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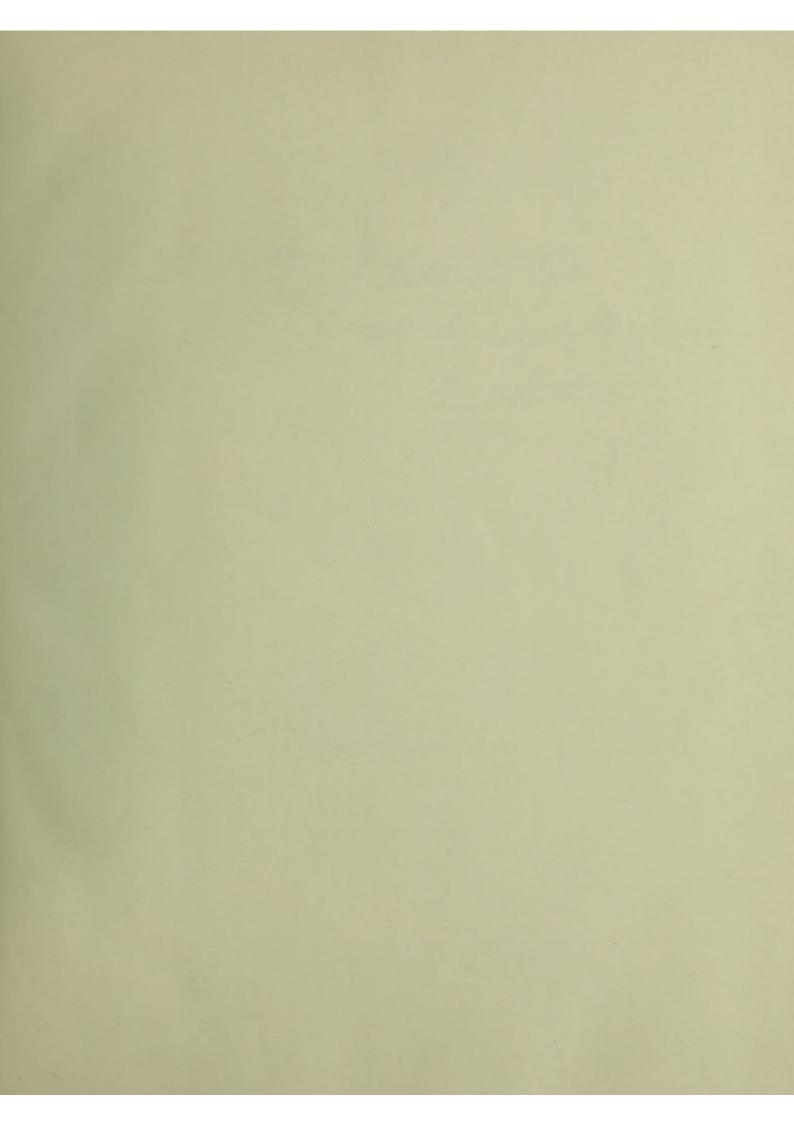
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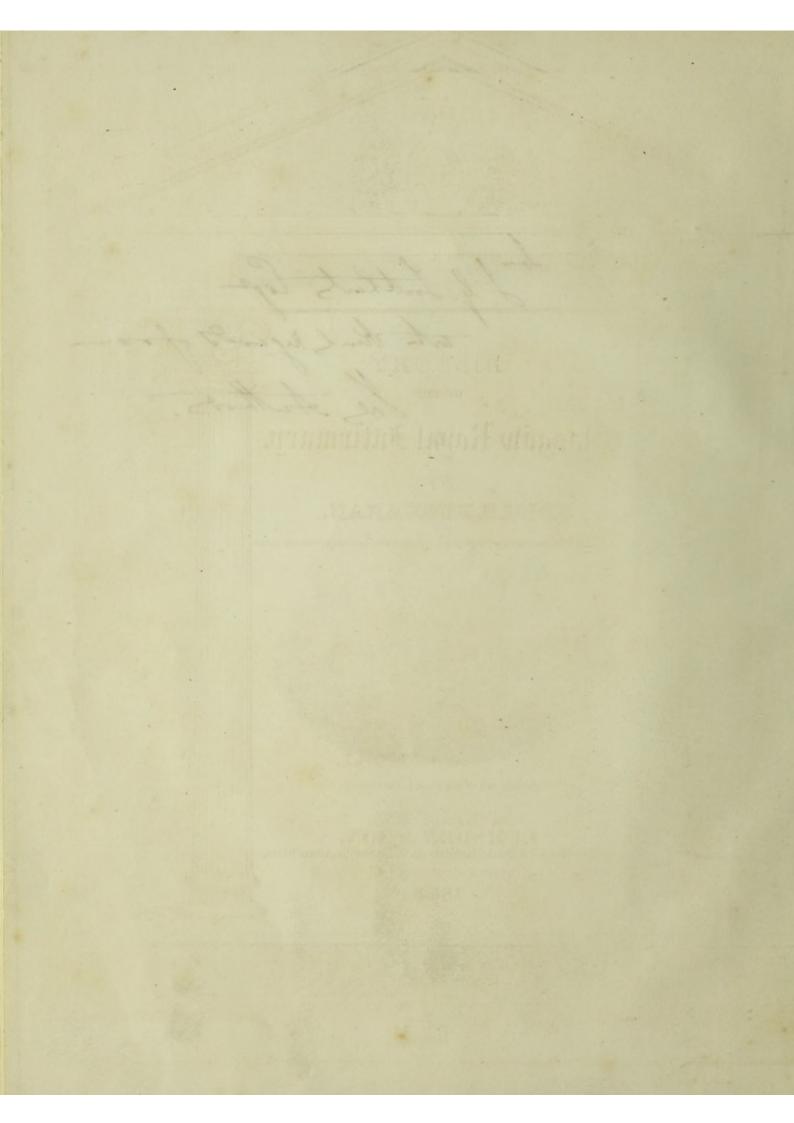
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HISTORY

OF THE

GLASGOW ROYAL INFIRMARY,

FROM ITS COMMENCEMENT IN 1787, TO THE PRESENT TIME,

WITH

AN APPENDIX,

CONTAINING

THE CHARTER AND LAWS OF THE INSTITUTION, THE TABLES OF DIET, ETC.

BY

MOSES STEVEN BUCHANAN, M.D.

MEMBER OF THE FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW, ETC. ETC.

PUBLISHED IN AID OF THE FUNDS OF THE INFIRMARY.

GLASGOW:

JAMES LUMSDEN AND SON;

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HOSES STEVEN MUCHANAN, MAD.

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GLASGOW:

THE HON. JAMES EWING, LL.D.,

LORD PROVOST OF THE CITY OF GLASGOW,

AND THE OTHER DIRECTORS OF THE GLASGOW ROYAL INFIRMARY,

WHO HAVE SO ABLY ADVANCED THE CAUSE

OF MEDICAL AND SURGICAL EDUCATION IN THIS INSTITUTION,

THE FOLLOWING HISTORY IS RESPECTFULLY INSCRIBED,

ВУ

THE AUTHOR.

PREFACE.

The Glasgow Royal Infirmary is so well calculated to serve as a model for other Institutions of a similar nature, that I have deemed it a duty, in retiring for a short period from my labours as Surgeon, to make known more extensively than hitherto, the advantages which it possesses, both in a professional and philanthropic point of view. As a great practical school of medicine and surgery, it stands inferior to one or two only of the London Hospitals; and, in consequence of the late regulations of the Court of Directors, in regard to the courses of Clinical Medicine and Surgery, which must regularly be delivered to the attending pupils by all the respective Physicians and Surgeons, it claims a decided superiority over every other Institution in the Empire. In the third Chapter of this volume, I have at some length alluded to the other advantages which the student enjoys in attending this establishment, and to it I must refer the reader for any further information on this part of the subject which may be desired.

Who were the original framers of the Magna Charta of the Glasgow Royal Infirmary does not appear from any of the documents with which, in my investigations, I have been so handsomely and liberally furnished; but by a persual of this literary curiosity, which I have thrown into the Appendix, it will be remarked as of the most valuable description, embracing in its executive and legislative body, a well digested mixture of this amphibious literary and commercial community. In order to have a more distinct idea of this directory, I have divided it into three great classes, viz: 1st, into Directors ex-officis; 2d, into those nominated by the various public bodies; and 3d, into those who are annually elected by the general court of subscribers and contributors; and by a reference to the 1st table prefixed to Chapter fifth a complete view will at one glance be obtained of every individual who has served in the above capacity, from the first year after obtaining this constitution till the present time.

All the office-bearers in this Institution are annually elected to their respective situations by this radicoaristocratic conclave; and though by an inspection of the 2d table prefixed to Chapter fifth, it may be remarked that most of the Physicians and Surgeons whose names are therein recorded as having officiated, were members of the Faculty of Physicians and Surgeons of this city; still the Licentiates of the Faculty, both town and country, the Physicians and Surgeons of his Majesty's Army and Navy, and the Graduates and Licentiates of other colleges and learned corporations, are all equally eligible to the above-mentioned situations. Not satisfied with the above liberal state of eligibility, and still further to guard against that baneful monopoly of office, which so frequently obtains in similar establishments elsewhere, the original framers of the excellent code of laws of this Hospital, enacted that all the medical and surgical attendants must vacate their respective situations after a service of two years, and cannot again be re-elected until a two years' interregnum. This law, it is true, has been for a long period in part abrogated in consequence of the scarcity in this city of what have been falsely and absurdly called pure Physicians, but it is still preserved in all its pristine vigour in regard to the unfortunate knights of the scalpel. And thus it is, that while the office of Physician has, since the foundation of the Infirmary, been in the hands of not more than eight or ten individuals, the office of Surgeon has been held by at least six times that number. The various arguments in favour of a change in the above respect, will be found in the Appendix, and the final resolutions of the Directors will be read in the fourth Chapter, with much interest by all those who rejoice in the downfall of medical monopoly, and in the advancement of the general practitioner.

Superadded to the Court of Directors, which, both as a legislative and executive body, has the sole management of the affairs of the Hospital, there is another very important class of individuals annually elected by the Directors, from the general list of subscribers. I mean the daily visitors,—in number generally about sixty. Their duty consists in one of them each day of the year, at an hour most convenient, perambulating the Wards of the Hospital, examining the side rooms, closets, &c., questioning the patients as to any complaints against their nurses, their medical and surgical attendants, &c., in short, acting as inspectors on every department of the Institution, and reporting in a book kept for the purpose any remarks occurring to them, or any complaints made, and of which the Directors at their weekly meeting instantly take cognizance. From the mechanical manner, however, in which of late these gentlemen have performed their visiting duty, and from the "whatever is, is right" kind of reports which have figured in their day book, the Directors have most judiciously determined to appoint a Superintendent. The state of opinion on which subject, with the duties attached to this responsible officer, will be found detailed in the various interesting and amusing reports on both sides of the question which I have copied into the Appendix.

But though it undoubtedly is the primary object of this, as well as of all Institutions of a like nature, to ameliorate the condition, and restore to health the diseased poor who are admitted under its roof; and though, in the prosecution of this benevolent and praiseworthy object, the tyro as well as the man of science acquires much practical information; still, unless these opportunities are valued aright, and the medical public are made the participators of the accumulated store of useful facts, either on the history of diseases, or their treatment which is thus obtained, I think one of the most important objects of the charity is lost sight of, and the subscribers are not indemnified in the manner in which they ought to be for the liberality and generosity with which they have so invariably given it their encouragement and support. Various have been the methods adopted both in this and other Hospitals, for recording the cases of the patients in the medical and surgical Wards, but the one which now prevails in this Institution of giving a complete history of the disease in the house journals, with every collateral circumstance, illustrative of its progress and cure, is so superior to the superficial work of days long gone by, that any eulogium on the practice, I think at present quite unnecessary. So carefully indeed are the cases in these journals now drawn up, and with so much accuracy are the reports and prescriptions engrossed, that I feel convinced, by a little

PREFACE.

trouble in extracting and condensing those of most interest, many tomes might be brought to see the light, of a far more valuable and instructive nature than the nauseating and common-place productions, in the shape of manuals, vade mecums, and compendiums, which have of late so deluged the medical world.

Within these last four years, the Surgeons who have attended this Hospital, each in succession, as they retired from their labours, have transmitted to the Editors of the Glasgow Medical Journal, a report of the cases under their charge during their incumbency, and by this means have preserved to their successors an epitome of what was their experience in the surgical Wards. Every individual by this arrangement having been left unfettered in his communication, both as to the manner and matter of his report, a great variety of surgical cases have been thus brought before the eye of the public; and were the same system zealously continued for a few more years, this spirited and ably conducted periodical would take the very foremost rank among its bustling but more ephemeral compeers.

It is not my intention in the subsequent history, in the slightest degree to trench upon the province of my predecessors, either in reporting their cases, or in remarks on their Hospital practice. My object at present is to exhibit a condensed view of what has been transacted in this great medical and surgical store-house during nearly half a century,—to analyze the means by which so much good to the species has been achieved, and to attempt to establish a substratum of facts, which may serve as a foundation whereon some more skilful architect may rear a statistical fabric worthy of such an Institution and such a city. It is the first essay I believe on Hospital statistics which has appeared in this country, but, though so much behind our continental rivals in this respect, the conviction that our previous inactivity does not proceed so much from want of valuable materials, as from these lying unquarried, will, it is hoped, stimulate our Hospital functionaries in future to greater and more combined efforts in such a praiseworthy cause. If my present feeble and unassisted attempt shall, in the slightest degree, tend to further this object, the labour which I have bestowed in collecting the raw material contained in the subsequent volume shall not have been spent in vain; at all events, the consolation remains to me of having performed a duty which I felt I owed both the Institution and those gentlemen in its direction, who, in 1829, advanced me to the important and honourable situation of Surgeon.

The value of the accompanying statistical tables of medical and surgical diseases, &c., I need not advert to. In the opinion of some of my fellow citizens, they may be unnecessarily minute, but when it is considered that absolutely nothing has hitherto been done in this department of medical or surgical science, I hope to be excused for this transgression. If such investigations were extensively and accurately pursued, nothing in my opinion would tend so much to advance the cause of humanity, or assist in the construction of a correct philosophy of disease. Even the expenditure department of the Hospital, which appears microscopically minute, when thrown into the tabular form which I have adopted, proves, in my opinion, more decidedly than all the reasoning which can be employed, the economy or waste which daily or yearly takes place in such establishments, and thus acts as the most salutary check to the whole administration.

And here justice demands that I should acknowledge the obligations under which I lie to John Alston,

Esq., late treasurer to this Hospital, for the use which he kindly afforded me of his valuable and complete collection of the reports of the Institution. To James Lumsden, Esq. and Thomas Christie, Esq., my warmest thanks are also due, for the freedom of access which was at all times afforded me to the Infirmary Records and Journals in their possession, without which accurate and authentic documents, all my statistical labours must have been comparatively useless.

The remarks which I have thought it my duty to make on the accompanying statistical tables of Income, Expenditure, and Mortality, I hope will be received with that good feeling which I have so invariably found to actuate all the individuals connected with the Hospital. They are intended to benefit the charity, and to stimulate to still greater exertions, those who may hereafter have the honour to be elected either as its Directors or office-bearers.

In conclusion, I have to urge the purchase of this volume on the benevolent, as they value the object whose welfare it is intended to promote, and also as adding to the comfort and happiness of the industrious classes elsewhere, by exhibiting the successful results of the labours, not only of Physicians and Surgeons, but of a body of citizens, who, while in the direction of this splendid establishment, have demonstrated with what efficiency and economy some of our Institutions can be conducted. The profits arising from its sale, I intend to devote to the Funds of the Hospital, and it is hoped the Subscribers and Contributors will give it that encouragement, necessary to defray the expense attendant on some of those improvements, contemplated by the present active and philanthropic Treasurer.

194, Buchanan Street, ? October, 1832.

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OF THE

GLASGOW ROYAL INFIRMARY.

CHAPTER I.

THE history of Hospitals, both in ancient and modern times, presents to the eye of the philanthropist a very curious and interesting subject of inquiry. If we carry our retrospective glance as far back as the days of ancient Greece or Rome, we will find few or no traces of charitable institutions, in the least resembling those of the present era; and when we consider the magnitude of the population of these ancient republics and empires, and the immense mass of disease which such a state of society must have engendered, the question naturally arises, in what manner were their diseased poor attended to, and by what means were they supported? A little reflection on the state of the population in these vast ancient communities, will in great part explain the difficulty. For this purpose the whole population above referred to, may, with propriety, be divided into three great classes: 1st, Into those who composed the Patrician rank, resembling the aristocracy of our own country: 2d, Into the Plebeian rank, which may be likened to the middle classes of Great Britain: and 3d, Into the slave population, which we may for the present compare to the labouring classes of this land of liberty. Now it is solely for the relief of this last class of society, that Hospitals are established in this country; and when we recollect how necessary it must have been for the masters of slaves, not only in a philanthropic, but economic point of view, to supply the wants and provide for the recovery of this third class of Greece and Rome, we shall cease to be astonished at the absence of public Hospitals in these slave republics; for however paradoxical it may appear, yet it will be found true, that as slavery disappears from the face of society, and freedom follows in its wake,as the true condition of man becomes improved, and emancipation absolves the master from his former obligation to his slaves or vassals,-so in proportion does public charity become necessary. Every individual, in such a state of society, is as it were thrown upon his own resources, he must work or want; he has independence of a certain kind allotted him, and this stimulates him to exertions which otherwise he would never think of making; activity and industry in all the various channels of the commercial world is the result,-and though many arrive at princely fortunes in the contest, and distance their less fortunate, but equally eager and industrious fellow labourers, still the conviction of the truth of the axiom, which I have above alluded to, has been the opening of the purses of the two first classes of the population of this republican monarchy, for the liberal supply of all the wants of our diseased poor. At what period those noble institutions began first to be erected I can no where find, but shortly after the Christian era they began to attract notice, and it is to the spirit of Christianity that we are

indebted for their progressive increase and improvement. During the dark ages, the convents, and those establishments connected with them, were occasionally employed for the dispensing of medicines and the reception of diseased poor; and had this been their principal aim, little objection could have been made to them, but unfortunately, in process of time, these religious dormitories became the receptacles of moral corruption, and the abodes of all that was profligate and abandoned in society. Thanks to the Reformation which swept away these nuisances, and in their place reared Hospitals, Asylums, and Infirmaries in our land, as splendid in their endowment or annual support, as praiseworthy and economical in their management. Prior to the year 1560, we have very scanty and imperfect information, either as to the population or the statistics of the city of Glasgow, and though about half a century after this date, Archbishop Spottiswood made some advances in this laudable career, still, comparatively nothing was done till 1712, in which year the convention of Royal Burghs directed an enumeration to be made of the population of the city, with an account of the rental of all the shops, houses, &c. In this curious document, we are informed that the valued annual rent of all burgh property amounted to the sum of £7,840; not much more, be it remarked, than the late yearly revenue of that Institution whose history I am about to trace. The burgh population, which in 1712 amounted to 14,000, and which for several centuries prior to this date had gently ebbed and flowed about this mark, seemed now to make a stand, and but for the new matrimonial alliance which was contracted between this ancient kingdom, and her rich blooming and free cousin of England, she might have remained to this day in statu quo.

The effects of this happy union soon became remarkable in the rapid increase of Scotia's sons and daughters, who by their industry and activity, more particularly in this western part of the peninsula, so swelled the population returns of this burgh, as to make them amount in the succeeding half century, by Woodburn's enumeration, to no less than 28,000. From the year 1763 the population again doubled itself before the lapse of thirty years, and in 1801 was found by the government enumeration to amount to 83,000 inhabitants. In the three final decades, at all of which periods most accurate lists of the population of this city and suburbs were taken by order of government, it will be found that a steady and progressive increase has occurred in the returns. In the first decade, amounting to an increase of 26,691, in the second of 39,540, and in the last to no less than 50,000; making the aggregate amount of the population of this city and suburbs in 1831, 200,000. But though I have thus rapidly traced the increase of population in this great commercial city, and found it to advance during the last century, with geometric rather than arithmetic progression, the question occurs, Has the wealth of its citizens kept pace with this vigorous and gigantic growth of the human species? Has their public spirit, their commercial and manufacturing enterprise, or their benevolent and charitable institutions, given proof that it is still destined to flourish, and hereafter, more decidedly to distance its venerable eastern rival? The discussion of the first part of this question I shall leave in the hands of the disciples of Adam Smith, of whom there are not a few, in this the favourite residence, of the celebrated author of "The Wealth of Nations." In proof of the last part of the problem, I shall now proceed with a short outline of the history of the Royal Infirmary of this city, affording as it does an excellent specimen of our public institutions, and also, as at the same time exhibiting an epitome of what has been done within the last 40 years, for the amelioration of the species in this well-conditioned and thriving community.

Objections have frequently been made to all such establishments, as encouragements to improvidence, dissipation, and idleness; and though in a qualified sense I may feel inclined to subscribe to the aphorism of the celebrated Montesque, "Malheur au pays qui a beaucoup d'Hôpitaux," still, of all charitable institutions, Infirmaries are, in my opinion, the most laudable; and whether publicly or privately endowed, if properly managed, do more towards the relief of suffering humanity, and are less liable to abuse, than any other species of eleemosynary endowments. How often do we find the most industrious in the labouring classes of society

arrested in their laudable career by severe accidents, by fever, or by dangerous internal diseases? And what situation at such a moment can be so fitted for their treatment as an hospital, where, I hesitate not to say, they enjoy advantages, from which those in a higher rank of life are precluded? But not only are these receptacles for our diseased poor of great advantage to the community at large, by thus freeing them from the effects of contagious diseases, and all the evils of pauperism,—they at the same time prove of incalculable benefit, by the advantages which they present for the cultivation of medical and surgical science.

Actuated by these views, the late benevolent Professor of Logic in the University of Glasgow, with a few friends, set himself to the work of commencing an Infirmary in this city, in the year 1787, with all that zeal and philanthropy which so much distinguished him. In this laborious and praiseworthy undertaking, it could not be imagined, that Professor Jardine would be able to prosecute inquiries, either as to the medical or surgical department, with that accuracy and effect which was necessary,—here, however, he fortunately found a most valuable and active coadjutor in the late Dr Stevenson, who, till his death, which occurred in 1789, continued to give much useful assistance and advice, in all that concerned this infant establishment.

On the 5th of June, 1787, the first meeting of the friends of the institution was held, when Provost Riddell, then chief magistrate of the burgh, was called to the chair, and Professor Jardine unanimously elected secretary. On this occasion little was done, except the appointment of a committee to collect subscriptions, and to search for a proper situation for the intended Hospital, Dr Stevenson being appointed convener.

The second general meeting of the subscribers took place on the 5th of January, 1788,—the late benevolent and charitable David Dale in the chair. The various reports of the committee, formerly nominated, on the site of the Hospital, the plans and estimates, and the mode of administration, were read, approved of, and ordered to be printed, and distributed, and another general meeting was appointed to be held on the 6th of February, more maturely to consider of their contents. At the meeting held on the 6th of February, the site of the Archbishop's Castle was unanimously agreed upon, as the most elegible for the future Hospital; but being held of the crown by the Earl of Dundonald, whose lease extended till 1793, a committee was appointed to make application as above, and also to the Lords of his Majesty's treasury, and the Barons of the Exchequer, for a grant of the ground. It was also recommended at this meeting, that a proportion of the sums subscribed should, without delay, be called up, and Mr Archibald Graham, late cashier of the Thistle Bank, (a gentleman who, for upwards of 16 years, enthusiastically devoted himself to this good cause,) was unanimously chosen Treasurer. From the protracted correspondence in which the worthy Hospital Secretary became involved with the Earl of Dundonald, and the officers of the crown, a definite and satisfactory answer was not obtained to the applications above referred to, till near the close of the year 1788.

The year 1789 was memorable in the Hospital annals, by the reception of a splendid mortification of £300, by the late James Coulter,—a commencement of those legacies which have so much contributed to the independence of the Institution. The exertions of the committee, during the two subsequent years, were directed to the obtaining of a royal charter, and in maturing those plans, surveys, and estimates, which were to guide them in all their future operations.

The royal charter was obtained on the 1st of December, 1791, and the feu grant of the site of the Archbishop's Castle, and adjoining grounds, passed the Exchequer, and court of Chancery in Edinburgh, towards the commencement of the year 1792. I must here record, that to the generosity and humanity of all the legal gentlemen employed in conducting this business, the Institution stands for ever deeply indebted, the amount of fees in both the above cases, having been unanimously subscribed to this infant establishment. Before proceeding to the description of the ceremonial of laying the foundation-stone of the Hospital, I think it of some importance to say a few words on the advantages of the situation of the Archbishop's palace, as, upon the superi-

ority of hospital topography much of the success of the practice of the attending medical men in general depends.

The city of Glasgow, lying as it did, at this early period of its commercial history, on the north bank of the river Clyde, and occupying a parallelogram of about a mile from east to west, and half a mile from south to north, presented to the eye of the medical topographer scarcely a single undulation above flood-tide mark, and was also so closely built, and its streets so narrow, that though a central spot was desirable for the site of an hospital, still, the objections above mentioned were deemed insurmountable. Towards the northern boundary of the above oblong plane, a bold ridge of hills or brase extends from the Molendinar Burn on the east, to St Enoch's Burn on the west, rising in the centre to Rottenrow, a height of more than 100 feet, and from this it gently slopes eastwards and westwards to the above water courses. Still farther northwards, and on a gentle eminence of the table land which extends from the ridge of hills above described, stood the Archbishop's Castle; and though the Protestant clergy, in modern times, are said well to understand the advantages of situation, for their places of residence, in no part of the island could a more beautiful and imposing site be found, than was this the favourite abode, for many centuries, of the metropolitan Bishop of the West of Scotland.

But, besides the beauty of the situation, and the advantage of such an elevation above the surrounding plateau, there were at this remote period other points which were then thought of far more importance. I mean the facility of procuring an abundant supply of good water, and the impossibility of any nuisance being erected in the immediate vicinity, which might either obstruct the light, or deteriorate the air of the hospital inmates. If to these be added the facility of water drainage, the vicinity to the largest cemetery in Scotland, and the free airing grounds surrounding the establishment, I think it will be admitted, that a more advantageous situation for an Infirmary could not, at this period at least, have been found.

It is true much change has taken place, both in the situation of the city, now so much extended, and also in regard to the neighbourhood of the Hospital, surrounded as it has been by two of the largest chemical laboratories in the world. Still, however, I am of opinion, that the situation of the Glasgow Royal Infirmary is superior to that of any other hospital which I have seen either at home or abroad.

The following is an account of the ceremonial of laying the foundation stone of the Infirmary, as verbatim copied from the records; and when it is recollected how much benefit to this vast community has resulted from this godlike undertaking, I think few will fail to derive amusement, if not advantage, from the perusal of this interesting though antiquated document, drawn up, as it seems to have been, by the venerable father of the Institution:

GLASGOW, MAY 19, 1792.

Yesterday the foundation stone of the Glasgow Royal Infirmary was laid, amidst a vast concourse of people assembled on that occasion. The procession for that purpose took place in the following order:

- 1st, The Lord Provost, Magistrates, and Council, preceded by their proper officers.
- 2d, The Principal and Professors of the University in their gowns, with their mace carried before them.
- 3d, The Faculty of Physicians and Surgeons.
- 4th, The Dean of Guild and Council of the Merchants House.
- 5th, The Deacon Convener and Members of the Trades House.
- 6th, The Mason Lodges according to their seniority.

The subscribers to the Infirmary, who did not belong to any of these bodies, joined such of them as they found most convenient.

The above orders of men, having assembled about 11 o'clock in such places as had been agreed on, proceeded separately to St Andrew's church at 12 o'clock, and there occupied those galleries in the church that had been

appointed for them in a printed regulation of the order of the procession. A most excellent and suitable sermon was preached by the Rev. Wm. Taylor of St Enoch's church, from Matthew xxv. and 36th verse,—"I was sick, and ye visited me." At the close of the service an Anthem, and the following Hymn composed for the occasion, by the Rev. Mr Headrick, was sung by an excellent band under the direction of Mr Fergus:

Go, bid the spacious dome arise, And point its turrets to the skies; Not planned for idle form and show, But to alleviate human woe.

Here shall the toil-worn wretch have ease, From griping pain, and fell disease, Nor sink remote from pitying eyes, And blame the unrelenting skies.

How many forms does death assume, To hurl his victims to the tomb! What evils crowd our fleeting span, And prey upon the life of man!

But medicine here shall ply her art, To soften pain and cheer the heart; Shall hold with death a glorious strife, And trim the glimmering lamp of life.

God, from his lofty throne above, Sees and approves the deed of love; And those who misery's cry regard, Shall meet in heaven a sure reward.

For there the prayers of life restored, Shall rise to heaven's Almighty Lord, And draw his choicest blessings down, Their works of charity to crown.

Then let us join with heart and hand, To raise this glory of our land, Which shall to latest times declare, To ease the wretched was our care.

Immediately after divine service, the several bodies of men composing the procession, left their seats in the church in the above-mentioned order, and, preceded by the band of Instrumental Music belonging to the 37th Regiment, proceeded from St Andrew's church along the Saltmarket and High Street to the Castle Yard, where the buildings of the Infirmary are to be erected,—the band playing the King's Anthem till they approached near the place prepared for the foundation of the building, when they played, "Come let us prepare," &c.

As soon as the Lord Provost and Magistrates approached the spot where the foundation stone was to be laid, the whole procession stopped; the band, in the meantime, playing, "On, on, my dear brethren," &c. The Masters and Wardens of the several Lodges left their stations, and advanced to the Lord Provost, who, assisted by them and James Adam, Esq., Architect, and Messrs Morrison and Burns, the contractors, placed the coins, writings, and inscriptions, in the following manner:—

Two crystal bottles cast on purpose at the Glasgow Glass House, were deposited in the foundation stone. In

one of them, were put different coins of the present reign; in the other, different specimens of the Glasgow muslin manufactures in their present state of improvement, a printed copy of the charter of the Glasgow Royal Infirmary, a copy of the Glasgow newspapers of this date, and a writing containing the names of the present Magistrates and Council, and the Principal and Professors of the University, &c. There was deposited also a tin plate properly prepared for the purpose, with the following Latin inscription on the upper side:

Annuente Deo. Opt. Max. Regnante Georgio III. Principe Munificentissimo Ædium Ad Morbos Pauperum Sanandos A. Civibus hujusce urbis Aliisque piis Scotiæ incolis Pecuniis sponte collatis Extruendarum Primum hunc lapidem Posuit Jacobus M'Dowall Armiger Urbis Glasguensis Præfectus Adminstratorumque operis perficiendi Præses XV Kal. Junii Anno Æræ Christianæ MDCCXCII Architectus Roberto et Jacobo Adam, Q. F. F. Q. S.

After the above deposits were made, the Lord Provost, in the character of Master Mason, applied the square and plummet in the usual manner, and the ceremony of the Cornucopia being performed, the master gave three knocks with his mallet, saying, "May the Grand Architect of the Universe grant a blessing upon the foundation stone we have now laid, and may He enable us to raise a superstructure upon it, which, to the latest ages, shall prove a house of refuge and of consolation to the diseased poor of this city and neighbourhood." After this the brethren gave three huzzas, which were accompanied with the joyful acclamations of an immense crowd of spectators, highly gratified with the spectacle. The work being finished, the masters and wardens of the several Lodges returned to their places.

In the evening, Mr Kemble, the manager of the theatre, generously gave the proceeds of a play for the benefit of the Infirmary, which, with the collection at the church door, amounted to the sum of £105 16s. 11½d.

The committee of subscribers to the Glasgow Royal Infirmary, on behalf of the poor and miserable, desire to express their grateful acknowledgments to the respective bodies of this city, who honoured the procession with their countenance and support, and particularly to the Mason Lodges for the numerous attendance of the brethren. They flatter themselves, that the arrangements made for the conduct of the procession were such as in general met with their approbation. In the whole of their labours in this business, the committee have but one object in view,—the speedy and effectual relief of human misery; and they are confident, that all who embrace this object, and embrace it in the manner which they do, will be kindly disposed to overlook any unintentional omission, if any such has happened.

To the concourse of spectators who accompanied the procession, the committee desire to express the sense they have of their decent and orderly conduct. While this will prove a pleasing and encouraging motive for them to

persevere in their labours, they hope that the exertions which they and many others of their fellow-citizens make in the cause of humanity and charity, will prove a successful and prevailing motive to honesty, sobriety, and industry, among the lower ranks, on which the strength and prosperity of a nation ultimately depend.

GEO. JARDINE, Sec.

The first meeting of the general court of subscribers, and contributors, constituted under the royal charter, was held on the 7th of January, 1793, when the committee of management, previously existing, having reported the state of the various matters which had been under their charge, received the cordial thanks of the meeeting. In terms of the charter, the general court then proceeded to the election of ten Managers, from the general body of subscribers, the names of which gentlemen, as well as of all those who have served as Directors, from the above period, till the present time, may be found in the tabular list, prefixed to Chapter V. On the 6th of January, 1794, the second general meeting of the subscribers took place, when a report having been read, as to the state of the funds, building operations, &c., the court expressed itself highly pleased with the simplicity and elegance of the design carried into execution, and also, at the despatch with which the contractors had fulfilled their respective engagements. So much activity and zeal indeed was displayed by every individual concerned in this philanthropic cause, that on the 8th of December of this year, the Institution was thrown open for the reception of the diseased poor.

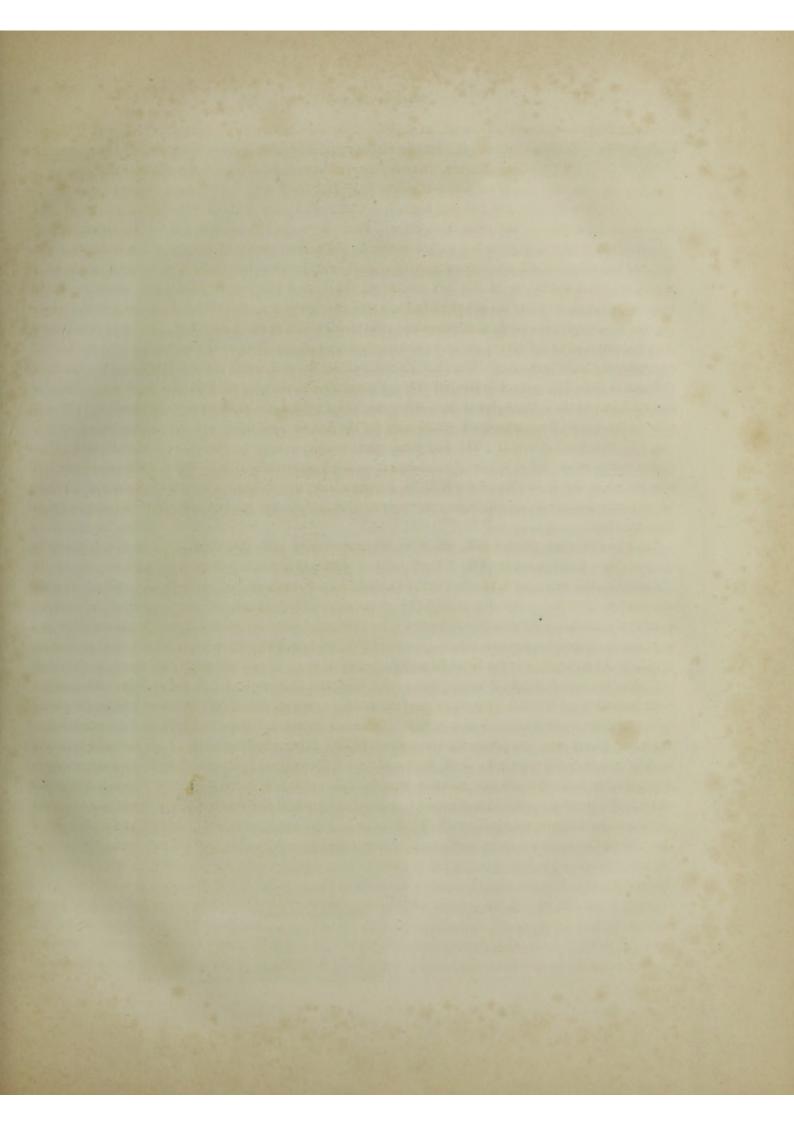
Instead of proceeding to a detailed description of the Hospital as finished in 1794, I think that a short sketch of the whole establishment as completed in September 1832, will be more satisfactory, referring those who may be more interested in the interior arrangements, to the very accurate ground plan, which I have prefixed to Chapter IV. The lithographic plate of the Archbishop's Castle, prefixed to the present chapter, is intended to represent the ancient site of the Hospital, and the surrounding scenery, but a more correct idea of this last will be obtained by a reference to the front view of the Hospital, which I have placed at the commencement of the next chapter. In this plate the Cathedral of St Mungo, which is well seen in the distance, adds much to the general effect, and if to this, we take into view, the great necropolis of the West of Scotland, the rugged and romantic scenery of the Molendinar, and the cloud-capt colossal monument of the illustrious champion of the Reformation, a more imposing and sublime scene cannot well be imagined, than that presented to the eye of the philanthropist, on his suddenly emerging from the winding, steep, and suburban tenements, of upper High Street and Kirk Street.

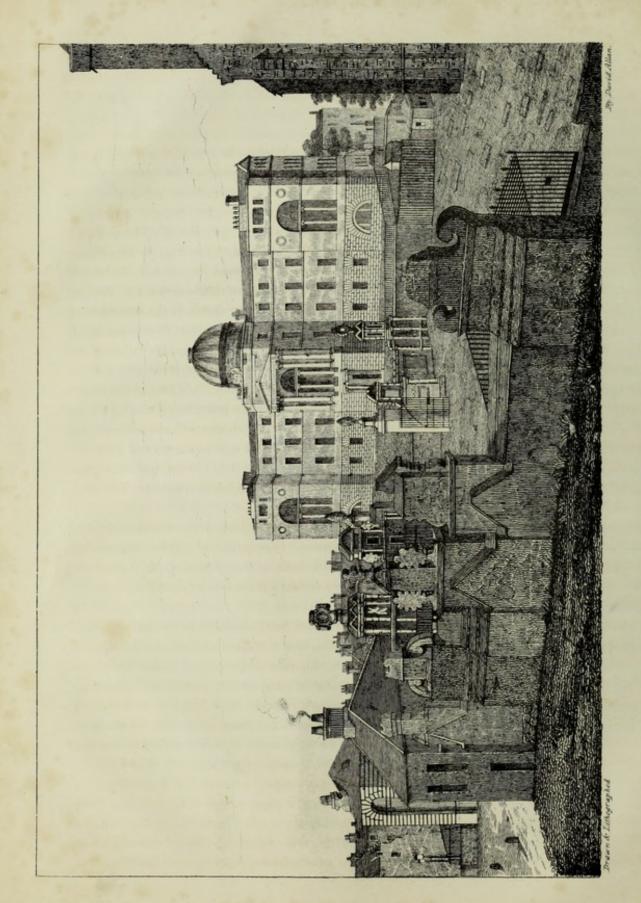
On alighting at the main approach, you enter a large vestibule surrounded with seats, where, after the hour of visit, the sick poor receive advice gratis from the physicians and surgeons of the establishment, and where those patients who have lines of admission from subscribers, must wait an examination by the above-mentioned office bearers, before being sent to their respective wards. On each side, and a little in advance of the vestibule are two short passages, which conduct to the medical wards, Nos. 1st and 2d; that on the right being appropriated for males, and that on the left for females; and each capable of accommodating, with the three attached side rooms, 19 patients. The height of these, as well as the other wards, which are all on the same construction, is upon an average about 12 feet, and by consulting the ground plan prefixed to Chapter IV. the length and breadth of every the most minute part of the Hospital may thus easily be ascertained. Immediately above the main vestibule, and on the second floor, is a large and elegant room for the meetings of the Directors, and the consultations of the Medical Officers,—the walls of which are decorated, not with the grotesque faces, staring out of canvass, of the quondam office bearers; but with the far more honourable and imperishable names of those great benefactors of the Institution, to whom may be applied the adage of the Divine Founder of our religion, so frequently copied into the interesting annual Reports of this establishment: "For as much as ye have done it unto the least of these my brethren, ye have done it unto me."

Corresponding to the consultation room, on the third floor, is a large and elegant surgery, where all the instruments, bandages, fracture apparatus, &c. &c., are ranged; and attached to the east compartment of which, is the sleeping apartment of the House surgeon. Surmounting the whole, and situated in the centre of the building, is the operation room, the dome of which is well seen in Plate II. of this work. It has one main entrance from the central stair of the Hospital, and one on each side from the surgical wards No. 7 and 8. The centre area is about 42 feet in circumference, and rising in a circular form all around this surgical, and clinical arena, may be remarked five ranges of high-backed steep benches, for the accommodation of at least 200 individuals. The whole of this splendid and commodious operating theatre is crowned by the large central dome formerly alluded to, whose vertical lattices, descending to a considerable depth, thus throw the light to great advantage on the table of the operator. This beautiful termination to the edifice, which rises to the height of about 35 feet above the floor of the operation room, is supported on twelve chaste pillars of the Ionic order, and by this means, as in the construction of all the other parts of the building, convenience, simplicity, and elegance, are seen mutually to harmonise and assist each other. The central division of the Hospital, which extends northwards, and which is well seen in Plate III, prefixed to Chapter III, was commenced in the year 1814, and finished during 1815, and without injury to the original plan of the building, has added much to the accommodation of the public. It contains on the ground floor an excellent dining-room for the matron, apothecary, and clerks, with sleeping apartments for the female servants. The four floors above consist, as may be remarked in the ground plan, of double wards, which can with ease accommodate at least 80 additional patients. To each of these wards are attached, as in the front part of the Hospital, a nurse's-room, water-closet, and small corridore and staircase which communicates with the kitchen, apothecary's shop, dead-room, &c. &c. situated on the ground floor of the front building.

The Fever Hospital, which is well seen in the lithographic plate prefixed to Chapter III. was commenced in the year 1825, half finished in 1826, and completed in 1832, and will accommodate with ease 220 patients.

Those who feel interested in the statistics of hospitals, may, by consulting the ground plan prefixed to Chapter IV. and taking 12 feet as the average height of all the floors of both establishments, easily ascertain the exact number of cubic feet of air which every patient is here allowed. This will enable him to institute those interesting comparisons between this and other hospitals, which the celebrated Tenon thought it not unworthy of his great talents, to draw in regard to the Hôtel Dieu of Paris, and other continental Infirmaries, during the last century, and which led to such important results, both to that, and other similarly neglected institutions. The salubrity of an hospital is not however, in my opinion, so much owing to the number of cubic feet of air which each patient enjoys, as to the manner in which that air is distributed and renovated. If, as in many of the continental hospitals which I have seen, particularly the Hôtel Dieu of Lyons, the wards are of such vast proportions as to accommodate several hundred patients, deaths from colds and inflammations must be the consequence, even though the air and heat is admitted and renovated upon the most approved principles. In this Hospital, though the windows do not extend to the floor, as some have recommended, still, by the construction of the fire-places, and the position of the main passages leading to the wards, an uninterrupted change of air is constantly taking place, which can with facility be regulated, by making the outer vestibule door, the grand ventilator.





GLASGOW ROYAL INFIRMARY,

FROM KIRK LANE.

CHAPTER II.

The first Annual Report of the Glasgow Royal Infirmary, which was printed in the year 1796, after exhibiting a list of the Directors and Office-bearers for the preceding year, proceeds to congratulate the benefactors and friends of the Institution, on the success of their humane and generous efforts in behalf of their poor and afflicted fellow-creatures. It then adverts to the number of patients, admitted and discharged, and thereafter proceeds to acknowledge with gratitude, the liberal support which the Directors had met with, from the inhabitants of this city and the adjacent country, and in a particular manner for the active and zealous aid, of the clergy and inhabitants of the Synod of Glasgow and Ayr, who, on the recommendation of the above body, came forward with liberal contributions in its support. At the termination of the Report, an admonition is given their successors in office, on the propriety of economy in management; which is followed by a feeling and eloquent appeal, to the benevolent in all parts of the country, to exert themselves in support of the infant establishment. This first Report was drawn up (as were all the succeeding ones for a long series of years) by the philanthropic and amiable father of the charity, the late George Jardine, Esq., and breathes throughout that genuine spirit of the philosopher and the Christian, which so highly distinguished the above accomplished and successful teacher. Subjoined to the Report is a statement of the funds of the Institution, the diseases treated, the operations performed, with an accurate list of all the subscribers, contributors, &c. This method of drawing up the Glasgow Infirmary Reports has continued with slight modifications and improvements till the present time, and it is in consequence of being put in possession, of a complete series of these correct and authentic documents, that I have been enabled to construct those tables of medical and surgical diseases prefixed to Chapter VIII., which I hope will prove of essential service to my professional brethren both here and elsewhere.

It is not my intention in this chapter to go much into detail on these yearly reports, as the substance of them, has been already extracted, in the tables to which I have above adverted. Some important regulations, however, have been occasionally enacted, and some material changes effected, both in the constitution and laws of the Hospital, which well deserve notice, and can be, with more propriety discussed in the present chronological sketch, than in the subsequent statistical department of the work.

In the Annual Report for 1799, I remark that a plurality of offices being combined in one and the same individual, had become so hurtful to the interests of the Institution, that a medical committee was appointed to report "on the necessity of a resident apothecary." Prior to this date, the offices of house-surgeon and apothecary were conjoined, as may be seen by a reference to the list of office-bearers, prefixed to Chapter V., and where will be found first in the list the name of John Burns, now Professor of Surgery in the University of this city. No sooner was the Report above referred to, given in, than it was unanimously approved of, and a resident apothecary in the person of the Rev. J. Allan, elected. This venerable functionary continued for upwards of 13 years, most faithfully to discharge the important duty, not only of apothecary, but also of chaplain to the Institution, and would, it is believed, have died in the good cause, had government not seen fit to translate him, at the age of 65, to the more lucrative, and more honourable situation of pastor to the Scottish Church, established at Fort St George. After the above appointment of a resident apothecary took place, every thing in the Hospital, went on smoothly; the wards, as necessity demanded, were gradually furnished,—the greatest satisfaction was on all hands manifested, at the efficiency and economy of the administration,—and by well-timed frugality,

and by the liberality of the inhabitants of this city, and the whole West of Scotland, the capital of the Institution amounted, in the first 10 years of its progress, to £8,000.

In the Report for the year 1805, an event is recorded, of so praiseworthy a nature, that to pass it by, would evince a want of gratitude to the memory of those who thus handsomely aided our rising Institution. In such a case, I think it is in better taste to transcribe the simple but touching note on the walls of the Hospital, which the Directors caused to be inscribed, to commemorate this splendid gift, than for me to pass any high-flown eulogium on the donors. "On the 6th day of May, 1802, the First Regiment of Royal Glasgow Volunteers, commanded by Lieutenant Colonel Corbett, previous to their reduction, appropriated the whole surplus of their funds, amounting to £1200, for the benefit of this Institution. During an eventful period of eight years, their conduct was marked by loyalty and patriotism. When their services were no longer required, their last act was dedicated to beneficence. The thanks of their king and country have recorded the first; in gratitude for the last, the Managers of the Glasgow Royal Infirmary ordered this inscription."

The following very amusing and interesting paragraph occurs towards the conclusion of the Report for 1807; and, as illustrative of the constitution of the Hospital, it well deserves a place in its early history: "Some resolutions (see Appendix E.) regarding the medical management of the Hospital have been passed by the Directors, during the last year, and have since been circulated among the members of the general court, who are now to vote on the propriety of passing them into laws. The Directors who support these resolutions, were decidedly of opinion that some changes in this department were desirable; they have investigated the subject fully, deliberately, and impartially, and they are convinced that the proposed changes will be of essential benefit to the Institution. They are anxious further to add, that nothing but this conviction, strongly impressed on their minds, would have induced them to oppose their opinions, to those of several gentlemen now in the management, to whose unwearied exertions the Infirmary has been long and deeply indebted." Then follows the concluding paragraph of the Report to which I would beg leave to draw attention as demonstrating the valuable nature of the charter, and the popularity of the whole code of laws for the Hospital management: "There were also read to the general court, reasons of dissent (see Appendix F.) by some of the managers, against the above resolutions, and after hearing several gentlemen for and against these resolutions, the general court appointed the managers to print and publish the whole, or such parts as they may think proper, and with regard to the resolutions submitted to their consideration, the general court, on a division, reject the same, and refuse to enact them as laws."

From the commencement of the Institution till about the year 1807, no salaries were allowed the attending Physicians and Surgeons; but for some years prior to this date, the funds of the Hospital had so improved, and the duty of the attending medical men had become so onerous, that the following very handsome and well-merited compliment was bestowed on them by the Directors, which is thus expressed in the Annual Report: "The general court will observe that the Directors of this Institution have, since its foundation, annually expressed their obligations to such of the Physicians and Surgeons of this city as have given a faithful and punctual attendance there gratis, and they have also frequently expressed their hope of being enabled to make some compensation to them for such important services. The great increase of the medical and surgical business of the Infirmary, encroaching more and more every day upon the private business of the Physicians and Surgeons, together with some circumstances which have occurred lately in the medical arrangements, induced the Directors to call a general court, in order to consider the propriety of giving such salaries to the Physicians and Surgeons, as the present state of the Infirmary funds will permit. This proposal having been laid before a general court, which met in August, and maturely considered by them, they resolved 'that services so essential to the very existence of the Infirmary, and so beneficial to the public, should no longer be altogether unrewarded. They therefore authorised the Directors to grant such salaries to the Physicians and Surgeons, as the present state of the Infirmary.

ary funds will permit, and recommend to future Directors, to make such additions to these salaries from time to time, as they shall think just and reasonable.' Following out the above recommendation of the general court, the Directors immediately thereafter appointed a salary of £30 per annum, to be paid to each of the attending Physicians, and of £10 per annum to all the Surgeons, with this important condition attached, that no Physician or Surgeon shall be entitled to his salary till he have attended two years gratis in the Infirmary."

During the year 1810, another very important notice upon the above subject occurs, and as bearing upon the revenue of the Hospital, and its efficiency as a medical school, deserves particular observation: "The Directors have the satisfaction (the Report states) to find themselves in the situation, to which the general court formerly referred, as to the salaries of the attending medical men. They have caused to be laid before them a statement of the fees paid by the students attending the Infirmary, and find them to exceed the sum of £200 per annum, with the prospect of a still greater increase; and therefore, they, in the spirit of the Report formerly alluded to, and impressed with the just and equitable considerations in the said Report, appoint a salary of £50 per annum, to be paid to each of the Physicians, and £20 to each of the Surgeons upon the same condition—that no Physician or Surgeon shall be entitled to his salary till he shall have attended two years gratis at the Infirmary. From this statement (the Report adds) it appears that the salaries of the medical establishment amount only to £180 per annum, which is a sum still below the average fees paid by the students, upon which, the Physicians and Surgeons, have, in all such Institutions, a very obvious claim."

In the year 1811, the Institution sustained a severe loss by the death of one of its most valuable and faithful guardians, whose short obituary is thus given in the Annual Report for 1812: "The Directors have to express their deep sense of the loss which this Infirmary has sustained by the death of James Duncan, Bookseller in Glasgow, who, as a Director since the foundation of the Institution, carefully watched over its interests, and spared neither labour nor trouble of any kind that could prevent unnecessary expense, or increase the comfort or accommodation of the patients."

By a perusal of the resolutions marked E, and the reasons of protest marked F in the Appendix, the reader will not fail to understand the nature of the following communication, which was made the Directors by the venerable father of the Institution during the year 1815. At a quarterly meeting of the Directors, held on the 6th February, 1815, a letter was read from Professor Jardine, resigning, for satisfactory reasons, his office as Manager, upon which it was unanimously resolved: "That the grateful acknowledgments of the contributors of this Institution are due, and that the warmest thanks of this meeting be given to G. Jardine, Esq., for the parental charge which he has taken of the Institution since its commencement; for the unwearied benevolence with which he has prosecuted its interests; and for the zeal, fidelity, ability, and attention, with which, for a period of above twenty years, he has uniformly discharged his duty as a Manager."

In conformity with the instructions of a general meeting of the Hospital subscribers, specially called for the purpose, on the 12th of June, 1816, the central additional building, which extends northwards, was commenced. This extension of the house was required, not only from the increased population of the city, but from the overcrowded state of the wards, which at once obstructed recovery, and generated disease. The complement of the Hospital, which in the last chapter I stated at 150 patients, at one period of the year 1815, was increased to 178 patients, the Managers' consulting room having been appropriated for the accommodation of the public. Typhus Fever had increased to a most alarming extent, and Hospital Erysipelas had begun to make its appearance in several of the wards. In this fearful situation, the Directors deemed it their duty at once to appeal to the public, and most fortunately they were not disappointed. The resolution to strike at the root of the evil, by the addition above-mentioned, was unanimous, and the advantages derived from it, were so great, and immediate, that I think I cannot do better than state them in the words of Dr Millar, as expressed in his Report for

1816. "Six months have nearly elapsed since this long desired enlargement to the Infirmary, has been opened for the reception of patients, and in point of external appearance, as well as interior accommodation,—in affording, not only new facilities of cure, but an effectual barrier against the spread of contagion; joined to its admirable convenience of communication with the former edifice, the Directors can say with confidence, that it has been found to fulfil, in the most ample manner, whatever expectations may have been formed of its importance and utility. Indeed, without its aid (the Report adds) the whole building previously existing, must have, of late, very imperfectly served its purposes to the public, crowded as it was by such an unwonted number of patients, owing to the extreme pressure of the times, and without its assistance, some of the most miserable objects must have inevitably been turned away from the door. In particular, it has been found of incalculable use, as a receptacle for persons with low fever, the multitudes of whom, flocking from the closses, and ill-aired alleys, and lanes of the city, have of late, exceeded all precedent."

So much has of late years been said, as to the legality and necessity of applying the funds destined for the support of the poor to the eradication of Typhus fever, that I make no apology at present, for entering at some length on the history of this contagious disease, as exhibited in the Annual Reports of the Hospital, from the year 1817, to the present time. During the course of the year 1817, in consequence of the alarming prevalence of fever, the Directors of the Infirmary were under the painful necessity, of receiving into the Hospital, a proportion of Typhus patients, much greater than was consistent, either with the original purposes of the Institution, or with the rights and privileges of the subscribers. So much indeed, during this year, had fever prevailed, and so urgent had the demands for admission to the Infirmary become, that the Directors were led to be less scrupulous in regard to recommendations, than in more healthful times, until it was found that the number of fever patients sent into the house, by the magistrates of the city alone, was so great, as to render it impossible for them to continue this practice, without the most serious detriment to the funds, and without injury to the rights of the other contributors. It was therefore unanimously resolved, on the 3d December, 1817, That, henceforth, every individual, body corporate, or society, which shall send more patients to the Infirmary, than their contributions or subscriptions entitled them to recommend, shall be subjected to pay at the rate of £3 for every patient so sent, and that, even upon these terms, patients shall be admitted, only to such an extent, as not to interfere with the rights and privileges of the ordinary contributors and subscribers. This resolution, which was brought under the view of the general court, in January 1818, met with unqualified approbation. The difficulty of confining the admission, of fever patients in particular, to the strict terms of the above regulation, was found, however, to be so great, that at the first meeting of the Directors, after the election in 1818, it was resolved to admit fever patients, on the recommendation of the public bodies of Glasgow, to the amount of 4 patients, for every £100 sterling of subscription, the right of recommending, to be assigned to the sitting magistrate of the city, for the time being.

Against this resolution a protest was taken, the reasons of which were given in at a quarterly meeting, held on the 2d of Feb., and after being read, were subscribed by no less than ten of the Directors; upon which, at the above meeting, the Directors unanimously rescinded the resolution, of the 16th January; but, willing to accommodate the magistrates of Glasgow, and above all, desirous of doing what seemed most conducive to the public welfare, they at the same time resolved—That as the magistrates of this city, representing the corporation, are subject to have more applications for admission into the Infirmary, than the representatives of the other corporate bodies, the Directors of the Infirmary, agree to recommend to the first general court that may be held, that the said magistrates shall be allowed to send, annually to the Infirmary, 35 patients, and that for all patients exceeding that number, they shall be liable to pay, at the rate fixed by the Managers, at their meeting held on the 5th of January 1818. And being persuaded of the urgent necessity of adopting this resolution, the

Managers unanimously agree, in the confidence of the approbation of the general court, to take upon themselves the responsibility which attaches to the immediate adoption of the regulation.

Notwithstanding the latitude of admission of fever patients, thus conceded to views of expediency, the Directors soon found, that it was impossible for them to discharge their duty to the public, and their constituents, without, either encroaching still more on the rights of the subscribers, or imposing a very troublesome duty, on a most benevolent, and respectable body of gentlemen in this city, who had now formed themselves into an association, for the suppression of Typhus Fever, which continued to rage to a most alarming extent. In this difficulty, an appeal was made, in the month of July, to a general court, at which a regulation was passed, granting to the above fever committee, the power of sending into the Hospital, Fever patients, upon their own authority, for such time, as the Directors should see proper, it being understood, that preference should always be given, to patients carrying a recommendation, from a qualified subscriber. At a subsequent meeting, however, it was declared, that the adoption of this resolution, and others connected with it, "should not be held as a precedent on the records of the Infirmary." By this declaration, and the resolution itself, which granted this power to the fever committee, only "as long as the Directors shall see proper," the general court testified its determination, that this Institution shall not be diverted from the purposes of its original foundation, any further than appeared absolutely necessary, from the overbearing pressure, of a great and uncontrollable evil. By the judicious, humane, and active exertions which were made, both under the direction of the above fever committee, and also by the Directors of the Infirmary, Typhus Fever, in the subsequent year, was almost wholly subdued; the temporary Fever Hospital, which had been erected in Spring-gardens, was soon enabled to be shut, and the number of fever cases in the Infirmary, for some years, became regularly and progressively less, as may be more particularly remarked, by consulting the table of diseases, prefixed to Chapter VIII.

In consequence of an unfortunate altercation, which occurred between the late Hugh Millar, one of the attending surgeons, (and Director at the same time,) and G. S. Pattison, also one of the attending surgeons, the following resolution of the Directors, was passed at the annual meeting, held in January 1818: "That from and after the first day of November next, it shall not be competent, for any person, to be at the same time a Director of this Institution, and a medical attendant; excepting always, the Professor of Medicine, and the Professor of Anatomy in the College of Glasgow, and the President of the Faculty of Physicians and Surgeons, of that city."

The Annual Reports of the Institution, from the year 1819, to 1826, are full of valuable information, and drawn up, as all of them were, by Wm. Meikleham, Esq., Professor of Natural Philosophy in the University of Glasgow, they exhibit a very favourable specimen, both of his head and heart. In order to do them justice, it would be necessary for me to give copious extracts, but I have already, I fear, too much transgressed the bounds of prudence in this respect, and must therefore content myself at present, by merely glancing at a few of the leading points of interest, in a medical and philanthropic point of view, leaving the Professor's powerful and eloquent appeals in behalf of the charity, to those who may feel interested in this praiseworthy cause. In justice to Professor Meikleham, however, I must here be allowed a passing tribute, to his ingenuity and research, in having constructed for the first time, a table of the Hospital income and expenditure, from its commencement till the year 1824. It proved of great assistance to me in my present labours, and had it not been for his assiduity, and that of his successor, in this work of charity and philanthropy, my present feeble attempt at medical statistics must have proved comparatively insignificant and imperfect.

In the commencement of the year 1822, in consequence of various representations, against the regulations for the admission of patients, the Directors enacted a new code, (see Appendix C.) of a more simple and liberal nature, than that which had been in use since 1794.

From the year 1819, till the month of July 1823, the average number of fever patients, in the Hospital, amounted to 34, and during the above four years, not more than two of the wards of the north wing, required to be used for their reception, so completely had the previous sanatory measures, struck at the root of the evil. In consequence of this exemption from contagion, it was held all along to be an important precautionary measure, to keep at least one of the wards empty, for the purpose of putting it in the power of the medical attendants, to transfer the patients of any of the other wards into it, for a time, so as to have them all cleaned and white-washed, and thus to do every thing possible to prevent or arrest Hospital contagion. From the spread of fever again during the latter part of the year 1823, the above precautionary measures were, unfortunately, under the necessity of being abandoned, the Directors having been obliged to empty two common wards, by dismissing some of the least urgent cases, and crowding those which could not be dismissed, into the other wards, so as to appropriate the whole of the four wards in the northern compartment, to the accommodation of fever patients. At this eventful period, it most fortunately happened, that the Directors had at their disposal, the house of recovery at Spring-gardens, which in 1818 had been devoted to a similar purpose, and which was again instantly refitted, to meet the emergency. So pressing indeed were the demands at this period, for admission into the Hospital, from the spread of contagious fever, that the Directors were obliged to admit, in their Annual Report-"That many instances had occurred, in which it was necessary to defer the admission of patients (properly recommended) for the want of room, and others in which the urgent necessities of the Institution, induced the medical attendants to hasten the dismissal of convalescent patients, whom, in a less crowded state of the house, it would have been thought advisable to have detained.

Among the many splendid benefactions, legacies, gifts, and subscriptions, which, from the commencement of this Institution, have been annually recorded in its Reports, there is one so remarkable, and at the same time so praiseworthy, mentioned by the able and graphic Convener for the year 1824, that I cannot do better than give the narrative in his own words: "William Smith, Inkle weaver in Glasgow, has been a subscriber to the Infirmary since the year 1789. He was regularly in the practice of waiting on one of the Managers, on the first day of each year, and giving a guinea as his annual subscription. He as regularly waited on the same gentleman for his copy of the Infirmary Report, which seemed to more than compensate him for his subscription. He has sometimes been asked whether he was not perhaps giving more than he could afford: 'No,' he replied, 'I can save a little, and my saving cannot be better bestowed.'" He died in December 1823, and by a deed executed by him and his wife, they bequeathed to this Infirmary £50. "They rest from their labours, and their works do follow them."

In the Annual Report for 1824, there occurs the following very important paragraph, and as it imbodies all that is known, with regard to the origin and progress of a kindred and equally benevolent Institution, as the one, whose history I am now attempting to trace, I shall use the freedom of transcribing it verbatim, from the above authentic source.

John Leitch, Esq., of Kilmardinny, who died in the year 1806, bequeathed to the Managers of the Royal Infirmary, the sum of £5,000, to establish an Asylum for the *Indigent Blind*, and for reformed prostitutes. This legacy is noticed in the Annual Report for 1806. The returns from it, were, by Mr Leitch's will, enjoyed by his widow, who died in November 1823. After her death, the bequest came to be open, to its ultimate destination; but difficulties arose as to the best method of giving it full effect. The Directors of this year gave much attention to this subject, and their deliberations were greatly aided by the legal advice of James Reddie, Esq., Advocate. It appeared, that under their present charter, they did not enjoy powers sufficiently extensive, to enable them to hold, and manage the foundations for the benefit of the indigent blind, and of reformed prostitutes, for which the late Mr Leitch bequeathed funds. At the same time it was found, that the defect of power might be remedied, and

effectually supplied by a supplemental royal charter of incorporation for these additional purposes. The fund provided by Mr Leitch, was by him destined solely to the maintenance of its objects. But it was obvious, that an establishment to serve as an Asylum for the Blind, must be in a separate building from the Infirmary. For the erection of this building, and for giving the establishment the necessary accommodations, so as to make it an efficient and useful charity, it appeared to the Directors that a fund will require to be raised in addition to the bequest of Mr Leitch, and only to be procured by an appeal to the public, but which fund must be altogether independent of the funds provided for the Infirmary. And that in consideration of the sums thus raised, the contributors and subscribers to it, must be vested with its management, or associated with the Managers of the Infirmary, in the direction of such an Asylum as shall ultimately be established for the Blind. Under these circumstances, the Directors for 1824, found it necessary to call a meeting of the general court, for the purpose of accepting the trust conferred on the Managers of the Infirmary, and for making that acceptance an act of the corporation, and for giving efficiency to the purposes of the trust. Accordingly, the general court did, on the 22d of September, after expressing their esteem for the memory of the late Mr Leitch, and confirming the acceptance of the trust-Resolve, that it is unnecessary to carry the part of Mr Leitch's will into execution, which relates to reformed prostitutes, both because a provision had been made for them by the Magdalene Asylum, and because, in terms of Mr Leitch's will, it is not imperative on the Directors to carry this part of his intention into effect, till a more ample fund be provided. They further resolved, to form a charitable foundation, into a body corporate and politic, under the name and style of the Glasgow Institution for the Blind, for the purpose of affording them relief, instruction, or employment, This corporation to be managed by the Directors of the Royal Infirmary, in conjunction with other Managers to be appointed by the Town Council, the Merchants-house, the Trades-house, the Faculty of Physicians and Surgeons, and the general body of contributors and subscribers to the new Asylum, who shall be qualified to vote by a contribution of £10, or an annual subscription of £1 1s., and the Directors of the Royal Infirmary were empowered to apply for, and obtain a Royal charter, such as should appear to them best calculated for giving practical efficiency to the objects in view. The Directors, therefore, did prepare and obtain the above charter; and, at the present time, the Glasgow Blind Asylum, ranks inferior to none of our city charities, either in the efficiency of its management, or in the liberal manner in which it has, since its establishment, been supported.

It is stated in the Report for 1825, that the Directors had been placed in similar circumstances, to those so feelingly described by some of their predecessors, both in 1824, and during the years 1816 and 1817. They frankly acknowledged that they had not been able to give accommodation to all the patients who were recommended to them for admission, and whom they would have thought themselves bound to have received, if there had been room. Fortunately, however, the medical attendants of the Infirmary, by exercising judicious care and humanity, in giving a preference to the more urgent cases, relieved the Directors from much responsibility and obloquy. It is remarked also in the Report of this year, that the number of fevers amounted to more than one third of the whole number of patients; and it is also well added, that the number of ordinary medical and surgical cases, had been less, which undoubtedly proved that the accommodation had become altogether inadequate to the reception of patients having good claims for admission. Of the various plans suggested to obviate these embarrassments, the one that was thought most advisable was the erection of a fever Hospital behind the present building, which, though completely separated, would yet be near enough to allow the whole to form one establishment, and to be under one system of management, of medical treatment, and of domestic economy.

To insure as much as possible that perfect regularity which is essential, not to the domestic economy only, but to the higher objects of this valuable Institution, the Directors, during the year 1825, revised the whole of the former regulations for conducting every department of the Institution; and by referring to the Appendix B, where these regulations are at length inserted, it will be found, that such a view has been exhibited of the whole business of the establishment, and of the particular duties of the officers, attendants, servants, and patients, as is admirably fitted for the prevention of irregularity, and for facilitating the accomplishment of the important purposes for which the charity was designed.

CHAPTER III.

The Reports of the Glasgow Royal Infirmary for the last five years, which, with one exception, were drawn up by my friend, Dr Corkindale, evince much accuracy and professional acumen; and had the same laudable spirit of inquiry, which he and the other Directors recommended, been followed up by the servants of the Institution, an hospital statistical document might now have been produced, of a kind superior to any, which, either here, or any where else, has ever been presented. In proof of what I have above asserted, it will be necessary, as on former occasions, to revert to the Reports themselves, and in that for the year 1827, the following remarks are inserted: "It having been long matter of regret, that the Reports of the Infirmary had not been rendered so available as they might be, to the purposes and improvement of the Glasgow Medical School, it was resolved in 1826, by the Directors of this Hospital, that in future, besides the usual annual record regarding the income and expenditure of the charity, another should be prepared, strictly professional, or devoted solely to the medical and surgical details of the Hospital. In accordance with this plan, the following resolutions were adopted by the Directors:

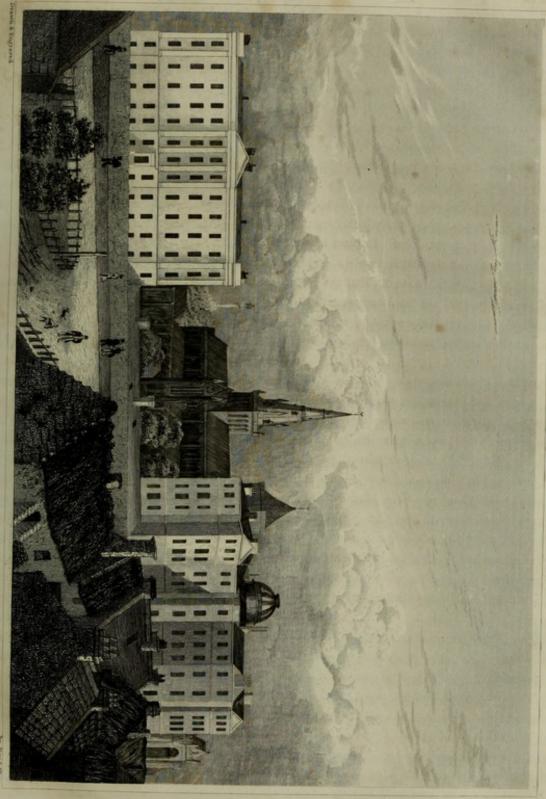
lst, That, for obvious reasons, it becomes highly desirable, that as much light as possible be thrown on the nature, localities, usual progress, and termination of the diseases received into the Infirmary, from Glasgow and the wide district around, so that materials be annually furnished for a medical and statistical history, or medical and statistical tables of the state of health and disease in the said city and district.

2d, That with this view, each Physician and Surgeon, more especially each *Physician*, besides noting, as usual, the names and ages of his patients, be requested also to specify the following particulars: their trade or occupation, their place of residence,—if in Glasgow, what part of the city; if in the country, what shire or county; whether their abodes be in dwellings apart from others, or in hamlets consisting of a few houses, or in towns or villages; with remarks, if such occur, on the healthiness or unhealthiness of the situation.

3d, That in order to procure an accurate meteorological journal of the weather, a barometer, thermometer, and rain-guage, each of the most approved construction, be established at the Infirmary; that an exact note of the temperature and weight of the atmosphere, of the quantity of rain, and also of the points of the wind, be taken, and recorded each day by the apothecary, or some of the clerks appointed for the purpose.

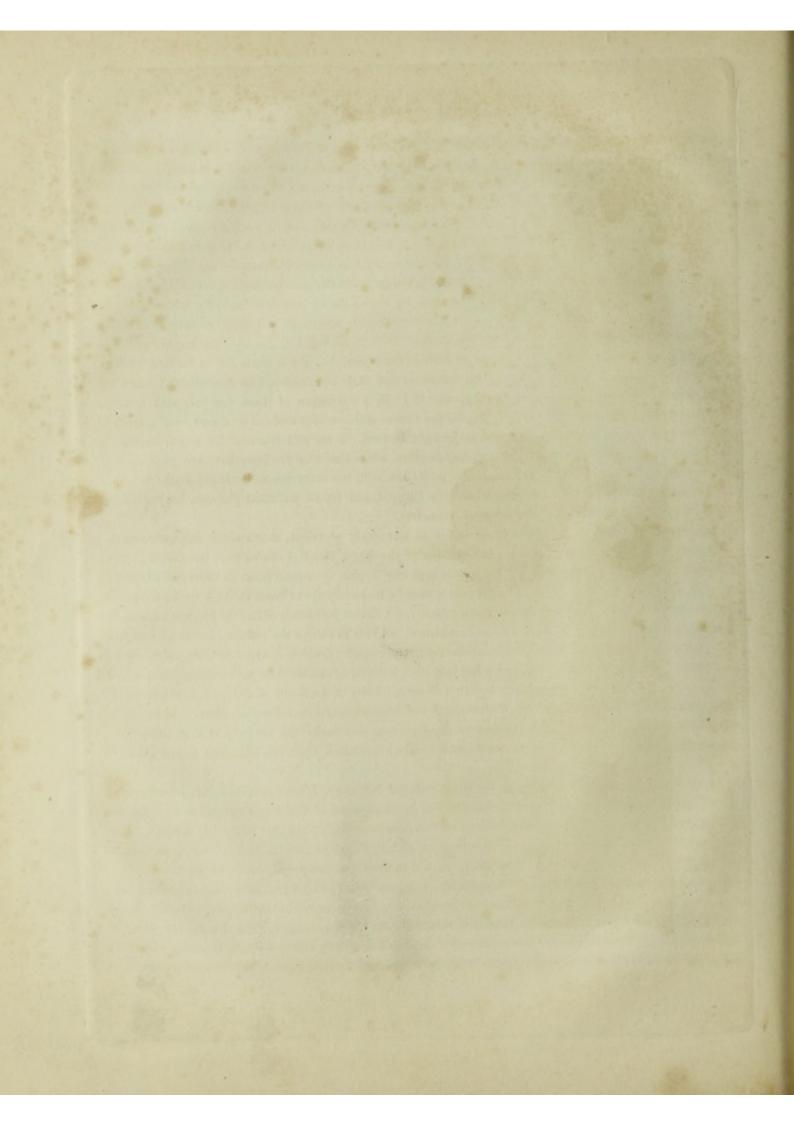
4th, That each Physician be requested to lay before the medical committee on the last days of December, a list verified by his signature, of such diseases as he has treated during the preceding year, with the results as to complete recovery, partial amendment, or death. That each surgeon be requested to deliver at the same period, a similar detail, also verified by his name, and embracing the same circumstances, together with a list of operations performed; also, if the operation admitted of different modes, specifying the mode pursued; as, for instance, if amputation, whether by the circular incision or the flap; if lithotomy, the particular mode preferred, and the instruments employed, &c.

In accordance with the above resolutions of the Directors, a short sketch of the medical and surgical practice of the Hospital was given in the annual Report, for the year 1827, and had a similar effort been made in succeeding years, the most valuable results would have been the consequence; must unfortunately, however, a blank took



FEVER HOSPITAL & ROYAL IMPHRMARY

by David Allem



place in the year 1828, and the previous darkness, in regard to the first of these important branches of statistics, has ever since, brooded over this great medical storehouse. Not so, however, with regard to the surgical department of the Hospital. The records of the house, 'tis true, do not contain any account either of the surgical or medical practice, after the above period; but at the commencement of the year 1827, the Glasgow Medical Journal started into existence, and has continued ever since to flourish, and in its pages may be found the accumulated experience of all the surgeons who have since, successively appeared, on the Glagow Hospital arena.

In the preface to this work, I remarked, that in making up these surgical Reports for the Glasgow Medical Journal, every surgeon was allowed to consult his own judgment, as to the cases he might deem of most interest, and this liberal scheme I highly approve of; but here my commendation must terminate, for, with one or two exceptions, no tabular lists have been given of the diseases treated, operations performed, or inspections made under the eye of the attending surgeons or clerks. Now, if it is allowed me, I would here suggest the propriety, in future, of every surgeon giving, as an index to his report, 1st, An accurate list of his cases and the results, (see Appendix P.) 2d, A table of his operations and their termination, (see Appendix Q.) And 3d, A list of his deaths and the inspections, (see Appendix R.) By a comparison of these, one year with another, one might, at some future period, be able to judge of the success of this or that mode of treatment, or of operating, and thus results of the utmost value might be brought forward. I am well aware of the additional labour, which such a task would impose upon the attending surgeons, whose time is so precious; but even granting that such individuals could not take so much trouble, or would not, still, the above interesting tables might be, with much accuracy, drawn up by the surgical clerks of the Hospital, and for all statistical purposes, they would be of equal value to those penned by the surgeons themselves.

During the year 1827, Typhus Fever became again so alarmingly prevalent, as to make it imperative on the Directors of the Infirmary, to commence the erection of the Fever Hospital alluded to in last chapter. It is remarked in the Report for this year, "That in this large city Typhus fever must be at all times liable to occur, and in the narrow and crowded Vennals and Wynds it must be frequently apt to break out with virulence, so as to endanger the whole town." In order to avoid this calamity, the Report judiciously adds, "It becomes necessary to have a spare Hospital or Lazaretto at all times in readiness, not only to receive the sufferers, but to allow instant purification of their abodes, so as to cut up the infection by the roots." Besides, it was stated, the Infirmary is a great deal too small for the population, and it has long been desirable to exclude fever patients altogether, so as to allow adequate access to those labouring under other diseases. Early in the month of July, 1827, and while the building of the Lazaretto was advancing, a great number of fever patients were refused admittance, from want of Infirmary accommodation. In this emergency, the Directors were under the necessity of contracting for a temporary wooden booth, within the Infirmary grounds, which contained about 80 beds, and served until the Fever Hospital was opened in the year 1828.

At various periods, during the history of the Glasgow Royal Infirmary, I have remarked that attempts were made to establish regular courses of clinical lectures, but in consequence of the discordant opinions of the two licensing bodies of this city, these instructive practical courses were never, till the year 1829, duly enforced. The Directors of the Royal Infirmary, however, steering clear of both the above parties, in their most unprofessional warfare, judiciously determined to act for themselves, and in their turn became legislators for the benefit of the pupils of this valuable practical school. Accordingly, a senatus consultum of the Directors was promulgated, during the year 1829, of a more important nature than any other recorded in the Hospital history, it was as follows: "That all students feeing the Infirmary, should also, at the same time, be obliged to fee the courses of clinical medicine and surgery, which, thereafter were ordered to be regularly delivered by the attending Physicians and Surgeons on the cases under their charge in all the medical and surgical wards of the establishment."

That it should have been made imperative upon the pupils of this establishment to fee the above clinical courses, when taking their Hospital ticket, may, to some individuals, appear arbitrary and extrajudicial; but if the matter is investigated a little more attentively, I feel convinced, these enactments of the Directors will ultimately tend to their advantage, and prove, even if looked to, in an economical point of view, a great saving. In order to show this more accurately, I shall here review the present state of matters in regard to the principal licensing bodies of the empire. All the Royal Colleges, the Faculty of Physicians and Surgeons of this city, and the Navy and Army Boards, have now decreed that separate courses, of both clinical surgery, and medicine, are indispensable for obtaining a diploma, or on entering his Majesty's sea or land service. Now, let us suppose, that the Directors of this Infirmary, had been so near-sighted, as not to have, in part, anticipated these arrangements, what would have been at this moment the Glasgow Hospital pupil's situation? Why, instead of having his two years' ticket of attendance, including that, both for clinical medicine and surgery, for the small sum of six guineas, he might have found himself under the necessity of paying three times that sum, as is the case in Edinburgh, where lectures on clinical surgery are delivered by one, who never is allowed the treatment of a case, nor the performance of an operation, but simply is permitted to approve or censure the practice of his Hospital professional brethren. I assert, therefore, notwithstanding all the outcry which has been made on this subject, that the Directors of this Infirmary have had, at all times, the pupil's interest most sincerely at heart; and, are determined to persevere in the good cause, which, with so much honour to themselves, and advantage to the Glasgow medical school, they have commenced. By the original charter of the Institution, these Gentlemen are annually elected to their responsible situation, by means the most open and honourable, that of the votes of their fellow-citizens, and they on all occasions, have proved themselves worthy of the trust committed to them, by the personal sacrifices which they have been ever ready to make on its behalf. Delicacy forbids that I should say any more on this subject, for I am firmly persuaded that the individuals who most opposed these arrangements, must have by this time seen their propriety.

As to the importance of clinical medicine and surgery, this is so very obvious, that all must be impressed with it. If we compare the practice which we read of in books, or even hear inculcated in lectures, with that which is brought under observation at the patient's bed-side, the difference will not fail to strike the most careless. Many of the publications which have issued from the press, both in former and more modern times, upon the most important points of medicine and surgery, are so confused and contradictory, that I have often been led to think, the student would do better not to trouble himself with them at all, but read at first in the great volume of nature, where correct information is alone to be obtained. Indeed, without this observation of nature's processes at the patient's bed-side, and the reasoning which must follow on every case which meets the Hospital pupil's view, and where their feelings in every scene of affliction are so much interested, the lessons attempted to be enforced elsewhere, must fall, I fear, with listlessness on the ear. Without this careful study of the variety of symptoms, and modifying circumstances of each particular case, arising from its causes, its combinations, constitutional peculiarities, and progress, the young practitioner's future career, will be stained by empiricism, and his success in after life in proportion doubtful. With respect to lectures, either medical or surgical, as they are sometimes delivered in the schools, they are, in my opinion, of very little advantage, consisting as they too frequently have done, of theory manufactured in the study, the fruit perhaps of a brilliant imagination, than drawn from real life, and the result of careful induction. Surgery (at least) to be well taught, ought, in my opinion, to be less a treatise than a demonstration of disease, -rather a descriptive lecture, than an assemblage of precepts or theories. Better far would it be, for the student, to know nothing of diseases at all, than to have to correct his impressions, received in the class-room, by those in the Hospital. He may be told in the lecture-room of inflammation and its consequences, and, as is generally the case, much of his valuable time may be occupied with fine-spun theories on

this all-engrossing subject, but only present to his eye, a patient, who has just made his appearance from some of our magnificent manufactories, and lies in the accident ward of this Hospital, with his leg, it may be, shattered by some steam engine gearing, and what now are his sensations? what his interest? and what, in fine, the instinctive reasoning on the case? Here, he must have inflammation, and perhaps in all its stages and varieties; and tell me now, whether what is seen, touched, and properly commented on, at the bed-side, does not, ten thousand times more strongly, rivet his attention than all which he may previously have heard on the subject? Again, as to the diagnostic department of our art, in the lecture-room, the pupil may be told what hernia is, what are its causes, symptoms, diagnosis, prognosis, and cure; but let a patient make his appearance in the waitingroom of this Infirmary for advice only, and let him there uncover his disease, and what pupil, who has heard mere lectures in the university, will now be able to say what disease the poor sufferer labours under, and what ought to be done? He observes that there is swelling of the scrotum, some appearance of obscure fluctuation, considerable pain, and a constipated state of bowels; the poor patient is taken to the ward, and, with a trocor and canula, a puncture is made into what was, by this university pupil, supposed to be hydrocele, when behold no water flows; he now gets confused, agitated, and alarmed, and so he may, he has got into a herniary sac, he has dashed into the intestine, and the miserable sufferer is doomed, if not to death, to a fate more horrible,-to an incurable and loathsome artificial anus! With respect to operations on the dead subject, as performed in the class-room, I may here add, that the pupil requires only to be present in the amphitheatre of this Hospital, for a few moments during an operation on the living, to be instantly struck with the difference. In the class-room all is smooth, all natural, and most easily dissected. In this practical school, on the other hand, all is agitation, and the parts about to be the subject of operation, are, it may be, confounded, displaced, and imperfectly seen through the surrounding disease, -all the frame of the unfortunate and sensitive sufferer is unsteady, -- and cries, which would melt the most obdurate, too often pierce the heart, and unnerve the hand, of the most skilful and determined. All our ideas of external objects are vague, until they are presented to our senses, -until the animated picture of real existence is exhibited; then, but not till then, can we, with any degree of accuracy, say what this or that disease is; and in proportion to the magnitude of the gallery which the pupil has the advantage of attending, and the number, variety, and importance of the living plates of disease which meet his observation, if I may so express myself, so will be be able afterwards to advance to the practice of his profession with comfort and satisfaction to himself, and advantage and success to those committed to his charge. I rejoice in having it in my power, to confirm the opinion which I have above expressed, by no less an authority than that of Sir Astley Cowper, who, in answer to a communication made to him on this subject, during last summer, was so kind as to send me the friendly and valuable letter, which, though rather of a confidential nature, I have taken the liberty of adding in the Appendix (H.)

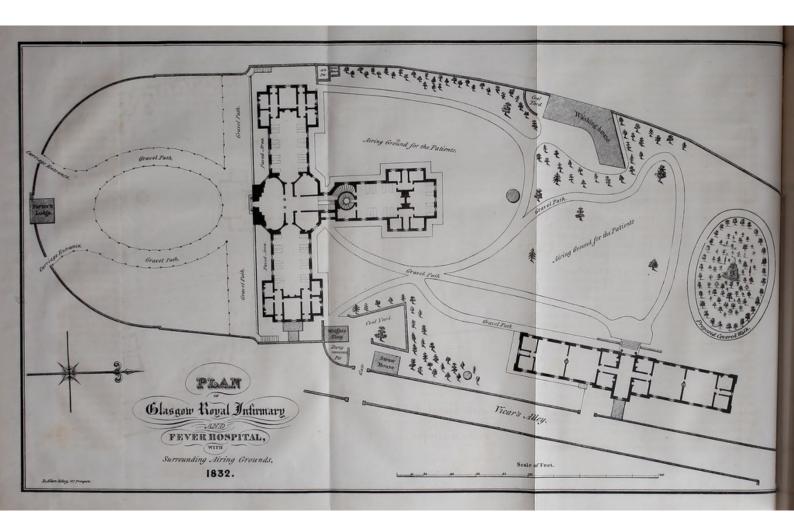
With respect to the advantages of the Glasgow Royal Infirmary, as a practical school of medicine and surgery, I think they are both numerous and important; for whilst in the great capitals, such as London, Paris, &c., the patients are distributed over many hospitals, they are here concentrated into one. The extensive and diversified manufacturing establishments, also, of this city, and the surrounding counties, exposing the vast population engaged in them, to accidents, often of the most appalling description, render this Infirmary, in my opinion, superior to any which I have seen either at home or abroad. But, besides these cases which the Glasgow Infirmary pupil has the opportunity of observing, and hearing commented on daily, either in the wards or at the regular clinical lecture, there are others of a no less interesting description, which make their appearance in the waiting-room for advice; indeed, I know no better sample room in the world, for an enlightened observer of human nature, than the waiting-room of this Hospital.

There is also another great advantage attending the surgical practice of this Infirmary, which I believe exists

no where else, I mean the election from among the pupils, without fee, of ten dressers, each quarter, to assist the Surgeons. When this free education is compared with the £52 10s. premium for the obtaining of a dressership to some of the London Hospitals, the result ought to tell on the education of the Glasgow pupil. I might say much here, also, as to the care with which the cases, admitted into the Hospital, are recorded in the Journals, and the daily reports taken at the bed-sides of the patients, often of themselves forming a good clinical lecture. These, the pupil of this Infirmary, has not only an opportunity of seeing in the hands of the clerks, who accompany the medical officers in their rounds, but also may be perused by them during four hours of the day in the Hospital. The operations and inspections also are most punctually advertised, in a conspicuous place in the pupil's room, the day before they occur; and at the top of every patient's bed, may be remarked, on a small card, his name, date of admission, disease, diet, treatment, &c.

In the regular practice of this Hospital, as of all others, it will be found that the daily visit is by far the most useful, and the ordinary duties of the medical officers the most important; for, it is to be presumed, that he who can operate with dexterity, will also be the person who, with most success, can perform his minor and more laborious duties. Yet sorry am I to say, such is the rage for operations, such the importance which here as elsewhere seems to attach to them, that, though the least part of the profession, they seem to take a firmer hold of the public mind, and strike a deeper impression on the pupil's senses, than the daily cures performed; they in fact usurp an importance in education which does not belong to them, the medical man, instead of being valued according to his talents, sense, and general information, is praised only in proportion as he operates with boldness and dexterity. I would, therefore, (seeing that these remarks may meet the eye of some of the Glasgow medical pupils,) warn them of the necessity of examining for themselves, every case in the Hospital, with the greatest care and circumspection. Let not one single sinister observation escape them, calculated either to hurt the feelings of the attending medical men, or to upset that confidence in the minds of their patients, so necessary to their cure. By what I have above advanced, I do not mean in the least to check the pupils, in the honest expression of their sentiments, either in regard to the conduct of the Directors of this Institution, the medical or surgical officers. or of any of its other official servants. I know full well that the task devolved on the Physicians and Surgeons of this and all similar establishments, is one of great responsibility-and in these days of surgical radical reform, it requires no small degree of fortitude, and conscious rectitude, to withstand the lashes which have of late years so fearlessly, so unmercifully, and so ignorantly been applied to Hospital Surgeons in mass. No man more admires the liberty of the press than I do, -none more venerates it as the palladium of our rights, and the guardian of our liberties; but there is a point beyond which I feel convinced no one would wish to see it extended. I mean when, instead of the banner of truth, that of falsehood is unfurled, when licentiousness, rather than liberty, is adopted as its motto, and when calumny and slander, instead of candour and fair dealing, are wielded as its weapons. I may be told that truth is great and it shall prevail, but how often do we find that varnished falsehood takes its place ?- for no situation, however arduous, and no conduct, however upright, will be able, in my opinion, to shield their possessors from the malevolence of those whose only amusement seems to be the laceration of the most amiable and exalted of natures. Most sincerely do I hope, however, that those days of darkness have gone by, and that Hospital medical men will still, as heretofore, be characterized as the most liberal of their brethren, and the foremost in the ranks of charity and philanthropy.





CHAPTER IV.

THE late justly celebrated, though caustic and eccentric John Abernethy, at the commencement of his surgical course, was in the habit of remarking, that every thing in the shape of introductory lectures, was, in his opinion, a mere farce, got up to serve the purpose of the lecturer; and he used to take pleasure in confessing that in the beginning of his career, he did write out a few prefatory observations, which he was in the habit of running over with the velocity of a racehorse, but as he advanced in years, not liking to be at the trouble of altering them to the spirit of the times, he got so ashamed of them, as to omit them altogether. Now, though, to the teacher, nothing must be more irksome, than to stalk over the same ground year after year; and though, in some measure, I may feel inclined to subscribe to the above opinion, of my late revered and talented master, still, I hold, that those who are about to commence such a study as clinical medicine or surgery, should be made acquainted with its importance, directed in the proper avenue of approach to its temple, and pioneered by those tried and approved guides, without whose assistance all, indiscriminately, are liable to err. For this reason it was, that in the last Chapter, I deviated a little from the trodden path of my Hospital history, and felt tempted to take a discursive walk into the fields of real life, and there, for the benefit of my young professional readers, shortly, and I fear very imperfectly, to portray nature, as she appears in connection with the above important branches of the healing art. I must now, however, return from my inaugural plagiarism, to the point from which I started, in order to trace the more austere, though no less interesting features in the history of our medical and surgical microcosm.

I find the following reference to Typhus Fever, in the Annual Report, for the year 1829, and as this disease becomes daily more alarming, every fact illustrative of its progress, will, I have no doubt, be read with interest. "Fever patients are placed in peculiar circumstances, and during the prevalence of the epidemic of last year, it has been judged necessary, on different occasions, and for various reasons, to admit them without recommendations from subscribers. During last year, the magistrates of this city have sent for admission, 250 patients labouring under fever, and these over and above those which they are entitled, as a burgh corporation, to recommend. These were all, no doubt, cases of urgency, and had they not received orders of admission from the above quarter, would have found access to the Infirmary by some means or other. Besides, prompt and ready admission in such cases is expedient and necessary. For, were the neighbours of these patients, (often friendless strangers,) obliged to hunt over the town for the recommendations of qualified subscribers, much time of importance to the cure might be lost, while the disease, in the meantime, might make such progress that restoration to health would become, from this cause alone, at least more tedious, and often impossible. Still, however, the patients are admitted under a violation of the long established orders of the house-where it is understood that every admission, except in cases of accident, either in whole or in part, exhausts the claim of some contributor to the fund. The Managers think it proper to suggest to the general court, the expediency of devising some method by which even the prompt admission of fever patients—a measure highly beneficial in itself—should go through a medium in unison with our ordinary regulations, and bring from some source an effective contribution to the support of the expenditure; for it is obviously proper, that the funds obtained from the public by way of contributions or subscriptions, should be saved for their legitimate object,—the support of those patients whose admission is held out as an encouragement, and a fair return for these respective payments. The general court having been pleased to adopt this recommendation, the Directors, as in duty bound, took the subject promptly into consideration. The two

points involved were, 1st, To secure the speedy transmission of fever patients from this city and suburbs to the Infirmary, under the authority of some known official persons, so as to lessen the risk of diffusing infection among the families of the poor; and secondly, To secure to the Infirmary a reasonable indemnification for such patients, from the poor's funds, of the respective districts,-these funds appearing to be specially leviable for the cure of poor people afflicted with infectious disease, and whose speedy removal to an Hospital was necessary, to prevent the extension of the contagion. The conclusion at which the Directors arrived on the 12th of February, was, that in future the fever patients in the city of Glasgow, should be recommended by the Magistrates and Kirk Sessions, or such persons as they should appoint; that the fever patients in the suburbs, should be recommended by persons appointed for that purpose, by the heritors and Kirk Sessions of parishes; and that the fever patients so sent in, should be paid for at the rate of one guinea each, from the poor's funds of the city, or the parishes respectively, after giving credit for the proportion of patients which the city or parishes respectively might be entitled, by their subscriptions, to recommend. The Directors deemed it expedient to give publicity to the conclusion above referred to, through the newspapers, and immediately thereafter, remonstrances were received from the General Session of the city,—the Magistrates of Gorbals,-the Barony Session,-and the Town's Hospital. This led to a conference, and although the parties did not agree, there could not have been a more kindly feeling in the great cause of humanity. The representatives of the above public bodies argued that the proposed exaction of one guinea for each fever patient, was inexpedient; -that free admission in cases of fever should be still continued on the footing on which it had been placed by the general court, in January, 1825;—and that as past experience proved, that the liberality of the public, especially when appealed to through the Kirk Sessions, had made up, by general collections, and other extraordinary means, short-comings in the funds; the Directors ought to rest satisfied, that the efficacy of such appeals, might be calculated upon in future, for the maintenance of that practice for which they pleaded. The Lord Provost, at the annual meeting of the contributors for 1830, having called the attention of the court to the portion of the Report above referred to, regarding the admission of fever patients, it was moved by Mr J. Douglass, and seconded by Mr C. Hutcheson, "That the resolution passed by the Directors, on the 12th of February last, in reference to fever patients, be approved and confirmed by the court, but that it shall not be acted on for three months." Mr Gilmour moved as an amendment, "That the resolution, by the general court in January, 1825, be confirmed and continued, viz:-"That the power given to the Managers by the general court, on the 4th January, 1819, to receive all cases of Typhus Fever without a recommendation, be withdrawn, when the Managers shall judge it expedient." The amendment having been seconded by Deacon convener Alston, and the vote having been taken, the amendment was carried, and the court resolved accordingly.

The Report for the year 1830, which was drawn up by David Fogo, Esq. of Row, contains, besides the extracts from it, which I have made above, much useful information on the interior economy of the Infirmary, and concludes with an appeal to the benevolent and charitable in the West of Scotland, to come forward liberally in support of this excellent establishment.

The Report for the year 1831, opens, as usual, with an account of the number of patients treated during the by-past year, and after detailing, at considerable length, the result, it goes on to notice the comparative numbers in former years, and that just ended. Thanks are then recorded, as in all preceding years, to the various medical attendants, for the arduous, important, and highly useful services which they had performed. To the collectors of annual subscriptions throughout the various town and suburb districts, the Directors express their grateful acknowledgments, as also to the coal proprietors, the Glasgow Water Company, &c., for the liberal and gratuitous supply of coals, water, &c., which has been afforded to the Infirmary, as in all former years; and though last, not least, to the present active, and public spirited, Treasurer of the Institution, James Lumsden, Esq., for the faithful discharge of his laborious and complicated duties. The income and expenditure of the establishment is next

taken notice of, and the means of making up the deficiency in the budget, are at considerable length discussed. Then follows a paragraph, which is of so much importance to the interest, of the Institution, and the profession at large, that I must not only transcribe it verbatim, but be allowed to make a few remarks on its necessity. It is as follows:—

"The number of acting Physicians in this city, has been, from what cause we know not, lately much diminished; hence the managers had the means, neither of appointing a third Physician, if necessary, nor of supplying the place of either of the present ones, when prevented from attending on account of bad health or otherwise. The Managers, therefore, after very mature deliberation, and being well advised on the subject, whilst they disclaimed all intention of passing over the present attending Physicians, did, on the 1st day of August last, on the motion of the Lord Provost, seconded by the Preses of the Faculty of Physicians and Surgeons, enact, 'That any gentleman who shall have been fifteen years in general practice, and who shall have obtained the degree of Doctor of Medicine, previous to his election, shall be eligible to be Physician to the Infirmary.' At the meeting of the general court held in January, John Alston, Esq., moved, that the above enactment of the Directors, dated August 1st, be ratified, when Dr Richard Millar moved, as an amendment, that the said enactment 'be rescinded, and that the former practice in the election of Physicians be adhered to," but which amendment, the Report bears, was not seconded. I have added in the Appendix, the resolutions of the Faculty of Physicians and Surgeons, on the above very important enactment of the Directors and general court of contributors to the Infirmary, and also Dr Millar's answer to the above document. It must be allowed me at present, in so many words, to state the arguments which were urged at the above annual meeting, in favour of the change thus so urgently demanded. They were as follows:-lst, The impurity of the present attending Physicians, both being druggists in every sense of the word. 2d, The utter incompetency of the three confreres who are alluded to, in Dr Millar's Report, as assistants or probable successors; one being, as he himself lately declared, in the witness box of a court of justice, a pure chemist; another, being so much of a contagionist, as to have stipulated, that it would never be required of him, during his clinical course, to attend fever cases; and, the third being so zealous a mineralogist and geologist, as to have resigned, in a great measure, his professional avocations. 3d, The necessity for an additional number of Physicians, from the increase of medical patients, of surgical consultations, of pathological lessons, in the operation room, and of clinical instructions. As to the remarks contained in the answer of the above pure Physicians, in regard to the general practitioner's education being inferior, and his habits and pursuits being of a totally different stamp, I would have refrained from saying one word on this delicate subject, had these self-styled pures not chosen to stigmatise the above useful and intelligent members of the profession, by the very elegant and classical term, of medico-chirargico-obstetrico practitioners. Now, if such individuals imagine for one moment, that the depth of their intellect, and the extent of their lore, is to be judged of, by the amount of their fees, the splendour of their livery, or the self-important and dignified air which they may assume, I have to tell them that they will be most miserably mistaken; the day of quackery has very nearly come to a close; the high-powdered wig, the gold-headed cane, and the scarlet cloak, have now become superseded by the quaker-like simplicity of republican life; and instead of such trapping and insignia commanding reverence or respect, they only the more stamp their possessors, as the remnant of an antiquated and nearly forgotten race. Who, I would ask those radicoaristocratic impures, was it, that, during the last century, stood out from among his professional brethren, in the metropolis of the empire as the man of most celebrity, and, whether viewed as the Physician, Surgeon, or Accoucheur, has added most lustre on his native country, and left to this city an imperishable monument of his talents, industry, and munificence? When I mention the name of Wm. Hunter, I feel convinced the pitiful and childish nick-names, by which such men have been designated, will be laughed at, and their authors treated with that contempt which they so justly merit.

In such a case as the present, however, where arguments may be deemed superfluous, to the generality of my readers, in regard to the absolute necessity of the medical practitioner being conversant with every branch of his profession, I prefer to give an illustration of some of the points in dispute. The facts are drawn from real life, and are well known to my professional brethren in this city, and, therefore, the case, with all its comicality, will not fail, immediately to be recognised by them, having occurred within the last half century. The individuals concerned I do not mention, and therefore there can be no objection to the narrative. A certain pure M. D. of this good city, was sent for in haste, to go to see a patient, a distance of more than 12 miles. The surgeon who had despatched the express, had previously consulted the above gentleman upon a case of a medico-chirurgical character, and had, at the termination of each visit, at the request of the patient, conveyed into the hand of his learned friend a very handsome fee. On this occasion, however, as fortune would have it, the learned pure was doomed to suffer disappointment. His horses were instantly yoked, and quick as lightning flew this hopeful son of Galen to the appointed rendezvous, the house of the village surgeon. The Doctor was, on his entry, shown into the parlour, but alas! no sooner had he seated himself, than his auditory nerves were assailed by cries of the most woeful and portentous kind. The servant, after a short pause of silence, requested the man of lore to follow her up stairs, when, wonderful to relate, this traducer of midwifery was ushered into the bed-room of Mrs ----; her poor husband, the village surgeon, was seated by her bed-side, in great consternation, with a breech presentation, and at once requested the Doctor to take his post. At this moment, another of those unearthly yells proceeding from the bed of the unfortunate patient, fell upon the ears of the astonished and trembling Doctor, and so completely capsized his courage and presence of mind, that down stairs he ran, got into his carriage, and ere the unfortunate surgeon had made himself a father, this luckless pure was out of sight; having been heard, by the servant in attendance, to exclaim, before making his debut, "Deuce take the fellow, I never delivered a woman in my life, and I don't intend to begin now."

In referring to a Report drawn up by Dr Millar, in the year 1808, on the duties and qualifications of Hospital Physicians and Surgeons, it will be remarked, that there, the doctor has given it as his opinion, that no surgeon should be allowed to operate, in the Hospital, when above the age of 50, and whose eye, even at any age, is not of a given quality. At what age should Physicians be prevented from attending hospitals? and at what age should they be allowed to begin their hospital curriculum? It is of importance that these two questions should be answered, as if properly and distinctly replied to, I think the above imaginary distinction in the medical profession, must be for ever abandoned. It is well known, that Physicians were made, till very lately, without any examination, and some of them, those of St Andrew's in particular, were so grossly ignorant, that Rodrick Grey, an old soldier, and one of the fraternity, lately of this city, was rejected by the Faculty, when he applied for a surgical diploma; yet this mortal, because he did not, and could not handle a lancet, was better qualified, according to Dr Millar's argument, to prescribe to the medical patients in our Infirmary, than Dr John Burns or Dr James Watson; but enough has been said on this subject to convince even the most dogged and illiberal.

In the Appendix will be found three reports on the subject of a resident superintendent to the Hospital, which, from their length I ought to have omitted; but, in justice to their authors, I have deemed it more fitting to give them entire, than take from their interest, by either extraction or condensation. The above office-bearer has not as yet been appointed, (August 1832,) but whether this has proceeded from the impossibility of obtaining any one individual so gifted, or from the vast number of candidates, does not appear. I shall add, however, in the words of one of the Reports above alluded to, that "if the Directors of this Institution shall be so fortunate, as ultimately to succeed in getting such a treasure of a man as is therein described, no salary would be too high for his services!"

Towards the latter part of the annual Report for 1831, Dr Corkindale has given such a just account of the

progress of Typhus Fever during the year, that, without the least apology, I shall transcribe it entire, and conclude this chapter with the Doctor's feeling appeal, in behalf of the charity, as recorded in this last and best of these annual statistical records.

"In the early part of last year, the Fever Hospital easily received all the patients that claimed admission, --for during the first half of the year, ending 1st August, the average number did not exceed 80. After this, however, the epidemic became more prevalent, and the medical attendants were forced to refuse many cases of a peculiarly distressing nature. To meet such urgent demands, the Managers deemed it their duty to abridge the room for ordinary cases in the house, and to appropriate part of the front building for the reception of fever patients. But even this increased accommodation did not meet the demand. During the third quarter, ending 1st October last, the average number of cases was 160, and yet many were daily refused; for excessive crowding, it was thought, was an evil which if possible, should be avoided. Urgent necessity however was imperative, and the house was crowded to excess in every corner; for, at the enumeration of the patients, on the 26th of November last, there were no less than 374 beds occupied, and of these, 213 contained fever cases. Still, all the demands for admission were not complied with, for though nearly fifty were admitted every week, as many, sometimes more, and these all of extreme urgency, were unavoidably rejected. It may well be supposed, that the Managers in these circumstances, and exercising the discretionary power granted them by the last general court, did not at any period of the year see it expedient to refuse admission to Typhus patients, though without recommendation from contributors. The advantage of prompt seclusion, as well for the public safety, as for the benefit of the miserable persons themselves, rendered it imperative to continue access to the wards on the same liberal terms as has been allowed on former occasions. Accordingly, above 900 fever patients have been admitted during the year, without qualified recommendations. It has therefore been impossible on many occasions, to attend to the recommendations of contributors for ordinary patients, and it is hoped none of our friends who may have taken offence at such refusals, will withdraw their favours. The complaints of these disappointments were numerous, and there was good reason for them. The utmost impartiality however was observed, and the preference in admission, due to cases of the most urgent distress, attended at the same time with contagious influence, is the only apology which can be offered. Towards the end of November, the overwhelming prevalence of Typhus, and the threatened invasion of another epidemic, prompted the Magistrates of the city, and the Sheriff of the county, to form a Board of Health, for carrying into execution, in reference to both diseases, the measures which under the direction of a medical committee, might be deemed necessary for the public safety. This Board commenced their administration, by opening an asylum for the reception of such fever patients as could not find admission into the already too crowded wards of the Infirmary. The Managers were requested to take the superintendence of this auxiliary house, which request they readily complied with, on the express condition that no part of the expense should fall on the proper funds of this Institution. The building fixed upon, is an unemployed cotton mill in King Street, Mile End. It is an airy situation, and well adapted for the purpose. It is rather distant, but convenient for Calton and Bridgeton, where the epidemic was very prevalent, and not much more remote than the Infirmary itself, from the more crowded parts of the city. It is fitted up with 135 beds, and is ready for occupation. The experience of the by-past year, (the Report goes on to remark,) in regard to fever, suggests an important subject, which the Managers respectfully beg leave to submit to the consideration of the community. Typhus has for the last six months prevailed much beyond what this establishment, though completed, could provide for, even to the exclusion of every other kind of patients. This is not a new occurrence. Such exacerbations of epidemic severity have often happened before, and will no doubt often break out in future. Why this epidemic has lately acquired such an ascendancy, and what are the causes which influence its periodic severity, it is not necessary at present to inquire. It must be regarded in all its bearings, as one of the evils with which Divine Providence has visited our common

nature, as an evil which makes an imperious claim on public munificence, and points at a new department in the charitable economy of our city. The wards of the Infirmary will afford an asylum to the victims of Typhus on ordinary occasions, but are inadequate to receive the sufferers when its fury is increased. One or more Relief Hospitals, permanently furnished with every equipment, and always ready for occupation, have thus become necessary, to be opened or shut as the prevalence of the disease requires. The sovereign check to infectious influence is instant seclusion. Liberality here in the beginning, turns out to be sure economy in the end. Until every fever patient can have at once a ready asylum, without the chance of refusal, our charitable Institutions for the diseased poor, will not be, what they ought to be,—worthy of the enlightened and munificent inhabitants of a great and opulent city."

CHAPTER V.

THE list of Directors of the Glasgow Royal Infirmary, which I have prefixed to this chapter, have been arranged by me into three classes; 1st, Into those who, either for life or for any definite term, are, by the charter, Directors from the offices which they hold. These are seven in number,—two life Governors, the Professors of Medicine and Anatomy in the University. One septennial at most, the member of parliament for the borough. The four remaining are biennial; the Lord Provost, Dean of Guild, Deacon Convener, and President of the Faculty of Physicians and Surgeons. 2d, Into those who hold a medium rank, between the aristocratic and the democratic body. They are eight in number, and are in general annually nominated by the public bodies mentioned in the list; and 3d, Into those who are annually elected by ballot, by the general court of subscribers, and are ten in number.

It is upon this third class more particularly that the mass of business devolves; for, with the exception of a few of the medical men returned, who are always calculated upon as efficient Directors, the majority of the others seldom take that active share in the general business of the establishment, so necessary to its prosperity. One has only to take a glance at the accurate list of this third class, to ascertain the names of those benevolent individuals who among their many other avocations, have devoted no small portion of their valuable time, for the promotion of this admirable Institution. Where so many have appeared to advantage on this philanthropic field, it would be difficult to single out those who have held the foremost rank; but surely it may be allowed me here to pay a passing tribute of respect, to the memory of such men as James Duncan, and Wm. Jamieson, who as Directors of this Institution, so long, so zealously, and with so much ability, performed their arduous duties, and at last died in the glorious and praiseworthy cause. "Blessed are the dead who die in the Lord," &c.

In such a shifting and populous community, it might be supposed that during half a century, so great a change would have taken place in the posture of affairs, as in many respects to make the constituency which I have above described, require the pruning knife of reform; yet it is remarkable that with the exception of the Dissenting Clergy, the Faculty of Procurators, and the Andersonian University, all the other public bodies are represented by the general court. Of these, the second one, has of late been well represented. Indeed there were so many legal questions constantly occurring in the management of Hospital business, that it would have been of much advantage for the Faculty of Procurators to have enjoyed, in the charter, a right of returning one or even two members to the Infirmary board of direction. The Dissenting Clergy also, whose congregations have on

LIST OF DIRECTORS OF THE GLASGOW ROYAL INFIRMARY FROM 1713 TO 1832.

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LIST OF DIRECTORS OF THE GLASSIN HUYAL INGIRMARY

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LIST OF OFFICE-BEARERS IN THE GLASGOW ROYAL INFIRMARY, FROM 1795 TO 1892.

		PHYSICIANS.			SURGI	EONS.		TREASURERS.	SECRETARIES.	CHAPLAINS	APOTHECARIES.	HOUSE SURGEONS.	1st CLERKS.	MARTINE
NA -	123108.	PENIS.	ASSISTANTS	senior 20 vers.	SENIOR DET YEAR.	PENIOR TO YEAR.	JUNEAU DET YEAR.	IREAGURERS	SECRETARIES	CHAPLAINS	AFOI HECARIES.	SURGEONS.	IN CLERKS.	MATRON
15 1	Robe, Clerhorn, M. D.	Thos. C. Hope, M.D.		Charles Wilsone	William Couper	Archibald Young	James Towers	Archibald Grahame	George Jardine		John Burns	John Burns	R. Caldwell	Mrs M'Leran
8		Richd, Millar, M. D.		241		James Towers	Robert Cowan	***	William Lindsay	1/4	R. Caldwell	R. Caldwell	J. Fullarton	
		Robt, Freez, M. D.		Archibald Young	Alexander Dunlop	Robert Cowan	John Burns	110	ne.		J. Fullarton	J. Fuliarten	R. Barns	
	Robt, Cleghorn, M.D.	Total Tittle Control		Alexander Dunlop	James Towers	John Burns	John M'Nish	100			-11	R. Berns	J. Baird	Miss Stewart
90	the Congress of the	Richd, Millar, M. D.		James Towers	William Couper	John M'Nish	John Grieve				J. Baled	J. Baird	C. Douglass	
	Richd, Millar, M. D.	Robt, Freer, M. D.		William Cooper	William Durlep	John Grieve	Thos. Brown, M.D.	***			C. Douglass	C. Douglass	J. Stenhouse	
	Robs, Cleghorn, M.D.	Auto Attorpool				Thus, Brown, M. D.	John M'Arthur			Rev. J. Allan	Rev. J. Allan	J. Stenhouse	William Pollock	
102		Richd, Miller, M. D.		Robert Cowan	Charles Wilsone	John M'Arthur	Architald Millar			-		William Pollock	J. Baird	
		Robt, Freer, M.D.		200000000000000000000000000000000000000		Archibald Millar	James Towers		-	-		J. Baird	Francis Steel	
	Robs, Freer, M. D.	Jn. Balmanno, M. D.		The state of the s	Thos. Brown, M.D.	James Towers	William Dunlop		-			F. Steel	J. Hennan	
					William Anderson	William Danley	John M'Arthur					J. Hennan	J. Coats	
1000	Robt. Cleghorn, M.D.	Robs, Freer, M. D.		The state of the s		John M'Arthur	J. Stenhouse		***			J. Coats	G. de Lys	Mrs Stewart
106					William Anderson	J. Stenhouse	George M'Leed	Kirkman Finlay	- 111			G. de Lys	G. C. Monteath	
	Richd, Millar, M.D.	Jo. Balmanno, M. IA		THE PARTY OF THE P	Thos. Brown, M.D.	George M'Leod	Jas. Corkindale M.D.	The Control of the Co	Test .			G. C. Monteath	William Young	
908					John Burns	Jas. Corkindale, M. D.	L M'Dosgall	Adam Creeks			***	William Young	James Watson	
	Robt. Cleghorn, M.D.	John Nimmo, M. D.			John M'Arthur	J. M'Dougall	Hugh Millar			""		James Watson	James Davidson	
910					William Anderson	Hugh Millar	B. W. King, M.D.	William Jamieson	-01	60		James Alexander	J. Brisbane	
	Richd, Millar, M.D.	Robt, Freer, M.D.					John Scruton		410	***	160	William Penman	Andrew Wilson	4.1
118	- 111	Hebt. Graham, M. D.			George M'Leod	B. W. King, M. D.				***		A. Wilson		0.0
813	Robt. Freer, M.D.	-			Hugh Millar	John Scruton	James Watson		2 (0)		100		Harry Rainy	110
514		Robert Watt, M.D.			John M'Arthur	James Watson	G. C. Monteath, M. D		Thomas Christie		William Heron	Harry Rainy	William M'Kenzie	
153.5		***			B. W. King, M.D.	G. C. Monteath, M.D.			911			William M'Kenzie	James Armour	Miss Witherick
	Robt, Graham, M.D.			B. W. King, M.D.	William Anderson	John Towers	G. S. Pattison	James Sym	***		***	James Armour	James Sym	144
1817	Richd, Millar, M.D.	Robt, Graham, M.D.		G. C. Monteath, M. D.		G. S. Pattison	Harry Rainy	101	100			James Sym	Robert Cowan	***
1818	***	100	100	Hugh Millar	John M'Arthur	Harry Rainy	Wm. Comis, M. D.	104	111	Rev. R. Riddell		Robert Cowam	Thomas Gibson	***
1819		Total Control	and the same of the same of		Jas. Corkindale, M. D.		Jn. Robertson, M. D.	William Dalglish		100	811	Thomas Gibson	William Authincless	
1900		Thos. Thomson, M.D.	Wm. Couper, M.D.	Jas. Corkindale, M.D.			Robert Perry, M.D.	***		100		William Auchincless	J. R. Wallace	Mrs Gardner
1921		***	111	G. C. Monteath, M. D.		Robert Perry, M. D.	Wm. R. Gibb, M.D.	407	100	411	Robert Smith	J. R. Wallace	Andrew Bechanan	***
1899		Ja. Robertson, M.D.		Harry Rainy	Wm. Cumir, M.D.	Wm. R. Gibb, M.D.	Wm. Young, M.D.		100	4	175	A. Bechanan	William Hall	
1923				Wm. Cunin, M.D.	Jas. Corkindale, M.D.	Wm. Young, M. D.	A. D. Anderson, M. D.					James A. Laurie	R. King	
1824		Thes. Brown, M.D.		Jas. Cerkindale, M.D.	G. C. Monteath, M. D.	A. D. Anderson, M. D.	John Couper, M.D.	· m		100	J. C. M'Donald	R. King	A. C. Gerden	Miss Bredie
1525	-	200		G. C. Monteuth, M. D.	Wm. R. Gibb, M.D.	John Couper, M.D.	Robert Cowan	John Alston				A. C. Gordon	J. S. Candlish	***
1896		***		W. R. Gibb, M.D.	Wm. Young, M.D.	Robert Cowan	Jn. M'Farlane, M.D.				111	William M'Tyer	B. Pellock	***
1827	Ja. Balmanno, M. D.		John Couper, M. D.	Wm. Young, M.D.	A. D. Anderson, M. D.	Ja. M'Farlane, M.D.	A. M'Lauchlan, M. I.	Robert Aitken	100	117		William Craig	J. Kennedy	100
1888				A. D. Anderson, M. D.	John Couper, M.D.	A. M'Leuchlan, M. D	W. Auchincless, M. I.	Dugald McFie			M. Johnston	C. M'Kinnon	J. M'Leol	411
1920		Jn. Balmanno, M.D.		John Couper, M.D.	Robert Cowan	W. Auchincless, M. D.	Wm. Weir, M.D.	William M'Lean		-		J. Neilson	J. Muir	-
1830	The second secon		John Spittal, M.D.	Robert Cowan	Robert Perry, M.D.	Wm. Weir, M.D.	M. S. Bucharan, M. I.	Andrew Whyt		-	Thomas Clerk	Robert Walker	J. Norris	1 20
1831				Robert Perry, M.D.		M. S. Buchanan, M. D.		James Lumsden			Robert M'Gregor	Alexander Ure	A. M'Kean	
1800				Jn. M'Farlane, M. D.			John Stirling				and the Congress	William Baird	D. S. Meikleham	

many occasions so liberally supported this Institution, ought occasionally to be returned as Directors by the general court. I need not dilate on the many and important advantages accruing to this Institution, from the liberality, openness, and diversified character of its Directors. These are so palpable that the most inexperienced in such matters must at once be impressed with them. If we search the records of public Hospitals either at home or abroad we shall find no one which in point of constitution at least, has such strong claims on our admiration as the Glasgow Infirmary.

But, optimist as some may be inclined to suppose me, I cannot shut my eyes to some of the disadvantages which attend even this seemingly perfect state of matters. It has already been remarked, that the burden of the management, in general devolves upon the democratic body above alluded to. Now in perusing the records, it has appeared that this self-same body has occasionally almost degenerated into the self-election system on the one hand; and on the other, into the equally hurtful and execrable system of tyrannical, intriguing, medical monopoly, in the proteus shape of reform, -so that the election of Directors at the annual meeting, has sometimes presented the ludicrous farce of signed lists, made up by medical men, who instead of having the good of the Institution at heart by such procedure, only thought of forwarding their own office-monopolizing, and time-serving radico-aristocratic eccentricities. The consequences of all this intriguing might have been, to drive from the direction a list of gentlemen, who have after great exertions, made themselves as it were masters of the business of the house, and in their places have substituted others, who though equally respectable, were all novi homines, to the great detriment of the Institution. Another disadvantage attending this mode of election, is the power which the various public bodies above mentioned, (as the City Corporation, the College, Clergy, or Faculty,) thus enjoy, of occupying not only that place in the direction already assigned them by the charter, but also of elbowing out as they have often done, their more unobtrusive though more valuable citizens of the mercantile and manufacturing body, in whose hands this part of the management was originally intended to be placed. It is true the subscribers have themselves to blame for this packing and jobbing; but how often is it the case, that unless some glaring mismanagement is pointed out, some flagrant act of oppression or injustice is perpetrated, do we find, that here as every where else, the whole direction is vested in two or three individuals, (all the rest acting as mere automata,) who from year to year are silently permitted to jog on in their own routine, to the no small hurt of the establishment, over whose interests they preside? One principal cause of the retardation of improvement, in this as well as similar establishments is the rareness with which the medical and surgical office-bearers, or ex-office-bearers, have been returned as Directors. Who so well able to point out and to carry forward reform in all the departments, more particularly the professional of Hospitals, as those individuals who have seen and felt the necessity of change? Who so interested in perfecting all that tends to the advancement of science, as those whose time has been spent in the laborious search after the perfection to which others have attained, or in planning new nodes of retrenchment, or fresh streams of benevolence, by which to swell the coffers of such praise-worthy Institutions? The law of 1818, which excludes medical office-bearers from at the same time being Directors, was framed in consequence of the possibility of the same individuals acting in the double capacity of accusers and judges, and this in principle is right; but why any exceptions? Are the ex-officio medical Directors, who may be attendants, not equally fallible in this respect as those excluded? Though some little inconvenience did at a most rare and unparalleled period occur, which called for the passing of such a law as that alluded to in the records; still, being the only one in the Infirmary statute books of an obnoxious and exclusive cast, and as throwing a stigma on the medical profession, the sooner it is erased the better,

It is not however merely as an elective body, that the general court of subscribers is entitled to consideration; for though this is one of its chief functions, still it is as a court of control on the conduct of the Directors, that it is entitled to our principal regard. During the progress of the Institution, this

salutary control must have been very frequently remarked, and in no instance more strikingly than in regard to that of the decision of the Directors on Dr Millar's motion in 1819, for a reform of the whole medical department of the Hospital. In this case there was a great majority of the Directors favourable to the Doctor's views, (from what cause may be seen by a perusal of the spirited and ably drawn up protest of three of the dissentient Directors, given in the Appendix,) resolutions in accordance with his report, were by the above majority passed; but mark the result,—at the first meeting of the general court of subscribers these resolutions were negatived, the report upon which they were founded was rejected, and thus an oblique censure on all their decisions was formally pronounced by this valuable and popular part of the Hospital constitution. And thus it is, that though the executive and legislative department rests with those ministers of the Hospital government, not a single law or by-law can be enacted, not the election of the lowest menial can take place, but may prove the subject of investigation by this great imperium in imperio.

Shortly after the annual election of the Directors, which takes place on the 1st Monday of January, the various committees are appointed for more efficiently carrying on the business of the Institution. These are in general six in number, viz:—1st, The Weekly Committee; 2d, The Medical; 3d, The House; 4th, That on Accounts; 5th, That on Annual Subscriptions; and 6th, That on Provisions, Wines, &c.; and if any extraordinary expenditure, as on buildings, &c., is to take place, committees for these specific objects are also appointed.

This sub-division of labour tends much to promote the interest of the Hospital, and to prevent that waste and peculation so incident to large public establishments. In order to convey some idea of the mode of management, and the principal actors in this most laborious and philanthropic walk, I shall here insert the lists of those gentlemen who have served in the above committees during the last three years. From these lists it will I think very strikingly appear, how correct have been my observations on the characteristics of the three great classes into which I have taken the liberty to sub-divide the court of Directors.

COMMITTEES OF MANAGEMENT FOR THE YEAR 1829.

HOUSE COMMITTEE.	WEEKLY COMMITTEE.	ARRANGEMENT.	MEDICAL COMMITTEE.
Hugh Robertson, William Gilmour, Charles Hutchison, Deacon Convener.	Hugh Robertson, John Henderson, Duncan M Farlan, D.D. Jas. Corkindale, M.D.	January, May, September.	Charles Badham, M.D. James Jeffray, M.D. John M'Nish, James Corkindale, M.D.
FOR SUBSCRIPTIONS. William Gilmour, Dugald M'Fie, The Treasurer,	Dugald M'Fie, James Lumsden, James Wilson, Charles Hutchison,	March, July, November.	George M'Leod, James Wilson, ON PROVISIONS, WINES, ETC
James Lumsden, James Corkindale, M.D. ON ACCOUNTS.	John M'Nish, John Douglas, William Gilmour,	February, June, October.	William Gilmour, Hugh M'Kinnon, Matthew Fleeming, Charles Hutchison, Hugh Robertson,
William Gilmour, Charles Hutchison, Hugh Robertson, James Lumsden, Dugald M'Fie.	M. Fleeming, Robert Thomson, Hugh M'Kinnon, Nath. Stevenson, George M'Leod,	April, August, December.	George M'Leod, James Lumsden, Deacon Convener, James Wilson.

COMMITTEES OF MANAGEMENT FOR THE YEAR 1830.

HOUSE COMMITTEE.	WEEKLY COMMITTEE,	ARRANGEMENT.	MEDICAL COMMITTEE.
Mr Gilmour,	Dean of Guild,	S manufactured as	C. Badham, M.D.
Hutchison,	Deacon Convener,	January,	Jeffray,
Bryce,	Mr Thomson,	May,	Mr M'Nish,
Whyt,	A. Panton, M.D.	September.	F. Steel, M.D.
Meikleham,	Mr Henderson,)	A. Panton, M.D.
Playfair,	the of the sure of a party soil has a	be pendir y first a force	Mr Wilson.
Robertson,	Mr Bryce,	1	
Douglas.	Robertson,	March,	ON PROVISIONS, WINES, ETC.
od was a state of the state of	Douglas,	} July,	Mr Gilmour,
FOR SUBSCRIPTIONS.	Hussey,	November.	Robertson,
Mr Gilmour,	J. Muir, D.D.	1	Hutchison,
Hussey,	M. M.D.	- Lance or an area	Thompson,
Mathie,	Mr M'Fie,	The state of the s	M'Fie,
A. Panton, M.D.	Gilmour,	February,	Mathie,
F. Steel, M.D.	Hutchison,	June,	Playfair,
Mr Whyt,	F. Steel, M.D.	October.	Hussey,
Bryce,	Mr Whyt,	The state of the state of	Bryce,
Graham,	Mr Meikleham,	The second	Douglas,
Douglas.	Mathie,	April,	A. Panton, M.D.
	Wilson,	August,	F. Steel, M.D.
ON ACCOUNTS.	Playfair,	December.	Mr Wilson.
Mr Whyt,	of the same of the same particular	that his distribution to	
Gilmour,	STATE OF THE PARTY	A Section of the last of the l	
Hutchison,	The same of the same	The same of the sa	
M'Fie,	force of the states of these is ago	Deposit of the state of the sta	
Douglas.	the state of the s	Charles the real party	

COMMITTEES OF MANAGEMENT FOR THE YEAR 1831.

HOUSE COMMITTEE.	WEEKLY COMMITTEE.	ARRANGEMENT.	MEDICAL COMMITTEE.
Mr Gilmour,	Deacon Convener,	1	Dr Badham,
M'Lean,	Mr Thompson,	January,	Jeffray,
Lumsden,	M'Fie,	May,	Corkindale,
Whyt,	Dr Corkindale,	September.	D. Gibson,
Meikleham,	Mr Gilmour,	1	Mr Gibson,
Fleeming,	on all a limited at the	Part british No.	Blair,
Playfair,	Mr Gibson,	1	Wilson.
Douglas.	M'Lean,	March,	
	Douglas,	} July,	ON PROVISIONS, WINES, ET
FOR SUBSCRIPTIONS.	Lumsden,	November.	Mr Gilmour,
Mr Gilmour,	Blair,]	Fleeming,
M'Lean,	and or to see a second		Lumsden,
Fogo,	Dr D. Gibson,	The Boy the substant	Thompson,
Dr D. Gibson,	Mr M'Farlane,	February,	Fogo,
Mr Wilson,	Fleeming,	June,	Playfair,
Whyt,	Meikleham,	October,	M'Lean,
Lumsden,	Fogo,	July to a series	J. Fleeming,
M'Farlane,	D D D	,	Douglas,
Douglas.	Dr Badham,	1	Whyt,
	Mr Wilson,	April,	Dr D. Gibson,
ON ACCOUNTS.	Playfair,	August,	Mr M'Farlane,
Mr Gilmour,	Whyt,	December.	Wilson.
Douglas,	Dr P. M'Farlane,	,	
M'Fie,	the customer Age, America of	DESCRIPTION OF STREET	
Whyt,	With the property of the same of	the burney his on the	
M'Lean,			

Besides the annual meeting of the subscribers which by the charter must be held on the first Monday of January, a general court may be called at any other period during the year deemed necessary by the Directors; but this step is never had recourse to unless to sanction the outlay of capital on buildings, or the settlement of some important and disputed point in the management of the Hospital. Four quarterly meetings of the Directors are held during the year, at which the medical and surgical attendants, clerks, dressers, &c. &c. are appointed, and any important matters from the various committees before mentioned, are discussed and voted on. All the elections are freely and openly managed, and the vote is taken by viva voce, the person having the majority at one voting carrying the day, and in case of an equality the chairman gives his casting vote. The meetings of the weekly committee are always held on Friday at 2 o'clock; at which all complaints from the visitors, medical and surgical attendants, students, or inferior servants, are reported on, and if found correct, are instantly redressed. The other committees meet, when, and where, they find most convenient.

The list of visitors has varied considerably since the foundation of the Hospital, sometimes amounting to not more than 18 or 20, and at other times to upwards of 80 or 100. What this caprice in the electors (the Directors,) arises from, does not so well appear, but I fear that the more the number is increased the more lax is the superintendence. Would it not be an improvement to appoint only 30 annually, from among the most active of the collectors of annual subscriptions? This would interest these gentlemen still more in the charity, and by being annually changed, it would extend the knowledge of its usefulness, and tend also in no small degree to benefit the funds, and improve the administration. A more precise and pressing card to visit the Hospital than that now in use, ought to be left punctually with all the visitors, and a request subjoined that in case of absence, a substitute may be obtained. In short, it ought to be less a form than hitherto—both the appointment of visitors, and also the task devolved upon them—for, in my opinion, if the duties of these inspectors were carefully performed, many improvements would take place, and much mismanagement be prevented.

Prefixed to this Chapter will be found a very accurate list of all the office-bearers who have been appointed to the Hospital from its opening to the present time. I shall now proceed to offer a few remarks on these functionaries, and the various duties attached to their respective offices, with some suggestions which have occurred to me, from my intercourse with similar establishments both at home and abroad. In examining this list there is nothing I feel convinced, which must strike a stranger with greater astonishment, than the variety of Physicians and Surgeons who have served their short-lived term of probation in this Hospital, and gone from the stage never again to return. Indeed so diversified has been the nature of the surgical appointments at least, that with a few exceptions, two, or at most four years, has been the period which all have thought it necessary to serve, in this trying professional apprenticeship. Why is this state of matters allowed to continue? Is it from a want of interest in Surgery on the part of the Surgeons, or from a conviction of change being desirable on the part of the Directors? I think from all that I have been able to remark, it proceeds from neither. The situation of Junior Surgeon to the Glasgow Royal Infirmary, is one of engrossing interest to the junior members of the medical profession in this city; it is one the possession of which is eagerly sought after; not from any emolument attached to it-for till lately there was none-but from the professional status which it is supposed to confer. Having acted as Junior Surgeon, and gone through the drudgery of an active and most unprofessional canvass for the above situation, the appointment to that of Senior (after two years' interval of repose,) is and has been, almost uniformly deemed a matter of right, and a species of approval of the previous conduct of the Junior; and thus it is, that having arrived at the summit of professional status, few think it either honourable or worth their while, to dispute the ground which is successively destined, by the use and wont of the Hospital, to be occupied by their followers in this laudable and honourable career. My sentiments on this subject I have already submitted to the Directors, and, I do not intend at present to obtrude them again, but must remark that some

qualification as to age at least, is absolutely necessary to be immediately enforced in regard to Junior Surgeon as well as Junior Physician; and as 15 years previous practice has been fixed upon as the qualification for the last, surely 10 years' previous practice at least, ought to be that for the first. Would the regulations in the appointment of surgeons not be improved, by having the term of hospital attendance extended to four years instead of two? one year of this term prior, and one year subsequent, to the two intermediate ones of active duty being devoted to consultations? So much has already been said in regard to medical monopoly in this Hospital, that I think it useless to say one word more on this subject. The list of Hospital Physicians is before the reader; the results of their practice I shall leave to posterity to judge of, for I have almost invariably found that post-humous medical information, (if communicated,) is the most valuable.

In stating the advantages which the medical student enjoys in attending this Hospital, I mentioned the very small sum paid for obtaining his surgical, clinical and medical tickets; but I deem it a duty which I owe the profession as well as the student to declare, that for this sum as the law stands, only about 20 lectures are delivered during the winter session. Now I hesitate not to affirm, that of all courses of medical and surgical instruction these are by far the most valuable, and lectures on these branches ought to be given at least twice or thrice weekly; indeed were they properly appreciated, and gone about in the true spirit, not a day would pass without a short clinical lecture being given to the pupils in attendance. Is it in consequence of the small number of lectures on clinical medicine given in this Infirmary that the Faculty of Edinburgh have refused to recognise the Glasgow ticket in entering for M. D.? Or is it in consequence of the absurd and ludicrous idea of College Professors being alone competent to teach this branch of the healing art? From whatever cause the Directors of this Infirmary ought instantly to remonstrate with the Edinburgh Senatus Academicus, on this flagrant and tyrannical abuse of their power, and on this injustice committed towards their more liberal western rival.

In this Infirmary there are no regular clinical wards, each Physician or Surgeon choosing the cases he may deem of most importance. The advantages of this procedure I think so obvious that I need scarcely dwell on them; suffice it to remark that during my incumbency, I found the most common and trivial cases often turn out by far the most important and interesting; besides, it is not the uncommon cases which should most engage the attention of the pupil, but those on the contrary which he must first and most frequently meet with when he goes into the world, and which, in the clinical wards and lectures of some establishments are never adverted to at all. It is well however for the clinical lecturer in such an Hospital as this, to class the cases according to their sites, &c., the fractures and burns, &c., in one place, and the ulcers, strictures, &c., in another; but even in this respect, there must be a limit; for unless great caution is exercised, Hospital Erysipelas may be the consequence. Much latitude exists in this Hospital as elsewhere, in the term medical and surgical case. On this account it is that in the waiting-room, where the patients who have lines of admission are examined by the medical and surgical attendants, some curious scenes are witnessed, and much ingenuity is often required to draw the hairbreadth distinction between the various cases, particularly in those which I have classed in the list of diseases treated in this Hospital, as medico-chirurgical. The consequence of this latitude, is the opportunity afforded to the zealous Surgeon or Physician, of having an assortment of almost any number of cases of a mixed character; in other words, of largely interloping on the province of his more lax confrere.

Another of the duties devolved on the Physicians and Surgeons of this establishment as mentioned before, is the prescribing daily after the regular visit, to all and sundry who apply in the waiting-room. The House, however, neither provides medicines nor out of door attendance,—the twelve city district practitioners, who are elected by the Directors of the Town's Hospital, and paid out of the parochial funds, performing the duties of dispensatory surgeons within their respective bounds. The last of the duties belonging to the medical and surgical department of the hospital which deserves notice is the inspections. The regulations with respect to these, are many of them faulty, and most of them I may say, have gone into desuetude; on this account some new regulations are required, and in particular it should be made imperative on the Physician or Surgeon whose case it may be, to attend in the operation room, during the inspection, and give the pupils the information required. If this law were rigidly enforced, there would be no necessity for a renewal of such an application from the students as that which was lately made, for a demonstrator of morbid anatomy to the Institution.

The Apothecary to the Glasgow Infirmary is an office-bearer of much importance, and indeed his duties are so multifarious, that he may well be styled the major-domo of the whole establishment. From an inspection of his duties as detailed in the Appendix, a very vague idea is obtained of his varied and laborious functions. The compounding of the medicines in the Edinburgh Pharmacopeia, such as the pills, tinctures, ointments, &c., are all executed under his direction,—the preparing the prescriptions of the medical attendants,—the attendance in the respective wards while these are explained to the nurses and patients,—the superintendance of the wine, spirit, porter, and ale departments,—the clerk to the treasurer in the department of pupils, dressers, and clinical fees, with a host of other duties too numerous to notice, are all laid on the shoulders of this over-burdened functionary. Yet strange to tell, the daily and hourly responsibility of this most important office-bearer, is at present remunerated with a salary of only £30 or £40. I have been all along an advocate for economy in this, and every department of the Hospital; but surely in addition to this very small salary, the fees of the laboratory pupils should be added, as a stimulus to still greater exertions, on the part of this most useful officer, and as a kind of contingent premium for his devotion to the interests of the Hospital. In treating by and by of the medicine department of the Hospital, I intend to point out some improvements which I think may prove of essential moment.

The Chaplain to the Hospital, whose salary amounts to £40, preaches twice every Sunday in the operating theatre to the patients, and when requested attends on those confined to the wards or side-rooms. This is all the duty which is required of him, and in consequence of the majority of the inmates preferring their own ministers to attend upon them, even this last part of the duty is seldom required. Would it not be of great advantage, as hinted at in one of the visitors' reports for 1830, to establish a small Hospital Library, which might be under the charge of the chaplain? The patients, who now spend their time in listless inactivity would thus be furnished with the means of mental improvement, and which in many cases would much assist their cure. Many of the poor unfortunates, whom I have seen under my charge in the surgical wards, could not read, and seldom cared about religious instruction; of course, the chaplain was by those individuals never called. But would such patients not listen greedily if an amusing or instructive book were taken up either by the chaplain or by a ward companion? I am of opinion, nothing would conspire so much as an adjuvant to both bodily and mental recovery, as such exercises, if judiciously engaged in.

The Treasurer's duties are so numerous and complicated, that I shall not attempt to state them. But I must here be allowed to add, that they have, of late years become so overwhelming, as to prevent any gentleman engaged in business from undertaking them, unless he employ a clerk for no other purpose than to manage them. On this account I feel confident that a superintendent such as the Directors last year recommended, has become absolutely necessary, and would be a great acquisition to the establishment.

The office of Secretary in this establishment is one of great importance. This functionary has to attend all the meetings of the general court of subscribers, the quarterly and weekly meetings, and also many of those of the subcommittees; he has also the records of the Hospital to take charge of, the funded with the moveable and landed property to inquire after, the contracts to examine, the estimates to receive and report on, the house inventories to take; in short, of all the officers of the Hospital, from the permanency of his situation, the secretary is the individual by far the most competent for the task, which I have at present undertaken. I am very sorry however to remark, that notwithstanding the great facility of access which the present Secretary has afforded me, to all and

sundry records, and documents, in his possession, I have been able to afford the profession, so very imperfect an account of the history or statistics of this excellent establishment. This has in part proceeded from the want of an Index to the Records, and an Inventory of the various books and accounts, kept by this officer, with the dates attached. Much confusion and uncertainty also, I have found to exist, in regard to the situation in which these valuable documents are deposited. Some of them I discovered, after a laborious search, in the Hospital, others in the office of the Treasurer, and the rest in that of the Secretary. Would it not be of advantage to have the whole concentrated in the office of the Secretary, who should be enjoined, to secure them in a fire-proof safe? and if additional trouble and responsibility were thus incurred, surely a small addition to the very limited annual salary, of £25, allowed this valuable servant, would be well bestowed. It is remarkable also, that not a single Annual Report could I obtain, from the above source, of a date prior to 1825; and had the two volumes of Reports, from the year 1795, which I have been kindly favoured with, by my friend Mr Alston, not fallen in my way, I fear the idea of the present work must have been abandoned. Surely the Directors will see it a duty hereafter, to file a few copies of these unique records.

In the list of office-bearers, I have only stated the names of the principal Clerks, or House Surgeons, as they have been usually called, and the first Physician's Clerk. Within these last four years, various alterations in the regulations of the attending Surgeons, have taken place, and, in consequence, the number of Clerks has increased to six; viz:—two for the surgical wards, two for the medical, and two for the fever wards. They are elected by the Directors, from among the more advanced dressers, or students, and are at first appointed to the Fever Hospital, from thence they ascend by regular promotion, to the medical wards, and from thence to the surgical; completing, during this range of probationary service, a period, in general, of three years. There is no situation, with which I am acquainted, in the profession, where a young man has so ample, and varied a field, for observation and experience, as that above referred to. He is at first strictly looked after, and if found entitled to confidence, he has a charge given him, and duties to fulfil, which makes his progress in after life secure, and often lays the foundation of his future fame and fortune.

It has long been proposed, that the clerkships, and all the other professional offices, belonging to this establishment, shall be obtained alone by competition or concours, a jury of medical men being the umpires; but I am not such a utopian as not to see faults, even in this French system of election, greater than in that which it has been proposed to supersede. One thing is certain, the talented and long experienced Physicians and Surgeons, whose names are inscribed in the interesting list prefixed to this Chapter, would, almost to a man, have scouted the idea of being tested, by any conclave of medical men, whom the Directors might, in their wisdom, have made choice of for such a purpose; and even their juniors, I am convinced, would not have condescended to be questioned in this, to them, unprofessional-like manner; besides, even granting that a jury is, in many respects, superior to that of open election, I scarcely know one single instance, in the history of this Hospital, where the Directors had to regret an appointment which took place, - and unless something of this nature does occur, my opinion is, that the election of medical men, at least, should continue as hitherto. Even in regard to clerks, I think, that the election by concours, is, in many respects, very objectionable; for it must be remarked, that all these juvenile officebearers are, when elected, admitted, as it were, into the Hospital family circle; and unless their private character is correct, however superior their professional appearance may be, I am of opinion, they ought to be rejected. True it is, some young men have been admitted, by the present mode of election, into this Hospital, who have been a disgrace to those connected with them; but the security for good conduct and eminence, is greater, I think, by the open votes of the Directors, (who become, as it were, sponsors in such cases,) than by those of a medical jury; and therefore, in this respect, I would by no means counsel any change. The only improvement which I would suggest, is in regard to the price paid for bed and board annually by the clerks, which, instead of

being £30, I would increase to £50 or £60 at least. Laying out of the question the advantages which these young gentlemen enjoy, in a professional point of view, the bed and board which the Hospital affords, I am convinced, cost more than the sum which I have recommended: this should not be.

The last office-bearer in the establishment, which falls to be noticed at present, is the Matron. I need not inform any of my readers, that on no servant does the welfare of the Hospital so much depend as on the matron; and most fortunately it has happened, that in no period of the history which I have investigated, has there been a single fault laid to the charge of this department. On the contrary, here I have seen every thing to commend, and, instead of having to record reports on reports, as to the state of the broth, beef, &c., sheets, blankets, &c., as in a metropolitan rival establishment, I have not discovered one single entry, which called for such a disgraceful procedure. Little family differences there are, occasionally, among so many young professional clerks; and much good sense and forbearance is, I doubt not, often required on the part of the matron; but, in general, the table of the Hospital is well regulated, and only wants a superintendent at the foot of it, to make it in every respect complete.

CHAPTER VI.

The list of Revenue, of the Glasgow Infirmary, may be appropriately divided into three great classes. In the first, or what may be called the conditional income, I include every item, for which some value was received, or some equivalent, either demanded or expected. In the second, I class all free gifts, whether in the shape of legacies, donations, gifts, fines, collections, exhibitions, benefits, or, in short, whatever sums were obtained without any condition, or restriction being attached to them, either as to securing a vote in the general court, or as to the purchase of a right for the admission of patients. In the last class, I rank the revenue proper to the Hospital, or that derived from lands, rents, interest of capital, either funded or bonded, or whatever arises from accumulated stock in the hands of the Directors. In proceeding to a few observations on this department of the Hospital, I have deemed it right to make the above distinctions, for though in the list prefixed to this Chapter, these three classes are frequently jumbled, as they are in the Annual Reports, still, for statistical purposes it is better that they should be kept as separate as possible.

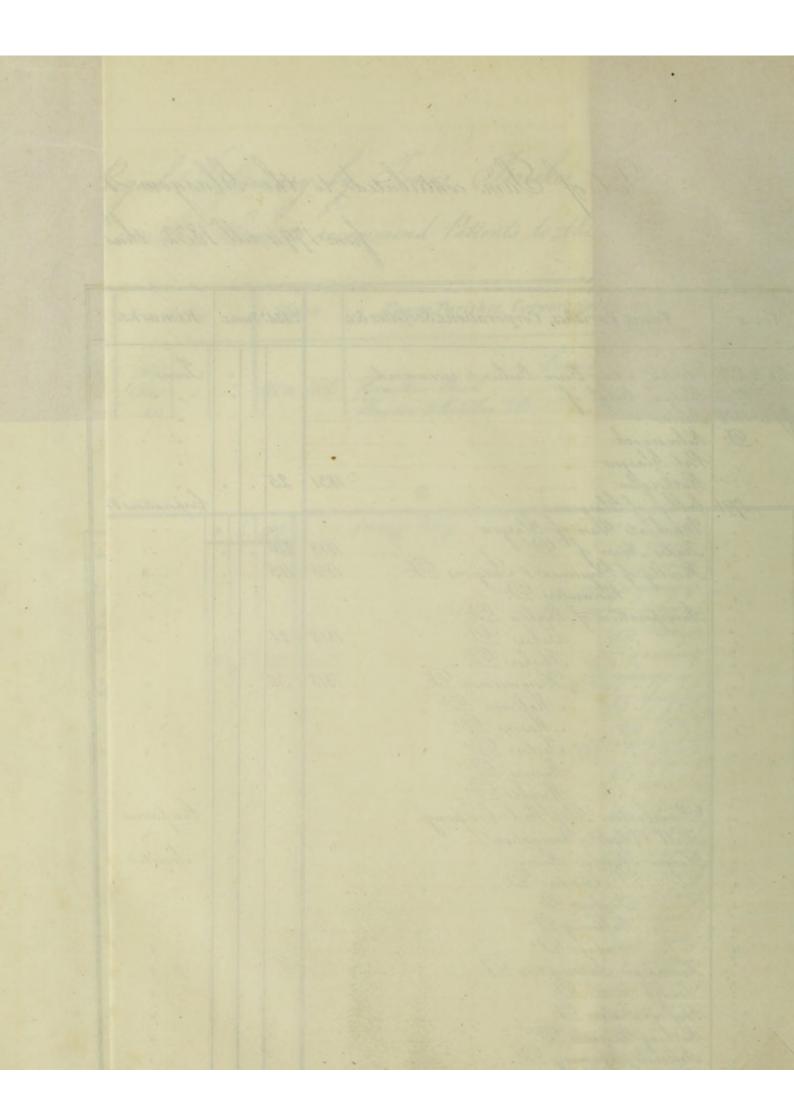
Belonging to the first class of revenue, or what I have denominated conditional, may be classed annual subscriptions, contributions, soldiers, and patients' board, students' fees, dressers' diplomas, laboratory pupils' fees, and clerks' board. The annual subscriptions, the main pillar of support to the Institution, have, as will be remarked in the list prefixed, gone on increasing progressively since its commencement; and last year, by the vigorous exertions of the Treasurer, and his active coadjutors, (the district collectors,) they amounted to the large sum of £3,300. If we refer to the number of patients admitted, it will be found that, had the right of recommending been exercised by this body of subscribers, according to the present mode of management, all the Hospital beds would have been thus constantly occupied, leaving no room for those in the right of contributors. Should not this call for some change in the qualification of subscribers? Were subscribers of £2 2s. and upwards, alone entitled to recommend patients, would the funds of the Hospital not be benefited, and space for all applicants effectually secured? With respect to the contributors to the Royal Infirmary, these may be sub-divided into two great classes, viz:—1st, Into individuals; and 2d, Into Towns, Corporations, Parishes, Kirk Sessions, Societies, and Congregations.

List of Revenue & Expenditure of the Glasgow Royal Infirmary, from 1794 till 1832, Showing also the annual surplus, deficiency and balance!

Years.	Annual Subscriptions	Students & Shop Fees,	Interest and Reni.	Soldiers &c.	Contributions.	Collections.	Legacies &c.	Total Receipts.	Total Expenditure.	Surplus.	Deficiency.	Balance.
	9 5. 2.	L s. d.	£ s. d.	9 s. d.	9 s. d.	9 s. a.	£ s. d.	L . s. d.	£ s. d.	9 s. d.	L s. d.	£ s. d.
1794	-	the same of the sa			10350.19.6			10790.16.0				2296.11.6
1795	463.5.0		84.11.11		2541.19.11		ALC: NO	3089.16.10	1779.18.6	1309.18.4		3606.9.10
1796	432.13.0	80.19.0	192.2.6		2043. 6. 6		20.9.5	2803.13.6	2035.9.4	768.4.2		1374-14-0
1797	464.5.3	72.9.0	241.10.10	95.13.5	792.19.0	32. 6.8	22.5.7	1721-9-9	1670.16.9	50.13.0	7	1425.7.0
1798	391.6.0	75.12.0	243.9.7	112.19.1	760.6.5	119.10.1	57.0.8	1760. 3.10	1842.16.9	70. 2	82 . 12.11	434214.1
1799	412.14.0	54.12.0	237.8.0	116.1.9	682.8.3	15.0.1	37.16.5	1386.0.6	1773.5.3		187.4.9	4155.9.4
1800	546.14.6	90.6.0	242.6.1	108.15.8	686.4.7		19.17.8	1724.4.6	1732.1.3		7.16.9	4147.12.7
1801	573.14.6	78.15.0	244.10.6	118.10.8	599-8-2		48.5.0	1663.3.10	1857.5.5		194-1.7	3953.11.0
1802	692.9.6	93.9.0	308.1.3	127.15.8	1050.12.5	1172.16.0	908.12.7	4353.16.5	1674.3.2	2679.13.3		6633. 4.3
1803	805.13.0	79.16.0	343.18.3	60.14.8	386.12.11		964.3.0	2640-17-10	1956-17-9	684.0.1		7317.4.4
1804	687.11.0	93.9.0	381.2.2	93.15.10	169.2.0		156.8.8	1881.8.8	1645. 2.10	236.5.10		7553.10.2
1805	769.18.6	115.10.0	395.6.11	58.18.10	412,10.0	1 1	796.4.1	2548.8.4	1732.8.4	816-0.0		8369.10.2
1806	827. 2.6	132.6.0	409.0.6	46.14.2	214.5.6		942.9.3	2571.17.11	1990.10.7	581.7.4		8950.17.6
1807	843.9.6	207.9.2	402.18.11	42.0.4	335. 2. 0		276.9.4	2107. 9.3	2323.0.4		215.11.1	8735.6.5
1808	854.14.0	203.0.0	450.3.0	49.19.0	191.10.0		446.7.3	2195.13.3	2073.3.11		477.10.8	8257.15.9
1809	1353.16.0	240.1.0	425.16.8	49.5.10	608.18.0			1228.19.8				10010.15.4
1810	2038, 7.9	265.13.16	572.14.3	73.10.3	550.15.10	815.9.0	263.3.1	4579.13.62	2737.8.11	1842.4.7		11852.19.11
1811	1742.15.3	306.10.0	518.18.0	56.15.8	177.19.6	299.10.3	1257.17.5	4354.6.1	2682: 5.10	1672.0.3		13525.0.2
1812	1914.2.0	382.13.0	639.18.6	55.19.10	46.11.6	53.14.6	626.18.4	3719-17-8	3306.15.5	413.2.3		13938.2.3
1813	1971.15.0	472.3.0	664.4.4	55.12.1	245.0.0	69.5.8	1275.9.9	4751. 9.10	3639.7.6	1112.2.4		15050.4.9
1814	1901.11.5	597.15.1	727.10.8		85.0.0		590.18.3	3902.15.5	3208.15.5	694.0.0		15744.4.9
1815	1832.15.6	376.11.3	708.5.8	34.0.6	481.18:0	,	837.10.6	4271.1.5	3549.4.7	721.16.10		16466.1.7
1816	16/16.2.6	292.9.0	775.14.1	12.13.8	130.10.0		2014.6:5	1901.15.8	8552.18.2		3651.2.6	12814.19.1
1817	1703.7.0	222.14.0	674.0.10	32.12.4	181.10.0		728.14.3	3542.18.5	4885.18.0			11471.19.6
1818	3171.11.0	278.80	731.15.8	11.11.0	270.10.0	2571.3.3	1784.15.7	8619.14.6	5689.9.3	2930.5.3		14402.4.9
1819	2293.1.0	260.16.0	779-19-7	12.1.0	295.2.3	100		4320. 3. 3				12650.16.10
	1887.14.6	A STATE OF THE PARTY OF THE PAR			177.19.0		1,355. 7.7	1421.17.5	4086.18.5	334.19.0		12985.15.10
	2271.2.6				14.0.0	100		4887.8.4				14310.11.4
100000000000000000000000000000000000000	2243.13.0			10 12 12 10	21.4.3			1282.4.6	1			1/1688.0.10
	2196.0.0				56.0.0		1000	3821.13.6				15227.14.3
THE RESERVE OF THE PERSON NAMED IN	2282.14.0	7000	STATE OF THE STATE		21.10.0			5312.4.10		1	and the same of th	16147.12.3
	2699.7.0		60		35.5.0			4750.1.10		10.00		16135.1.1
DOM: N	2670.12.0	100000000000000000000000000000000000000						3740.11.11	THE RESERVE TO SERVE THE PARTY OF THE PARTY	A CONTRACTOR OF THE PARTY OF TH	1 10000	16797.8.4
100000000000000000000000000000000000000	2507.12.6		100		311.0.0			6295. 13. 11				17864.6.0
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	3080. 2. 5				408.1.6		100	6290.19.10	1	A COLUMN TO THE REAL PROPERTY OF THE PARTY O		15436.5.8
4774	3089.3.5				224.10.6			6359.6.7				16820. 3.0
1831	3299-18-9	970.1.6	672.6.5		305. 5. 0			5762.15.11			ACRES AND ADDRESS OF THE PARTY	15996.15.6
Totals	61723 3.3	11800.15.11	20687.9.2	1525. 2.1	27/8/11.2	5905. 13.4	30157.19.0	158.984.19.114	142988. 4. 5%	27.171.2.3	11,174.6.9	15996.15.6

Sist of Sums contributed to the Glasgow Reyal Infirmary by Sowns, Parishes, Corporate Bodies, Societies 4º from 1794 till 1832, this entitling them to recommend Patients to this Institution

Years.	Towns, Parishes, Corporations, Societies & a	Ada	Sums.	Remarks.		Sums		Years.	Towns, Parishes, Corporations, Societies &c.	Add!	Sums,	Remarks.	5	ums.	
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List of Cash Bequeathed to the Glasgow Royal Insirmary, from its soundation in 1792 till 1832. Showing also the Names of the Individuals, and the amount of Duty Exterted by Government from this benevolent source.

ears	Individuals.	Principal.	Duty.	Years.	Individuals.	Principal.	Duty.	Years.	Individuals.	Principal.	Duty.	Years.	Individuals.	Principal.	Duty.
1400	Same boulter	300	18	18/3	Lord brains.	4/23 3 6	307	1890	Mr. Gray	1 509 6 9 7	679126	1897	Sames Mc Intry	13079 4 5	1052 10 10
174	Mr Sockhat	100	6	1010	William Smith	10	/	1000	Mr Shout	10			Mis Parley	100	5
	Mis Daulok	10	. 12 :	1	Mis Anul	10	1 1 1		Mu Semple	100 : :	10 :	-	James Murdock	500	50
	J. Ainsley	10	. 12 .	18/4	Miss Saurie	10 ::	11:		Mw Duncan	10	10 - 1.	1894	Rev + H Mushet	1000	100
1801	Alex Mr Alpine	500	30	1	Arch & McReddie	20	2		Olimes Budie	10 :	,	" A	Warmen Vin Buch	32 10	35.
	John Harrand	100	6		Andrew Smith	50	5	1821	P. Colguhoun	50	5		Henry Von Berg	500	Fa .
	Indew Start	30	/ 16 .		How dat Megill	200	-20		William Dunean	5	. 10:	1	Arch! Logan	10 :	30
	Favin Berge	.30	116.	1	Mr David Crawfurd	50	5		Mes Granford	200	20		Mr. Ande Melon	100	10 ::
	Mr Jold	10	. 12		Alex Gangmuir	25	. 2 10.		Am Cunningham	50	5		Walter Mediane	50	10 .
1502	Patrick Red	50	3		D. Findley	20	2		Mis Colanhorn	50	5	1	Har Saminon Sint .	44:	. 84
1503	John Grown	20	14.		Mer Gathere	50 .	5		Mis & Golguhoun	50	5	1	Mr. Sance Hright	55	
	John Brown	20	14	1815	Mr Burn	10	/		At Melich	400 -		1	Relat Globast	50	5
1804	med Somour	100	6	1	Set Dichen	2/	22		Sames Smith	105	10 10 .	1	Mr Same Smith	25	2 10 :
	Dr. How Lichie	100	6	1 3	Mil Jelfer	37 4 6	3 14 6		Same Hamilton	500		1828	dehn Medatige	50	
	Mr Dian	21	14.		Miss Billock	100	10 .	1	Thomas Durley	3/10.	3 3 .	1	Mr. Eskine	40	4
	The Mellahan	10	12	1	Hm Hunter	10			Mr Whiteler	50			James Creis	20	9
	Alex Use	50	4	1	James Smith	100	10	1822	Acht Smith	50			James Waldrope	20	2
	Mer of Dismidde	50	4		Sames Lookhast	100	10 .	1	Sames Connell	34 8 .	380		Mu D. France	57 11.	
	Mr of Relation	2/	2		David Coulter	100	10		Robert Blan	500	50		Mr 6 Crawford	105	10 10
1806	Mis Sand Cathill	500	50		Mil Dreshow	100	10		Sonathan Inderson	189 19 6		/	Me Agne Dinwoodder	50	5
	Andrew Michell	200	20 .		Rof Ha Richardson	52 6 .	541	6	My Sanet Reid	100	10		Dr. Ken	100	10 :
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	Mus l'Hord	5	10	100	Mess Maxwell	50 -	3	1	Jame Wilson	20	2	1,000	Robert Murkend	100	10
1804	John Gulch	100	10		Captain & Simpson	30 1	5		Mr Cochean	30	3		Robert Jack	5	10
100/	Sohn Belch	20	2		Hathew Machen	1000	100		Mr. Al Jane	20 : -	2	1	Robert Graham	30	3
	Andrew Generall	20	2		Sames Smith	50	5		Lady Some Brile	50	5	1	6 9 Parker	300	50 .
	P. Benman	10	1 7 1		Thomas Muse	10	1 /		mill me Hooked	25			John Brown	150	0
1808	John McCall	10	1 / 1		Mr. J. Stimast	105	10 10	1824		69 7 4	6180		mr R Clark	50	5
	Alax Donaldson	20	9		Mr Staling	52 10	5 5	- Mary	How Calderhead	300	50		This of Smith	10 10 .	
	Mile Rev	30	1 3 1		My bist	50	5		Buncip Wo Taylor	20 .	2		Mes of Logan	105	
	William Gelleshie	50	5		Mes M. Bryer	300	30		Adam brock	50	3		Miss Margaret Schneton	100	10
1800	Alex Peter	50 .	5	1817	Sient Col Morry	50	5		Mr Hallybuston	50	5		James Geran	100	10 :
	Ha Millar	100	10:	101/	Mr. A. S. Saw	30	5		Su A Compbell	10 : :	/		James Dakes	19 19:	
	Saur Dinwooddie	100	10		Allan Brown	50	1 -	1	Hagh Carmichael	25	/		Mis Fist	1 70 70	
	John Sym	30	3		My A Crofy	10 : :		1	H-Walker	10			George Sott	13019:	2 .
1810	William Falomer	10	1 1		Mr. S. Mitchell	1 2 .	1 1		Thomas Koman	300	30		Hary Von Birg	17 10 :	1 15
	Robert Wallace	3/ 10 .	33	1818		100 : :	10		Mr. Hallyburton	75	7 10 .	1830		30	1 10
	William Stal	50	5.	1010	19	100	10		James Machie	50	10.	1000	My Sames Ewing	20	2
	David Black	2/	2 2		A Gady Mow Gardner	100 : :	10:	182	John Ronald	10 : 1:	/	1	Beril Robertion	50	3
	Miss Petterfield	20 .	2 .		Agnes Sommerville	53 12 7	57	2 7000	An Monteath	200	20		Mr. Waddell	250	35
1812	Miss Wallace	10 .	1 1		11- Ochart	31 10	3 3		John Cartyle	100	10 .		Nicol Brown	100	00 1
	N- Brown	35	5 10		H= Stenhouse	50 8	54	0	George Gargoood	50	5		Sabella Merlion	100	
1813	Me Coulter	31 10 .	3 3	: 1819		- 10	6	4	Sha Bertholoman	50			Charles Stirling	100	
	Much Buly	1.100	10	. 1019	Alex Campbell	100 : :	10		Thomas Stack	30	5.		Benjamin Shord	269 14 4	51 /2
	Mis A Begle De Robert Rodges	100	10:	3	David Connell	100:	10:		Mr. D. Aloring	20			George Buchanan	30	
	Mes Re Brale	100	10	84	Thomas Carrie	50	1 "		Sat Marchall	20 .	2 .		My Parlane	201 2 4	20 .
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List of the number of Annual Subscribers to the Glasgow Royal Infirmary, from its commencement in 1794, to 1832.

YEARS.	£30	£21	£15 15s.	£10 10s.	£5 5s.	£4 4s.	£3 3s.	£2 2s.	£1 ls.	TOTALS
1795	100/2020	1	-	-	9	3	9	90	141	253
1800	The second second	1	The same has		8	1	11	116	185	322
1805		1		3	11	4	17	130	301	467
1810	No. of Street	1	ALL OF THE PARTY O	7	20	2	39	288	988	1345
1815		1	A TOWN	8	22	2	46	267	866	1212
1820	10000	1	Consultation of the last	10	39	4	- 70	263	718	1105
1825	Service .	2	2	- 11	38	5	74	326	1277	1735
1831	2	3	3	22	38	6	74	341	1495	1984

NUMBER OF ANNUAL SUBSCRIBERS, AT THE FOLLOWING SUMS.

List of the number of surviving Contributors, entitled to recommend patients to the Glasgow Royal Infirmary in the year 1832, with the sums which they have respectively contributed.

Year 1831.	£300	£200	£100	£50	£40	£30	£25	£21	£15 15s.	£10 10s.	TOTAL.
Number of Contributors.	1	1	8	18	2	3	10	27	1	143	214

450, No. of patients liable to be sent for treatment, by above contributors,

In the Annual Reports published since the year 1825, a very accurate list of the first class of contributors, has been regularly exhibited along with that of the annual subscribers; (see above list;) and by this means we are enabled to calculate the debt of the Hospital, to those individuals who have so liberally come forward in its behalf. Unfortunately, however, this is by far the smallest part of the account; the sum at the credit of the second class, or corporate contributors, amounting, from my investigation, to much more than that of the first. In the year 1812, an Appendix was published, by order of the Directors, containing a list of all the Contributors, both individual and corporate; and had this practice been continued, one would have been enabled to see, at one glance, a complete debtor and creditor account of the Institution, as to this very important class. I have, with much care, constructed the table of corporate contributors, prefixed to this Chapter, and from this a very correct view may be obtained of this part of the Hospital Revenue. In those times when so much is said as to poor rates, being applicable for the admission of fever patients, it is of great advantage for all concerned, but more especially for those parishes who have already so handsomely given the Institution their support, to know how matters stand in this respect.

If the power of recommending patients is raised, in the case of annual subscribers, it necessarily follows, that it be also raised in that of contributors in the same proportion; indeed, as matters stand in the mercantile world, and as the interest of money has so much diminished, I think it would be but justice to place all the contributors of £20, on a par with the annual subscribers of £1 ls. and so on in proportion. The Hospital Directors have never been able to obtain more than 4 per cent for their capital, and though the contributors to the Institution

may in some respects be likened to annuitants, having only a life-benefit in the sum contributed, still I think it is too small an equivalent for the right obtained. All public bodies which contribute, are, by the existing laws, also placed upon too favourable terms for the Institution; for, having a perpetual right of recommending patients, they should be looked upon as interminable annuitants, and their contribution for the privilege above stated, should (if my previous premises are correct,) be raised to at least £35 or £40, for every patient who may be annually sent.

At the commencement of the Hospital history, there was no medical staff attached to this city, by government, and, in consequence, many soldiers were admitted into the wards of the Infirmary, on payment of certain sums which the Directors then deemed equivalent to their treatment. Venereal male patients must also, by the laws of the Institution, not only present a subscriber's line, but submit to pay a fine of 10s. 6d. before they can be admitted. It will be seen by the prefixed table, that this is a very small branch of the Hospital revenue, and of late has so dwindled down, that the venereal fines, instead of being continued in this list, are now, I believe, transferred to that of students' fees, &c. Females with syphilitic symptoms, are by the laws excluded from this Hospital altogether, and are treated in the Lock Hospital, a separate charitable establishment situated in Rottenrow. The fees paid by the medical and surgical pupils, for their Hospital ticket of admission, amount to a considerable sum annually; and, as will be remarked, this branch of Revenue, more than any thing else, proves the estimation in which the Hospital practice is held, and the corresponding advantage which the pupils enjoy during their attendance. Till within these last three years, £3 3s. was the sum paid for an hospital pupil's ticket of admission for one year, which term was all that was deemed necessary for a surgical diploma. The Faculty, however, in accordance with the spirit of the times, very properly enacted, that a two years' hospital attendance was necessary; and the Directors of this Infirmary, instead of exacting two guineas more, as they had been previously in the habit of doing, for a second year's ticket, reduced the price to £4 4s. for a two years' attendance. By this arrangement the pupils were benefited, the diploma of the Faculty was enhanced, and the Infirmary revenue also, at the same time, considerably improved. Indeed, considering the value of the information communicated, and the great variety of diseases concentrated in this Hospital, I am decidedly of opinion, the two years' hospital ticket should be raised to £5 5s., the price of a one year's attendance at the Edinburgh Infirmary. As to the clinical tickets, these I have discussed, in adverting to the advantages of this Hospital, in Chapter IV. The arrangements in regard to the office-bearers' part of these fees I shall leave till I come to the Hospital expenditure. For the purpose of showing the increasing celebrity of this Hospital, as a practical school of medicine and surgery, I have subjoined a list of the number of students, who have annually enrolled themselves at the two periods of May and November, for the last ten years.

List of Hospital Pupils who have attended the Glasgow Royal Infirmary, from 1st May, 1822, to 1st May, 1832.

YEARS.	TERM.	No.	TERM.	No.	TOTALS.
1822	May	42	November	52	94
1823	t hant bear	49	A STREET VANDERS	66	115
1824	STATE OF SE	42	a at Agrandis la	60	102
1825	mongan He w	49	and to all all admini	71	120
1826	46 4 1000	64	I sda a principal	55	119
1827		43		84	127
1828	100	62	of total	102	164
1829	-	53	inoquas salt s	108	161
1830	-	52	01100000000	94	146
1831	T - Total State of the last of	37	and the late of the late	84	121
					1269

Average annually, 127 nearly.

The last item in the list of conditional revenue, is that for Dressers' diplomas. I stated formerly, that there was no fee exacted for this situation in the Glasgow Infirmary, and this is literally true; at the expiry, however, of the term of service as Dresser, the establishment grants a kind of diploma or certificate, if requested, as above specified, for which the moderate sum of 5s. is charged. This is by far too small a fee for this very important situation. In London, £52 10s. is exacted for a dressership to some of the hospitals, and even in the smallest metropolitan establishments, the premium is upwards of £20. If the Directors of this Institution were to raise the fee of Dresser to £1 1s., or even to £2 2s., I feel convinced, that it would be agreeably paid, provided it were accompanied with the understanding, that all those who had served in this capacity, would, cæteris paribus, be at all times preferred to the superior office of hospital clerk, on the occurrence of vacancies. The hospital revenue would thus be a gainer by the change, to the amount of, at least, £50 annually.

The second class of revenue, as before stated, includes all sums bequeathed or gifted to the Hospital, which are not intended either to purchase a title to membership in the general court, or to recommend patients. Of these, the first to which I shall advert is Legacies. For the purpose of more correctly showing up the system of taxation, adopted in this free country, I have at no small trouble extracted from the annual Reports, every the most minute sum accruing to the Hospital, from this very benevolent source, with the various sums extorted by government in the shape of duty. The tax on legacies was at first only 6 per cent; in the year 1796, it was raised to 8 per cent; and in 1806, it was again elevated to 10 per cent, at which rate it now remains. Now, in my opinion, the Directors should instantly petition the Legislature, to have this tax on the poorest of the poor, and on them solely, instantly removed, and it would even become a question, whether or not, every farthing of this tax, which has been paid by the Infirmary should not be refunded. Instead of placing a tax on such a source of revenue to charitable institutions, how much more commendable is the conduct of a neighbouring government, which has allowed various items of the excise, to go to the support of its hospitals, and in every possible manner has assisted in replenishing, instead of exhausting the funds, destined to the support and recovery of the poor. Why are the hospitals of Ireland so largely supplied with government funds for their support, and those of Glasgow thus taxed? I feel quite convinced, that the present liberal administration of this country, require only to have the case properly and forcibly stated, to recommend the Legacy tax on public charitable establishments, to be instantly repealed. It may be said, that the benevolent individuals who bequeath, knowing the existence of the tax, often leave a sum necessary to provide for its liquidation; or occasionally anticipate the king of terrors, as well as his Majesty's government, by gifting in their life time what they would have otherwise retained till death; but such arguments only, in my opinion, tend to exhibit in a stronger point of view the odious nature of this most unjust of impositions, and should make the Hospital Directors more loudly call for its immediate repeal.

Gifts or Donations are the 2d species of unconditional revenue. These are of various kinds, sometimes they are presented to the Hospital in the shape of hard cash, and frequently in that of coals, bread, meal, spirits, &c. &c. During the progress of the Hospital history, I mean as to its expenditure, there is no notice taken of the sum which would have been required, had the generosity of the coal masters not provided for the wants of the establishment, in the manner which they have all along done. Fuel, which in other hospitals is one of the largest items, in the accounts current, will be remarked by and by, to be here one of the smallest, and this entirely proceeds from the fact above stated. Indeed, so munificently have the proprietors of coal works, in and around this city, provided the Hospital with this article of consumpt, that upon an average, during the last ten years, I have remarked, that more than 300 carts, or about 150 tons have been thus gifted annually.

In the list of Revenue, the donations or gifts are mixed up with the legacies, and other items to be enumerated immediately; but if the total of proceeds from legacies be subtracted from this column, a just estimate may be

formed of what has accrued to the Hospital funds, from this source, exclusive of coals. Under this species of revenue, may be also included, benefits at theatres and places of public amusement,—fines in the Police, Dean of Guild, or other law courts, and in short, all and sundry sums either by individuals or public bodies, which are unrestrictedly gifted to the Hospital. In the early history of this establishment, I have found that the revenue from fines in the criminal courts of the city, annually amounted to a very large sum, and so productive was this item for many years, that had it been continued till the present day, considering the increased size of the city, and the amount of crime, I am convinced, it would have covered at least one fourth of the whole Hospital expenditure. Why has the Hospital funds been deprived of these productive sources of revenue? What more appropriate method of preventing crime, and of removing all plea against the severity of its punishment, than to devote the proceeds of the fines levied in all the burgh criminal courts, to this benevolent object? I think the foregoing facts require only to be stated, to induce the authorities again to act on the suggestion which I have thrown out.

As to the revenue arising from benefits at theatres, &c., this has been always very small. A provincial city is not the place for such public amusements, and indeed, unless the Hospital Treasurer is active, and pressing for such exhibitions to augment the funds, the individuals who undertake these speculations, have in general, in this city, found them such ruinous concerns, that I believe they have had enough to do to prevent themselves individually, from becoming objects of charity, rather than being in a situation to afford any thing in the shape of benefits to the Hospital funds. In Paris where public amusements are so universal, and where a 10 per cent tax is exacted from the proceeds of all the theatres, and 25 per cent from those of balls, public gardens, &c., for the support of the hospitals, the amount of revenue from the above source, has of late become so large, as to amount upon an average for the last ten years, to the incredible sum of £25,000 annually. Nothing in the history of the two cities could be produced so characteristic of the manners and customs of the inhabitants, as the above statistical fact. The inferences from it in a moral and religious point of view, I shall leave in the hands of those more competent to do them justice.

Before concluding this branch of revenue, I must advert for one moment to other sources, from which large sums are derived for the support of the hospitals in the French metropolis; and though it may not be thought advisable to adopt, in this city, any of the measures I am about to detail, still, the mention of these may perhaps lead the Directors of our excellent Hospital, to devise similar means by which to assist in maintaining its independence. The first source which I shall mention, is the excise upon all articles of local consumption, resembling somewhat our ladle and multure dues. This tax for the support of the charitable establishments of the French capital, is of such importance, as annually to amount to upwards of £200,000. The second is the pawnbroking establishments, or as they are there called, the Monts de Piété, all of which are solely for the benefit of the hospitals, no private pawnbrokers being sanctioned. This item of revenue, in general, amounts to upwards of £20,000 annually, but the manner of obtaining it, is of so demoralizing a tendency, that strong doubts have been expressed, whether hospitals should be thus supported upon the downfall of any class of the community, or by a tax levied from the lowest of the low, who are in general the sufferers. The last item worth mentioning in the revenue of the French hospitals, is the verification of weights and measures, similar to our coal weighing machines, &c., from which our police draw so considerable a sum annually. These all, with many others of a similar nature, might be brought into operation by the introduction of certain clauses in our new police bill, and thus our noble Institution might be in some measure relieved of the hazard to which it is exposed, by being so much at the mercy of the annual subscribers. This class of citizens, I have no doubt, will always be willing to come forward in support of the Infirmary; but in times of commercial embarrassment and stagnation, which so frequently occur in this city, and at which period funds are most required, it cannot be supposed, that this branch of revenue will be maintained in that state of vigour, so necessary to the upholding of the capital of the establishment. Before leaving this branch of revenue,

there is a very considerable item, which ought, I fear, rather to be placed in the first list, or conditional; it is the collections made at the church doors, both in the Establishment and among Dissenters. By a reference to the table of corporate contributors within the city, it will be remarked, that at various periods, large sums have thus been collected. This is a plan of raising funds so effectual and so praiseworthy, that I am quite astonished how, instead of being had recourse to once in 10 or 20 years, it is not annually resorted to. Thus the middling and lower classes can contribute their mite, and many thousands in such a city as this, who could not subscribe a guinea or even half a guinea, would, if such an opportunity were annually presented, be most willing to show their interest in the Institution, by throwing into the plate at the church door, their unostentatious shilling or half-crown; and thus, as it were, help to secure to themselves or their neighbours, that freedom of access in fever cases, which has been of late so beneficial to all classes, in this vast commercial community. As to the legal question of poor rates, being available to secure hospital treatment, for those who have acquired a legal parochial residence, I shall not take upon me to decide, after what has been so elaborately written on the subject; but I cannot help remarking, that the great majority of those who obtained fever-hospital accommodation, of late, were strangers who had not acquired three years' residence; and were therefore not entitled to any parochial relief.

The last class of revenue remaining to be discussed, is that arising from interest of capital, in whatever manner invested. In most of the other hospitals of the kingdom, this forms a very considerable item, and in those of London and Paris, their main support is derived from this source. Indeed, some of the metropolitan establishments, as Guy's, St Thomas's, and St Bartholomew's, are so independent, as to be almost wholly supported by the interest of capital, either originally bequeathed for their endowment, or which has gradually accumulated during their progress. Most unfortunately for the Glasgow Infirmary, this source of income has always been very small, and must continue so, unless some Glasgow Guy, or Montyon, comes to its rescue; for so urgent have been the entreaties for further accommodation, that no sooner has a little accumulation of capital taken place than it is instantly absorbed, by some additional wards being erected, or new outlay devised, for the further accommodation or comfort of the hospital inmates. And thus it is, that this branch of revenue, which, in the year 1812, was nearly £640, amounted last year to little more than £670; and the capital from which this was derived, which was in the former period £15,000, was last year only £16,000, not more than £1,000 having accumulated during these last 20 years, notwithstanding the rapid increase of size and wealth, of this flourishing city and neighbourhood. This state of matters should not be allowed, if possible, to continue; for if any event were to occur, to dry up the other sources of hospital income, the whole of this accumulated capital would be expended in little more than two years, as may be remarked, by glancing at the revenue table prefixed. To add to this surplus store, I have used my feeble endeavours in what I have already suggested, and, I hope to be able in what is to follow shortly on the Hospital expenditure, still more to promote this laudable object.

In most establishments of this nature, it is of considerable consequence, to have an accurate knowledge, not only of their moveable capital, but also, of what sums have been expended upon their erection, or the additions which have been successively made to them,—the price or value of the ground which they occupy, or which is attached to them for the use of the inmates,—the furniture which they contain,—the stock of medicines, surgical apparatus, &c., which has been accumulated;—in short, a balance sheet, in which might be made to appear, what stock in whole belongs to the Institution. This has never been drawn up, so far as I have been able to learn, and therefore, I hope to be excused for making the first essay of the kind; if erroneous or imperfect, it will only the sooner call for correction, from some more able pen. Inventories have been regularly taken, of all and sundry articles belonging to the Hospital; but in none of the annual Reports which I have before me, nor in any

of the records which I have perused, have I been able to discern any thing like an estimate of the Hospital capital, in buildings, ground, furniture, &c.

The ground upon which the Infirmary stands, along with that occupied by the Fever Hospital, and the adjoining airing grounds, in whole amount to about three acres; now, though more than two-thirds of this valuable spot, was gifted by the Barons of the Exchequer, to the Institution at its commencement, I am entitled to take this into the account, when estimating the value of the whole Hospital capital. From the fluctuating value of property, in and around this city, 'tis no easy matter to arrive at an accurate conclusion, in regard to the present worth of this ground; by a reference, however, to a public sale of ground immediately contiguous, in the year 1817, I think this may be very nearly ascertained. The property called Spring Gardens, belonging at that time to J. Swanston, Esq., and containing about 2 acres, was purchased by the town of Glasgow from his trustees for £3,300. Now, if we examine both situations, it will be found, that the Infirmary property is the more valuable of the two, and, therefore, I have placed the value of the whole Infirmary grounds in the balance sheet, at £5,000. The front building cost in the year 1796 about £9,000, the north centre addition in 1817 about £4,000, and the Fever Hospital as far as finished in 1829, about £4,000, making in all £17,000. If to this sum we add £1,000, as the value of the surrounding walls, the Porter's lodge, the out houses for washing, drying, &c., we shall nearly arrive at the cost of the buildings, &c., erected since the commencement of the Institution. The present value of the whole, I have reduced to the sum of £15,000, in consequence of the altered value of the materials used in building, as well as from the tear and wear which all of those, more particularly the oldest, have sustained since their erection.

The amount of expenditure for house furniture, repairs, apothecary's shop utensils, surgical instruments, &c., and house stock of all kinds, has amounted, during the last 38 years, to £17,000, which, upon an average, amounts to nearly £500 per annum. To place a value upon such an accumulation of stock, is a matter of much difficulty and uncertainty; for from the inevitable annual destruction of a great part of it, more particularly the bed furniture, and from the tear and wear of all the rest, it must be allowed, that not more than £3,000 or £4,000 can be placed in the balance sheet, opposite to this account.

The following, therefore, may be assumed, as the state of the account at the present moment, of the Glasgow Royal Infirmary.

Total Stock of Hospital,	£40,000	0	0	
Do. in Furniture, Medicines, Instruments, &c.	4,003	4	6	
Do. in Buildings,	15,000	0	0	
Stock in Ground, 3 acres,	5,000	0	0	
Surplus Capital yielding interest,	15,996	15	6	
	t	8.	a.	

In the year 1830, the late Mr Yates bequeathed to this Infirmary a fifth part of the island of Shuna; but from the litigation which has been threatened by his relations, some uncertainty exists as to the ultimate decision of the law authorities in regard to it. If a favourable decision is given, it is thought that a sum amounting to £2,000 may be added to the above stock from this source. As far as I can ascertain, there is no other item which can be placed in the above account, with the exception of Mr Thomson's legacy bequeathed in the year 1808, but which still burdens the funds with annuities, to the amount of £25 annually. This legacy which amounted to the sum of £1,000, was at the above period, added to the capital stock; but if the nature of this transaction is minutely inquired into, I fear it has not been so good a legacy as by the Directors in 1808 was imagined. On an average these last 24 years, £35 have been annually paid his legatees, which if multiplied by

List of Expenditure of the Glasgow Rayal Internary from 1794 till 1852

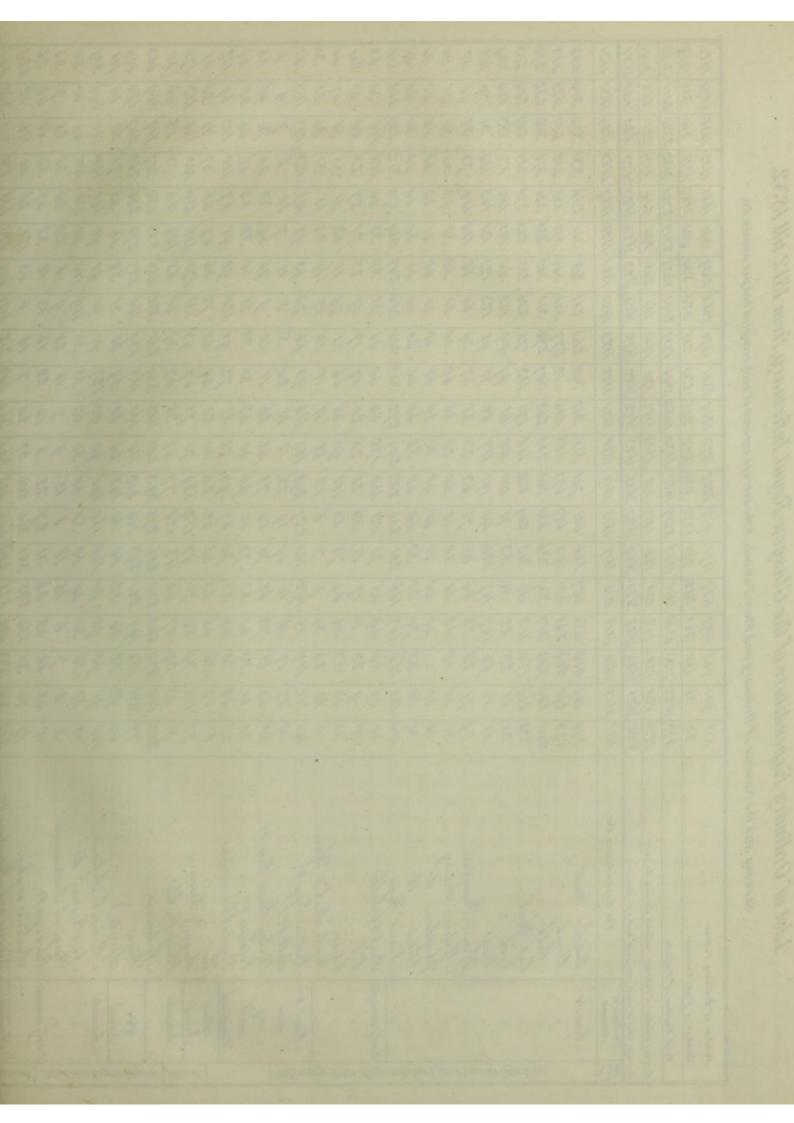
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List of Expenditure of the Glasgow Royal Infirmary, from 1794 till 1832.

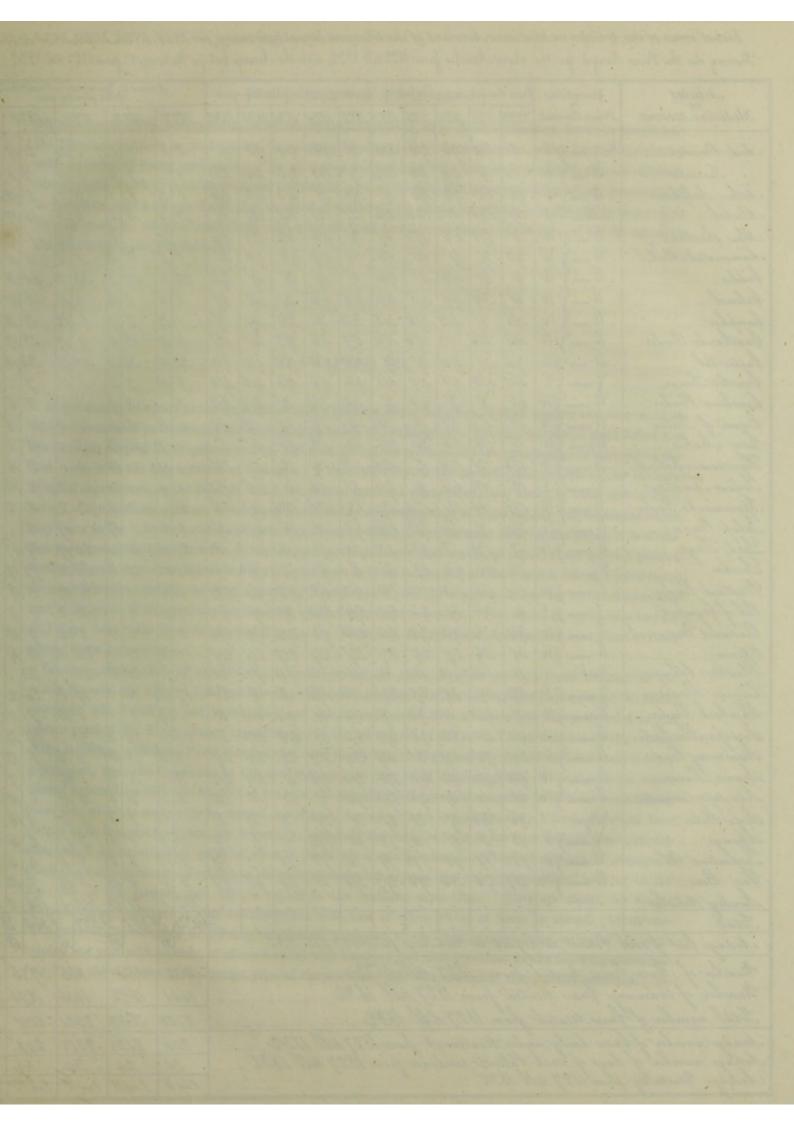
Showing also the Average Cost of each patient, in regard to Diet, Medicines. &c.

		1	2	3	4	5	6	7				
Years.	Number of Patients Discharged.	Net Bependiture, Matrone Pable De Song, Candles &: Wages &c.	Netteines, Wines, Spirits, Instruments, Medical Salaries &	Furniture and Repairs &c.	Stationery, Stamps, More recent, Printing, Prenting,	Total Ordinary Expenditure.	Buildings, Additions, and Fever Hospital &	Grand Total Expenditure	Average of Expense as per Column, Nº1,	Average of Fixpense as per Column, Nº 2.	Average of Fapense as per Column, N°5.	Average Daily Expense as por Column, Nº 5.
1794		L I D	L. F.9	8 8.9	9 99	L AD	8494.4.6	8494.4.6		3	o ordina	
1795	226	500.0.0	173.14.0	447.3.3		1120.17.3	659.1.3	1779.18.6		15/	99/	29 Pence
1796	338	663.5.7	200. 0.0	736.15.5	135.0.0		300.8.4	2035.9.4	39/	11/	97/	19 .
1797	545	1000.0.0	343.13.5	227.3.4		1570.16.9	100.0.0	1670.16.9	36/	12/	57/	16 .
1798	569	1011.6.7	245.1.3	211.8.11	125.0.0	1642.16.9	200.0.0	1842.16.9	35/	101	57/	14.
1799	631	1096.11.9	332.17.9	285.1.8	58.14.1	1773.5.3		1773.5.3	34/	11/	56/	13 .
1800	733	1200.0.0	250.5.9	21.0.0	25.0.0		235.15.6	1732.1.3	32/	6/	401	12 .
1801	702		290.0.0	322.0.0	95.0.0	/		1857.5.5		8/-	52/	16 .
1802	729	1163.1.0	270.19.10	142.4.4	and the second second	1674.3.2		1674.3.2		7/	45/	13 .
1803	806	1152.4.7	246.18.2		42.4.9			1956.17.9		6/	401	12 .
1804	678	1096.11.7	242.4.8	250.16.1	55.10.6	1645.2.10	and the	16/15.2.10		7	48/	12 .
1805	719	1162.1.6	219.18.10		48.15.0			1732.8.4	1	6	48/	14 .
1806	700	1196.6.5	343.19.8	350. 9.5	99.15.1	1990.10.7		1990.10.7		9/	56/	14 .
1807			400.9.6		73.18.5		San Printer	2323.0.4		11/	6.3/	18 .
1808	1000000	1766.4.6	509.4.5		73.3.4		35 years, 6	2673.3.11		12/	63/	15 .
1809			386.15.4	/	28.13.4	1	of the species	2476.0.1		8/	55/	16 .
1810	936		459.16.4	633.19.21	Mar on M	2737.8.11		2737. 8.112		9/	58/	15 .
1811		1606.5.6		258.7.4	185.7.11			2682.5.10		13/	66/	14 .
1812	11	2055.11.9	665.1.2	200000000000000000000000000000000000000	114-2.6			3306.15.5		15/	75/	16 .
1813	0000000	2193.6.0			120.12.7			3639.7.6		19/	71/	18 .
1814	1135	1951.13.8			138.4.0	3208.15.5		3208.15.5		13/	54	16 .
1815	1340	2281.16.7		CONTRACT TO SERVICE	102.15.6	3549-4-7	100	3549.4.7 8552.18.2		11/	52/	18.
1816	1511	2687.0.2		828.7.0	142.9.11	4885.18.0	3973.13.0	4885.18.0	35/	12/	51/	19.
1818		3320. 2.11	1027.010	449.6.7			100.0.0	100000000000000000000000000000000000000	1000	9/	481	18
1000000		3851.16.5				5589.9.3				13/	611	19.
1819		2857.12.0			1000 mm 1 7 5 20 mm	4001.19.5	100000			8/	501	17.
1821		2423. 4.4						3562.12.10	200	9/	48/	14 .
1822		2479.19.7			-	3904.15.0		3904.13.0	1000	8/	48/	15 .
1823		2196.19.1	11					3282.0.1	100	7	1	14.
1824	///	2843.19.4	C 20 (20 (20 (20 (20 (20 (20 (20 (20 (20		A CONTRACTOR OF THE PARTY OF TH	4392.6.10		4392. 6.10		6/	12/	16 .
1825	1	2965. 6.8				4762.13.0		4762.13.0	1	1/	39/	15 .
1826		3036.0.3				4928.4.8	0.0000000000000000000000000000000000000		and the same	7/	12/	16 .
1827	1	2994.1.7			/	4921.10.9		/	100	7/	36/	14 .
1828		2888.13.4					2763.1.9			6	3//	15 .
1829			1434.17.0				1550. 5.8		150000000000000000000000000000000000000	12/	49/	17.
1830			1452.12.6			3175.9.3		3175.9.3	29/	14/	501	13 .
1831	3/83	3276.8.0	2058.13.6	865.2.0	335.19.4	6536.2.10	50.0.0	6586.2.10	201	12/	4//	14.
Totals	50,108	76807.12.8	25307. 3.1	16501.16.23	4731.18.0	123,348. 9.118	19.639.11.6	142988. 4.5	30/ - 1/2	10/1	49/23	1164
2.47	. 7.4	3										



List of Ordinary Expenditure of the Glasgow Royal Infirmary, from 1812 till 1832.

Showing also the Number of Ordinary and Fever Pationts, Ethe average expense of each occupied bed per annum &c.



List of some of the Articles in Medicine Account of the Glasgow Royal Infirmary, for 1827, 1828, 1829, 1830 & 1831. Theowing also the Bries charged for the above Articles from 1822 till 1832, with the Average last for Medicines & from 1827 till 1832.

Articles	Quantities	Price e	harged	as her	Par bos	k it I	nfirmar	W. 41V.7	he foll	owing	years.	di	mount of &	whendolure a	ov Prands + Shi	Unigs
Medicine Account.	Prices Current.	-	-			-	-	47 7		1831	1		1828	1829	1830	1831
	1.					- 1		. //	111	1/2	11	Í	1020	- Lang		100
Seid, Brussic	Buz = 38	3/	2/6	2/6	2/6	2/6	2/	1/6	1/6	1/3	1/	25	//	. 14	2/9	3
· Jartaric	1.16 = 3/16	5/4	5/	4/8	4/9	3/4	3/	2/8	2/6	2/6	2/3	7 -	7 4	8/1	1/	19
Alther Sulphuric	. lt - 3 16 . bellow _ 16 12	16/	6/3	5/6	5/6	5/	3/6	5/	4/6	4/6	4/6	3 9	17	2/2	2 /2	31
Aloes Socotrine	. lb _ 3 16	57	13/6	11/1	4/3	140	14	14	111	1/1	11/1	3 9	4 2	00	16/7	14
Ammoniated Mechol	16 2 16	2/3	4/8	9/	1/8	1/6	110	1/6	1/6	1/6	2/	10	2/1	3 14	1 1	h 1
Caddis	1.16-216	4	141	116	41	416	41	41	3/	3/	2/8	22/	67 3	58 2	60 3	14
Calomel	. lb_2 16	6/	3/9	5/9	4/8	4/4	4/2	416	41	4	41	1/	1/1	1/10	210	1
Camphor	. lt _ \$ 16	576	41	4/3	3/10	3/8	3/2	3/	2/8	4	51	1/17	29	1/2	3/10	3
Cantharides Proder	.16-3/16	10/6	10/6	10/3	10/6	10/6	8/9	8/6	8/3	16/	12/	11/4	15 6	9 17	13/7	19
Castor Oil	.ll-316	3/4	3/	2/10	2/	2/	1/10	1/10	1/10	1/4	1/4	32 10	38/3	15/3	34/6	33%
Caustic Lunar	- 3-78	4/10	4/10	4/8	4/9	4/8	4/6	46	4/6	4/6	4/4	719	7 3	511	7.	51
Cinchona Powder	. 26 316	6/6	7/	1	6/6	5/	4/6	3/6	3/	2/9	2/8	5 .	36	3/1	26	1 -1
Gream of Jartar	11 - 316	1/1	1/2	1/1	1/1	/10.	19%	19	192	192	19,	65	86	10/4	11/10	11/
Sum Arabic	11 216	2/	119	1/6	1/6	1/9	16	1/2	1/6	1/8	1/1	10 9	10 12	17:	18 2	22/
Hysiciamus Extract.	16-216	12/6	12/	11/6	11/1	146	11/6	12/	12/	13/	14/	- 17	. 16	1 4	3/6	4
Thecacuanha Powder:	32-38	15/6	10/	6/6	19/1	1/2/	1/2/	191	1011	1/27	1/51	19	- 10	00	2 16	2
Talah Bowder	16 216	5/4	57	5/1	3/3	13/1	3111	14	140	19/11	57	10	. / /	. h h	0 6	101
Lard, Hogs.	.lb_216	14	1/4	1/7	18	7/8	1/5	1/6	16	1/8	16%	29 6	3/.	24 14	10 19	20
Suches	.100	7/6	16/	6/6	10/	91	8	8/	7/	36/	10/	30 18	72 3	89 11	77/14	121
Mustard Proder	.lb316	1/4	1/4	1/3	1/2	1/4	1/3	1/3	1/3	1/3	1/2	419	97	1/2	518	10
Oil of Cajuput	. 3-38	4	3/6	3/	2/6	2/6	2/6	2/6	3/	4/	8/	. 11		22	1/7	1/6
Cintment Mercurial	. 2 316	3/4	3/4	3/3	3/4	2/5	2/6	1/6	2/6	2/6	2/6	29	2/1	2/0	910	3 1
Opium	.lt_ 316	41/	36	29/	28/	23/	22/	22/	22/	24	23/	17 5	15.	26 3	18 14	24
Plaister, Adhesive	· yard	16	162	1/7/2	16	16	16	16	16	16	15	18 -	2010	22 7	33 .	27/
huinine Powder	-32-78	52/	48/	38/	29/	24/	15/6	10/6	- 8	9	8/6	17 3	18.	19/	26 2	200
Rheubarb Powder	11-316	7/	6/6	3,1	2/6	1	6/6	6/	6/6	6/6	6/	19	15	1.10	///	1 /
Sarsaparilla Root	.lb _ 3/16	4/8	4/	3/6	36	4/3	6/	4/	46	49	4/	20 11	42 4	30 .	29,14	341
Senna Leaves	11 216	86/	72/	044	011	44	34	32/	28/	20/	28/	3 4	3 7	4/6	6 3	2/4
Soda super Carbonate	11-316	41	4/8	4/4	4/6	2/8	1/4	40	1/11	1/11	1/10	3.	66	1/1/15	37	11
Soda Water	Dozen.	3/6	3/6	3/.	21	2/	3/	3/	3/	2/	2/		18	4/1	016	10
Sponge	: 4-48	18	11	11	1/10	1/10	110	195	11	11	19	28	15	3/1	26	2/4
Turpontine Oil	. It 316	192	1/9	1/8	1/4/8	19	16	1/4	1/4	1/4	1/4	2/7	28	26	44	50
Wax Bess	.lb 316	2/7	2/6	2/6	2/6	2/4	2/6	2/	1/6	1/8	1/7	510	6 13	514	7/2	5%
Sundry articles						,	-					152 1	7/ 13	100 1	106 11	119 1
Total										4	,5	434 8	1487	1537 3	1569 3	1600
Average Gost of each	Patient in	regar	do	Medi	cines	from	182	till	183%			. 38	- 37	- 53	- 68	- 6
Number of Flever	Cases treated	1 fro	m)	1827	till	1/8	32		.,			1084	1511	865	736	1659
Number of Ordinar	ry Cases tre	ated	fron	n 18	27/2	ill	1832	2				1641	1622	1456	1274	1524
Total number of	110		11 1		1 10				£			2725	3/33	2321	2010	3/83
Average number of	bases daily u	nder	trea	tmen	1-1	om 1	1827	till 1	1832	Commence		206	2/32	22/2	248.	3091
Sverage number of s Sverage number of Average Mortality	days of each	Pate	int's	resid	ince.	from	182	7 til	1/8	32		30	24	34	115	35
Average Mortality	from 1827 to	11 18	32									Lin 8	1 in 11	lin 10	lin 10	/in//
		-		-		1	No.	77	7	-	the same of the last		THE REAL PROPERTY.	100000		

24, amounts to £840, besides the value of the present annuities at £25. This transaction, however, should lead the Directors in future to great caution, in accepting any legacy, however magnificent, which burdens the charity with a number of young annuitants. I by no means insinuate by what has been mentioned, that the slightest blame should attach to those disinterested individuals, who, at the time this legacy was bequeathed, recommended its reception,—for I am convinced, they accepted of it after all the proper inquiries,—still it ought to be a rule in all such cases, to accept of such funds only, after the most accurate calculation of the value of the life annuities chargeable upon the hospital funds.

CHAPTER VII.

In proceeding to advert to the expenditure of the Glasgow Royal Infirmary, I shall observe the same method which was adopted in treating of the revenue department of the Hospital. For this purpose, I shall follow out the divisions adopted in the prefixed tables, and treat first of the seven classes of expenditure, as detailed in the first table, with the four columns of averages. I shall then discuss the second table, or that of the ordinary Hospital expenditure, in the order in which the various items are enumerated; and lastly, I shall take a short survey of the medicine account, as developed in the third table, suggesting, as I proceed, any improvements which may occur to me. In such statistical labours as those, in which I have for some time been engaged, it is of the first consequence to know how far the documents to which I have had access are correct; and before I proceed further, I must once more inform the reader, that both in these tables, and all those which follow, I have never deviated from the true line, however apparently incongruous it may have appeared, leaving to the observations now to be made in the text, any explanations which I may deem necessary. The whole, (I repeat once and for all,) have been taken from the Annual Reports, the Treasurers, Matrons, and Apothecaries' books, and to these alone I have had recourse.

In the general table of expenditure, I have followed out those divisions which I found adopted in the yearly Reports, and which I have put into their respective columns: 1st, containing Diet Expenditure; 2d, Medicine do.; 3d, Furniture and repair do.; and 4th, Miscellaneous do.; all these four being included in the column marked No. 5, as ordinary expenditure. In the 6th column of this table, I have included all the expense of the buildings, additions, Fever Hospital, &c., and in the 7th, will be found the total of cash disbursed in every department, from the foundation of the establishment till the 1st of January 1832. To compare the above annual expenditure with the number of patients discharged, I have prefixed a column to this table containing these last, which to many may be deemed superfluous, having given it in a future one; I have, however, been obliged to do this, not only here, but frequently throughout the work, in order at one view to make those comparisons, which in an economic point of view I deem of so much moment. The four columns of averages I think of great importance, as exhibiting the great diversity of expense one year with another, both as to the diet, &c. of the patients, and also in regard to the medicine expenditure. They are useful, besides, to contrast the expenditure, in this establishment, with that of others either at home or abroad. Great caution, however, is necessary in drawing conclusions, in regard to the average expenditure, either of the same hospital one year with another, or of one hospital with another; and this is evident for the following reasons:-1st, From the difference of the market price of commodities. 2d, The diseases of the patients admitted. 3d,

The average residence in Hospital. 4th, The views of the attending medical men. 5th, The opinions and conduct of the Directors. And 6th, The period of the hospital disbursements.

I have not added the most obvious and common received cause of difference, viz. the economy exercised by the household servants, and the Apothecary and Matron, because I am of opinion, that these, though of considerable consequence, are of minor note, contrasted, as will be afterwards shown, with those which I have enumerated. One word upon each of these causes, will be sufficient to guard the unwary against forming an opinion, as to the degree of economy in this Infirmary, from an inspection of this table, without taking a view of every other one connected with it, which may tend to elucidate the great variety of expenditure which therein prevails.

Dr Cleland in his enumeration of the inhabitants of Glasgow, has a most curious table, well illustrative of the cause of difference in the annual expenditure above alluded to; it is his table of the prices of various articles of household expenditure, from 1810 to 1830, where I remark the price of meal in 1813 is rated at 2s. 2d., in 1819 1s. 3d., and in 1831, 1s. 2d. Potatoes are rated at 1s. 9d. in 1812, and in 1815, 1820, and 1831, at 10d. Bread, which in 1813 was 1s. 5d., in 1815 was $10\frac{1}{2}$ d., and in 1831 only $8\frac{1}{2}$ d. Coals in 1810, which were 7s. per cart, in 1831 were only 4s. 6d., and so of many other articles of great consumpt in the foregoing table.

Again, as to the second cause of difference in expense, it may be remarked, that the cases of fever which were admitted in the first 20 years of the history of the Hospital, were as one to five, or even in some years as one to 20 of the ordinary patients; but during the last 15 years, the fever cases have been at so high an average as one to two; and in 1831, so numerous as to equal all the other patients taken together: and thus the average of fever cases admitted, compared to ordinary patients, during the whole Hospital history, has amounted to little less than one in $3\frac{1}{2}$. I need not say how these facts must operate on the ordinary Hospital expenditure, and in a great measure account for the annual variations in the state of the foregoing table.

The difference, also, as to the number of days of the patients' residence in the Hospital, should not be overlooked, in accounting for the variation of ordinary expenditure. During the two first decades of the Hospital history, the patients, one with another, resided upwards of 43 days, while during the last 15 years, their residence has not been above 33 days; showing that more diseases of a dangerous and acute nature have been admitted than those which are chronic. The inferences from this fact are self-evident.

Medical men have, from time immemorial, been of different opinions as to the treatment of diseases, more especially of Typhus Fever, and this proceeds, not so much in consequence of the difference of the type of the disease, the season of the year, or the constitution of the patient, as from variety in the organization of the brain of the attending medical practitioners. Hence we have, in the same Hospital, often witnessed two Physicians, placed in every respect in similar situations as to those upon whom they practise, pursuing diametrically opposite plans of cure; and while one almost invariably drenched his fever patients with Port wine, and killed 1 in 9 or 10; the other, who was very sparing in the use of stimuli, had only about 7 or 8 per cent of deaths. The way in which this tells on the annual ordinary expenditure is obvious, and might form an interesting subject of hospital investigation.

Very few contracts were made for the supply of the Hospital, till within these last few years. The difference of ordinary expenditure on this account, as will be shown by and by, has been considerable, more particularly in the Diet list, where alone this salutary system has been as yet adopted.

Though the practice of paying off all the Hospital debts, contracted within the year, has been very generally adhered to, yet I have sometimes remarked large sums carried over from one year to another in the books; and though this is not in the least of disadvantage to the Hospital funds, still, in a table such as that which is prefixed to this chapter, it leads to erroneous conclusions.

Having thus shortly stated the faults of this table, and the cautions necessary in its minute examination, I

shall proceed to a few remarks on its construction. To many, such statistical inquiries are deemed of little value, and their cultivators are often stamped as matter-of-fact men, fit subjects of public scorn. In my opinion, however, nothing so decidedly conduces to a right system of Hospital management, to instant correction of abuses, and to improvement in medical and surgical science, as such inquiries, if regularly and extensively prosecuted.

Many alterations might be suggested in the method of keeping the above lists, more particularly in the medical department, where the expenditure is so enormous; but unless the present statistical labours are properly appreciated, it would be of little use to prosecute these inquiries any further. Let me recommend, however, to the Treasurer, in making up the annual expenditure for medical salaries in future, to deduct from the charge, the fees paid by the Hospital pupils for their attendance on the clinical lectures. It swells the column of medical expenditure, within these last three years, when these courses were made imperative, to a sum, exceeding by at least £300 what it had ever before amounted to, and leads to the erroneous impression that the medical men, are here, overpaid for their attendance. A plan might be easily adopted, by which this complex and unintelligible system of medical receipts and disbursements would be corrected, and the medical expenditure account be again put upon a similar footing with that of the rest of the establishment.

In order to show more correctly the average expense of each patient, as exhibited in the above table, I ought to have inserted the number of patients remaining in the Hospital at the end of each year, the mean number of patients resident in the Hospital during the year, and also the average number of days residence each year. All this information, however, will be found in a subsequent table—that, namely, of discharged patients—and to it I must refer in my explanation of the manner in which the average expense of each patient, or his daily maintenance, is ascertained. To find the daily expense incurred by the Hospital for the support of each patient, in regard to column 5, we must first ascertain the mean term of the residence in the Hospital. This, as is well known, is easily done by multiplying the mean number of patients resident during the year by 365, and dividing by the number of patients discharged and dead during the same year. Thus, on the 31st December, 1830, there remained in the Infirmary under treatment, 275; and on the 31st December, 1831, 344; the mean between these numbers is 309½, this multiplied by 365 gives 112,967, the number of Hospital days, as they have been called, which divided by 3183, the number of patients discharged and dead, during the year, gives a quotient of 35 days, the average of residence during 1831.

The average expense of each patient during the above year, as noted in the table, is 41s., which multiplied by 12, gives 492 pence, and this divided by 35, gives a quotient of 14d., the daily expenditure. It is scarcely necessary to state the manner of finding the average expense of each patient, as exhibited in the prefixed table, this being evident by a moment's inspection. I have excluded in the calculation the pence and farthings, except in the concluding summary; but this may be easily added, and was only omitted to save the trouble and expense of printing. By referring to the table of patients discharged, all the above calculations may be tested, and though there may be occasional errors, I think in the main they will all be found correct. By prosecuting the calculation of the united averages, above alluded to, I have been able to show in the concluding line of this first table, the average expense which each patient has cost the establishment since its foundation, in regard to diet, medicines, and total ordinary expenditure, with the still more curious result of the whole, what has been the daily expense of each during the above period. These calculations, though at first sight only intended for the eye of the curious, will I hope, by and by, from contrast and comparison, lead to results of great moment, both here and elsewhere.

In the Appendix will be found the tables of diet which have been in operation since the commencement of the institution, and which must be investigated, before proceeding to the 2d. table prefixed to this chapter, or that of the details of the ordinary expenditure. To understand more accurately, the bearings of this table of ordinary ex-

penditure, which I have carried as far back as 1812, I must make a few observations on the diet tables, and the interior economy of the Infirmary, connected with this department.

As will be remarked in perusing these 3 diet tables, there are no *quantities* given, and on this account, I shall attempt to supply the defect, from information most kindly and frankly communicated to me, by the Matron of the Hospital.

Porridge morning and evening, about one and a half pints English.

Sweet milk, 2 gills, or 4 gills butter milk.

Barley broth, 6 days in the week, about 2 pints for males, somewhat less for the females.

Bread 1-10th of a quartern loaf for males, 1-12th for females.

Beef boiled, 4 ounces for males, and 3 ounces for females.

Small beer, one quart daily.

On Wednesdays potato soup is used in place of broth. No cheese is now allowed, beef being substituted.

The middle diet, is called the ordinary house diet, and is that always provided, unless otherwise ordered. As to the quantity of meal put into the porridge, or of barley, potatoes, or beef put into the soup, these proportions are left to the Matron's discretion, and from the varying number of patients daily to be supplied, they are matters of considerable nicety. In this Establishment, however, there has never been a single complaint of these mixtures, (though daily opportunities occur of making them,) and the obvious conclusion is, that they are as well cooked as can be.

Among the females, tea or coffee is universally preferred to porridge, morning and evening, and now is very often allowed, from the previous habits of the patients. From the manner, however, in which it is infused, sugared, and creamed, under the Matron's eye, before going to the respective wards, and from the economy exercised in the bread and butter department, attending this species of universal luxury, I think very little difference of expense will be remarked, in consequence of the above concession to the failings of the weaker sex.

The meal hours are 8 o'clock A. M. breakfast; 1 P. M. dinner; and 7 P. M. supper.

The porridge and broth are served to the patients, in round wooden dishes, the tea in small tin basins; spoons and tin plates are supplied by the house, but neither knives nor forks are allowed; the destruction, and pilfering, which is inevitable in all such cases, having led to this stretch of economy. Would articles of all kinds used in the Hospital, even to bottles, stamped G. R. I. not completely prevent this species of petty larceny?

In the table of ordinary expenditure, for the last twenty years, prefixed to this chapter, I have stated the relative accuracy of the various items, in consequence of the variety, which in this respect prevails. I found, indeed, great difficulty in ascertaining many of these, from the want of proper classification, as may be remarked by the variety of junctions and conjunctions, which I was under the necessity of making; and frequently, after all, I found that I had made, after much labour, only an approximation to accuracy of detail. On this account, I shall shortly advert to the articles of expenditure, in the order in which they are stated in the tables.

The butcher meat, which forms so large an item of the diet expenditure, should be carefully noted, and the number of ordinary patients, compared with this, as exhibiting a pretty correct specimen of the system of management, in former and more modern times. During the first decade, from 1812 to 1822, the number of ordinary patients amounted to 1,084 annually, and the butcher account, to about £495, while during the last decade, from 1822 to 1832, the number of ordinary patients amounted, on an average, to 1485, and the butcher account amounted to 337. It is by proceeding in this manner, through all the statistical lists, that economy and correct management is brought to light. As a specimen of the management for 1827, the year in which the largest number of ordinary patients were discharged since the foundation of the establishment, and the smallest sum disbursed for butcher meat,—I may state, that the contract price per imperial stone,

was, 2s. 9d. for beef of ordinary quality, viz. 4 stones of shoulder, and 2 of sticking pieces; and per imperial stone, of best pieces, for matron's table, 5s. 6d. viz. roasting beef, steaks, rounds, and mutton. The Hospital bread is of two kinds, and supplied also of late, by contract, generally from 12 to 16 per cent. discount on the quartern loaf, and 8 or 10 per cent. on the household and small bread. It was at one time proposed to erect an oven within the Infirmary, where all the Hospital bread might be baked; but on further investigation, it appeared that so much risk and trouble was attendant upon this trial of economy, that the scheme was abandoned.

The milk used in the Hospital, is for the most part churned, and provided by contract; the sweet milk has been obtained for many years, at from 3d. to 4d. per Scotch pint.

Beer is sometimes blended in the Treasurer's books with the ale and porter account, thus rendering this item, with those of porter and ale, difficult to be classed either as diet, or as medicine expenditure account. The table beer, as it is called, is procured by estimate, at about 2s. 9d. per gallon, and the small beer at 1s. 9d.

Day nurses' wages, have been for several years past, 17s. per month; 15s. per month are allowed the night nurses; those employed in the acute fever wards, have £1. monthly. All the Hospital domestics are hired by the month, and are from 25 to 30 in number, according to the number of wards occupied; one day and one night nurse being required for each ward, which, on an average, would give one nurse to every ten patients. They have no tea money, but have a diet table of their own, somewhat superior to the ordinary house diet. In the surgical wards, they are provided with a goodly assortment of medicines, dressings, bandages, &c. to save trouble to the clerks and apothecary; but this discretionary power is often abused, and it ought to be a point for consideration with the Directors, whether this nurses' medicine store should not be abolished, or, at any rate, be subjected to regulation.

The soap account, as well as that for oil, cheese, fowls, fish, and ham, are all somewhat inaccurate, the first article being often placed under the head of washing, and the others under that of some other account, and therefore the amounts stated, are to be taken with some allowances.

As to the articles which follow in order, in table 2d, they are very carefully noted in the matron's book, and most minutely examined prior to disbursement, but from the transposition of the articles, (the heading of the columns in the house book not being very choice,) little reliance can be placed on these sums. Under the head Groceries, have been frequently included, tea, sugar, coffee, &c., and though the distinction is always kept up in the table, and the aggregate sum is correct, yet the particulars cannot be specified with that accuracy and minuteness which occurs in the great leading articles of expenditure. The price of the tea used in the Hospital, for these last 5 years, has ranged from 4s. 9d. to 5s. 4d. per pound. The sugar and coffee are among the list of articles, which have as yet never been supplied by contract; the reason does not well appear from any information which I have been able to procure. Porter and ale, I have placed in the table next to sugar, and have included them both in a kind of medium expenditure, belonging sometimes to diet, and at other times to medicine account. In the compounding of medicines much sugar and syrup is used, and though occasionally the sugar used by the apothecary is kept in a separate account, yet more frequently it goes into diet expenditure. The same mixture in the accounts occurs as to porter, and though it is ranked with the wine, as a part of medicine expenditure, yet occasionally I find it placed to the account of diet expenditure. This jumbling should, if possible, in future be corrected, in order to compare the various lists with accuracy. The contract price of London Porter has lately been 84s, per hogshead.

The next item in the table, is the medicine account, properly so called, and the first in the list, is medicine expenditure; but as I have deemed this last of so much importance as make it occupy a separate table, No. 3d, I must postpone my remarks on this subject, till I have finished those on the present one. The expen-

diture for Port wine in the Glasgow Royal Infirmary, has increased so much of late years, in consequence of the number of fever patients, that it forms a most important item in the annual accounts. It would have been very satisfactory, had I been able to give with accuracy the annual charge both for wine and spirits,but in the Treasurer's books, those accounts are so joined, as frequently to have rendered my labours to separate them quite abortive. The wine provided is the best Oporto, the contract for which in 1827, was £30 per pipe, independent of the charge of £2 2s. for fining, bottling, sealing, delivering, and packing the above quantity, and 7s. 6d. per gross for corks. The bottles are charged 3s. per dozen, and if returned, at 2s. 6d. Odd quantities, of the same quality of wine, 23s. per dozen. Whisky in 1831, was estimated at 7s. 8d. per imperial gallon, sinking bead 24. Foreign spirits have been discontinued since the year 1829, in consequence of home-made serving all the necessary purposes. Of late the price for bottling wine has been saved, having been placed under the charge of the apothecary; and drawn off from the pipe as required. A considerable part of the spirits which are noted in this list, are used by the apothecary, in the preparation of tinctures, &c., in the laboratory, and is not liable to much abuse; but great waste of wine takes place while passing from the hands of the apothecary to the stomachs of the patients, for whom it is ordered. All the nurses are, I understand, at present very sober and correct, but they have not always been so; and the patients themselves with their visitors, are often in fault in the above respect. I have remarked a most excellent contrivance, to prevent this abuse of the wine, adopted in the Mile-End fever house, and which I think might also be followed in this establishment, I allude to the practice of bittering it before leaving the cellar, by adding from 6 to 10 grs. of sulphate of quinine to the bottle.

Instead of the daily and unlimited allowance to the friends of patients, to traverse the Hospital wards, would it not conduce to the comfort of the patients themselves, and the order and cleanliness of the house, to allow of only two days weekly, say Wednesday and Saturday, from ten till twelve, for friends to pay their visits? Except in cases of dire necessity, I feel convinced, that some such regulation would be attended with the happiest results.

Another question of great moment, I must here advert to, as operating most powerfully on the funds of the Hospital, I mean the possibility of effecting the same number of cures in fever, by a more economical practice. In proceeding by and by to treat of the average mortality, it will be remarked how much greater it is in this disease in the Infirmary, than among the district dispensary surgeons, who have the charge of the poor of the city in their own houses; and though this difference may be accounted for in part, by the more severe cases being transmitted to the Hospital, in an advanced stage of the disease, still, it is a question big with importance, how much of the difference depends on treatment. It is universally admitted, that among the poor treated in their own houses, little wine, if any, is administered, beef tea or a little tody being substituted; and notwithstanding this practice, I have heard it often remarked, that the mortality is less, and the convalescence shorter and more steady than when the opposite expensive method of cure is followed. A few statistical facts might bring the question to a speedy solution, and it is one of so much consequence, that the sooner it is settled the better. Till within the last two years, the amount of expense in this Hospital for medical salaries was seldom more than £90; but since the law was altered, the Physicians have obtained an addition, in consequence of the increased period of service, and they now average £140. Since the whole of the graduates of medicine are now eligible to the office of Physician to the Infirmary, would it not be proper to equalize the salary for attendance, reducing that of Physicians to £30, and adding £10 to the small sum at present allowed the hard-wrought, care-worn Surgeon? The house, as well as the profession, would, in my opinion, be a gainer, by the salutary

The amount of Sundries, as will be remarked, has varied very considerably during the last 20 years, but if the magnitude of the expenditure is considered, I think this may easily be explained. Many articles I found classed in one list one year, and transferred to another the next; and thus I was under the necessity, when excluding the

pence and shillings from the general calculation, to fill up this item, so as to make the sum total agree with that stated in the former table.

The amount of expenditure for repairs, was so great in 1828, that the Directors determined to employ a job wright; and the saving has been so great, that the same practice has been continued; he has his shop and materials within the walls, and is perhaps the most varied as to his duties, of any servant in the whole establishment, with the exception of the porter. The tear and wear for bed and body linen is very great in this Hospital, these are of the best materials, and uniformly clean and in good order. The mattresses were formerly of flock, but were so objectionable, that they have been universally superseded by wheat and oat straw. The sheets, blankets, towels, &c., are all indelibly marked by the Matron; and both the kitchen and laundry of the Hospital, are models of cleanliness, convenience, and frugality, exhibiting most admirably the effect of good management and regularity. The fever patients on admission, are shaved, washed, and habited in a flannel house dress, and their own clothes ticketed and laid aside, to be cleaned and ready for delivery on dismissal. Would the same salutary practice not be an improvement on the present indiscriminate admission of all and sundry patients, into the ordinary wards?

In the inaugural clinical lecture, which I had the honour of delivering to the pupils of this Hospital, in November 1830, I stated my opinion as to the advantages attending the limited use of bed-curtains in the female wards, and also with regard to the propriety of having a covered walk in the back garden, where in all seasons the patients might take that recreation so necessary to their cure. On these topics I shall not again insist, leaving the consideration of them in the hands of the Directors, who, I have no doubt, will give them that attention which they so justly merit.

The third table prefixed to this Chapter, which in many respects is the most interesting of the whole series, was constructed for the purpose of presenting to the eye of the medical statist, an epitome of what was expended on the apothecary's department in this Hospital, as well as to prove the fluctuation which yearly, I may say almost weekly, takes place on the prices of some of the most important articles in the pharmacopeia. It has been carefully drawn up from the pass books of the Hospital; and though it does not exhibit all the medicines prescribed, still the most expensive, the most fluctuating, and the most common are to be found in it. In supplying the Hospital with drugs, a practice has for many years prevailed, of ordering them alternately every four months, from three different apothecary companies; the Old and New Apothecaries' Halls, and Mr George M'Leod. What advantage is derived from this division of drug-patronage, I cannot determine, but from a general inspection of the pass books, I am of opinion, that if the same system of contracts were here adopted, as in the other departments of the Hospital, and as prevails in France, the funds would be much benefited, -more particularly in the great articles of consumption, as leeches, lard, caddis, castor oil, quinine, &c. Though the prices current are in many of the above cases almost incredible, they are every one of them correct. It was impossible in rummaging so many pass books, as I was obliged to wade through, to get at an annual average price of each article; but the reader may rely upon the accuracy of every one price stated, being that charged by one of the above apothecaries' companies, during some period of the years referred to.

Another very striking disadvantage in the apothecaries' department, consists in the alleged necessity of ordering so frequently the various medicines which are required. To place this in a striking light, and if possible to obviate the apparent jealousy which seems to exist with respect to the Hospital drug-patronage, I may mention that in making up the aggregate expense of the various articles enumerated in this table, I found 150 entries in the various pass books, for leeches, during the year 1830, thus averaging, an order for this item, every second day throughout the year. For cream of tartar, gum-arabic, mustard, and a variety of other articles in general use, the same huckstering mandate, I found issued, almost every third or fourth day, for the supply of the Hospital. On

this account more toil and difficulty occurred to me in constructing this table of medicine expenditure, than any of the rest, and had it not appeared to me of considerable importance, I would on this account have thrown it aside in despair of attaining that accuracy which I deemed indispensable. If followed out by future Hospital functionaries, it would present a most useful criterion by which to judge of the economy and efficiency of this department.

There is nothing so striking, in perusing this interesting statistical table of medicine expenditure, as the expense incurred for leeches, and the great diversity of price which frequently prevails in regard to this useful animal. During the year 1831, as will be remarked, so high priced were they, and so much in demand in the practice of the Hospital, as to have amounted to about one fifth of the whole medicine expenditure. I have no doubt that the greatest care and vigilance is exercised in the management of these animals, but from their great price at certain periods, a question naturally arises, could no substitute be found in such cases for them? Would scarifying, lancing or cupping not be equally advantageous, if dexterously managed? or, at all events, would the use of the leech cup, which has never been ordered, not be a great saving?* Another article of great consumption is caddis. This has so much increased of late years, as to call for some amendment, either in regard to the management of it, or, which is more feasible, in the providing some cheap substitute, as unbleached soft cotton cloth, sponge or tow.

In order to exhibit the cost for medicines in the most striking point of view, I have subjoined to the above table, the averages of residence, mortality, &c., and also the cost of each patient, in regard to this department, and by referring to the number of days' residence each year, it may be at once ascertained what each patient has cost daily for medicines. All such comparisons are, in my opinion, of great value; they open the eyes of the administrators of public charities, and thus mightily contribute to a vigorous, efficient, and economical system of management.

CHAPTER VIII.

There is no subject in the whole range of political economy, so difficult to comprehend or so complex in all its bearings, as the question of pauperism. With respect to its causes, we have innumerable disquisitions, some of them ingenious enough, and many of them well digested, but in regard to the cure, I fear it ever will remain a problem. However various may be the opinions on the subject of unlimited charity, I think there is no candid mind, but must allow that establishments such as the Infirmary, whose history and statistics I have been attempting to trace, are essential to such a community as that of this city and neighbourhood. To trace the extent of Hospital

* In proof of the superior accuracy with which the hospitals are managed in Paris, compared to those of any other city, with whose statistics I am acquainted, I may here mention, that in the article of leeches, a regular contract is entered into every year. If these animals are not of a proper colour or size, they are rejected, those giving a weight of from $2\frac{1}{4}$ to $2\frac{1}{2}$ pounds per 1000, being accounted the best, and a depot of 40,000 requiring to be constantly kept by the contractor. The same degree of minuteness is adopted with regard to all the articles of common consumption, in the Parisian hospitals. Thus in the article of butcher meat, the advertisements specify that the oxen must be of from 6 to 9 years of age, of 600 pounds weight; the sheep from 3 to 5 years old, and 24 pounds weight at least; and the calves from 2 to 3 months old, and from 80 to 90 pounds weight. It would be of little use indeed to specify the degree of minuteness with which hospital contracts are universally managed by our Gallican rivals; but suffice it to remark, that though this accuracy may be laughed at by some cynical fools, the benefit to the poor must be apparent to every candid observer.

Sist of Patients Discharged from Glasgow Royal Infirmary, from 1795 till 1832; Showing also the Average Residence in Hospital & Mortality &

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	1819	1,264	184	118	93	17	7	25	7	146	1,861	181	198		1 in 12 109
	1820	1,055	186	85	82	5	6	25	18	108	1,570	128	1542		1 in 14 788
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	1822	1.013	184	37	103	19	13	27	10	190	1,596	151	170		1 in 8 76
	1823	1.162	178	36	73	18	37	32	29	194	1.759	142	1462		1 in 9 194
	1824	1.444	182	79	99	38	41	23	23	162	2,091	220	10000000	31 .	1 in 12 147
	1825	1,996	144	28	51	17	21	22	10	149	2,438	191	2052	100	1 in 16 149
	1826	1.804	156	41	55	20	15	29	3	194	2,317	207	199		1 in 11 194
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List of Diseases treated in the Glasgow Royal Infirmary, from 1795 till 1832.

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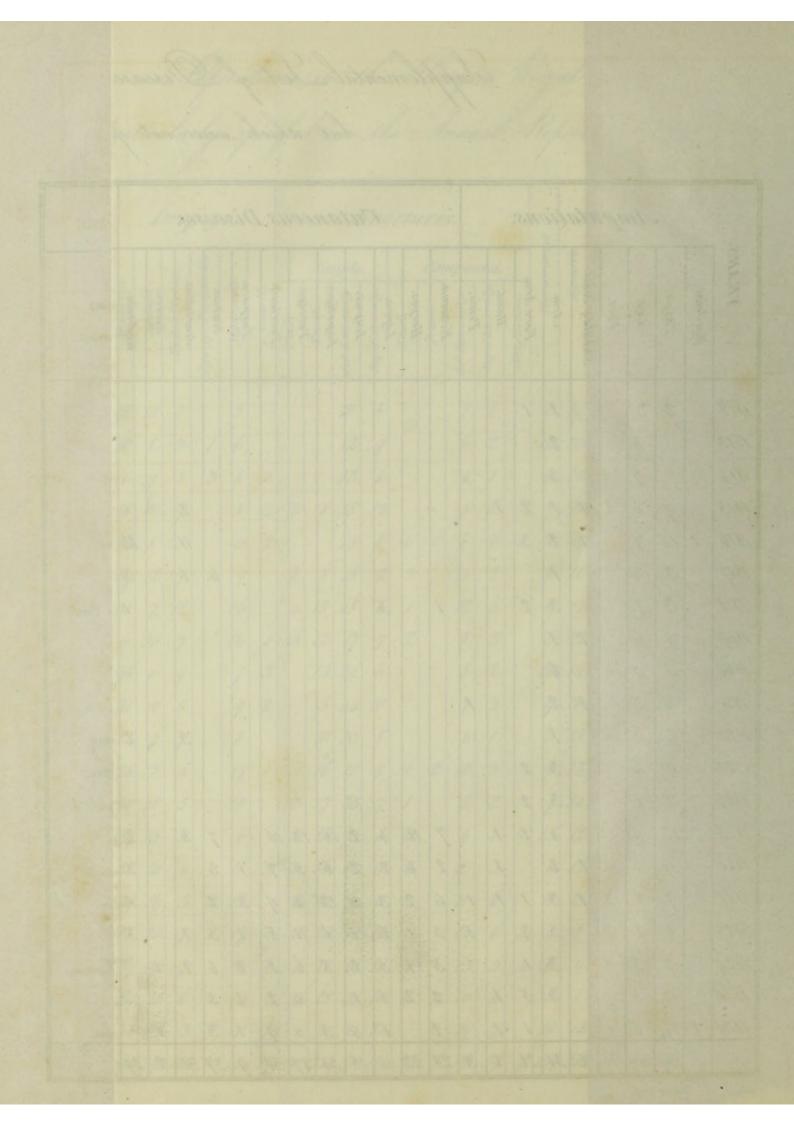
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1817	8	4	1		2	4		10			2			4	6	3	5	8	17
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Supplemental Sixt of Diseases and Operations in the Glasgow Royal Informary, from 1812 till 1832, but which were not particularly specified in the Annual Reports till the above period!

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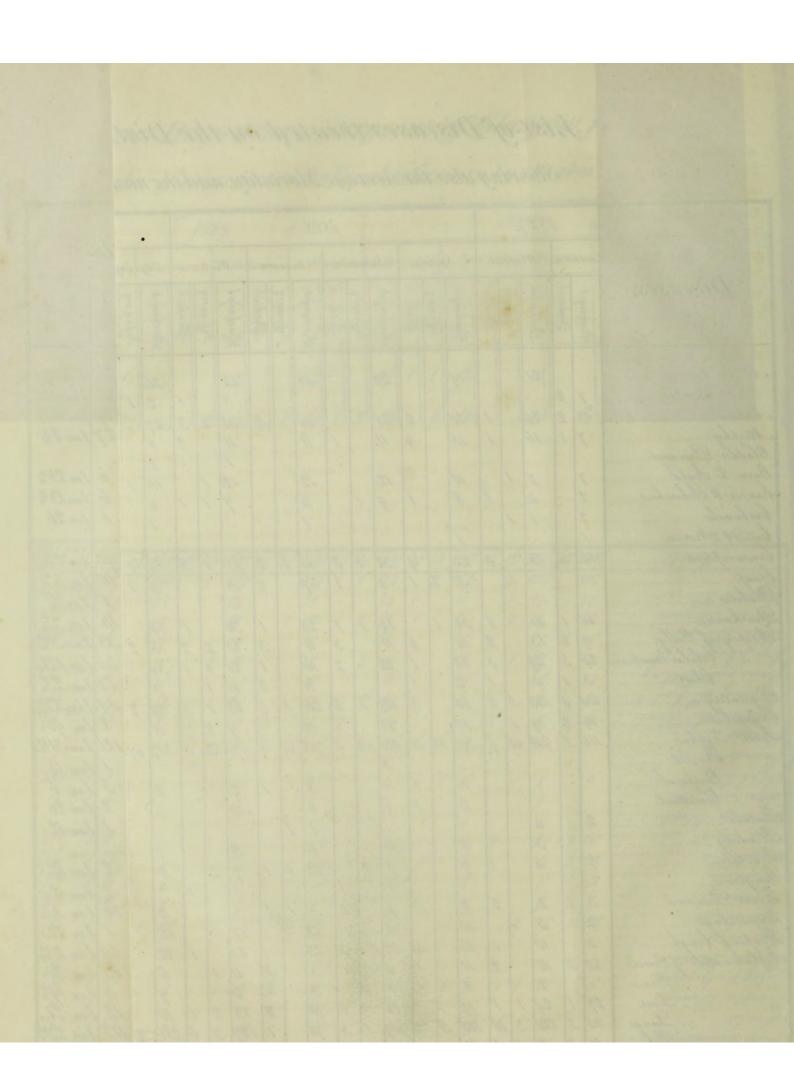
List of Diseases in the Glasgow Royal Infirmary, in which Death occurred for 1829, 1830, 1831.
Showing also the Average Mortality which occurred in each during the above period.

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List of Diseases treated by the District Dispensary Surgeons of Glasgow, from 1st Aug. 1827 till 1st Feb. 1832.

Showing also the Average Mortality, and the number of cases sent to the Royal Infirmary by the above functionaries during this period.

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accommodation for the poor, in contrast with the population of a city, it would be necessary to ascertain the whole hospital-population, or in other words, the number of beds in all the asylums, hospitals, poor-houses, &c., within the given population, and the number which have been occupied during a given period. This task in the present work, would be interesting, and might lead to important results; but I have thought it necessary at present to confine my observations to one Institution, and from it to make all my deductions, leaving the question of Hospital accommodation, in regard to population, to some future opportunity. Connected, however, with this important subject, I have prefixed to the first table of this chapter, the population returns for this city and neighbourhood, in the four decades of the Hospital history, by which any one interested in the above question, may at once see the relation which has held, during the last forty years, between Infirmary accommodation (at least,) and city population. Another, and a far more important consideration, might here occupy my attention; I mean the investigation of the laws which regulate the course of population and mortality in this city. Dr Cleland, by carefully collecting some of the materials for this analysis, has done much; but most unfortunately, he has not been seconded by the profession at large, with that degree of zeal necessary to the attainment of his object. To ascertain the relative mortality of the various diseases incident to the human family, in such a city as Glasgow,-to investigate the salubrity of its various localities, or trades, compared with those in rural districts, during the different seasons of the year, or present a picture of the diseases of infancy, youth, manhood, and declining years, and their relative mortality; these all, and many similar inquiries, would amply recompense any one for the labour which might be bestowed upon them. They are, I may say, untrodden fields, at least in this country, and must be cultivated before we can solve those more difficult problems in population and mortality, to which I have before alluded. No doubt, much may be done by the examination of the books of the churchyard wardens, and Dr Cleland has availed himself, liberally, of those sources of information; but in my opinion, they are so liable to error, that no accurate conclusion can be drawn from them, except as to the numbers and ages of the interred.* It is in hospitals alone, and among the surgeons attached to the various city dispensaries, that those deeper, and more interesting investigations, must be ultimately carried on, either as to the climatology, or medical topography, of this and other cities, or their relative mortality, to which I have already drawn attention. In order to make, as it were, a first essay and prompt some more able navigator, to explore this terra incognita, I have exhibited in the first table, prefixed to this chapter, a list of the patients discharged from the Infirmary, from its foundation till the present time, with their average residence, and mortality each year. The more curious, but not less important result of the whole, will be found in the concluding line of the table, in which, by a simple calculation, I have ascertained that each patient, one with another, since the first opening of the Infirmary, has remained in the house 37 days, 3 hours, 4 minutes, and 10 seconds, and the average mortality during the whole of the above period, has been 1 in 12 1304

Nothing in the history of Hospitals, presents so interesting a field of inquiry as the causes of the great diversity,

^{*} A more striking proof of the inaccuracy of such assumed facts as to the comparative mortality of empires, provinces, or cities, could not be exhibited, than in the amusing table which closes the Appendix of this work. It is, I may say, an abridgment of Hawkins' work, on medical statistics, and proves how little dependance can be placed on mortality tables, either here, or elsewhere, unless all the registers are kept by intelligent individuals, and with the most scrupulous and sustained accuracy. The list of authorities which I have quoted in this table, may serve as a kind of Bibliotheca Statistica, to those interested in this curious, but hitherto ill conducted department of medico-political science. With respect to the tables and calculations of statists, on the subject of births and marriages, in empires, provinces, and cities, I feel compelled to urge the same caution as in regard to their mortality. Even Dr Cleland, whose labours in this department of science are above all praise, is compelled to acknowledge, that his former labours on this subject are so erroneous, that no dependance is to be placed on them; and in proof of this I need only refer to his calculations printed in 1819, where he states the births in the city of Glasgow and suburbs at 2796, and in his late work they amount to 6868!! What inferences can be drawn from such a substratum?

in their respective mortality. On a superficial view of the matter, one would imagine, that in those establishments where the deaths were least frequent, compared to the numbers cured, relieved, &c., that there the practice of the attending medical men must be decidedly superior, and the care bestowed must be of a superior kind. A little reflection, however, on the nature of the diseases treated,—on the exclusive nature of the laws as to the admission of patients,—on the physical situation of the establishment, or in regard to the interior household economy, must at once demonstrate that the credit in the above respect should be very cautiously bestowed. In many hospitals in this country, consumptive patients, and those with complaints deemed incurable, are not admitted. In the Hospital St Louis of Paris, only patients with diseases of the skin, and chronic maladies, in which the mortality is very trifling, are admitted. In some hospitals no patient is permitted to remain beyond a certain period; in others their residence is quite unlimited: these, and many other considerations of equal importance, must be taken into account, before one can arrive at sound conclusions, as to the degree of superiority of medical or surgical treatment which is pursued,

In order to exhibit a complete view of the nature of the diseases, which have been treated in the Glasgow Royal Infirmary since its foundation, and at once to demonstrate the superiority of this Hospital to every other with whose history or statistics I am acquainted, I have at great labour constructed the second table prefixed to this Chapter. In it will be found an accurate list of the more common maladies arranged alphabetically into three great classes,—the medical, medico-chirurgical, and surgical. I have in most instances preferred the common names of the diseases, to the classical, in order to make the table more generally useful. The list of surgical operations, also, which have been performed during this period, I have deemed it useful to subjoin in the 3d table, in order to exhibit to the surgical world, what advantages the pupil enjoys in attending this Infirmary. Unfortunately, till the year 1812, many of the diseases and operations were not specified in the Annual Reports of the Hospital, with that minuteness which was afterwards adopted; and on this account, I have been under the necessity of adding a fourth table, to fill up this blank, which contains, as will be remarked, a very minute enumeration of all the particular diseases, which were treated, and the operations, which since that period, have been performed.

Following out the recommendations of the committee of Directors for 1828, there has been annually printed, in the Glasgow Infirmary Reports, for these last three years, a list of the diseases in which death occurred; and had this practice been sooner adopted, we should have had it now in our power to exhibit another list of as great interest, as any hitherto presented, that, namely, of the relative mortality of diseases as treated in this establishment. As matters stand, I have deemed it of some moment to present such a table, No. 5, with all its imperfections, in order to demonstrate of what value this document will soon become, if spiritedly, and accurately drawn up. From this mortality table, it would be curious by and by to exhibit a mortality cone as it were, on whose summit might be placed the most incurable maladies, which have been treated within these charitable walls, while in a descending scale, could be arrayed the more hopeful in the direful list, until descending we arrived at the base of this pandora's box, where would be inscribed, those comparatively trivial ailments, which are in general more fitted for a waiting room prescription, than for Hospital accommodation.

The Editors of the Glasgow Medical Journal, during the last four years, have with much praiseworthy zeal, procured from the district dispensary surgeons of this city, quarterly lists of the diseases treated by them, with the mortality, and the number of patients sent by them to the Royal Infirmary. By this means a mighty blank in the medical statistics of this city has been filled up, and in consequence, I have constructed a table, No. 6., (the last in the series,) which by exhibiting the average mortality of the various diseases, under the care of these functionaries during the above period, with those treated in the Infirmary, has enabled me at one step, to open up a mine of medical information, which must prove of great ultimate advantage. I shall now proceed to make a few remarks on each of the above tables, with a short comparison of the mortality of the various hospitals at

home and abroad, after which I shall conclude by shortly adverting to the three tables given in the Appendix, exhibiting the result of one half of the surgical practice of the Hospital, as conducted by me, from 1st May 1830, to 1st May 1831.

To many of my readers, it may be deemed superfluous to explain the meaning of the various results, as given in table No. 1., prefixed to this Chapter; but I deem it of consequence, that some of the regulations which prevail on these important points, should be generally known. A patient is dismissed as "cured" from this Hospital, when the medical attendant thinks that a complete cure has been effected, but if this opinion does not prove correct, the patient can claim admission again without a new order, if application be made by him within six weeks of his dismissal. This application must be, however, only in the event of the precise disease under which he formerly laboured while in Hospital having returned, any other malady with which he may have been seized not entitling him to the above readmission. When the disease of the patient is incurable, tedious, or trifling, and after his dismissal, others of a more dangerous and important nature are presenting themselves, the medical and surgical attendants are often under the necessity of dismissing the former under the head of "relieved," when decided relief has been obtained. In all such cases readmission may take place, but only in the event of a new order for admission being obtained. It is in this manner unfortunately, that malingerers, more particularly worn out drunkards with ulcerated legs often find an hospital-harbour; and not long ago, in going round the surgical wards with my professional brethren, who are at present in attendance, I remarked no less than five such characters whom I had dismissed during my incumbency, as decided hospital-pests.

Under the head "advice," are ranged all those patients whose maladies have been relieved, but whose residence in the Hospital would protract the cure or aggravate some of the symptoms. In all such cases, ample directions are given in regard to the course to be pursued on leaving the Hospital, and those medicines or dressings which are deemed advisable, are liberally afforded the patient. Many patients become tired of the Hospital, and others are unwilling to submit to the treatment recommended or the diet prescribed; when this obstinacy is persisted in, the patients are dismissed by their own "desire." When any of the laws of the Hospital are violated by a patient, as may be remarked by a perusal of the Appendix, that instant he is dismissed as "irregular," and can never again be admitted under its roof.

A patient labouring under a surgical disease, who may have been inadvertently admitted into the medical wards, and who is afterwards transferred to the care of the surgeon, or vice versa, is said to be "remitted." This transposition, however, very rarely occurs, and ought not to be entered in the general list of discharges. Astonishment may naturally be expressed at the small number of "incurable" patients, who have been discharged from this Hospital during its history, and in glancing at the first two decades in particular, one might with apparent justice exclaim, it is all kill or cure. When, however, it is remarked, that many such cases come under the preceding headed lists, the enigma is at once solved.

An understanding has, I believe, generally prevailed in this Hospital, that if a patient is brought to it in a moribund condition, or has died within 12 hours after admission, his name is not recorded among the Hospital "dead," and on this account, some allowance ought to be made for this omission, in adverting to the comparative mortality in this and other Infirmaries where no such practice is followed.*

The column of Total, means the aggregate of all the patients who have, since the foundation of the Hospital, been discharged as above, including, of course, the deaths during this period, and excluding 344, the number

* I feel here under the painful necessity, of once more correcting an error in Dr Cleland's late Work, on the statistics of this city, in which Dr Corkindale, who drew up the Royal Infirmary table, is 900 wrong in his most important column, that of the number dying, by which is meant, I suppose, the number dead. This, out of an aggregate of only 4,067, makes, a most material alteration on the average of deaths, and completely destroys the value of this table as a statistical record of hospital mortality.

which remained in the house on 31st December 1831.—By inserting the number of patients, which remained at the end of each year, the annual mean average of those resident during the year is ascertained; and by multiplying this mean by 365, we obtain the number of hospital days. By dividing this again by the number of patients discharged and dead, during the same year, we obtain the average number of days that each patient has resided in the hospital. A more accurate mode of procedure might have been adopted in this calculation, by taking as a divisor for the number of hospital days, the number of discharged and dead, plus those which remained at the 1st of January each year, and minus those remaining at the 31st December of the same year. But for all practical purposes, the calculations which I have made in the former manner will suffice.

It is not at all unlikely, that in the hurry of calculations so simple, but so numerous, I may have committed many mistakes; but once for all, I request that those who feel interested in these matters, would, if the least doubt arises, make the calculations for themselves. The results are all so easily ascertained, that the merest tyro in arithmetic may detect any blunders in them, and therefore I crave indulgence if such have occurred. With respect to the average mortality, which is ascertained by dividing the total number of patients discharged by the number of deaths, I have deemed it best to give the fractional parts, in all their minuteness, that a more accurate view of this important column may be exhibited. The result of the whole,—I death in 12 \frac{1,304}{4,067} on the average of the hospital history is obtained; by summing up the united averages of patients under treatment, 5,607; and making this the divisor for the whole patients discharged, 50,108 during this period.

On examination of the 2d table prefixed to this chapter, a smile may perhaps be produced, at the arbitrary division which I have adopted in my classification of the diseases treated in this hospital. Cullen is now become antiquated; Mason Good's Nosology is very beautiful upon paper, and does admirably in the closet, with the man who never sees diseases, as in nature they are presented to the eye of the every-day practitioner; but after numerous trials of my own, on this speculative and amusing subject, I found the attainment of my object so difficult, that I was at last under the necessity of taking the lists of diseases as given in all their simplicity in the annual reports, arranging them in the manner above alluded to. What is the province of the Physician, and what that of the Surgeon, are questions which in general practice are never inquired into, so completely have those distinctions become blended; but not so in hospitals. There the above division, for obvious reasons, is still maintained; the line of demarcation, however, is with great difficulty ascertained. How often do we find it the case that medical diseases, or those formerly accounted such, as scrophula, sibbens, syphilis, &c. are treated in hospitals by the surgeons, and vice versa. On this account I have judged it right to adopt a kind of middle class, where will be found ample ground of debate for the future medical and surgical M. D.'s of this establishment. All the important medical and surgical diseases, which have been treated in this Hospital since its commencement, will be found in this and the supplemental table No. 4, and by an examination of both, the very satisfactory conclusion will be arrived at, -of the great increase which has steadily taken place in the columns of those diseases which are of a dangerous nature, and vice versa. In all Hospitals it will be found, that the mortality and the average term of residence keep pace with one another. In this establishment, during the first twenty years of its history, the mean term of residence was fully more than forty-three days, and the mortality not more than one in fifteen, while during the last fifteen years, the average residence has not been more than thirty-three days, but the mortality has been one in ten nearly, -proving that in proportion to the severity and malignity of the cases admitted, the Hospital residence is lessened and the mortality increased. But while this comparison of one period of the Hospital history with another, is so far satisfactory, how much more so is the contrast between this well conducted Institution, and similar establishments either at home or abroad? In order to place this important fact in as striking a point of view as possible, I shall here use the freedom of transcribing from Johnston's View of Public

Charity in France, as also from Hawkins' Medical Statistics, lists of the average mortality in the hospitals of the different cities of Europe, which are as follows:—

Johnston.		Hawk	INS. (YEAR.)
St Petersburgh,	1 in 5.55	St George, (London)	1 in 9 (1827.)
Barcelona,	1 in 6.02	St Louis, (Paris)	1 in 14 (1822.)
Berlin,	1 in 6.50	Vienna,	1 in 6 (1824.)
Paris, (la charitè)	1 in 6.66	Pesth, (Hungary)	1 in 6 (1825.)
Aix in Provence,	1 in 7.04	Dresden,	1 in 7 (1816.)
Leghorn,	1 in 7.50	Munich,	1 in 9 (1819.)
Paris, (Hôtel Dieu)	1 in 7.76	Geneva,	1 in 11 (1823.)
Palermo,	1 in 8.33	Brussels,	1 in 9 (1823.)
Lyons,	1 in 8,40	Amsterdam,	1 in 8 (1817.)
Paris, (Pitié)	1 in 8.92	Genoa,	l in 6 (1821.)
Turin,	1 in 9.03	Turin,	l in 7 (1821.)
Strasburgh,	1 in 9.37	Milan,	l in 6 (1814.)
Edinburgh,	1 in 10.08	Palermo,	1 in 8 (1823.)
Pavia,	1 in 10.90			
Glasgow, (1826)	1 in 11.73			

This very favourable state of the mortality, in regard to the Glasgow Royal Infirmary, is still more strikingly illustrated, not only from an examination of the short average residence which here obtains, but also from the lists of diseases which have been treated. If the table of mortality, No. 5, is carefully gone over, it will be remarked that the total number of deaths in this Hospital during the years 1829, 1830, and 1831, was 702, of which 301, or nearly one half, was from Typhus Fever. Besides, if to this be added, the increased mortality from dropsy, phthisis, internal inflammations, accidents, and capital operations, the columns of all which have so rapidly increased, while those of an opposite character, as dyspepsia, hysteria, lues, or psoric, or ulcerous diseases, have either remained stationary or diminished, we shall be led to the conclusion, that on whatever side the picture we look, this Institution appears to great advantage, and as yet has nobly outstripped all its more antiquated rivals.

Another view of this most interesting subject is presented to our notice, by an examination of the 6th and last table prefixed to this chapter, wherein are recorded in alphabetical order, the diseases treated by the district surgeons, the number of cases sent by them to the Infirmary, and the mortality. The labours of these dispensary practitioners are limited to the Royalty, which contains about 120,000 inhabitants, and there being twelve of them, this gives one surgeon to every 10,000 of the population. These functionaries visit the patients at their own dwellings, upon the recommendation of an elder; and with the exception of women in child-bed, all and sundry paupers, whether industrious or otherwise, are enabled thus to obtain medical advice and medicines gratuitously. Beyond this no allowance is made; and though at first sight this regulation may have the appearance of harshness, yet when it is considered that the industrious poor who have a legal claim on the town, do obtain clothing and support when diseased, and that the utterly destitute have the Infirmary to resort to, I feel confident in asserting, that there is no city in the empire, where the poor are so carefully looked after, and where their diseases are more skilfully prescribed for. If, as has been often suggested, the medical men in charge of the districts, were also empowered to order beaf steaks, port wine, and good clothing in all cases seem-

ingly requiring it, wretchedness, dissipation, and universal pauperism, I feel confident would ensue. But the strongest argument in favour of the treatment of the poor in their own dwellings, is derived from an inspection of this 6th table. If, as therein stated, the number of deaths from typhus fever is only 121 out of 5039, discharged, cured; or, in other words, if only 2½ per cent of those treated for fever die in the hands of these practitioners, and 1 in 10, or 10 per cent fall victims to this disease in the Infirmary, the inference is most irresistible. Surely the treatment must be superior, the diet and want of cordials must be in favour of the home treatment, else why such a mighty disparity in the results? The above argument holds true not only with regard to typhus fever, but with almost every other disease in this table, if compared with a similar one, No. 5; but a moment's examination into the matter, will, I think, dissipate the illusion. Every person, however slight may be their ailment, or however unworthy their character, can I believe at all times command an elder's line to the surgeon of the district; on this account, innumerable trifling complaints are recorded, in this list which otherwise would never appear. Again, as to "Typhus Fever," I understand, that many cases are thus designated in the district reports, when catarrh, influenza, rheumatism, or cynanche, would be more appropriate; in other words, "all's fish that comes in the net," to use a homely but significant (cholera) phrase. When, however, fever has become developed, it then becomes a question, now the 8th, 10th, or 12th day has been ushered in, whether or not the Infirmary should get the credit of the death of the patient. In this manner, and in this alone, is it possible to account for the unseemly average mortality of fever, which every medical man in examining this table must stare at. I do not for one moment call in question the accuracy of the details, for all the reports to which I have alluded, were drawn up by gentlemen whose accuracy I can depend upon; but I appeal to them all, whether or not I am correct in thus, in a great measure, accounting for the discrepancy in the mortality of typhus in their hands, and in those of the Physicians who have attended the Infirmary,*

In further proof of what I have above asserted, I shall for curiosity sake, bring forward the annual average mortality of Typhus Fever, as calculated from this very table of the district surgeons, and when the results are stated, I feel convinced, that every unprejudiced person will agree with me, that neither the type of the disease, the constitution of the atmosphere or the patient, or even the difference in the treatment, will account for the ludicrous disproportion which therein is exhibited. Thus in 1827, the average mortality of this disease is stated as 1 in 29; in 1828, 1 in 52! in 1829, 1 in 33; in 1830, 1 in 49!! and in 1831, 1 in 17. In none of the reports given by these intelligent practitioners, is this statistical anomaly accounted for, or the fault, if there is one, laid to the proper quarter; perhaps it has not occurred to them that there is any inaccuracy requiring comment, but this is only another proof of the great value of such statistical labours, as those I have been prosecuting, in expiscating truth, come from whatever quarter it may.

If I am correct in the previous statements, as to the active superintendance of the poor in their own dwelling, by the district surgeons, a very powerful argument is thus afforded, of the superior utility and efficacy of the Infirmary, compared with other kindred institutions, where the same vigilance of the poor in their own houses is not exercised. Here, it is only after a trial of the skill of these district functionaries, that the Infirmary becomes the abode of the poor,—only after their case has become obstinate or incurable, that they are sent to this last resort; and thus within the Royalty, at least, it generally happens that few cases of interest are sent to the Hospital to

^{*} In looking over this very elaborate table, it will be remarked, that in many other instances the mortality is trifling compared to that of the Infirmary, and for the reasons above adduced, some also of the accidents and diseases are apparently rare, for such a population as that of Glasgow,—suicide, for example, and poisoning, with the diseases of the puerperal state, and those of infancy,—but it must be observed, that the first two species of accidents are almost always treated by the *Police* or burgh surgeons, who are paid out of a separate fund from that of the district surgeons, and to the last class of patients, the elders are very seldom called on to give lines for medical treatment, not coming (it is understood) within the province of these district functionaries.

be treated in their early stages, when, as is well known, a cure is most likely to be effected. Instead therefore of looking for an average mortality of 1 in 10 or 12, as has been remarked in the Hospital table, the only astonishment is, considering what has been above stated, that it is not 1 in 5 or 6, more particularly within these last 15 years, during which period the above dispensary management has been in operation.

Considering the nature of the localities in which the district surgeons are called on to visit and investigate, I know of no better situation in the world, where more valuable information may be obtained, either as to medical topography, mortality, or pauperism, than from these gentlemen. It would be foreign to my present purpose, to hint at the methods which may be adopted in the prosecution of these inquiries; but here I cannot help remarking, that in consequence of the pitiful remuneration which is bestowed on these over-wrought public servants, few or none of them can have that leisure for such a task which is indispensible, and more especially since the gin-horse drudgery of visiting personally all and sundry who choose to make application, has been imposed upon them.

In point of economy, the cure of patients in their own houses is remarkable, contrasted with that in the Royal Infirmary. In order to mark the comparison, I have obtained the exact charge made on the Town's Hospital for the above four years and a half, in which the results of the treatment, as detailed in the prefixed table is recorded, and find that during the whole of this period, the aggregate amount of medical salaries for attendance on the poor at their own houses, has been £571, and the total charge for medicines, &c., £569 17s., in all £1,140 17s. Now, by a very simple calculation, I have found, that this sum divided among the 23,277 patients treated by those district dispensary surgeons, amounts on an average for the treatment of each individual case, to the astonishing small sum of 11\frac{3}{4}d.; while in the Infirmary, as was previously remarked, the average cost of each patient for medicines and medical attendance, including wine and spirits, during the same period, amounted to 10s. 1d. This speaks volumes.

The last subject which remains to be treated of, is that of statistical surgery, as exhibited in the 3 tables which I have given in the Appendix, and with which the work is closed. These, imperfect as they are, present an accurate view of what was transacted in wards No. 7, 8, and 12, of the Infirmary during one year. But as this exhibits only one half of the surgical patients who were resident in the Hospital during the above period, I must caution my readers against hastily drawing conclusions from these tables, which I feel convinced cannot be warranted. It is the first attempt of the kind which has been made, I believe, either here or elsewhere, and therefore it is hoped, will serve merely as a commencement of a more perfect system to be followed up hereafter. As to the averages both of residence and mortality, especially in the two last tables, these are so accurate that every dependence may be placed on them. The 10 volumes of house Journals over which my cases are spread, will attest the correctness of the first table, and the 3d, 4th, and 5th volumes of the Glasgow Medical Journal, in some measure prove the accuracy of the two last.

Where, as in a city like Glasgow, there are so many steam engines, mines, and public works of all kinds, it need not be matter of astonishment, that the admissions of males into the surgical wards, so much preponderate over that of females, as appear by these tables. I have thought it necessary, only to detail the number of those dismissed, cured, relieved, and dead, all the other more minute subdivisions being comprehended in that of "relieved." The average mortality I have calculated as formerly, giving the formula as before alluded to, and the great decrease compared with that in the medical wards, is very easily accounted for. With the exception of injuries of various kinds, almost all the surgical diseases in the above table are, though formidable, not dangerous; many of them, as ulcers, which forms about one-sixth of the whole, are comparatively trifling, and even the most dangerous do not add to the deaths more than 6 out of 22, the remaining 16 being the result of "accidents." In consequence of the annual change of the surgeons, which, by the regulations

of the Hospital, takes place on the 1st of May, there is at this period very generally fewer patients under their charge, than at any other time of the year. The newly appointed practitioner, on such an occasion, is anxious to have as much spare hospital accommodation for his new cases as possible, and his predecessor is equally anxious to get quit of all those who may have been previously under his charge. This annual sweeping change has a great effect on the average of residence in the surgical wards; and I feel convinced, that instead of taking the mean number between 24, those left me, and 27, those which remained to my successor, I ought perhaps to have increased the average under treatment, to at least 33, which would have given as a dividend, 12,045 hospital days, and as a quotient, 30 days residence instead of 23, as stated. I mention these circumstances frankly here, for, as elsewhere throughout my remarks in the present work, my object has been to detect error, and thus as far as possible to pioneer the way for some future, more enterprising, and scientific traveller.

In the table of operations, five deaths are enumerated, but I must add that four ought to have been the number, for the death from scald and secondary hemorrhage there stated, was a patient of my predecessor's, and the secondary hemorrhage was produced by ulceration of the brachial artery, after amputation performed by him, and of course, the result of his operation rather than of that mentioned in the table, thus exhibiting an average mortality on this operation table, of only 1 in 15¼. The average of residence attached to this table and the following one, is of all others in the work the most correct, for it was taken not by calculation, but at great labour, by ascertaining the admissions and dismissals of each individual patient there entered. In the three last volumes of the Glasgow Medical Journal, I have at considerable length detailed the more interesting cases above alluded to, and at present can only refer to this spirited and ably conducted periodical for the particulars. Meantime, I must remark, that were a similar plan to that which I have above sketched, zealously followed out, the results to the surgical world would, in my opinion, be invaluable. Let us hope that the spirit of improvement which is abroad over the breadth and length of our enlightened land, may descend on this western metropolis, and raise it still more and more among its compeers, not only as the emporium of commerce and manufactures, but of civil and religious liberty, of mechanical and mental philosophy, of Christian charity, and unbounded philanthropy.

APPENDIX.

A.

CHARTER OF THE GLASGOW ROYAL INFIRMARY.

George the Third, by the grace of God, of Great Britain, France, and Ireland, King, Defender of the Faith, &c. Whereas, James M. Dowall, Esquire, Lord Provost of the city of Glasgow, hath by his petition on behalf of himself, and the other contributors to the Glasgow Infirmary, humbly represented to his Majesty, that an Infirmary for the relief of persons labouring under poverty and disease, has been long wanted in the city of Glasgow, and in the adjoining counties of Scotland, and is become more necessary at present than at any former period, on account of the prosperous state of manufactures in Glasgow and its neighbourhood, and the increased population of those classes of manufacturers and labourers of every kind, who are most likely to require charitable assistance. That though the city of Glasgow hath ever paid the greatest attention to the diseased poor, and the Physicians and Surgeons have not only given gratuitous advice and assistance, but on many occasions furnished them with medicines; yet as the number of the diseased poor is constantly increasing, they find themselves altogether incapable of giving that relief which their cases require, particularly while the poor and diseased live dispersed in different parts of a large city and its suburbs, and are not under their regular and daily inspection. That certain charitable and well disposed persons, well affected to his Majesty's person and government, feeling for the miserable state of the diseased poor, and desirous of contributing to their relief, have raised a sum of money, by voluntary subscription, to be applied, under certain Rules and Regulations, for the purpose of erecting and supporting an Infirmary in the City of Glasgow, where the sick poor may be collected together, and may have all the advantages of lodging, attendance, diet, medicine, and the ablest advice and assistance. That the petitioner and the said other contributors are advised, and do most firmly believe, that if they and all future contributors were invested with corporate powers, their charitable design would be rendered more beneficial and extensive, their funds greatly increased, and would be more properly and with better security applied, and therefore most humbly prayeth, that his Majesty would be graciously pleased, to grant to the contributors to the Glasgow Royal Infirmary his Royal Charter, incorporating them and their successors in the management of the affairs of the said Infirmary, into a body politic and corporate, by the name of the Glasgow Royal Infirmary, with a perpetual succession, with powers to use a common seal, to sue, and be sued, to purchase lands, make bye laws, and with all other necessary and usual powers. His Majesty having taken the said petition into his Royal consideration, and being willing to give all proper encouragement to the said society, Therefore his Majesty, in compliance with the said humble request, and by virtue of his prerogative royal, and of his special grace, certain knowledge, and mere motion, ORDAINS a Charter to be made and passed, under the seal appointed by the treaty of union to be kept in Scotland, in place of the great seal thereof, Granting, Constituting, Declaring, and Appointing, as his Majesty by these presents Grants, Constitutes, Declares, and Appoints, that the said James M'Dowall, Esquire, and all and every the Contributors and Donors who have already subscribed, or who shall hereafter contribute to the funds of the said Society, shall be, and be called, one Corporation and Body-corporate and politic, by the name and style of the GLASGOW ROYAL INFIRMARY; and that they and their successors shall for ever hereafter have a perpetual succession, for the purposes of the better and more effectually Managing, Directing, Ordering, and Appointing, in all matters and things respecting the said Society and the funds thereunto belonging. And his Majesty for the purposes aforesaid, doth by these presents, Make, Create, Constitute, and Establish, the said James M'Dowall, and such other persons as have already contributed, or shall hereafter contribute to the funds of the said Society, into a Corporation, or Body-corporate and politic, for ever by the name and style of the Glasgow Royal Infirmary, and that the said Corporation, by the name and style aforesaid, shall, and may be able, and capable in law, to purchase, hold, and enjoy in perpetuity, lands, tenements, and any other estate or estates of inheritance, not exceeding the yearly value of one thousand pounds sterling, to lend any sum or sums of money, to any person or persons upon heritable or personal securities, or such securities as they think fit; to erect houses, to hold goods or chattels, and to receive and hold Donations or Legacies for the purposes aforesaid; and also that in the name and style aforesaid, the said Corporation shall, and may sue, and be sued, plead, and be impleaded, defend, and be defended, in whatsoever courts and places, and before whatsoever Judges, Justices, and other Officers, in all actions, pleas, complaints, accounts, matters, and demands whatsoever, and in such manner and form, as any of his Majesty's subjects, able and capable in the law, or any other body politic and corporation may or can; and also, that the said Corporation shall and may have a common Seal for the doing of all manner of business and causes of them and their Successors, and that it shall and may be lawful for them and their Successors, to break,

change, or new make the same Seal, from time to time, as to them or the majority of them shall seem expedient; which Seal shall be kept by the President, Treasurer or Clerk of the said Society, one of whom shall attend with it at all meetings where it shall be required.

And his Majesty for himself and his heirs and successors, directs, orders, and appoints, that the affairs of the said Corporation shall be from time to time governed and directed by twenty-five Managers and Directors, whereof the Lord Provost of Glasgow for the time being, the Member of Parliament for this city of Glasgow for the time being, the Dean of Guild of the said city for the time being, the Deacon Convener of the Trades of the said city for the time being, the Professor of Medicine of the College of Glasgow for the time being, the Professor of Anatomy of the said College for the time being, the President of the Faculty of Physicians and Surgeons in the said city for the time being, making in all seven in number, shall be perpetual Managers or Directors of the said Infirmary without election or nomination: That the remaining eighteen Managers shall be annually elected at the times, and in the manner, after prescribed, out of the following classes or descriptions of men, that is to say, one Manager shall be annually nominated by the Town Council of the city of Glasgow, one other Manager by the Merchants' house of the said city, one other Manager by the Trades' house of the said city, one other Manager by the Faculty of the College of Glasgow; but that these Societies shall not be limited in their nomination of Managers to their actual Members, but may nominate such other fit persons as they may think proper: That three other Managers shall be nominated by the Faculty of Physicians and Surgeons out of the incorporated Members of the said Faculty, two of them always being Surgeons, but when neither the Professor of Medicine nor the Professor of Anatomy in the College of Glasgow shall be Physicians, the third Manager to be nominated by the said Incorporation shall always be a Physician, and also, that when the President of the Faculty of Physicians and Surgeons shall happen to be either Professor of Medicine or Professor of Anatomy in the College of Glasgow, then, and in that case, another Physician shall be elected a Manager by them out of the said Incorporation, so that three annual Managers may at all times be nominated by the said Faculty of Physicians and Surgeons: That one of the Ministers of the established Church shall be elected a Manager or Director annually by the whole established Ministers of Glasgow: That ten Contributors, residing in or near Glasgow, if such can be found, shall be nominated Managers or Directors by such Contributors as shall have subscribed respectively to the amount of Ten Pounds Sterling, or more, or of two Guineas of annual subscription, or more, after having been Subscribers for one year, and as long as they shall continue to pay the said subscription, and also by the Preseses or heads of such Societies as shall have respectively contributed Fifty Pounds Sterling, or more, or who shall pay an annual subscription of Five Guineas, or more, after having been subscribers for one year, and as long as they shall continue to pay the said subscriptions: And if at any time hereafter it shall happen that the whole number of Contributors of the above description shall be reduced below the number of Twenty, then the other Managers legally called to the management as aforesaid, with such number of Contributors as may still remain, if any such there shall be, shall nominate ten fit persons out of the above-mentioned or other descriptions or classes of persons to make up the number of twenty-five Managers, in whom the annual management is to be vested: And his Majesty further grants and declares, that the said James M'Dowall, Esquire, the Right Honourable Ilay Campbell, Lord President of the Court of Session in Scotland; William M'Dowall of Garthland, Esquire, Member of Parliament for the city of Glasgow; Gilbert Hamilton, Esquire, Dean of Guild of the said city; James McLehose, Esquire, Convener of the Trades of the said city; Thomas Charles Hope, M. D., Professor of medicine in the College of Glasgow, and President of the Faculty of Physicians and Surgeons in the city of Glasgow; Robert Cleghorn of Glasgow, M. D., George Oswald of Scotstown, Esquire, David Dale, Robert Scott Moncrief, Archibald Grahame, William Craig, Merchants in Glasgow; Thomas Reid, D. D., Professor of Moral Philosophy in the College of Glasgow; George Jardine, Professor of Logic in the said College; Robert Wallace, Alexander Dunlop, and Charles Wilson, Surgeons in Glasgow, shall take upon themselves the management and direction of the whole affairs of the Corporation, from the date of this charter, till the first Monday in February, which will be in the year of our Lord one thousand seven hundred and ninty-three; any seven or more of whom shall constitute a meeting, or quorum, for managing the funds of the said Incorporation in all matters and things, with power of adjournment as they shall see cause.

That at some convenient time before the first Monday in January, the Town Council of Glasgow, the Merchants' house of the said city, the Trades' house of the said city, the Faculty of the College of Glasgow, the Faculty of Physicians and Surgeons of the said city, and the Ministers of the established Church in Glasgow, shall elect or nominate, their respective proportions of Managers above-mentioned, which nomination shall be intimated and declared at a General Meeting of qualified Contributors to be held on the first Monday of January, yearly, by which meeting of qualified Contributors, or a majority of them, on the said first Monday of January yearly, ten Contributors, qualified as above, shall be chosen Managers or Governors for the ensuing year; and, if the above-mentioned Societies, or descriptions of persons having right to nominate Managers, shall fail to nominate their respective proportions, and to declare their nomination as above, then it shall be competent for the Managers legally appointed, or elected, and assembled on the first Monday of February, yearly, to nominate from the several Societies or classes of men who have failed to nominate or elect, their respective proportion of Managers, to make up the full number of twenty-five Managers for directing and governing the affairs of the Corporation for the ensuing year.

That on or before the first Monday of January, in the year following, in like manner, twenty-five Managers shall be nominated and called to the management, as their successors in the management and direction of the affairs of the said corporation; and so on yearly and every year for ever, the several societies and descriptions of persons having right to elect, shall elect and nominate their respective proportion of Managers, together with the said Lord Provost of Glasgow, the Member of Parliament for the city, the Dean of Guild, the Deacon Convener of the Trades, all of the said city, the Professor of Medicine, the Professor of Anatomy, both of the College of Glasgow, the President of the Faculty of Physicians and Surgeons in Glasgow,—shall compose the full number of twenty-five Managers the ensuing year, who shall immediately thereafter enter on the execution of their office.

That the said twenty-five Managers, any seven or more of whom shall constitute a meeting for conducting the business, and manag-

ing the funds, of the said Corporation, in all matters, excepting as herein after excepted, and their successors, in all time coming, shall hold four meetings every year, at some convenient place within the city of Glasgow, viz. on the first Monday of February, the first Monday of May, the first Monday of August, and the first Monday of November, yearly, with power to adjourn and to hold as many more meetings as they shall see needful, and that the majority of Managers shall have power as often as they shall think proper, to call a general meeting of qualified Contributors by an advertisement in the Glasgow Newspapers, at least ten days before the day fixed for said meeting, and intimating in said advertisement the business of said extraordinary meeting; and the Resolutions of which meeting, called in the above manner, shall be as valid and effectual in every respect as those of the general meetings fixed by this Charter; and to all meetings of the Managers, the Managers shall be summoned by a written order at least on the lawful day immediately preceding such meetings.

That the twenty-five Managers or any seven or more of them, shall, after their appointment or election, or at their first stated meeting on the first Monday of February, yearly, appoint such Committees, of their number, as they shall think proper, to take the charge of particular departments of the business of the Infirmary, and shall establish such distribution and management thereof amongst themselves as they shall from time to time find expedient and necessary.

That the twenty-five Managers may and shall, annually, after their election and entry into office, nominate and choose a Treasurer to the Corporation, and a Clerk thereto, and such other persons as they shall judge necessary to be employed in the service of the Corporation, and shall appoint them such salaries, fees, or rewards as they shall judge proper, and that they may have power at their pleasure to discharge the said Treasurer and Clerk and others employed as aforesaid, and to put other officers in their places as they shall see cause, and that the Treasurer, under the direction of the annual Managers, shall have the custody of the Corporation's Cash, and shall receive in, and pay out, all the monies as he shall be warranted to do by the said Managers from time to time, and for which he shall be obliged to keep, and produce, regular accompts as often as he shall be required; that the said Treasurer shall not keep in his hands, at any time, more than Fifty Pounds Sterling, but shall be obliged to lodge all sums above Fifty Pounds in one of the Banks in Glasgow, at such a rate of interest as can be got therefore, for the behoof of the Corporation; and the said Treasurer shall be obliged to give security for his fidelity in the discharge of his office to the satisfaction of the annual Managers.

That it shall not be lawful for the Managers, or their quorum, to break in upon the stock of the Corporation ascertained at the annual balance on any occasion, or pretext whatsoever, without the authority of the General Court of Contributors to be afterwards mentioned.

That it shall and may be lawful for all and every the members of the said Corporation, or body politic, who shall have respectively contributed Ten Pounds Sterling, or more, or two Guineas, or more, of annual subscription, after having paid said subscription one year, and as long as they shall continue to pay it, together with the Preseses, or heads, of those Societies who may have respectively contributed Fifty Pounds, or more, or Five Guineas, or more, of annual subscription, after having paid such subscription one year, and as long as they shall continue to pay it, to assemble and meet together on the first Monday of January, one thousand seven hundred and ninety three, in some convenient place within the city of Glasgow, of which due intimation shall be given by an advertisement in the Glasgow Newspapers, and for ever thereafter, yearly, on every first Monday of January, at such proper place as they shall appoint, and that the said members of the Corporation so assembled, shall be and be called a General Court, and they, or a majority, so assembled, shall have full power and authority to make and constitute such Bye Laws, Ordinances and Regulations, for the management and government of the affairs of the said Corporation as to them shall seem meet, so that such Bye Laws, Ordinances and Regulations be not contrary to the true intent and meaning of this Charter nor repugnant to the laws of the realm. That, at the second and every succeeding meeting of the General Court, the Managers of the preceding year shall lay before the General Court, and the Managers who shall succeed them in office for the year ensuing, an account of their proceedings in the execution of their office, together with a full and distinct state of the Capital Stock of the Corporation, in Lands, Money, or other effects; and also a state of the sick, or diseased poor, taken in and entertained during the year of their management, containing the names of the sick and diseased, the parishes to which they belong, the time when received into the Infirmary, their several diseases, and the number received, cured, dismissed, or dead.

That it shall be lawful for the Lord Provost of Glasgow for the time being, to preside at all meetings of the General Court, and also of the annual Managers, and in his absence, a President to be elected by the meeting, and the President of said meetings shall have a deliberative and casting vote in all business that may come before them; that it shall be competent for the Lord Provost of Glasgow for the time being, and, in his absence, the Dean of Guild or the President of said meeting to administer the oath de fideli administratione to the first Managers, and the like oath de fideli shall, in like manner, be annually sworn by all the Managers, at the first meeting after their election, and that the said Managers, or the President of their meeting, shall be appointed to administer the oath de fideli to the Treasurer and Clerk, and others employed by the Managers, at their entry into their office; and, in case any of the Managers elected as aforesaid, shall refuse to accept of the office, and to take the oath de fideli, or that any of them shall happen to die within a year after their election, the other Managers legally elected, shall at their first meeting thereafter, be authorized to nominate another Manager or Managers, in the room of the person or persons refusing to accept the office, or deceased. And the said Managers, or any of them, are hereby authorized to receive such further sums of Money, Lands, Goods, or Gear, as shall be given by any person whatever to the use of the said Corporation, and shall keep books for subscription, and such other books as they shall think needful, for that purpose, and for all other purposes of the Corporation.

And his Majesty doth for himself, and his heirs and successors, give and grant to the members of the said Corporation, and their successors, full power and authority in general meetings assembled from time to time, to constitute, ordain and make such and so

many Bye Laws, Constitutions, Orders and Ordinances, as they, or the greater part of them being then and there present, shall judge proper and necessary for the better government and direction of the said Corporation and the said Bye Laws, Constitutions, Orders and Ordinances, or any of them, to alter and annul as the said Corporation so assembled, or the major part of them then present, shall see requisite, all and singular which Bye Laws, Constitutions, Orders and Ordinances so as aforesaid to be made, his Majesty wills shall be duly observed and kept, but so always as the same be noways contrary, or repugnant to the Laws of the Realm, and the tenor of this Charter, and so as such Bye Laws, Constitutions, Orders and Ordinances from time to time to be imposed, and every repeal, or alteration, thereof or any of them, be likewise agreed to be established and confirmed by a general meeting of the said Corporation to be held and kept next after the same shall be respectively made.

And his Majesty for himself, his heirs, and successors, declares that these, his Majesty's letters Patent, shall be in and by all things valid and effectual in Law, according to the true intent and meaning of the same, and shall be taken, construed and adjudged, in the most favourable and beneficial manner, for the best advantage of the said Corporation, notwithstanding any misrecital, defect, uncertainty, or imperfection in these his Majesty's Letters Patent. And his Majesty doth for himself, and his heirs and successors, covenant, grant and agree, to and with the said Corporation, or Body Politic and their successors, that his Majesty, his heirs and successors shall and will, from time to time, and at all times hereafter, upon the humble suit and request, of the said Corporation, or Body Politic, and their successors, give and grant unto them, all such further and other privileges, authorities, matters, and things for rendering more effectual, this his Majesty's grant, according to the true intent and meaning of these presents, which he or they can or may lawfully grant, as shall be reasonably advised, and devised by the counsel, learned in the law of the said Corporation, or Body Politic, for the time being, and shall be approved of by the Lord Advocate, and Solicitor General, in Scotland, of his Majesty, his heirs and successors, in his or their behoof. And his Majesty doth further will and command, that this Charter do pass the seal appointed by the Treaty of Union, to be kept and used in Scotland, in place of the great seal thereof, without passing any other seal or register; for doing whereof, this shall be, as well to the Directors of his Majesty's Chancery, for writing the same, as to the keeper of the said seal, for causing the same to be appended thereto a sufficient warrant. Given at his Majesty's court at St James's, the twenty-first day of December, 1791, in the thirty-second year of his Majesty's reign.

By his Majesty's Command,

(Subscribed.)

HENRY DUNDAS.

B.

GLASGOW ROYAL INFIRMARY REGULATIONS.

MEDICAL ATTENDANTS.

- I. The Medical business of the Establishment shall be committed to two Physicians, chosen annually, one of whom shall go out of office every year; and the Surgical business, to four Surgeons, chosen annually, two of whom shall go out of office every year, and shall not be eligible again for two years.
- II. The Physicians and Surgeons shall attend the Infirmary daily, at one o'clock; shall examine the Patients, and make reports in presence of the Students.
 - III. In any case of difficulty, any of the attendants may require the assistance of the others in consultation.
- IV. No Operation shall be performed unless determined on at a consultation regularly summoned: and all operations must be performed, publicly, in presence of the Students; excepting such as the Attending Surgeon may consider injurious to female delicacy.
- V. Dissections shall never be performed, unless the consent of the friends of the deceased, and a written permission signed by two of the Managers be obtained.

CLERKS .- GENERAL DUTIES.

- I. They shall never be all absent from the Hospital at one time; for this purpose, they shall not upon any account engage in medical or surgical practice or other business out of the Hospital; and they shall not attend classes or societies without the permission of the Managers.
- II. They shall, upon no account whatever, be absent from the House for one day, without the permission of the Medical Practitioner under whom they act; and if they wish for leave of absence for more than one week, they must obtain permission of the Managers to that effect; and failing to do so, they shall be considered as having left the House, and their places will be immediately filled up.
- III. When any of the clerks shall be under the necessity of leaving the house before the expiry of their time, they shall give at least one month's intimation of their intention to the Managers. On graduating they cease to be eligible.
- IV. They shall insert in their respective Journal Books an accurate account of the cases of all the Patients, immediately upon their admission, under the care of the Physician or Surgeon with whom they are connected, in order that the cases may be ready for

the Inspection of the Physician or Surgeon next day before he visits the Patient; and they shall accompany the Physicians and Surgeon in their daily visits to read these accounts, and also write into the journals the reports and prescriptions dictated by the Physicians or Surgeon.

- V. They must be careful to mark on the first page of their journals the date of the commencement and termination thereof, with the name of the Medical Practitioner who has the charge of the Patients; and when the case of the Patient is transferred to a new journal, they must insert therein all the medicines, together with the diet the Patient has been ordered at the date of transferring the case from the old to the new journal.
- VI. They shall affix to the bed of each Patient under their charge when admitted, the name of the Patient, and date of admission; and if a Surgical Patient, the name of the dresser to whose care the Patient is intrusted.
- VII. They shall go round the House at intermediate hours, observing the general good order of the Wards, particularly in the morning between eight and eleven, and in the evening between six and eight, when they shall inquire into the state of the Patients under their care, and learn whether the prescriptions have been complied with. They shall never prescribe, except in cases of sudden emergency, and then invariably write such prescriptions in a book kept for the purpose, which they shall send to the Apothecary's shop about eight o'clock, P. M.
- VIII. They shall lay the journals in use before the Managers at their monthly meetings, that they may see whether the histories of the cases are regularly preserved.
- IX. They shall perform all smaller operations—as, bleeding, cupping; or do whatever may be required of them by the Medical attendants they are connected with.
- X. At the end of every week they are to make out a list of all the patients admitted into, and dismissed from, their respective Wards during the week; marking the date of admission, by whom recommended, the No. of the Ward; also, the date of dismission, name of the disease, and how dismissed, whether cured, relieved, dead, or otherwise. This list must also include the number of Patients remaining in each Ward, the number under the care of each Physician and Surgeon, and of these, how many are cases of fever.
- XI. Upon observing any impropriety in the House, they are immediately to communicate the same to the Treasurer, in order that he may either acquaint the Managers thereof, or take such steps as he may think proper for correcting the same.
- XII. The Clerks, immediately upon being elected, and before being received into the House, shall pay one year's board per advance to the Treasurer, as the same shall be fixed by the Managers.

PARTICULAR DUTIES .- PHYSICIANS' CLERKS.

- I. They shall, alternately, make up, before the Meetings of the Weekly Committee, the Register Book of Admissions, Dismissions, &c. from the lists referred to in No. XI. of General Duties.
- II. At the end of the year, the Senior Physician's Clerk shall make out a list of the number of Patients in the House at the end of preceding year; stating the number admitted since,—distinguishing the males, females,—how many medical, surgical, how dismissed,—whether cured, relieved, with advice, by desire, improper, irregular, incurable, or dead; and showing the number of Patients remaining in the House at date of list.

SURGEON'S CLERK.

- I. He shall have, under the direction of the Ordinary Surgeon, the charge of the Surgical Instruments, of which he shall keep an exact inventory, and give copies thereof to the Treasurer, upon the 1st of January and 1st of July annually.
 - II. He shall at all times have an assortment of bandages in readiness, particularly of those necessary in capital operations.
- III. When directed, he shall call a consultation of the Medical Attendants,—and he shall affix, in the Students' waiting room, notices of intended operations and dissections the day previous to such operation, except on emergencies.
- IV. He shall superintend the conduct of the dressers. He is to study neatness in dressing, instructing the dressers in this necessary art; and is to be careful that there be no waste of caddis, strap, or other materials used by the dressers.
- V. He shall take charge of all dissections, under the direction of the Medical Attendant, and perform such part of the dissection as shall be intrusted to him; but no dissections whatever are to take place without a regular order from the Managers, and they are to be conducted with the greatest decency, and the body to be left in a proper state for interment.

APOTHECARY.

- I. He shall live in the House, from which he shall not be absent for one day without leave.
- II. He shall from time to time order, by marking in a pass-book, such utensils and simple medicines, and prepare such quantities of the compound ones, as may be necessary for the practice of the House.
 - III. He shall dispense the medicines prescribed by the Physicians and Surgeons for the Patients.
- IV. He shall, immediately after the visit of the Physicians and Surgeons, transcribe from the journals into a book the prescriptions of the day, with their signatures, under the name of each Patient for whom they are ordered; and shall prepare, or cause the same

to be prepared or made up, with due attention and despatch, taking care that such medicines as are ordered to be taken immediately, shall be sent to the proper ward within one hour after they are ordered, or sooner, if required, by a written note.

- V. Every medicine that is dispensed, shall have the date of the prescription, the name of the Patient for whom it is prescribed, and the time and manner of using it, affixed to the paper, box, pot, phial, &c. into which it is put. And the label is to be renewed when so far defaced as not to be easily legible.
- VI. He shall put, or cause to be put, the medicine for each Patient, into the Nurse's basket of the Ward, to which the Patient belongs; and shall, after the Nurses have taken their baskets with the medicines from the shop, and distributed them to the individual Patients, visit the different Wards, and give the necessary instructions at the bedside of each Patient who has been ordered medicine, how, and when these are to be used. After which, he shall return the journals to the Clerks.
- VII. He shall transcribe into a book all alterations ordered in the journals by the Physicians and Surgeons, on the diet, &c. of the Patients; and immediately transmit the same to the Matron: and he shall also give as early notice as possible, by a line transmitted to the Matron, of any change in the diet, &c. which it may be necessary to make for the day.
- VIII. He shall insert into a book to be kept for the purpose, the precise quantity of spirits that shall be used from time to time for tinctures. &c.
- IX. He shall also keep a book, in which he is to insert the name of every Patient, for whom the Medical Practitioners shall prescribe either wine, spirits, or porter, the Ward in which such patient is, the name of the Medical Practitioner who has ordered the same, and the precise quantity ordered every day; and which book he is to lay before the Managers at their stated monthly meetings.
- X. He shall take charge of the sale of Admission Tickets to the Students; and shall also keep an account of the money paid by Patients: for which transactions, he shall be answerable to the Treasurer.
- XI. He shall have the charge of the whole journals kept by the several Clerks, which he is to receive from them so soon as they are completed, and regularly enter them in a catalogue or inventory to be kept for that purpose; and he shall upon no account whatever permit any of the journals to go out of his custody, without the special permission of the Managers. He shall likewise furnish the different Clerks with blank journals when necessary, always taking a receipt in writing for the same.
- XII. He shall take charge of the Key of the Dead Room; is never to deliver it up, excepting for inspections regularly permitted, or for the removal of bodies for interment; and is also to see that the bodies after inspection are properly put up.
- XIII. He may admit Four Students to attend the Shop, for such a period and fee as the Managers may determine, for the purpose of acquiring a knowledge in Pharmacy, preparing Medicines, and of assisting the Apothecary in every respect as long as may be necessary. The attendance of said Students will be formally certified by the Managers.
- XIV. The Apothecary and Matron shall superintend the domestic economy of the House; they shall see that the gates be locked every night at ten; after which hour, the Managers expect that no member of the family shall be absent from the house without leave.
- XV. Upon observing any impropriety in the House, he is immediately to communicate the same to the Treasurer, in order that he may acquaint the Managers thereof, or take such steps as may be proper for correcting the same.

DRESSERS.

- I. QUARTERLY, in the months of February, May, August, and November, Dressers be appointed by the Managers to dress the Patients in the Hospital.
- II. No student can be appointed a Dresser unless he has attended the Infirmary for three months at least previous to the election.
- III. Students who wish to be elected Dressers, must apply by letter to the Managers, stating the particulars of their medical education.
- IV. The Dressers must attend every day at the ordinary hour of visiting, and must on no account whatever be absent without leave from the Surgeon.
- V. Each Dresser shall have an apron with a pocket and sleeves, a pan for clean dressings, and a small box for the dressings removed, to be provided by the House.
- VI. Every Dresser shall have all the articles necessary for dressing ready in his pan, before the ordinary hour of attendance, and shall order the Nurses to carry off the former dressings, &c. immediately after the work is finished.
- VII. Each Dresser shall apply the dressings, &c. under the direction of the Surgeon in attendance, or his Clerk, when desired so to do.
- VIII. When any Surgeon is performing an Operation or Dissection in the Theatre of the Hospital, the Dressers shall attend in the area of the Theatre and serve as assistants, the principal charge to be assigned to the Dresser under whose care the Patient is to be.
- IX. Every Dresser, if he has regularly and faithfully discharged the duties of his office for the whole appointed time, shall have a certificate of his diligence, and of the time he has officiated, but not otherwise.

STUDENTS.

- I. Students, on taking out Tickets for attendance in the Infirmary, shall have the privilege of accompanying the Physicians and Surgeons in their daily visits to the Patients, of attending Operations, Dissections, or the like, in the Hospital.
 - N. B. The Fee for an Annual Ticket is £ —for a perpetual Ticket, £

- II. The Students shall be allowed the use of the Journals for taking copies of Cases, every day from eleven till twelve o'clock in the Forenoon, and from four till seven in the Afternoon; but the Student receiving the books shall leave his name with the Apothecary, and shall be considered answerable for them till they be restored: And the Books shall not, on any account or pretext whatever, be carried out of the Hospital, or be written upon, or otherwise defaced.
- III. Students attending the Physicians or Surgeons, during their visits, or while performing Operations, are to behave with decency and propriety, keeping their hats off, at all times avoiding doing any thing that may disturb the Physicians, Surgeons, Clerks, or Patients.
- IV. Students when visiting the Wards, shall on no account tease the Patients with unnecessary questions, or offer any advice or opinion to them, relative to their diseases, or disturb the Patients by visiting the Wards, at any other time than the appointed hour of visit of the Medical Practitioners. Nor can they be allowed to visit such Patients as the Physicians or Surgeons may think proper to keep quiet or private.
- V. If any Student shall be guilty of infringing any of the above Regulations, which the Managers flatter themselves every gentleman attending the Hospital will see the propriety of, he shall be liable to forfeit the benefit of his Ticket, and the privilege of ever attending the House in future.

MATRON.

- I. The Matron shall live in the House, from which she is not to be absent for one day without leave.
- II. All inferior servants in the House shall obey her orders.
- III. The Cook, Chamber-maid and Nurses, shall be hired by her at such wages as are allowed by the Managers.
- IV. She shall go round all the Wards every day at ten o'clock in the forenoon, and again at some other convenient time of the day, to examine their state, and to correct what may be amiss.
- V. All the furniture, utensils, stores, &c. of the Infirmary, shall be delivered to her charge on inventory by a Committee of Managers, and she shall thereafter keep all clean and in good order.
 - VI. She shall purchase or receive the provisions, furniture, utensils, as she shall be directed.
- VII. She shall keep exact accounts of her daily disbursements, and receipts of all kinds to be examined once a month by the Treasurer, who is empowered to state and subscribe the balance as it then stands.
- VIII. In the month of August, yearly, she shall make an inventory of all the furniture and utensils then in the House, which shall be compared with the articles themselves and with the preceding inventory by a Committee of the Managers, who are to report concerning it to the first meeting of Managers thereafter.
- IX. She shall be particularly attentive to see that the provisions for the Patients be good and wholesome; that they are properly cooked; and that they are sent up according to the scale of diet prescribed by the Medical Practitioners.
 - X. She shall be regulated in the Diet by the Infirmary Diet Table.

PORTER.

- I. The Porter must live in the House, from which he shall not be absent unless when employed in the service of the Infirmary, or having obtained leave from the Matron or Apothecary.
 - II. He shall keep the Court, Passages, and Offices, always neat and clean.
 - III. He shall, when required, accompany the visitors and strangers to show the different parts of the House.
 - IV. He shall take charge of the gates, coals, trimming of the lamps, and ringing of the bell, according as he shall be directed.
- V. He shall also take charge of the Dead Room, keeping it clean; and shall attend in every requisite manner, to the removal of bodies for interment or inspection, afterwards invariably leaving the key with the Apothecary.
- VI. He shall at such times, as he may be directed, shave, administer injections, take charge of the baths prescribed, and, in short, as far as he shall be able, do whatever may be reasonably required of him (in connection with the business of the House) by the Matron, Apothecary, or Clerks.
 - VII. He shall attend the main door during the hour of visit, and when there is a meeting of Managers.
- VIII. In the hour of visit he shall admit none into the Infirmary except the Managers, Visitors, resident Medical Practitioners, Army and Navy Surgeons, the Patients for admission and advice, and the Students who have tickets.
- IX. He shall deliver the billets for the Managers, Physicians, Surgeons, and others, as he shall be directed by the Managers or Clerks.
 - X. Unless when he is employed in the premises he shall do what service he can to the Matron, Apothecary, Clerk, or Nurses.
- XI. He shall not accept of any gratuity whatever from Patients or Strangers who come to see the House, but shall gratify their desire without fee or reward.

NURSES

I. The Nurses shall remove from their respective Wards all dust and nastiness, every morning before ten, and shall at all times keep them neat and clean, and be especially careful in airing them by keeping the upper sashes of the windows down.

- II. They shall make the Patients' beds, attend to their comfort, give them drink when required, and assist them in all respects as they may stand in need.
 - III. They shall distribute to the Patients the Diet whenever it is brought from the Kitchen, according to the list delivered with it.
- IV. They shall give or apply the Medicines, &c. at the times and in the manner marked on the labels of each, or as they may be otherwise ordered, and ask directions from the Apothecary or Clerks, whenever they have any doubt about the orders for the Medicines, Diet, &c.
- V. At such an hour as the Apothecary may appoint, each Nurse shall bring her basket to the shop, with all the empty boxes, pots, phials, &c. belonging to her Patients, and shall return, when desired, for such of the Medicines as are to be taken at intervals in the course of the day; and at three, when the shop bell rings, for the remainder of the Medicines in use, and for such new Medicines as may have been ordered at the visit; and again, when the shop bell rings in the evening for the Medicines, &c. that may be prescribed in the evening journals. No Nurse can be allowed to leave the House till after the rounds of the Apothecary; but at other times, leave of absence may be obtained from the Matron, on presenting a line from the Clerk that she can be spared.
- VI. They shall give particular attention to the bedding of the Patients, (for which they are always answerable) especially when they labour under contagious diseases, or sores, and see that the same be kept clean, and that, immediately after the dismissal of a Patient, the same be returned to the Matron.
- VII. They shall be attentive to the state and symptoms of the Patients, especially if these be of an uncommon nature, that they may be able to report them distinctly to the Physician, Surgeon, or their Clerks; and if any threatening symptoms occur, they are immediately to give notice to the respective Clerk, or in his absence to any other Clerk of the Hospital they can find.
- VIII. They shall be particularly careful that the Patients do not receive food or drink of any kind from their friends or visitors, and likewise that they do not convey out of the Hospital, by means of their friends or visitors, what of their diet they are unable to consume.
- IX. If they discover the friends of the Patients guilty of either of the preceding practices, they shall not fail to report them to the Matron or Clerks.
 - X. The Nurses shall always regularly carry back to the Matron what share of diet the Patients do not consume,
- XI. Any Nurse who shall be found to have been guilty of bringing in, or having caused to be brought into the House, either for her own use or for the use of any Patient, any Spirits, or improper articles of diet, or of carrying out of the House any articles of provision, such as broth, &c., or any articles of furniture, as sheets, blankets, bedding, bottles, &c., shall instantly be dismissed the House, and such wages as may be due to her forfeited.
- XII. Any Nurse who shall, on any account whatever, demand, or, when offered, take any money, fee, or reward, or under any pretext borrow any money or clothes from any Patient or other person, they shall instantly be dismissed the House, and such wages as may be due to her forfeited.
 - Note.—It is particularly requested of the Patients, that if they see any of these Regulations not strictly observed, they will give immediate notice thereof to the Matron, Apothecary, or Clerks, as their own comfort materially depends upon a due observance of them.

PATIENTS.

- I. At the time of each meal, the Patients shall be at their respective beds to receive their allowance. They must all confine themselves to the diet of the Hospital. If it disagrees with them, they must inform the Physician or Surgeon; but they must not receive meat from their friends who visit them. Any person bringing food or liquor to the Patients, will be prevented from visiting the Infirmary for ever afterwards.
- II. If any be unable to use the House allowance, the portion not used must be carefully returned to the Nurse or Servants. Any Patient who shall give any food furnished from the Infirmary, or who shall exchange it for any article whatever, shall be expelled with infamy, and never admitted again, however great the distress, or however strong the recommendation may be.
- III. All the Patients shall be silent when the Physician or Surgeon visits the Ward, or when the Apothecary distributes the Medicines.
 - IV. They must conceal no disease, and no circumstance relating to it.
 - V. They must take their medicines regularly at the time, and in the quantity ordered.
 - VI. No Patient must leave the House, without permission from the Physician or Surgeon, from the Clerks or the Matron.
 - VII. No Patient, unless compelled by disease, shall be out of bed after 10 o'clock.
 - VIII. No Patient shall disturb the Ward, by talking loud, quarrelling, or swearing, nor even by smoking tobacco.
- IX. The Patients, if able, shall keep in order their own beds and presses; the clothes, medicines, &c. are to be kept in the presses, and never to be left on the window-soles.
- X. They shall visit their fellow-patients when they are able, and when the Nurse desires them, they shall do any kind of work consistent with their recovery, under the direction of the House-surgeon or the Matron.
- XI. They shall be particularly careful of every thing belonging to the Infirmary, such as bed clothes, fire utensils, spoons, &c., and all bottles, vials, pots, syringes, or any drugs not used, must be carefully restored to the Nurse, or to the person from whom they were received.

XII. Friends shall be allowed to visit the Patients from 10 to 12 o'clock forenoon (Sundays excepted.) but shall not stay beyond these hours without permission. Any Patient harbouring visitors at other hours shall be instantly dismissed.

N. B. Any Patient who has cause of complaint, may state the complaint to the Managers at their weekly visit, to the Physicians or Surgeons, to the Clerks or the Matron. An immediate inquiry will take place. Injuries will be redressed, and justice administered according to the evidence, without respect of persons.

Note.-If any Patient shall break these Regulations, he or she shall be instantly dismissed disgracefully, and can never again be admitted into the Infirmary.

C.

REGULATIONS RESPECTING THE ADMISSION OF PATIENTS.

Enacted by the General Court, held 21st of January, 1822.

J. No Patient shall be admitted into the Infirmary, without examination by the Medical attendants, to ascertain that the case is a proper one for admission into the House.

II. All Contributors of £10 or more, and all Annual Subscribers of £1 1s. or more, shall be entitled to recommend one Patient annually, for every £10 of Contribution, and one for every Guinea of Annual Subscription.

III. Incorporations and Societies, from which regular and perpetual recommendations may be expected, and who have contributed £50 to the Institution, or Subscribe £3 3s. annually, shall be entitled to send two Patients annually to the House, and one Patient more for every £25 of additional Contribution, or £1 11s. 6d. of Annual Subscription.

IV. Contributors shall not be qualified to recommend till they have paid their Contribution, nor Annual Subscribers til they have paid their Annual Subscription.

V. Persons meeting with accidents, shall, if immediate application is made, be admitted without any Subscriber's recommendation.

VI. Subscribers or Contributors, recommending Patients, shall be bound to pay the expense of burial in case of death, and also to remove the Patients from the Infirmary, when it is not proper that they should continue in it any longer.

VII. A Book shall be kept, in which shall be enrolled the names of the Patients, and of the Subscribers by whom they are recommended; the dates of their admission, and other particulars, which the observance of the above Rules may require.

VIII. Such Patients are to be dismissed from the Infirmary as IRREGULAR:-

1st, Who at their admission, falsified their disease, or intentionally concealed any material part of it. 2d, Who refuse the food, drink, medicines, or operations prescribed, or take any medicines, drink, or food, not ordered by the Physicians or Surgeons. 3d, Who go abroad without leave from the Physician, Surgeon, or Clerk. 4th, Who stay abroad at night. 5th, Who disobey the orders of the Clerks, Apothecary, or Matron. 6th, Who quarrel or make broils in the Wards. 7th, Who go into the Wards where Patients of the other sex are lodged. 8th, Who are guilty of any immorality. 9th, Who convey out of the House by giving to their friends or visitors, what of their diet they do not themselves consume.

D.

DIET TABLE,

Enacted by the Directors of the Glasgow Royal Infirmary, on the 25th of December, 1794.

The diet of the patients shall be of three kinds, low, middle, and full, which are to be given to each, according to the orders of the Physicians and Surgeons.

LOW DIET.

BREAKFAST,-Bread and Milk, Oaten or Barley meal porridge, gruel or panada.

DINNER,-Bread and Milk, Panada, Sago, Rice and Milk, milk Caudle, Barley boiled with currants and eaten with or without proportion of wine, as shall be ordered, Potatoes.

SUPPER,- The same as Breakfast.

Drink,-Water gruel, milk and water, Barley or rice water, Cow milk whey, occasionally prepared with Cream of Tartar.

MIDDLE DIET.

BREAKFAST,-As in Low Diet.

DINNER,-Broths prepared with beef or mutton, and taken with bread, rice or bread puddings.

Supper,-Porridge or bread and small beer.

DRINK,-As in Low Diet, with a small allowance of small beer at dinner.

FULL DIET.

BREAKFAST, -- Oaten or barley meal porridge with milk or small beer. Bread with either of these liquors.

DINNER,-Broth, puddings, boiled beef, or mutton, or fresh fish.

Supper,-As in Middle Diet.

Drink,-Besides the drink in Low Diet, a larger allowance of small beer.

SALOPS,-whether used as a medicine or a part of diet, is proper for Hospitals.

Wines may be occasionally ordered by the Physicians or Surgeons as medicine, not as any part of diet.

Besides the food mentioned above in the different diets: the various fruits in their respective seasons, may be ordered; as apples, pears, whether cooked or raw, cherries, gooseberries, strawberries, &c.

E.

RESOLUTIONS

Passed by the Court of Directors of the Glasgow Royal Infirmary, on the 16th of November, 1807.

I. That three Physicians be annually appointed to the Hospital, two of whom shall attend at the following periods:-

When clinical lectures are given by any of the Physicians, or when the number of medical patients shall exceed fifty, or when the attending physicians may judge it necessary—That the Physicians shall annually serve for three years, one of them retiring each year; and that in order to introduce this rotation, one of the Physicians elected in 1808, shall serve one year, one shall serve two years, and the other three years.

- II. That the surgical department of the Hospital, be committed to six surgeons—two senior consulting surgeons, three ordinary surgeons, and one junior consulting surgeon—That the patients be under the immediate charge of the ordinary surgeons, each of whom shall attend four consecutive months each year—That the senior surgeons be present at consultations and operations—That the duty of the junior consulting surgeon, be to act for the ordinary attending surgeon during his unavoidable absence, but without operating; to be present at all consultations and operations, and to accompany the ordinary surgeon during his visits, for the last month of his attendance.
- III. That the senior consulting surgeons be elected annually—That at the annual election for 1808, the first of the three ordinary surgeons be chosen for one year, the second for two, and the third for three years, unless the Managers, as afterwards provided, should be dissatisfied with their services—That the senior consulting surgeon be only one year in office, at the expiry of which he shall become an ordinary surgeon, if agreeable to the Managers.—So that each gentleman shall serve one year as junior consulting surgeon, and three years as ordinary surgeon.
 - IV. That all elections of Physicians and Surgeons be by ballot.
- V. That although three years is considered as the most elegible term of service both for Physicians and Surgeons, yet an election of every medical attendant shall take place annually, so that the Managers may have it in their power to set aside any gentleman with whose conduct they are dissatisfied.
- VI. That the Physicians may be re-elected, at the expiry of their three years' service, should the Managers think it for the interest of the Hospital, and that the retiring ordinary surgeon may be elected junior consulting surgeon. That the person to be elected junior consulting surgeon, at each alternate election must have formerly held the office of surgeon, in this, or some other Infirmary.
- VII. That every clerk, either of the Physician or Surgeon, come under an obligation to serve for one year at least. That it be no longer understood, that the Physicians' clerk is to succeed to the office of surgeons' clerk. That a month's notice of resignation be given, that there may be sufficient time to inquire into the qualifications of those students who may become candidates, and that candidates for either of those offices, must produce certificates of their having attended either here, or elsewhere, the classes of Anatomy, Practice of Medicine, Chemistry, and Materia Medica, it being further necessary, that candidates for the office of surgeons' clerk, should have previously acted as Dresser for six months in some public hospital.

F.

REASONS OF DISSENT,

Against certain resolutions of a majority of the Directors of the Glasgow Royal Infirmary, passed at their meeting of the 16th November 1807, and submitted to the General Court of Contributors.

The Dissentients are truly sorry it should have fallen to their lot, to give the first disagreeable trouble of this kind, to the General court. The Royal Infirmary has now been established these thirteen years, and the whole business and management of it till of late, has been carried on with perfect good agreement and harmony, in such a manner, as to have completely answered the purposes of the Institution, and to have annually obtained the unanimious approbation of the General court. It is therefore with regret, and disappointment, the Dissentients have to state, that this period of tranquillity and good agreement, seems now at an end. Whether this has ultimately arisen from the restless spirit of the times, which leaves nothing as it has been, or whether from the well or ill-founded zeal of individuals, the Dissentients shall not pretend to determine. But so it hath happened that the spirit of reform hath reached the Glasgow Infirmary, and under the usual pretence of abuses and oppression, hath rendered the meetings of the Managers since the last meeting of the general court, a scene of contention and dispute, a field for orators and speech mongers, and hath rendered to some of the Managers at least, their important and pleasing duties in a high degree irksome and painful to them. From some circumstances which took place, both before, and at the last annual meeting of this court, and from various transactions since, the Dissentients have found it absolutely necessary, not only on account of the Institution, but as a duty which they owe to themselves, to state to the General court, the part which they and some others of the Managers have taken in these transactions. It is well known, that previous to the meeting of the last General court, some of the present Managers, in particular Dr Millar, and Mr Wm. Dunlop, were active, and zealous, in soliciting Contributors to attend the General court, and to sign a list of ten persons, to be elected Managers by the General court, whom they, no doubt, considered better qualified than the former Managers, for conducting the business of the Infirmary. These gentlemen were successful in their efforts, and fortunate enough in finding a great majority of the ten Managers elected, who entered completely into their views of reform. To accomplish this great work, the Dissentients, and some other gentlemen, not now in the management of the Infirmary, were represented to the Contributors, as engrossing the whole power and management of the Infirmary, and obstinately persisting in supporting a defective system of medical and surgical arrangement, and in preventing the establishment of one more beneficial to the Institution. It is necessary to add, that such successful efforts so zealously and publicly made, were completely calculated to excite suspicion and distrust in the former management, and to induce the Contributors to believe that there was something hurtful, or culpable in the conduct of those who had taken a considerable part in the management.

The Dissentients are therefore thankful for the opportunity they now have of stating to the General court, the grounds of such unjust and illiberal aspersions.

The Dissentients first of all, find it necessary to inform the General court, that previous to the opening of the Infirmary here, the Committee to whom that business was committed, of which Committee were some of the present Dissentients, were at great pains in procuring minute information of the medical and surgical arrangements established in the principal Infirmaries of Great Britain, and after much deliberation in selecting, and adopting from each, what they thought best and most useful, the Committee recommended to the Managers, the late plan of medical and surgical arrangement, to which this Institution is indebted for the beneficial effects, under which it has so long flourished. Soon after this plan was established, (upon an attempt to change it.) it was further confirmed, by the approbation of many of the senior Physicians and Surgeons in Glasgow, which will be found expressed in the records of the Infirmary, particularly by Dr Hope, then in Glasgow, and Dr Cleghorn, Physicians, and by Messrs Wallace, Alex. Dunlop, Wilsone, Young, Cowper, Towers, Cowan, surgeons. To these respectable authorities, in support of the plan, now rejected by a majority of the Managers, the Dissentients add that of the late Dr Currie of Liverpool, a Physician of the first abilities and reputation, and who had the experience of twenty years' Hospital practice.

In a letter published, soon after the opening of the Glasgow Infirmary, he says, "Experience hath enlightened us, yet after all, I doubt, whether our system of professional attendance is the best in the nature of things. Perhaps a plan somewhat rotatory, though limited, such as is said to be the plan established in Glasgow, may be superior." The Dissentients have the pleasure of adding that this plan has now been long tried, and has given complete satisfaction to the patients, the governors, and the community. The Patients have uniformly received a faithful and punctual attendance. The Physicians and Surgeons have uniformly received the marked approbation of the General court, for their able and laborious services, and every succession of Managers has been zealous and watchful over the various interests of the hospital; and the Dissentients will add, what they can do on perfect information, that the Royal Infirmary at Glasgow, has been conducted with more economy, and what is of no little consequence, with less trouble to the public, than any other Infirmary in Great Britain.

In such favourable circumstances the Dissentients were much surprised, notwithstanding occasional surmises and insinuations, which had been thrown out at former meetings, when on a meeting held on the ______, Dr Richard Millar brought forward a motion in the following terms:—" That a Committee should be appointed for the purpose of taking under review, the whole medical and surgical arrangements of the House, with power to suggest such alterations or improvements as might be best calculated to promote the purposes of the Institution." This motion which, from the nature and extent of it, supposed something radically wrong or defective in the

medical and surgical department, the Dissentients had good reason to expect, would have been preceded with a particular statement, well authenticated, of complaints and grievances in that department. But excepting the single complaint occasionally thrown out, of the Physicians and Surgeons not punctually attending consultations when summoned to them, the Dissentients do not recollect any one objection stated against the medical or surgical practice in the Infirmary. It is true, indeed, that some things were occasionally said about the great increase of labour of the Physicians and Surgeons from the increased number of patients, and upon a representation of this to the Managers, the Physicians were authorised to divide the patients and both to attend each day, when it became necessary; and according to the late regulations, the Surgeons may also divide their patients, and two of them attend daily, when the labour of the Infirmary requires it. The Dissentients therefore are of opinion, that there cannot be produced from the history of Infirmaries, any example of changing upon such slight grounds, a plan of medical and surgical arrangement, established by the advice of Physicians and Surgeons of great skill and experience, and which, during a course of thirteen years, has been attended with the most beneficial effects,-without the slightest evidence of any failure or defect in the execution. The motion however brought forward by Dr Millar was carried, and a committee appointed, who after the example of great authorities, was styled "The Committee of Medical and Surgical revision." The first labours of this committee appeared in the form of a report, which was printed and circulated, anxiously overloaded with arguments for the adoption of it, with dissertations on the qualifications of Infirmary Physicians and Surgeons, minutely extending even to the motion of the Surgeon's eye, and peremptorily fixing the term of fifty years of age, as the time of life when operating Surgeons must be excluded from an Infirmary; and the report in other respects, was so conceived and expressed, that the Managers did not find themselves qualified either to reject or adopt it. It was accordingly sent back to the "Committee of Medical and Surgical revision." Its next appearance was in the form in which it is now presented to the general court—in the form of Resolutions, considerably different from the Report, with some parts of the report rejected, others admitted, involving and evolving one another, particularly the first, fifth and sixth resolutions, so that some of the Managers were not able to give their vote on them. These Resolutions were however adopted by a majority of the Managers, and are now sent to the general court for final determination. Against these resolutions the subscribing Managers thought it their duty to dissent, and now appear before the general court of Contributors, to submit the grounds on which in every stage of their progress they have opposed these resolutions as unnecessary and hurtful to the Institution.

Resolutions introduced by a few of the Junior Physicians and Surgeons, and in opposition to a respectable band of Seniors, who approve of the former system.

Though the Dissentients have opposed and do still oppose these Resolutions, they are neither so ignorant nor so illiberal as to suppose, that no improvement can be made on the best established Institutions of this kind. They know well, that time, experience, and great Hospital practice, must frequently suggest important improvements. To every suggestion of that kind the Managers were always attentive, and in the Annual Reports have frequently invited all persons connected with the Infirmary, to suggest such improvements as occurred to them, and if there had been any thing useful or necessary in the present Resolutions, and if it had not been brought forward by means which endanger the very existence of the Institution, they would have been among the first to adopt them.

The Dissentients beg leave to state to the general court, that from any experience they have acquired concerning Infirmaries, the less the Managers of an Infirmary are subjected to restraints and rotations so much the better. It is their decided opinion, that no resolution or regulation should ever be made by the Managers of an Infirmary, that can interfere with their appointment of Physicians and Surgeons, the best qualified to fill their respective offices. The health and safety of the patients is a sacred trust committed to Managers, and the idea of establishing a medical or surgical arrangement with any other view, is unjust and criminal. Every Manager is bound by his oath to appoint Physicians and Surgeons that he thinks best qualified at the time of the appointment, not those who by practising some time on the patients may afterwards become qualified for their office. No Manager chooses a Physician and Surgeon for his own family, with that view, neither ought he to do it as a Manager of an Infirmary.

The principal object of the Resolutions now adopted, is to increase the number of Physicians from two to three, and that of the Surgeons from four to six. The Dissentients are humbly of opinion, that with respect to the quantum of abilities and skill necessary for the business of the Infirmary, at least in all ordinary cases it may be expected from the number of two Physicians and four Surgeons. With that number the Patients in our Infirmary are much better attended than the families of greatest rank and distinction. Besides, there should be no appointment of Physicians and Surgeons in an Infirmary, but such as are absolutely necessary, 1st, Because in proportion as you increase the number of Physicians and Surgeons, you must always diminish the responsibility; 2d, Because you diminish also the consideration acquired either by fame or emolument, without substituting any other thing in their place; and 3d, Because when numbers are unnecessarily increased, there is the greater chance of difference and division, for even the purest medical spirits are not altogether exempted from such efforts of rivalship and competition.

RESOLUTION 1ST.

The Dissentients did not oppose the resolution upon the ground that additional Physicians should not be appointed when the number of the patients required it. Most certainly the number of Physicians ought to be in proportion to the labours required of them. But the general court will observe that it is not the number of Physicians, but the daily attendance given by them to the Patients, which must be kept in view by the regulations of the House. It surely can be of no advantage to the Infirmary to have nominally three Physicians, while one only, excepting in certain circumstances, gives daily attendance. By the former regulations, two Physicians

were annually appointed, and when the number of Patients increased, they were empowered by the Managers to divide the patients betwixt them, and both of them to attend every day, and thus the permanent attendance of the two Physicians may be continued from six months to one year. The additional number of Physicians may be indeed convenient for the Physicians themselves, but the patients cannot be benefitted by it,—upon this principle, that frequent changes of attendance is an evil of greater magnitude than any that can arise from more permanent attendance. The Dissentients are further of opinion, that the proposed regulations of appointing three Physicians annually, and not again eligible till after three years' service, will be found scarcely practicable without hurting the interests of the Infirmary.

The number of Physicians in Glasgow of established reputation is not great, and it cannot be expected that the Seniors will be always disposed to give attendance of three years, agreeable to the regulations. It will therefore be found difficult, if not impossible, to complete the proposed rotation, without having recourse to the list of Junior Physicians of less experience and practice. The Dissentients add, that the appointment of an additional Physician, must be attended with additional expense to the public, without any adequate advantage. The salaries or emoluments which might be in some respects adequate to the labours of two Physicians, must be considerably diminished by the addition of a third. So that the motives to attendance, in so far as they depend upon responsibility, distinction, or emolument, are necessarily diminished. Finally upon this point, and in justification of the opinion they have adopted, the Dissentients inform the general court that two Physicians are all that are found necessary at the Infirmary at Edinburgh, where there is always a much greater and sometimes double the number of patients.

RESOLUTIONS 2ND AND 3RD.

According to these resolutions it is proposed, that the surgical business of the Infirmary should be committed to three ordinary Surgeons for the future, instead of four, with the addition of two Senior consulting Surgeons, and one Junior consulting Surgeon, who is intended to supply the annual vacancies of the ordinary Surgeons. The Dissentients are willing to admit that, in so far as this resolution tends to diminish the number of ordinary Surgeons, and to require the attendance of each Surgeon four months instead of three, it would be of some advantage to the Patients in the Infirmary. But it is the unnecessary load of two Senior consulting Surgeons, and particularly one Junior consulting Surgeon, which according to the terms proposed, they apprehend would be a disadvantage to the Institution.

The chief ground on which it has been maintained that consulting Surgeons are necessary in this Infirmary is, because it has sometimes happened that consultations have been called, and operations delayed, by the non-attendance of the Physicians and Surgeons. But supposing this to have been actually the case, the Dissentients do not see in what manner the appointment of consulting surgeons can remedy the evil. According to the existing regulations, the two Physicians and four Surgeons should attend all consultations, and if, in fact, they have not attended when regularly summoned, it is a failure of duty on their part, and a breach of their agreement with the public, implied in accepting their office. Neither the Dissentients, nor the other Managers in general, ever heard of this complaint before it was mentioned by one of the surgical Managers at a meeting held in the course of last year.

The Dissentients have understood that there has been something wrong in the mode of calling and arranging the consultations, and in conducting the business of them, which does not so much call for Resolutions of the Managers, as for the direction and good manners of those who summon them. It has happened, that a Senior Physician has been attending in the wards when consultations were going on, without his having received the smallest notice of them. It has also happened, that Senior Physicians have attended consultations on surgical cases, without their opinion having been asked on the subject of them. But be that as it may, the Dissentients do not think the remedy proposed will put an end to the complaint. Surely the Physicians and Surgeons regularly attending the Hospital are more likely to attend, and to have a greater interest in the patients than consulting Surgeons, who have no regular connection with the Infirmary, and who may have never seen the patients, on whose cases they are called on to consult. The Dissentients think, that perchance attendance at consultations would be more effectually secured, by the Clerk keeping an exact list of those present and absent at consultations, to be laid regularly before the Managers. The Dissentients readily admit, that were it not connected with other circumstances, the opinion of two experienced consulting Surgeons in critical cases might be of advantage. But there is in fact, nothing in the former Regulations, to prevent the ordinary operating Surgeon from inviting to consultations such Physicians and Surgeons of experience, and as many of them as he may think proper.

But the chief objection which the Dissentients have to these Resolutions, is the appointment of a Junior consulting Surgeon in the manner there proposed. The Dissentients do not mean to differ with the Committee of Medical and Surgical Revision about a name, but they have yet to learn with what propriety a person can be called a consulting Surgeon, who may never have officiated in this or any other Infirmary; but whether he be called a consulting Surgeon, or more properly, an assistant Surgeon, is of no moment. According to these Resolutions, the Junior consulting Surgeon is understood to supply the annual vacancy of the ordinary Surgeon. So that if the Regulation be adopted, the three ordinary Surgeons must always be composed of those who have been Juniors. From this it must necessarily happen, that the whole surgical business of the Infirmary must fall into the hands of Juniors, one half of whom, according to the Regulation, may never have served in any Infirmary. To prevent this influx of Juniors, of which the Committee seem to have been aware, it is proposed that a Surgeon who has once acted as an ordinary Surgeon, may again be re-elected Junior consulting Surgeon. If the spirit of this resolution be followed out, the rotation is completely circular; the Junior consulting Surgeons become ordinary Surgeons, and the ordinary Surgeons become again Junior consulting Surgeons; so that with the same four Surgeons, if the Managers are so disposed, the Infirmary may be supplied for twenty or an indefinite number of years, and all other Surgeons excluded. But in truth, this circular rotation will be prevented from a quarter, which the Committee of Medical and Surgical Revision have not chosen to discover.

The Dissentients submit to the General Court whether it be likely or probable, that Gentlemen who have passed the office of ordinary or principal Surgeon, will again undertake the inferior and laborious office of Junior consulting Surgeon. The Dissentients beg leave to state to the General Court, the duties and labours of the Junior consulting Surgeon, according to the Report and Resolutions:—

1st, He must be present at all consultations previous to any operation.

2d, According to the Report, though not according to the Resolution, he must take the charge of all Surgical patients in the Medical wards. As no other provision is made for these patients, this may be presumed an omission in the Resolutions.

3d, He must attend in the wards when the principal Surgeon is absent.

4th, He must attend all consultations and operations, and however eminent he may have been as an operator when principal Surgeon, he must not now be allowed to operate.

5th, He is to walk the wards during the twelfth month of his attendance along with the ordinary Surgeon, though he himself has been principal Surgeon.

The Dissentients firmly believe, that few Surgeons will be found, who will again submit to the inferior duty of a Junior consulting Surgeon, who has once served as an ordinary Surgeon, and thus become a sort of drudge both to the Physicians and Surgeons. Hence it must happen, that the ordinary Surgeons must be regularly supplied from those who have been for the first time Junior consulting Surgeons, so that the whole business of the surgical department must fall into the hands of the younger Surgeons, and senior Surgeons of ability and experience must in a great measure be excluded from the Infirmary.

The Dissentients apprehend, that the appointment of Senior consulting Surgeons, in the unqualified manner proposed in the Resolutions, will be attended with similar effects. When ordinary Surgeons have passed the course, and have once been raised to the honourable and easier office of Senior consulting Surgeon, it is by no means probable, that they will again incline to return to the rotation, and become ordinary Surgeons or Junior consulting Surgeons; so that every appointment to the office of Senior consulting Surgeon, will probably take one Surgeon more out of the list of those who are to serve as ordinary Surgeons. It is not difficult to perceive the injury which the Institution must suffer from the effect or operation of these resolutions. Finally, the appointment of six Surgeons instead of four, must eventually bring more expense upon the Infirmary. Nothing is indeed stated in the resolutions concerning salaries, but the addition of numbers does eventually imply an addition of expense, and in like manner as in the case of Physicians, tend to diminish the motives to responsibility, distinction, and emolument.

RESOLUTION 4TH.

The Dissentients are of opinion, that the introduction of ballot into Infirmary elections is altogether unnecessary, and in some respects derogatory to the character of Managers. Ballots are imputations on the weakness, facilities, or honesty of electors; but in the case of Infirmaries, where few or none of the motives occur which usually disturb elections—where the electors are generally persons whose character or condition render such restraints unnecessary, and where there are no temptations from interest or emolument, there seems to be no good reason for having recourse to that suspicious mode of election, which, if it may sometimes keep out an improper person, may as often introduce those who are unfit for the situation. When an election is made by an open election, though an improper person be named, there is an opportunity for suggesting what may reasonably prevent the election; but there is no resource whatever against an improper nomination by ballot. The evil is done before it can be detected.

RESOLUTION 7TH AND LAST.

The Dissentients do not think it proper for them to enter upon any argument respecting the grounds of this resolution. The experience of the attending Physicians and Surgeons, their knowledge of the qualifications of Students, and the necessary intercourse which they must have with their Clerks, would in general induce the Dissentients to agree with them in the appointment of Clerks. They agree with the resolutions, that the previous attendance of the Clerk in the different classes should be required; but they are doubtful, whether a Clerk should be rejected, merely because he may not have attended some one of these classes at the time he may be chosen Clerk. It may very often happen, that such a person may be much fitter for the office than a Student who has attended them all. Upon general grounds, the Dissentients see no good reason for making any change in the former regulations. Those Clerks who have been hitherto appointed over them, have, in general, discharged their duty in such a manner, as to have obtained the approbation of the Managers. They have usually held their office for two years, and the Dissentients can with truth affirm, that since the opening of the Infirmary, there has been in these offices, a succession of young men of such ability and character, as would do honour to any Institution of this kind, and who have discharged their duty in such a manner, as to render it unnecessary at present to alter the mode of election.

(Signed,) JAMES DUNCAN, GEORGE JARDINE,

ROBERT FREER.

H.

COPY OF A LETTER

From SIR ASTLEY COOPER to DR M. S. BUCHANAN, referred to in Chapter III.

MY DEAR SIR,

I aeturn you my best thanks for your lecture on Clinical Surgery. With respect to my own lectures, they were always Clinical, for although I delivered them in the Theatre, I after the year 1792, referred to the cases in the wards of the Hospital; and I shall tell you a curious fact. In 1791, when I began to teach, my lectures consisted of the principles of surgery, and of its practice, so far as I had learned it,—my pupils were 73 in that year. In 1792, my pupils were 51 only. Then I adopted the plan of referring the pupils to the cases in the Hospital in explanation of the principles, and my pupils amounted to 100! and they gradually increased until the year 1824, when they were 406 in number. Clinical lectures thus delivered, are so valuable that they will always insure a good class. I can see every thing to commend, nothing to censure in your lecture, and wishing you every possible success, believe me,

Yours truly,

ASTLEY COOPER.

T

At a Meeting of the Directors of the Glasgow Royal Infirmary, held upon the ninth day of May, eighteen hundred and thirty-one years.

The Honourable the LORD PROVOST in the Chair.

The Secretary having stated, that the Report, "Upon the order which had been given him to ascertain whether there be any law by which it is imperative that the attendants, who shall be elected to serve in the Medical Wards, shall be what is professionally called pure Physicians, that is, practitioners confining themselves to the treatment of internal diseases," had been printed and circulated among the Managers, the following communication, in reference thereto, was presented by the President of the Faculty of Physicians and Surgeons:—Which communication having been read, it was moved by Mr Gilmour, seconded by Mr Fogo, and unanimously ordered that the communication from the Faculty of Physicians and Surgeons be printed and circulated among the managers, and that a pro re nata meeting of the Managers be held on the first Monday of June next, for the purpose of considering how far it would be expedient to adhere to the present practice in electing Physicians to the Infirmary on the one hand, or on the other hand to enlarge the field from which these Physicians may be taken.

- " The Faculty of Physicians and Surgeons of Glasgow, solicit the attention of the Managers of the Royal Infirmary to the following statement:
- "The resident Members of Faculty are nearly eighty in number, of whom one-half are Doctors in Medicine, and the other half Surgeons; but the education of both classes is precisely the same, and in point of acquirement and practice they are on an equal footing.
- "Of the Doctors in Medicine, the great majority are in active practice as General practitioners, a few seldom practise Medicine at all, and two act chiefly as Consulting Physicians.
- "The Physicians to the Royal Infirmary have hitherto been chosen from the two latter classes of Physicians, viz. from those who do not practice Medicine, and from the Physicians employed solely in consultation, to the total exclusion of their equally well educated brethren who are engaged in active and extensive general practice.
- "The Physicians employed chiefly in consultation are now only two in number, and consequently the situation of Physician to the Infirmary has for some years been confined to those two gentlemen, with the occasional assistance of Physicians, who seldom, if ever, practice Medicine, except during the Hospital attendance.
- "The Faculty are of opinion that all Doctors in Medicine should be rendered eligible to the office of Physician to the Infirmary, and are confident that among their number the Managers will be able to make such a selection as will promote the best interests of the Hospital.
- "The Faculty therefore submit to the Managers of the Infirmary the justice of their in future allowing Doctors in Medicine, though General Practitioners, to be eligible to the situation of Physician to the Hospital, and express the hope that a measure rendering available to the Infirmary the services of some of their most distinguished members, in conjunction with those of the present Physicians, will meet with a favourable reception.
 - "Signed in name and by order of the Faculty of Physicians and Surgeons of Glasgow, at Glasgow the second day of May, eighteen hundred and thirty-one.

"JOHN GIBSON, Preses,"

K.

TO THE MANAGERS OF THE GLASGOW ROYAL INFIRMARY.

The Subscribers request leave to offer the following remarks on the above scheme, as announced by the Faculty, or rather its Surgical Members, of substituting General Practitioners in place of regular Physicians, as attendants on the medical sick, in the Glasgow Royal Infirmary.

Such is the genuine character of the proposal, and the Subscribers can consider it as neither more nor less than an unhandsome and unprovoked attack by the Surgical upon the Medical Members of the Corporation, and got up on purpose to drive the present incumbents, as well as all other real Physicians, from our Hospital. With this view, and in order to mislead the Managers, the two grades of the profession are studiously mixed up and confounded together. It is assumed that the moment a Surgeon gets possession of a degree, that moment he ceases to be a Surgeon, and becomes a Physician, whatever be his particular line of practice. No a Physician, but the fashion has long ceased. Thus, for several years past, every Surgeon almost has been ambitious to purchase a diploma, and the Universities have, for many years back, driven a very profitable trade in selling such distinctions. Almost all our Army Surgeons, for instance, have now M.D. added to their names, yet are they still nothing but Surgeons, nor are they gazetted as any thing else. In military service we have Physicians also, but they are a distinct class, and appear in our gazettes only as Physicians, and are never confounded with the former. Another and material distinction is the fee. No Surgeon in Glasgow, on account of his holding a degree, ever gets a higher remuneration for attendance. Supposing his bill disputed, and brought before a Court of Law, he claims, and is paid, merely as a Surgeon. On the other hand, in spite of his diploma, he still retains all the privileges of those who practise the chirurgical part of the profession, and among others that of suing for professional debts, a privilege wholly denied to Physicians in England, and of very doubtful tenure among those of Scotland. Nothing, therefore, can be more frivolous and puerile than the attempt to confound together Surgeons having degrees, and who still practise as Surgeons, with real Physicians, under the common designation of Doctors of Medicine. The Faculty itself admits no such threefold classification of its Members as into Physicians, Surgeons with degrees, and Surgeons without degrees: it is legally composed of two classes of practitioners only, real Physicians and real Surgeons; and under the last are invariably included all who operate, or exercise chirurgical arts, though they had fifty diplomas. The strictness of this distinction is still farther established by the two classes being subjected to quite different laws. Thus the Physician has only to show his diploma, and can then practise within any part of the Faculty's bounds, without license and without examination. The Surgeon, on the contrary, cannot exercise his art within the same limits without examination or license, though he had twenty degrees in his pocket. Nay, if it be found that a person with a degree, pretending to act merely as a Physician, officiates actually as a Surgeon, he is instantly visited by the Faculty with the most severe penalties. The truth is, the Surgeons are perpetually trespassing on the manor of the Physicians; but if the Physicians retaliate, as by the slightest operation, such as blood-letting, the Surgeons are immediately in an uproar, and there is no end of their outcry against breach of privilege. The phrase pure Physician has been invidiously or ostentatiously brought forward in this question; the Subscribers have been searching all their lives, but have never yet been fortunate enough to set their eyes on a pure Surgeon.

The above address to the Managers, professes to be a statement from the whole body of Faculty, Physicians as well as Surgeons. It is no such thing. It is a mere ex parte document, emanating from the latter class only; and many of the most respectable members of that class give it no countenance whatever. Coming, therefore, with a false or erroneous title, it is submitted whether it should be received at all by the Managers, or be allowed a place on their board, or whether it should not, on the contrary, be instantly rejected in limine.

The grand gist of the pretended Statement by the Faculty being to banish all real Physicians from the Infirmary, and to substitute Surgeons with degrees in their room, it becomes necessary now to consider what will be the consequences of the new arrangement, and first, its effect on our Medical School. To every Medical School, it is well known, an Hospital has now become an indispensable appendage. No University, no Board, whether of Surgeons or Apothecaries, whether Army or Navy, will grant a diploma, or commission to practise, without a certificate showing that the candidate has attended some Hospital for a longer or a shorter time, and in the course of this attendance it is invariably understood that he has received every competent instruction, not merely from the Surgeons of the establishment, but also from its Physicians, and for these last there is no example, in a single Hospital, of Surgeons with degrees, being ever substituted. It is required, too, by all Universities, and by most of the Boards, that each Student should attend Clinical lectures alike by the Physicians and Surgeons, as delivered in the different Hospitals. Farther, it is ordered by the East India Company, that no person be admitted for examination, with the view of practising in the East, unless he bring evidence that he has accompanied a Physician, in contradistinction to a Surgeon, in his rounds through an Hospital, during a period of at least six months. Now, the Subscribers would ask how the above qualifications are to be obtained at our Medical School if all bona fide Physicians are to be banished our Hospital, and Surgeons substituted in their room? In particular, the regulation of the East India Company has been long framed, glazed, and hung up in our lobby, as an intimation to Students that the instruction it requires is to be procured in Glasgow; and yet a law is proposed to be enacted that will convert it into a dead letter, and render all such instruction unattainable. In the event of passing the enactment, therefore, this placard should be instantly taken down, that it may not mislead the Pupils. Farther, most of our Students come from a distance, and at a distance it will naturally be believed that the constitution of our Hospital continues on the same footing as heretofore, or that every instruction that either Physicians or Surgeons can afford is to be found within its walls; what must be the disappointment of our next year's Students when, on their arrival here, they find the

constitution of the Hospital entirely overturned, and that though they may attend the rounds of Surgeons, and hear their Clinical Lectures, they can have no opportunity of seeing the practice, or listening to the lectures of genuine Physicians. Should the misfortune of the proposed change befall the Infirmary, would it not be a fair proceeding to advertise it as widely as possible in the different journals, in order that young men may not be brought from a distance under the delusive expectation, that the Institution afforded the same means of Instruction, as it has uniformly done in all former periods? Such is the serious injury to the Glasgow Medical School that must inevitably flow from the new Regulation. Indeed, it becomes a grave question whether the University, and Andersonian Institution, for the sake of their Medical Establishments, should not endeavour to stop the proceeding by a process at law, or should not petition the Crown for a new Charter, with provisions rendering it imperative to maintain the original as well as present constitution of the House, so far as regards a constant and regular supply of actual Physicians to attend its patients. The injury to the funds of the Hospital, from the new scheme, must be no less manifest. No inconsiderable part of the revenue arises from the contributions of Students, but if you diminish the motive for coming here, you abridge their number, and lessen the income of the House in proportion. Besides, the whole plan is an unheard of anomaly, without example, or precedent, in any Hospital that deserves the name throughout Great Britain or Ireland, as those of London, Dublin, or Edinburgh, as well as of our great provincial towns, as Manchester, Liverpool, Leeds, Birmingham, Bristol, &c. &c. in all of which will be found, not merely Surgeons, but a regular and invariable supply of Physicians, to attend the sick.

Much is said of the absolute parity among all the Members of the healing profession, but how happens it that the Members of Faculty, in their Memorial, make no mention of their own *Licentiates*? These gentlemen are now nearly as numerous as themselves, and many among them possess degrees. Why has the door been constantly closed against them, as Physicians and Surgeons to our Hospital? and why is it now laid open by the proposed enactment? Their claim is surely just as good as that of the Members of Faculty, yet none of them has ever held a single office in the Institution. This new inlet of competitors for Infirmary employment will no doubt stagger the zealots of the proposed arrangement, and, in all probability, entirely escaped their attention.

Another question may be put, Why are the Members of Faculty, who have no M.D. annexed to their names, to be excluded from the intended promotion? This class includes some of the most respectable persons of the Corporation, and who have seen infinitely more practice than those who glorify themselves in their diploma; yet are they now kept entirely in the back ground. Why exclude the services of such men as Mr Couper, sen., Mr John Macarthur, Mr George McLeod, with many others, merely because they want degrees, a distinction which if it be really such, is so easily to be procured at any time?

There is one circumstance, it must be confessed, very much in favour of this new brood of Doctors, whom, as they look three ways at once, and drive a threefold trade of Physic, Surgery, and Midwifery, it will be proper to designate by a triple appellation, and whom we therefore venture to denominate by the name of the Medico-Chirurgico-Obstetrico practitioners, and the circumstance we here allude to, is the reasonableness of their fee. It is well known, that a visit from any, even the first of these gentlemen, when he neither operates, nor acts as accoucheur, though he may probably come in his own carriage, may be commanded for a crown; and any series of visits for half-a-crown each; while the pay of a regular Physician is usually four times as much, say a guinea for one call, and half-a-guinea for a succession of calls. Now, it is to be hoped that they will follow the same moderation of charge when they come to the Infirmary, since here they neither cut off limbs nor deliver women, throwing aside two parts out of their threefold occupation, namely, the surgical and obstetrical portions, and appearing under the character of pure Physicians, and, of course, treating the same set of persons they visit so cheaply, under the same capacity in private; in other words, that their pay be just one-fourth of what is allowed to Physicians of the Hospital, who are actually entitled to the name. This hint, the Subscribers hope, will not be lost on the Managers, though they fear it may very much damp the zeal of the Medico-Chirurgico-Obstetrico Practitioners, or the new aspirants. When the General Practitioner performs operations it is another matter, and he is entitled by custom, to a higher rate of payment, whether without or within an Hospital. It is for this reason, that is, solely on account of their numerous operations, that the Surgeons of our Infirmary receive the remuneration allotted by the Managers, a remuneration considered by the Subscribers as in no point of view excessive or extravagant.

It is asserted in the statement, pretending to come from the Faculty, that the education and acquirements of Physicians and Surgeons are precisely the same. This the Subscribers utterly deny. It is a melancholy truth that our Students devote themselves to Surgery alone, and the branches connected with it, paying no attention to Medicine, properly so called. This is a fact complained of every day at all our Boards of Examination, and however disguised or concealed, is a circumstance perfectly well known to the framers of the Faculty's Memorial. As to the assertion that the acquirements of Physicians and Surgeons are entirely alike, it is no less untenable. The Surgeon in the beginning of his career at least, thinks of nothing but operations and new instruments, while the Medical part of his profession is considered as merely collateral, or one of minor importance, and the same predilection which the Subscribers mention not as matter of blame, but merely as matter of fact, continues, more or less, during life. The Physician, on the contrary, directs his whole attention to his own peculiar part of the profession, the study of those maladies that have ever been reckoned his particular province. And it is asked here, why division of labour should not be available equally in Medicine as in other Arts and Sciences? Surely the man who bends the whole force of his mind to the Medical part of his profession alone, other things being equal, is likely to be more expert in that branch of practice than an individual whose attention is continually distracted by the additional pursuits of Surgery and Midwifery.

It is time now we should come to the most important part of our inquiry, the effects likely to be produced by the new proposal on the inmates of the House, or the patients. In looking over the various regulations of our Hospital, perhaps the most faulty are those which regard the election of the Surgeons. If it be intended that the Surgical sick should be attended by persons each possessing as little surgical experience as possible, so far as that experience is to be obtained in an Infirmary, it must be owned that our present plan is of the most perfect description. The moment any Surgeon gains some dexterity in operations, or other parts of practice, that

moment he is dismissed, to make way for another: and the same thing goes on in an unceasing series. There seems to be a perpetual dread, that by remaining too long in office, he may become too expert in his profession. The exhibition of Surgeons, accordingly, in the Glasgow Infirmary is a mere phantasmagoria—they are no sooner seen than they are gone—flitting for ever away, and disappearing from the scene with the rapidity of the spectre kings in Macbeth. This practice is most highly lauded by the Faculty as a most liberal system, and one that insures a fair and quick rotation of office. Liberal it may be to the Surgeons, as allowing each of them in turn to "cut his pound of flesh," but it is any thing but liberal to the poor inmates of the Hospital. We would put it to the Managers, whether, if one of them were obliged to become the subject of any dangerous and difficult operation, he would submit himself to the hands of a person who had never performed the operation before. Yet this, by the present arrangement, must frequently happen in our Infirmary. If it be said, that every thing must have its beginning, and that the most celebrated Surgeons must have had their commencing operations, the remark is true, but the reasoning does not apply. Should any person in private life choose to employ a Surgeon who never did his work before, it is his own affair; but the case is quite different with the Hospital patient. This last has no choice or alternative; he must either take the operator provided by the Managers, or quit the House, and forego the whole benefit of the Institution. Farther remarks would be needless, and the evils necessarily attending the present mode of electing our Surgeons, and the everlasting change of these functionaries it occasions, must make its due impression on every person of sense and feeling. Nor is this incessant rotation of office less detrimental to the progress of Surgery as an art. For perfecting this branch of our profession, long training, and the continual performance of operations are absolutely necessary, and where these are wanting, no human genius or talent can supply the deficiency. We believe our Glasgow Surgeons are as able, as well informed, and as enthusiastic for improvement as any in the world, but while the present obstacles remain, they will struggle in vain, -obstacles that exist in no other Hospital of the kingdom. Let us contrast our deficient plan with what happens in the London Establishments. In these, the Surgeons officiate for a long succession of years, and the consequence is, that they become exceedingly expert in their business, while the art itself receives constant accession of improvement in their hands. This is the true cause of the high character of London Surgery and of London Surgeons, those practitioners passing their days, as it were, in the Hospital. As examples may be cited, the late Mr Abernethy, who lived almost all his life in St Bartholomew's, as did the celebrated Pott before him, and Sir Astley Cooper, perhaps at this moment the first surgeon in the world, and who may be said mainly to owe his high celebrity and distinguished knowledge to his long continued practice at Guy's. But enough of this subject, let us now return to the mode of appointing our Physicians, and this presents a more pleasing aspect, though rather from accident than design.

It so happens that there are very few Physicians in Glasgow, perhaps six at most, so as to preclude all risk of endless rotation in this department, as among our Hospital Surgeons. The consequence is, that the same persons are continually re-elected, and by dint of constant and reiterated experience, if they have any brains in their head, they cannot avoid becoming skilful and expert in their own particular branch of the profession. But this vantage ground will be entirely lost if the proposed new arrangement pass into a law; and the Subscribers particularly request the attention of the Managers to what they have to state on this part of their argument. The new arrangement is thus described in the motion submitted to the Managers at last meeting by the Lord Provost: "That any gentleman who shall have been fifteen years in general practice, and who shall have obtained his degree of M.D. previous to his election, shall be eligible to the situation of Physician to the Infirmary." The first inquiry to be considered here, is the likely number of competitors for the office. On looking at the list of the Faculty, the Subscribers conceive that there must be at least 30 or 40 of that corporation who are thus eligible, and if we add as many more from the body of Licentiates, the whole number cannot be less than 60 or 70. In this manner, instead of six Physicians, as formerly, one of whom never acted at all, and several of them only occasionally, there will be at least 60 surgeons with degrees all gaping for the office at each annual election. What is to be the consequence? If the same liberal system, as it is called, is to be adopted with respect to them as has been hitherto followed in changing the Surgeons, there must be the same rotation of office, with all its evils, in the Medical as in the Surgical department, and if all practitioners, as the pretended statement of the Faculty asserts, are on a perfect parity with one another, the Managers, to show their complete justice and impartiality, have nothing for it than to elect two new Physicians every year, till the whole 60 have held the situation, and this will be completed in 30 years-and, after that, a new cycle will commence to run the same course as before. In other words, the same vicious system will be fallen into with respect to the Physicians, as has hitherto been followed with respect to the Surgeons, and with like effects, injury to the patients, and a stoppage to all improvement in Hospital Medicine, in the same manner as to Hospital Surgery; and, as by the old plan it was impossible to obtain for our Infirmary a very experienced Surgeon, so by the new plan it will be no less impracticable to procure a very experienced Physician; not to speak of the torment and trouble to the Managers from the annual canvass and scramble of such a host of competitors.

Such are some of the objections to the proposed new arrangement which occur to the Subscribers, and it only remains that they crave an apology for detaining the Managers so long. They cannot conclude without stating that if it pass into a law it is impossible not to consider it as a virtual censure passed on themselves, since it implies, or may imply, that the Governors think there is something wanting in the Medical attendance, either from their inability or negligence, and which the proposed enactment is calculated to correct or supply. They flatter themselves, however, they will not be subjected to any such injustice. With respect to their own attendance, they are perfectly willing to continue it so long as they have the honour of being elected, and they are enabled to make the same assertion regarding their former and occasional colleagues, Drs Badham, Thomson, and Couper. When a deficiency of Physicians occurs, it will no doubt be the duty of Managers to supply the defect; that exigency, as appears to them, has not yet arrived, and till it actually supervene, they cannot help thinking the proposal of the Faculty no less uncalled for and premature, than injurious to the best interests of the Glasgow Medical School, and the sick poor of the Infirmary.

As for the present incumbents, or any other regular Physician having any chance in this contest, it is entirely out of the question. Why should they be preferred, since, according to the Surgeons of the Faculty, all practitioners are on a perfect level with one an-

other: and, be it farther recollected, that four out of the six Medical Managers in actual office are Surgeons, and have an interest to serve, while of the other two who are Physicians, one is abroad, and the other seldom attends the Infirmary meetings. Division of labour, of course, will go for nought, nor will the devotion of a man's whole life to one particular branch of the profession be considered as the slightest recommendation.

We have the honour to be, Gentlemen.

Your obt. humble Servants,

RICHD. MILLAR, J. BALMANNO.

L.

REPORT

Of the Committee appointed to consider the Expediency of appointing a Superintendent to the Infirmary.

This Report, by giving in detail the duties of the proposed Superintendent, and of the Clerks and Apothecary, as modified by his appointment, imbodies all the existing Laws of the Hospital which concern the two last mentioned officers. The Regulations printed within inverted commas are New.——¶ marks the duty of the Apothecary, and * those of the Surgeon's Clerk, according to the present arrangement.

The Committee having considered maturely the present state of the Infirmary, and made inquiry respecting the regulations which the managers of similar institutions—such as those of Manchester, Liverpool, and Dublin—have been led to adopt, are deeply impressed with the conviction, that the number and importance of the concerns in your great and growing establishment have become more than any set of Directors, without neglecting their own affairs, can possibly be expected to discharge; and that, therefore, now it has become not only expedient, but necessary, that they have the assistance of a properly qualified person, who shall be in constant and direct communication with your different Committees, and have, under them, the charge and superintendence of the whole establishment. The benefits which are likely to result from the appointment of such a person, will be best seen, your Committee think, by taking a cursory view of the qualifications he ought to possess, and the duties which he ought to perform. These are,

I. "He should be a single man of good character, of middle age; who has received a good medical education,—has seen, or been engaged in a good deal of practice,—and be a good accountant."

II. "He should not practise on his own account, nor be engaged in any business; but devote the whole of his time and talents to his duties in the House,—nor ever be absent without entering the cause of such absence in a Book, which shall be patent at all times to the Directors."

III. "He should be lodged and boarded in the House, that he may be at all times ready on any emergency to act, or to send for the Physician or Surgeon whose duty it may be for the time to attend."

IV. "He shall receive and scrutinize all applications for the admission of Patients, and, on his responsibility, see that none, except in cases of accident or absolute necessity, be admitted contrary to the rules of the House."

V. "He should see that the case, or history of the disease of all Female Patients be taken either in the public Wards or in the Nurse's Room—the Nurse being present; and that no Female Patient shall, on any pretext whatever, enter the Clerks, or Dressers, or Men's Apartments. Nor shall these Patients, after being dismissed cured, or otherwise, or any Female, on any pretext whatever, be admitted during the evening or after dinner to visit any of the inmates, without the special permission of the Matron or Superintendent."

VI. "He shall have the control and superintendence of the whole of the official Servants, except those under the immediate superintendence of the Matron; and go round the Wards forenoon and afternoon, and at any other time he judges necessary, to see that the Patients are conducting themselves properly, and that the Nurses are at their posts, and doing their duty; and in a particular manner he shall examine and see that every apartment has been thoroughly cleaned, and is properly ventilated."

These are important and necessary duties, some of which at present are, and must be, intrusted to the young and the giddy, and others to some who may not be trust-worthy. Could we get a Superintendent who would execute them well, there would be no salary which your funds could afford too high for his services. It may be that at first you will not be altogether lucky in your selection; but you will succeed ultimately, and get a treasure in some unpretending firm-minded common-sense man, who will not only execute regularly and quietly all the duties we have pointed out as prominent and essential, but who, by method and arrangement, will find no difficulty in executing the other duties which we consider to be as necessary, if not as important,—and which we now beg leave to enumerate:

VII. "He shall have the charge of paying the wages of all the Male Servants."

- VIII. "He will have the charge of taking in the stores of every description, provided by the Victualling, &c. Committees, and perhaps of purchasing such items as the Committees may direct, and also of paying small Accounts not directed by the Committees to be settled by the Treasurer. Of all these transactions he will keep an account. But whether he pay the Account or not, every Account for what has passed through his hands for the internal use of the House, should and must be examined, and compared, and docquetted by him before it be presented for payment to the Treasurer."
- IX. He shall have the charge of all the Surgical Instruments, and see that they be returned immediately after operations, properly cleaned and dried by the Clerks; and, if need be, that they be sent without delay to the cutler, so as to be always ready and in good order for immediate use.
- ¶ X. He shall have the charge of the Journals kept by the Clerks, which must be delivered to him when completed. He must regularly enter them in a Catalogue or Inventory, to be kept for that purpose. And he shall on no account whatever permit any of said Journals to go out of his custody without the special permission of the Managers, signified to him in writing. He shall furnish to the different Clerks blank Journals when needed, always taking a receipt for the same.
- ¶ XI. He shall take charge of the sale of Admission Tickets to the Students, and keep an account of all money paid by patients, for which he shall be accountable to the Treasurer.
- ¶ XII. He may admit four Students to attend the Apothecary's Laboratory, for such a period and fee as the Managers may determine, for the purpose of acquiring a knowledge in Pharmacy, preparing Medicines, and helping the Apothecary.
- * XIII. He shall be in attendance at the visiting hour, and see that the Dressers have their dressings ready and in proper order; that they do not waste the caddis, &c. but act as directed by the Surgeons, and do their duty to the Patients carefully, neatly, and humanely.
- ¶ XIV. He shall have the charge of the Dead Room, and shall not permit any inspection to be made, if contrary to the expressed will of the relations, and without a permission signed by two of the Medical Managers. The inspection shall be confined strictly to an examination of the parts diseased. And he shall for the benefit of posterity and of science, take care that an account of what was seen on inspection be added on the spot to the case.
- ¶ XV. He shall take charge of the keys of the House, and see that all the gates are regularly shut and locked at 10 o'clock every night, and the keys delivered to him, and that no inmate of the House be absent without leave asked and given.
- * XVI. At the end of the year he shall make out a list for the Annual Report, stating the number of patients in the House at the end of the preceding year, and the number admitted since, arranging the Male and Female, the Medical and Surgical patients, in their respective classes, stating the number of those dismissed under the heads cured, relieved, with advice, by desire, improper, irregular, incurable, or dead, as the case may be,—and showing the number of patients remaining in the House at the date of the List. He shall give an enumeration of the different operations performed during the year.

XVII. "Lastly,-He shall receive annually a salary of £

CLERKS.

1st, The Clerks shall not upon any account engage in medical practice, or other business out of the House.

2d, They shall not be absent from their duty in the House, even for a single day, without the permission of the Medical Practitioner under whom they act; and if they wish for leave of absence for more than a week, they must obtain permission of the Managers; and failing to do so, they shall, if absenting themselves, be considered as having vacated their office, and their places shall be immediately filled up.

3d, When any of the Clerks find it necessary to vacate their office before the expiry of their time, they shall give at least one month's intimation of their intention to the Managers; on graduating they shall cease to be eligible.

4th, They shall insert in their respective Journal Books, an accurate account of the cases of all the Patients, immediately upon their admission, under the care of the Physician or Surgeon, with whom they are connected, in order that the cases may be ready for the inspection of the Physician or Surgeon next day before he visits the Patients; and they shall accompany the Physician or Surgeon in their daily visits, and for the benefit of the attending Students, read distinctly and audibly the cases so taken down, and thereafter write down in the Journals, the reports and prescriptions, dictated by the Physicians and Surgeons, which Journals they shall immediately after the visit, carry to the Apothecary, that from them he may make up the prescriptions.

5th, They must be careful to mark on the first page of their Journals, the date of the commencement and termination thereof, with the names of the Medical Practitioners who had the charge of the Patients; and when the case of the Patient is transferred to a new Journal, they must insert therein the medicines and diet ordered to the Patient, at the date of transferring the case from the old to the new Journal.

They shall affix to the bed of each Patient under their charge, when admitted, the name of the Patient and the date of admission; and if a surgical Patient, the name of the Dresser to whose care the Patient is intrusted.

- "They shall go round the Wards at certain hours only, to be fixed by the Superintendent—except when sent expressly by the Physician or Surgeon to inquire into and report to him the state of any particular Patient."*
- * This law at present runs thus:—"They shall go round the House at intermediate hours, observing the general good order of the Wards, particularly in the morning between eight and eleven, and in the evening between six and eight, when they shall inquire into the state of the Patients under their care, and learn whether the prescriptions have been complied with. They shall never prescribe, except in cases of sudden emergency, and then invariably write such prescriptions in a book kept for the purpose, which they shall send to the Apothecary's shop about eight o'clock, P.M."

They shall lay the Journals in use before the Managers at their Monthly Meetings, that they may see and be satisfied that the histories of the cases are regularly preserved, and that an account of the inspections made have been regularly and carefully added to the cases.

They shall, when desired, perform all smaller operations, such as bleeding, cupping, or do whatever else may be deemed necessary and proper by the Medical Attendant they are connected with.

At the end of every week, they shall make out a list of all the Patients admitted into or dismissed from their respective Wards during the week, marking the date of admission, by whom recommended, the No. of the Ward, the date of dismission, name of the disease, and how dismissed; whether cured, relieved, dead, or otherwise. These lists must also include the number of Patients remaining in each Ward, the number under the care of each Physician or Surgeon, and how many are cases of fever.—The lists must be delivered weekly to the Superintendent, as from them he will have to make his weekly general report.

"Every Clerk, before he be admitted to office, shall receive from the Superintendent, a ticket entitling him to act as Clerk for one year, for which ticket he shall pay the sum of £10 10s.—But it is hereby expressly understood and declared, that in case of irregularity or misconduct, he shall be deprived of his situation, and for feit the money paid."

"The Clerks shall not be boarded, nor shall they lodge in the House except when the Surgeon may, after an operation, see it necessary that the Clerk of the case should sleep in the House so long as there is danger.—In all which cases he will send, if need be, for the attending Surgeon, and give information of the state of matters, and call for the assistance of the Apothecary and Superintendent."

What follows, as well as the note in the preceding page, was not contained in the written Report, but is printed from the present Laws, that the Directors may have the whole subject before them.

SUPERINTENDENT.

- ¶ He shall keep an exact inventory of the Instruments, and give copies thereof to the Treasurer upon the 1st of January and 1st July annually.
- ¶ He shall at all times have an assortment of bandages in readiness, particularly of those necessary in capital operations.

CLERKS.

When directed, the Surgeons' Clerk shall call a consultation of the Medical Attendants,—and he shall affix, or cause to be affixed, in the Students' waiting room, notices of intended operations and dissections, the day previous to such operations, except on emergencies.

The Surgeons' Clerk shall take charge of all inspections, under the direction of the Medical Attendant, and perform such parts of the dissection as shall be intrusted to him; but no dissections whatever are to take place without a regular order from the Managers, and in presence of the Superintendent, and they are to be conducted with the greatest decency, and the body to be left in a proper state for interment.

Upon observing any impropriety in the House, they are immediately to communicate the same to the Superintendent, in order that he may either acquaint the Managers thereof, or take such steps as he may think proper for correcting the same.

APOTHECARY.

- 1st, He shall live in the House, from which he shall not be absent for one day without leave.
- 2d, He shall from time to time order, by marking in a pass-book, such utensils and simple medicines, and prepare such quantities of the compound ones, as may be necessary for the practice of the House.
 - 3d, He shall dispense the medicines prescribed by the Physicians and Surgeons for the Patients.
- 4th, He shall, immediately after the visit of the Physicians and Surgeons, transcribe from the Journals into a book, the prescriptions of the day, with their signatures, under the name of each Patient for whom they are ordered; and shall prepare, or cause the same to be prepared or made up, with due attention and despatch, taking care that such medicines as are ordered to be taken immediately, shall be sent to the proper Ward within one hour after they are ordered, or sooner, if required by a written note.
- 5th, Every medicine that is dispensed shall have the date of the prescription, the name of the Patient for whom it is prescribed, and the time and manner of using it, affixed to the paper, box, pot, phial, &c. into which it is put. And the label is to be renewed when so far defaced as not to be easily legible.
- 6th, He shall put, or cause to be put, the medicine for each Patient into the Nurse's basket of the Ward, to which the Patient belongs; and shall, after the Nurses have taken their baskets with the medicines from the shop, and distributed them to the individual Patients, visit the different Wards, and give the necessary instructions at the bedside of each Patient who has been ordered medicine, how and when these are to be used. After which, he shall deposit the Journals in a room for the use of the Students.
- 7th, He shall transcribe into a book all alterations ordered in the Journals by the Physicians and Surgeons, on the diet, &c. of the Patients, and immediately transmit the same to the Matron; and he shall also give as early notice as possible, by a line transmitted to the Matron, of any change in the diet, &c. which it may be necessary to make for the day.
- 8th, He shall insert into a book, to be kept for the purpose, the precise quantity of spirits that shall be used from time to time for tinctures, &c.

9th, He shall also keep a book, in which he is to insert the name of every Patient, for whom the Medical Practitioners shall prescribe either wine, spirits, or porter,—the Ward in which such Patient is,—the name of the Medical Practitioner who has ordered the same,—and the precise quantity ordered every day; and which book he is to lay before the Managers at their stated Monthly Meetings.

M.

REPRESENTATION OF THE ATTENDING PHYSICIANS AND SURGEONS

To the Managers of the Glasgow Royal Infirmary, in reference to their late Report.

WE, the attending Physicians and Surgeons of the Glasgow Royal Infirmary, having received a printed copy of certain proposed Regulations for the Charity, and being requested to state our opinion concerning the expediency or necessity of such changes, after due deliberation, have unanimously agreed on the following Report, which is now respectfully submitted to the Board of Management.

First, with respect to the New Officer, to be named the Superintendent.

The duties assigned to this officer are so many and complex, that we found some difficulty in forming a clear conception of them; and the best plan we could devise for the purpose, was to reduce them all into their several titles and classes. In this point of view, we think, they may be all comprehended under the two following principal heads:—

I .- His duties as a Civil Officer of the Infirmary.

II .- His duties as an Executive Officer of the Medical and Surgical departments.

- I .- The powers allotted to him under the first head, we observe to be the following :-
- 'In his capacity of the entire body of Managers'—to command and control the whole official servants of the House, with exception of those placed more immediately under the Matron, we suppose the Housemaids and the Cook.
- In his capacity of Treasurer —to examine and docquet all accounts for stores, or whatever be necessary for the consumption of the House, before they can be presented for payment to the Treasurer—to pay the wages of all the male servants—to discharge the smaller claims on the funds of the House.
- 3. 'In his capacity of Matron'—to receive under his care stores of every description, provided by the Victualling, &c. Committees, and perhaps to purchase such items as the Committees may direct—to perambulate all the Wards every forenoon and afternoon, or oftener, if he judges requisite, to see that the Patients are conducting themselves properly, that the Nurses are at their posts, and doing their duty; and in a particular manner, to examine whether every apartment has been thoroughly cleaned and ventilated.
- 4. 'In his capacity of Porter'—to take care that all the gates are shut and locked regularly at 10 o'clock every night, and the keys delivered to himself, and that no inmate of the House be absent without leave asked, and given—to keep watch that no female Patient on any pretext whatever, enter any of the Clerks' or Dressers' rooms, or any of the Male Wards—and that, during the afternoon or evening hours, nothing in the guise of woman, under pretence of visiting friends or acquaintances, be admitted within the walls, without his own leave, or that of the Matron.

Such are the functions of the Superintendent, considered as a Civil Officer. As an Executive Officer of the Medical and Surgical departments, they will be found no less extensive.

- 1. 'In his capacity of all the Physicians, and all the Surgeons combined'—to receive and scrutinize all applications for the admission of Patients, and on his responsibility see that none, except in cases of accident or absolute necessity, be admitted contrary to the Rules of the House—to superintend all anatomical examinations of the bodies of the dead, so that none be attempted independent of his license and presence—to take care that no parts be touched except the actually morbid parts, and finally, for the sake of science and posterity, to order that what has been observed on dissection, be added, on the spot, to the case. To have the sole custody of all the finished Journals, and to allow none of them to go out of his hands without a written order from the Managers.
- 2. 'In his capacity of all the Surgeons united, but disjoined from the Physicians'—to act, on emergency for the Surgeons, (we suppose to operate)—to superintend the duties of the Dressers, for which purpose he is to be in attendance at the visiting hour, and see that the Dressers have their dressings ready, and in proper order—that they do not waste the caddis, &c. but act as directed by the Surgeons, and perform their duty to the Patients carefully, neatly, and humanely.
- 3. 'In his capacity of Apothecary'—to provide four Assistants for the Shop, but without any necessity of consulting the Apothecary himself on the subject—to keep an account of all money paid by patients—to superintend the sale of admission tickets to the students, and to provide tickets, ten guineas each, to be levied yearly on all such as enter as Clerks.
- 4. In his capacity of the whole five Clerks of the House united'—to take care that the case of no female Patient be taken by any of the Clerks without himself and a Nurse being present—to restrain the Clerks from visiting the sick, except at such hours as he shall dictate, or when they may be sent expressly by the Physician or Surgeon, to inquire into and report to him, the state of some particular Patient—to demand from the Clerks a list of all the sick admitted into, and dismissed from their respective Wards, during each week, marking the date of admissions, by whom recommended, event of case, &c. &c. and to make out the materials for the Annual Report, digesting all the cases into their proper places, &c. &c.

5. 'In his capacity more especially of the two Surgeons' Clerks taken together'—to have the charge of all the surgical instruments, that they be kept in good order, and sent to the cutler when necessary—to have at all times an assortment of bandages in readiness, particularly of those necessary in capital surgical operations.

The above, we think, is a fair summary, or rather detail, of the multifarious duties vested in the New Officer, to be named the Superintendent. In the rest of the Report we observe little calling for attention, except the startling proposal to dislodge the whole Clerks from the House, and allow their presence only at the visiting hour. The regulation is somewhat obscurely expressed, the precise time of their remaining in the House being no where specified, but if this be the meaning, it necessarily follows, that in our absence the whole Patients of the Infirmary, amounting to two or three hundred, must be delivered over to the care of one sole individual, the Superintendent, who, by the same rule, must in ordinary cases have the entire charge of them for three and twenty out of every four and twenty hours.

Having thus disposed of the Clerks, it may be asked, is the same fate intended for the other functionaries, in whose place it is proposed to substitute the new Officer, at least so far as some of their most important duties are concerned—we mean the Treasurer, the Matron, the Apothecary, and Porter, not to speak of the Physicians and Surgeons? Is the office of Treasurer to be abolished? and are the Matron, Apothecary, and Porter, like the Clerks, to be dislodged from the House, and not to appear but at a stated hour? Another question occurs,—Seeing that so many of their duties are now to be transferred to the Superintendent, are these functionaries still to retain their former emoluments, or are they in future to be paid according to the diminished extent of their services? On all these points we observe the Report to be silent.

Such may be esteemed the principal of the New Regulations proposed to be enacted for the Glasgow Royal Infirmary. The first remark we have to offer, what must strike every person who peruses the document, is, that were such plans to have the force of law, they must necessarily carry along with them a full and complete overthrow of the present government of our Hospital. For ourselves, we are no enemies of Reform, nor are we staggered by the phrase Revolution, provided so sweeping a change be absolutely requisite. But for innovation in an Infirmary, as in a State, some reasonable ground of complaint must be alleged; and in the present instance, unless some gross and dangerous abuses be incontestably proven to exist, we must surely pause ere we consent to destroy a constitution that has hitherto fulfilled its purposes so well, and which has enjoyed so long the approbation of the public. That such evils or abuses are to be met with at present in our Infirmary, we do not believe, nor have any such been communicated to us by the Managers. Till proof to the contrary, then, be produced, we are entitled to assume it for granted, that every thing is proceeding in the usual advantageous manner, free of any material fault or error, and that the different functionaries are performing their several duties, faithfully and conscientiously. Under these impressions, then, we cannot but dissent from the alterations proposed, and we hereby offer to the Board our respectful, but unanimous and decided, protest against their adoption. Some of them we think more particularly exceptionable, as the recommended interference of the Superintendent with the admisson of patients. In all hospitals this duty must belong to the attending Physicians and Surgeons, and the reasons why it has been hitherto vested in these functionaries by our own Directors, appear to us unanswerable. Thus, our Institution is neither an Alms-house for the poor, nor a receptacle for incurables; it admits none but such as present a reasonable hope of amendment or cure: all who enter must come under the charge exclusively of the attending Physicians and Surgeons, and they surely must know best whether, in each instance, recovery, or relief, may fall within the scope of their individual skill or abilities; in other words, these functionaries must be the best judges, or rather the only judges, who should be admitted, or who rejected. For our own parts, being conscious that we have ever performed this part of our duty with the most scrupulous fidelity, we were surprised to find insinuations to the contrary in the Report, which we cannot pass over in silence. Thus it is affirmed, by implication at least, that there exist at present in the House certain functionaries who are guilty of dereliction of duty, or breach of trust,-who the culprits are is not distinctly said: there is some ground to believe, however, that we ourselves are intended to be thus stigmatized. If so, we promptly deny the charge, and call for inquiry. For the opinions of the Managers when openly expressed, and when coming from them as a body, we acknowledge, and shall always acknowledge the utmost deference and respect. For insinuations like the above, if meant for us, we, of course, can entertain no feeling but contempt.

Another proposal not less exceptionable, is what regards the anatomical inspection of the dead. In every hospital this must be the peculiar province of those Physicians and Surgeons who attend the sick, since it is only at their instance that such examinations are made at all, and since the same functionaries, having had the treatment of the patients while alive, must be the sole judges how far the post mortem appearances correspond with, or throw light upon the preceding symptoms. By a similar rule, they are the proper persons to explain to the students the bearings of the dissection on the case, and to dictate such a report of it in our books as may give the stamp of truth and accuracy to the record. But nothing of all this, it seems, is now to be done without the presence, license, and sanction of the Superintendent. We remark, too, a curious injunction to this Officer, that he is to take care that no parts be touched with the knife except the actually morbid parts. This is a strange oversight. Surely every medical man knows, or ought to know, that in many cases the actually morbid parts not unfrequently elude notice during life, and are only detected by anatomical scrutiny after death, and that in numerous instances it is for this purpose solely that recourse is had to dissection. For the same reason it is, joined to the circumstance that the disordered portions are not seldom so multiplied in number, and spread through the different regions of the body, as to demand a much wider investigation than was at first expected: and hence the common practice among morbid anatomists of opening the three great cavities of the head, chest, and abdomen,—a practice founded not on a wanton desire of using the scalpel, but on utility, or rather unavoidable necessity.*

-if thou tak'st more,

^{*} We wonder the learned Committee did not limit the cutting here, exactly to a pound of flesh, neither less nor more, following out the injunctions in the Merchant of Venice:-

But of all the projects in the Report, perhaps the most dangerous and injudicious is that of banishing the whole five Clerks from the House, except during the visiting hour, and in place of the whole five, substituting the Superintendent. No measure could be more inconvenient or unjust with respect to the Physicians and Surgeons, and what is of more consequence, none more detrimental to the patients. Many of these labour under diseases of such acuteness and danger as to require constant watching, and how is this to be done without the Clerks? From the wide spread of machinery, too, in our manufacturing establishments, accidents of the most serious nature are now multiplied beyond all former precedent, as well as the number of capital operations greatly increased, and if such assistants were reckoned necessary for superintendance long ago, how much more indispensable are they to be esteemed at present? Besides, generally speaking, the attending practitioners visit only during one hour a-day, and during the other twenty-three hours the sick, except on extraordinary occasions, must be unavoidably left to their young assistants. Nor are these last unqualified for the task. Provided a Clerk has only common sense or common abilities, he cannot fail to become acquainted, and, accurately acquainted, with every distemper in his respective Wards. Thus, in the first place, he takes the case of the patient, and engrosses it in the Journal; then he visits the patient three times each day, once along with the Physician or Surgeon, twice by himself. In the former of these visits he notes down the prescriptions for relief-learns the views of the Practitioner regarding the nature of the malady, and its mode of treatment, receives his directions regarding contingencies, and at last becomes so versant in every requisite knowledge, as to be able to prescribe, on emergency, not only without danger, but with advantage to the sick. But how is this to be done by the Superintendent? He has no access of knowledge regarding any one patient whatever-he does not take the case-he does not accompany the Practitioner in his rounds, so as to hear the medicines prescribed, to learn his opinion concerning the nature of the malady and its mode of treatment, or receive directions as to contingencies; in short, were he suddenly called, he must find every patient a mere novelty, or one concerning whose previous history, unless he studies the Books, which cannot reasonably be expected on every emergency, he is utterly, and entirely, ignorant. Is such a person capable of taking charge of our patients? And when it is considered that, according to the plan, this individual is to have under his care, for three and twenty out of the four and twenty hours, not the sick of one Ward only, but the sick of all the Wards, the magnitude of evil and risk to the diseased poor cannot fail to strike forcibly every one possessed of reflection and humanity. Even granting the Superintendent qualified for the task, the mere labour would prove an insurmountable obstacle. No human being, we apprehend, is capable of watching over, and prescribing for, on emergency, two or three hundred sick; and when this is coupled with the numerous other duties to which the Superintendent is subjected, with loss of sleep from the unavoidable frequency of his nocturnal calls, the impracticability, no less than the dangerous nature of the whole scheme, cannot fail to become completely apparent. On this subject we have already quoted the following curious injunction, "that the Clerks shall go round the Wards at certain hours only, to be fixed by the Superintendent, except when sent by the Physician or Surgeon to inquire into, and report to him, the state of any particular patient." This injunction could only proceed from persons who, never having acted themselves as Physicians or Surgeons to the House, are but imperfectly acquainted with the details of duty. Ever since the establishment of our Hospital, the treatment of the sick has been, of course, confided solely to the Acting Practitioners, and of that treatment they incur the whole responsibility. The Clerks are their substitutes, and must visit at the periods they direct, not only the patients individually, but in the aggregate. The time recommended by convenience, and long sanctioned by the Practitioners, is some hour of the forenoon, and evening. All this has been settled, and approved by the experience of nearly half a century, and we must deprecate every part of interference here, either from the Superintendent or any other officer of the Infirmary.

In farther looking over the Report we observe certain parts of a lighter description, indeed of so equivocal a character as to leave some doubts in our minds whether the Reporters were really serious, or were merely trying the credulity of the Professional Attendants. We aliude here more especially to their plan of vesting in one and the same individual, the Superintendent, so many and such discordant offices, making him act sometimes in capacity of the whole Managers, in one instance at least, sometimes as the Treasurer, sometimes as the Matron, sometimes as the Porter, sometimes as the entire body of the Physicians and Surgeons, sometimes as the four Surgeons more especially, sometimes as the whole fice Clerks, sometimes as the Apothecary. Here we most cordially concur with the Committee that could an individual be procured capable of performing, quietly and efficiently, all these several duties, there is no salary the House could bestow that would be more than adequate to his merits, but where such "Treasure of a Man" is to be found, as the Reporters properly style him, we own, entirely exceeds our comprehension. With exception of the Admirable Crichton, such a man we have never heard of in the ranks of real life, and even in the wide regions of fiction, we know but one individual who could compare with him, or be esteemed his parallel, we mean the celebrated Caleb Quot'em. That this ingenious offspring of the Comic Muse has been assumed as the type or model from which to frame the Beau Ideal of an Infirmary Superintendent, we do not take upon us to assert: this, however, we may venture to affirm, that, for variety, and incongruity, of office, no two personages can be found so nearly to approach each other, as every body must perceive who has seen that diverting character on the stage.

Another and no less amusing part of the Report is the extraordinary jealousy it breathes of all womankind, as evinced by the various directions to the Superintendent, how to avoid and counteract the wiles of the sex, as by ordering him to allow no female case to be taken by the Clerks, except in his own presence—to prevent all access of the same enemy to the Male Wards, and to the Clerks' and Dressers' Rooms, though not a word is said of keeping the men from the women's apartments; and, above all, during

Or less than a just pound—be it but so much As makes it light, or heavy, in the substance, Or the division, of the twentieth part Of one poor scruple; nay, if the scale turn But in the estimation of a hair—
Thou diest, and all thy goods are confiscate.

the whole afternoon and evening hours, so to guard the approaches to the house, that nothing in the shape of womanhood, maid, wife, or widow, under pretence of visiting friends or acquaintances, shall be able to make a lodgement within the walls, except by his own authority, or that of the Matron. What the circumstances may have been that gave rise to such strict surveillance, we have not been informed; but in our present ignorance, we confess, under submission, that, whatever may be said of an Eastern Harem, we are unable to perceive the necessity of appointing a Black Eunuch for the Glasgow Infirmary.

Granting, however, that want of discipline actually prevails in the House, we would respectfully propose two measures, as perhaps no unsuitable correctives. One is to abolish the custom of selling the Clerkships. The Students here are far from being a wealthy race, and this regulation produces a monopoly to the richer individuals, who are but a small number, narrowing too much the choice of the Directors, and excluding all, however meritorious, who cannot command a certain sum of money. If, in addition to this, the choice of the Clerks were transferred from the Governors to the attending Physicians and Surgeons, we think the most beneficial consequences would ensue. These functionaries would take care, for their own sakes, to appoint only such young men as were fit for the office, and these last ceasing to purchase their places, and no longer considering themselves as independent officers, would be completely amenable to control: and under this system, we venture to predict that all irregularities would cease, and discipline (if really relaxed) would be completely restored. A similar advantage, we think, would arise from the Surgeons electing their respective Dressers.-In asserting this we have no view to patronage, our only aim is the welfare and cure of our patients. For these most important of all ends, it may be laid down as an incontestable principle, that the treatment must be left without limit or control to the Physicians and Surgeons-they must be invested with the same power they possess in private practice, where, as every body knows, all their injunctions are implicitly obeyed. There must be no interference from a Superintendent, or even individual Managers, often so great an annoyance in our Infirmary. That men perfectly worthy of such trust may, at all times, be met with in Glasgow, we entertain no doubt-if persons of a contrary character have unfortunately been inducted into office, there can be no remedy but to dismiss them and elect others.

We have now finished, to the best of our abilities, the task allotted us by the Managers, that of offering our opinion concerning the new Regulations proposed for the Infirmary. We have spoken out freely, we trust without offence, and certainly none was intended, but the interests of so great a Charity, blended as they are with those of the Glasgow Medical Schools, are not to be lightly tampered with, and the life and health of the diseased poor must not be compromised for a punctilio.—With the Medical and Surgical arrangements of our Hospital, taken generally, we profess ourselves to be perfectly satisfied, and we think the less they are intermeddled with the better. Concerning the civil government, our opinion is somewhat different: we concur with the Report that there may be some points of management which the Directors may not be very well able to overtake, and we are therefore of opinion that a House Steward, with proper and practicable functions, particularly for looking after and collecting the Revenue, would be a valuable addition to the Establishment. On this topic, however, as not falling exactly within our province, we abstain at present from all discussion.

We have the honour to be,

GENTLEMEN.

Your obedt, humble Servants,

RICHD. MILLAR, J. BALMANNO, R. PERRY, M. S. BUCHANAN,

Physicians.

To the Managers of the Glasgow Royal Infirmary.

N.

The Managers of the Glasgow Royal Infirmary having, at their Quarterly Meeting, on the first day of August last, named us a Committee to consider a Report, which a former Committee presented, on the third day of January, as to the proposed Superintendent, and to present the same with such suggestions or alterations as might occur to us thereon, to the next Quarterly Meeting, we now offer the following Report.

We heartily concur with the former Committee in the opinion, that it will be beneficial were a Male Superintendent appointed, who shall devote his whole time and attention to the preservation of the regularity, cleanliness, economy, and police generally of the establishment, and enforce rigid adherence to the Regulations which the Managers might from time to time enact. He ought to be an unmarried man, not exceeding forty-five nor under thirty-five years of age when admitted, of unblemished character, of active business habits, and a good accountant; he ought to be boarded and lodged in the Infirmary, and to receive an yearly salary, not exceeding one hundred pounds.

Time and experience will best enable the Managers to mature Rules for a Superintendent; but it is our settled conviction, that the following Regulations should be adopted in the outset:—

1st, The Superintendent shall have nothing to do with the medical examination of those applying for admission as Patients; but he shall receive, and scrutinize, the recommendations for admission which they present, and, on his responsibility, see that none be

admitted contrary to the Rules of the House. He shall see the Rules of the House enforced as to the removal of Patients whenever they are reported for dismissal. He shall keep a separate account of the pauper fever patients sent by others than Subscribers, specifying the place from which they came, and the persons by whom they are sent.

2d, He shall see that the Histories of the Diseases of all Female Patients be taken by the Clerks, either in the Public Wards, or in the Nurses' Room, the Nurse being present, and that no Female Patient enter the Clerk's or men's apartments, nor Male Patients those of the Females. He shall see that no Female Patient after being dismissed, cured or otherwise, or any Female on any pretext whatever, be admitted during the evening to visit any of the inmates, without special permission from the Matron or himself.

3d, He shall have the control and superintendance of all the Male Servants.

4th, He shall go round the Wards, forenoon and afternoon, and at any other times he judges proper, to see that the apartments are kept clean, and ventilated, that the conduct of the Patients is proper, that the Nurses are doing their duty, and that the Rules of the House are strictly obeyed.

5th, He shall see that rigid economy is preserved with regard to the Articles issued by the Apothecary.

6th, He shall have the charge of paying all the Domestic Servants; and under the direction of the Treasurer examine all accounts sent into the House.

7th, He shall have the charge of the Journals kept by the Clerks, and each new volume shall be delivered to him when completed. He shall regularly enter them in a Catalogue or Inventory, and on no account permit any of them to be taken out of his custody, without the express permission of the Managers, with this exception, that the Physicians and Surgeons of the House for the time being, and Gentlemen who have served in either capacity, and the Medical Directors, pro tempore, may borrow any volume or volumes, upon their own receipt and obligation, in a book to be kept for the purpose, to return the volume or volumes, &c. borrowed, within fourteen days.

Sth, He shall call a Quarterly Meeting of the Medical Managers, and invite to it the Physicians and Surgeons, pro tempore, to examine the state of the Journals, and of the Surgical Instruments, and also the Apothecary's Department, and to report thereon to the Weekly Committee.

9th, He shall take charge of the sale of Admission Tickets to the Students, and keep an account of money paid by Patients, for all which he shall be accountable to the Treasurer.

10th, He shall have charge of the Dead Room, and not permit any dissection unless the Regulations of the House have been complied with.

11th, He shall keep accurately a set of Books, embodying the Weekly Lists, to be delivered to him by the Clerks, and which form the materials for all the Medical and Surgical details, which, according to custom, are enumerated in the Annual Report. It shall be the duty of the Superintendent, and of the Senior Physician's Clerk to prepare and furnish these details to the Managers intrusted with the preparation of the Report, in due time for the Report.

12th, He shall take charge of the Keys of the House, and see that all the Gates are locked at ten o'clock at night, and the Keys delivered to him, and that none of the Clerks or inmates be then absent without leave, asked and given by the Superintendent, or by the Matron when the person is under her charge.

13th, He shall keep a regular Journal, in which he shall enter a detail of every irregularity and violation of the Rules of the House. It shall contain an entry, showing when any Physician, Surgeon, or Clerk, has been absent, and stating whether the duty devolving on the absentee was attended to, and if it was, by whom. It should also state when any of the Clerks were absent at ten in the evening, and whether the absence was with or without leave.

14th, It shall be his duty to attend the daily Visitors, whilst they make their visits, to point out the Wards and give all requisite information. And also, he shall attend the meetings of the Weekly Committee, and present his Journal or other Books to them.

15th, He shall see that the convalescent patients, who have received from the Surgeons Pass Tickets to go out of doors for a certain specified time, return within the prescribed period; and, when patients transgress, he shall report to the Surgeon by whom the pass was granted.

16th, He shall keep a Time Book, showing the number of days or hours, during which all Labourers or other Workmen were employed about the establishment.

17th, He shall devote his whole time and attention to the preservation of the Regularity, Harmony, Cleanliness, Economy, and Efficiency of the Establishment, and make full and faithful Reports to the Managers, upon the matters committed to his charge. He shall be elected annually at the same time with the other Civil Officers, and be liable to be dismissed at the discretion of the Managers.

To Conclude, As we formerly stated, experience will bring with it much useful knowledge; but, in the meantime, we are persuaded that beneficial results would follow from the appointment of a Superintendent under such Rules as we now very respectfully present to the consideration of the Managers.

D. FOGO, Convener.
WILLIAM M'LEAN.
DUGD. MACFIE.
JAMES LUMSDEN,
WM. GILMOUR,
PATRICK M'FARLANE.

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City Quartelet Sissemiles 1827 1 in \$27	NAME OF PLACE.	AUTHORITY.	YEAR, 3	MORTALITY	NAME OF PLACE.	AUTHORITY.	YEAR.	MORTALITY
City Quetetel Sissemisch 1777 116 27 .		Bristed	1827	1 in 40		Percival	about 1750	1 in 25
(U. S.) Blacks		(Quetelet) Süssmilch	7771	1 in 27			about 1770	1 in 28
(U. S.) Blacks 1. C. Casper from 1745 to 1756 1 in 23 Middlesex, County 1. E. Marsch from 1756 to 1729 1 in 29 Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks Blacks		Niles and Rush	1826	1 in 39		:	about 1811	1 in 74!!!
City J. L. Casper from 174' to 1756 1 in 28 New York, (U. S.) Whites from 180' to 180' 1 in 24 Endre Endre			1826	1 in 33		Blane	1811	1 in 36
The color of the		J. L. Casper		1 in 28	-		1881	1 in 47
am, J. E. Marsch from 1862 to 1805 1 in 27 New York, (U. S.) Whites in glash and the state of the series of				1 in 29		Giornale di Napoli 1827	1827	1 in 28
Company Comp	-	J. E. Marsch		1 in 27		Niles and Rush	from 1820 to 1826	1 in 40
Rickman Rickman Rill 1 in 34 Entire				1 in 34		;	from 1820 to 1826	1 in 19!
Clip		Rickman	1811	1 in 34	:	1	from 1820 to 1826	1 in 35
City Hawkins Niles and Rash 182 1 in 32 Padra and Venetian Kingdom Finlayson Finlayson			1881	1 in 43		Hawkins	1827	1 in 31
<td></td> <td>_</td> <td>1851</td> <td>1 in 32</td> <td>Padua and Venetian Kingdom</td> <td>(Quadri) Prospetto Statistico</td> <td>1817</td> <td>1 in 28</td>		_	1851	1 in 32	Padua and Venetian Kingdom	(Quadri) Prospetto Statistico	1817	1 in 28
City Hawkins 1816 1 in 26 Palermo, City 1780 1 in 47 Richman 1781 1 in 601 Petersburgh, Richman 1781 1 in 601 Petersburgh, 1821 1 in 601 Petersburgh, 1822 1 in 601 Petersburgh, 1823 1 in 601 Petersburgh, 1823 1 in 40 1823 1 in 40 1823 1 in 40 1823 1 in 40 1824 1 in 40 </td <td>:</td> <td>:</td> <td>1826</td> <td>1 in 49</td> <td></td> <td></td> <td>1822</td> <td>1 in 14!!!!</td>	:	:	1826	1 in 49			1822	1 in 14!!!!
Kingdom Finlayson 1780 1 in 47 1790 1 in 47 Villermé 1821 1 in 601 Petersburgh, Villermé 1821 1 in 601 Philadelphia, (U. S.) Whites <t< td=""><td></td><td>Hawkins</td><td>9181</td><td>1 in 26</td><td></td><td>Quattromani</td><td>from 1823 to 1826</td><td>1 in 31</td></t<>		Hawkins	9181	1 in 26		Quattromani	from 1823 to 1826	1 in 31
Hickman Hickman Hin 51 Hin 50 Hin 51 Hin 50 Hin 51 Hin 50 Hin 51 Hin 52		Finlayson	1780	1 in 40		Villermé	about 1400.	1 in 17
Rickman Rick			1790	1 in 47		Busching	about 1650	1 in 25
Rickman 1821 1in 601 Petersburgh,	1		1811	1 in 51		Dupin	about 1828	1 in 32
Villermé City	:	Rickman	1881	1 in 60!		Herman	from 1781 to 1785	1 in 37
City Dupin 1823 1in 30 Philadelphia, (U. S.) Whites 150 Entire 150 Entire 150 Entire 150 Entire 150 Entire 150 Entire 150 Entire 150 Entire Entire 150 Entire Entir	France,	Villermé	1811	1 in 29		Bulletin Universel	from 1813 to 1822	1 in 37
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City from 1819 to 1823 1 in 45 Entire from 1816 to 1822 1 in 46 1831 1 in 44 1831 1 in 44 1821 1 in 44 1821 1 in 48 1828 1 in 48 Rone, City <td></td> <td>Dupin</td> <td>1823</td> <td>1 in 40</td> <td></td> <td>1</td> <td>1826</td> <td>1 in 19</td>		Dupin	1823	1 in 40		1	1826	1 in 19
Cleland Grom 1816 to 1822 1 in 46 Plymouth, City		-		1 in 43		1	1826	1 in 31
		Cleland		1 in 46		(Blane) Select Diss.	1800	1 in 28
1831 1 in 39 Prague, 184 Rome, City Sissmilch 185 1 in 48 Rome, City 1 in 88 1 in 48 Rome, City 1 in 89 Rome, City 1 in 89 Rome, City 1 in 89 Rome, City 1 in 80 1				1 in 44		1	11811	1 in 38
1821 1 in 58 Prussia, Khingdom and Creim of Empire 1822 1 in 48 Rome, City 1 in 83 Rome, City 1 in 84 Spanish America, Kingdom on, Rateman about 1801 1 in 80 Sweden, Kingdom about 1801 1 in 80 Sweden, Kingdom 1821 1 in 62 Sweden, Kingdom 1821 1 in 80 Sweden, Kingdom 1822 1 in 80 Sweden, Kingdom 1823 1 in 80 Sweden, Kingdom 1824 1 in 80 Sweden, Kingdom 1825 1 in 80	:		1831	1 in 39		Kudler	1827	1 in 24
nd, Kingdom Süssmilch 1888 1 in 48 Rome, City nd, Island of Bishop of Iceland 1819 1 in 23 Russia, Empire nd, Island of Bishop of Iceland 1829 1 in 23 Russia, Empire f Bourbon, Thomas Rapport 1820 1 in 44 Spanish America, Image prof. City Gordini and Orsini 1821 1 in 62! Styria, Kingdom ln, Shire Blane 1821 1 in 62! Styria, Austria) Province pool, 1821 1 in 62! Styria, Austria) Province pool, 1821 1 in 62! Styria, Austria) Province pool, pool,		Blane	1881	1 in 68		Kunth	1817	1 in 35
Herseboam 1750 1 in 23 Russia, Empire 1810 1 in 23 1 in 24 1 in 25 1 in 20 1		Süssmilch	1828	1 in 48		Hawkins	from 1816 to 1825	1 in 24
Hand of Bishop of Iceland 1899 1 in 38 Bavaria, K. of Rudhart 1825 1 in 38 Sielly, Kingdom 1827 1 in 35 Shanish America, Thomas Rapport 1827 1 in 35 Shockholm, Kingdom 1821 1 in 62 Styria, (Austria) Province 1811 1 in 30 Sussex, County 1821 1 in 40 Sweden, Kingdom 1822 1 in 40 Sweden, Kingdom 1823 1 in 40 Sweden, Kingdom 1824 1 in 40 Sweden, Kingdom 1825 1 in 40 Sweden, Kingdom 1825 1 in 26	:	Kerseboam	1750	1 in 23		Kraff	1768	1 in 60!
Bavaria, K. of Rudhart 1825 1 in 38 Sicily, Kingdom Fourbon, City Gordini and Orsini 1827 1 in 44 Spanish America, Fingdom			1819	1 in 38		1	1829	1 in 40
City Gordini and Orsini 1827 1 in 35 Stockholm, Kingdom Shire Blane 1827 1 in 62! Styria, (Austria) Province City Dr Farriar 1821 1 in 62! Styria, (Austria) Province 1821 1 in 40 Sweden, Kingdom about 1650 1 in 20 about 1801 1 in 36 Vienna, City Malthus about 1811 1 in 38		Rudhart	1825	1 in 38		(Quattromani) Itinerario Siciliae	1823	1 in 33
City Gordini and Orsini 1827 1 in 55 Stockholm, Kingdom 1821 1 in 62 Styria, (Austria) Province 1811 1 in 50 Sussex, County 1821 1 in 40 Sweden, Kingdom 1821 1 in 50 1 i	Isle of Bourbon,	Thomas Rapport	1820	1 in 44		Humboldt	1813	1 in 30
Shire Blane Shire Dr Farriar Bateman Bateman Brice Brice About 1801 1 in 50 Sweden, Austria) Province Babout 1700 1 in 26 about 1801 1 in 38 Gity All thus About 1811 I in 38 City City City		Gordini and Orsini	1887	1 in 35		Messager Français du Nord	1823	1 in 25
City Dr Farriar 1811 1 in 30 Sussex, County Bateman about 1650 1 in 20 about 1700 1 in 25 about 1801 1 in 38 City Maithus about 1811 1 in 38		Blane	1881	1 in 62!		Rudhart	1851	1 in 38
Bateman about 1650 1 in 40 Sweden, Kingdom about 1700 1 in 25 about 1801 1 in 38 City about 1811 1 in 38 City		Dr Farriar	1811	1 in 30		Blane	1881	1 in 71!!
Bateman about 1650 1 in 20 about 1700 1 in 25	:	:	1851	1 in 40		Von Fahnenberg	1765	1 in 35
Price about 1700 1 in 25 City Malthus about 1811 1 in 38	London,	Bateman	about 1650	1 in 20	-		1785	1 in 37
Price about 1801 1 in 36 Vienna, City about 1811 1 in 38			about 1700	1 in 25		Messager Français du Nord	1823	1 in 48
Malthus about 1811 1 in 38		Price	about 1801	1 in 30		Kudler	1750	1 in 20
2 1 1000 1 1		Malthus	about 1811	1 in 38		Wertheim	1810	1 in 24
about 1821 1 in 40		Government	about 1821	1 in 40		Stelzig	1887	1 in 22

List of Surgical Diseases, treated by Dr. N. S. Buchanan, in the Glasgow Royal Infirmary, from 1st May, 1830, to 1st May, 1831.

Abseess, acute, chronic, lumbar, Anthrax, Anthrax, Bite of dog and sow, Brochocele, Burbo, sympathetic, Burn and Scald, Burns, mucosa, inflammation of, Calculus in bladder,		1		-	1000							
nmation of,		121	14	1		Carried forward.	155	73	858	181	100	15
nmation of,			00	00	0.3	Fracture of vertebrae.	1		1			1
nmation of,	, ,	0.9		01	13	Fungus hematodes,	01	60	5	8	03	
nmation of,		1 1		1		Gangrene, spontaneous,	1		1			1
nmation of,	-	00	9	1	1	traumatic,	1	1	62			01
nmation of,		1 2	01	District In		Gonorrhea,	-		-	1		
nmation of,		1		1	10000	Head, injury of,	9	00	6	6		
nmation of,		-	1			Hematocele,	03		G5	63		
nmation of,	-	9 25	19	3	8	Hemorrhage, secondary,	03		C/S			0.5
		0.5	03	100000000000000000000000000000000000000	97.11	Hernia,	62		02	1	The same	1
	_	1 5	4	1		Hydrocele,	8		8	8		
urethra,		1	1			Hydrosarcocele,	00		00	03	1	
Cancer of face,		60		02		Iritis syphilitica,	1		1	1		
Пр,		2 4	00	1		Necrosis,	1	-	03	03		
		4	99	03		Nole me Tangere,		05	03	1	1	
tongue,		01		O1		Orchitis	4		**	4		
uterus. &c.		1 1		1		Otitis narulenta.		1	-	-	No. of the last	
-		1 22	03	04	1	Periostifis.	-	0	00	01		
Catarrhus vestion.		00	00			Dhleemon	00		0	01		
THE PARTY IN			14	100		Dismost manuful	-		0 -	-	-	
		0.	0			The my mosts, congemen,						
Cornea, nebula of			N2 C			Folypus,	,		-	10	-	
nd,		05	20 (N 000 11	-	Prostrate gland diseased,			4	04	24	
simple, 3	-	1	00	-		Pseudo syphilis,	70	01	10	00	03	
Emphysema,		1	The second second		-	Scrophulous glands,	00	02	9	4	02	
	-	1 4	4	No. of the last		Sinus,	4	03	9	4	-	1
simple, 10	_	7 17	17			Spine, caries of,	9		9	4	O5	
Exostosis,		1 1	1			Sprain,	50	1	*	4		
Fistula, in ano, 10	-	10	80	01		Stricture of urethra,	1		-	1		
nalis,		1 2	62			Synovitis, acute,	4	00	7	9	1	
perinae, 2	-	0.5	01			chronic,	00	01	10	03	01	1
urethro, vaginal,		1 1	1			Syphilis,	00	1	*	60	-	
vesico, vaginal,		1 1	1	1		Testicle, fungus of,	01		03	1	1	
Fracture of clavicle, 7	_	1 8	7	1		Tumor,	4	00	7	9	1	
femor, 9	-	5 14	1	01	1	Ulcer,	41	55	99	59	7	
	-	5	10	THE PARTY OF		Ununited fracture,	1	1	09	-	1	
humerus,	-	1 7	9	-	1	Urine, incontinence of,	7	-	-	W. T.		
ilium, 1		1	1			Uterus, prolapsus of		-	1		1	
maxilla, inferior,	-	62	04			Veins, varicose of leg,	1		1	1		
nasal bones,		1		N STATE	-	Whitlow,	62	63	4	4		
olecronon, 2	~	03	2	O The state of		Wound, incised and lacerated,	111	01	13	15		1
		1	1			Totals,	296	182	427	351	6.5	31
	-	3 9	9	03	1	Of the above, there were left me on 1st	10		10	151	a	-
ribs, 4	**	4	4	1000000		May, 1890,	-			2		THE STREET
	Los de	6 17	15	1	1	Of Do, there remained under treatment lat May, 1831,	11	16	27	16	6	6
toes,		05				Subtract these from totals above, and there	878	53	19	SI	17	3
Carry forward, 155		73 228	181	23	12	my treatment,	267	109	876	310	47	61

376 + 254 = 4014. $254 \times 365 = 93074 \div 4014 = 23 \text{ days, average of each patient's residence.}$

Number of operations, 62; number of patients, 56; viz. 1 being thrice, and 4 twice operated on. Aggregate number of days' residence in hospital, $1645 \div 56 = 29 \frac{1}{15} = \text{each patient}$ s residence.

List of Operations, performed by Du M. S. Buchanan, in the Glasgow Royal Infirmary, from 1st May, 1830, to 1st May, 1831; with the diseases, &c. of the Patients.

Coal Carrier, Compound dislocation,
rier,
Servant, Compound dislocation of ankle, Coal Boy, Servant Coal Boy
Labourer, Scald and secondary hemorrhage, Smith, Cancer, Do. Do. Do. Do. Do. Do.
XOARPE C
Ropemaker, Ununited fracture, Labourer, Supparation of omentum, Various, Do. do. Three stones, 2's small, 1 large, One stone, size of bean,
Servant, Stone, curious, impacted,

2

List of Deaths in the Surgical Wards, Nos. 7, 8, and 12, of the Glasgow Royal Infirmary, from 1st May, 1830, to 1st May, 1831.

M. S. Buchanan, Surgeon.

				Contract of the last		The state of the state of		(ad)	
	TRADE, RESIDENCE.	RESIDENCE.		Q	DISEASE OR INJURY.	ADMITTED.	DIED.	No, of I	CAUSE OF DEATH, OR INSPECTION.
55 Labourer Hurlet Scald of fore-arm.	Labourer Hurlet	Hurlet		Scald of fore-arm.	The same of the sa	19th April	5th May	16	Amputation, gangrene, hemorrhage See list of operations.
38 Mechanic Havannah Compound commin	Mechanic Havannah	Havannah		Compound commin	Compound comminuted fracture of radius and ulna.	17th May	22d May	10	Traumatic gangrene, pectoral inflammation, and pleural effusion.
20 Farmer Barony Comminuted simple	Farmer Barony	Barony		Comminuted simple	Comminuted simple fracture of right femor.	14th July	20th July	9	Inflammatory fever, extensive ossification of substance of heart.
70 Optician Inverness Carbuncle on back of	Optician Inverness	Inverness		Carbuncle on back of	f neck,	16th July	22d July	9	Cholera of 14 hours' duration, mucous coat of intestines ulcerated.
35 Seaman Fracture of several cervical vertebrae.	Seaman		Fracture of several ce	Fracture of several ce	rvical vertebras.	8th August	18th Aug.	10	Inflammation and laceration of theca spinalis, and softening of medulla.
17 Servant Paisley Scrophulous sinuses in	Paisley	Paisley	-	Scrophulous sinuses in	Scrophulous sinuses in neck, over sternum, &c.	21st May	15th Sept.	116	Hectle fever, tabes, caries of bones in vicinity of shuses.
55 Labourer Glasgow Fracture of ribs, emphysema.	Glasgow	Glasgow		Fracture of ribs, emphys	ema.	10th Sept.	13th Sept.	65	Six pounds of blood in pleural cavity, from rupture of intercostal artery.
58 Labourer Gallowgate Incarcerated scrotal omental hernia.	Gallowgate	Gallowgate		Incarcerated scrotal om-	ental hernia.	2d Dec.	7th Dec.	10	Inflammation, gangrene.—See, further, list of operations.
46 Labourer Mull Extensive gangrene of	Labourer Mull	Mull.		Extensive gangrene of	Extensive gangrene of scrotum, penis, abdomen, &c.	4th Dec.	18th Dec.	00	Peritoneal inflammation, gluing of large and small intestines.
W. Witherspoon 12 Coal Boy Frankfield Severe contusion of left thigh and groin	Coal Boy Frankfield	Frankfield		Severe contusion of left t	high and groin.	25th Jan.	15th March	49	Hectic feverSee, further, list of operations.
12 Servant High.Street Compound comminuted fracture of nasal bones.	Servant		High-Street Compound comminuted	Compound comminuted	fracture of nasal bones.	24th March	31st March	-	Phrenitis, comaNo inspection allowed.
14 Flesher Boy Bridgegate Laceration of fore-arm,	Flesher Boy Bridgegate	Bridgegate	Bridgegate	Laceration of fore-arm, 1	Laceration of fore-arm, from blunt rusty-iron hook.	21st April	23d April	09	Traumatic gangrene, bronchitis, effusion into pleural cavity.
55 Tailor Gorbals Caries of knee joint, and	Tailor Gorbals	Gorbals		Carles of knee joint, and	Caries of knee joint, and abscess of do, and thigh.	17th April	10th May	82	Tetanus, heetic fever, ulceration of cartilages, carles.
7 Govan Laceration of arm and leg by coach wheel.	Govan			Laceration of arm and	leg by coach wheel.	7th Sept.	27th Sept.	50	Hectic fever, abscesses of knee and elbow joints, purulent depot in pleura.
22 Servant Ireland Punctured wound of v	Servant Ireland Punctured wound of	Ireland Punctured wound of	Punctured wound of		wrist, by iron scythe.	10th Sept.	20th Oct.	40	Phlegmonous erysipelas, abscesses of arm, thorax, and pleura.
76 Winder Glusgow Compound comminute	Winder Glasgow	Glasgow	S She	Compound comminute	Compound comminuted fracture of tibia and fibula	lst Jan.	8th Jan.	œ	Traumatic gangrene, sero-sanguinolent pleural effusion.
58 Servant Gorbals Compound dislocation	Servant Gorbals	Gorbals		Compound dislocation	Compound dislocation of ankle, and fracture of fibula.	14th Jan.	4th Feb.	18	Pleuritis, bronchitis,-No inspection allowed.
54 Glasgow Insanity, numerous co	Glasgow			Insanity, numerous co	Insanity, numerous comp. fractures, from fall 40 feet.	13th Jan.	15th Jan.	01	Coma, palsy, shoulder and elbow joints shattered, pleural serous infiltration.
3 Burn of half of body, from clothes igniting.	Drygate			Burn of half of body, fi	rom clothes igniting.	11th Jan.	18th Jan.	-	Irritative fever, coma, serum extravasated ou brain and in pleura.
50 Spinner Calton Burn of whole body, from clothes igniting.	Spinner Calton	Calton		Burn of whole body, fi	rom clothes igniting.	24th Feb.	27th Feb.	60	Irritative fever, coma, no internal diseased appearances.
15 Spinner High-Street Burn of back, buttock, and thigh, from clothes igniting.	Spinner		High-Street Burn of back, buttoch	Burn of back, buttoch	, and thigh, from clothes igniting.	20th March	10th April	21	Sloughing of back, &c. hectic -No inspection.
13 Blind Asyl. Scrophulous abscess of knee joint, thigh, and hip.		Blind Asyl. Scrophulous abscess	Blind Asyl. Scrophulous abscess	Scrophulous abscess	of knee joint, thigh, and hip.	12th March 10th May	10th May	98	Hectic feverNo inspection allowed.

436 ÷ 22 = 19 is average number of days resident in hospital.

CONTENTS.

P	age
Lithographic view of the Archbishop's Castle.	
CHAPTER I.—Introductory remarks on the history of Hospitals—Statistical sketch of the city of Glasgow—Necessity for	
Hospital accommodation—Objections answered—Origin of the Royal Infirmary—Preliminary arrangements—Royal Charter	
obtained—Remarks on Infirmary topography—Ceremonial on laying the foundation stone—First meeting of Subscribers	
and Contributors-Description of Infirmary and Fever Hospital, as finished in 1832-Statistical observations	1
Lithographic view of Infirmary, as seen from Kirk Street.	
CHAPTER II.—Annual Report for 1796, and remarks on succeeding ones—Sketch of Hospital funds till 1805—Donation	
from 1st Regiment of Glasgow Volunteers-Medical reform proposed, but rejected by General Court-Salaries voted to	
medical attendants-North compartment of the Infirmary commenced in consequence of spread of Typhus Fever in 1816-	
Fever eradicated in 1818-Medical altercation-Consequences-Fever again appears in 1823-Temporary Lazaretto	
required—Origin and progress of Blind Asylum	9
Engraving of Fever Hospital as seen from Stirling's Road.	
CHAPTER III.—Suggestions for Infirmary Reports—Alarming prevalence of Typhus Fever in 1827—Temporary booth	
required during the erection of the Fever Hospital-Resolutions of the Directors in regard to Clinical Lectures-Objec-	
tions answered-Importance of these courses-Advantages of the Glasgow Royal Infirmary compared with other Hospitals	
—Concluding remarks	16
Lithographic plan of Infirmary Fever Hospital and surrounding airing grounds, &c.	
CHAPTER IV Digressive apology-Suggestions for the prompt admission of Fever cases-Resolutions of the Directors as	
to the applicability of poor rate for this purpose-Remonstrances to the general court-Result-Resolutions on Hospital	
medical monopoly-Dr Millar's motion-Arguments used at General Court-Remarks-Reports on Hospital Superinten-	
dent-concluding observations on Typhus Fever-And the necessity of increased Hospital accommodation	21
1st, Tabular List of Directors of the Infirmary from 1793 to 1832.	
2d, Tabular List of office-bearers of Do. from 1795 to 1832.	
CHAPTER VCourt of Directors-Its constitution-Advantages and disadvantages-Suggestions-Subdivison into com-	
mittees-Visitors, their functions, &c Office-bearers-Physicians and Surgeons, their duties-Mode of election-Clinical	
school—Observations on department of Treasurer—Secretary—Chaplain—Apothecary—Clerks and Matron .	26
1st, Lithographic table of Hospital Income, Expenditure, and Balance.	
2d, Do. Do. of corporate contributors.	
3d, Do. Do. of Legacies and Legacy duty.	
CHAPTER VI.—Revenue of Hospital—List of Subscribers, Contributors, and Hospital Pupils—Legacies—Gifts—Interest	
and estimate of capital—Suggestions as to other sources of revenue	34
1st, Lithographic table of Hospital Expenditure, with the averages attached.	
2d, Do. Do. of ordinary Hospital Expenditure, specifying the various items.	
3d, Do. Do. of Medicine Expenditure, with the prices current of the various articles.	
CHAPTER VII.—Division of Hospital Expenditure in explanation of statistical tables—Cautions necessary—Averages how	
	41
let Lithographic table of patients discharged with the average residence mortality. &c.	

CONTENTS.

2d, Lithographic table of diseases treated in the Glasgow Royal Infirmary.	Page
3d, Do. Do. of operations performed.	
4th, Do. Do. supplemental of diseases and operations.	
5th, Do. Do. of deaths, and diseases in which they occurred.	
6th, Do. Do. of Patients treated by the district dispensary Surgeons of Glasgow, during the last five years.	
CHAPTER VIII.—General observations on Hospital statistics—Mortality—Residence—Home treatment considered—	
Remarks on the six Statistical Tables prefixed to this Chapter—Concluding suggestions	48
APPENDIX.	
A.—Charter of the Glasgow Royal Infirmary	57
B.—Laws of Do	60
C.—Do. concerning the admission of patients	65
D.—Tables of Diet	65
E.—Resolutions of the Directors in 1807	66
F.—Reasons of dissent against Resolutions of 1807	67
H.—Copy of a Letter from Sir Astley Cooper on the subject of Clinical Surgery	71
I.—Communication from the Faculty of Physicians and Surgeons to the Directors in regard to Medical Monopoly .	71
K.—Remarks on the Faculty's communication by the attending Physicians of the Hospital	72
L.—Report on the necessity of an Hospital Superintendent	75
M.—Representation of the attending Physicians and Surgeons on the duties of the Superintendent	78
N.—Final report of the Committee of Directors on the above subject	81
O.—Tabular list of the Mortality of Empires, Provinces, Cities, &c., with the authorities, &c. attached	83
P Tabular list of diseases treated in the Surgical Wards Nos. 7, 8, and 12, of the Infirmary, from May 1st 1820, to May 1st 1831	84
Q.—Tabular list of operations in the above Wards during the above period	83
R.—Tabular list of deaths in Do. during Do	86



