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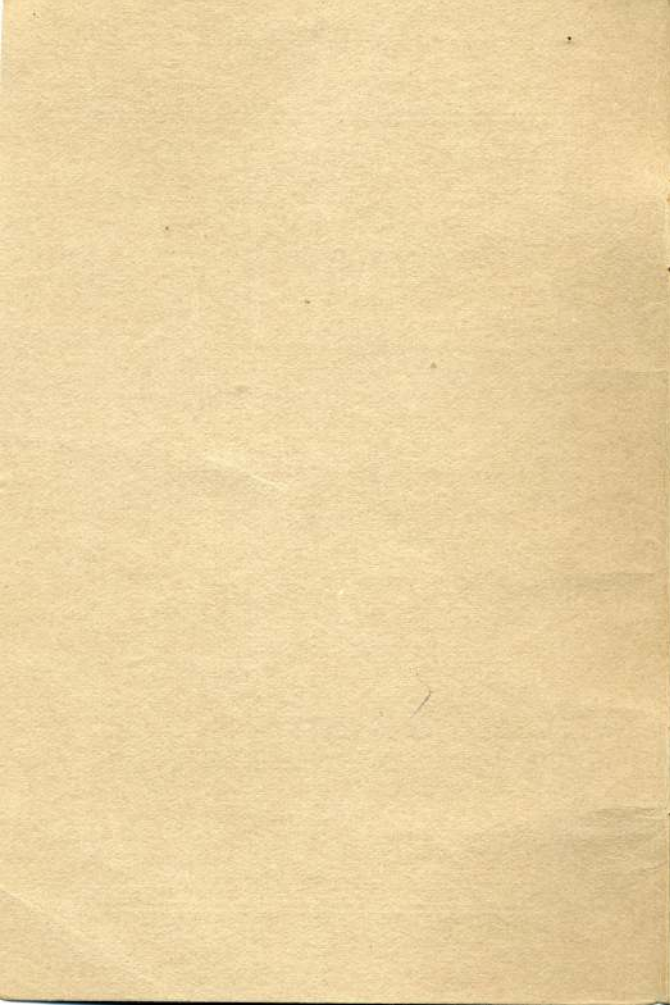
OHIO COUNTY
MEDICAL SOCIETY

CONSTITUTION
and BY-LAWS



OHIO COUNTY
WHEELING, WEST VIRGINIA

1922



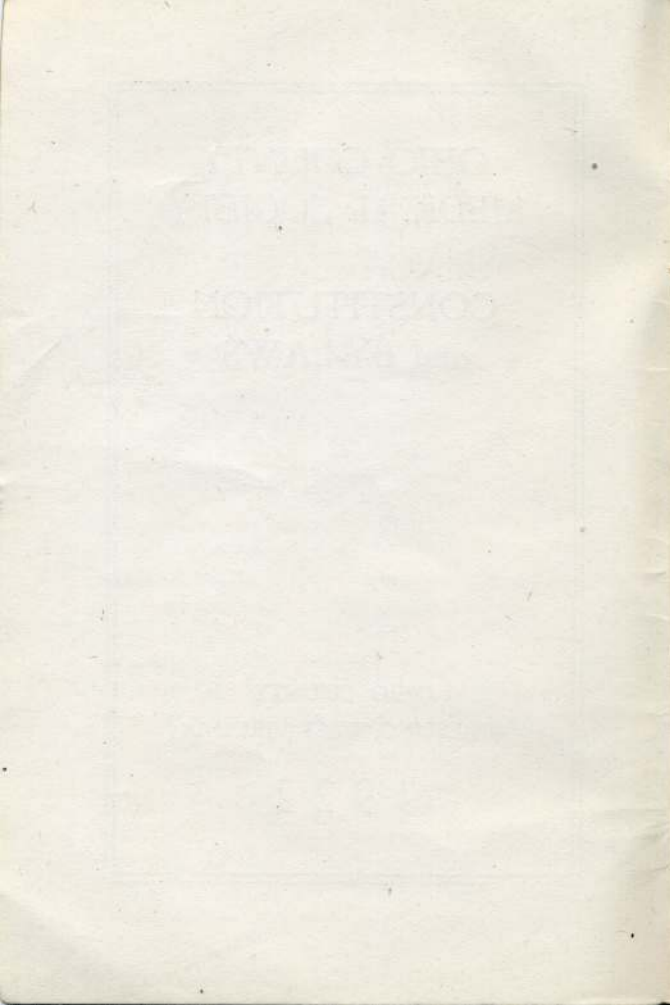
OHIO COUNTY
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OHIO COUNTY
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1922



OHIO COUNTY MEDICAL SOCIETY CONSTITUTION

ARTICLE I.—NAME AND TITLE OF THE SOCIETY

The name and title of this organization shall be The Ohio County Medical Society.

ARTICLE II.—PURPOSES OF THE SOCIETY

The purposes of this Society shall be to bring into one organization the physicians of Ohio County, so that by frequent meetings and full and frank interchange of views they may secure such intelligent unity and harmony in every phase of their labor as will elevate and make effectual the opinions of the profession in all scientific, legislative, public health, material and social affairs, to the end that the profession may receive that respect and support within its own ranks and from the community to which its honorable history and achievements entitle it;

and with other county societies to form The West Virginia State Medical Association and through it, with other state associations, to maintain The American Medical Association.

ARTICLE III.—ELIGIBILITY

Every legally registered physician residing and practicing in Ohio County, West Virginia, who is of good moral and professional standing and who does not support or practice, or claim to practice any exclusive system of medicine, shall be eligible for membership.

ARTICLE IV.—MEETINGS

Regular meetings shall be held at such time and place as may be determined by the Society.

Special meetings may be called by the President and be called on a written request of five members. A call for a special meeting shall state the object of such meeting, at which no business except that stated in the call shall be transacted.

ARTICLE V.—OFFICERS

The officers of this Society shall consist of a President, Vice-President, Secretary, Treasurer, Board of three Censors and Delegates to the West Virginia State Medical Association. These officers shall be elected

annually. The Delegates shall be elected to the West Virginia State Medical Association, for a period of one year, and in accordance with the constitution and by laws of the State Association.

ARTICLE VI.—FUNDS AND EXPENSES

Funds for meeting the expenses of the Society shall be raised by annual dues, special assessments and voluntary contributions. Funds may be appropriated by vote of the Society for such purposes as will promote its maintainance and welfare and that of the profession.

ARTICLE VII.—CHARTER

The Society shall apply to the council of the State Association for a charter at the meeting at which this constitution and by-laws is adopted, or as soon thereafter as practicable, and the charter shall be kept by the Secretary.

ARTICLE VIII.—TRUSTEES AND INCORPORATION

The Society shall have authority to appoint a Board of Trustees and to provide for articles of incorporation whenever it may deem this necessary.

ARTICLE IX.—AMENDMENTS

The Society may amend any article of this

constitution by a two-thirds vote of its members present at any regular meeting, provided that such amendment or amendments under consideration are not in conflict with the laws and regulations of the State Association; provided also that such amendment or amendments shall have been read in open session at two regular meetings and the members notified at least ten days in advance of the meeting at which final action is to be taken, that a constitutional amendment is to be voted upon.

BY-LAWS

CHAPTER I MEMBERSHIP

SECTION 1.—The Society shall judge of the qualifications of its members, but as it is the only portal to the State Medical Association and the American Medical Association for physicians within its jurisdiction, every reputable and legally qualified physician of Ohio County who does not support or practice or claim to practice, sectarian medicine, or any other form of healing not recognized by the American Medical Association, shall be eligible to membership.

SEC. 2.—A candidate for membership shall have practiced medicine in this (Ohio) County for at least one year prior to his election to this Society, and shall make application in writing and shall state his age, his college and date of graduation, the place in which he has practiced, and the date of registration in this state. The application must be accompanied by the admission fee and must be endorsed by two members of

this Society. It shall be referred to the Board of Censors, who shall inquire into the standing of the applicant, assure themselves that he or she is duly registered according to the laws of the State, and report at the next regular meeting of this Society. Election shall be by ballot, and two-thirds of the votes of all the members shall be necessary to elect. The application shall be returned to the Secretary, who shall file it for future reference. Applications for membership from rejected candidates shall not be received within six months of such rejection.

SEC. 3.—Any physician in the county who may feel aggrieved by the action of the Society in refusing him membership or in expelling or suspending him, shall have the right of appeal to the Council of the State Association.

SEC. 4.—Any physician living near the county line, or for other reasons satisfactory to this Society, or upon the decision of the Council of the State Association, upon appeal, may hold his membership in another county society.

SEC. 5.—A physician residing in an immediately adjoining county may become a member of this Society in like manner and on

the same terms as a physician living in this county, on permission of the county society of the county in which the applicant resides.

SEC. 6.—A member in good standing who is free from all indebtedness to this Society, and against whom no charges are pending, wishing to withdraw, shall be granted a transfer card without expense, upon the payment of his dues for the year in which withdrawal or removal is made. This card shall state the date the member associated himself with this Society, the date of issuance of the card, and shall be signed by the President and Secretary. It shall be accompanied with a copy of the application presented at the time the member joined this Society, for information to the Society in this or any other State, to which the member desires to attach himself.

SEC. 7.—A physician, accompanying his application with a transfer card from another component county society of this or any other state within sixty (60) days of the issuance of said card, shall be admitted without fee without the application being referred to the Board of Censors. Such application may be acted on at the meeting at which it is pre-

sented on the vote of three-fourths of the members present, otherwise it shall lie over until the next regular meeting. No annual dues for the current year shall be charged against such members, provided the same have been paid to the Society from which the applicant comes.

SEC. 8.—All members shall be equally privileged to attend all meetings and take part in all proceedings, and shall be eligible to any office or honor within the gift of the Society so long as they conform to this Constitution and By-Laws, including the payment of dues to this society and the West Virginia Medical Association. A member who is under sentence of suspension or expulsion shall not be permitted to take part in any of the proceedings, or be eligible to any office until relieved of such disability. And provided further, that none of the privileges of membership shall be extended to any person not a member of this Society except on a majority vote of the Society in regular meeting.

SEC. 9.—A member who is guilty of a criminal offense or of gross mis-conduct either as a physician or as a citizen, or shall wilfully neglect his duties as a member or officer of this Society, or shall recognize or consult

with an expelled member or irregular practitioner, or one who has been refused admission to this Society, or who violates any of the provisions of this Constitution and By-Laws, shall be liable to censure, suspension, expulsion or other punishment as the Society may determine. Charges against a member must be made in writing and be delivered to the secretary, who shall immediately furnish a copy to the accused and to the Chairman of the Board of Censors. The Board of Censors shall investigate the charges on their merits, but no action shall be taken by the Board within thirty days of the presentation of the charges to the accused, nor before giving the accused and accusers ample opportunity to be heard. The Board shall report (1) that the charges are not sustained; or (2) that the charges are sustained and that the accused be (a) censured; (b) suspended for a definite time, or (c) expelled. Censure or suspension shall require a two-thirds vote of the members present and voting, and a three-fourths vote of those present and voting shall be required to expel a member. No action shall be taken by the Society in such cases until at least eight weeks have elapsed since the filing of

the charges. Should such member subsequently offer a sufficient explanation, he may be reinstated, without expense, by a vote of three-fourths of the members. A member suspended for a definite time, shall be reinstated at the expiration of the time.

SEC. 10.—Kindly efforts in the interest of peace, conciliation or reformation, as far as possible and expedient, shall precede the filing of formal charges effecting the character or standing of a member, and the accused shall have opportunity to be heard in his own defense in all trials and proceedings of this nature.

SEC. 11.—Members expelled from this Society for any cause shall be eligible for membership after one year from date of expulsion and on the same terms and in like manner as original applicants.

CHAPTER II

POWERS AND DUTIES

SECTION 1.—This Society shall have general direction of the affairs of the Medical Profession of the County, and its influence shall be constantly exerted to better the scientific material and social conditions of every physician within its jurisdiction. Systematic

efforts shall be made by each member and by the society as a whole to increase the membership until it embraces every reputable physician in the County.

SEC. 2.—A meeting shall be held at 8:30 P. M. on Friday ~~of each week~~, from October to May, inclusive. Nine members shall constitute a quorum.

SEC. 3.—The first meeting in December of each year shall be set apart for a full and frank discussion of the business affairs of the profession of the County. The officers and Committee on Program shall profit by experience and strive to arrange for the most attractive and successful proceedings for each meeting. Crisp papers and discussions and reports of cases shall be arranged for and encouraged and tedious and profitless proceedings and discussions shall be avoided as far as practicable.

SEC. 4.—The Society shall endeavor to educate its members to the belief that the physician should be a leader in his community, in character, in learning, in dignified and manly bearing, and in courteous and open treatment of his brother physician, to the end that the profession may occupy that

twice a month X
X amended 1925

place in its own and the public estimation, to which it is entitled.

CHAPTER III

OFFICERS

SECTION 1.—The Officers of the Society shall be elected at the last meeting in May of each year, which shall be known as the annual meeting. Nominations shall be made by informal ballot and all elections shall be by ballot. The vote of the majority of all members present shall be necessary to an election.

SEC. 2.—The President shall preside at the meetings of the Society, and perform such other duties as custom and parliamentary usage may require. He shall be the real head of the profession in the County during the year, and it shall be his pride and ambition to leave it in better condition as regards both scientific attainments and harmony than at the beginning of his term of office.

SEC. 3.—The Vice-President shall assist the President in the performance of his duties, shall preside in his absence and on his death, resignation or removal from the County, shall succeed to the presidency.

SEC. 4.—The Secretary shall record the minutes of the meetings and receive and care for all records and papers belonging to the Society, including its charter. He shall notify each member of the Society as to the time and place of each meeting, and whenever possible, give the program for the meeting. He shall be the chairman of the Committee on Program and Scientific Work. He shall keep an account of and promptly turn over to the Treasurer all funds of the Society which may come into his hands. He shall make and keep a list of the members of this Society in good standing, noting of each his correct name, address, place and date of graduation, and the date of the certificate entitling him to practice medicine in this state; and in a separate list he shall note the same facts in regard to each legally qualified physician in this county, not a member of this Society. It shall be his duty to send a copy of such lists, on blank forms furnished him for that purpose, to the Secretary of the State Association at such time as may be designated, by the State Association. In making such lists he shall endeavor to account for each physician who has moved into or out of the County during the year,

stating, when possible, both his present and past address. At the same time and with his report of such lists of members and physicians, he shall transmit to the State Association his order on the Treasurer for the annual dues of the Society.

SEC. 5.—The Treasurer shall receive all dues and moneys belonging to the Society, from the hands of the Secretary or members, and shall pay out the same only on the written order of the President, countersigned by the Secretary. He shall submit a written report at each annual meeting.

SEC. 6.—The Delegates shall attend and faithfully represent the members of this Society and the profession of this County in the House of Delegates of the State Association, and shall make a report of the proceedings of that body to this Society at the earliest opportunity.

CHAPTER IV COMMITTEES

SECTION 1.—There shall be a Board of Censors as provided in the Constitution, a standing committee on Program and Scientific Work, a committee on Public Health and Legislation, a committee on Social Entertain-

ments, an auditing committee and such special committees as may from time to time be deemed necessary. Each committee to consist of three members.

SEC. 2.—BOARD OF CENSORS. This Board shall examine and report on the qualifications of applicants for membership, subjecting each applicant to such examination as it may deem necessary. It shall investigate charges preferred against any member, and report its conclusions and recommendations to the Society. In case of the absence of a member of the Board, the President may appoint some member to fill the vacancy. The senior member of the Board in point of service shall be chairman of the Board.

SEC. 3.—COMMITTEE OF PROGRAM AND SCIENTIFIC WORK. This Committee shall consist of the President, Vice-President and Secretary. It shall be its duty to promote the scientific work of the Society by arranging attractive programs for each meeting and by urging each member to take part in the scientific program.

SEC. 4.—COMMITTEE ON SOCIAL ENTERTAINMENTS. This committee shall consist of three members appointed annually by the President. It shall be its duty to promote all

social functions of the Society. It shall stimulate fraternalism and good feeling among the members and visitors in every way possible. It shall provide for annual luncheons, dinners, banquets, etc., in order to bring members together socially.

SEC. 5.—COMMITTEE ON PUBLIC HEALTH AND LEGISLATION. This Committee shall consist of three members, who shall be appointed annually by the President. It shall be its duty to enforce and support the Sanitary and Medical Laws of the State in this County, to co-operate with the Committee on Public Policy and Legislation of the State Association in all matters pertaining to legislation, and prosecute quacks, and medical pretenders in this County.

SEC. 6.—AUDITING COMMITTEE. This committee shall consist of the secretary and three members appointed annually by the President. It shall be its duty to audit the Treasurer's Books in the month of May each year and make report to the Society at the annual meeting held on the last Friday in May.

CHAPTER V

FUNDS AND EXPENSES

SECTION 1.—The admission fee, which must

accompany the application, shall be \$25.00 and shall include the annual dues for the fiscal year. The admission fee shall be returned if the applicant is not accepted.

SEC. 2.—The annual dues shall be \$10.00 and shall be payable on January 1st, of each year. Any member who shall fail to pay his annual dues by April 1, shall be held as suspended without action on the part of the Society. A member suspended for non-payment of dues shall be restored to full membership on payment of all indebtedness. Members more than one year in arrears shall be dropped from the roll of members.

SEC. 3.—The fiscal year of the Society shall be from June 1st to May 31st, inclusive.

CHAPTER VI.

ORDER OF BUSINESS

The order of business shall be as follows:

1. Called to order by the President.
2. Reading of the minutes of last meeting.
3. Clinical Cases.
4. Papers and Discussions.
5. Unfinished Business.
6. New Business.

X *Amendment of 1925*

7. Miscellaneous Business.
8. Announcements.
9. Adjournment.

CHAPTER VII

RULES OF ORDER

The deliberations of this Society shall be governed by parliamentary usage as contained in Roberts Rules of Order, unless otherwise determined by vote.

CHAPTER VIII

THE PRINCIPLES OF MEDICAL ETHICS

The Principles of Medical Ethics of the American Medical Association shall govern this Society.

CHAPTER IX

AMENDMENTS

These By-Laws may be amended at any regular meeting by two-thirds vote therefor, provided that such amendment has been read in open session at the preceeding regular meeting and a copy of the same had been sent to each member by the Secretary, ten days in advance of the meeting at which final action is to be taken.

CHAPTER X

SECTION 1.—The following shall be known as amendment regulating advertising and matters of publicity concerning its members, and hereby is, by its adoption a part of the Constitution and By-Laws of the Ohio County Medical Society, and it shall in no way conflict with the existing Constitution and By-Laws.

SEC. 2.—Any member found guilty by the Society of a violation or violations of the provisions of this amendment shall be deemed guilty of undignified and unprofessional conduct and shall be punished according to the provisions of the Constiution and By-Laws of this Society.

CHAPTER XI

SECTION 1.—Members shall be permitted to insert properly worded cards in the local papers as follows:

Recent arrivals, for a period of six months.

Specialists, for a period of ninety days.

Removal notices, for a period of thirty days.

SEC. 2.—Specialists' cards shall specifically state that practice is limited to a certain branch or branches.

SEC. 3.—Cards in out of town papers or in any public places, e. g., hotels, steamboats, cafe's, etc., are expressly forbidden.

SEC. 4.—Members are not permitted to insert cards in advertising pamphlets or special book editions.

SEC. 5.—The distribution of pocket cards shall be discreet and dignified and shall be limited to patients or on solicitation.

CHAPTER XII

SECTION 1.—Newspaper publicity in general concerning professional matters shall be avoided, and any member of this Society found guilty thereof, shall be dealt with in accordance with Chapter 1, Section 9 of these By-Laws.

SEC. 2.—Any member or members shall not permit interviews with newspaper representatives concerning professional cases for publication or permit their written accounts of such matters to be published, except as hereinafter provided for.

SEC. 3.—Any member or members intending to make public through the lay-press any matters, whether interviews, papers or accounts of work or experiments, or accounts of cases, or anything whatsoever of a pro-

fessional nature, shall first submit the same to the Society at regular meeting for approval and permission for its publicity before publishing the same. Should permission be refused by a vote of the majority present, and voting on a motion made for such purpose, then it shall not be published.

SEC. 4.—Any member or members shall abstain from giving an account of their papers or lectures to the lay press for publication prior to its rendition before public audiences, societies, or clubs, composed of laymen.

SEC. 5.—It is understood that Section 3 of this Chapter (XII) does not apply to the Secretary of this Society in the official discharge of his duty.

GENERAL PRACTICE

For each visit, whether medical, surgical or obstetrical, in cases of regular attendance, during the day	\$ 3.00 to \$ 5.00
For each visit, at the call of the patient or friends, after 6 o'clock P. M. and before 11 o'clock P. M. or during office hours	3.00 to 10.00
11 P. M. and 8 A. M.	5.00 to 10.00
For each visit out of the city, mileage shall be charged at a rate, per mile, for short distances, of	1.00
In cases of long distances, traveled by railway, mileage may be computed according to the time saved the practitioner..	1.00 to 2.00
For first visit in consultation..	5.00 to 25.00
For each subsequent visit in consultation, where the service is continuous, the fee may be as in ordinary cases	3.00 to 5.00
Consultations held at night may have the fee for a night visit added.	
In cases of extraordinary service, detention or attendance, or when the case is one of unusual importance, repugnance or responsibility, the fee should be proportionately increased; and the duty to charge such increased fee shall be considered obligatory upon the practitioner.	
For consultation or advice at the office of the physician, according to the importance of the case, unseasonableness of the hour, or time occupied	2.00 to 10.00

For consultation or advice by telephone	1.00 to	5.00
For vaccination, at the office of the physician	1.00	
If at the patient's residence or place of business, the fee for a visit shall be charged.		
For a post mortem examination, made at the request of the family, friends or relatives of the deceased, or for official inquiry	25.00 to	100.00
The fee for giving expert testimony in a court of record shall be	100.00	
The fee not as an expert shall be	25.00	
The fee for administering a general anaesthetic shall be	10.00 to	50.00

OBSTETRICS

For accouchment in normal labor during the day	25.00 to	50.00
If the attendance is during the night, the fee for a night visit may be added, at the discretion of the accoucheur.		
For attendance during tedious labor, placenta previa, retained placenta, post partum hemorrhage, multiple birth or other complications, it shall be considered obligatory to make such additional charges as, in the discretion of the accoucheur, the extraordinary service demands.		
For obstetrical operations, such as version; delivery by forceps or any other operation requiring the skill of the accoucheur, there shall be charged in addition to the usual fee for attendance	25.00 to	100.00

Fee for suturing lacerated perineum 10.00

All subsequent visits shall be charged as in ordinary cases of attendance.

In cases in which the accoucheur has been previously engaged, and he arrives after the delivery of the child, but delivers the placenta, the full fee shall be charged, but if the child and the placenta are both delivered, one-half of the fee may be charged. This applies to cases in which the delay does not arise from the fault of the accoucheur.

In consultations, when the consultant is retained in joint attendance, both consulting and attending accoucheur shall be entitled to the full fee.

SURGERY

For capital operations, or operations of unusual difficulty or responsibility, (such as abdominal or vaginal section for the removal or treatment of tumors or diseased or injured organs of the abdomen or pelvis, laminectomy, amputation of the limbs, ligation of the large arteries, lithotomy, herniotomy, removal of the breasts or other large tumors,) major operations on the eye, head, face, etc.. 100.00 to 1,000.00

Except extraordinary and unusual cases or in great emergency where unusual skill has saved a life, etc., fee may be increased to \$2,000.00 for a single operation.

For operations of secondary importance, or difficulty, such as fistula-in-ano, harelip, cleft pal-

ate, tonsillectomy, radical cure of hydrocele, reductions of dislocations or fractures of large bones, amputation of fingers or toes, tracheotomy, removal of small tumors, ligation of arteries of secondary size, operations on the bladder, urethra, vagina, rectum, etc.

50.00 to 200.00

For minor operations, such as excision of nasal polypi, tapping for hydrocele or acites, opening abscesses, catheterism, stitching recent wounds, excision of wens, reductions of dislocations or fractures of small bones, circumcision, etc.

10.00 to 50.00

After operations all subsequent visits or dressings shall be charged as in ordinary cases of attendance.

The above table of fees being founded on a just consideration of the professional services which the members of this Society are called upon to perform, it will be considered their duty to firmly adhere to them in all cases, except where the circumstances of their patients are of a character clearly to forbid such a course. It is not designed, however by these regulations to prevent gratuitous services to the WORTHY poor who ought ever to be deemed objects of kindness and attention.

Radium and X-Ray fees shall be those current and in accordance with the judgment of the members of the Society doing this work.

Intravenous Injections of Arsphe-
namine or Neo-Arsphenamine..

15.00 to 25.00

Vaccine Treatments (injections) each Injection plus the cost of Vaccine if purchased by the physician	2.00 to	5.00
Antitoxin, each Injection	5.00 to	10.00
Urinalysis and Blood examina- tion and Drawing of Blood for Wasserman, when done by the physician	2.00 to	5.00
Certificates for Sickness or Ac- cident Companies	2.00 to	5.00
Return to Work Certificates ...	1.00	

PRINCIPLES OF MEDICAL ETHICS

CHAPTER I

The Duties of Physicians to Their Patients

THE PHYSICIAN'S RESPONSIBILITY

SECTION 1.—A profession has for its prime object the service it can render to humanity; reward or financial gain should be a subordinate consideration. The practice of medicine is a profession. In choosing this profession an individual assumes an obligation to conduct himself in accord with its ideals.

PATIENCE, DELICACY AND SECRECY

SEC. 2.—Patience and delicacy should characterize all the acts of a physician. The confidences concerning individual or domestic life entrusted by a patient to a physician and the defects of disposition or flaws of character observed in patients during medical attendance should be held as a trust and should never be revealed except when imperatively required by the laws of the state. There are occasions, however, when a physician must

determine whether or not his duty to society requires him to take definite action to protect a healthy individual from becoming infected, because the physician has knowledge, obtained through the confidences entrusted to him as a physician, of a communicable disease to which the healthy individual is about to be exposed. In such a case, the physician should act as he would desire another to act toward one of his own family under like circumstances. Before he determines his course, the physician should know the civil law of his commonwealth concerning privileged communications.

PROGNOSIS

SEC. 3.—A physician should give timely notice of dangerous manifestations of the disease to the friends of the patient. He should neither exaggerate nor minimize the gravity of the patient's condition. He should assure himself that the patient or his friends have such knowledge of the patient's condition as will serve the best interests of the patient and the family.

PATIENTS MUST NOT BE NEGLECTED

Sec. 4.—A physician is free to choose whom he will serve. He should, however, always

respond to any request for his assistance in an emergency or whenever temperate public opinion expects the service. Once having undertaken a case, a physician should not abandon or neglect the patient because the disease is deemed incurable; nor should he withdraw from the case for any reason until a sufficient notice of a desire to be released has been given the patient or his friends to make it possible for them to secure another medical attendant.

CHAPTER II

The Duties of Physicians to Each Other and to the Profession at Large

ARTICLE I.—DUTIES TO THE PROFESSION

UPHOLD HONOR OF PROFESSION

SECTION I.—The obligation assumed on entering the profession requires the physician to comport himself as a gentleman and demand that he use every honorable means to uphold the dignity and honor of his vocation, to exalt its standards and to extend its sphere of usefulness. A physician should not base his practice on an exclusive dogma or sectarian system, for "sects are implacable

despots; to accept their thralldom is to take away all liberty from one's action and thought." (Nicon, father of Galen.)

DUTY OF MEDICAL SOCIETIES

SEC. 2.—In order that the dignity and honor of the medical profession may be upheld, its standards exalted, its sphere of usefulness extended, and the advancement of medical science promoted, a physician should associate himself with medical societies and contribute his time, energy and means in order that these societies may represent the ideals of the profession.

DEPARTMENT

SEC. 3.—A physician should be "an upright man, instructed in the art of healing." Consequently, he must keep himself pure in character and conform to a high standard of morals, and must be diligent and conscientious in his studies. "He should also be modest, sober, patient, prompt to do his whole duty without anxiety; pious without going so far as superstition, conducting himself with propriety in his profession and in all the actions of his life." (Hippocrates.)

ADVERTISING

SEC. 4.—Solicitation of patients by circulars or advertisements, or by personal communi-

cations or interviews, not warranted by personal relations, is unprofessional. It is equally unprofessional to procure patients by indirection through solicitors or agents of any kind, or by indirect advertisement, or by furnishing or inspiring newspaper or magazine comments concerning cases in which the physician has been or is concerned. All other like self-laudations defy the traditions and lower the tone of any profession and so are intolerable. The most worthy and effective advertisement possible, even for a young physician, and especially with his brother physicians, is the establishment of a well-merited reputation for professional ability and fidelity. This cannot be forced, but must be the outcome of character and conduct. The publication or circulation of ordinary simple business cards, being a matter of personal taste or local custom, and sometimes of convenience, is not *per se* improper. As implied, it is unprofessional to disregard local customs and offend recognized ideals in publishing or circulating such cards.

It is unprofessional to promise radical cures; to boast of cures and secret methods of treatment or remedies; to exhibit certificates of skill or of success in the treatment

of diseases; or to employ any methods to gain the attention of the public for the purpose of obtaining patients.

PATENTS AND PERQUISITES

SEC. 5.—It is unprofessional to receive remuneration from patents for surgical instruments or medicines; to accept rebates on prescriptions or surgical appliances; or perquisites from attendants who aid in the care of patients.

MEDICAL LAWS—SECRET REMEDIES

SEC. 6.—It is unprofessional for a physician to assist unqualified persons to evade legal restrictions governing the practice of medicine; it is equally unethical to prescribe or dispense secret medicines or other secret remedial agents, or manufacture or promote their use in any way.

SAFEGUARDING THE PROFESSION

SEC. 7.—Physicians should expose without fear or favor, before the proper medical or legal tribunals, corrupt or dishonest conduct of members of the profession. Every physician should aid in safeguarding the profession against the admission to its ranks of those who are unfit or unqualified because deficient either in moral character or education.

ARTICLE II.—PROFESSIONAL SERVICES OF PHYSICIANS TO EACH OTHER

PHYSICIANS DEPENDENT ON EACH OTHER

SECTION 1.—Experience teaches that it is unwise for a physician to treat members of his own family or himself. Consequently, a physician should always cheerfully and gratuitously respond with his professional services to the call of any physician practicing in his vicinity, or of the immediate family dependents of physicians.

COMPENSATION FOR EXPENSES

SEC. 2.—When a physician from a distance is called on to advise another physician or one of his family dependents, and the physician to whom the service is rendered is in easy financial circumstances, a compensation that will at least meet the traveling expenses of the visiting physician should be proffered. When such a service requires an absence from the accustomed field of professional work of the visitor that might reasonably be expected to entail a pecuniary loss, such loss should, in part at least, be provided for in the compensation offered.

ONE PHYSICIAN TO TAKE CHARGE

SEC. 3.—When a physician or a member of his dependent family is seriously ill, he or

his family should select a physician from among his neighboring colleagues to take charge of the case. Other physicians may be associated in the care of the patient as consultants.

ARTICLE III.—DUTIES OF PHYSICIAN IN CONSULTATION

CONSULTATION SHOULD BE REQUIRED

SECTION 1.—In serious illness, especially in doubtful or difficult conditions, the physician should request consultations.

CONSULTATION FOR PATIENT'S BENEFIT

SEC. 2.—In every consultation, the benefit to be derived by the patient is of first importance. All the physicians interested in the case should be frank and candid with the patient and his family. There never is occasion for insincerity, rivalry or envy and these should never be permitted between consultants.

PUNCTUALITY

SEC. 3.—It is the duty of a physician, particularly in the instance of a consultation, to be punctual in attendance. When, however, the consultant or the physician in charge is unavoidably delayed, the one who first arrives should wait for the other for a reasonable time, after which the consultation should be

considered postponed. When the consultant has come from a distance, or when for any reason it will be difficult to meet the physician in charge at another time, or if the case is urgent, or if it be the desire of the patient, he may examine the patient and mail his written opinion, or see that it is delivered under seal, to the physician in charge. Under these conditions, the consultant's conduct must be especially tactful; he must remember that he is framing an opinion without the aid of the physician who has observed the course of the disease.

PATIENT REFERRED TO SPECIALIST

SEC. 4.—When a patient is sent to one specially skilled in the care of the condition from which he is thought to be suffering, and for any reason it is impracticable for the physician in charge of the case to accompany the patient, the physician in charge should send to the consultant by mail, or in the care of the patient under seal, a history of the case, together with the physician's opinion and an outline of the treatment, or so much of this as may possibly be of service to the consultant; and as soon as possible after the case has been seen and studied, the consultant should address the physician in charge and

advise him of the results of the consultant's investigation of the case. Both these opinions are confidential and must be so regarded by the consultant and by the physician in charge.

DISCUSSIONS IN CONSULTATION

SEC. 5.—After the physicians called in consultation have completed their investigations of the case, they may meet by themselves to discuss conditions and determine the course to be followed in the treatment of the patient. No statement or discussion of the case should take place before the patient or friends, except in the presence of all the physicians attending, or by their common consent; and no opinions or prognostications should be delivered as a result of the deliberations of the consultants, which have not been concurred in by the consultants at their conference.

ATTENDING PHYSICIAN RESPONSIBLE

SEC. 6.—The physician in attendance is in charge of the case and is responsible for the treatment of the patient. Consequently, he may prescribe for the patient at any time and is privileged to vary the mode of treatment outlined and agreed on at a consultation whenever, in his opinion, such a change is

warranted. However, at the next consultation, he should state his reasons for departing from the course decided on at the previous conference. When an emergency occurs during the absence of the attending physician, a consultant may provide for the emergency and the subsequent care of the patient until the arrival of the physician in charge, but should do no more than this without the consent of the physician in charge.

CONFLICT OF OPINION

SEC. 7.—Should the attending physician and the consultant find it impossible to agree in their view of a case another consultant should be called to the conference or the first consultant should withdraw. However, since the consultant was employed by the patient in order that his opinion might be obtained, he should be permitted to state the result of his study of the case to the patient, or his next friend in the presence of the physician in charge.

CONSULTANT AND ATTENDANT

SEC. 8.—When a physician has attended a case as a consultant, he should not become the attendant of the patient during that illness except with the consent of the physician

who was in charge at the time of the consultation.

ARTICLE IV.—DUTIES OF PHYSICIANS IN
CASES OF INTERFERENCE
CRITICISM TO BE AVOIDED

SECTION 1.—The physician, in his intercourse with a patient under the care of another physician, should observe the strictest caution and reserve; should give no disingenuous hints relative to the nature and treatment of the patient's disorder; nor should the course of conduct of the physician, directly or indirectly, tend to diminish the trust reposed in the attending physician.

SOCIAL CALLS ON PATIENT OF ANOTHER

PHYSICIAN

SEC. 2.—A physician should avoid making social calls on those who are under the professional care of other physicians without the knowledge and consent of the attendant. Should such a friendly visit be made, there should be no inquiry relative to the nature of the disease or comment upon the treatment of the case, but the conversation should be on subjects other than the physical condition of the patient.

SERVICES TO PATIENT OF ANOTHER PHYSICIAN

SEC. 3.—A physician should never take charge of or prescribe for a patient who is under the care of another physician, except in an emergency, until after the other physician has relinquished the case or has been properly dismissed.

CRITICISM TO BE AVOIDED

SEC. 4.—When a physician does succeed another physician in the charge of a case, he should not make comments on or insinuations regarding the practice of the one who preceded him. Such comments or insinuations tend to lower the esteem of the patient for the medical profession and so react against the critic.

EMERGENCY CASES

SEC. 5.—When a physician is called in an emergency and finds that he has been sent for because the family attendant is not at hand, or when a physician is asked to see another physician's patient because of an aggravation of the disease, he should provide only for the patient's immediate need and should withdraw from the case on the arrival of the family physician after he has reported the condition found and the treatment administered.

WHEN SEVERAL PHYSICIANS ARE SUMMONED

SEC. 6.—When several physicians have been summoned in a case of sudden illness or of accident, the first to arrive should be considered the physician in charge. However, as soon as the exigencies of the case permit, or on the arrival of the acknowledged family attendant or the physician the patient desires to serve him, the first physician should withdraw in favor of the chosen attendant; should the patient or his family wish some one other than the physician known to be the family physician to take charge of the case the patient should advise the family physician of his desire. When, because of sudden illness or accident, a patient is taken to a hospital, the patient should be returned to the care of his known family physician as soon as the condition of the patient and the circumstances of the case warrant this transfer.

A COLLEAGUE'S PATIENT

SEC. 7.—When a physician is requested by a colleague to care for a patient during his temporary absence, or when, because of an emergency, he is asked to see a patient of a colleague, the physician should treat the patient in the same manner and with the

same delicacy as he would have one of his own patients cared for under similar circumstances. The patient should be returned to the care of the attending physician as soon as possible.

RELINQUISHING PATIENT TO REGULAR
ATTENDANT

SEC. 8.—When a physician is called to the patient of another physician during the enforced absence of that physician, the patient should be relinquished on the return of the latter.

SUBSTITUTING IN OBSTETRIC WORK

SEC. 9.—When a physician attends a woman in labor in the absence of another who has been engaged to attend, such physician should resign the patient to the one first engaged, upon his arrival; the physician is entitled to compensation for the professional services he may have rendered.

ARTICLE V.—DIFFERENCES BETWEEN
PHYSICIANS
ARBITRATION

SECTION 1.—Whenever there arises between physicians a grave difference of opinion which cannot be promptly adjusted, the dispute should be referred for arbitration to a

committee of impartial physicians, preferably the Board of Censors of a component county society of the American Medical Association.

ARTICLE VI.—COMPENSATION

LIMITS OF GRATUITOUS SERVICE

SECTION 1.—The poverty of a patient and the mutual professional obligation of physicians should command the gratuitous services of a physician. But institutions endowed by societies, and organizations for mutual benefit, or for accident, sickness and life insurance, or for analogous purposes, should be accorded no such privileges.

CONTRACT PRACTICE

SEC. 2.—It is unprofessional for a physician to dispose of his services under conditions that make it impossible to render adequate service to his patient or which interfere with reasonable competition among the physicians of a community. To do this is detrimental to the public and to the individual physician, and lowers the dignity of the profession.

SECRET DIVISION OF FEES CONDEMNED

SEC. 3.—It is detrimental to the public good and degrading to the profession, and therefore unprofessional, to give or to receive a

commission. It is also unprofessional to divide a fee for medical advice or surgical treatment, unless the patient or his next friend is fully informed as to the terms of the transaction. The patient should be made to realize that a proper fee should be paid the family physician for the service he renders in determining the surgical or medical treatment suited to the condition, and in advising concerning those best qualified to render any special service that may be required by the patient.

CHAPTER III

The Duties of the Profession to the Public

PHYSICIANS AS CITIZENS

SECTION 1.—Physicians, as good citizens and because their professional training specially qualifies them to render this service, should give advice concerning the public health of the community. They should bear their full part in enforcing its laws and sustaining the institutions that advance the interests of humanity. They should cooperate especially with the proper authorities in the administration of sanitary laws and regu-

lations. They should be ready to counsel the public on subjects relating to sanitary police, public hygiene and legal medicine.

PHYSICIANS SHOULD ENLIGHTEN PUBLIC—
DUTIES IN EPIDEMICS

SEC. 2.—Physicians, especially those engaged in public health work, should enlighten the public regarding quarantine regulations; on the location, arrangement and dietaries of hospitals, asylums, schools, prisons and similar institutions; and concerning measures for the prevention of epidemic and contagious diseases. When an epidemic prevails, a physician must continue his labors for the alleviation of suffering people, without regard to the risk to his own health or life or to financial return. At all times, it is the duty of the physician to notify the properly constituted public health authorities of every case of communicable disease under his care, in accordance with the laws, rules and regulations of the health authorities of the locality in which the patient is.

PUBLIC WARNED

SEC. 3.—Physicians should warn the public against the devices practiced and the false

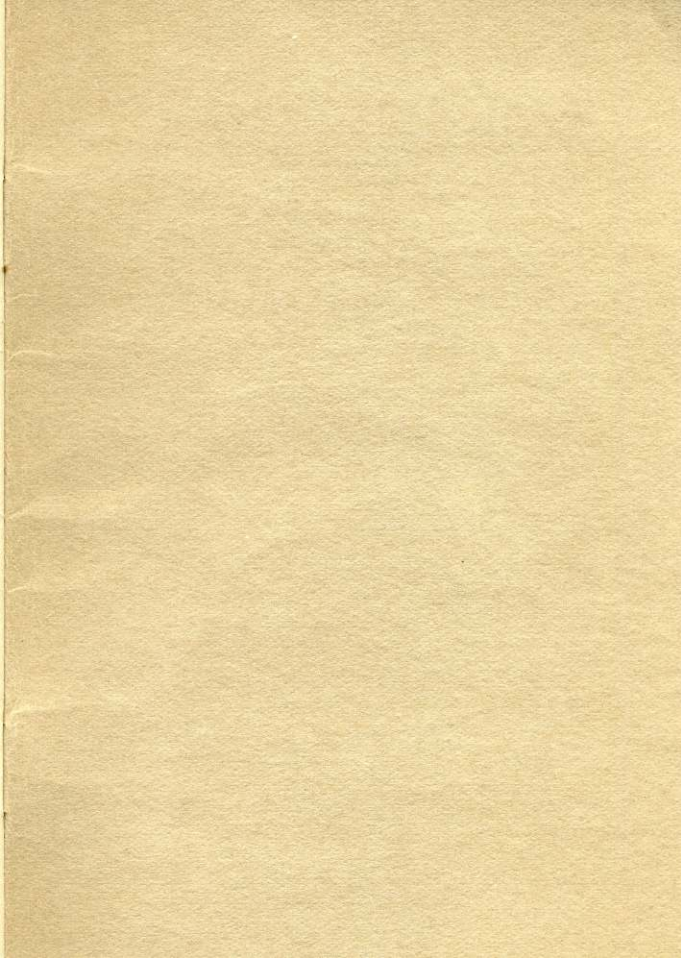
pretensions made by charlatans which may cause injury to health and loss of life.

PHARMACISTS

SEC. 4.—*By legitimate patronage, physicians should recognize and promote the profession of pharmacy; but any pharmacist, unless he be qualified as a physician, who assumes to prescribe for the sick, should be denied such countenance and support. Moreover, whenever a druggist or pharmacist dispenses deteriorated or adulterated drugs, or substitutes one remedy for another designated in a prescription, he thereby forfeits all claims to the favorable consideration of the public and physicians.*

CONCLUSION

While the foregoing statements express in a general way the duty of the physician to his patients, to other members of the profession and to the profession at large, as well as of the profession to the public, it is not to be supposed that they cover the whole field of medical ethics, or that the physician is not under many duties and obligations besides these herein set forth. In a word, it is incumbent on the physician that under all conditions, his bearing toward patients, the public and fellow practitioners should be characterized by a gentlemanly deportment and that he constantly should behave toward others as he desires them to deal with him. Finally, these principles are primarily for the good of the public, and their enforcement should be conducted in such a manner as shall deserve and receive the endorsement of the community.



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