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Title: Certain Departments of existing Medical
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**REPORT OF THE COMMITTEE FOR UP GRADING OF
CERTAIN DEPARTMENTS OF EXISTING MEDICAL
INSTITUTIONS IN INDIA.**

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I.—EXTRACT FROM THE REPORT OF THE ALL INDIA
MEDICAL INSTITUTE COMMITTEE

**EXTRACT FROM THE REPORT OF ALL INDIA MEDICAL
INSTITUTE COMMITTEE.**

The Committee is now convinced that the only method of securing a proper type of personnel, both in the higher and in other grades of the teaching personnel would be :—

- (a) to immediately upgrade and develop certain departments of study suitable in existing medical institutions and to afford all facilities to such institutions for training the personnel and for affording facilities to those of the senior grades to equip themselves better ; and
- (b) to send some of the senior personnel for foreign study with a view to better equip themselves to work in these upgraded departments of study in existing institutions. In upgrading these departments in institutions it would be necessary to give grants for additional buildings, equipment and personnel that may be required to suitably man these departments, both for purposes of research and higher studies.

The Committee is of opinion that this is the only possible method left open for securing within the shortest period of time such personnel as may finally be selected for the All India Medical Institute.

The Committee would like to make it clear that in upgrading these departments in institutions and in affording facilities for the personnel there is no suggestion that any selection is contemplated for the proposed institute at this stage. The object the Committee has in view is that such personnel should take their chances along with others in the selection to be made later for the personnel of the Institute. In pursuance of this directive the Committee would suggest to the Government the desirability of appointing a small committee to report, after survey of existing institutions with this object in view, and to recommend within a short period of time the steps that may be taken on the lines suggested above and to achieve the object in view.

2.—GOVERNMENT ORDER APPOINTING
THE COMMITTEE

GOVERNMENT ORDER APPOINTING THE COMMITTEE.

No. F. 3-32/47-PR.
GOVERNMENT OF INDIA,
MINISTRY OF HEALTH.
New Delhi, the 22nd May, 1948.

From

R. F. Isar, Esquire, I.C.S.,
Deputy Secretary to the Government of India.

To

Sir A. Lakshmanaswami Mudaliar,
Vice-Chancellor, Madras University, Madras.

SUBJECT :—*Committee for the upgrading of certain Departments of Medical Colleges in India.*

Sir,

I am directed to say that the Government of India have decided as part of a scheme to establish an All-India Medical Institute, to constitute a Committee consisting of the following members, to consider the question of upgrading certain Departments of some of the existing Medical Colleges in India :—

1. Sir A. Lakshmanaswami Mudaliar, M.D., L.L.D., D.Sc., F.R.C.C.G., F.R.C.S., Vice-Chancellor, University of Madras—(Chairman).
2. Dr. V. R. Khanolkar, Director of Pathological Laboratories, Tata Memorial Institute, Bombay—(Member).
3. Dr. R. N. Cooper, Chark Clinic, Queens Road, Opposite Charni Road Station, Bombay—(Member).
4. Dr. T. N. Banerjee, Patna Medical College, Patna—(Member).
5. Dr. R. Viswanathan—Member—(Secretary).

The Government of India would be glad to have the recommendations of the Committee on the following points in particular :—

- (1) The departments in the existing Medical Colleges in Provinces that can be upgraded without difficulty for purposes of research and postgraduate teaching.
- (2) The nature and extent of extensions, if any, to the present buildings that will be involved in such upgrading together with estimates of cost involved.
- (3) The amount of additional equipment that will be required for such upgrading.
- (4) The additional staff, including Research Fellows, required.

2. The Report of the Committee may kindly be submitted to the Government of India as soon as possible.

3.—CIRCULAR LETTER SENT
BY
DR. JIVRAJ N. MEHTA

BY AIR MAIL.

No. F.3-32|47-PR.

MINISTRY OF HEALTH,
GOVERNMENT OF INDIA.

New Delhi, the 18th March, 1948.

Dear

The Provincial Governments are being addressed in regard to the report of the Committee on the establishment of the All-India Medical Institute. The first step to be taken is with reference to the upgrading for purpose of post-graduate teaching, and medical research of the existing medical colleges, *i.e.*, those which have been fully established for some time. Five copies of the report of the Committee together with the Dissenting Minute are being sent to you under separate cover so that the Dean of each medical college—whether Government or non-Government in your province may be supplied with a copy.

As it is highly desirable that the work of the upgrading may commence as early as possible, I would request you to convene a conference of the Principals of those medical colleges in your province which have been already fully established and ask each of them to submit a statement immediately giving information as under :—

1. The departments (one or two or at most three that can be upgraded without difficulty for purposes of research and post-graduate teaching ;
2. The nature and extent of extensions, if any, to the present buildings that will be necessary for such upgrading together with estimates of cost involved (such estimates may in the first instance be on cubage basis ; more detailed estimates being sent later) ;
3. The list of the existing equipment and that of the additional equipment that will be required for the department or departments (clinical as well as non-clinical) that may be desired to be upgraded (In such list should not be included equipment that may be deficient in the other departments of the institution) ; and
4. The additional staff, including Research Fellows, required ; such staff being wholetime without the right of private practice.

Arrangements are being made for the appointment of a small Committee to go round to inspect the institutions and to meet yourself, the Principals and staff of the institutions concerned. To enable the Committee to submit a comprehensive report on such upgrading, you will please see that details of cost are given in such details as may be possible. The College and/or Hospital authorities concerned should get plans prepared of

those buildings of theirs showing extensions that can be easily effected so that the Committee may discuss them with the authorities concerned. On account of the scarcity of building materials, the Principals will naturally see that they recommend such extensions only as may be easily carried out. Immediacy of execution should be the principal criterion. As regards equipment that may be necessary for such upgrading the lists may include items of equipment required from teaching as well as research points of view indicating at the same time the approximate cost thereof.

The additional staff required should be shown in detail, indicating the scale of salaries proposed to be paid to them and those at present paid to wholetime teachers in the clinical and non-clinical departments as the case may be. The Principals may be also requested informally to ascertain which members of their existing staff would be prepared to take up an appointment on a full time paid basis without right of private practice, so that the Committee to be appointed can also confer with such staff during their tour of inspection.

It would be also necessary to enlarge the library, both by purchase of books and by subscription of medical and scientific journals particularly for the subjects to be upgraded and allied thereto. A statement of the books and journals so required may also be prepared showing cost for the information of the Committee. I would request you to move early in the matter and formulate the proposals as early as possible. I would like to be informed by the middle of April of the proposals you may intend making in this regard.

It would be helpful to the Committee if lists could be sent—preferably six—of the articles of original work by the members of the staff published in medical journals, as also six-copies of the annual report for the previous year of the Colleges and Hospitals proposed to be upgraded.

Yours sincerely,

(Sd.) J. N. MEHTA.

4.—INAUGURAL ADDRESS BY THE HON'BLE
MINISTER OF HEALTH, GOVT. OF INDIA

HEALTH MINISTER'S INAUGURAL ADDRESS.

I consider it a great privilege and pleasure to be associated with the inauguration of the Upgrading Committee because I feel that its work will exercise a significant and a lasting influence on medical teaching in India in the years to come. While I realise that my lack of knowledge of medicine necessarily limits my range of appreciation of the technical nature and scope of the problems with which you, Sir Lakshmanaswami, and your colleagues will have to deal in the next few months, it seems to me that it will not be inappropriate to lay before this gathering of distinguished medical men the reactions of a person who, as a social worker of many years has had and continues to have many opportunities of contact with men and women in diverse walks of life and can perhaps claim to reflect in some measure the hopes and aspirations of the people for a speedy and successful advance in the field of public health and their active sympathy with all measures designed to promote the early realisation of such advance. The development of medical education and research on sound lines is a pre-requisite to any projected expansion of health services in the country and the task on which the Committee is entering today is therefore one of great significance, importance and interest to our people.

It may not be out of place to say a few words regarding the genesis of this Committee. The idea of developing postgraduate training facilities in medicine on a sufficiently large scale to enable the country to meet its own needs as far as possible was emphasised by the Bhoré Committee in its report. That Committee recommended that the steps taken to achieve this end should include (a) an overseas training programme whereby a relatively large number of selected men and women doctors can be given opportunities to obtain intensive training under specialists to Western Countries, (b) the establishment, in the first instance of one large All India Medical Institute for providing teaching and research facilities in all the major branches of professional education for health workers, (c) the provision, at a later date, of three or four similar institutes in other parts of this vast sub-continent and (d) the expansion of existing departments for special subjects in provincial centres, with the help of the Central Government, in order to enable these centres to function on an All India basis. The last recommendation also included the suggestion that, in view of the special geographical distribution of certain diseases such as filariasis and leprosy, provincial centres for the development of special facilities for teaching and research in these subjects will have to be established in suitable areas where abundance of clinical material and other favourable conditions exist. The Government of India have accepted in principle the need for promoting the provision of adequate training facilities in the medical field in India itself and will, along with Provincial Governments, explore all possible means of achieving this end.

An overseas training programme has been functioning since 1946. In January 1947, a special Committee under the Chairmanship of Sir

Lakshmanaswami Mudaliar was appointed in order to put forward detailed proposals for the establishment of an All India Medical Institute. One of the members of this Committee was my friend Dr. Jivraj N. Mehta and other was Dr. V. R. Khanolkar who, as you all know has long been associated with medical education in this country. They felt, and I believe wisely advised, that the development of provincial centres for postgraduate training and research in special subjects must take precedence even over the establishment of All-India Medical Institute. In the first place it is more economical in these hard times to expand existing facilities and make them available to the country as a whole than to start new schemes. Secondly these provincial centres may, in a short time, be expected to assist actively in the production of trained workers in their special subjects, who will form a reservoir on which to draw when the question of staffing the proposed All India Medical Institute comes up for consideration. In any event the absence of adequately trained workers is a definite bar to progress and must be sought to be made good as soon as possible.

Dr. Jivraj Mehta and Dr. Khanolkar therefore submitted a dissenting minute to the Majority report of the All-India Medical Institute Committee urging the establishment of the present Upgrading Committee as a preliminary step for the exploration of the possibilities of organising provincial centres of teaching and research on the lines already indicated. The Government of India accepted their suggestion. But here I would like to say that I personally do not want the establishment of the First Class Medical Institute to be delayed a moment longer than necessary and I sincerely hope that the Upgrading of our existing institutions is only a step forward towards the achievement of the larger aim, because we may not remain inactive simply because building material or necessary finance is not immediately available to us.

It is fortunate that Sir Lakshmanaswami Mudaliar was the Chairman of the All India Medical Institute Committee and that he is now taking up the work of the Upgrading Committee in the same capacity. His wide experience of education both in the medical and general fields as Principal of the Madras Medical College and Vice-Chancellor of Madras University, his work on the Bhole Committee as a member and as Chairman of the Professional Education Sub-Committee, and his association with many committees in his own province covering the fields of professional training and expansion of health services make him eminently suitable for the task he is now taking on. His colleagues are all distinguished workers in their own special fields and I have no doubt that their labours will result in the early formulation of proposals which will help to shape governmental policy in this particular sphere for many years to come.

I am diffident about making any remarks about the special problems with which the Committee will deal. I should like to say, however, a few words about the type of doctor that, in my view, the community needs and would also like to stress the importance of incorporating research as an integral part of the teaching programmes of the new departments proposed to be established. A doctor needs, of course, an adequate measure of theoretical knowledge, practical experience and technical skill in his own

subject. In addition what we lay people would like to see is that the medical man or woman is imbued with a sufficiently wide outlook to enable him or her to view the sickness of the patient not merely as a specific pathological condition associated with certain parts of his body but as a departure from normality resulting from his maladjustment to the totality of his physical and social environment. I feel that the doctor who has developed such vision will naturally look beyond the hospital and its diagnosis facilities for the interpretation of the disease he is dietetic and other habits of his patient will all come within his range of observation. The urgency and importance of preventive work in the widest sense of the term will then be brought home to the doctor in a manner which, I am afraid, is hardly happening today in respect of many busy practitioners, whose sole concern is to administer such remedial measures as are, in their view, required by the patient, for the alleviation of suffering and for affecting a reasonably satisfactory cure of the condition for which medical advice has been sought. In my opinion an integrated programme of institutional and demiciliary service, each supplementing the other, will alone serve adequately the needs of the people. In the development of such a service, whether it be in the home or in the hospital, the idea of prevention should permeate the whole course of medical supervision, provision being made simultaneously for the patient and his relatives being given health education to enable them to take an active and intelligent part in the effective execution of the programme of medical care. Such a broad based scheme of community health services includes, of course, a large number of health workers besides doctors. But it is the doctors who are naturally the leaders in a team of such workers and, unless they themselves are imbued with the ideas I have indicated, I see little chance of an advance on sound lines.

I understand that, in India, the amount of active research carried on in the teaching departments of medical colleges has been, in the past altogether meagre. This defect must be remedied. This creation of an atmosphere of research in medical teaching institutions is of great importance. In this connection I may quote the words of Sir Thomas Lewis, a distinguished medical scientist and teacher of England.

“Teaching and research feed upon each other, they grow together, establishing in a given school tradition, which, once established, brings continuous and lasting fertility. A school possessed of such a tradition is one in which men with progressive ideas tend to congregate, in which there is always a group of thinkers and active workers. Such tradition engenders and maintains outside contacts—contacts with departments of ancillary science, with progressive clinical and pathological departments of other schools, with notable workers and departments of work in all parts of the world It is hardly possible to exaggerate its importance ; the right tradition is a priceless asset. Without research a teaching school takes the standing of a school of technology.”

I have no doubt that the problem of stimulating research in the different departments to be upgraded in provincial medical colleges will

receive consideration at the hands of the Committee. Without creating an atmosphere of research it will hardly be possible to provide postgraduate training of the requisite quality. Further, the need is great for a growing body of trained research workers to tackle the many problems that confront both the medical profession and medical administrators today. Apart from basic research in laboratories the need is equally great for the field investigation of community health problems as well as for the working out of new techniques in health administration in order to utilise, for the benefit of the people, the new knowledge which advancement of science makes available to us. And while on the subject of research I wonder whether it will not be within the bounds of possibility to establish some of our research centres in village areas. After all the mass of our population lives in the villages and it is in reference to their needs, both physical and psychological, that we have to bend all our energies, not only for giving proper medical relief but also for education which will prevent disease. This can only be done if our medical profession is fully conversant with their needs. It seems to me that we of the towns are really far removed from our brothers and sisters in the villages which constitute the real India. This gulf must be bridged and I have always felt that those most eminently fitted to bridge it are the members of the noblest of the service professions. May it not be possible then for each educational institution to have a village institute run under its aegis where the students could learn and perhaps be inspired for the service of village folk? Such an institute would really constitute the best field for research and, in my opinion, no medical student should graduate and no post-graduate training should be recognised as complete without work and study in a village institute.

May I also be permitted to say how necessary it is, in my humble opinion, to raise the standards of training not only of our doctors but also of the entire personnel of hospitals. I believe that we shall be rendering a service to the country if we insist on education in hygiene and sanitation in our hospital staff from the lowest rung of the ladder. I would ask you to pay special attention to the great profession of nursing. It needs fostering and protection. No hospital can be efficiently run without nurses. There must be first class training for them and their status, so woefully low at present must be raised.

I have referred briefly only to certain aspects of the tasks that await you. I have no doubt that, under the able guidance of Sir Lakshmanaswami, and with the background of experience which each one of the members of the Committee possesses, the proposals that are put forward will be of valuable assistance to the Central and Provincial Governments advancing the cause of medical education in this country on sound lines.

May I say again how happy I am to be associated with the inauguration of the work of this Committee? I wish your endeavours every success and shall look forward eagerly to seeing your report.

AMRIT KAUR

5. REPORT

REPORT OF THE UP-GRADING COMMITTEE.

Introduction.

1. *Constitution.*—The Government of India in the Ministry of Health, in their communication No. F. 3-32/47-PR, dated the 22nd May, 1948, appointed a Committee consisting of the following members to consider the question of upgrading certain departments of some of the existing Medical Colleges in India, which the Government had in view as part of the scheme to establish an All-India Medical Institute :—

1. Sir A. Lakshmanaswami Mudaliar, Vice-Chancellor, University of Madras—(Chairman).
2. Dr. V. R. Khanolkar, Director of Pathological Laboratories, Tata Memorial Institute, Bombay—(Member).
3. Dr. R. N. Cooper, Charak Clinic, Queen's Road, Bombay—(Member).
4. Dr. T. N. Banerjee, Patna Medical College, Patna—(Member).
5. Dr. R. Viswanathan, Additional Deputy Director General of Health Services, Delhi—(Member-Secretary).

2. *Terms of Reference.*—In the communication constituting the Committee, the Government of India desired to have the recommendations of the Committee on the following points in particular :—

1. The Departments in the existing Medical Colleges in Provinces that can be upgraded without difficulty for purposes of research and postgraduate teaching ;
2. The nature and extent of extensions, if any, to the present buildings that will be considered necessary for such upgrading, together with estimates of cost involved ;
3. The amount of additional equipment that will be required for such upgrading ;
4. The additional staff, including Research Fellows, required.

The Committee was asked to submit its report to the Government as soon as possible.

3. *Questionnaire.*—The Committee held its first and preliminary meeting in Bombay on the 21st of June, 1948, which was addressed by the Hon'ble the Minister for Health of the Government of India, Rajkumari Amrit Kaur, and attended by the Director General of Health Services, Dr. K. C. K. E. Raja. Doctors Gilder and Jivraj N. Mehta were also present by special invitation and took part in the deliberations of the Committee. The Committee considered and approved the questionnaire *vide* appendix I and it also settled the list of institutions to which they were to be issued. Copies of the questionnaire were sent to the heads of the various institutions, and replies were called for by the end of August,

1948. The Committee is thankful to the authorities in charge of these institutions for furnishing full and complete answers to the questionnaire by the stipulated time.

4. *Meetings and proceedings.*—The Committee met on several occasions and had its final sittings at Madras on the 29th and 30th November, 1948 at the University Buildings, Chepauk, Madras, to formulate its report. The Director General of Health Services was also present during part of the discussion of the draft report and helped the Committee with valuable suggestions.

5. *Tours and visits.*—The Committee visited the various Medical Institutions in the following places :—

Bombay :

Grant Medical College, Bombay.
G. S. Medical College, Bombay.
Tata Memorial Hospital and Research Institute.
The Haffkine Institute.
Armed Forces Medical College, Poona.
Dental Colleges in Bombay.

Lucknow :

King George's Medical College, Lucknow.

Bihar :

Prince of Wales Medical College, Patna.
Mental Hospital, Ranchi.

Bengal :

Calcutta Medical College, Calcutta.
R. G. Kar Medical College, Calcutta.
All-India Institute of Hygiene and Public Health.
School of Tropical Medicine.

Madras :

Madras Medical College.
Stanley Medical College.
Vellore Medical College.
Tuberculosis Hospital and Sanatorium, Madanapalle.

Mysore :

Mental Hospital, Bangalore.

The Committee during the course of its visits to the institutions proposed to be upgraded availed itself of the opportunity to discuss questions pertaining to those institutions with the Ministers of the Provinces concerned, wherever possible.

RECOMMENDATIONS.

After a scrutiny of the answers received to the questionnaire and detailed examination of the facilities available at the various centres and discussion of the various aspects of the issues involved, with the authorities concerned, the Committee makes the following recommendations both in general and with particular reference to the institutions in which certain departments are selected for upgrading.

Part I.

The Committee visited the various medical institutions in Bombay, Lucknow, Patna, Ranchi, Calcutta, Madras, Vellore, Madanapalle and Bangalore. The Committee noted with regret that there had been a certain amount of set-back in the standards of teaching at some of these institutions due largely to conditions brought about during the war period, when equipment was not readily available and financial resources were not adequate, and as a result of the influx of a large number of refugees, particularly in the North Indian Universities. This had created great problems concerning accommodation in the hospitals and the amount of work thrown on the medical staff, so that consequent on congestion, lack of proper facilities and inadequacy of staff, scientific methods of teaching could not always be rendered possible.

2. The Committee also noted that many Universities had started passing regulations for the award of higher degrees like M.D. and M.S., and Diplomas in various specialities. It was unfortunate that no concerted plan was evolved with the result that wide variations exist between different Universities in regard to conditions that should be fulfilled before a candidate could apply for these higher degrees or diplomas. In the opinion of the Committee, immediate steps should be taken to see that a uniform standard in regard to these qualifications is evolved if wide disparity is not to exist between different Universities awarding the post-graduate degrees and diplomas. It was also noticed that certain Universities, without adequate facilities being available, instituted these degrees and diplomas, with the result that the thorough training that was necessary before a candidate appeared for these degrees or diplomas could not always be guaranteed. The Committee therefore feels strongly that, as an incentive for upgrading, the conditions with regard to postgraduate study must be made more definite and uniform standards laid down, and that for this purpose an All-India Council of Postgraduate Medical Education consisting of representatives of the Universities and the Government of India, who are competent to give expert advice on postgraduate education, should be constituted.

3. The Upgrading Committee wishes to take this opportunity to state that, after its visit to various Medical Institutions in the country, it is more than ever convinced of the urgent necessity for establishing an All-India Medical Institute as visualised in the Bhoré Committee's report. Far from making that necessity less urgent, the upgrading of some of these institutions would in the opinion of the Committee make it even more imperative and immediate steps should therefore be taken for the establishment of such an Institute. The Committee hopes that action in

this direction will be taken immediately so that the foundation for such an Institute may be laid at least in the next academic year. To expedite this process the following suggestions are put forward for the consideration of the Government of India :—

- (a) Early steps should be taken to acquire a suitable site for the Medical Institute, and the necessary operations for levelling the ground and for anti-malaria work round about should be undertaken ;
- (b) As contemplated in the All-India Medical Institute Advisory Committee's report, before the plans are finally approved, a small Committee consisting of medical men with an architect and an engineer should visit certain of the post-graduate institutions abroad and study the details regarding their work and construction with particular reference to operation theatres, laboratories, animal rooms, research sections, library, postgraduate study facilities, methodology etc. The Committee feels that such a visit will be conducive to the construction of an efficient All-India Institute and will in the long run prove to be greatly economical.

4. The Committee having visited the institutions at the different centres, is of opinion that in some of the institutions immediate upgrading is not possible, and that while good work is being done there, the conditions are not quite satisfactory for the upgrading of any of the departments. In some cases additional buildings are contemplated which should be finished before the upgrading of the particular department could be recommended. In other cases, the schemes submitted require further consideration and the necessary personnel has to be secured before a definite recommendation for upgrading can be made. It was brought to the notice of the Committee that in some of these instances, certain senior Officers had been sent on deputation and were expected back in the course of the year. The Committee would suggest that when these officers have returned and taken up their duties, the question of upgrading certain of the departments may be further considered.

5. In making this suggestion, the Committee was particularly anxious to so formulate its recommendations that such institutions as could be immediately upgraded with minimum cost during this year, may be taken up first and that institutions which could be upgraded in the next academic year may be given second priority. The Committee wishes to make it clear that the upgrading of the institutions so far considered is by no means exhaustive and that it is to be hoped that from year to year some or other of the Departments would be upgraded taking due notice of—

1. the geographical location of the Department ;
2. the need of avoiding overlapping in the same speciality, particularly in centres situated too close to one another ;
3. the need to upgrade departments where trained personnel are available ; and

4. the requirements of the increasing number of medical colleges with respect to teachers in certain subjects.

With reference to the last remark, it may be stated that the sudden increase in the number of Medical Colleges has thrown an undue strain on the already small number of well-qualified teachers. It has led to a great deal of dislocation of the staff in most of the Medical Colleges and promising young persons have been drawn to these new institutions so that the work of the older institutions has been to a certain extent hampered. The deficiency of trained personnel is obvious in the pre-clinical and the clinical laboratory subjects. Thus the Committee found that trained teaching personnel in Anatomy, Physiology, Pharmacology, Biochemistry, Pathology, Bacteriology were sadly needed in most of the Medical Colleges and it is just in these subjects that there has not been sufficient opportunities for people to be trained to the higher grades. The Committee has taken due note of this in making its recommendations wherever it was possible to suggest upgrading of such Departments. The Committee also felt that there was urgent necessity for training personnel of a high grade in the departments of Public Health and Social Medicine, and in Obstetrics and Gynaecology. Too much emphasis cannot be laid on this aspect of the question. The problems of Public Health, Industrial Hygiene, Social Medicine are so obviously important that the Committee is confident that its emphasis on them will be appreciated. Likewise, so far as Obstetrics and Gynaecology is concerned, the need for well-trained Obstetricians, who will take their place in Maternity and Child-Welfare schemes is equally obvious in view of the high infantile and maternal mortality.

6. Under the terms of reference, the Committee is asked to take note of the existing departments in the medical colleges, that can be upgraded without difficulty for purposes of research and postgraduate teaching. Plans for bringing into existence new departments did not therefore come within the strict terms of reference.

7. The Committee noted that certain of the Provincial Governments had large schemes on hand, which they hoped to implement within the next two years. When such schemes have been implemented, the possibility of upgrading certain of the departments should be reviewed in the light of the facilities then available. The Committee has had strictly to keep in view, in making its recommendations, the possibilities of an immediate start in certain of the departments; the recommendations are based therefore on the conditions prevalent in such departments at the time of visit and with a view to upgrading them from the next academic year.

8. The Committee discussed with Provincial Governments and authorities concerned, the question of financial liability involved in upgrading departments. On the basis of such discussions, the Committee recommended:

1. that the question of medical relief and instruction to undergraduates should be the responsibility of the Provincial Government or the authorities of the College or institution concerned;

2. that financial assistance may be expected from the Central Government in part or whole towards the following objects :—

- (i) Buildings and equipment necessary for purposes of research and postgraduate teaching ;
- (ii) Personnel-technical and non-technical—required for such purposes.

9. The Committee noted that in some of the medical colleges, the staff in pre-clinical subjects like Anatomy, Physiology, Pathology, Bacteriology, Pharmacology and Biochemistry were not full-time members. The Committee feels that such Departments should be staffed by whole-time professorial staff who must be paid adequate salaries to compensate them for any loss of private practice. The scale suggested by the All-India Medical Institute Committee would appear to be the minimum suitable.

10. The Committee also noted in the laboratories it visited that the work performed is not only of the hospital concerned but of many other institutions in the city or of rural, unconnected with the particular teaching institutions in the city or of rural, unconnected with the particular teaching, preferably in another public health laboratory. Any form of research in any subject requires the constant help of the heads of these departments, and from that point of view as well as from the point of view of the interest of the Department concerned, the professorial staff should be full-time and must be primarily concerned with the work of the teaching institution and research.

11. All upgraded clinical departments should have laboratories for bacteriological, pathological and bio-chemical examinations.

12. The Committee is of opinion that the person responsible in the main for post-graduate teaching and research should be a whole-time officer and should be financed by the Central Government. He should be relieved of all other duties, and if his services are required for undergraduate or other teaching work, it should not be more than 6 hours a week. Such a person may in addition to the existing staff, or such staff as is necessary to supplement the work of the Department should be appointed by the Provincial Government. It is the hope of the Committee that when the graduate school of instruction develops, it will have an entity of its own, and the head of the department will have full charge of this and will have no collateral duties in the undergraduate school.

13. Taking into consideration the practical difficulties in immediately implementing these suggestions, the Committee would suggest that as an immediate measure certain persons should be selected to be in charge of the post graduate teaching and research in the upgraded departments, and that allowances should be paid by the Central Government for the additional duties developing upon them. If there are any difficulties, financial or otherwise, for immediately implementing the proposals, the Committee would recommend that the proposals should be proceeded with and that the persons who are at present in charge and who are found suitable to be in charge for the time being of those departments, should be given special allowances for the special duties.

14. The Committee recommends in general the following grades :—

Whole-time heads of departments without
the right of practice in any depart-
ment. Rs. 1600—100—2000.

Professorship with restricted practice
in the Pay Clinics. Rs. 1000—100—1500.

It may be left to the professor concerned to accept either alternative. The Committee would like to make it clear that restricted practice in the pay clinic means practice out of the regular hospital duty hours, but within the hospital so that any special cases may be referred by the medical profession to the doctor concerned, and in such conditions, the doctor should be entitled to see and treat these patients in the hospital only, provided a moiety of the fee is given to the institution and the remainder retained by the medical officer concerned.

15. The Committee is of opinion that the ordinary age of retirement should be raised to 58 in the case of persons accepted as whole-time officers and may be extended to 60, if otherwise fit.

16. The Committee would also suggest that, in the case of officers working in these upgraded departments, facilities should be given for a tour of foreign countries for periods ranging from 4 to 6 months once in three years. Attendance at conference and congresses in their subjects or in subjects allied to their speciality should be considered as duty.

17. The Committee recommends that a total of 50 research fellowships should be made available every year to be distributed to the different upgraded departments. The actual number will depend upon the qualifications of the candidates and the particular subjects which they may choose and the number of places available in those departments. The selection of scholars will be done by a Central Board and will be based entirely on merit. A certain amount of elasticity must however be allowed in choosing the proper men to cater to the needs of respective provinces and posting them to the different centres.

18. As regards foreign scholarships, the Committee is of opinion that with the establishment of these up-graded departments and with the inauguration of the All-India Medical Institute, it will not be necessary for the Government of India to send students abroad for specialisation in these subjects ere long. At the same time, a certain number will have to be sent abroad to enable them to get themselves familiar with the more recent advances and to know the working of these departments in foreign countries. The Committee is of opinion that the persons selected for study tours abroad should have preferably higher qualifications in the respective subjects and some years of experience in the specialities after having obtained the higher qualifications. The main object of sending persons to foreign countries should be not to obtain degrees or diplomas but to study intensively the work and methodology of the various departments and the more recent advances in the specialities concerned.

19. In regard to research fellowship, it is suggested that such fellowships should primarily be given for the study of those subjects for which no facilities exist in this country and the period of study should be determined taking into consideration the nature of the subject and the terms to be put in the particular University. In this respect also a certain amount of latitude must be allowed so that a promising student should not be debarred from continuing the study, when recommended by the head of the institution, in the interests of the education and training of the particular candidate concerned.

20. The Committee wishes to make it clear that the requirements suggested with respect to the departments recommended for upgrading are essential. As such it would be inadvisable to make any reduction either in the number of staff and their salaries or in the equipments and extension to buildings recommended by the Committee.

Part II.

During the course of its tour, the Committee had an opportunity to interview individual workers in different specialities. After such interview and discussion, the Committee feels that these workers, if given adequate facilities, would be able to turn out better and more useful work. The Committee would commend to the Government that facilities may be afforded to the following to pursue their work of research :—

1. Dr. P. N. Wahi, Professor of Pathology, Agra Medical College.
2. Dr. Dixit, Professor of Physiology, Poona Medical College.
3. Dr. Betts, Christian Medical College, Vellore.
4. Dr. S. R. Bose, Professor of Botany, R.G. Kar Medical College.

Besides those departments which are recommended for upgrading forthwith, the Committee recommend that certain other departments or institutions be also considered which might sooner or later be fit for upgrading.

2. The Committee considers that the establishment of a department of Neuro-Surgery is essential. As doctors from Bombay and Madras have been sent for training in Neurological Medicine, Neuro-Pathology, and Neuro-Surgery, a Neuro-Surgical Unit can be established after the return of these scholars.

3. The Committee is of opinion that the Barnard Institute of Radiology in Madras is one of the best of its kind in the East so far as its plan, organisation, equipment and clinical facilities are concerned. It is, however, felt that sufficient number of trained workers are not available in the department at present. The upgrading of that department should be taken up as soon as properly qualified persons are recruited for work in the department.

4. The Committee was given to understand by the Premier of West Bengal that it is likely that early steps will be taken to open an Institute

of Cardiology with the munificent donation given by a prominent philanthropist. When this a *fait accompli* it may be necessary to utilise the facilities of such an Institute for the study of Cardiology and for the Central Government to render assistance for postgraduate training and research in the subject.

5. The Committee was informed that the Irwin Hospital, New Delhi, is a well-equipped institution with plenty of clinical material. As the establishment of the All-India Medical Institute will take some time it is considered desirable that the possibility of developing one or two post-graduate Departments in Medicine, Surgery or in any of these branches should be explored by the Central Government after the Lady Hardinge Medical College is reorganised on sound and satisfactory basis.

6. Subsequent to its visit to G.S. Medical College, Bombay, the Committee was informed that the pharmacology department of that Institution might be upgraded. The Committee further understands that the Council of Scientific and Industrial Research has sanctioned a research unit in that department. It is also learnt that a Bombay Government Scholar who has been sent abroad for training in pharmacology will on his return be posted to G. S. Medical College. In the circumstances, the Committee recommends that the department might be upgraded after a further review to ensure the conditions obtained above are fulfilled.

7. King George's Hospital and Medical College, Lucknow—The management has stated that it is contemplated that a Department of Experimental Surgery will be opened in the College. Such a Department is not—at present established. It is understood that a doctor has been sent abroad for training in this particular branch of surgery. The Committee would suggest that the management may be asked to submit a report, on his return, on the detailed programme, for the department of Experimental Surgery and on the lines it will be organised and run. There is at present no animal house, and no particular facilities for conducting animal experiments. In the circumstances, the Committee feels that further information should be available and a detailed scheme should be submitted before the subject can be considered.

8. The Committee recommends that the following departments may be considered for upgrading, in the order of priority given in the concluding paragraphs.

1. Physiology Department, Prince of Wales Medical College, Patna.
2. Tata Memorial Hospital and G.S. Medical College, Bombay.
3. Obstetrics & Gynaecology—Government Maternity Hospital, Egmore.
4. Tuberculosis Department, Delhi University.
5. Industrial Hygiene Department, All-India Institute of Hygiene and Public Health, for Industrial Health.
6. Anatomy Department, Madras Medical College.
7. Mental Hospital, Bangalore.

8. Venereal Diseases Deptt., Madras Medical College.
9. Pediatric Department, Grant Medical College, Bombay.
10. Mental Hospital, Ranchi.
11. Department of Thoracic Surgery & T. D. D. Course—Christian Medical College, Vellore, in collaboration with the Tuberculosis Sanatorium, Madanapalle.
12. Social Medicine Department—All-India Institute of Hygiene & Public Health and the Calcutta Medical College to work in collaboration with each other.
13. Mycobiology Section—R.G. Kar Medical College, Calcutta.

The provision of rural and urban health organisations closely associated with the department will be essential.

9 Details regarding departments recommended for upgrading are given below :—

1. *Physiology Department—Prince of Wales Medical College, Patna.*—In this institution the department of physiology is recommended for upgrading. Extension to the building will cost Rs. 72,000 and extra equipment Rs. 55,000. Recurring expenditure to meet the salaries of the staff and contingencies comes to Rs. 52,500. Of the recurring expenditure the Committee feels that a sum of about Rs. 34,050 will be deemed to be the charge consequent on upgrading. Details are given below :—

	Rs.	Average cost. Rs.
1. One Professor	1600—2000	21,000
2. Two Technicians	100—150	3,000
3. One animal attender	35—70	630
4. Two Laboratory Attendants	25—35	720
5. One Peon & one sweeper	25	600
6. One steno-typist	100—150	1,500
7. Laboratory materials expendible.		5,000
8. Library—Periodicals and journals.		1,000
		<hr/> 33,450 <hr/>

Half of recurring expenditure connected with upgrading and the whole cost of equipment will be borne by the Centre.

The professor should be relieved of Principal's and other administrative duties and most of undergraduate teaching.

2. *Tata Memorial Hospital, Bombay.*—The Committee is of opinion that, as the Tata Memorial Hospital serves an All-India purpose and is the best of its kind in India at present, and probably in the east, the possibility of taking it over by the Central Government should be explored. The Institution by its past work has justified itself as eminently fitted for the promotion of cancer research in all its aspects. The Committee is anxious that the work of this Institute should under no circumstances suffer or be lessened; and under the circumstances the Committee thinks that the most desirable thing would be to take the institution over and run it as a Central Government Institute provided the Trustees of Sir Dorabjee Tata Trust continue to give an annual grant of Rs. 3 lakhs. If, however, this is not immediately feasible for financial or other reasons, the Committee suggests that the research work that is being carried on should be strengthened and that the institution should be allowed to develop into a postgraduate and research centre on an All-India basis.

The Committee after careful consideration of the proposals submitted feels that this could best be effected by giving:

1. a building grant of Rs. 3 lakhs which may be spread over a couple of years, the sum of Rs. 1 lakh being given this year;
2. An equipment grant of Rs. 1 lakh likewise spread over two years, an amount of Rs. 30,000 being given this year;
3. a recurring grant based on the scheme, of Rs. 1,00,000 or such part of it as may be utilised in the current year to meet the cost of two stenographers attached to two units, two technicians and one clerk.
4. Early steps may be taken for the appointment of a full time Research Officer on a grade of Rs. 800—50—1200 similar to that of an Assistant Professor in the All-India Medical Institute.

The appointment of such a person is essential and urgent. He could be trained in the various sections which are actively engaged in research at the Institute at present. This would also ensure a continuity of the work in the absence of or on the retirement of Dr. V. R. Khanolkar, who is at present the Director of Laboratories and research.

5. When the Research Laboratories at the Tata Memorial Hospital are upgraded to form a Postgraduate centre in Pathology, it is considered desirable that it should work in close cooperation with the G.S. Medical College whose clinical departments and pathological laboratories should be accessible to the students working in the Postgraduate Centre. The Committee recommends for this purpose a capital grant of Rs. 20,000 and a recurring grant of Rs. 48,000 to the Pathology department of the College to be shared equally by the Centre and the College authorities.

3. *Obstetrics and Gynaecology—Women and Children Hospital, Egmore.*—This institution can in many ways be considered as an All-India institution for purposes of medical education. For several years

this hospital has been a training centre for both undergraduates and post-graduates from different Universities in India. Through the valuable efforts of successive Superintendents, the Hospital has attained an international reputation particularly in obstetrics. The Committee is, therefore, of the opinion that this institution should be considered as an All-India Postgraduate Centre and be given the facilities that are required for this purpose. The Committee recommends the following :—

1. Building—Hostel for 6 men and 6 women
Postgraduates Rs. 1,00,000

The foundations and the plans will however be such as to permit 2 or 3 more floors ultimately accommodating 36 to 48 post-graduates. The scheme should be to add a floor every year till completed. It is expected to cost ultimately Rs. 3.5 lacs. As, however, the portion of the hostel will be utilized for the accommodation of other students who will not come under the upgrading scheme Rs. 2.5 lacs should be borne by the provincial Government.

2. Pathological laboratory—Gas plant 3,000
Equipment, etc. 7,000

Non-recurring—total 10,000

With regard to the Radiology Department, the Committee is of opinion that the cost of equipment necessary for the radiological diagnosis amounting to Rs. 95,000 should be borne by the Provincial Government. This is an essential part of any hospital for Obstetrics and Gynaecology, and we consider it an urgent need for the clinical work of the hospital and for the patients.

Recurring—

Staff.	Rs.
Director and Professor	21,600
Biochemist.	3,600
Clerk-Typist —100—150	1,500
Technician—100—150	1,500
Lab. Attendant—Grade I	812
Lab. Attendant—Grade II	648
Sweeper	414
Radiographer 100—150	1,500
Dark room Assistant	812
X-Ray Attendant	576
Library—Subscription to Journals	1,000
Records Dept. Records Clerk 80—125	1,230
Stenographer—100—150	1,500

36,692

8 fellowships, 2 from the Provinces and 6 from outside.

Provision has also to be made either for a full-time head on Rs. 1,600—2000 or one with restricted practice on Rs. 1000 or as an alternative an allowance may be given to the person in charge of postgraduate work.

As a Part 2 scheme the management has put up proposals for increasing the bed strength of the hospital, involving an expenditure of about Rs. 40 lakhs. The Committee feels that this is essential for the purpose of affording facilities both for undergraduate and postgraduate teaching. This should, however, be the concern of the Provincial Government as it is connected with medical relief.

4. *Department of Tuberculosis, Delhi University.*—The Delhi University is at present conducting a diploma course in tuberculosis diseases for medical graduates and is awarding the diploma of D.T.D. The second batch of students is at present undergoing training. 12 candidates are admitted every year. A scheme for the establishment of a T.B. Institute under the Delhi University has already been accepted in principle by the Central Government. They have made a provision for expenditure this year in connection with the establishment of the Institute. As the Institute will take sometime before it is completed and as the course is already in existence the authorities have forwarded a scheme for the construction of a hostel for the students undergoing the course. The Committee recommends a capital grant of rupees one lakh to the Delhi University for this purpose. As the finances of the Delhi University are met by the Central Government, the Government of India will bear the whole expenditure in connection with the construction of the Hostel.

5. *All-India Institute of Hygiene and Public Health, Calcutta and Medical College, Calcutta.*—The Industrial Hygiene Section of the All-India Institute of Hygiene and Public Health is recommended for upgrading. The subject of industrial health is coming more and more into prominence. The Employees' State Insurance Act, which was passed by the Dominion Parliament, has brought into being a statutory body, the Corporation, which will be responsible for the development of industrial health work on broad lines. The operation of the Act can be extended in due course not merely to industrial workers but also to workers of all types including those who work in offices, commercial concerns and even agricultural labour. A recent amendment of the Factories Act is another legislation which has widened the scope for the organisation and enforcement, on a wider scale, of measures for the safety, health and welfare of workers in factories. In order to promote industrial health development the training of medical personnel in industrial health and the undertaking of research into various industrial health problems will both be necessary. The purpose of upgrading the industrial hygiene section at the All-India Institute of Hygiene and Public Health is to make this a centre for such training and for the inauguration of industrial health research. The authorities of the Institute, in putting forward their proposals, did not include any expenditure on the provision of additional space. It is, therefore presumed that sufficient space is available. For this Section a capital grant of Rs. 20,000 for equipment and a recurring grant of Rs. 42,000 to meet the salaries of extra staff should, it is recommended, be provided.

6. *Anatomy Department, Madras Medical College.*—The Anatomy Department in this Medical College is recommended for upgrading. The Committee resolved to recommend a non-recurring grant of Rs. 25,000 and a recurring expenditure of Rs. 40,200 in connection with this upgrading and the provision of 8 fellowships, 2 of which will be from the Province and 6 from outside. Details of recurring and non-recurring expenditure are given below. As a cold storage room is considered a necessity for all Anatomy Departments for undergraduate teaching as well, the Committee suggests that the Provincial Government should make arrangements to construct it at their own cost without delay. It is expected to involve an expenditure of Rs. 20,000.

Non-recurring.

	Rs.
1. Extensions to building	9,000
2. Library—Initial allotment for books ..	5,000
3. Embryology Laboratory equipment (Microtome, microscope, wax reconstruction apparatus etc.).	5,000
4. Anthropological equipment	1,000
5. Furniture	2,000
6. Air compression injection plant ..	1,000
7. Maceration plant	1,000
8. Osteology workshop	1,000
	25,000

Recurring.

	<i>Average annual cost.</i>	
1. Director of Anatomy Institute ..	1,600—2,000	21,600
2. One Associate Professor of Embryology and History ..	800—1,150	11,700
3. Three Technicians	100— 150	4,500
4. One stenotypist	100— 150	1,500
5. Two peons	25—	600
6. Journals and periodicals ..		1,000
		40,900

The whole of non-recurring and half of recurring expenditure will be borne by the Central Government.

7. *Mental Hospital, Bangalore.*—The Committee is of opinion that the facilities available here are such as to render it easily possible for the Department to be upgraded. The Management has submitted a scheme which includes a non-recurring expenditure of Rs. 1.60 lakhs, and a recurring expenditure which comes to Rs. 20,350. The non-recurring expenditure is for equipment. It is understood that the Government of Mysore are proceeding with the construction of additional buildings, where necessary, at a cost of Rs. 4 lacs and it is on this presumption that the Committee has examined the proposals. The main item of expenditure is an electro-encephalograph, a diagnostic X-ray Unit with all accessories and surgical instruments, for which an expenditure of Rs. 1 lakh is anticipated. The apparatus and instruments for the psychological laboratory with various appliances for Orthopedic and sensory defects, etc. would cost Rs. 50,000. A library grant of Rs. 10,000 is also asked for. The Committee would recommend this expenditure and would suggest that 50 per cent. of it should be borne by the Mysore Government and 50 per cent. by the Central Government.

Allowances have been recommended for the staff, which amount to a sum of Rs. 4,100. Under contingencies it is recommended that a sum of Rs. 1,000 be given for the annual purchase of journals and books, and a sum of Rs. 2,000 for replacing old appliances and purchase of films and other contingent expenditure. This additional recurring expenditure will be shared equally by Mysore and Central Governments.

8. *Veneral Diseases Department, Madras Medical College.*—The Principal, Medical College, Madras, had sent proposals for the upgrading of the Veneral Diseases Department of the College. The Committee visited the Department and had discussions with both the Surgeon General and Dr. R. V. Rajam, the Medical Officer in Charge. In the light of the discussions modified proposals for the upgrading of the department were sent to the Committee. Though the Committee was strongly in favour of upgrading the department, it decided not to recommend its upgrading because of Dr. Rajam's impending retirement. Since submitting the report the Committee has been informed by the Director General of Health Services that the Madras Government has been pleased to extend Dr. Rajam's term of office by one year and with the possibility of another extension for the same period. In the circumstances the Committee desires to recommend the Veneral Diseases Department of the Madras Medical College for upgrading.

In his original proposals Dr. Rajam had suggested the setting up of a serological laboratory in the V.D. Department itself. In the modified proposals, however, he favoured the idea of having a high grade serological laboratory set up as part of the bacteriological department in the Madras Medical College. He has stated that there is sufficient accommodation at present available for the establishment of this laboratory.

The present staff in the department consists of one specialist who is in charge of the department, 3 paid Assistant Surgeons, 1 Honorary Assistant Surgeon, 2 House Surgeons, 7 Nurses, 1 Laboratory Technician, 2 Social Workers, 1 Typist, 9 Nursing Orderlies and 8 menial staff. The Committee recommends that the Director of the Department should be

whole-time on a scale of pay of Rs. 1,600—100—2,000 and should be debarred from private practice. It is suggested that the present incumbent, Dr. Rajam, might be given an allowance over and above his present pay so as to equate his emoluments to Rs. 1,600/-. The Committee further recommends that a fairly senior officer with experience in venereal diseases should be employed in the department in the Provincial Civil Surgeon's grade so that he will be able to take the place of Dr. Rajam when he retires. One Statistician on a pay of Rs. 250—35—500, 1 Research Assistant in the Assistant Surgeon's Grade, 1 stenographer on Rs. 125—300, a Record Keeper on Rs. 60—120 are also recommended. This will involve a total recurring expenditure of Rs. 31,620/- per annum. A non-recurring expenditure of Rs. 3,000 for a typewriter and furniture is also recommended.

The Committee agrees to the proposal of locating this serological laboratory in the Department of Bacteriology of the Madras Medical College. A non-recurring grant of Rs. 30,000 for an animal house and Rs. 25,000/- for equipment for the laboratory and recurring grant of Rs. 11,280/- per annum to meet the salaries of a serologist in the Provincial Civil Surgeon's grade of Rs. 450—750, a Research Assistant on an Assistant Surgeon's grade of Rs. 250—450, 2 technicians on a scale of Rs. 75—150 and 3 menial staff on Rs. 30—50 are also recommended.

9. *Pediatric Department of Grant Medical College, Bombay.*—This Department is in charge of a senior experienced physician and may be upgraded to provide for postgraduate study and research. The Government of Bombay have suggested the construction of a new ward of 50 beds at a cost of Rs. 1,50,000/- and the necessary staff to run the beds. The Committee feels that this should be the responsibility of the Provincial Government, as this is in furtherance of medical relief. The Committee is, however, prepared to recommend the actual expenditure that will be needed—capital and recurring—for the laboratory and for the additional staff for purpose of postgraduate teaching and research. A grant of Rs. 20,000/- non-recurring for laboratory equipment is recommended. So far as the additional staff is concerned, the Committee would suggest the appointment of a Professor on Rs. 1,000/- with restricted practice and two Registrars with no practice on a pay of Rs. 500/-. It is suggested that the normal period of appointment for the Registrar should be three years, and in exceptional cases, it may be extended to five years and not more. The Committee recommends that the non-recurring expenditure indicated above should be borne by the Central Government, the recurring expenditure being met 50 per cent. by the Provincial Government, and 50 per cent. by the Centre.

10. *Inter-Provincial Mental Hospital, Ranchi.*—This hospital is governed by the provisions of the Ranchi Mental Hospital Act of 1922 and administered by a Board of Trustees. After the Govt. of India Act, of 1935 came into being, the hospital was placed in the Federal Legislature List. The Central Govt., however, entrusted to the Govt. of Bihar certain of its functions. The hospital is at present administered by the Bihar Government.

The Board of Trustees, however, at a meeting held on the 1st February, 1947, passed a resolution requesting the Government of India to withdraw the powers delegated to the Government of Bihar so as to allow the control of the Hospital to pass directly under the Central Government.

The institution was originally called Ranchi European Mental Hospital. The name was subsequently changed to Inter-Provincial Mental Hospital, Ranchi. The hospital is now open to all people irrespective of caste, creed or race.

The Committee feels that this institution can be upgraded to a first class training centre in Psychiatry. For this purpose this institution can and should collaborate with its sister hospital which is located by its side, where there is abundance of clinical material available in the form of a variety of Psychiatric casualties. The Superintendent of the hospital has put up a short-term as well as a long-term plan. Though the Committee is of the opinion that both the plans should be executed to make the institution a first class Psychiatric centre, it is felt that the scheme should be completed in stages.

In the first stage the short-term plan is recommended for execution. The plan consists of a research unit, a psycho-surgical block, alterations to the existing staff quarters and the expansion of the existing laboratory.

The question of upgrading of this hospital can be taken up only after the Government of India have taken over the institution under their supervision and control.

11. *Thoracic surgery unit at Vellore Christian Medical College and Tuberculosis Sanatorium at Madanapalle.*—The Committee was informed by the management of the Tuberculosis Sanatorium at Madanapalle that they contemplated developing the teaching facilities for tuberculosis at the Vellore Medical College, where a Department of Thoracic Surgery is now functioning. In conjunction with this department, the management hopes to have additional facilities for the surgical treatment of pulmonary tuberculosis and for bone tuberculosis, and when such facilities are available, the diploma course of the University of Madras that is now being conducted jointly by the Tuberculosis Sanatorium at Madanapalle and the Tuberculosis Department of the Madras Medical College may be slightly altered to permit of the course being conducted independently by both these bodies at both centres.

In connection with this scheme it was represented that the Tuberculosis Sanatorium at Madanapalle may be given assistance to provide hostel accommodation for post-graduates that will be coming from all parts of India. It was suggested that an additional surgical theatre would be necessary. The Committee feels this being concerned with medical relief should naturally be the concern of the management and the Provincial Government concerned. Such other equipment and other facilities needed for research and postgraduate purposes may be considered for upgrading. This Committee, however, wishes to point out that before the scheme for conducting diploma course exclusively in these two institutions is taken up, adequate facilities for training in public health aspect of tuberculosis should be made available.

The Department of Thoracic Surgery at the Vellore Medical College has recently been started and a specialist in this line has been appointed. In view of the complete lack of facilities in any of the existing institutions to develop thoracic surgery, which is an important branch of surgery, the Committee is of opinion that facilities should be given to this institution to develop it as an All-India centre for surgery of the chest. The management submitted a scheme for a total non-recurring cost of Rs. 3 lakhs. This includes a sum of Rs. 1,75,000 for the construction of an additional ward of 25 beds for the treatment of pulmonary tuberculosis. The Committee is of opinion that this charge should naturally be borne by the management concerned, as it forms part of medical relief. The Committee would therefore recommend that the balance of Rs. 1.25 lakhs may be granted which includes:

- (a) X-ray equipment
- (b) Operating room equipment
- (c) Blood bank equipment
- (d) Oxygen therapy, equipment, etc.

provided the management undertakes the construction of the additional ward referred to during the next financial year.

The recurring amount asked for includes additional personnel and additional recurring equipment required for the various departments mentioned already. The management had asked for a recurring grant of Rs. 68,750/- of which amount Rs. 18,750/- would be the sum required for the maintenance of 25 additional beds. The Committee feels that for reasons stated already the sum of Rs. 18,750 will be a legitimate charge on the College. The Committee therefore recommends a recurring grant of Rs. 50,000/- for the purposes mentioned in the annexure as an annual recurring grant. The non-recurring expenditure should be borne by the Central Government, but in regard to the recurring grant of Rs. 50,000/- it is recommended that 50 per cent. should be borne by the Central Government and 50 per cent. by the management.

The Committee is of opinion that it will be necessary for the training in thoracic surgery to be spread over a period of three years provided that persons who have already obtained a higher degree in surgery may be exempted for a period, which may approximately be one year. The actual period and the nature of exemption to be given may be considered later by the postgraduate Council of Medical Education which it is hoped will be set up at an early date.

It is recommended that three persons may be selected for the course every year, and the management may be given the option of selecting not more than one-third every year, and the other two-third by the Government of India.

12. *Social Medicine—Calcutta Medical College.*—Steps should be initiated for exploring the possibility of developing a department of Social Medicine in the Calcutta Medical College with the closest possible co-operation of the All-India Institute of Hygiene and Public Health.

13. *Mycobiology Section R. G. Ker Medical College.*—In view of the material available in the Botany Department of R. G. Ker Medical College, and in view of the growing importance of the study of fungi and antibiotics, the Committee feels that the Mycobiology Section should be upgraded. A recurring grant of Rs. Twenty thousand to meet the salaries of one Assistant Professor, two Laboratory Assistants, two Laboratory Attendants and a stenographer as well as for contingencies and chemicals, and a capital grant of Rs. 3,000/- for equipment and books is recommended. While the recurring grant will be shared equally by the Central Government and College authorities the Capital grant might be borne entirely by the Centre.

14. *Nurses Training.*—At the inaugural meeting of the Committee the Hon'ble Rajkumari Amrit Kaur drew attention to the desirability of raising the standard not merely of medical education but also of the training of nurses. As has been pointed out by the Hon'ble Minister hospitals and other institutions which provide treatment to patients can function efficiently only if the nursing personnel are adequate in numbers and of the proper quality. This is all the more necessary in teaching institutions where research and postgraduate medical education in particular are conducted, as an efficient and well trained nursing staff is a *Sine quanon* for successful work in the Clinical Departments in these directions. The Upgrading Committee was not in a position to examine this question in all its aspects but it feels that developments in the Clinical Departments for which upgrading has been suggested by it will not be satisfactory or complete unless the quality of the nursing provided in these departments is also improved immediately. The question of an increase in the number of nurses as well as of employing a better type of nurses would probably require simultaneous consideration.

The Committee would in this connection invite attention to the various recommendations put forward by the Bhore Committee for changing the existing unsatisfactory conditions under which the training of nurses is carried out as well as those under which their services are made use of by Governments and other agencies. A radical change in these conditions is considered essential before any appreciable improvement of the situation can be effected. The Committee notes with satisfaction that an attempt is now being made in two centres, Delhi and Vellore, to give a higher type of training to nurses proceeding for a University qualification and such persons will be properly equipped for taking on, in due course, leadership in the nursing profession. These two centres of training are also meeting a much needed want in the training programme of nurses, namely, the integration of preventive health work with that of nursing aid to patients. These institutions are yet in the early stages of development and the Committee feels that they should be encouraged with financial and other support as far as possible in order to function with the greatest possible efficiency.

The Committee noted that conditions of service are far from satisfactory for the nursing profession. If the profession is to attract the right type of people and if the best is to be obtained from their services it is urgently necessary to improve their conditions of service. Better and

more accommodation, better scales of pay, and more amenities should be made available so that the health of the nurses can be better attended to and they may be in a position to give the best possible services to the patients committed to their care.

Conclusion:

In conclusion, the Committee recommends that the following institutions be taken up for upgrading in the current financial year:—

1. Physiology Department, Patna Medical College,
2. Tata Memorial Hospital in collaboration with G. S. Medical College, Bombay.
3. Obstetrics & Gynecology Department, Government Hospital for Women & Children, Egmore, Madras.
4. Department of Tuberculosis, University of Delhi.
5. Institute of Hygiene & Public Health, and Calcutta Medical College, Calcutta.
6. Anatomy Department, Madras Medical College.
7. Mental Hospital, Bangalore.
8. V. D. Deptt, Madras, Medical College.

2. The following institutions are placed in 2nd priority list and are recommended for upgrading when further improvements have been made by the respective local authorities, subject to subsequent review by the Committee or a similar body:—

1. Pediatric Department, Grant Medical College, Bombay.
2. Thoracic Surgery & T.D.D. Course, Vellore Medical College, in conjugation with the Tuberculosis Sanatorium, Madanapalle.
3. Mental Hospital, Ranchi.
4. Micro-Biology Section (Botany Department)—R. G. Kar Medical College, Calcutta.
5. Pharmacology Dept., G.S. Medical College, Bombay.

3. The following Departments may be considered for upgrading as soon as the scheme for expansion of activities envisaged by the Provincial Governments is completed:—

1. Experimental Surgery Section, King George's Hospital, Lucknow.
2. Department of Cardiology, Calcutta Medical College, Calcutta.
3. Department of Chest Diseases & Thoracic Surgery, Stanley Medical College, Madras.
4. Department of Radiology, Bernard Institute of Radiology, Madras.
5. Department of Ophthalmology, Patna Medical College.
6. Department of Pathology, Andhra Medical College.
7. History of Medicine, Andhra Medical College.

4. The Committee desires to express its grateful thanks, to the Principals of Medical Colleges, Deans of Faculties and Superintendents of Hospitals and to the Surgeons-General and Inspectors-General of Hospitals who very kindly gave every facility to it to go round the institutions and to get to know the nature of work that was being carried on and the scheme for upgrading. It also wishes to express its grateful thanks to the Vice-Chancellors of Universities concerned and to the Ministers in the different Provinces who very kindly spared the time to have an informal consultation with the members of the Committee. The Committee is also grateful to the Director-General of Health Services for the opportunity afforded to it to discuss with him, while in Madras, several points connected with its work. It deeply appreciates the help and advice given by the Director General.

In conclusion the Committee wishes to place on record its high appreciation of the services rendered by Col. Vishwanathan, Member-Secretary, and the valuable material he prepared for the consideration of the Committee.

5. The Committee hopes that in the light of its recommendations, immediate steps will be taken by the Government of India along the lines indicated in the report.

APPENDICES

APPENDIX I

All-India Medical Institute

Up-grading of certain Departments of Medical Colleges and Other Special Medical Institutes in India

When proposals for the starting of an All-India Central Medical Institute were under consideration, it was felt that it was necessary to consider also the up-grading of certain Departments of study and institutes attached to some of the Medical Colleges and of Provincial and Central Institutes of specialities, as such a step would, apart from improving the facilities available at such centres, help in the staffing of the All-India Institute and in the work of the Institute ultimately.

The objects in view in upgrading existing Institutions are:—

- (a) To promote post-graduate studies and to make available to India as a whole, certain centres where facilities for such post-graduate study are available and could be improved on;
- (b) to encourage research in such centres, so as to train a number of Medical Graduates in methods of research and to foster research at such centres.
- (c) to train teachers of Medicine in different specialities and to give them opportunities of studying modern methods of teaching and of research, so that such trainees would be in a better position to carry out their duties as teachers; and
- (d) to cooperate with the All-India Medical Institute by exchange of Post-graduate research workers and trainees and to afford a wide field ultimately for the selection of the personnel needed ultimately for the All-India Institute.

It may be stated at the very outset that all such upgraded departments in such institutions should be considered as All-India Training Centres subject to such conditions as may be agreed upon between the Central Government and the Provincial Governments or managements of such institutions.

With these principles before them and to enable the visiting Committee to correctly appreciate the case of the Colleges and Departments concerned, managements are requested to furnish detailed information in regard to such departments and institutions which they seek to upgrade and in particular to furnish full information on the points noted in the questionnaire. The details called for should be made available to the *Secretary Upgrading Committee, Directorate General of Health Services, New Delhi, before the 31st August, 1948, after which date, replies received will not be taken into consideration.*

QUESTIONNAIRE

A. Information Regarding the College in General.

1. Name and address of the College.
Province it belongs to.
2. Who is the controlling authority—Government, Missionary Agency, local body, trust or otherwise.
3. Was it primarily established as a college or as a school?
4. How long has the College been in existence?
5. Does the administrative head of the college perform collateral duties as Superintendent of an associated hospital and/or head of a department of the college?
6. Do any of the teachers in non-clinical subjects have collateral duties in hospitals and if so give details.
7. How many students are admitted every year?
 - (a) under-graduates.
 - (b) post-graduates.
8. What is the cost of instruction per student? (Under-graduates).
9. Give the name of and the number of beds in each of the general and special hospitals at which clinical instruction is given for students of the college.
10. Give the following details regarding library facilities in the college:—
 - (a) Total number of books in each subject.
 - (b) Number of periodicals Indian and foreign.
 - (c) Annual grant for the library for the purchase of:—
 - (i) New books.
 - (ii) Periodicals.
 - (d) Microfilm & photostate equipment.
 - (e) Whether loan facilities are available to other institutions and, if so, to what extent.
11. Is any research work carried out in the institution and if so, give a brief resume of the work done during the past five years.
12. What facilities exist for training in nursing? Does the institute propose to upgrade and, if so, what facilities are required.
13. Give a general idea of the annual budget for the college and associated hospitals respectively; give details of expenditure and income under main heads.
14. What are the departments you recommend for upgrading bearing in mind that only those departments which already possess efficient staff, sufficient equipment and require only minimum structural alterations and/or additions, are to be suggested for upgrading.

B. Information regarding the Departments of the College.

Existing facilities.

- (a) Staff—give details in the attached proforma.
- (b) Nature and extent of accommodation available for departmental activities.
- (c) Is there a separate and adequate departmental library?
- (d) Nature & volume of:—
 - (i) Routine work.
 - (ii) Undergraduate teaching in the department.
- (e) What is the teacher—student ratio in each category?
- (f) Do facilities exist for research and post-graduate training and if so, what?
- (g) Are post-graduate being trained now & if so how many at a time? Give details regarding the course.
- (h) Do facilities exist for collaboration for teaching and research between different departments of the institution and science departments of other institutions? Give an idea of the nature of such collaboration in both cases.
- (i) Is there a central animal house and if so, what facilities are available for animal experiments in the different departments of the college.
- (j) In the case of clinical departments, give the number of beds available for each speciality and whether a separate clinical laboratory is provided for the department.
- (k) Annual Budget for the different departments.

C. Information Regarding Expansion of each of the Departments or Sections of Colleges or Institutions which are Recommended for Upgrading.

- (a) Name of the department.
- (b) Head of the department or section and the medical and scientific staff—full-time or part-time.
- (c) Their qualifications:
- (d) Publications by:—
 - (i) Head of the department.
 - (ii) Members of the staff of the department or section:
 - (Complete references to be given as under):
 - Coller, F.A., and Maddock, W.G.; The Function of Peripheral Vasoconstriction, *Ann. Surg.* 100: 983-992, 1934. (Reprints to be sent).
- (e) Annual grant of the department or section.
- (f) Is any sum allocated for research and has any outside assistance been received in the past in this respect.
- (g) Additional medical (whole-time and part-time), nursing, technical, and other staff, required under various categories, with proposed salaries and allowances.

APPENDIX II
Summary of financial implication.

Serial No.	Name of Institution.	Non-Recurring Expenditure to be borne by Centre.		Non-Recurring Expenditure to be borne by Provl. Govt.		Recurring Expenditure to be borne by Centre.		Recurring Expenditure to be borne by Local Authorities.	
		Item.	Cost.	Item.	Cost.	Item.	Cost.	Item.	Cost.
1	Physiology Department, Medical College, Patna.	3	4	5	6	7	8	9	10
1	Physiology Department, Medical College, Patna.	Equipment	Rs. 65,000	Extension to building.	Rs. 72,000	Salary of staff	Rs. 17,000	Salary of staff	Rs. 35,600
2	Tata Memorial Hospital, Bombay in collaboration with G. S. Medical College, Bombay.	Laboratory	4 lacs.	..	..	Salary of staff & contingencies.	1 lac.	..	..
2	Women & Children Hospital, Egmore Madras.	Equipment	..	Equipment 7,500 ..	7,500	Salary of staff	24,900	Salary of staff	24,000
3	Hostel .. for Laboratory.	Hostel	1 lac. 10,000	Hostel X-ray Equipment.	2.5 lacs. 90,000	Do.	18,300	Do.	18,300
4	Tuberculosis Department Delhi.	Hostel ..	1 lac.	..	..	..	..	..	..
5	Industrial Hygiene Institute of Hygiene, Calcutta.	Equipment	20,000	..	..	Salary of staff	42,000	..	..
6	Anatomy Department, Medical College, Madras.	Extension to Building & Equipment.	25,000	Cold Storage plant.	20,000	Do.	20,100	Salary of staff	20,100
7	Mental Hospital, Bangalore.	Equipment	80,000	Equipment Buildings.	80,000	Do.	3,550	Do.	3,500
8	V. D. Deptt., Madras Medical College.	Animal House & Equipment.	20,000	Animal House Equipment.	20,000	Do.	21,450	Do.	21,450
9	Paediatric Department, J. J. Hospital, Bombay.	Laboratory Equipment.	20,000	Ward of 50 beds ..	1.05 lacs	Do.	14,000	Ward Maintenance	14,000
									87,050

APPENDIX III.

Memorandum on Standardisation of Post-graduate Medical Education.

R. VISWANATHAN.

Object of Post-graduate Education.—

Medical practice today is changing rapidly in order to meet the increasing demands of the public, the growing desire of the medical profession to survive in a competitive world, and the enormous advances made in recent years in all branches of medical science. It is obvious that the science of medicine has now advanced to the point at which it is impossible for one individual to learn and to apply all available knowledge. The rapidity of growth knowledge in the special fields requires special training for practice in these fields. Training in specialities, however, cannot and should not be undertaken during the course of undergraduate medical education. As Sir George Newman said, "the purpose of medical curriculum is the training, not of specialists, but of general practitioners". The real business of undergraduate curriculum is to establish a map as a practitioner in the fundamentals, to guide and direct his course of learning, and to give him an enduring inspiration. The tendency that exists in certain medical colleges particularly in the Western Countries, to overburden the curriculum with a desire to translate him into a walking Encyclopaedia of medical science, is to be deplored, because the student who gets, "overfed for his years" by being trained by all sorts of specialists, builds up a picture of general practice which is a most complete and rather formidable composite production, the work of one specialist after another, but is very different from the picture which faces him when he goes into the community to practice his profession. It should not be forgotten that the object of education is to enable the student to see things clearly and to see them whole to recognize the elephant with eyes open and not as the blindmen in the story tried to do.

It will be clear from the preceding paragraph that in the undergraduates years, no attempt should be made at specialities which should necessarily fall under the purview of post-graduate education.

Apart from the training of specialists, there is another equally desirable purpose to be served by education after graduation. The rapidity of scientific advance now requires all physicians, both general practitioners and specialists, to obtain a working knowledge of these advances at periodic interval if the patient is to receive the best that medical science has to offer. This calls for a systematic programme of postgraduate education so organised that it makes available to each physician the type of educational opportunity needed to keep him abreast of his fields.

Post-graduate Education in U. K.

In countries like America and United Kingdom, postgraduate education has reached such a high level of efficiency that students from other countries have begun to go there in increasing numbers for specialisation. Since the establishment of the Postgraduate Medical Federation, coherent plan for the provision of advanced education and research has been presented. At the Postgraduate Medical School of London, which is in association with the Hammersmith Hospital, advanced instructions in general medicine, general surgery, obstetrics and gynaecology, and pathology is provided. In addition a number of special institutes have been organised, in the subjects of child health, neurology, otolaryngology, ophthalmology, psychiatry, orthopaedic surgery, biology, diseases of the chest, dermatology and cardiology. Apart from the facilities in London,

highly organised and continuous postgraduate courses are provided at many provincial and Scottish Universities. The courses available are given in the following table:—

Subject	University	Type	Duration	
Anaesthetics	Bristol	Full time	2 Weeks.	
	Oxford	Do.	2 Weeks.	
Bacteriology	Do.	Part time	1 Week.	
	Manchester	Full time	9 months.	
Industrial health	Birmingham	Do.	4 weeks.	
	Glasgow	Do.	9 months.	
	Edinburgh	Do.	9 months.	
	Manchester	Do.	9 months.	
Medicine (general)	Edinburgh	Do.	11 weeks.	
	Glasgow	Do.	8 weeks.	
Neurology	Birmingham	Part time	2 months.	
Obstetrics & Gynaecology	Glasgow	Full time	3 weeks.	
Ophthalmology	Oxford	Do.	8 weeks.	
Orthopaedic Surgery	Liverpool	Do.	15 months.	
Physical medicine	Bristol	Do.	5 months.	
Psychiatry	Do.	Do.	10 weeks.	
Public Health	Edinburgh	Do.	2 terms.	
	Leeds	Do.	3 terms.	
	Manchester	Do.	9 months.	
	Aberdeen	Do.	9 months.	
	Birmingham	Do.	9 months.	
	Bristol	Do.	9 months.	
Radiodiagnosis	Durham	Do.	9 months.	
	Edinburgh	Do.	9 months.	
	Glasgow	Do.	9 months.	
	Leeds	Do.	9 months.	
	Liverpool	Do.	9 months.	
	Manchester	Do.	9 months.	
	Wales	Do.	3 months.	
	Wales	Part time	12 months	
	Radiotherapy	Birmingham	Full time	18 months.
		Bristol	Do.	18 months.
		Edinburgh	Do.	18 months.
		Liverpool	Do.	18 months.
Manchester		Do.	18 months.	
Sheffield		Do.	18 months.	
Wales		Do.	18 months.	
Surgery (General)	Bristol	Do.	2 years.	
	Birmingham	Do.	2 years.	
	Edinburgh	Do.	2 years.	
	Liverpool	Do.	2 years.	
	Manchester	Do.	2 years.	
	Sheffield	Do.	2 years.	
Topical Medicine	Edinburgh	Do.	5 months.	
	Glasgow	Do.	8 weeks.	
	Liverpool	Do.	9 months.	
Tuberculosis	Edinburgh	Do.	2 terms.	
	Liverpool	Do.	4 months.	
	Wales	Do.	6 months.	

The British Postgraduate Medical Federation besides organising specialists training, arranges postgraduate courses for general practitioners.

Unlike European Countries and America, Britain revels in a multiplicity of postgraduate degrees and diplomas, which undoubtedly serve the purpose of stamping and recognizing those who have completed their postgraduate training in the respective specialities. At the same time there is a decided disadvantage in the institution of postgraduate diplomas, in that the student, who has perforce to pass an examination, before he obtains his diploma in his speciality, usually spends his time in pouring over books and journals, in his attempt to acquire the latest the oretical knowledge of the subject, rather than in gaininig valuable practical experience which will help him in his subsequent practice of his speciality.

While the postgraduate Federation is concerned with coordination and organisation of training in specialities the award of postgraduate diplomas fall within the province of the Royal Colleges of Physicians, Surgeons, and Obstetricians and Gynaecologists, Postgraduate degrees in Medicine and Surgery are, no doubt, given by the respective Universities.

The lectures given at the Royal College of Physicians of London, including the Croonian, Fitzpatric, Oliver Sharpey, Milroy, Goulstonian, Lumleian, Humphery David Rolleston, and other series, must not be omitted in any assessment of postgraduate facilities in London. Those who are fortunate enough to be able to attend them gain a surprising amount of knowledge of special subjects in medicine.

Post-graduate Education in America.

In America the field of education after graduation divides itself into three Parts—The first is the compulsory internship which rounds out, and gives added practical application to the medical school course and also accustoms the individual, while under supervision, to the assumption of responsibility. Hence, it should be considered a part of basic preparation for practice. The second part is the 'residency' which prepares a physician for the practice of a speciality and therefore, is termed "graduate medical education." Finally there are courses of varying lengths and other educational opportunities that aim to keep practitioners abreast of their present fields of practice and that is classified as "post-graduate education".

The speciality board in America have set the length of the residency at three years. This term has been generally accepted as the period required to prepare a physician to begin the practice of a speciality. The residency is the joint responsibility of medical schools and of those hospitals able to provide residencies of a satisfactory educational character. It is organised as a real educational experience provided by qualified teachers who are willing to assume responsibility for adequate instruction. It also provided preparation in the science or sciences basic to the speciality as well as sufficient clinical experience under supervision to ensure real competence.

The council of Medical Education and Hospitals of the American Medical Association has laid out certain standards for courses of training in different specialities and it is only those hospitals which conform to these standards that are approved by the Council for residencies. There are 27 different specialities in which residencies are available in approved hospitals.

For 15 specialities there are approved examining boards which issue certificates to those who have undergone prescribed courses and passed the required examination in the speciality.

In order to coordinate graduate education and certification of medical specialities in the United States and Canada and Advisory Board has been organised. As there are representatives from each examining board as members in the Advisory Board, the Board is able to maintain a uniform standard of training in the various specialities.

Existing Facilities in India.

The facilities for postgraduate education that are at present available in India have been summarized by the Bhore Committee in the following paragraphs:—

“The existing facilities for postgraduate education in the different medical colleges are few. Recently there has been a great deal of activity shown by most universities in the institution of postgraduate degrees and postgraduate diplomas without, however, providing in every case the necessary facilities for adequate instruction in the subjects concerned. Madras is, in this connection, an exception. There are two university diplomas, one in Obstetrics and Gynaecology and the other in Ophthalmology, and the training, which is in both cases for a period of one academic year, is imparted in the special hospitals concerned. Government diplomas also exist in the specialities of Tuberculosis, Radiology and Clinical Laboratory Sciences with adequate provision for the training of students in these subjects. Courses for Diplomas in Public Health and in Maternity and Child Welfare are given at the All-India Institute of Hygiene and Public Health, Calcutta, as well as shorter courses in certain branches of public health work. For the Diploma in Public Health the Institute is affiliated to the Calcutta University. The Universities of Bombay and Madras also award a similar diploma, the one granted in Madras being known as the Bachelor of Sanitary Science (B.S.Sc.). Facilities for the required training are available at the Grant Medical College, Bombay, and at the Madras Medical College. In addition, the University of Calcutta grants a Doctorate of Science in Public Health (D.Sc.) and the University of Bombay a Doctorate in Hygiene (D.Hy.). Regular post-graduate courses are also provided in the School of Tropical Medicine at Calcutta.

“In certain universities the degrees of M.D. and M.S. provide for specialisation in such subjects as Ophthalmology, Bacteriology, anatomy and Physiology. Research degrees have also been instituted in some universities in the non-clinical subjects of Anatomy, Physiology, Pharmacology, Biochemistry, Pathology and Bacteriology. The diplomas, that have been instituted in the different universities, include the following subjects:—

- Ophthalmology.
- Psychological Medicine.
- Radiology.
- Pediatrics.
- Oto-Rhino-Laryngology.
- Venereology.
- Orthopaedics.
- Obstetrics & Gynaecology.
- Dermatology.
- Tuberculosis.
- Anaesthesia.

“As has already been pointed out, in many cases proper instruction courses in these subjects have not been organised at the different centres where such special degrees or diplomas have been instituted by the universities concerned.

When such training facilities become available, there should be wide scope in the country for specialisation on satisfactory lines.

"No Organisation to coordinate and foster postgraduate education exists in any of the universities, except Madras where a Council of Postgraduate medical Education has recently been formed. It is understood that a proposal for the institution of a similar organisation is under consideration in the universities of Bombay and Calcutta.

"THE TRAINING OF TEACHERS".

No special facilities are now available in the Universities for the training of teachers in the different subjects of the medical curriculum. At the same time, it is not correct to say that there are no opportunities for young men desirous of becoming teachers to work in the different departments of individual colleges and to acquire knowledge and technical skill. In some medical colleges, however, such facilities are available on a large scale than in others. The specialities in which such training can be undertaken also vary from college to college. On the whole, however, provision for the training of teachers, must be considered to be quite inadequate.

"REFRESHER COURSES".

As far as we are aware no organised efforts have been made either by universities or by Governments to start refresher courses for general practitioners. It is understood that sporadic attempts were made in some provinces in this direction before the war, but these have not, it is understood, led to the development of such facilities on a satisfactory basis."

It is clear from the above summary that the facilities for postgraduate education are at present meagre and the standards are neither high nor uniform.

Bhore Committee's Recommendation.

In order to develop and organise postgraduate education in the country, the Bhore Committee has recommended, the establishment of an All-India Medical Institute, the development of postgraduate centres in association with existing medical colleges on an All-India Basis, and the formation of a Central Committee for postgraduate medical education.

The last recommendation, which is of utmost importance for bringing about and maintaining a uniformly high standard of postgraduate medical education throughout the country, is in fact based on the remarks of the good enough Committee on the position of British postgraduate diplomas which, according to the Committee, have encouraged "illgrounded and immature specialisation". In these circumstances the Committee has recommended that the award of all postgraduate medical diplomas with certain exception should be undertaken by the Royal Colleges. In order to avoid the development of such conditions, the Bhore Committee has very rightly suggested the creation of a special organisation for advising the Central and Provincial Governments on the central of the postgraduate medical training centres in the country.

The question might be asked with some justification why a statutory body like the Indian Medical Council cannot be empowered to shoulder the responsibility of controlling postgraduate medical education. The Bhore Committee has given cogent reasons for the establishment of a separate organisation. Another equally important reason is the Indian Medical Council Act does not empower the Council to conduct examinations whereas the organisation suggested in the succeeding paragraphs envisages the creation of a Postgraduate Board which should, in addition to its other duties be an examining board conducting All-India examinations

for diplomas in various specialities. This will be one of the effective ways by which uniformity of standard can be maintained.

Suggestions regarding Council of Post-graduate Medicine.

A memorandum on above lines with tentative suggestions for the establishment of Indian College of Physicians & Surgeons was circulated to prominent educationalists both in India and Abroad for eliciting suggestions and criticisms. From the replies received so far, it has been possible to obtain and gauge the general trend of thought in the country regarding postgraduate medical education. While there is unanimity of opinion in favour of establishing a central organization, with the object of increasing the efficiency of postgraduate instruction in the country, by laying down minimum standards of training in all specialities, and by periodic inspection of postgraduate centres, opinion is equally divided on the question of awarding of postgraduate-diplomas by a Central Board. While one group considers that diplomas and examinations fall within the province of universities, the other group is emphatically of opinion that all postgraduate diplomas should be awarded by one central authority, as that is the only way by which a uniformly high standard can be maintained. While there is considerable force in that argument, it is felt by many that at least in the early stages it will be inadvisable to antagonise the universities by encroaching on what they might consider as their prerogative.

It is after due and careful consideration of all the replies received, that, the following tentative proposals for establishing a Central Council for the control of Postgraduate Medical Education are put forward for consideration at the conference of Vice-Chancellors and representative of Medical Faculties:—

(1) Whereas it is considered expedient to establish a uniform standard for postgraduate medical education in all Provinces, it is recommended that a Central Council be established for the purpose.

(2) This Central Council will be called the Indian College of Postgraduate Medicine.

(3) The college will have the power to lay down minimum standards for postgraduate training in each medical speciality. The preliminary qualifications, the period of study, subjects for study, and the examinations to be held for different diplomas will be governed by instructions issued by the college from time to time.

(4) The College will have the right to inspect postgraduate centres and suggest methods of improving the efficiency of the training given in each centre.

(5) It will exercise control over these centres by laying down conditions to satisfy the following requirements:—

- (a) The qualifications of the teaching staff and the number required in each subject.
- (b) The accommodation required in the laboratories, the equipment thereof, and the number of postgraduates that should be admitted.
- (c) The Hospital facilities that are available for clinical subjects.
- (d) In general the arrangements required in each centre for efficient training in the speciality concerned.

(6) The college will be administered by a Governing Body constituted as follows:—

- (i) Director General of Health Services. (President for the 1st two years).

- (ii) Four Heads of postgraduate units nominated by the Central Government.
- (iii) Two representatives of the Medical Council of India nominated by the Council.
- (iv) The Provincial Directors of Health Services nominated by Central Government.
- (v) Two principals of Colleges nominated by Central Government.
- (vi) Two foundation fellows of the college other than those who might be included in the above categories, nominated by the College.

(7) The college will have a whole-time secretary who will also be a member of the Government Body. The Governing Body may appoint a smaller executive Committee for purposes of administration. The college will also have advisory committees for various specialities. Outside specialities might be co-opted to the advisory committee.

(8) The Governing Body will at its first meeting elect foundation fellows from distinguished members of the medical profession.

(9) The college office will be located in Delhi preferably in the same premises as that of the Indian Medical Council or in any one or part of Government buildings allotted for the purpose.

(10) While the Secretary of the college will be whole-time paid officer of the Central Government, the President will be elected every three years by the fellows of the college, from the 3rd year after its inception.

(11) The college will, in addition to its duties in connection with controlling and organising postgraduate medical education, admit as fellows, during its annual meetings such of those medical men of ten years standing and over, who have acquired considerable experience in any one of the branches of medicine and who have some original work to their credit. Ordinarily those who seek admission to the college will have to be recommended by a Board of Censors who will make the recommendation on the result of an examination. In certain cases, the recommendation for admission may be made without examination. Only those with an M.D. or M.S. of an Indian University or a Foreign University recognised by the College for the purpose are eligible for Fellowship.

(12) Financial implications.

Recurring expenditure will be as follows:—

Pay.	Rs.
Secretary 1 2,000 × 12	24,000
Superintendent 1 400 × 12	4,800
Assistant 2 160 × 2 × 12	3,840
Typist 2 55 × 2 × 12	1,320
Cashier 1 160 × 12	1,920
Stenographer 1 160 × 12	1,920
Peon 2 30 × 2 × 12	720
Chowkidar 1 30 × 12	360
Sweeper 1 30 × 12	360
	40,000
(Appro)	40,000
Contingent expenses	5,000
Tours of inspector	30,000
	75,000
Total approx.	75,000
Non-recurring expenditure office furniture, typewriter, etc.	5,000

APPENDIX IV.

Proceedings of the Inter-University Board Conference on Post-Graduate Medical Education, held in the Senate House, Chepauk, Madras, at 11 a.m., on Saturday the 1st January, 1949.

PRESENT:—

SIR A. LAKSHMANASWAMI MUDALIAR, Vice-Chancellor, University of Madras (*Chairman*).

DR. K. C. K. E. RAJA, Director-General of Health Services, Government of India.

Special Invitees:

DR. JIVARAJ N. MEHTA, Dewan of Baroda.

DR. M. D. GILDER, Minister for Health, Bombay.

THE HON'BLE MR. A. B. SHETTY, Minister for Health, Madras.

Vice-Chancellors of Universities:

DR. N. P. ASTHANA, M.A., LL.D., C.I.E., Vice-Chancellor, Agra University.

DR. C. R. REDDY, M.A., D.LITT., Vice-Chancellor, Andhra University.

MAHAMAHO PADHYAYA DR. P. V. KANE, M.A., LL.M., D.LITT., Vice-Chancellor, Bombay University.

PROF. P. N. BANERJEE, M.A., B.L., BAR-AT-LAW, Vice-Chancellor, Calcutta University.

THE HON'BLE MR. JUSTICE TEJA SINGH, Vice-Chancellor, East Punjab University.

PROF. N. K. SIDHANTA, M.A. (Cantab.), Representative, Lucknow University.

SRI R. KASTURI RAJ CHITTY, B.A., B.L., DIP.EDN., Vice-Chancellor-in-charge, Mysore University.

PANDIT K. L. DUBEY, B.A., LL.B., Vice-Chancellor, Nagpur University.

SIR C. P. N. SINGH, C.I.E., M.A., Vice-Chancellor, Patna University.

DR. G. S. MAHAJANI, M.A., PH.D., Vice-Chancellor, Rajputana University.

SRI C. M. ACHARYA, M.A., B.L., Vice-Chancellor, Utkal University.

Representatives of Medical Faculties:

DR. H. N. BHATT, M.B., F.R.C.S., D.M.R.E., Agra University.

DR. BHAGAWAT SAHAI, M.D., GWALIOR, Agra University.

DR. N. G. PANDALAI, M.D., D.T.M., F.R.C.P., Andhra University.

LT.-COL. M. V. RAMANAMURTHI, M.B.B.S., F.R.C.S., M.S.C., I.M.S., Andhra University.

DR. B. B. YODH, M.R.C.P., D.T.M. & H., Bombay University.

DR. DINESH CHANDRA CHAKRAVARTI, M.B.E., F.R.C.S., Calcutta University.

LT.-COL. R. VISWANATHAN, Delhi University.

DR. KHEM SINGH GREWAL, M.B.B.S., PH.D., East Punjab University.

DR. SANTRAM, Amritsar, East Punjab University.

DR. K. N. MITRA, M.B.B.S., M.D., M.R.C.O.G., F.R.C.S., Lucknow University.

DR. S. S. MISRA, M.D., M.R.C.P., Lucknow University.

LT.-COL. S. L. BHATIA, C.I.E., M.C., M.D., F.R.C.P., F.R.C.S., I.M.S., Madras University.

DR. R. V. RAJAM, M.S., M.R.C.P., Madras University.

DR. A. S. MANNADI NAIR, M.B.B.S., Ph.D., Madras University.

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DR. V. R. NAIDU, M.B.B.S., M.S., M.R.C.P., D.T.M. & H., Mysore University

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DR. YOUSUFUDDIN ANSARI, M.B.B.S., M.R.C.S., L.R.C.P., Ph.D., Osmania University.

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DR. GAYA PRASAD, B.Sc., M.D., M.R.C.P., D.C.P., D.T.M., D.C.H., Patna University.

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DR. S. C. MEHTA, L.R.C.P., M.R.C.S., F.R.C.S., Rajputana University.

LT.-COL. P. PAPTIA, B.A., M.B., B.S., D.O.M.S., D.L.O., D.P.H., Utkal University.

DR. B. PATNAIK, B.Sc., M.B.B.S., D.T.M. & H., F.S.S., F.H.S.T. & H., Utkal University.

LT.-COL. B. N. HAZRA, I.M.S., Utkal University.

The Chairman in his opening speech said:—

Gentlemen, let me first of all extend to you a most cordial welcome and express our sincere thanks for the trouble you have taken in coming all the way to consider what we of the medical profession feel is a very important subject worth serious consideration. I am particularly happy to welcome so many distinguished representatives of the medical faculties of the different Universities along with the Vice-Chancellors. Our happiness is all the greater that we have some of the eminent administrators also with us at present. We have here Dr. Gilder, the Minister in charge of Health in Bombay, Dr. Jivaraj Mehta, who has donned administrative robes at present and is the responsible Prime Minister of Baroda and our own Health Minister, the Hon. Mr. A. B. Shetty. I particularly welcome him here on this occasion as he has always been a friend, philosopher and guide of the medical profession and has taken such a keen interest in it that sometimes we mistake him for a medical man himself.

Gentlemen, you have all seen the circulars issued by the Inter-University Board and by the Government of India explaining the reasons which have led to the summoning of this Conference at this most opportune moment. During the last few days of the Universities Conference, the Vice-Chancellors and other administrators of the various Universities have been discussing many problems concerning University Education in general and they have deferred consideration of the very important problem of post-graduate medical education and research as they thought that your opinion would be most valuable for them to come to definite conclusions on that subject.

The genesis of this Conference is an interview of the Members of the Upgrading Committee with the Minister of Health at the Centre, Srimathi Rajkumari Amrit Kaur, the Director-General of Health Services and the Members of his Department. In the course of the interview it was suggested that a certain amount of general overhaul might be necessary, at any rate an examination of the question of post-graduate education in the field of medicine. If you will pardon a personal reference, it was my privilege, thanks to the invitation extended to me by my esteemed friend Dr. Jivaraj Mehta who was then the Director-General of Health Services, to visit the United States of America as well as some of the continental centres, in particular to study their methods of post-graduate

instruction. I felt after my visit to America that the emphasis had shifted from undergraduate to graduate instruction a great deal and that there were points there which were worth our consideration and merited our close observation. With that object in view, I explained to the Committee which met at Delhi that it was necessary for us at this transitional period to meet together and consider in what way we can implement some of the modern methods in regard to post-graduate instruction and also give an idea to the Universities of how to attain a certain amount of minimum standard of efficiency in matters of graduate instruction. Several medical colleges have sprung up in many Universities recently and regulations have been passed with a view to getting candidates after a certain period of training qualified for the higher diplomas and degrees. I have no doubt whatsoever that if the medical profession is to function as it ought to and play its proper role in the development of the country, and if we are to take our proper place in the international circle of scientists, we of the medical profession have to contribute a great deal towards scientific advance and research. It is our hope and it is the hope of the Government of India that this may be rendered possible and that effective steps may be taken at as early a date as possible to implement this hope. It was with that particular object that the Bhole Committee recommended the institution of a Central Institute probably at Delhi for medical research and post-graduate medical education. I am glad to be able to state that the present Ministry of Health have taken up active consideration of this subject and ere long it will be possible to take the first steps to implement the recommendations of the Bhole Committee. The Committee that was appointed to consider the details of the arrangements for the establishment of the Central Institute suggested, at the instance again of my esteemed friends Dr. Jivaraj Mehta and Dr. Kanolkar, that it was very necessary if the Central Institute was to function properly that there should be an up-grading of the various departments in the medical colleges, so that they may be units which may contribute to the successful working of the Central Institute. The Up-grading Committee was appointed by the Government of India in May 1948. They have toured the different Universities and met the representatives of the faculties of medicine and the principals of the medical colleges as well as the Ministers in charge of Public Health. The Committee have completed their labours and will be submitting their report to the Government of India during the course of the week. The Up-grading Committee had two objects in view:—(1) to recommend some of the departments which were immediately capable of being up-graded for post-graduate study during the course of the year and (2) to recommend further other departments which may perhaps require a little more lee-way to be made up to be up-graded in the next academic year or thereafter when certain conditions will have been fulfilled. It is our hope—I speak as one of the Members of the Up-grading Committee—that the recommendations of that Committee will be sympathetically and favourably considered both by the Central Government and the Provincial Governments, that they will be found acceptable to them and that they would implement them with the least possible delay.

Gentlemen, the establishment of the Central Institute and the up-grading of the departments in the different Medical Colleges make it more obligatory on the Universities to consider in what way they should promote post-graduate education and research. Looking over the many regulations of the many Indian Universities, I have been struck by the fact that there is wide variation. That in itself is a thing about which one need not worry. We do not want a dead level of uniformity in any sphere of intellectual activity, much less in graduate instruction. At the same time it seems to me to be very essential that certain minimum standards of efficiency should be made available in all Universities in the very interests of post-graduate instruction. Fortunately for us, so far as undergraduate instruction is concerned, we have the Indian Medical Council to give definite and perhaps detailed instructions to the Universities to follow in regard

to minimum standards. With regard to post-graduate education, however, it has not been possible to establish any such machinery. I found in the United States of America there was a machinery established for the purpose. The object of the machinery is to lay down certain minimum standards necessary for post-graduate instruction with regard to the manner in which post-graduates should be entertained, their period of study, and the facilities that should be made available. There is also an expert body to advise as to what are the essential requirements of a college or hospital which undertakes post-graduate instruction. The emphasis to-day is not on the examination, but on the manner in which the training is imparted in these institutions. I would like very respectfully to state that the first thing we have to consider is not the holding of an examination and the severity of the test, but the manner in which we train these post-graduates through a fairly continuous period so that the training itself may be such that we need not worry about the results of the examinations. The examination results would follow automatically.

Gentlemen, when we go into this subject, I am sure you will agree with me that variations must necessarily occur in regard to the different colleges and the different hospitals that are affiliated to these colleges. These variations may be due to the fact that certain of the colleges have been recently started; they may be due to the fact that in some cases the financial resources have not been adequate. They may also be due to the fact that the personnel in some of the colleges may not be sufficient and in some may not be as efficient for post-graduate education as for undergraduate education. There is no reflection on any college or any University if the conditions are not such as to favourably impress the Committee of enquiry in regard to some of those conditions. On the other hand the need for opportunities being given to the medical graduates of all the provinces that are best fitted to take up these post-graduate courses is such that we have to devise other methods where the institutions themselves may not be in a position to fulfil the requirements. I therefore plead that we should set up a machinery voluntarily, which will be advisory to the Universities and which will give us an idea as to what are the conditions that must be fulfilled before an institution can impart post-graduate education. This body will inspect the hospitals and the colleges concerned and report on the conditions. Such reports by an expert and independent body should be seriously taken note of by the Universities concerned. On the other hand, inasmuch as it is not possible for every University to cater to the needs of post-graduate instruction, there must be an arrangement by which some of the graduates of other Universities may take their post-graduate instruction and training in institutions where they are available in an abundant measure. Barriers of provincialism must not interfere with the possibilities of post-graduate education and research. I do not for a moment suggest that the students belonging to the particular province should be neglected. I think we can come to a happy compromise by which, while a certain quota is reserved for the province concerned, it will still be possible to have a certain number of seats allotted to students from other provinces, till such time as the institutions in those provinces are in a position to cater to their needs. Here again I may respectfully quote the example of the United States of America where there are a number of free and well-equipped medical institutions which are a delight for any medical man to visit. And yet, the American College of Surgeons, if I may restrict myself to the field of surgery, lays down the particular subjects which may be taken up for post-graduate study in each one of these institutions. In the well-known John Hopkins Hospital there are only five specialities. Similar restrictions are placed on the Mayo Clinic and on the Clinics at Boston, Cleveland, Harvard and Chicago. The American College of Surgeons are an effective controlling body and unless they state that a particular college is fit to take up post-graduate education, that college or University is not recognised as a centre for post-graduate education. I hope that this does not in any

may create any feeling of anxiety amongst the Universities in general or certain Universities in particular that the opportunities for their students would be restricted. Every year this committee goes about inspecting these different institutions. A committee of accredited representatives drawn from the different Universities for their expert knowledge and not for any other kind of qualification, will be in a better position than anybody else to get a fair and adequate idea of the manner in which the conditions needed are implemented by the different Universities. It is my hope that it will be possible for the Inter-University Board to create an organisation like that. It may be called the All-India Council of Post-graduate Medical Education. It will give us the necessary advice and will enable the Universities to develop along proper lines in regard to post-graduate instruction.

Gentlemen, there is another point which I would like to refer to. The Central Government is anxious to improve the scope of post-graduate education in all medical colleges. We hope and trust that the Central Government and the Provincial Governments will in future take it that it is their responsibility as much as that of the Universities, in fact it is their sole responsibility in the field of medical education in particular to come to the help of the Universities in regard to post-graduate education. I hope that the Central Government would be in a position to give us adequate finances to make the Council of Post-graduate Medical Education in Universities function effectively. Along with the Central Council of Post-graduate Medical Education, it is my hope that the individual Universities themselves will set up small councils for Post-graduate Medical Education. Madras and Calcutta have already set up such councils. The object of these councils will be to take all steps necessary to encourage proper instruction being given to the post-graduates. There are a number of medical colleges in many Universities. Not all of them are managed by the Governments. We want to pool the resources of these medical colleges and get the personnel required for training post-graduates. I think it will be agreed that the only profession in the world which has given honorary service without claiming any reward but which has got as many kicks as possible is the medical profession. That being so, it is only fair and proper that a certain amount of honorarium should be given to the post-graduate teachers who will have to spend a good deal of time for the proper training of the post-graduates. For this purpose, I feel that a council of Post-graduate Medical Education at each centre would be helpful to promote the objects of the Central Council of Post-graduate Education in Universities. In another respect, I venture to suggest that it may be necessary for us to have a committee for distributing the grants made by the Government.

I said that the Central Government were anxious that post-graduate education and research should be encouraged at the Universities. I feel that the object could best be served if they had a committee of medical experts to advise in such matters. If each individual University were to approach the Government, there would be very little possibility of any University getting its due recognition. If, on the other hand, a Central Committee was constituted to report on the needs of the different Universities, and distribute the grants made by the Government of India to the different Universities, I think it will go far to help us in the development of post-graduate education. For an analogy I will commend the Central Grants Committee which has been constituted by the Department of Education. This is a well-known feature in England. Some of you may say that the Central Grants Committee in England caters not only to education in the humanities and the sciences but also to medical education, and that it must, therefore, not be necessary to have two committees. I feel that for a short time at any rate it may be necessary to have two such committees. Ultimately the Committee that I have suggested for the distribution of grants to medical institutions for post-graduate study may be amalgamated with the University Grants Committee.

At any rate it is our hope that the two committees will work in active co-operation with each other and have the common purpose in view to aid in every manner possible higher education in all its spheres and come to concrete conclusions as to the manner in which they could be helped. Then there are the two departments, the Department of Education and the Department of Public Health and we want the sympathy of both the departments.

Gentlemen, I have just given you a rough idea of the thoughts that some of us have had for some time. This subject has been discussed informally with the different Members of the Universities and of the Governments when the Up-grading Committee toured some of the Northern Universities. It is my hope that it will be found possible for you to come to some concrete conclusions in regard to these matters. I have ventured with the help of a few of our colleagues to draft a few resolutions, not that they should be passed by you, but that they may be subjects for consideration, so that you may have a working basis on which you may pass your judgment. You may amend them, you may reject them or you may accept them. It is entirely left to you to do what you like. These draft resolutions were framed only last night. I must apologise to you for not having had the necessary time to send them to you because I could not do it of my own accord and I had to wait for some of my friends to come. I am particularly indebted to Dr. Jivraj Mehta, Dr. Gilder and the Director-General of Health Services, Dr. Raja, for having helped me to frame the draft resolutions. They will be circulated to you and you may then consider and make your contributions to each of those resolutions. While you are considering them I would request my friend, Dr. Jivraj Mehta to kindly give us the benefit of his advice and views on the general question of Post-graduate Medical Education.

DR. JIVRAJ MEHTA: Sir, you have very eloquently expressed in your wonderful way the various points concerning medical education and particularly, post-graduate medical education, which has been neglected since many years. The development of medical profession and particularly the organization of the health services in the country is largely responsible for the backwardness of both undergraduate and Post-graduate Medical Education, as well as for the lack of medical research. In the earlier days the services had a say in everything and they were largely concerned with loaves and fishes and enriching themselves with private practice. It is the association of private practice and the service which is largely responsible for our backwardness and also for the legacy which we have inherited, for example, while it may be possible to have good full-time teachers in non-clinical subjects we are not in a position to find full-time teachers in clinical subjects, because a good clinician automatically means that he can command huge private practice and he is not in a position or does not like to give it up, for the sake of medical teaching or medical research. That is the legacy we have inherited and it would be a very long time before we are in a position to get rid of it. At the same time we must make every effort to see that the medical profession in India assumes the same position and gets the same prestige as abroad. The suggestions regarding the requirements of the medical profession, medical research as well as the requirements of public health have been discussed threadbare or rather elaborately in the Bhoré Committee's Report and whatever has taken place in the development of ideas of medical education is largely due to the vast number of facts that the report brought to the notice of the public. One of the recommendations of that Committee was for the establishment of an All-India Medical Institute, and the Government of India appointed a Committee to make suggestions as to how the idea could be implemented. Before the Report of that Committee could come out the Government of India were faced with enormous difficulties brought about by the partition of the country and factors that have since followed into which I need not go at the present moment. When I took charge of the Director-Generalship of the Health Services and the Secretaryship of the Ministry of Health I realised that it would be a few years before

it could be possible to implement the idea of the All-India Medical Institute. It was impossible to construct buildings, it was impossible to find suitable equipment and it was still more difficult to find suitable men. I was a Member of the Committee regarding the All-India Medical Institute and they have supported the idea of up-grading the existing medical colleges. Even for that idea, I was further impressed by the lack of facilities and material that I referred to just now. And it may be 5 to 7 years before an institution of that nature could really be established and begin to function. I think it would be very improper and very wrong to wait till then and the original idea of up-grading the existing medical colleges should be pushed through as early as possible. Thanks to Sir Lakshmanaswami Mudaliar who has taken so much interest in the development of post-graduate medical research in the country, that Committee began to function and would very soon be submitting its report to the Government. I am sure that we would welcome that Report when it comes out and we would also urge on the Government that they should try and implement the recommendations as early and as best as possible. It will not only be the Central Government that will implement the recommendations but it will also be the duty of the Provincial and State Governments whose institutions that Committee may recommend for up-grading. The necessity for this is borne out still more by the fact that this country has now become independent and it would seem not to the dignity of the country that we should go on sending our undergraduates or relatively our post-graduates abroad for further studies. It is our duty to see that as much instruction of every kind is made available and provided for in our country. That does not mean that we should not be sending well-qualified men abroad to see what is happening abroad and to keep themselves in contact with work abroad and be inspired by such work abroad and be encouraged for taking it up here. But we are not going to be sending our men for the so-called post-graduate degrees. We must provide for them here and to that purpose I strongly support all you have urged that we must have a coordinated system of post-graduate training in the country. At the present moment medical colleges are springing up in large numbers but we have not got sufficient staff in those colleges to teach the graduate students. We know of instances where professors have resigned from one institution to take up a better post in another institution. Such a position may last for some five years or more. That is one of our difficulties. The second thing is, we have noticed that every University, even though it may have started a medical college afresh, is anxious that it should not be left behind in the race for having post-graduate degree courses and whether there are facilities available or not and whether there are sufficient teachers of calibre available or not, they want to provide for as many post-graduate courses as possible. If this tendency is persisted in and not properly checked and co-ordinated, we may again land ourselves in a very awkward position. So, the suggestion that some kind of machinery should be evolved which would help the various Universities in laying down definite courses of study for post-graduate training would be very helpful. It occurs to me that the best medium or organisation which could set up such a machinery would be your own Inter-University Board. I note that many Universities are anxious to maintain their independence and prestige and to have as little interference from outside as possible. But any organisation that would be set up by their own Board would be a proper machinery and would not mean interference in the internal work of the University. Your own Inter-University Board might set up a Board of about six persons, all distinguished medical educationists themselves and each of them an expert in his own line. That Board might inspect the various Universities, their courses of study and their medical institutions and make recommendations for bringing about a uniformity in the courses of study, the period that a doctor should put in before he could be admitted to the post-graduate study, etc., whether it should be 2 years or 3 years, and whether he should have had a resident appointment or not before he could be admitted to the post-graduate examination. These are matters which could be recommended by the

Board or Council on Post-graduate Education as you, Sir, have called it. Such a Council should, in my opinion, be appointed forthwith so that we may be able to organize the post-graduate education on a better scale. It would be helpful to the new Universities that are coming into existence and particularly to the new medical colleges. It would necessarily mean a certain amount of expenditure. Either the Universities will have to share that expenditure *pro-rata* or the better course would be, as you suggested, that the Universities should make an approach to the Government of India asking them for a definite grant for this particular purpose, because these experts will have to go round to the different centres. When they have to make such visits there is bound to be some pocket expenses. The grant may not be very much, say, it may be some Rs. 25,000 or so and it would meet most of the requirements. That Commission would then recommend to the Inter-University Board as to how the regulations for post-graduate students should be framed. The Government of India, if they so desire, may have one or two officers of their own associated with such a Board. Perhaps it would be helpful to have a senior officer nominated by the Government of India to work along with the Board. It may be said that a Board of 6 or 7 members may not be in a position to assess the requirements of each branch of post-graduate medical study. For that reason we need not multiply the number of members on the Board. The Board may approach specialists in the particular subjects and have the courses inspected in the laboratories of the college and make the necessary recommendations.

There is another point to which you have referred, Sir, and that is about the cost of post-graduate medical education. The Government of India are, of course, responsible for the health of the nation. It is not only the duty of the Government of India but it is also the responsibility of Provincial Governments. But so far as post-graduate medical education is concerned we must be self-sufficient. The Government should take a lead in bearing a large share of the burden of expenditure. It was with that object, Sir, that, when we sent a circular round to the various Provinces we made it perfectly clear that the Government of India would be prepared to bear the cost of up-grading the existing colleges or institutions and the cost of maintenance also would be appreciably shared by the Government of India along with the local Governments. But that will have to be done not for one year or for two years; it will have to be done for a number of years, say at least for five years, at the end of which period the matter may be reviewed as to what should be the share of the Provincial Government and what should be the share of the Central Government in such up-graded departments in the various colleges.

I am, therefore, in general agreement with what you have stated and I feel sure that you will be glad to have the views of the other Members who are present here before coming to final conclusions.

A discussion took place on the general issues regarding Post-graduate Medical Education and Research in which Dr. C. R. Reddy, Dr. Gilder, Dr. K. C. K. E. Raja and others participated.

The Conference then took up for consideration the draft resolutions that were placed before it, and after a full discussion, the following resolutions were adopted:—

RESOLUTIONS

1. This Conference is of opinion that it is desirable that certain minimum standards should be observed by all Universities in regard to post-graduate qualifications in the Faculty of Medicine.

2. That resident appointments on adequate salaries for a period of not less than one year covering Medicine and/or Surgery be a pre-requisite for all post-graduate qualifications, whether Diplomas or higher Degrees granted by Universities.

3. That Post-graduate qualifications may be either Diplomas or Degrees.

4. That the minimum period of study for a Diploma be one year.

That these Diplomas should be awarded only to those who have put in a course of study and hospital instruction in the speciality concerned in hospitals recognised for such purposes and under teachers approved for the purpose.

5. That in regard to higher qualifications like M.D., and M.S., and M.O., they should be confined to the main subjects of Medicine, Surgery, Obstetrics and Gynaecology, and to such other specialities as might be recommended by the Council of Post-graduate Medical Education from time to time.

6. That it is desirable that the post-graduate Degree courses should be so organised as to encourage research as well, but where the grant of a post-graduate Degree is based on a thesis to be submitted on any particular subject, there should also be a practical or a clinical test besides a *visa voce* examination.

7. That post-graduate courses of study should be made available only in hospitals which have adequate facilities for such post-graduate training and adequate trained personnel for such purpose.

* 8. That with a view to deciding what hospitals are fitted for such purposes, it would be necessary for an expert Commission appointed by the Council of Post-graduate Medical Education to inspect the Colleges and Hospitals attached to them and report thereon.

9. That the Universities be requested to recognise hospitals only if favourable reports are received from such independent Commissions of enquiry.

10. That in regard to the preclinical subjects and certain of the clinical laboratory subjects, such as Anatomy, Physiology, Biochemistry, Pharmacology, Pathology, Bacteriology, Public Health, it is desirable to introduce research Degrees of the nature of M.Sc., Ph.D., D.Phil., D.Sc. and M.D.

That all such Degrees should be available only after a definite period of study and research under approved teachers, which period may be (a) in regard to M.Sc. two years; Ph.D. three years; the D.Sc. Degree being ordinarily made available after obtaining the Ph.D. or the M.Sc.

That candidates should be required to submit themselves to a written, practical and oral test in the major subject concerned when they appear for the first time for a research degree, *i.e.*, M.Sc. or Ph.D.

11. All-India Council of Post-graduate Medical Education.

(i) That with a view to correlating standards and advising the Universities concerned on post-graduate studies in the Faculty of Medicine, this Conference is of opinion that it is desirable to constitute an All-India Council of Post-graduate Medical Education. Such a Council may be constituted by the Inter-University Board and should consist of specialists from teaching Faculties in Medicine and experts nominated by the Ministry of Health in the Union Government. Such a Council may consist of about seven members with power to co-opt.

(ii) This Conference requests the Government of India to bear the cost of establishing and maintaining the All-India Council of Post-graduate Medical Education and for the purposes of inspecting and advising the Universities concerned in regard to the post-graduate education facilities necessary in each case.

(iii) That till such time as conditions are favourable in all the Universities or where certain specialities can be developed for post-graduate study only in certain Universities this Conference is of opinion that a certain number of seats preferably fifty per cent. may be made available for candidates from other Universities.

(iv) That all teachers who undertake post-graduate teaching must be teachers recognised by the University and their academic qualifications and experience should be such as to render them eligible for such recognition.

(v) That with a view to adequately providing for instruction to post-graduates and for proper selection of personnel for such post-graduate teaching, individual Universities may set up Post-graduate Councils of Medical Education to advise them periodically, and it is also urged that teachers may be paid an honorarium or a salary for the post-graduate teaching that is allotted to them by the University.

(vi) That the Provincial and State Governments should be requested to pay lump sum grants to the Universities concerned to cover the expenses involved in organising such training, and for providing facilities for post-graduate education and research.

(vii) In view of the increasing importance that should be attached to research activities, and with a view to encouraging research among those who are pursuing post-graduate studies, this Conference recommends that Provincial and State Governments should give adequate scholarships and fellowships to enable the students to pursue their courses of study and research at Universities.

12. This Conference notes with satisfaction that it is the intention of the Government of India to make India self-sufficient as far as possible in facilities for post-graduate training in Medicine and that, with this object, the Government had decided on a dual plan of up-grading certain selected departments in medical colleges, research institutes and hospitals, as well as of establishing an All-India Medical Institute which will provide training of a high order for post-graduate education in various branches of medical science.

The Conference also notes with satisfaction that an Up-grading Committee, which the Central Government appointed some months back, has nearly completed its labours and is likely to submit its report at an early date. The Conference recommends that the Central, Provincial and State Governments should, with the least possible delay, take all steps needed in the light of the Committee's recommendations.

The decision of the Government of India to establish an All-India Leprosy Teaching and Research Centre is another development which the Conference warmly welcomes. It will be necessary to create, in due course, similar institutions for other special diseases, *e.g.*, tuberculosis, filariasis, etc., in view of their importance from the public health standpoint.

The Conference recommends that the Government of India should take up, as early as possible, the question of establishing a Committee for the time being for the allocation of grants from the Central Government for post-graduate medical instruction and research and reporting on the proper utilisation of such grants.

A. L. MUDALIAR,
Chairman.