

MOTIVES FOR ADMISSION FROM THE OUT-PATIENT DEPARTMENT OF A BASE HOSPITAL

B. Mahendra

*(Out - patient Department, Base Hospital, Matale.
Presently, Department of Psychiatry, University of
Sri Lanka, Peradeniya Campus)*

The admission patterns from the O. P. D. of a Base Hospital, where the monthly attendance was approximately 10,000 were studied. It was seen that a substantial number of patients did not require admission on clinical grounds but wished for in-patient treatment on socio-economic and other considerations. 200 such patients were studied and their motives for insisting on admission even when the nature of the illness did not warrant admission were examined. It was found that 65% of patients demanding admission complained they had come long distances because facilities were unavailable at their local hospital or said

they had come "ready for admission". A difference in the reasons given for the first four days of the week as against the last three i.e. the week-end, was noted. It is contended that Medical Officers in peripheral units must either be provided with trained auxiliary staff or these stations manned by assistant medical practitioners. It is deemed more important to stock these institutions with ample quantities of drugs to deal with trivial ailments. District hospitals must be equipped with medical officers with facilities for minor surgery and there must be constant communication between them and the Base Hospital so that, for instance, patients awaiting routine surgery could be referred on appropriate days. It is shown meaningless to classify hospitals as "Base" unless it is fully justified, so that ludicrous situations of transfer from "Base" to "Base" need not arise. Furthermore, it is argued that having one-man specialities is wasteful.