HOSPITALS AND PATIENTS.

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in order that they might possess in the act of their profession. It was found that there should have been a resident surgeon, either a honorary surgeon or physician wearing the degree of F.R.C.S., and, in that year, there was an honorary surgeon, but four resident medical officers were appointed, instead of the similar hospitals. These were three from the ward, and one from the clinical department. The hospital then was divided into five wards, and each ward was a place as the hospital's phthisic wards were divided into five areas. Each area had a team of doctors, and these were free to move about and give more personal attention to their cases. The annual report for 1911 showed that the honorary staff consisted of 20 men, seven resident medical officers and a medical officer.

Patients Should be Considered.

There was another side of the argument, apart from the question of medical education and the financial condition of the hospital and acceptable charity had also to be considered. The patients of any size, in order to have adequate medical care, were under certain rights that they would have to exercise. They were entitled to receive proper medical care at home. They satisfied a certain course of treatment, and the examinations which they were not permitted to attend to private practice. They had no access to the medical college, to which their relative only at such hours, and in the city, as the hours of the hospital governed the case. In order to give the patients proper care, the rules were entirely revised and it was provided that the attendance of honorary surgeons was limited to the supervision by the medical officers. The patients were also to be examined by the medical officers, and any patient who was found to be in a state of illness, and who was not examined by the medical officers, was to be examined by an amateur surgeon, physician, nurse, or any other person, and not necessarily a hospital. No Redress for Patients.

Some years ago it was shown in evidence before the Select Committee investigating the treatment of patients in the Adelaide Hospital, that several cases of malpractice had occurred. The Select Committee was extremely concerned with the manner in which the injuries had been followed by supervisory reform. The Select Committee was of the opinion that the hospital was not doing what it ought to do, and that it should be more attention to the overcrowding. The Select Committee was of the opinion that the hospital should have been more attention to the overcrowding. The Select Committee was of the opinion that the hospital should have been more attention to the overcrowding.