

Public (1895) Department.

ORDINARY MS.

G.O., No. 657

DATED 2^d Aug. 1895

INDEXED.

[Despatch Abstract.]

RETURNS SHOWING THE SURGICAL OPERATIONS PERFORMED
IN CIVIL HOSPITALS AND DISPENSARIES.

Informing the Government of India that this Government is in
favour of the rules proposed by the Surgeon-General with the Government
of India for the preparation of---

BACK PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

FURTHER PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.
	1015		96				

MEMORANDUM.

Frequent references having been made to me regarding the mode of returning surgical operations, I would beg to submit the following draft rules for consideration.

These rules if ultimately approved of will, I think, ensure uniformity in the returns and allow of more accurate comparisons being made than is possible under the present system.

1. All surgical operations will in future be returned according to the list of such operations, in the Appendix to the Nomenclature of diseases.

The artificial division into Major and Minor, sanctioned in this office letter, No. ^{4-Medical}₃₄₉, dated 22nd June 1891, is abolished, and the operations will be returned continuously, as in the list in the Appendix referred to.

These operations and the mode of returning them are to be based on the following considerations:—

(a) the list refers to individuals operated on and not to the number of operations performed on individuals, so that one operation will, as a rule, represent one patient;

(b) when, however, the Surgeon considers it to be in the interests of the patient that two operations, each in themselves separate and distinct, should be performed at one and the same time, they may be returned as separate operations.

2. In some Provinces it is customary, in suitable cases, to remove both the cataractous lenses at the same time from the one patient. Civil Surgeons should exercise great discretion in permitting this practice, and it should be absolutely prohibited in branch dispensaries.

The rule to follow in these and other similar cases is, that no multiple operations should be performed on a dispensary patient, which would not be performed on a private patient, or allowed to be done on the operator himself under similar circumstances.

3. Extraction of the opaque lens in cases of glaucoma is under ordinary circumstances forbidden. In any case when an extraction operation is considered necessary, the reasons for operating should be given in the column of remarks in the register of operations.

4. In multiple operations, of necessity, such as those in accidents, &c., the principal one is to be returned as the main operation, and the subsidiary ones, such as multiple amputations, compound fractures, dislocations and others of like importance, may also be returned as separate operations, but if they are so returned, then, in the event of a fatal issue, all the operations must be entered in the Column "Died" under the heading "Results" in the yearly returns.

5. A second operation performed on a patient when the first is surgically cured should be returned as a separate one.

6. All operations tending to the cure or relief of one and the same operation performed on the same or any subsequent days should be returned as one operation.

7. An additional column will be introduced in Statement No. III A of Dispensary Returns numbered 4, in the following form, in which will be entered the number of patients on whom the operations in Column 3 have been performed.

JAMES CLEGHORN, M.D.,

Surgeon-General with the Government of India.

Public Dept

From the Govt of India
Home

Sndd No 1229

Referred to the Surgeon
General for remarks.

(By order)

Ag. Secy. Secretary.
S. V. G. S.J. D. A.
8/6/95Ootacamund
10th June 1895Recd 27 May } 1895
Recd 2 June }
Recd 6 " }
SC-7

Subject

Seeking the opinion of H.C. the Governor
in Council as to the desirability of
adopting the enclosed draft rules proposed
by the Surg. Genl. with the Govt. of India
for the preparation of returns showing
the Surgical operations in Civil Hospitals
and Dispensaries.

No. 1001

Encl. 11.4

Ootacamund
Madr., July 1895

From

SURGEON MAJOR-GENERAL C. SIBTHORPE, F.R.C.P.J.

SURGEON-GENERAL WITH THE

GOVERNMENT OF MADRAS,

Madr.,

To

THE Honble the Chief Secretary to Government.
Public Department.

SIR,

With reference to your endorsement No 1229 of
the 10th June 1895 (herewith returned) on the desirability
of adopting the draft rules proposed by the Surgeon-Genl.
with the Government of India for the preparation of re-
turns showing the surgical operations performed in
Civil Hospitals and Dispensaries, I have the honor
to submit the following remarks.

2. I have circulated these draft rules for the opinion
of the Medical Officers in the Clinical Hospitals and
Medical College who were most concerned in their
working and the general consensus of opinion is in
favor of the proposed rules.

3. The question of trying to obtain uniformity in
the compilation of statistics generally in these Civil
Hospitals and Dispensaries has occupied a great deal
of my attention since I took up my present appoint-
ment. I attach copies of H.C. circulars which
I have issued on the subject. All of these orders are
worth the consideration of the Government of India
as they are closely connected with the organization

of the diseases or injuries for which operations are performed. If such general rules were published it would conduce to greater uniformity in all the annual reports from the different local Governments and make them much more useful.

4. The subject of surgical operations is dealt with in paragraphs 28-37 of Circular 29 of the 4th Oct. 94. 5. As regards the proposals rules in the advice received from you and now attached to your endorsement.

Rule I. I concur as it appears to me that in the great majority of cases the directions in the nomenclature are so explicit that a better conclusion than has obtained before of work done can be drawn if the Nomenclature be adopted. I would say however, that provision should be made for registering new well recognized operations which are not in the nomenclature but should be permitted to be added under the appropriate divisions as sub-heads. Further there should be some explicit orders under the following heads:-

- (a) Removal of tumour "size should be stated"
- (b) "Opening of abscess" ——— Do. ———
- (c) "Operations for hemorrhage" ~~size~~ ~~should~~ be indicated.
- "For stricture of urethra (a) by gradual dilatation"
- and "Passing of Catheter" "Passing of sound"
- Should entries be made for each operation performed on the one and the same patient?

Rule II. I think that if Government considers it desirable to interfere at all with the practice

of individual Surgeons the practice should be prohibited everywhere. It is a pernicious one and under no conditions that I am aware of should it be done. The latter paragraph of the rule is a well recognized ethical point in all surgical interference and I am doubtful of the necessity of publishing it for the guidance of properly trained qualified men.

Rule III. May be desirable if such an operation was performed the reasons for doing so should certainly be recorded, but I am doubtful of the necessity of entering into such details regarding remote contingencies in general rules.

Rule IV. Is a good one but I would not return all fatal cases in the column "died" after each operation in the returns. I think rule 31 in Circular 29 of the 4th October 1894 would be better if slightly modified: - "When several operations are performed on the same patient for the same disease (or injury) the patient should be "discharged otherwise" and a new entry made for each operation". For instance a man sustains a fall dislocates his shoulder and injures his head requiring operation. The dislocation is reduced

Rule VI. It would appear advisable to add a column between 4 & 5 showing "number of diseases or injuries for which operations were performed". This would allow of a percentage of operations to diseases being struck whereas a percentage of operations to persons would not be nearly as true an index unless the Madras System was followed of discharging the person and readmitting them for any fresh operation. Rule 6 I do not like. An operation may be performed on a patient and may be partially successful and should be so recorded but a second one is performed to complete the cure and it may be either successful or fatal or otherwise and should be so recorded.

Rule VII is good.

b. I note the heading of the form is "Dispensary Statistics". I think the designation should be "Hospital or Dispensary Statistics". The rule in Madras is that an institution where there is accommodation for in-patients is designated a "Hospital" and one in which there is provision for the treatment of out-patients only is designated "Dispensary". A distinction which I consider most important.

I have the honor to be

Sir,

Your Most Obedt. Servant.

C. F. F. F.
Surgeon Major General.
Surgeon Genl. with the Govt. of Madras.

and the man succumbs a month later to the effects of the head injury. It would not be reasonable to return the case under the head of dislocation as 'died'. It should be returned as "cured" or "relieved" and died under the entry of the operation required for the head injury.

Rule V. I would suggest that the words "or relieved" should be added after the word "cured" and that the words "He should be discharged otherwise" for the first or subsequent operations - should be added to the end of the paragraph. I would like to see the term "successful" used instead of "cured" as the latter refers more to the disease or injury for which the operation has been performed. I take it to mean that this rule refers to patients who have two separate diseases or injuries otherwise it would appear to be in conflict with rule b.. Again there are cases where the rule would not work well e.g. a patient suffers from a senile cataract, it may be desirable to perform a preliminary iridectomy which proves successful; a month later the lens is removed which may also be successful. According to the draft rules these two important operations would appear as one.

(189) DEPARTMENT.

From

SURGN. MAJOR-GENL. C. SIBTHORPE, F.R.C.P.I.,

SURGEON-GENERAL WITH THE

GOVERNMENT OF MADRAS,

Madras,

To

No. 1074

ENCLOSURES.

Dated 22nd } July. 1895.

Recd

Rept 27/7
Encls 12
Sub-enc 17/12/95

Subject.

Return on endorsement No 1229 of

10th June regarding the desirability
of adopting draft rules proposed
by S.G. with Govt of India for preparation
of returns showing surgical operations
performed in Civil Hospitals &c
with remarks.

MESSAGE

Public Currents 1772+2357

To 2nd August 1895 No 657
Secretary to the Govt of India

Home Dept (Medl)
with copy of No 2357
+ 11 circulars
3 AUG 95

Sir

In reply to Mr. Hill's
letter No ^{8 Medical} ₃₇₀ of the 27th
May last, I am directed
to state that the Surgeon-
Genl. with the Govt of
Madras to whom the
matter was referred
reports that the general
consensus of opinion
among the officers most
concerned is in favour
of the proposed rules,
and the Govt. agrees in this.

* paras 5 and 6 of the S.G.'s letter
& circulars.

2. Copies of the Surgn-
Genl's remarks in detail
on the various rules in
question and of eleven
circulars issued by him
on the subject are
attached for the consid-
eration of the Govt of India.

2013
27-7-95
C.W.
26-7-95
28
24/7/95

550 D 7-291
Draft rules as to return
of Surgical Operations

TELEPHONIC MESSAGE.

TELEPHONE UNIT

191

Dated

REPLY.

From

The

To

The

ORIGINAL.

When g
When
When
When
Manager,
Surgeon-General's office,
Madras.

Superintendent,
Local and Municipal Depatt.,
(Medical Section).

This office telephonic
message dated 10-12-19.

Please be kind enough to furnish
Office with a copy of correspon-
ding with Government letter
dated 2nd August 1895 to the
Secretary to Government of India,
Department (Medical) ref. to
G.O. No. 102, Public, dated 2nd
March 1896 asked for in the above.

Please treat this as urgent.

(BY order)

M. S. S.

Manager,
Surgeon-General's office, Madras.
82

Copy of letter from the Surgeon-General with the Government of Madras, to the Chief Secretary to ~~xxxx~~ Government, Public Department, No.2351, dated the 22nd July 1895.

With reference to your endorsement No.1229 of the 10th June 1895 (herewith returned) on the desirability of adopting the draft rules proposed by the Surgeon-General with the Government of India for the preparation of returns showing the **surgical** operations performed in Civil Hospitals and Dispensaries, I have the honour to submit the following remarks.

2. I have circulated these draft rules for the opinion of the Medical Officers in the Civil Hospitals and Medical Colleges who are most concerned in their working and the general consensus of opinion is in favour of the proposed rules.

3. The question of trying to obtain uniformity in the compilation of statistics generally in these Civil Hospitals and Dispensaries has occupied a great deal of my attention since I took ^{up} my present appointment. I attach copies of 11 circulars which I have issued on the subject. All of these orders are worth the consideration of the Government of India, as they are closely connected with the registration of the diseases or injuries for which operations are performed. If such general rules were published it would conduce to greater uniformity in all the annual reports from the different local governments and

5. As regards the proposed rules in the re-
~~ceived~~ received from you are now attached to
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Rule I. I concur as it appears to me that
 great majority of cases the condition in the op-
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 ter well recorded operations which are in
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 the case should be some explicit orders under
 local heads:-

- (a) Removal of tumor "dis" shall be stated
- (b) "Opening of abscess" -----
- (c) "Operations" for "discharge" site should
 indicated.

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 and "Passing of Catheter" Passing of sound".
 entries be made for each operation performed
 one and the same patient?

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 "Cured" or "relieved" and "died" after the entry of
 the operation required for the head injury.

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 should be added after the word "Cured"
 and that the words "He should be discharged other-
 wise" for the first or subsequent operations" should
 be added to the end of the paragraph. I would like
 to see the term "successful" used instead of "Cured"
 as the latter term is used in the case of injury
 before the operation has been performed. I take
 it to mean that this rule refers to patients
 who have no separate diseases or injuries otherwise
 it would appear to be in conflict with rule 6. Again
 there are cases where the rule would not ~~work~~ work
 M.C. a patient suffers from a senile cataract, it
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 column between 4 & 5 showing "number of diseases or
 injuries for which operations were performed". This
 would allow of a percentage of operations to diseases
 being struck whereas a percentage of operations to
 persons

to be
at once

When given for copying _____
When filed _____
When examined _____
When signed _____

189

READ AGAIN G.O., No.
189

DATED

CURRENT No.

ENCLOSURES TO G. No.

ORDER OF GOVERNMENT

LETTER OF GOVERNMENT.

STATEMENT WITH DITTO.

PAPERS NOT FILED UP, BEING MEANT FOR DESPATCH
IN ORIGINAL.

N.B.—

A = Copy in full.
B = Not to be copied
P = Copy abstract only.
Q = Copy heading only

complete the cure and it may be either successful or fatal or otherwise and should be so recorded.

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6. I note the heading of the form is "Dispensary Statistics". I think the designation should be "Hospital or Dispensary Statistics". The rule in Madras is that an institution where there is accommodation for in-patients is designated a "Hospital" and ^{and} in which there is provision for the treatment of out-patients only is designated "Dispensary" - a distinction which I consider most important.

Copy of letter from the Chief Secretary to Government, Public Department, to the Secretary to the Government of India, Home Department (Medical) no No.657, dated the 2nd August 1895.

In reply to Mr. Hill's letter No.8 Medical/370 of the 27th May last, I am directed to state that the Surgeon-General to whom the matter was referred reports that the general consensus of opinion among the officers most concerned is in favour of the proposed rules and the Government agrees in this.

x paras 5 and 6 of the Surgeon-General's letter and circulars.

2. Copies of the Surgeon-General's

General's remarks in detail, on the various rules in question and of eleven circulars issued by him on the subject are attached for the consideration of the Government of India.

24-11-11
 21-1-13
 31-10-18
 16-12-19

Paper taken out of the records from the charge of the Referencer

Process
 Miscellaneous No. 502, dated 2-2-20 190
 Routine

Date taken out.	FOR WHAT PURPOSE.			Initials of clerk taking the paper or of attender.	Date returned.	Initials of attender.
	Department.	C. No.	Year.			
10-3-03	Pub.	48303		uf	10-3-03	AG
24-11-11	Mike	4289/11	11		17-1-12	uf
22/2/13	Pub	329/12		BLE	18/3/13	uf
31/10/11	In Recd	474/11	11		17-11-19	QB
16-12-19	Recd	3989/19		uf		

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Frequent references having been made to me regarding the mode of returning surgical operations, I would beg to submit the following draft rules for consideration.

These rules if ultimately approved of will, I think, ensure uniformity in the returns and allow of more accurate comparisons being made than is possible under the present system.

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The artificial division into Major and Minor, sanctioned in this office letter, No. ^{4-Medical}₃₄₉, dated 22nd June 1891, is abolished, and the operations will be returned continuously, as in the list in the Appendix referred to.

These operations and the mode of returning them are to be based on the following considerations:—

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(b) when, however, the Surgeon considers it to be in the interests of the patient that two operations, each in themselves separate and distinct, should be performed at one and the same time, they may be returned as separate operations.

2. In some Provinces it is customary, in suitable cases, to remove both the cataractous lenses at the same time from the one patient. Civil Surgeons should exercise great discretion in permitting this practice, and it should be absolutely prohibited in branch dispensaries.

The rule to follow in these and other similar cases is, that no multiple operations should be performed on a dispensary patient, which would not be performed on a private patient, or allowed to be done on the operator himself under similar circumstances.

3. Extraction of the opaque lens in cases of gloncoma is under ordinary circumstances forbidden. In any case when an extraction operation is considered necessary, the reasons for operating should be given in the column of remarks in the register of operations.

4. In multiple operations, of necessity, such as those in accidents, &c., the principal one is to be returned as the main operation, and the subsidiary ones, such as multiple amputations, compound fractures, dislocations and others of like importance, may also be returned as separate operations, but if they are so returned, then, in the event of a fatal issue, all the operations must be entered in the Column "Died" under the heading "Results" in the yearly returns.

5. A second operation performed on a patient when the first is surgically cured should be returned as a separate one.

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7. An additional column will be introduced in Statement No. III A of Dispensary Returns numbered 4, in the following form, in which will be entered the number of patients on whom the operations in Column 3 have been performed.

JAMES CLEGHORN, M.D.,

Surgeon-General with the Government of India.

Dispensary Statistics.

Showing the result of the surgical operations performed in the Dispensary
of _____ for the year _____

[illegible]

Confidential.

No.

FROM

C. H. A. HILL, ESQ.,
Offg. Under-Secy. to the Govt. of India,

To

Home Department.
Medical.

Simla, the May 1895.

SIR,

WITH reference to Home Department letter No. ^{4-Medical,}
345-354, dated the 22nd June 1891, I am directed to forward, for consideration, the accompanying memorandum containing draft rules proposed by the Surgeon-General with the Government of India for the preparation of returns showing the surgical operations in Civil Hospitals and Dispensaries, and to request that the Governor General in Council may be favoured with

as to the desirability of adopting them.

I have the honour to be,

SIR,

Your most obedient Servant,

C. H. A. HILL,

Offg. Under-Secy. to the Govt. of India.

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Surgeon-General with the Government of India.

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JAMES CLEGHORN, M.D.,

Surgeon-General with the Government of India.

Showing the result of the surgical operations performed in the Dispensary
of _____ for the year _____

3002654 1.16
1-8-95