

MADRAS RECORD OFFICE.

Government of Madras.

Judicial DEPARTMENT.

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Not to be folded or roughly handled

Proceedings of the Madras Government, Judicial Department,

11th December 1867.

No. 149. Read the following letter from the Inspector General, Indian Medical Department, to the Chief Secretary to Government, Fort Saint George; dated Fort Saint George, 11th November 1867, No. 415.

In obedience to the Order of Government noted in the margin, I have the honor to submit a set of rules for the management of Lunatic Asylums, drawn up in communication with the Inspector General of Jails and the Superintendent of the Lunatic Asylum at Madras.

No. 893, of 3rd June 1867.

2. I would respectfully recommend that these rules be made applicable to the Presidency Asylum, as well as to the provincial institutions.

**RULES FOR THE SUPERINTENDENCE AND MANAGEMENT OF LUNATIC ASYLUMS
IN THE PRESIDENCY OF MADRAS.**

SECTION I.

Rules regarding Official Visitors, &c.

1. Asylums have been established at the following stations for the reception and treatment of lunatics.

Central—Madras.

District—Trichinopoly.

„ Vizagapatam.

2. There shall be for every Asylum three official visitors, one of whom at least shall be a Medical Officer. The Inspector General of Jails shall also be an ex-officio visitor of Asylums.

3. The official visitors for the Presidency Asylum shall be the Inspector General, Indian Medical Department, the Deputy Inspector General, Presidency Division, and

The official visitors for a Provincial Asylum shall be the Deputy Inspector General of the Division in which it is situated, a Magistrate, and

4. The Inspector General, British Medical Department shall, also, at all times, have access to patients of Her Majesty's British Service who may be under treatment in an Asylum, and may communicate his wishes regarding such, through

5. Two or more of the official visitors shall once at least in every month, together, inspect every part of the Asylum of which they are visitors; make such inquiries as they may deem necessary, regarding the comfort and welfare of the patients; see the order and certificate for each admission since the date of last inspection; and make and enter remarks which they may think necessary, regarding the condition and management of the Institution, in a book to be kept for that purpose.

6. The ordinary control and superintendence of each Lunatic Asylum, as in the case of other Hospitals, are vested in the Deputy Inspector General of the Division, who shall, at least once every month, inspect the Asylum.

SECTION II.

Admission and discharge of patients, Military and Civil.

7. Officers (Commissioned and Non-Commissioned), Soldiers, or Sepoys, shall, on becoming manifestly insane, if stationed in Madras, or any station communicating with it by rail, be at once transferred to the Presidency Lunatic Asylum for treatment.

Officers, Soldiers, or Sepoys, on becoming insane at a station, or within a moderate distance of a station, in which there is a District Lunatic Asylum with suitable accommodation, shall, in the same manner, be removed to it as early as possible for treatment.

8. Officers, Soldiers, or Sepoys becoming insane in other stations than those specified in paragraph 7 shall remain under the immediate charge of the Medical Officer whose duty it is to attend on them, for a period of three months, unless some pressing circumstances connected with the patient's general health, or the movements of corps, should demand their immediate removal.

9. If, at the expiry of the three months, an Officer suffering from insanity shall show no signs of recovery, the Medical Officer in attendance shall then, through the Deputy Inspector General of the Division, adopt measures for his removal to the Presidency for disposal. In all

such instances a minute medical history, in duplicate, of the case, according to Form C, and certificate according to Form A, must accompany the patient.

10. If, after the expiry of the three months, an insane Non-Commissioned Officer, Soldier, or Sepoy should show no signs of recovery, he shall then be sent to the Lunatic Asylum at the Presidency. In the case of those belonging to Her Majesty's British Army, the order of the Commander-in-Chief and sanction of the Inspector General, British Medical Department, are required for the transfer, and a full medical history of the case in the regulated form, and certificate in Form A, must be sent with the patient.

In the case of persons belonging to Her Majesty's Indian Army, the order of the Commanding Officer of the corps or station to which the party belongs, and the sanction of the Deputy Inspector General of the Division are required, and a full medical history of the case according to Form C, and certificate in Form A, must accompany the patient.

11. With regard to insane Sepoys belonging to Regiments serving in Sagar Division, Burmah, and other distant stations, they shall be detained, if necessary, under treatment in the Regimental Hospital for a period of eight months; and should no sign of recovery be then apparent, they are to be brought before an Invaliding Medical Committee for final disposal.

12. The authorities in whom is vested the power of granting an order for the admission of military patients into a Lunatic Asylum are:—

The Governor in Council.

The Commander-in-Chief.

Officers, Commanding Divisions or Brigades.

Inspector General, Indian Medical Department.

Inspector General British Medical Service.

Officers Commanding Stations or Corps.

} Subject to
confirmation
of Command-
er-in-Chief.

13. Every admission of a military patient into a Lunatic Asylum, except when effected by the direct order of the Inspector General, Indian Medical Department, must be immediately reported to the Deputy Inspector General of the Division, and the order of admission, medical history, and certificate be at the same time forwarded for the information and sanction of the Inspector General, Indian Medical Department. On the Deputy Inspector General receiving these documents, he shall at once carefully examine the patient to whom they refer, satisfy himself as to whether or not he is insane, and endorse the letter reporting the admission accordingly.

14. Clothing, money, or other property sent along with a Non-Commissioned Officer or Soldier of Her Majesty's British Army to a Lunatic Asylum, shall be returned immediately to the Adjutant of the Corps to which he belongs, and his receipt obtained for the same. In the case of Native Soldiers, some of money should be sent to the Brigade Major; but clothing, cooking utensils, &c., may be kept in the Asylum, while the patients remain there.

15. As removal from a tropical climate generally proves beneficial to Europeans afflicted with insanity, all such persons shall, if they show no signs of improvement at the expiration of six months from date of admission be sent to England at the public expense. If, however, the Medical Officer in charge of an Asylum should deem it necessary that any such should be sent there at an earlier period, he shall forward a recommendation to that effect, supported by the approval of the Deputy Inspector General of Hospitals of the Division.

16. Whenever it is thought necessary to send a patient to England, the Superintendent of the Asylum shall forward, through the usual channel, for transmission to the Inspector General, Indian Medical Department, a letter on the subject, enclosing a statement, in quadruplicate, of the medical history of the case, together with all available information concerning the name, address, and occupation of the next of kin of the patient.

17. On the receipt of the order for the dispatch of the patient to Europe, the Superintendent shall forward an indent for such outfit and necessaries as may be required for the use of the patient during the voyage.

18. On the receipt of an intimation from the Quarter Master General of the Army of the time fixed for embarkation, the Superintendent of the Asylum shall apply to the Brigade Major

26. On the admission of a lunatic into any Asylum, the Superintendent shall immediately forward a report of the occurrence to the Deputy Inspector General, Indian Medical Department, of the Division, for the information of the Inspector General, Indian Medical Department.

27. When any relative or friend of a lunatic is desirous to remove such from an Asylum, he must make an application to the Magistrate, or Commissioner of Police, under whose order the lunatic was sent there; and the Magistrate, or Commissioner of Police, if he think fit, after communicating with one of the official visitors, being a Medical Officer, and upon receiving from the relative or friend a satisfactory bond in writing, that the lunatic will be properly cared for and prevented from doing injury to himself or others, shall grant an order for the discharge of such lunatic. On the receipt of this order, the Superintendent shall thereupon discharge the patient.

28. When a patient is considered fit to be discharged, the Superintendent shall send a discharge certificate, through the Deputy Inspector General, Indian Medical Department, for the sanction of three of the official visitors, and, on receiving this, will release the patient; the sanctioned certificate being kept as a record in the Asylum, and an intimation of the patient's discharge sent to the Public Officer under whose order he was received. Before discharging a patient, it will generally be advisable to request his friends to come and take charge of him.

When a patient about to be discharged has a long distance to proceed to his place of residence, and no money or friends to assist him, a small sum, sufficient to cover travelling expenses, will be given to him when he leaves the Asylum.

29. Clothing and other property, brought with patients to the Asylum, will be deposited in the store-rooms, to be restored on discharge. Accounts of property received in this way must be carefully kept.

30. In case of death, the funeral expenses of poor patients will be met by Government; but those of paying patients must be defrayed by the party responsible for the payment of bills of maintenance.

SECTION III.

Criminal Lunatics.

31. A criminal lunatic can only be received into an Asylum under a special order of Government, which should be accompanied with a copy of the Order of the Court before which he stood his trial, a medical history of his case, and a medical certificate of insanity.

32. Criminal lunatics will be kept distinct from all others in a special yard of sufficient dimensions, and are under no circumstances to be permitted to go beyond the bounds of this enclosure. They will be required to perform, within their own yard, such menial duties as can be delegated to them, and each fit for work must have a specific daily task of intramural labor assigned to him.

33. When the sentence of a criminal lunatic expires during his detention in an Asylum, the orders of Government regarding the disposal of him must be obtained through the usual channel.

34. When a criminal lunatic recovers before the expiry of his sentence, the Superintendent shall report the circumstance to the Inspector General, Indian Medical Department, who will direct two or more of the official visitors to examine the patient, and, on their being satisfied as to his perfect recovery, the orders of Government will be solicited regarding the disposal of his person.

SECTION IV.

Clothing, Bedding, and Furniture.

35. Clothing and bedding will be supplied on indent by the Commissariat for military, and by contract for civil, patients. Furniture will be furnished on indent by the Commissariat.

36. Officers and others who may have occupied a superior position in society will be furnished with appropriate clothing and bedding, and the value of such extra articles will be included in the charges recovered for the cost of their maintenance.

37. The Superintendent may supply aged or weakly patients with extra articles of clothing, when such are considered necessary.

of Fort Saint George for an European doctor to attend at the embarkation of the patient; an European Keeper of the Asylum shall be in attendance, and he shall procure the signature of the Officer Commanding Troops and one of the Commandants of the ship for the receipt of the person of the patient and his baggage.

19. When a patient is considered sufficiently recovered to be restored to liberty, the Superintendent shall forward, through the medical officer, a discharge certificate to the Inspector General, Indian Medical Department, and on the certificate being returned confirmed by him, the patient is to be sent to the Brigade Major's Office for orders. All such discharge certificates are to be kept as records in the office of the Superintendent of the Asylum, and a notice of the discharge is to be immediately communicated to the Officer under whose order the patient was sent to the Asylum.

20. In case of the escape of a patient, notices of the same are to be instantly forwarded to the Deputy Inspector General, Indian Medical Department, and to the Officer in charge of Police, in order that measures may be taken for his recapture. Rewards are to be reported to the Deputy Inspector General, Indian Medical Department, and Brigade Major.

21. A Government Civil Officer who may become insane shall be forwarded to the Presidency to be disposed of by Government, and the Medical Officer who has been in charge of the case shall send along with the patient a complete medical history, according to Form C, in duplicate, and certificate according to Form A.

22. An Unconvenanted Civil Servant when insane may be sent to a Lunatic Asylum under the order of a Magistrate, or the Commissioner of Police, in Form A from a Medical Officer. A complete medical history, according to Form C, must also be furnished, if the patient has been under regular treatment. Such a patient may be handed over to the care and custody of a relative or friend by order of the Magistrate, or Commissioner of Police, who sent him to the Asylum, (see paragraph 26, Section II of these Rules). When he is considered fit to be discharged, the Superintendent shall forward a discharge certificate, and, on obtaining the sanction of three of the official visitors, shall discharge him, and send a notice of the order of discharge to the Public Officer under whose order the patient was detained (see paragraph 28, Section II of these Rules).

Persons not belonging to the Public Service.

23. A lunatic not belonging to the Public Service may be received into a Lunatic Asylum under an order from a Civil Court, Magistrate, or the Commissioner of Police, as specified in the Lunacy Act, No. XXXVI of 1858; and every such order must be accompanied with the certificate of a Medical Officer in the Form A. In the case of patients so admitted, the Superintendent of the Asylum is to request the Court, or authority furnishing the order of admission, to report in writing whether there is property belonging to the lunatic available for the expenses of his maintenance, &c., or any relatives able and legally bound to support him; and should such property or persons exist, then measures are to be taken to relieve the Government of all expenses connected with the treatment and maintenance of the patient.

24. It is competent also for the relative or friend of a person who is a lunatic to require his admission into a Lunatic Asylum, provided he gives an order and statement of particulars according to Form B, and furnishes the medical certificate, in Form A, of two persons, each of whom must be a Physician or Surgeon, and one a Surgeon in the employment of Government. When, however, such an order is presented to the Superintendent of the Asylum, he may, before admitting the patient, require the person who has made the order to engage to pay all expenses connected with the maintenance, &c., of the lunatic.

25. A Medical Officer granting a certificate of lunacy shall, in all cases when the patient has been under his treatment, furnish a complete medical history of the case in Form C, and a notice of this important duty will be immediately brought to the notice of the Inspector General, Indian Medical Department. If the lunatic has not been under the care of the certifying Medical Officer, he shall then collect from the lunatic's friends all information likely to throw any light on the nature and cause of the disease, and forward this along with the medical certificate.

38. European and East Indian male patients manifesting a persistent tendency to tear clothing will be provided with smocks and trousers made of strong canvas. Female patients of these classes having destructive habits will be furnished with canvas gowns. Native patients of destructive habits should, during the night, be deprived of all clothing, except the cloth round the loins. In many cases, however, close attention on the part of the keepers during the day, so that the patient can have no opportunity for tearing clothes, and the withdrawal of some luxury, such as tobacco or snuff, by way of punishment, will cure the bad habit.

39. As a rule, European and East Indian patients are to have clean clothing every second day, and Natives twice weekly. Bedding must be changed at least once a week. When patients manifest a propensity to dirty bedding, clothing, or rooms with their excreta, the keepers should be instructed to take them to a latrine at regular intervals, as in this way the acquisition of a troublesome and offensive habit may be prevented.

40. Clothing for European and East Indian patients:—

Males.

- | | |
|--|--|
| 1 White shirt. | 1 Pair socks, worsted or cotton according to season. |
| 1 Pair gingham trousers. | 1 Cap (gingham). |
| 1 Pair flannel drawers (if necessary). | 1 Towel (dimity). |
| 1 Gingham bed gown. | 1 Pair slippers. |
| 1 Flannel shirt. | 1 Pair shoes for out-door exercise. |

Females.

- | | |
|---------------------|--|
| 1 White shift. | 1 Pair stockings, worsted or cotton according to season. |
| 1 „ gown. | 1 Towel (dimity). |
| 1 Chintz petticoat. | 1 Pair slippers. |
| 1 Flannel shirt. | 1 Pair shoes for out-door exercise. |
| 1 White jacket. | |

41. Clothing for Native patients:—

Males.

- | | |
|----------------------------------|------------------------------|
| 1 Flannel jacket (if necessary). | 1 Pair short white trousers. |
| 1 White jacket. | |

Females.

- | | |
|----------------------------------|---|
| 1 Flannel jacket (if necessary). | 1 White cloth, 12 cubits long, 2½ cubits broad. |
|----------------------------------|---|

42. Bedding, furniture, &c., for European and East Indian patients:—

Males and Females.

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|--------------------------------|--|
| 1 Straw bed. | 1 Table for each cottage. |
| 1 Gingham quilt. | 1 Chair. |
| 1 Red blanket. | 1 Brass Basin (if there be no lavatory). |
| 2 Pillows stuffed with cotton. | 2 Plates. |
| 1 White sheet. | 1 Bowl. |
| 1 Iron cot. | 1 Spoon. |

43. Bedding, Furniture, &c., for Native patients:—

Males and Females.

- | | |
|--|---------------------------------|
| 1 Mat (coir, if not furnished with cot). | 1 Straw pillow. |
| 1 Cumdy. | 1 Gingham quilt (if necessary). |
| 1 Straw bed (if necessary). | 1 Iron cot (if necessary). |
| | 1 Tin bowl. |

44. The Superintendent shall make a yearly inspection of clothing, bedding, and furniture, noting such articles as may be repairable, and such as are unserviceable. Such of the unserviceable articles as may have been supplied by the Commissariat must then be submitted to a Committee of Survey, and such as were got by contract to the Deputy Inspector General, Indian Medical Department, and, if condemned by these authorities, they will be sold on the public account.

For repairs necessary on articles of furniture, a special indent must be submitted to the Inspector General, Indian Medical Department, and the repairs will be effected by the Commissariat Department.

SECTION V.

Diet.

45. All articles of diet for the patients will be furnished by the Commissariat, and the daily supplies must be submitted every morning to the Superintendent, who will satisfy himself that the bread, meat, &c., are invariably of the very best quality.

46. No article should be received from the Contractor until it has been carefully measured or weighed, and care should then be exercised that the food is properly cooked, and that each patient gets his due allowance.

47. Meals must be supplied punctually at the specified hours, and in case of any patient not eating a due quantity, or refusing food, the circumstance must be brought to the notice of the Superintendent.

48. The following are the hours at which the meals are to be served :—

Europeans and East Indians.

Breakfast.....	8 A. M.
Dinner.....	1 P. M.
Supper.....	6 P. M.

Natives.

Morning meal.....	10 A. M.
Evening meal.....	4 P. M.

49. The diet of Europeans and East Indians shall be regulated by the Diet Table published in G. O., No. 194 of 1857, dated 26 June 1857; and that of Natives by the Diet Table at page 137, Section 16, Medical Code of Regulations.

50. As insanes are frequently capricious as regards their food, and often anæmic, the Superintendent may, in particular cases, vary the diet to meet the wishes of the patient, or order such extras as he may consider necessary. When, however, the diet is changed to suit the caprice of a patient, the articles substituted for the ordinary rations must not in value exceed the cost of the latter.

51. Wine, beer, or other liquors may be ordered when considered requisite, and monthly Nominal Returns of the expenditure of these articles must be sent through the usual channel for sanction.

52. Tobacco, snuff, or betel and nut, may be given to patients who have been accustomed to the use of them, but the giving of these articles is to be held out as a reward for correct conduct and industry; and, in the case of idleness or misbehaviour, they should be withheld as a punishment.

53. European, East Indian, and Native patients, whose means will allow of their paying for their diet, or who may have friends capable of supporting them, will be charged according to the scale authorized in the Proceedings of the Madras Government, Public Department, dated 21st March 1862, No. 363. Native Non-Commissioned Officers and Sepoys, whether borne on the strength of the Army, or pensioned, will be charged at the uniform rate of 2 Annas each per diem for rations. A pensioner, however, whose pension does not amount to Rupees 5 per mensem, will be received as a pauper.

SECTION VI.

Medicines, &c.

54. Medicines and surgical instruments will be furnished from the Presidency or Divisional Medical Stores, on annual indent.

55. Patients are to be strictly prohibited from entering the Dispensary, and the doors kept constantly locked when a Medical Subordinate may not be present in it.

Abstract Annual Return of sick and concise Medical Report.

Statement of the Establishment to Civil Paymaster.

Statement and Return of Uncovenanted Europeans attached.

Budget Estimate, Civil.

Do. Military.

Do. for Stationary.

Annual Indent for stationery.

Miscellaneous.

Report of admission of any patient to the Deputy Inspector General of Hospitals, Indian Medical Department.

Report of discharge or transfer of a patient to the authority by whom his admission was ordered.

Report of death to Deputy Inspector General of Hospitals of military patients, and casualties from violence.

Report of death of military patients to Brigade Major, and to the Officer or Magistrate who sent the patients to the Asylum.

Mortuary Report to the Mortuary Department, Sanitary Commission.

Insanes to England.

Return recommending patient to England.

Nominal Roll for separate berth, and letter forwarding the above.

Indent for equipment for the voyage, and letter forwarding the above for sanction to Inspector General, Indian Medical Department.

Report to Brigade Major on intimation being received of passage engaged.

Stoppage Roll and Abstract up to date of embarkation to Brigade Major.

Letter to Brigade Major for an escort.

Receipt for clothing and list of clothing, and embarkation certificate and letter to Officer Commanding Troops on Board. Medical history of each patient and letter to the Medical Officer on Board.

Detailed medical history, in triplicate, with letter to Inspector General, Indian Medical Department, on the embarkation of patients to England.

The signed embarkation certificate, receipt of clothing and Stoppage Roll and Abstract, with a letter to Deputy Inspector General, Indian Medical Department.

Stoppage Rolls and Abstracts of patients in Her Majesty's Service to the Paymaster Poonamallee.

Return of Native Military patients considered unfit for further service, and letter forwarding the above to Deputy Inspector General of Hospitals.

Report discharge of pensioned Native Soldier to Brigade Major.

Report discharge of Native pensioned Soldier to Superintendent of Pensions.

Letter applying for pay of military patients, and certificate to Brigade Major.

Medical history sheets of European military patients to be returned to the Medical Officers of their Regiments.

SECTION VIII.

Means of moral treatment &c.

58. As occupation and recreation are most useful means in the treatment of insanity, the Superintendent will spare no pains to provide the patients with suitable work and amusement.

59. For Native patients in general, gardening, stone breaking, rope making, mat making, carpentering, basket making, road repairing, water drawing, and sweeping of leaves, &c., will be found appropriate kinds of labor. In giving a patient a particular kind of work, his mental and physical capabilities, and its probable therapeutical influence must receive due consideration; and in all cases the remedial effects of labor are to be more regarded than the pecuniary gain. For carrying out the varieties of industry specified above, the necessary tools, and a sum of money for the purchase of materials, will be sanctioned on the first introduction of the labor system into an Asylum, but thereafter it will be expected that the proceeds of work will more than cover all

56. External applications containing dangerous substances must either be applied by, or under the immediate superintendence of, a Medical Subordinate; and never more than one dose of a medicine for internal use should be entrusted to a patient. For blistering purposes a fluid preparation should be preferred to a plaster, as there is some risk attending the use of the latter.

SECTION VII.

Records and Returns.

57. The Superintendent will keep the following Records, and furnish the following Returns:—

Records.

Letter Book.

Circular Book.

Return Book.

Miscellaneous Return Book.

Journal for European and East Indian patients.

Journal for Native patients.

Prescription Book.

Historical Register.

File Book.

Contingent Bill Book.

Pay Abstract Book.

Nominal Register and Index of the sick.

Steward's Book.

Diet Roll Book.

Book for Official Visitors' remarks, &c.

Printed Cholera Reports in Cheque Book.

Returns.

Monthly Return of European and Native sick.

Nominal Return of expenditure of wines and spirits.

Diet Rolls for European and Native sick.

Monthly Perishable Indent.

Salary Bill of Establishment.

Retrospective Indent.

Return of Medical Officers and Subordinates.

Receipt for Materials for Diets for European patients.

Receipt for Materials for Diets for Native patients.

General Contingent Bill for Diet, &c., &c.

Stoppage Rolls and Abstracts.

Statement of expenses incurred for dieting Native Military insane patients.

Register of petty offences when necessary.

Receipt for wines and spirits.

Half-yearly Return for perishable articles.

Half-yearly Return of Surgical Instruments.

Annual Return of European sick.

Do. of Native sick.

Do. of state of mind of Europeans, &c.

Do. of state of mind of Native sick.

Annual Medical Report.

Return of patients received, discharged, died.

Annual Financial statement.

Do. Indent for Medicines.

Do. Indent for Hospital furniture.

Do. Indent for Hospital clothing.

68. The dry earth conservancy system is to be carried out in all Asylums, one or more latrines being provided for Europeans and East Indians, and a sufficient number for Native patients.

69. For use during the night, every room inhabited by European or East Indian patients shall be provided with self-acting earth closets. Rooms occupied by Natives shall be provided with an urinal, earth closet (of simple construction), earth reservoir, and woollen scoop, and the patients are to be instructed in the use of them. The part of the floor on which these vessels are placed must be protected by a coating of asphaltum or coal tar, and over this a thick layer of dry earth should be put down, and removed daily.

70. The night vessels must be put in their proper places at 4 p. m. daily, and removed as soon as the doors are opened in the morning to some suitable place, where their contents will be disposed of in the prescribed manner. The vessels are then to be thoroughly cleaned and scrubbed with dry earth, and exposed to the sun during the day.

71. When the patients go out in the morning, the rooms are to be swept and cleaned, and the bedding spread out for airing. In case of any patient having soiled the walls, floor, or bedding with excreta, proper means must be taken for the thorough cleansing of these, and the circumstance be brought to the notice of the Superintendent.

72. Great attention should be paid to secure pure water for drinking and cooking purposes. A due proportion of *country filters* will be allowed for every Asylum, and care must be taken to keep these in a clean and efficient condition.

73. An ample supply of water for bathing purposes must also be secured, as there are few secondary remedial means more useful in the treatment of insanity than bathing. Douche and shower-baths, and bath-tubs, will be provided for all Asylums. All patients should be required to take a bath daily; and Native patients who may have been engaged in work should be washed before being shut up in their rooms for the night.

74. The conservancy of wells, by the removal of mud and other filth, and preventing the entrance of leaves, storm water, and sewage, is to be carefully attended to.

SECTION XI.

General Rules.

75. On the arrival of a new patient, he is to be washed, have his hair cut or shaved, and receive Asylum dress. He will then be left for a short time under observation, until his habits, disposition, &c., have been ascertained, so as to admit of his being placed in the appropriate class.

76. The doors are to be opened under the immediate inspection of a Medical Warrant Officer at 5 a. m., or day-light; and every room and its furniture, as well as the person of every patient, must be carefully examined. If any patient show signs of excitement or sickness, he is to be brought to the notice of the Superintendent at the morning visit.

77. The patients will then be taken out for exercise or labor, working patients being formed into small gangs. Each gang will be put in charge of two or more Keepers, who will direct the men in their work, and be responsible for them, until they return to their rooms.

78. Every Keeper accompanying a gang will be furnished with a whistle, which he will sound in case of any serious difficulty or danger arising; and on hearing the whistle all other Keepers in the neighbourhood must hasten to render assistance.

79. Any unusual accident, such as an attempt to escape or commit suicide or homicide, must be immediately reported to the Superintendent.

80. In case of a patient receiving an injury, self-inflicted or otherwise, the Keeper in charge must at once report the circumstance to the Apothecary. Should the injury be of a serious nature, it must be brought to the notice of the Superintendent immediately.

81. The food for the patients will be served out to them, under the immediate inspection of the European Keepers, who will see that it has been properly cooked, and that each gets his due allowance. Meat and vegetables for European and East Indian patients must be cut into small pieces, so that they can be easily eaten with a spoon.

attendant expenses. To give encouragement to industry, a reasonable proportion of the profits may be devoted to the purchase of extra articles of diets, &c., for patients who have been diligent.

The hours for labor and all minor details will be left to the discretion of the Superintendent.

For the recreation of Native patients, Native musical instruments and games could be purchased; but mere amusement must never be permitted to trespass on the hours for labor. For educated Natives, books in the vernaculars and writing materials will be supplied.

60. For the mental occupation and recreation of Europeans and East Indians, periodicals, books, musical instruments, games, and writing and drawing materials will be provided. Every effort should also be made to induce patients of these classes to take regular exercise, and engage in some appropriate out-door occupation, such as tending a garden plot and range of flowerpots, or superintending a gang of Native patients at work.

61. Tractable and well behaved patients may, at the discretion of the Superintendent, be allowed to go out for a few hours of the day on parole, accompanied by a Keeper. Native patients who are quiet may, in charge of Keepers, be employed in carrying things to or from the Bazaar.

62. The relatives or friends of patients will be allowed to see them at stated intervals when the visit is not likely to prove prejudicial; but some official of the Asylum Staff present during the interview.

63. No one unconnected with the establishment, except the official and ex-officio, shall be permitted to enter an Asylum without an express order from the Superintendent.

Letters for, or from, patients must always be submitted to the Superintendent, delivery or despatch. In case of a letter for a patient, containing anything likely to aggravate excitement, it should be returned to the writer with an explanatory note; and from patients may be forwarded or not, as the Superintendent thinks proper.

SECTION IX.

Classification of Patients.

64. Patients are to be classified as follows, and arranged accordingly:—

I. Military and Lunatics.	1. Females.....	1. Europeans... { 1. Tranquil and convalescent. 2. East Indians.. { 2. Troublesome, violent, and noisy.
	2. Males.....	3. Natives..... { 1. Convalescent, and tranquil and industrious. 2. Impetuous, irritable and not regularly industrious, and those under observation. 3. Violent, noisy, and idle. 4. Of dirty habits.
Criminal Lunatics.	1. Females.....	1. Europeans.....
	2. Males.....	2. East Indians... { 1. Tranquil and industrious. 3. Natives..... { 2. Violent and idle.

SECTION X.

Sanitary arrangements.

65. The cubic capacity and superfluity of all the rooms are to be accurately ascertained and entered in a Register, which shall also specify the number of patients that each is capable of containing, and under no circumstances is the regulated number of inmates to be exceeded.

66. The space and area allowed for each patient shall not be less than as follows:—

European and East Indian Patients.

Superfluity area... 100 feet.

Cubic space... 1500 feet.

Native Patients.

Superfluity area... 50 feet.

Cubic space... 500 feet.

67. Care must be taken that there is ample provision for ventilation. During the day, doors and windows should be kept constantly open, and the bedding freely exposed to light and air.

* Must be kept in a distant enclosure, and all intercourse with outside strictly prohibited.

82. The first and second class Native Keepers will attend on European and East Indian patients when eating their meals, and must help such of them as may be unable to feed themselves.

83. In case of a patient refusing all sustenance, the circumstance must be reported to the Superintendent, and no attempt should be made to force such to swallow food except in his presence.

84. Native patients during meals will be arranged in gangs, so that those who refuse food or are unable to feed themselves can be observed, any attempt on the part of one to take the rations of another prevented, general order maintained, and assistance rendered when necessary. While the patients are eating, the waterwoman must be in attendance with drinking water, and a pot of water should also be carried out with every gang proceeding to work.

85. In the evening, the patients must be collected, mustered, and shut up in their cells at 6 p.m. under the inspection of one of the Apothecaries. The persons of the patients, the rooms, and the furniture, are then again to be strictly examined, and any dangerous instrument or thing found is to be removed. At this time the Apothecary will see that the earth closets and urinals are in their proper places, and that there is a due supply of drinking water in each room.

86. When patients are noisy or violent during the night, the European and Native Keepers must speak to and endeavor to quiet them; but, should that have no effect, the Apothecary must visit, and seek to pacify them. A few kind words, bit of tobacco, drink of cold water, or readjustment of bedding, will often have the desired effect.

All such occurrences are to be reported to the Superintendent in the morning.

87. No mechanical instruments of restraint are to be used under any circumstance. If a patient is violent, destructive, or dangerous, he must be put in charge of a number of Keepers sufficient to make him feel that resistance is useless, and violence impracticable.

88. All cases of sickness occurring by day or night are to be immediately reported to the Apothecary, who will have the patients removed to the Hospital for treatment.

89. No spirituous liquors or intoxicating drugs are to be introduced into an Asylum, and as the craving for these on the part of insanes is often so strong as to lead them to adopt clandestine means of getting them, all Keepers, servants, and guards are to be specially warned on this subject. Any Asylum servant found transgressing this rule, or permitting others to do so, may be suspended or dismissed.

90. No letters or messages between patients and their friends must be carried without the express sanction of the Superintendent.

91. All Asylum attendants are strictly prohibited from receiving presents of any kind, either from patients or their friends, and from selling or making presents of things to patients.

92. Keepers and servants must not quarrel with each other, or make a noise, but attend to their duties in a quiet and orderly manner.

93. Servants are not to employ patients to assist them in their duties, without express sanction; and all servants who get patients to help them will be held responsible for their cleanliness and safety.

SECTION XII.

Superintendent.

94. The Superintendent of an Asylum shall be a Medical Officer specially selected by Government, and is to abstain from engaging in general practice, except when called to visit persons afflicted with insanity.

95. He shall have the immediate charge and management of the Asylum, under the control of the Deputy Inspector General, Indian Medical Department, as in the case of other Hospitals. His duties shall embrace the direction of every thing connected with the treatment of the patients; the regulation of diet, clothing, and work; the consideration of everything bearing on the hygiene of the Asylum, and its inmates; the control of the subordinate Officers and servants; the charge of all Government property connected with the Asylum; the general superintendence of manufactures and gardens; and the improvement and embellishment of the Asylum grounds.

93. The Assistant Apothecary will be present at the opening of the cells in the morning, and, with the assistance of the Native Keepers, to inspect the person of every patient, and the furniture of every room. They shall see that the patients are cleanly in their persons and clothes; that furniture and bedclothes are not injured or broken; that rooms and bedding are properly aired; and that every part of the Asylum and the grounds is kept clean and in good order.

97. The European Keepers will be present when the patients are served out to the cook, and will take care that they receive the proper quantity, and that the scales, weights, and measures are correct. At meal times they will inspect the food, and see that the patients in gangs, and see that the full quantity for each is issued. In case of delinquency, attempt on the part of a servant to perjure, or refuse food in kitchen, or refusal on the part of a patient to eat, an immediate report must be made to the Apothecary.

98. The European Keepers will receive and take care that all orders regarding the labor and exercise of the patients are duly carried out. One will specially superintend work in the garden and grounds, and be responsible for garden produce, and the other will look after and be responsible for manual tasks. They will also furnish to the Superintendent, daily, statements of labor executed, and deliver at his office articles of produce and manufacture.

Section XIII.

European Keepers.

99. The Warrant Medical Officers shall have the Asylum, and the Assistant Apothecary, the Inspector General, the Warrant Medical Officers, and the Native Keepers, shall be present at the opening of the cells in the morning.

100. The European Keepers will be present at the opening of the cells in the morning, and will be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

101. The Assistant Apothecary will be present at the opening of the cells in the morning, and will be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

102. Both Warrant Medical Officers shall be present at the opening of the cells in the morning, and will be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

103. In carrying out the orders of the Superintendent, the European Keepers shall be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

104. They will receive reports from the Keepers regarding the patients, and will be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

105. They will on alternate days inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

Section XIV.

European Keepers.

106. The European Keepers shall be present at the opening of the cells in the morning, and will be held responsible by the Superintendent for the cleanliness of the cells, the furniture of the rooms, hospital, and kitchen, and that each patient is supplied with food and clothing. He will, with the Assistant Apothecary, inspect the patients, and see that the orders he may receive regarding the treatment and management of patients are duly carried out; and will aid the Superintendent in the supervision of the Keepers, and enforce discipline, and the general maintenance of cleanliness, order, and discipline. He shall also ensure that the various records are kept up, and returns prepared, and will have charge of the Library and Reading Room.

11th December 1857.

are to obey all orders given by the Apothecary. They are to be present at the opening of the cells in the morning, and, with the assistance of the Native Keepers, to inspect the person of every patient, and the furniture of every room. They shall see that the patients are cleanly in their persons and clothes; that furniture and bedclothes are not injured or broken; that rooms and bedding are properly aired; and that every part of the Asylum and the grounds is kept clean and in good order.

107. One Keeper will be present when the patients are served out to the cook, and will take care that they receive the proper quantity, and that the scales, weights, and measures are correct. At meal times they will inspect the food, and see that the patients in gangs, and see that the full quantity for each is issued. In case of delinquency, attempt on the part of a servant to perjure, or refuse food in kitchen, or refusal on the part of a patient to eat, an immediate report must be made to the Apothecary.

108. The European Keepers will receive and take care that all orders regarding the labor and exercise of the patients are duly carried out. One will specially superintend work in the garden and grounds, and be responsible for garden produce, and the other will look after and be responsible for manual tasks. They will also furnish to the Superintendent, daily, statements of labor executed, and deliver at his office articles of produce and manufacture.

109. Throughout the day, the European Keepers will maintain a strict supervision over all parts of the Asylum, taking care that the patients are engaged in their allotted employments, that no quarrelling takes place, and that the Native Keepers are attentive and do not maltreat or abuse their charges.

110. Should a patient become excited while at work or exercise, he should be quietly removed by such a number of Native Keepers as will see to his quietness, without wrangling or struggling, and the circumstance be reported to the Superintendent.

111. In the evening, these Keepers shall, in the presence of one of the Apothecaries, muster all the patients, and, with the assistance of the Native Keepers, examine their persons and their rooms, taking possession of all such dangerous articles as bits of iron, nails, pointed bones, pieces of glass, bits of ropes, or clothing torn and twisted into ropes. They will then see the patients duly arranged and made comfortable, lock the doors, detain the Native Keepers whose turn it is to be on duty during the night, and see that each proceeds to his post, and understands his duties. They will then deliver all the keys to the Apothecary, reporting the number of patients in each cell, and that the doors have all been locked and the necessary precautions adopted.

112. The Keepers will take the night duties on alternate nights, and the one on duty will go round twice during the night, and see that the Native Keepers are present and attentive. He will also, in case of sickness or excitement amongst the patients, be ready to assist the Native Keepers, and, in case of any emergency, is to call the Apothecary. In the morning, the Keeper will report the various occurrences of the night to the Apothecary.

113. The Keepers are strictly to prevent the introduction of intoxicating liquors and drugs into the Asylum, and if such articles are found in the possession of a patient, they will immediately seize them, and bring both the patient and the Native Keeper in charge to the notice of the Superintendent.

114. The Keepers are to prevent strangers from entering the premises, unless they have an order of admission from the Superintendent. When friends are visiting patients, they are not to allow them to give articles of food or money to the patients, without the special consent of the Superintendent. They are also strictly forbidden to receive, and must take care that the Native Keepers do not receive, presents of any kind from patients or their friends. They are not to talk regarding the condition or extravagances of patients with friends or visitors, but to refer them for information to the Superintendent or Apothecary.

115. The Keepers are not to permit letters or messages from patients to be sent out, or letters or messages for them to be delivered, without the sanction of the Superintendent.

116. The European Keepers must perform their duties with firmness, temper, and unwearied kindness, and endeavour by every means in their power to win the confidence and regard of

11th December 1867.

the patients. They are to obey the Asylum rules regarding messages, letters, forbidden articles, and presents. They are to be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

117. The Keepers are to be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

118. The Keepers are to be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

119. The Keepers are to be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

SECTION XIV.

Native Keepers and Assistants.

120. The 1st Class Native Keepers are to be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

121. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

122. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

123. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

124. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

125. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

126. They will be strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

127. They are to avoid all quarrelling or altercation with their subordinates, and, in case of any one of them disobeying orders, to report him immediately to the Apothecary. They will also be held responsible for all the subordinates being present, and that they do not quarrel, make a noise, or use bad language.

128. They must, under all circumstances, treat and see that the patients are treated kindly, remembering that they are insane, and, therefore, objects of pity, and not responsible for their words or acts. When abused or threatened by a patient, they must never seek to retaliate, but try to maintain a cool demeanour, and strive to calm him by some harmless concession or kind words. If attacked by a patient, they must never return a blow, but summon assistance by sounding their whistle.

11th December 1867.

129. They are strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents.

130. The 1st Class Native Keepers and all other subordinate attendants and servants will be appointed by the Superintendent, subject to the sanction of the Deputy Inspector General, Indian Medical Department, and, in case of misconduct, they may be fined or discharged by him, subject to the confirmation of the same authority.

131. Applications for leave of absence from any of the Native Keepers or servants must be made, through the Apothecary, to the Superintendent during the morning visit. A Keeper or servant absent on any account for more than twelve hours must provide a substitute.

SECTION XVI.

Second and Third Class Keepers and Female Keepers.

132. These are promptly to obey all orders given to them by their superiors, and to perform all their duties in a quiet and orderly manner.

133. They are to be present during the entire day from the opening to the shutting of the cells, except at meal times, when a certain number will be allowed to go outside for a couple of hours.

134. Each will have a certain number of patients and concomitant duties assigned to him, and the more intelligent of the 2nd Class Keepers will be selected as *Overseers* in the workshops, garden, and grounds.

135. When the doors are opened in the morning, and the rooms and patients have been examined, each will collect the patients under his care, have them cleanly washed and dressed, remove dirty bedding and clothing, and arrange and keep tidy furniture and bedding.

136. They will also be present when the patients are eating their meals, see that each takes his food properly, and assist such as cannot help themselves. In case of a patient complaining of the quality of, or refusing to take, food, they are to report the circumstance to an European Keeper.

137. Throughout the day they will constantly be present with the patients, to prevent escapes or accidents, and give such assistance and attention as may be necessary. When the patients are at labor they will obey the Overseers, and see that the patients do not injure tools, waste materials, or spoil the work. The Overseers will be responsible for the implements issued, and will every evening hand them over to the European Keepers.

138. In the evening they will collect the patients for muster, examine their persons and rooms for dangerous articles, and see them comfortably arranged for the night. Should a patient become sick or violent during the night, they will call the European Keeper on duty.

139. They are not to allow patients to defecate or urinate, or do so themselves, except in the appointed places, and when a patient goes to the latrine, a Keeper must, as a rule, accompany him.

140. They are, under all circumstances, to treat the patients kindly, and, in case of any of them becoming excited, to summon assistance. Any Keeper found negligent of, or using offensive language to, a patient will be fined, and any one found guilty of cruelty will be discharged, and handed over to a Magistrate for punishment.

141. In case of accident, attempt to escape, or other emergency, those on the spot will sound the whistles with which each will be provided, and all those hearing the alarm must at once hasten to give assistance.

142. They are strictly to obey the Asylum rules regarding messages, letters, forbidden articles, and presents; and, in default, will be severely punished.

143. One-half of the Keepers will be permitted to sleep at home every alternate night, but must be again at their posts at gun-fire.

144. Besides the duties specified here, they must attend to any other assigned to them by the Superintendent, or under his sanction.

145. They are not to be absent without leave.

*Proceedings of the Madras Government, Judicial Department,
11th December 1867.*

SCHEDULE.

Form A.

Certificate of Medical Officer (see Sections IV and VIII).

I, the undersigned (here enter name and official designation), hereby certify that I, on the day of at , personally examined (here enter name and residence of lunatic), and that the said is a lunatic (or an idiot, or a person of unsound mind) and a proper person to be taken charge of, and detained under care and treatment, and that I have formed this opinion on the following grounds, namely:—

1. Facts indicating insanity observed by myself (here state the facts).
2. Other facts (if any), indicating insanity communicated to me by others (here state the information, and from whom).

(Signed) _____

Form B.

Order for the reception of a private patient (see Section VII).

I, the undersigned, hereby request you to receive A. B., a lunatic (or an idiot, or a person of unsound mind), as a patient into your Asylum. Subjoined is a Statement respecting the said A. B.

(Signed) Name.

Occupation (if any).

Place of abode.

Degree of relationship (if any), or other circumstances of connection with the patient.

Dated this day of one thousand eight hundred and

To the Superintendent of the Asylum at (describing the Asylum).

STATEMENT.

(If any of the particulars in this statement be not known, the fact to be so stated).

Name of patient, with Christian name at length.

Sex and age.

Married, single, or widowed.

Condition of life, and previous occupation (if any).

The religious persuasion, as far as known.

Previous place of abode.

Whether first attack.

Age (if known) on first attack.

When and where previously under care and treatment.

Duration of existing attack.

Supposed cause.

Whether subject to Epilepsy.

Whether suicidal.

Whether dangerous to others.

Whether found lunatic by inquisition or inquiry under order of Court, and date of commission or order for inquisition or inquiry.

Whether any member of patient's family has been, or is, affected with insanity.

(Signed) Name.

When the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added, namely:—

Occupation (if any).

Place of abode.

Degree of relationship (if any), or other circumstances of connection with the patient.

*Proceedings of the Madras Government, Judicial Department,
11th December 1867.*

Form C.

Mode of taking notes of the case of an insane patient.

Disease.

Name.

Age.

Sex.

By whom sent.

Date of admission.

Temperament.

Married or single.

Number of children.

Occupation.

Where born and residence.

Religion.

Whether first attack, and duration of present attack.

Cause. {Moral.
Physical.

Whether hereditary, or otherwise.

Habits and disposition.

Degree of education.

Natural affection, perverted or not.

Evidences of insanity.

Form of insanity.

Dangerous to self, or others.

Certificates.

Previous treatment.

State of bodily health.

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Forms for Medical Certificate, Case, &c.

18 *Proceedings of the Madras Government, Judicial Department,
11th December 1867.*

No. 150. ORDER THEREON, 11th December 1867, No. 2012.

The Governor in Council approves and sanctions the Rules received with the foregoing letter, for the supervision and management of Lunatic Asylums in this Presidency, but directs that, prior to their publication, the following additions and alterations be made in them.

2. After the words "Rules for the superintendence and management of Lunatic Asylums in the Presidency of Madras," add "sanctioned under the provisions of Section 2 of Act XXXVI of 1858"; in Clause 3, second line, "the Sanitary Commissioner", and, fourth line, "the Civil and Session Judge of the Zillah"; and in Clause 4, the third line, "the usual official channel." In Clause 5, first line, after the words "official visitors," add "one of whom shall be a Medical Officer," and in Clause 11, third line, instead of "eight months," insert "four months."

3. As it is desirable that, prior to the transmission of a Lunatic to an Asylum, it should be ascertained whether accommodation is available, the following clause will be added after Clause 12 :—

"Prior to the transmission of a military or civil patient, it should be ascertained from the Superintendent or Officer in charge of the Asylum to which it is intended to send the patient whether accommodation is available or not."

4. In Clause 14, first line, insert "Regimental clothing, money, or other valuables," instead of "clothing, money, or private property." In Clause 23, first line, after the words "a lunatic," add "or any person supposed to be dangerous by reason of lunacy."

5. In Clause 40, under "male," instead of "one gingham bed gown," enter "one loose jacket." In Clause 49, the diet of Europeans, East Indians, and Natives should be specified; and in Clause 89, fourth line, for "may be suspended," &c., read "shall be suspended," &c.

(True Extract).

P. M. S.
Chief Secretary.

To the Inspector General, Medical Department.
,, Inspector General of Jails.

Encl. J. H. Burns.

No. 443
OFFICE OF INSPECTOR GENERAL, INDIAN MEDICAL DEPARTMENT,
Fort Saint George, 11th December 1867.

From

H. Inspector General, Indian Medical Department,
Fort Saint George.

To

The G. O. Secy. to Govt. of Madras.
Fort Saint George.

Sir,

*In obedience to the order of Government
No. 2799 of 1867, in the margin, I have the honor to submit a
copy of the rules for the management of Lunatic Asylums
communicated to the Superintendent of Jails and the Superintendent of the
Lunatic Asylum at Madras.
I should respectfully recommend that the
rules be made applicable to the Provincial institutions
as well as to the Provincial institutions.*

I have the honor to be,

*Very respectfully,
Your obedient servant,*

H. Macleod
Inspector General,
Indian Medical Department.

5/1/68

Judicial Department.

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letter from the
Inspector General and Medical
Department.
(K. 8. 11. November 1867.
No. 445.)

Ord. 11 Decr 1867 No. 2042.

The Governor in Council
approves and sanctions
the Rules received with the
foregoing letter for the super-
vision and management
of Sanatic Asylums in
this Presidency, but directs
that prior to their publica-
tion the following addition
and alterations be made
in them.

2. After the words "Rules
for the superintendence &
management of Sanatic
Asylums in the Presidency
of Madras", add "Sanctioned
under

W.D.L.
N.
by

1867
11 Nov 1867
11 Dec 1867

1867
11 Nov 1867
11 Dec 1867

1867
11 Nov 1867
11 Dec 1867

1867
11 Nov 1867
11 Dec 1867

under the provisions of
Section 2 of Act ~~XXXX~~
of 1858.

In clause 3
second line. "the Sanitary
Commission" and in the
fourth line "the usual

Official Channel". In
clause 5. first line, after
the words "Official visit",
add "one of whom shall
be a medical officer".
and in clause 11. third
line instead of "eight
months" insert "four
months".

3. As it is desirable
that prior to the trans-
mission of a lunatic
to an Asylum it should
be ascertained whether
accommodation is avail-
able, the following
clause will be added
after clause 12:

Prior to the trans-
mission of a military
or civil patient it should
be ascertained from
the Superintendent

~~Clause 4~~
of the Bill. In clause
4 the third line

or officer in charge of
the Asylum to which it
is intended to send
the patient whether
accommodation is
available or not.

4. In clause 14
first line insert "Regi-
mental clothing,
money or other valu-
ables" - ^{instead} offer "Clothing,
money or private
property". In clause
23 first line after the
words "A lunatic"
add "or any person
supposed to be danger-
ous by reason of lunacy".

In clause 40 - under
"mats" - instead of
"1 flannel bed gown"
enter "1 Loose jacket".

In clause 49, the diet
of Europeans, East
Indians and Natives
should be specified.
and in clause 89 four
line for "may be suspended"
and "shall be suspended".

W. P. Inspector General
Medical Dept
13/12

29-11-35
20-10-15

149.150
19-7-13. B.I.

1867 Department.

No. 2042

PROCEEDINGS OF GOVERNMENT.

27th 13/08

Dated 11th September 1867.