

CONSTITUTION,  
BY-LAWS  
AND  
CODE OF MEDICAL ETHICS  
OF THE  
MEDICAL ASSOCIATION  
OF  
KERSHAW DISTRICT, S. C.

360

CHARLESTON:  
JOSEPH WALKER, Agr., STATIONER AND PRINTER,  
129 Meeting-st.  
1866.

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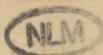


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# CONSTITUTION



## NAME AND OBJECT OF THE ASSOCIATION

The name and style of this Association shall be "The National Medical Association," its object shall be to promote the interests of the voluntary and philanthropic functions by which the community and physicians are benefited, and shall have for its object the promotion of medical science—the maintenance of high standards and the promotion of harmony and cooperation in the Medical Profession, and especially among the members of the Association.

## ARTICLE II

### TERMINATION OF THE ASSOCIATION

The National Medical Association shall have a right to receive from the State and Federal Governments of its own right—of record and general approval, and to receive from the State and Federal Governments such aid and support as may be necessary for the promotion and support of its objects and to receive from the State and Federal Governments such aid and support as may be necessary for the promotion and support of its objects and to receive from the State and Federal Governments such aid and support as may be necessary for the promotion and support of its objects.

## ARTICLE III

### QUALIFICATION FOR AND MODE OF BECOMING A MEMBER

Sec. 1.—To be eligible for membership in the National Medical Association, the applicant must

# CONSTITUTION.

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## ARTICLE I.

### NAME AND OBJECT OF THE ASSOCIATION.

The name and style of this Association shall be "*The Kershaw District Medical Association.*" It exercises its functions by virtue of the voluntary and plighted faith of its members, and shall have, for its object, the promotion of Medical Science—the uniformity of Medical Ethics, and the inculcation of harmony and fraternity in the Medical Profession, and especially among the members of the Association.

## ARTICLE II.

### JURISDICTION OF THE ASSOCIATION.

The Kershaw District Medical Association shall have authority to exercise jurisdiction over the professional conduct of its own members—of receiving and hearing all appeals, and of redressing grievances and complaints, that may arise among professional brethren; of making laws, rules and regulations for its own government and support; and of altering and repealing said laws and regulations; and of doing such other acts as may be promotive of the Medical Profession.

## ARTICLE III.

### QUALIFICATION FOR, AND MODE OF OBTAINING MEMBERSHIP.

SEC. 1.—To be admitted to membership in the Kershaw District Medical Association, the applicant must

be of good standing in the profession, recommended by one or more members of the Association, and receive two-thirds of all the votes cast by the members present at the time of election.

SEC. 2.—Applications for membership shall not be acted upon, unless by special resolution, sooner than the meeting next succeeding the date when read to the Association.

SEC. 3.—All elections for membership, or officers, shall be by ballot; and the fee for membership shall not be less than five dollars.

## ARTICLE IV.

### ELECTIVE OFFICERS AND THEIR DUTIES.

SEC. 1.—The officers of this Association shall consist of a President, Vice President, Secretary, Corresponding Secretary, and Treasurer, who shall be elected annually, at the January meeting of the Association, and hold their respective offices for the term of one year.

SEC. 2.—It shall be the duty of the President to preside at all meetings of the Association, when present—to give the casting vote, when the members are equally divided upon questions before the Association—to see that the rules of order and decorum are enforced in debate—to sign the approved proceedings of each monthly meeting, and to approve such orders as may be drawn on the Treasurer, for expenditures ordered by the Association.

SEC. 3.—It shall be the duty of the Vice President to preside in the absence of the President, and at all times to assist the President in the performance of his duty.

SEC. 4.—It shall be the duty of the Secretary to keep a true and faithful record of the proceedings of each meeting—preserve all books, papers, and things belonging to the archives of the Association; attest all orders drawn on the Treasurer for moneys appropriated by the Association; keep accounts of the Association with its members; keep a register of the members, the date of their admission, and place of residence.

He shall keep a list of other Associations, if any there be, in the State; receive and deliver all communications addressed to the Association. He shall collect all moneys due from the members, and pay the same to the Treasurer, taking his receipt therefor. He shall attend all Committees that may be appointed by this Association, with such documents as may be necessary for reference; report such unfinished business of previous meetings, as may appear on his books, requiring action, and attend to such other business as the Association may direct.

SEC. 5.—It shall be the duty of the Corresponding Secretary to hold correspondence with other Medical Associations, and to attend to all general correspondence, at the will and pleasure of the Association.

SEC. 6.—It shall be the duty of the Treasurer to receive all moneys delivered to him by the Secretary, passing his receipt for the same; and to pay out moneys only by order of the Association, endorsed by the President, and attested by the Secretary.

#### ARTICLE V.

The Kershaw District Medical Association shall meet quarterly at such time and place as may be hereafter designated.

#### ARTICLE VI.

Street lectures, and public hall delineations, of the science and practice of Physic, is not recognized by this Association, as a part of the Physician's duty. We are not commissioned as teachers of communities; but, by practice, we are to impart to suffering humanity the benefits of such knowledge as we may possess; which may be increased by free intercourse with each other, and exhibitions, within our own circle, of the results of practice and discoveries in science, which may be provided for as this Association may direct.

## ARTICLE VII.

No physician shall contract to attend any individual, or family, by the year, nor take charge of any particular case for a specified sum, except such as are enumerated in the appended Fee Bill.

## ARTICLE VIII.

In case of the resignation, or death, of an officer of this Association, the vacancy shall be filled by election at the next monthly meeting, or as soon thereafter as possible.

## ARTICLE IX.

This Constitution shall not be altered, or amended, unless by consent of two-thirds of all the members of the Association.



# BY-LAWS.

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## LAW I.

The Kershaw District Medical Association shall meet at 12 o'clock, M. on the second Tuesday in January, April, July and October, at such place in the town of Camden, S. C. as may be designated by the previous meeting; and at each meeting, the president shall appoint some member to read an essay at the next meeting, on a subject pertaining to the Profession, the choice of which to be left to the essayist, and after which the subject shall be open for discussion.

## LAW II.

A majority of the members of the Association shall constitute a quorum for business.

## LAW III.

The President shall call the meeting to order; order the reading of the minutes of the previous meeting by the Secretary; which, after approval, shall be adopted.

## LAW IV.

In case there is no quorum present, the meeting shall stand adjourned until the time of the next regular meeting, unless sooner convened by order of the President.

## LAW V.

The fee of admission to membership, in this Association, shall be five dollars, and such sums, for contingent expenses, as may be assessed by the Association, as circumstances demand.

## LAW VI.

The usual Parliamentary rules governing deliberative bodies, shall govern the business workings of this Association. Questions of order to be decided by the President.

## LAW VII.

All questions of business before this Association, shall be determined by a majority of the votes present, and no member shall be excused from voting, unless by consent of the majority.

## LAW VIII.

Members of this Association, on removing to other localities, shall be entitled to a certificate, or final card, signed by the President and Secretary.

## LAW IX.

SEC. 1.—The President shall, at each annual meeting, appoint the following Standing Committees, consisting of not less than three, nor more than five members each, to wit:

1.—*Committee on the Science and Progress of the Profession.*

2.—*Committee on Grievances and Appeals.*

3.—*Committee on Printing, Finances and Claims.*

SEC. 2.—The Committee on the Science and Progress of the Profession, may collect and preserve such specimens and publications of interest, as may be of benefit to the Association, and render such aid, by lecture, or otherwise, as may be required. It shall keep, also, a record of such discoveries, on results of practice, as may be laid before this Association by its members.

SEC. 3.—The Committee on Grievances and Appeals shall consider, and report to this Association, such cases of professional controversy as may be referred to

it ; the right of final decision resting, in all cases, with the Association.

SEC. 4.—The Committee on Printing, Finances, and Claims, shall procure such printing as the Association may order—investigate any claims that may be preferred—and report, annually, the finances of the Association, receipts, expenditures, &c., as exhibited by the books and papers of the Secretary and Treasurer.

#### LAW X.

The members of this Association shall, at any quarterly meeting, be at liberty to give a history of results in practice in any important case, together with any new discoveries, or peculiar incidents that may have transpired : and the Association may, if deemed proper, appoint some member, annually, or biennially, to deliver a Public Address in behalf of the Association, upon the general outlines of the importance and progress of the Medical Profession.

#### LAW XI.

At called Meetings of this Association, no business shall be transacted, except that for which the meeting was specially called.

The following are the officers elect for the year 1866 :

DR. L. H. DEAS, *President*.  
 DR. J. J. TRANTHAM, *Vice President*.  
 DR. A. A. MOORE, *Recording Secretary*.  
 DR. A. A. JOHNSON, *Corresponding Secretary*.  
 DR. ANDREW BURNETT, *Treasurer*.

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The following are the Standing Committees for the year 1866, appointed in pursuance of the Constitution and By-Laws :

1. *Science and Progress of the Profession.*

DR. L. M. DESAUSSURE.  
 DR. S. BARUCH.  
 DR. C. J. SHANNON.  
 DR. WM. L. PICKETT.  
 DR. R. Y. McLEOD.

2. *Grievances and Appeals.*

DR. C. J. SHANNON.  
 DR. T. W. SALMOND.  
 DR. D. L. DESAUSSURE.  
 DR. THOMAS McDOW.  
 DR. J. A. GLENN.

3. *Printing, Finance and Claims.*

DR. T. W. SALMOND.  
 DR. D. L. DESAUSSURE.  
 DR. A. A. MOORE.

# MEDICAL ETHICS.

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## Duties of Physicians to their Patients.

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### ARTICLE I.

SECTION 1.—A physician should not only be ever ready to obey the calls of the sick, but his mind ought to be imbued with the greatness of his mission, and the responsibility he habitually incurs in its discharge. Those obligations are the more deep and enduring, because there is no tribunal, other than his own conscience, to adjudge penalties for carelessness or neglect.

Physicians should, therefore, minister to the sick with due impressions of the importance of their office; reflecting that the case, the health, and the lives of those committed to their charge, depend on their skill, attention and fidelity.

They should study, also, in their deportment, so to unite tenderness with firmness, and condescension with authority, as to inspire the minds of their patients with gratitude, respect and confidence.

SEC. 2.—Every case committed to the charge of a physician should be treated with attention, steadiness and humanity. Reasonable indulgence should be granted to the mental imbecility and caprices of the sick.

Secrecy and delicacy, when required by peculiar circumstances, should be strictly observed, and the familiar and confidential intercourse to which physicians are admitted in their professional visits, should be used with discretion and with the most scrupulous regard to fidelity and honor. The obligation of secrecy extends be-

yond the period of professional services—none of the privacies of personal and domestic life, no infirmity of disposition, or flaw of character observed during professional attendance, should ever be divulged by him, except when he is imperatively required to do so. The force and necessity of this obligation are indeed so great that professional men have, under certain circumstances, been protected in their observance of secrecy by courts of justice.

SEC. 3.—Frequent visits to the sick are in general requisite, since they enable the physician to arrive at a more perfect knowledge of the disease, to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give useless anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of selfish motives.

SEC. 4.—A physician should not be forward to make gloomy prognostications, because they savor of empiricism, by magnifying the importance of his services in the treatment or cure of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger, when it really occurs; and even to the patient himself, if absolutely necessary. This office, however, is so peculiarly alarming when executed by him, that it ought to be declined whenever it can be assigned to any other person of sufficient judgment and delicacy. For the physician should be the minister of hope and comfort to the sick; that by such cordials to the drooping spirit, he may soothe the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments.

The life of a sick person can be shortened not only by the acts, but also by the words or the manner of the physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and to avoid all things which have a tendency to discourage the patient, and to depress his spirits.

SEC. 5.—A physician ought not to abandon a patient because the case is deemed incurable, for his attendance may continue to be highly useful to the patient, and comforting to the relations around him, even in the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing to a fanciful delicacy and mistaken liberality, that moral duty, which is independent of, and far superior to all pecuniary consideration.

SEC. 6.—Consultations should be promoted in difficult or protracted cases; as they give rise to confidence, energy and more enlarged views in practice.

SEC. 7.—The opportunity which a physician not unfrequently enjoys of promoting and strengthening the good resolutions of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His councils, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness, and evince a genuine love of virtue, accompanied by a sincere interest in the welfare of the person to whom they are addressed.

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## Obligations of Patients to their Physicians.

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### ARTICLE II.

SECTION 1.—The members of the Medical Profession, upon whom are enjoined the performance of so many important and arduous duties towards the community, and who are required to make so many sacrifices to comfort, ease and health, for the welfare of those who avail themselves of their services, certainly have a right to expect and require that their patients should entertain a just sense of the duties which they owe to their medical attendants.

SEC. 2.—The first duty of the patient is, to select as

his medical adviser one who has received a regular professional education. In no trade or occupation do mankind rely on the skill of an untaught artist; and in medicine, confessedly the most difficult and intricate of the sciences, the world ought not to suppose *that knowledge* is intuitive.

SEC. 3.—A patient should also confide the care of himself and family, as much as possible, to one physician, for a medical man who has become acquainted with the peculiarities of constitution, habits and predispositions of those he attends, is more likely to be successful in his treatment, than one who does not possess that knowledge.

A patient who has thus selected his physician should always apply for advice in what may appear to him trivial cases, not only for his own benefit, but for the character and standing of his physician, for the most fatal results often supervene on the slightest accidents. It is of still more importance that he should apply for assistance in the forming stage of violent diseases; it is to a neglect of this precept that medicine owes much of the uncertainty and imperfection with which it has been reproached.

A patient, who having made a selection of a physician to attend upon himself or family, should not be influenced to change his physician from the advice of any of the self constituted doctresses and meddling women, (of whom we have quite a number) for it tends to destroy confidence in the medical attendant, presupposes a want of judgment in selecting the physician, and institutes a system of intriguing and electioneering for practice, which is degrading to the science of medicine.

SEC. 4.—Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important, as many diseases of a mental origin stimulate those depending on external causes, and yet are only to be cured by administering to the diseased mind. A patient should never be afraid of thus making his physician his friend



and adviser; he should always bear in mind that a medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease, which might have been readily prevented, had timely intimation been given to the physician.

SEC. 5.—A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms, he will convey much more real information by giving clear answers to interrogatories, than by the most minute account of his own framing. Neither should he obtrude the details of his business nor the history of his family concerns.

SEC. 6.—The obedience of a patient to the prescription of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness, to influence his attention to them. A failure in one particular may render an otherwise judicious treatment dangerous and even fatal. This remark is equally applicable to diet, drink and exercise. As patients become convalescent, they are very apt to suppose that the rules prescribed for them may be disregarded, and the consequence but too often is a relapse. Patients should never allow themselves to be persuaded to take any medicine whatever that may be recommended to them by the *self-constituted doctors and doctresses* in this country, who are so frequently met with, and who pretend to possess infallible remedies for the cure of every disease. However simple some of their prescriptions may appear to be, it often happens that they are productive of much mischief, and in all cases they are injurious, by contravening the plan of treatment adopted by the physician.

SEC. 7.—A patient, if called upon by a physician who is not attending him, should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy confidence in the course of his physician and induce him to neglect the directions prescribed by him. A patient should never send for a consulting physician without the express consent of his own medical attendant. It is of great importance that physicians should act in concert; for although their modes of treatment may be attended with equal success, when employed singly, yet conjointly they are very likely to be productive of disastrous results.

SEC. 8.—When a patient becomes dissatisfied with his physician whilst attending a case, justice and common courtesy require that he should state his reasons for so doing, and at the same time settle his bill.

SEC. 9.—Patients should always, when practicable, send for their physician in the morning, before his usual hour of going out, for, by being early aware of the visits he has to pay during the day, the physician is able to apportion his time in such a manner as to prevent an interference of engagements. They should always be in readiness to receive the visits of their physician, as the detention of a few minutes is often of serious inconvenience to him.

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### **Duties of Physicians to each other and to the Profession at large.**

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#### ARTICLE III.

SECTION 1.—Every individual, on entering the profession, as he becomes thereby entitled to all the privileges and immunities, incurs an obligation to exert his best abilities to maintain its dignity and honor, to exalt its standing, and to extend the bounds of its

usefulness. He should, therefore, observe strictly such laws as are instituted for the government of its members; should avoid all contumelious and sarcastic remarks relative to the faculty as a body, and by unwearied diligence resort to every honorable means of enriching the science.

SEC. 2.—There is no profession from the members of which greater purity of character, and a higher standard of moral excellence are required, than the medical; and to attain such eminence, is a duty every physician owes alike to his profession and to his patients. It is due to the latter, as without it he cannot command their respect and confidence, and to both, because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent upon the faculty to be temperate in all things, for the practice of physic requires the unremitting exercise of a clear and vigorous understanding; and, on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye, and an unclouded head, may be essential to the well-being, and even to the life, of a fellow-creature.

SEC. 3.—It is derogatory to the dignity of the profession to resort to public advertisements, or private cards, or handbills, inviting the attention of individuals affected with particular diseases—publicly offering advice and medicine to the poor gratis, or promising radical cures, or to publish cases and operations in the daily prints, or to suffer such publications to be made; to invite laymen to be present at operations, to boast of cures and remedies, to abduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

## Professional Services of Physicians to each other.

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### ARTICLE IV.

SECTION. 1.—All practitioners of medicine, their wives and their children, while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician, afflicted with disease is usually an incompetent judge of his own case, and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or any one, who by the ties of consanguinity, is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice; under such circumstances, medical men are peculiarly dependent on each other, and kind offices and professional aid should always be cheerfully and gratuitously afforded. Visits ought not, however, to be obtruded officiously, as such unasked civility may give rise to embarrassment, or interfere with that choice on which confidence depends. But, if a distant member of the faculty, whose circumstances are affluent, request an attendance, and an honorarium be offered, it should not be declined, for no pecuniary obligation ought to be imposed, which the party receiving it would wish not to incur.

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## Duties of Physicians as Respects Various Offices.

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### ARTICLE V.

SECTION 1.—The affairs of life, the pursuits of health, and the various accidents and contingencies to which a medical man is peculiarly exposed, sometimes require

him temporarily to withdraw from his duties to his patients, and to request some of his professional brethren to officiate for him. Compliance with this request is an act of courtesy, which should always be performed with the utmost consideration for the interest and character of the family physician, and when exercised for a short period, all the pecuniary obligations for such services should be awarded to him, except where one physician is called to the patient of another in the *country*, and in this case he should charge his regular fees until the family physician resumes the case.

But, if a member of the profession neglect his business in quest of pleasure and amusement, he cannot be considered as entitled to the advantages of the frequent and long continued exercise of this fraternal courtesy, without awarding to the physician who officiates the fees arising from the discharge of his professional duties. In obstetrical and important surgical cases, which give rise to unusual fatigue, anxiety and responsibility, it is just that the fees accruing therefrom should be awarded to the physician who officiates.

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## Duties of Physicians in Regard to Consultation.

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### ARTICLE. VI

SECTION 1.—A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the only acknowledged right of an individual to the exercise and honors of his profession. Nevertheless, as in consultations, the good of the patient is the sole object in view, and this is often dependent on professional confidence, no intelligent, regular practitioner, who has a license to practice from some medical board of known and

acknowledged respectability, recognized by this Association, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But, no one can be considered as a regular practitioner, or a fit associate in consultation, whose practice is based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and the aids actually furnished by anatomy, physiology, pathology, and organic chemistry.

SEC. 2.—In consultations, no rivalry, jealousy, or double dealing should be indulged; but truthfulness, candor and probity should be indispensable prerequisites, together with a true and faithful history of the case, and treatment of the same by the attending physician, while, at the same time, all due respect should be exercised towards each other.

SEC. 3.—In consultations, the acting physician should be the first to propose the necessary questions to the sick; after which, the consulting physician should have the opportunity to make such farther inquiries of the patient as may be necessary to satisfy him of the true character of the case. Both physicians should then retire to a private place for deliberation, and the one first in attendance should communicate the directions agreed upon to the patient, or his friends, as well as any opinions which may be thought proper to express. But no statement or discussion of it should take place before the patient, or his friends, except in the presence of all the faculty attending, and by their common consent; and no opinions or prognostications should be delivered, which are not the result of previous deliberation and concurrence.

SEC. 4.—In consultation, the physician in attendance should deliver his opinion first, and when there are several consulting, they should deliver their opinions in the order in which they have been called in. No decision, however, should restrain the attending physician from making such variations in the mode of treat-

ment as any subsequent unexpected change in the character of the case may demand. But such variation and the reason for it, ought to be carefully detailed at the next meeting in consultation. The same privilege belongs also to the consulting physician, if he is sent for in an emergency, when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

SEC. 5.—The utmost punctuality should be observed in the visits of physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be an ample reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere, and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period, after which the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present, he will of course see the patient and prescribe; but if it be the consulting one, he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case he may examine the patient, and give his opinion, in *writing and under seal*, to be delivered to his associate.

SEC. 6.—In consultation, theoretical discussions should be avoided, as occasioning perplexity and loss of time. For there may be much diversity of opinion concerning speculative points with perfect agreement in those modes of practice which are founded, not on hypothesis, but on experience and observation.

SEC. 7.—All discussions in consultation should be held as secret and confidential. Neither by word nor manner should any of the parties to a consultation assert or insinuate that any part of the treatment pursued did not receive his assent. The responsibility must be equally divided between the medical attendants—they must equally share the credit of success, as well as the blame of the failure.

SEC. 8.—Should irreconcilable diversity of opinion occur when several physicians are called upon to confer, the opinions of the majority should be considered as decisive; but if the number be equal on each side, then the decision should rest with the attending physician. It may, moreover, sometimes happen, that two physicians cannot agree in their views of the nature of a case, and the treatment to be pursued. This is a circumstance much to be deplored, and should always be avoided, if possible, by mutual concessions, as far as they can be justified by a conscientious regard for the dictates of judgment. But in the event of its occurring, a third physician should, if practicable, be called to act as umpire, and if circumstances prevent the adoption of this course, it must be left to the patient to select the physician in whom he is most willing to confide. But as every physician relies upon the rectitude of his judgment, he should, when left in the minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

SEC. 9.—As circumstances occur to render a special consultation desirable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty, whose assistance is required in such cases, should sedulously guard against all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may be reasonably expected.

SEC. 10.—A physician who is called upon to consult, should observe the most honorable and scrupulous regard for the character and standing of the practitioner in attendance; the practice of the latter, if necessary, should be justified as far as it can be, consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out, which could impair the confidence reposed in him, or affect his reputation. The consulting physician should also carefully refrain from any of those extraordinary attentions or assidui-



ties, which are two often practiced by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favor of families and individuals.

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### Duties of Physicians in Cases of Interference.

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#### ARTICLE VII.

SECTION 1.—Medicine is a liberal profession, and those admitted into the ranks should found their expectations of practice upon the extent of their qualifications, not on intrigue or artifice.

SEC. 2.—A physician, in his intercourse with a patient under the care of another practitioner, should observe the strictest caution and reserve. No meddling inquiries should be made; no disingenuous hints given relative to the nature and treatment of the disorder, nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

SEC. 3.—The same circumspection and reserve should be observed, when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided, except under peculiar circumstances; and when they are made, no particular inquiries should be instituted relative to the nature of the disease, or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

SEC. 4.—A physician ought not to take charge of, or prescribe for a patient who has recently been under the care of another faculty in the same illness, except in cases of sudden emergency, or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or been regularly notified that his services are no longer desired. Under

such circumstances, no unjust or illiberal insinuations should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candor and regard for truth and probity will permit; for it often happens that patients become dissatisfied when they do not experience immediate relief; and as many diseases are naturally protracted, the want of success, in the first state of treatment, affords no evidence of a lack of professional knowledge and skill.

SEC. 5.—When a physician is called to an urgent case, because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the case of the patient to the latter immediately on his arrival, with a correct statement of the treatment during his absence.

SEC. 6.—It often happens, in cases of sudden illness, or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under these circumstances, courtesy should assign the patient to the first who arrives, who should select, from those present, any additional assistance that he may deem necessary. In all such cases, however, the practitioner who officiates, should request the family physician, if there be one, to be called, and unless his farther attendance be requested, should resign the case to the latter on his arrival.

SEC. 7.—When a physician is called to a patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regular attendant, and with the consent of the patient, to surrender the case.

SEC. 8.—A physician, when visiting a sick person in the country, may be desired to see a neighboring patient, who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances, to interfere no farther than is absolutely necessary with the general plan of treatment, to assume

no farther direction unless it be expressly desired; and in the last case, to request an immediate consultation with the practitioner previously employed.

SEC. 9.—A wealthy physician should not give advice *gratis* to the affluent; because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficent one, and it is defrauding, in some degree, the common funds for its support, when fees are dispensed with, which might justly be claimed.

SEC. 10.—When a physician who has been engaged to attend a case of midwifery is absent, and another is sent for, if delivery is accomplished during the attendance of the latter, he is entitled to the fee, but should resign the patient to the practitioner first engaged.

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## Duties of the Profession to the Public and the Obligations of the Public to the Profession.

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### ARTICLE VIII.

SECTION. 1.—As good citizens, it is the duty of physicians to be ever vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens; they should also be ever ready to give counsel to the public in relation to matters specially appertaining to their profession, as on subjects of medical police, public hygiene and legal medicine. It is their province to enlighten the public in regard to quarantine regulations—the location, arrangement and dietaries of hospitals, asylums, schools, prisons and similar institutions, in relation to the medical police of towns, as drainage, ventilation, etc., and in regard to measures for the prevention of epidemic and contagious diseases; and, when pestilence prevails, it is their duty to face the danger, and to continue their

labors for the alleviation of the suffering, even at the jeopardy of their own lives.

SEC. 2.—Medical men should, also, be always ready, when called on by the legally constituted authorities, to enlighten coroner's inquests and courts of justice, on subjects strictly medical, such as involve questions relating to sanity, legitimacy, murder by poisons, or other violent means, and in regard to the various other subjects embraced in the science of medical jurisdiction. But, in these cases, and especially where they are required to make a post mortem examination, it is just, in consequence of the time, labor and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium.

SEC. 3.—There is no profession by the members of which eleemosynary services are more liberally dispensed than the medical, but justice requires that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain public duties, referred to in section first of this chapter, should always be recognized as presenting valid claims for gratuitous services; but neither institutions, endowed by the public or by rich individuals, societies for mutual benefit, for the insurance of lives, or for analogous purposes, nor any profession or occupation can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty, or to testify to the state of health of persons wishing to insure their lives, obtain pensions, or the like, without a pecuniary acknowledgement. But, to individuals in indigent circumstances, such professional services should always be cheerfully and freely accorded.

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## ARTICLE IX.

SECTION 1.—It shall be the duty of the Secretary of this Society, as soon as any physician settles in the city, vicinity, or district, to present him with a copy of

the Constitution, Code of Ethics, and rates of Charges, and in the event of his refusing to sign them, the faculty shall not consult with him.

It should be the duty of the medical faculty in this city, country, or district, to receive such pecuniary acknowledgements from their patients for their services as are contained in their Fee Bill, and make a settlement of the same on the first day of January of each year, or as much sooner as the physician attending the case may see fit.

It should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit. To all of the foregoing Rules and Regulations, we would subscribe our names and pledge ourselves as gentlemen and physicians to be governed by the same, as far as in our power lies, so long as three-fourths remain.

L. H. DEAS,  
L. M. DESAUSSURE,  
J. J. TRANTHAM,  
WM. L. PICKETT,  
T. W. SALMOND,  
THOS. McDOW,  
J. A. GLENN,  
C. J. SHANNON,  
B. H. MATHESON.

D. L. DESAUSSURE,  
A. A. MOORE,  
JOHN McCAA,  
ANDREW BURNETT,  
A. A. JOHNSON,  
S. BARUCH,  
R. Y. McLEOD,  
W. R. NELSON.

# FEE BILL

OF THE

## KERSHAW DISTRICT MEDICAL ASSOCIATION.

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### TOWN PRACTICE.

For each visit in the day and prescription,.....\$	2	
For requested visit, after dark, and prescription	3	1/2
For requested visit, after 10 o'clock, P. M. and prescription .....	5	
For prescribing at home, after 10 o'clock, P.M.	2	
*For detention, per hour,.....	2	
For being kept all night.....	10 to 15	10
For consultation.....	10	
For each subsequent visit (consulting physician).....	2	1
For prescription at office, (ordinary cases).....	1	
For medical advice or opinion given by letter or otherwise,.....	5 to 10	
For certificate of insurance, to be paid by agent	5	
For certificate of non-liability to jury, patrol or military duty, or freedom from taxes..	2 to 5	
For certificate of examination of a lunatic.....	5	
For vaccination.....	1	
For administering chloroform, (medically by inhalation) .....	2	
For applying electro-magnetism,.....	2	
For applying leeches, (exclusive of cost).....	2	

\* This charge to be made only when the Physician deems it absolutely necessary for the welfare of the patient, or the friends may demand it.

## COUNTRY PRACTICE.

For riding out of town, in the day, each mile	1
For riding out of town at night, each mile.....	2
For crossing bridge or ferry.....	1
*For prescription.....	1
For surgical and obstetrical cases, additional charges to be made in accordance with the rates established for the town.	
For vaccination on plantations, mileage, and for each.....	1

## SURGERY.

For venesection,.....	1
For arteriotomy, or bleeding in the jugular vein.....	3 to 5
For cupping.....	2
For extracting tooth at office.....	1
For introducing catheter or bougie, first time,	5
For each subsequent introduction.....	2
For dressing ulcers or wounds.....	1 to 5
For opening abscesses.....	1 to 5
For gonorrhœa (in advance).....	10 to 30
For syphilis, simple cases, (in advance).....	20
For treating stricture.....	20 to 40
For chronic cases, in proportion to treatment required.	
For issue or seton.....	5
For use of speculum uteri vol ani.....	5
For examination per vaginum.....	5
For lancing gums.....	1
For fitting truss.....	2 to 5
For reducing prolapsus ani or uteri.....	5 to 20
For operation for hydrocele.....	15 to 25
For excising incarnated toe nail.....	5 to 20
For phymosis and paraphimosis.....	10
For lithotomy.....	50 to 100

\* For a number of patients, charge to be discretionary.

For important operations on the eye.....	25 to 100
For minor operations.....	5 to 20
For amputation of the breast.....	20 to 100
For amputation of finger or toe.....	5 to 25
For amputation of forearm, arm, leg or thigh,	25 to 75
For amputation at shoulder joint.....	100
For amputation at hip joint.....	150
For reducing hernia by taxis.....	10 to 25
For operation for hernia.....	25 to 100
For operation for bronchotomy, œsophagoto- my or tracheotomy.....	20 to 100
For aneurismal operations.....	20 to 100
For extirpation of polydi.....	15 to 50
For tying wounded arteries.....	5 to 100
For setting fractures of the thigh or leg.....	20 to 30
For setting fractures of the arm or forearm....	15 to 25
For setting fractures of the lower jaw.....	10 to 20
For setting fractures of the clavicle.....	15 to 25
For reducing dislocation of the thigh.....	20 to 60
For reducing dislocation of the knee or ankle,	15 to 30
For reducing dislocation of shoulder, elbow or wrist.....	10 to 30
For reducing dislocation of smaller joints.....	5 to 10
For trephinning.....	40 to 80
For paracentesis of abdomen, thorax or blad- der.....	10 to 25
For extirpating cancerous lip.....	20 to 40
For operation for hare lip.....	20 to 40
For extirpating tonsils.....	10 to 50
For extirpating tumors.....	10 to 100
For operation on fistula in ano del perineo.....	20 to 40
For extracting foreign substances from the body.....	5 to 50
For all other operations in Surgery, in a rela- tive proportion to the preceding.	

## OBSTETRICS.

For cases of natural labor and first week's or- dinary attendance.....	25	20
For tedious labor.....	25 to 50	25



For complicated or instrumental cases.....	50 to 100	
For advice to midwife.....	15	- 10
For consultation in midwifery.....	15 to 30	- 10
For extracting placenta.....	10 to 25	- 5
For presence with midwife, though not acting,	25	10 to 20

25 to 30  
- 10  
- 10  
- 5  
10 to 20

NOTE.—There is nothing in the above Fee Bill intended to restrain the Physician in the exercise of charity or liberality towards patients in limited circumstances.

