

the irregularities of pulse or temperature so frequently observed within twenty-four hours of the period following delivery.

It is conceivable that a hectic temperature might be present without fulfilling these conditions, but such an eventuality need not be seriously considered.

We have sufficient proof in the Rotunda Hospital that the method I have indicated works with smoothness and absolute simplicity. It enables one to notice at once the true condition of the patient, and it directs the attention to deviations from the normal where a definition of morbidity based on temperature alone would at times fail to ensure the early recognition of the patient's state.

The above paper was presented in the Section of Obstetrics and Gynecology at the annual meeting of the British Medical Association at Leicester, in 1905 (see *British Medical Journal*.) In consequence, a committee was appointed on puerperal morbidity. The committee has collected a great amount of valuable information, and has prepared the following report:

“Resolved,—That it is desirable that maternity hospitals should adopt a uniform standard of puerperal morbidity, so that doubtful cases should no longer be included in one set of statistics and excluded from another, as is the case at present. A criterion of morbidity, necessarily arbitrary, is therefore recommended in the hope that it may be adopted in British and colonial hospitals.

“Recommendations.—The committee accordingly beg to submit the recommendations embodied in the following six resolutions:

“1. That irregularities in temperature occurring during the twenty-four hours following delivery should not be considered for statistical purposes.

“2. That as the time puerperal patients remain in hospital varies in different institutions, statistical tables should be formed from the records up to the end of the eighth day after delivery.

“3. That statistical records should relate only to patients delivered after the sixth lunar month of pregnancy.*

“4. That records of pulse and temperature should be taken

* It is recommended that cases delivered before the end of the sixth lunar month of pregnancy should be tabulated separately.