(17) Midwifery
(18) Dissections
(19) General Hospital — (9) General Hospital
(19) Eye Infirmary — (19) Eye Infirmary
(20) Surgery in Hospital — (20) Surgery in Hospital
(21) Vaccination — (21) Vaccination

1869

DR 6/4

E.W.R. 24/3/74.

Subordinate Dept

Memorandum

Forwarded

Read 11th June

Sanctioned 17th May 1875

C 10–6.

573

Educational Department.

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letter from the Director of Public Instruction dated 27th November 1873, No 2375 Surgeon Genl Dr Dept Dr 1873 No 428 Order thereon,

The letters of the Principal of the Medical College, and of the Director of Public Instruction will be communicated to the Surgeon General for his information. The Governor in Council desires that the capabilities of the Medical College be fully utilized of the not

not already done. The
question of providing
additional facilities for
training medical practitioners
must be dealt with
separately.

The Government
consider that the full
measure of
training is indispensable
if the benefits derivable
from the college education
are to be realised.

J. R.

To
The Director of Public Instn.

Medical Dept

Govt. of {187 } Madras.
To
Dated
Recd. } 187 , No.
Nos.

Financial Department.

577

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letters from the

Surgeon General Indn Medl Deptt	dy	23d October 1873,	No 407.
ditto	dy	23d do	No 4089.
ditto	dy	10th November	No 428
Director of Public Instruction	dy	27th	No 2375.
Surgeon Genl Indn Medl Deptt	dy	2nd February 1874,	No 43
ditto	dy	5th do	No 51.
ditto	dy	26th do	No 84
ditto	dy	1st April	No 149.
ditto	dy	4th do do	No 150
ditto	dy	18th do	No 178
ditto	dy	29th May	No 239
ditto	dy	4 July	No 295
Mr Sandys Chief Secretary to Govt	dy	7th July 1874	No 116

Order thereon

The papers above recorded involve several distinct questions, but are so intimately connected that it will be more convenient to deal with them together.

In G O dated 3rd March 1870, No. 260, the Govt

See note

See Minute 8/9

C

Govt deferred taking action on the report of the Committee appointed in 1869 to consider the best means of utilizing the Provincial Dispensaries as popular schools of medicine, which report contemplated the establishment of several Provincial Primary Schools of Medicine in connection with existing Dispensaries for the instruction of Village Dressers, upwards of 4,000 of which would be required to meet the wants of the Presidency. In his covering letter forwarding the report the late Inspector General Indian Med. Dept. estimated that 8,500 Village practitioners might ultimately find employment in the Presidency, and recommended the establishment of

It is nonsense to call village potters & barbers "practitioners"

h 79

of five Provincial Schools at Cuddapah, Vizagapatam, Trichinopoly, Madura, and Cocanada & Calicut.

In his letter dated 25th September 1871, No 313, the present Surgeon General Dr Balfour, while applying for permission to select thirty-five additional candidates as he has selected Pupils in the Medical College, intimated to Govt his opinion that Medical Officers required for the Provincial could be supplied better, and more cheaply and in greater numbers, than in the Provincial Schools proposed by the Committee of 1869. In his letter dated 6th December 1871 No 72, the Govt agreed with the entertainment of the

the thirty five additional candidates for Native Medical pupils ~~to the ... to pay ... to the ... Assistant in the Medical College~~ and remarked, with reference to the larger question, that they would be glad to receive from Dr Balfour a further report after he had had an opportunity of ... consultation with the Director of Public Instruction and the Principal of the Medical College.

~~In October last the ... the number ... the entertainment ... Native ... pupils, bringing the ... number up to fifty ...~~

In the Military School it is probably better a Separate Institution or branch of the College. But to do carry on an acct of the Imperial Govt.

Under the Decentralization scheme we are sure must spare as much aid to Imperial services as without [illegible] of course this aid would fail

In August 1873 the Govt of India intimated to this Govt that the number of Hospital Assistants to be enlisted in the Military Department, must be regulated on Military considerations only and that separate arrangements must be made for the entertainment of any Medical subordinate who might be required for the Civil Department, such arrangements being made on the principle laid down in the Memorandum of the Military Department, No 922 dated 27th June 1873, this principle being briefly, that the practice of enlisting Native Medical pupils specially for the Civil

the thirty five additional candidates for Native Medical pupils, ~~to, a~~ ~~on pay consequent~~ ~~to employment of an addi~~ ~~tional Assistant in the~~ ~~Medical College~~ and remarked, with reference to the larger question, that they would be glad to receive from Dr Balfour a further report after he had had an opportunity of further consultation with the Director of Public Instruction and the Principal of the Medical College.

~~In reply to this~~ ~~Sanction was accorded to the employment of an additional Assistant, on the Native Medical Pupils, bringing the total number up to fifty.~~

In

In the Military School of Instruction at Poonah, because a Separate Institution or branch of the College should be kept up to carry on an acct of the Imperial Govt.

Under the Decentralization scheme we are paid for as much and for such services as hitherto. Of course this aid would fall

In August 1873 the Govt of India intimated to the Govt that the number of Hospital Assistants to be enlisted in the Military Department, must be regulated on military considerations only and that separate arrangements must be made for the entertainment of any Medical students who might be required for the first Establishment, such arrangements being made on the principle laid down in the Memorandum of the Military Department, No 922 dated 27th June 1873 this principle being briefly, that the practice prevailing in Native Medical Schools specially for the Civil

directed that all Hospital Apprentices in independent charge of Civil Dispensaries should be relieved by men of the Hospital Apprentice or Warrant grades, and as that step would materially affect the calculations as to the future needs of the Subordinate Med! Department, the general question was referred back for re-consideration. It may also be remarked here that D! Rankings proposals appear to have been based upon Orders issued prior to the receipt of the instructions of the Govt of India above quoted.

In his letter dated 23rd October 1873, Surgeon General replies to

to G.O. dated 5th September 873, No 930, calling for a report to be made as to the medical requirements of the Civil Department in excess of the supply obtainable from the Military Department, and reports that no steps need be taken to recruit for either Imperial or Provincial Services until after the absorption of the existing Military surplus of 383 Medical Subordinates which suffices for the present want of the Provincial Services and leaves a further balance of 125 now available for loan to Municipalities and Local Boards.

In another letter of the

the same date, Dr. Balfour reports on the future wants of Local Fund Boards and Municipalities in the matter of Medical Subordinates, and assuming, in accordance with G.O. dated 27th Septr: 1873, No 960, that only men with an education equal to that receiving by men of the Warrant grade would be allowed to be put in sole charge of a Dispensary, he estimated that the annual requirements would be thirty medical Officers of that class, and that their entertainment must be immediate. As regards men of lower qualifications to be employed as Assistants, he considers that the surplus pupils under pre-collegiate training and at College would suffice to meet all requirements. He also submits suggestions regarding the designation and pay of the new class of Civil Medical Officers.

In his letter dated 27th November 1873, No 2,375, the Director of Instruction submits his observations, & with his letter from the Surgeon Genl remarking on the small number of pupils admitted into the Medical College, together with a letter on the subject from the Principal of the Medical College. ~~It is not necessary to do more than remark that the widest difference of opinion appears to exist regarding~~

2nd
In a letter bearing date ~~six~~ seven months later he recommends the immediate entertainment of 56.

regarding the educating capabilities of the Medical College as at present constituted.

In his letter dated 2nd February 1874, Dr Balfour submits detailed recommendations regarding the nature of the education to be given to the new class of medical subordinates, and the stipends to be allowed them while under instruction, and suggests that a portion of the existing excess of Military Medical servants should be allowed to volunteer into Civil employ.

In his letter dated 26th February 1874, No 86, Dr Balfour enters into the question of procuring 8,000 or 10,000 educated medical men to take the place of the 8,000 Vaidyas and Hakims whom the country is now supporting. He also states that he considers that in G.O. dated 17th September 1873, No 960, Govt have insisted on a higher standard of qualification for Medical Officers in charge of Dispensaries than Local and Municipal Funds are able to afford, and submits in detail his views and recommendations on the subject.

In his letter dated 1st April 1874, No 149, Dr Balfour submits information regarding the cost involved in the arrangements considered necessary

necessary by the Princi-
pal of the Medical College,
in order that the number
of students may be increased
from 116 to 160, and in
another letter of the same
date he repeats his views
regarding the educating
capabilities of the Me-
dical College, and submits,
in their support, certain
information regarding the
working of the Calcutta
Medical College.

In his letter dated
10th April 1874, he submits
similar information re-
garding the Bombay Me-
dical College.

In G.O. dated 8th
May 1874. No. 803, the
Govt. considered the recent
resolution of the Govt. of
India that no Military
Medical

Why not shown?
will be printed in
full

Dr.

Do

the Govt. of India
have since announced the
Govt. take the Resolution in
question as final & Com-
missioned Officers and

Medical Officer should be
employed substantively
in other than Govt employ,
without the sanction of
the Govt. of India in the
Military Department, and
resolved to obtain sanction
to continue the present
practice of posting surplus
Medical subordinates to Mu-
nicipal and Local Fund
Dispensaries until arrange-
ments had been completed
by which the Medical
College could turn out
a sufficient supply of
Civil Medical practitioners.
Dr Balfour being asked
at the same time to ex-
pedite the submission of
the necessary information
his letter of 24th Aug
reply

1874 No 295 Dr. Balfour re-
capitulates the recommenda-
tions contained in his letters
of

of the 23rd October 1873, No 407, and 2nd Febry. 1874, No 43, and enters into further details necessary to admit of the disposal of the question of the entertainment of the lower of the two grades of Civil Medical Officers recommended by them.

The difference of opinion disclosed in these papers as to the educating capabilities of the Medical College, and the manner in which existing agencies may be utilized for supplying the medical wants of the country, is so great, that the Govt. resolve to appoint a Committee composed of the gentlemen named in the margin to consider and report on the subject generally, and on the several points noted below, regarding which the information now before Govt. is not sufficient to enable them to come to an immediate decision.

The funds now available for sanitary and medical purposes from local sources are so limited as to preclude the introduction of any [illegible] measures unless in connection with a reasonable attempt to recommend to the people a degree of efficiency [illegible]

And as the views expressed by Dr Hallowes as to the advisability of looking to the Medical College at once for the supply of Medical Officers for

Dr Rowell
Dr Cornish
Dr Bellingham
Dr Sanders
Dr Webb
Dr Hallowes

for the Presidency —

seem to derive a certain amount of support from the fact that the out turn of the Colleges at Calcutta and Bombay is very ~~appreciably~~ much greater than at the Madras Medical College the Govt resolve to defer in the ~~taking any action~~ directing recommended by the Committee ~~the matter~~ until the report of the Committee now appointed is before them.

The first question calling for the provision of Medical officers for the existing Provincial Services for the Provincial Dispensaries lately transferred to Municipalities and Local Fund Boards,

and

this Letter of 7th July 1874 to the Sanitary Commissioner for Madras Relative to Medical Education and the Registration of the Medical Profession in Southern India, and also offers some observations on the practical working of the order of Govt above cited that the offices of the Provincial Service or vacancies therein should always be considered available for the Subordinate Staff of Hospitals and Dispensaries

Prior to this — We must want to know Madras miscellaneous races & castes would suit the Country best & afford opportunities & the population of the various parts of the Country & grounds for their own needs.

I beg to make the following observations for the consideration of Govt

The Govt Work persons & supply the Native wants — especially the lower grades of Hospital assistants & vaccinators &c — from Local Sources thro Local Schools & so enable the College & Training of the higher grades —

Govt omit: the Importance of the College at Madras continues as to the present — & this must take (generally a long part — this it be) but there is no reason why effective country Schools should not be established under Govt Medical men of the Hospitals &c as Native Medical Schools under

and for the Dispensaries of the same kind recently established by these bodies, is however a distinct question and calls for immediate decision, there being no doubt that institutions of the kind must always be supplied with men trained at the Medical College at Madras whatever plan may eventually be decided on for the provision of Village Medical Officers or Dispensers.

It must also consider that for the present at any rate no distinction need be made between those entertained for Provincial and for Local Service, all being entertained on one establishment for general service. The provision

provision of pay and pension from the various sources presents no difficulty under existing rules, ~~will be separately considered~~ whether the Local bodies shall be called on to pay any portion of the cost of training.

As regards the nature of the education required for the new class of medical subordinates, there seems to be no reason why the qualifications proposed by the present incumbents of the posts which they will be required to fill should not ~~be adopted provisionally so as to admit of a certain number of candidates being at once entertained~~ by the ~~Examiners above appointed~~ first ~~Boards proposed~~ on receipt of the ~~reports~~. That at least ~~two classes~~ of officers will be required seems unquestionable, and the question of the class which shall be entrusted with the charge of Dispensaries can be more conveniently considered when deciding on the number of each class to be employed. Both classes must be

though a few matters of detail will probably present themselves for decision from time to time and may also eventually be necessary to

Provision must be made for the admission of free Students (whether paying for them or obtaining a gratuitous election) so as to ensure their entering into indentures with the whole body whom it is necessary to instruct. PK

It was proposed that the Committee should decide this question - at present private students can be admitted - and in some cases Local funds are applied in paying for them PK

For this & some of the following questions - of considerable importance - we have referred to G.6.906, & only shows that - advances required on such points

At this point Drs Balfour and Cornish are absent and it is submitted that though there may be a difference of opinion as to how many of each grade are required - there can be no question that at least two grades will be necessary for

Note

One of his letters Dr Balfour recommends that some ~~of the~~ eligible additions should be made to the present ~~students~~ of the Junior Dept, and when the present senior has been turned out that the Dept. should be extended to three years and men of the lower grade thus fitted for the charge of a dispensary. - These recommendations may it is submitted be left for the opinion of the Committee. PK

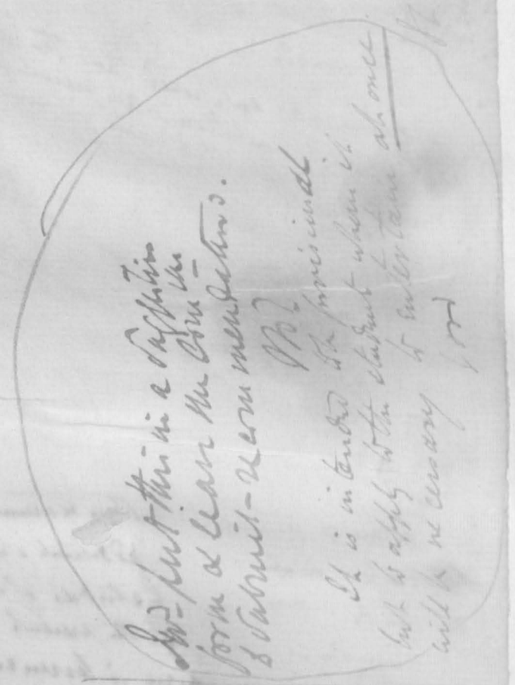
Note

The Matriculation entrance is observed by the Principal of the College as well as by Dr Balfour, and so is the curriculum for the higher grade with reference to which alone Dr Smith offers an opinion. PK

be entertained for service either under the Govt directly or under Municipal or Local Fund Boards, the higher class being styled "Civil ~~Medical~~ Assistants" & the lower "Civil Hospital Assistants". ~~Those who are to be~~ ~~must undergo~~ trained for through education in accordance with the curricula at present prescribed for the Second and Junior Departments in the Medical Colleges respectively. The entrance test for the higher grade shall be as a rule the Matriculation certificate ~~of the Calcutta~~ with Physics & Chemistry ~~University~~ or a pre-collegiate training for one year at the

but in the event of a sufficiency of Matriculated Candidates not being forthcoming during the ~~next three~~ years the Govt will not object to Dr Balfour's recommendation that the present Departmental Examination test should be accepted, it being however understood that in the latter case, the Candidates shall be required to undergo a second year of pre-collegiate training.

For the lower grade, the departmental test of two years pre-collegiate training will be retained as it is hardly likely that Matriculated Candidates will be



The present rules as regards age, antecedents of moral character, and physical fitness to should be enforced in case candidates for the [illegible] should be accepted under the age of 18. ~~if not recommended~~ [illegible] not less than 15 nor more than 19 years

to restrict the choice so much and as under the existing departmental test. Candidates taken between the ages [illegible] and 18 there does not seem any objection to fixing the age of matriculated candidates (who will only have one year pre-collegiate training) at from 16 to 19

rate will suffice for [illegible] the promotion from pair to grade by [illegible] determined periods of service [illegible] until the establishment becomes sufficiently reduced to [illegible] after which [illegible] number for each grade and [illegible] vacancies [illegible] by competitive examination on [illegible] departmental examination.

	Pay	Charge allowance
First two years	50	25
2 & 3	50	50
7 & 14	75	50
14 & 21	100	50
21 & 28	125	50
28 & 35	150	

The Civil Hospital Assistants will be similarly graded with salaries of Rs 20, Rs 30 and Rs 40 respectively [illegible] for the present determined by [illegible] periods of service subject to [illegible] examination of pictures.

I

In regard the rival merits of the different class of practitioners Dr Balfour has suggested two methods: one based on a classification of charges and the other (to which he gives the preference) on the principle of a graduated salary according to service with an additional allowance for independent charges. Under the first arrangement Dr Balfour divided the charges into three classes with Rs 70, Rs 80 and Rs 100 and he thinks it probable that applicants of average ability &c could be had for these rates". Under the second system Dr Balfour proposes salaries of Rs 50, Rs 100 and Rs 150 after such a period of service with an allowance of Rs 50 for independent charges and he has "no doubt whatever that ~~that~~ ~~~~ 800 ability &c can be had for these terms", and he strongly recommends the adoption of this principle. This latter has many eventually involves when adopted without some protection as to the numbers receiving each rate is a very serious objection - a very large proportion of the men will hold independent charges and thus the rate of salary will practically range from 100 to 200 Rupees rate which are considerably in excess of the emoluments of other branches of the public service - In each branch of the Civil administration does an officer on entry receive such high allowances and never is he assured such certain promotion to higher rates. It must be remembered also that for the present at any rate these men are not only receiving a costly education gratuitously but are also paid during the first years they are receiving instruction, and are sure of [illegible] employment with pensions and other incidental advantages. The Govt are therefore of opinion that the following

be available.

The stipends to be paid to the students are recommended by Dr Balfour and the allowances to students to be fixed within the limits of Rs 50 to 150 as recommended by Dr Balfour are considered fair and will be sanctioned for the present.

Civil Medical Officer Grades.

Pre Collegiate { 1st Year — Rs 10 (per mensem)
2nd Year — Rs 15 "

Collegiate { 1st Year — Rs 20 (per mensem)
2nd Year — [illegible]
3rd Year — [illegible]

Civil Hospital Assistants.

Pre Collegiate — Rs 7 (per mensem)

Collegiate { 1st Year — Rs 9 "
2nd Year

I think that Mr Com[illegible] should adhere on this point. Yes. If there is to be a committee - but very seriously must be decided - see note below.

Note

It seems necessary to decide previously about salaries before a notification calling for candidates is issued - but the opinion of the Committee might also be asked and a revision made if necessary to affect future candidates of the Govt of India have also intimated that the scale of pay submitted by them for sanction and that an early

Then are Dr Balfour's recommendations in para 6 of his last letter. In para 3 he recommends Rs 7, Rs 9, Rs [illegible] Does not explain to what class of Hospital Assistants recommended salary [illegible]

The Govt are pressed to state the practice of providing for the passing of Civil Hospital Assistants to the Medical Service. Dr Balfour's recommendations will also be adopted in the matter of the salaries to be allowed viz:- those already passed I Civil

(Copy of minute here after copy of penal draft no 2)

restricted to the officers of the higher grades as decided in G.O. of 17th Sept. 1833 No. 960, or whether such charges may not in some cases be safely entrusted to those of the lower grade. The principal objections to the recent decision of Govt appear to be, ~~the first two~~

1st that the higher grades as at present constituted consists almost entirely of Europeans & Eurasians enlisted for service with European troops & who are not well qualified for the charge of Dispensaries attended almost entirely by Natives & secondly that the Pay & Allowances of Officers of the higher grades, is more than can be afforded by the Local Bodies on whom the extension of the dispensary system depends. As the best qualified Candidates are now to be selected, irrespective of race or creed, the first objection need not be considered in calculating future requirements but the second is a practical difficulty ~~& even~~ ~~the Govt will be very glad indeed if~~ the Committee can suggest any arrangement by which men competent to hold independent charge of Dispensaries can be obtained on the Salaries. ~~As it is hoped~~ Dr Balfour has pointed out in his letter of 26th Febru-

February 1874 No 84, that under G.O. of 20th Feby 1869, a considerable improvement was made in the course of instruction given to Hospital Assistants while in ~~Calcutta~~ his letter of 7th July 1874 No 118, ~~which will be separately considered~~, Dr Cornish draws attention to the fact that a practical experienced officer of the Hospital Assistant grade may be unsuited to the charge of a Dispensary than a Youth of the higher grade fresh from Col. ~~Noor of whom work over~~ -lege - the reception of somewhat similar representations in in- -dividual cases ha re

Sir

Dr Cornish's letter is very short. Should it be printed as one as he wishes to correct the proofs himself.

It is now in circul. and it will be premature to pass orders on this Correspondence without bringing it on record & considering the views & recommendations it has placed on record.

WC.

See Friend on Surgeons ~~made~~ report ~~on~~ ~~for~~ ~~Native~~ ~~Surgeons~~ ~~Assistants~~

11 607

As regards the number of [illegible] admitted annually to the Colleges [illegible] most expedient course will be to leave [illegible] for decision from time to time on the [illegible] of the Surgeon General who will be [illegible] varying circumstances of the case and the requirement of the service as developed [illegible] figures. In G.O. of 16th Sept 1874 the [illegible] examination papers on [illegible] returned the entertainment of [illegible] student [illegible] and [illegible] This number 7[illegible] is for Bengal and [illegible] recommended by Dr Balfour in para 16 of his letter of 29th May 1874 he [illegible] was arrived at after careful [illegible] considerations of his [illegible] which appear [illegible]

+ High Grade	40
Low Grade	56

are estimated for ~~the following reasons in~~ ~~viz. if the former are~~ ~~different reasons in~~ different way particularly if in the [illegible] local funds were [illegible] entertainment of [illegible] annually for the [illegible] and if in addition [illegible]

609

III

641

The second question involved in these papers
namely that of providing by means of Medical
Schools throughout the country a sufficient number
Medical practitioners who are competent
to meet the wants in the respective
populations of large districts of Retired and
Invalid Pensioners and after
full investigation of the matter I feel
convinced that the
considerations from
have already been stated in this
Report of (illegible)
and Pensioners - has the power of
providing for the Education of Private Medical
Students at the Medical Colleges and
authorizing the Entertainment of Attendants
at District Hospitals and Dispensaries. The
Medical Boards will then
Attendance and
At the City
intermediate
In recent

[illegible] under Comm
[illegible] the Medical Staff of the
Army will be available for Civil Stud
the Govt do not consider. and that co
regard is to be where if any considerable
there are in the number of private Student
no immediate steps in measures are take
for in the Estimates if in event the Medical
Staff or altering present arrangements
to meet requirements of Depts
for the fuller utilization of Expensive
teaching power. There is the question no
however to be impressed upon
[illegible]

Ind.

It is very doubtful whether the
recent decision of Govt would have
been financially practicable
but for the accidental saving
& mismanagement there was
available for Civil employ a large
number of "passed hospital
apprentices" or men of the warrant
grade who have gone through their
Medical training and are waiting for
vacancies & permits of their being
employed on the Apothecary establishment.
JL

restriction laid down
in G.O.S. 17th Sept. 1873
No 960 has already
been waived & as the
funds available for
the establishment of
new Dispensaries are
yearly becoming less
the Govt consider that
under all the circum-
stances of the case re
entertainment of Pupils
of the higher grades may
be restricted, pending
receipt of the Committees
report, to the number
required to make
good the annual
decrement, & the ab-
sorption for military
purposes.

Dr Balfour in
his letter 27th Nov. 1873
No 409 intimates the
number of pupils

Fair Copy pencil Draft No 3

of the higher grade which will be annually required for Dispensaries at 30, the estimate being based on the calculation that there will be about twenty new dispensaries every year, 3 casualties annually amongst the officers in charge of civil Dispensaries & a final net. turn of only 70 per Cent of the number of Students entertained. In his letter of 29th May 1874 No 239 he states that another session of the College has come to a close & the Examinations

Subt

The estimate of 20 new Dispensaries annually is deemed too high. A great impetus to the establishment of these institutions was given by the introduction of the Local Funds Act in 1871-72 but according to D. Hankins letter of 16th S.D. of 15th Sept 1873 only 15 new medical officers were required in 1872 and fifteen in 1873 up to the date of his letter and the applications sanctioned at the beginning of the year there could not have been more than a few applications or two after September.

I have looked through the Local Fund and Municipal Budgets of 1874-75 and find that for the current year only nine new Local Fund Dispensaries were sanctioned and two additional hospital assistants sanctioned for Municipalities. Each year the numbers will diminish

One or two Honorary practitioners were proposed but not sanctioned pending further report and it is presumed that as a rule Local bodies will be loth to find practitioners of that class from the "Village Dressers" whose Education the Committee are to discuss.

Local bodies may (and appear to be willing to) assist in the spread of medical education by providing scholarships tenable at the Medical College or elsewhere.

615

Subt

Dr Balfour fixes the annual requirements at 30 and on the ground that the requirements of another year have to be provided for namely 40 as the number he recommends for entertainment again in the Calcutta letter he takes the full number of the new institutions to be opened into account in estimating the requirements of each grade though only one officer will be required for 19 out of 20 of the new institutions.

[illegible]

Ft

Requirements of another year have to be provided for namely 40 as the number required to be entertained so as to commence their Pre. collegiate studies on the 1st October of the current year.

Under the decision of Govt given above the new dispensaries to be opened need not be taken into account in calculating the requirements of the higher grade as the alternative for Military purposes has to be considered it seems to Govt that the number of students for the higher grade to be entertained so as to have College in 1878 can be best ascertained

M

in the manner which Dr Balfour appears to have adopted in calculating the requirements for the Lower Grade. From the figures before Govt in the papers above recorded in Dr Balfour's letter of 4th July 1874. the estimate will be as follows:-

Note
This letter is in circulation as it called for immediate orders. JL

Annual decrement for 4 per cent as stated by Dr Rawlinson's letter of 15th April 1873 (No 337 para 8) per 31 years at 4 p.

Deduct.

Existing surplus	=	7
In College.	=	27
Pre. Collegiate students.	=	10
		44.
Allow for failures to complete pre-liminary College course?		5
		39

Required to leave College in 1878 — 1

Note
The failures to complete a course (pre-collegiate included) are estimated at 10 p.c. - as the majority of those who are in College are more than half the triennium this amount seems an ample allowance JL

As however the above estimate is framed on the existing surplus the figures submitted in October 1873 it may be assumed that the surplus has already been absorbed and the Govt consider that twelve matriculated Students for the higher grade may be entertained at once so as to be ready for failures in the pre-liminary College course in 1878. [illegible] available for service in October 1875. To turn now to the Lower grade, Dr Balfour in his letter of 29th May 1874 No 239 estimates the number required for immediate entertainment at 56. This number is far more than double the number that can be received into College under present arrangements & appears from the table to have been arrived at somewhat as follows:-

Present

Note. Dr Bard & Dr Smith as at variance on the point & I think that Dr Smith is wrong. JL

Present deficiency in all departments	24.
Annual decrement - do - do -	48
New requirements for four years -	80
	152
Deduct now under training -	111
	41
Add for failure to pass through College	15
Number to be obtained so as to leave College in 1870	56.

Dr Balfour has not explained how the deficiency of twenty four is reconcileable with the table given in para 4 of his letter of 23d Oct. 1873 No 407 in which the deficiency in this class is given at 2 but the Govt accept the latter figures ~~as stating~~ as the number of new entrants ~~required~~ it appears that twenty is a greater number than has yet been required in any single year since the introduction of the Local Funds Act, and as the funds are not elastic enough to permit of ~~the~~ ~~confirmation~~ for any length of time of even the present demand for additional medical officers the Govt consider that provision for an average of ten new institutions opening the next four years will be more than equal to the number required for immediate entertainments may therefore be estimated ~~to be obtained~~ as follows:-

Present deficiency in all Depts		24.
Annual decrement do - do - for 4 yrs.		48
New institutions opened in four years -		40
		112.
Deduct now in College under pre-collegiate training	111	
Allowing for failures at 3/20	16	95
		17
Add for failure at 3/10 - - - -		6
Number to be entertained so that 17 may leave College in 1870		23

It however the annual decrement in Dr Balfour is only 3 percent on the existing strength while Dr Rawlings estimated it at 5 per cent as the requirements of the Provincial Services in the way of Hospital Assistants attached to Regtl Officers do not appear to be fully met arrangements may be made for the entertainment of the full number which can be received into the College with its present staff

Note
To take one instance a Hospital Assistant was sanctioned for the Grand Canaria when Superintendent in 1868 or 1869 none has yet been appointed.

The immediate entertainment of the number required for immediate entertainments may therefore be estimated as follows:-

thirty.

A notification may therefore be at once issued for the entertainment of twelve Students for the grade of Civil Medical & thirty for the grade of Civil Hospital Assistant. The question of the transfer now in abeyance or on the Military establishment being left open for the present

Detailed instructions as to the points on which the Committee are desired to report will be issued in a separate order.

H
10/7.

4/

The Civil establishment of men must be considered in the first instance as the men are now temporarily employed in civil work the above calculations will not be affected by the decision whatever it may be.

Dr

If it is proposed to post for issue of final instructions letters have still to be issued to

Dr Balfour 5 16th April 1872
"Recommending a scheme to train women as female medical practitioners &c"
Dr Balfour 7/12 April 1873
"On the question of educating native doctors and female doctors"
with 7 Dec.r 1873
"Further correspondence on medical education of women"
with 7/21 Jan.y 1874
"on the instructions now proposed to govern the Registration of the Committee"
& Council 7/7 Jan.y 1874
"present condition of medical education in the country"

It may be advisable in referring the above to the Committee to make a few remarks. They will also be sent to the press as headings and extracted after being printed as most of them are rather long.

Financial Department.

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letters from

No.	Surgeon General, Indian Med. Dept.	43	dated 28th Oct. 1873.	No.	407
"	do	do	43	23rd — do —	No. 409
"	do	do	44	10th Nov. —	No. 428
"	Director of Public Instruction		45	27th — —	No. 2375
"	Surgeon Gen. Ind. Med. Dept.		46	2nd Feby. 1874	No. 43.
"	do	do	47	5th — do —	No. 57.
"	do	do	48	26th — do —	No. 86.
"	do	do	49	1st April —	No. 149
"	do	do	50	1st — do —	No. 150
"	do	do	51	18th — do —	No. 178.
"	do	do	52	29th May —	No. 239
"	do	do	53	4th July —	No. 295
"	do	do	54	7th July —	No. 318.
"	Sanitary Commissioner, Madras		54	7th July	
	Minute by the Hon. J. D'Sim. C.S.I.			dated 12th Dec. 1874.	56
	Do — Hon. L. Robinson C.S.I.			dated 21st Dec. 1874.	57
	Do — Rt. Hon. the President				
	Do by the Hon. J. D'Sim. C.S.I. dated 27th Jan. 1875.				58
	Do by the Hon. L. Robinson C.S.I. dated 9th Feby. 1875.				59.

thereon — having been submitted

The papers above recorded involve several distinct questions, but all so intimately connected ~~by local~~ Surgeon General that ~~it will be more con~~ appears to have found it convenient to deal with them together.

In G.O. dated 3rd March 1870 No. 260, the Govt. deferred taking action on the report

Copy of 1873 Enclosures

Dated
Recd. } May 1875. No.

To

Nos.

Medical
Statistics
Emigrant

Copy from Hon. Sec. Govt.
Receipt as directed
Receipt

Rec. 6/9.
Pass'd 9/9 Aug.

report of the Committee appointed in 1869 to consider the best means of utilizing the Provincial Dispensaries as popular Schools of Medicine, which report contemplated the establishment of several Provincial Primary Schools of Medicine in connection with existing Dispensaries for the instruction of village dressers, upwards of £1,000 of which, would be required to meet the wants of the Presidency. In his covering letter forwarding the report, the late Inspector General, Indian Med. Dept. estimated that 8,500 village practitioners might ultimately find employment in the Presidency, and recommended the establishment of five Provincial Schools

1714

Schools at Cuddapah, Vizagapatam, Trichinopoly, Madura and Cochin or Calicut.

5. In his letter dated 25th September 1871 No. 313, the present Surgeon General, Dr. Balfour, while applying for permission to select thirty-five additional candidates as Native Medical pupils in the Medical College, intimated Govt. that in his opinion, the Medical officers required for the Provinces could be educated better, and more cheaply and in greater numbers, than in the Provincial Schools proposed by the Committee of 1869. In G.O. dated 6th December 1871 No. 372, the Govt. sanctioned the Entertainment of the thirty-five additional candidates for Native Medical pupils,

and remarked, with reference to the larger question, that they would be glad to receive from Dr. Balfour a further report after he had had an opportunity of further consultation with the Director of Public Instruction and the Principal of the Medical College.

4. In August 1873, the Govt of India intimated to this Govt, that the number of Hospital Assistants to be enlisted in the Military Department, must be regulated on Military Considerations only, and that separate arrangements must be made for the entertainment of any Medical subordinates who might be required for the Civil department, such arrangements being made

Note

It is to be noted that the orders of the Govt of India refered to "Hospital Apts" and that the whole of the Surgeon Generals proposals deal with both grades of the Medical subordinate. - It is in fact hardly possible to introduce the new system with reference to Hospital Assistants and stick to the old and condemned system with regard to Assistants of the warrant grade - especially since the issue of the order of this Govt restricting the independent charge of Civil Dispensaries to Officers of the higher grade.

made on the principle laid down in the Memorandum of the Military Department, No. 922, dated 27th June 1873, this principle being briefly that the practice of enlisting any native Medical pupils specially for the Civil Dept would be discontinued, but that any Hospital Assistants available from the Military Reserve would be allotted to the local Govts and Civil Departments, who must make their own arrangements for any further requirements.

5. ~~It~~ Thus it appeared that the Govt were called upon to ~~entertain~~ provide a Civil Subordinate Medical Establishment ~~on a native~~ inspectors at the Station ~~quite~~ independent of the scheme for the provision of "Village Dressers" dealt with

with the Committee of 1869, and the necessary information was called for in G.O. dated 5th September 1873 No. 2930.

6. In his letters dated 5th September 1873 Nos. 332 & 337, the Ag. Surgeon General (Dr. Rankin) reported on the subject of providing immediately for the prospective wants of the Civil (Imperial) branch of the Service as regards Medical Subordinates, and on the formation of a distinct establishment for Civil duties other than Imperial. From this letter, and other papers before them, the Govt. gathered that Medical officers of the Grade of Hospital Assistant were not qualified for the independent charge of Dispensaries,

G.O.d/17th Sept 1873 No 960

dispensaries, and that, at the same time, the general Service had been greatly inconvenienced by their withdrawal from their proper duties. It was therefore directed that all Hospital Apprentices in independent charge of Civil Dispensaries should be relieved by men of the Hospital Apprentice or Warrant Grade, and as that step would materially affect the calculations as to the future needs of the Subordinate Medl. Department, the general question was referred back for reconsideration. It may also be remarked here, that Dr. Rankin's proposals appear to have been based upon orders issued prior to the receipt of the instructions of the Govt. of India above quoted.

7. In his letter dated 23rd

officers.

9. In his letter dated 27th November 1873 No. 2375, the Director of Public Instruction submits, with his observations, a letter from the Surgeon General, remarking on the small number of pupils admitted into the Medical College, together with a letter on the subject from the Principal of the Medical College.

10. In his letter dated 2nd February 1874, Dr. Balfour submits detailed recommendations regarding the nature of the education to be given to the new class of Medical Subordinates, and the stipends to be allowed them while under instruction, and suggests that a portion of the existing excess of Military Medical Servants should be allowed to volunteer into Civil Employ.

In

11. In his letter dated 26th February 1874 No. 84, Dr. Balfour enters into the question of providing 8,000 or 10,000 Educated Medical men to take the place of the 8000 Vaidyans and Hakims whom the Country is now supporting. He also states that he considers that in G.O. dated 17th September 1873 No. 960, the Govt have insisted on a higher standard of qualification for Medl. officers in charge of Dispensaries, than Local and Municipal Funds are able to afford, and submits in detail his views and recommendations on the subject.

12. In his letter dated 1st April 1874 No. 149, Dr. Balfour submits information regarding the cost involved

in

in the arrangements con-
=sidered necessary by the
Principal of the Medical
College, in order that the
number of students may
be increased from 115 to 160,
and in another letter of
the same date, he repeats
his views regarding the edu-
=cating capabilities of the
Medical College, and
submits in their support
certain information regard-
=ing the working of the
Calcutta Medical College.

13. In his letter dated
18th April 1874, he submits
similar information re-
=garding the Bombay
Medical College

In

14. In his letter dated 4th
July 1874 No 295 Dr Balfour
recapitulates the recommenda-
=tions contained in his letters
of the 23d October 1873, No 407,
2d February 1874 No 43, and enters
into further details necessary
to admit of the disposal of the
question of the Entertainment
of the lower of the two grades
of Civil Medical Officers re-
=commended by him.

15. In his letter dated 1st
July 1874 No 48 the Sanitary Com-
=missioner for Madras submits
proposals with regard to Medical
Education and the regulation of
the Medical Profession in South-
=ern India and also offers some
observations on the practical
Effects of the Order of Govt above
quoted that Officers of the Hos-
=pital Apprentice or Warrant
Grades

grades should alone be consider-
-ed qualified for independent
charge of Hospitals and dispensa-
-ries.

16. The first question calling
for decision is the provision of
Medical Officers for the existing
Provincial Services, for the old
Provincial dispensaries lately
transferred to Municipalities and
Local Fund Boards, and for
the dispensaries of the same kind
recently established by these bodies.
The Govt. also consider that for
the present, at any rate, no dis-
-tinction need be made between
those entertained for Provincial
and for Local Service, all being
entertained on one Establishment
for General service. The provi-
-sion of pay and pension from the
various sources presents no diff-
-iculty under existing rules,
though a few matters of detail
will probably present themselves
for

for decision from time to time,
and it may also eventually be
necessary to consider whether
the Local bodies shall be called
on to pay any portion of the cost
of training.

17. As regards the nature of
the Education required for the
new Class of Medical Subordi-
-nates, there seems to be no reason
why the qualifications proposed by
the present incumbents of the posts
which they will be required to fill
should not be adopted. That at
least two classes of Officers are req-
-uired seems unquestionable, and
the question of the Class which shall
be entrusted with the charge of dis-
-pensaries can be more conveniently
considered when deciding on the
number of each class to be employed.
Both Classes must be entertained
for service either under the Govt.
directly or under Municipal or
Local Fund Boards, the higher
class being styled "Civil Apothecaries"
and

and the lower "Civil Hospital Assistants," their Education being in accordance with the ~~Curriculum~~ Courses at present prescribed for the Second and Junior Departments in the Medical College respectively. The Entrance test for the Higher grade shall be as a rule the Matriculation Certificate with a pre-Collegiate training for one year, but in the Event of a sufficiency of Matriculated Candidates not being forthcoming, the Govt. will not object to Dr. Balfour's recommendation that the present Departmental Examination test should be accepted, it being however understood that in the latter case, the Candidates shall be required to undergo a second year of pre-Collegiate training. The present rules as regards age, certificates of Moral Character and physical fitness etc. should be followed generally, but no Candidates for the higher grade should be accepted under the age of 16.

For

For the lower grade, the departmental test and two years pre-Collegiate training will be retained as it is hardly likely that Matriculated Candidates will be available.

18. The Stipends to be allowed to Students need not, in the opinion of Govt. be as high as recommended by Dr. Balfour, and the following rates only will be sanctioned for the present

Civil Medical Officers Grade.

Pre-Collegiate - Rs. 15 (per mensem).

Collegiate — Rs. 20 (per mensem).

Civil Hospital Assistants.

Pre-Collegiate — Rs 7- (per mensem).

Collegiate — Rs 9 (per mensem).

19. ~~The Govt. are~~ that the experience of a few years will show that the practice of granting Stipends to Civil students may safely be dispensed with altogether.

As.

20. As regards the Emolu=
=ments of the Higher Class of
practitioners, Dr Balfour has
suggested two methods, one based on
a Classification of Charges and the
other (to which he gives the preference)
on the principle of a graduated
salary according to service with an
additional allowance for inde=
=pendent charge. Under the first
arrangement Dr Balfour divided
the charges into three classes on
Rs 70, Rs80 and Rs100 and he
thinks it "probable that applicants
of average ability &c could be had
for these rates" - Under the second
system Dr Balfour proposes salaries
of Rs 50 Rs 100 and Rs 150 after each
septennial period of service with
an allowance of Rs 50 for indepen=
=dent charge, and he has "no
doubt whatever x x x that good a=
=bility &c can be had for these terms"
and he strongly recommends the
adoption of this principle. This
latter

latter system has many undoubted
advantages but the great expence
it eventually involves when adopted
without some restriction as to the
numbers receiving each rate is
a very serious objection. A very
large proportion of the men will
hold independent charges and thus
the rates of salary would practically
range from 100 to 200 Rupees, rates
which are considerably in excess
of the Emoluments corresponding of other branches
of the public Service. In no other
branch of the Civil administration
does an Officer on entry receive
such high allowances and in
none is he assured such certain
promotion to higher rates. It
must be remembered also that
for the present at any rate these
men are not only to receive a
costly education gratuitously,
but are to be paid during the
five years they are receiving
instruction, and are sure
of

of fairly lucrative employment with pension and other incidental advantages. The Govt are therefore of opinion that the following rates will suffice for Civil Apothecaries, the promotion from grade to grade being determined by periods of service until the establishment becomes more fully developed, after which restrictions will be made regarding the number of each grade & promotion given only on the occurrence of vacancies. In any case promotion must be made dependent on periodical examinations.

	Pay	Charge allowance
First two years.	50	"
3d to 7th "	50	25
8th to 14th "	75	50
15th to 21st "	100	50.
22nd to 28th "	125	50.
29th to 35th "	150	50.

21. The Civil Hospital Assistants will be similarly graded

Note
The Govt has also in view the rate for Hospital Assistants Rs 50 up to Rs 60 but that is the highest Subsidiary pay, and this Govt of India have ruled that to the pay of Civil Hospital Assistants should be less.
H
Peile

Note
The rates in the draft are based on the Govt for Kohima remarks in favour of a charge allowance.
JL

663 11

graded with salaries of Rs 20, Rs 30, and Rs 40, Rs 50 and a charge allowance of Rs 10 promotion respectively being for the present determined by septennial periods of service subject to periodical examinations of fitness.

22. It will be understood that the above scale of salaries is subject to the sanction of the Govt of India who have already decided that the salaries of Civil Medical Officers should be somewhat lower than those drawn by Military Medical Subordinates

Subordinates.

23. Dr Balfour's recommendation that successful Candidates should be apprenticed during till they pass through College and bound over to serve Government for ~~Ceylon~~ 4 years after receiving their Certificate of qualification is approved, and the S. in C. would fix the period of such service at various years

The suggestion that the best qualified Candidates shall be selected without reference to descent is also approved.

Ks

Orders are requested as to the period. The Govt. has also suggested six or seven years with a power of purchasing release.

JL

Not say 7 years

JL

Note
This was decided in Council vide minute of
A. G. The Governor.

JL

24. As regards the number of pupils to be admitted in future annually to the College, the most expedient course will be to leave the question for decision from time to time on the recommendation of the Surgeon General, who will be guided by the varying circumstances of the case, and the probable requirements of the Service as developed in the process. In G.O of 14 Sept 1874, No 609, the Govt ~~on that~~ pending further consideration of the papers now recorded, sanctioned the entertainment of twelve students for the higher and thirty students for the lower grade of Civil Medical Subordinates. This number is far below what is recommended by Dr Balfour in para 16 of his letter dated 29 May 1874 No 239, but it was arrived at after careful consideration of his proposals

Higher Grade — 40
Lower do — 56.

Note
If Dr B's over-estimate is not pointed out now it will be repeated next year

JL

which appeared to Govt
to be ~~over estimated~~ in ~~as~~
~~to the extent of what is necessary~~
~~if Government may [illegible]~~
1st in assuming that
Local funds were elastic
enough to permit of the continued
establishment of twenty new
Dispensaries per annum - a number
which the Govt of Bengal has never yet been reached
any one year and 2d in ~~taking~~
into consideration
~~as the necessity of providing~~
for the full number of new
Dispensaries ~~contemplated~~
in estimating the number
of students required for each
grade, while the vast ma-
-jority of newly established
Dispensaries will not give
employment for more than
one Medical Subordinate.

25. To enable the Surgeon
General to estimate satis-
-factorily the number of
students to be entertained
in the ensuing year, it seems
necessary

† altered d/23d Oct. 1873 No 409 paras
2d/29th May 1874 No 239 para 16

necessary to come to a de-
-cision on the question
again raised as to whether
the charge of Dispensaries
must be restricted to the
Officers of the Higher grade
as decided in G.O 17 Sept.r
1873, No 960, or whether such
Charges may not in some
Cases be safely entrusted
to those of the lower grade.
The principal objections to
the recent decision of Govern-
-ment appear to be
1st that the higher grade,
as at present Constituted,
consists almost entirely of
Europeans and Eurasians
entitled for service with
European troops and who
are not well qualified for
the charge of Dispensaries,
attended almost entirely
by natives and
2nd that the pay drawn
by Officers of the higher grade
is more than can be afforded
by the Local bodies on whom
the

the extension of the Dispen-
=sary system depends- Is
the best qualified Candidates
are now to be selected, irres-
=pective of race or creed, the
first-mentioned objection
need not be considered in
Calculating future require-
=ments, but the second is
a practical difficulty- Dr
Balfour has pointed out in
his letter dated 26th Feby 1874,
No 84, that under G.O dated
20 Feby 1869, a considerable
improvement was made
in the course of instruction
given to Hospital Assistants
while in his letter of 7 July
1874 No 118, Dr Carnich
draws attention to the fact
that a practical & experienced
Officer of the Hospital Assist-
=ant grade may be more
suited to the charge of a
Dispensary than a youth
of the highest grade fresh from
College

College- On receipt of some
=what similar representations
in individual Cases, the
restriction laid down in G.O
of 17 Sept 1873 No 960, has
already been waived and
as the funds available for
the establishment of new
Dispensaries are yearly
becoming less, the Govt
considers that under all
the circumstances of the
Case, the entertainment of
Pupils of the higher grade
may be restricted for the
present to the number, requi
=red to make good the an=
=nual decrement, and the
absorption for Military
purposes.

26. The second question
involved in these papers,
namely that of providing
by means of Medical Schools
throughout the Country, a

Staff

staff of trained Medical practitioners, to meet the wants in this respect of the population at large is a distinct and very serious question ~~and after full con~~ involving grave financial considerations which for the present at any rate preclude the Govt from inaugurating any scheme which may seem to pledge them to an indefinitely increasing annual expenditure. A small step towards the attainment of the object

~~sideration of the matter, the Govt have arrived at the conclusion that they are precluded by financial and other considerations from doing more than has already been sanctioned in the Resolution of the Govt of India in the Home Dept No 7 dated 18th January 1875 and No 6 dated 12th February 1874, No 301, and 23d February 1875 No. 418. the former of which provides for the Education of female Medical students at the Medical College, while the latter authorizes the Entertainment of apprentices at District Hospitals and Dispensaries~~

27. As the existing surplus of Military Medical subordinates

I agree with Mr. Robinson and feel very unwilling to insert in this order so positive and adverse a decision on the question of providing more extended means of medical education in this Presidency. I should be glad if HE the Governor would consent to the subject being re-opened. It may be financially possible to make a beginning on a smaller scale than that originally proposed. RSE

15

is so great that it will not be necessary to admit new students for several years to come, it appears that for the present, almost the whole teaching staff of the College will be available for Civil students, and that consequently in the absence of any considerable increase in the number of private students, no immediate measures are called for in the direction of increasing the College staff or altering present arrangements as recommended by Dr Balfour, for the fuller utilization of the existing teaching power, but the question may be brought forward again on occasion requiring.

H.
15/3

Surg Genl Med 6
Dir of Pub Instr 6
Surg Gen 11
Genl Dept 6
Home Dept 14
Resident 7 all Municipal Hospitals

Disp 5
14
12 6
12 6

No. of 187 }

Dated
Read.

To

187 , No.