1042

CHARTER AND BY-LAWS

OF THE

DISTRICT MEDICAL SOCIETY,

OF THE

COUNTY OF CAMDEN,

STATE OF NEW JERSEY,

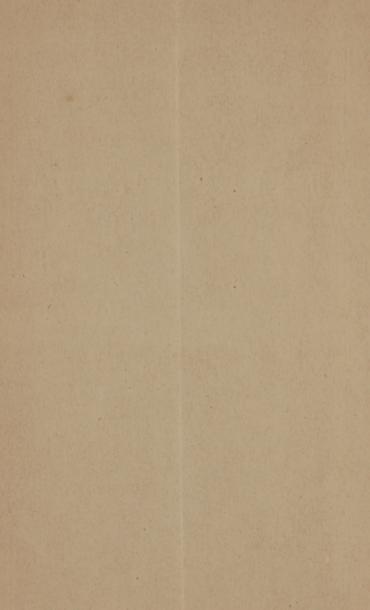
AND

342

TABLE OF FEES.

Adopted 1846, Revised 1877.

CAMDEN, N. J.; PRINTED BY S. CHEW, COR. FRONT AND MARKET STREETS. 1877.



CHARTER AND BY-LAWS

OF THE

DISTRICT MEDICAL SOCIETY

OF THE

COUNTY OF CAMDEN,

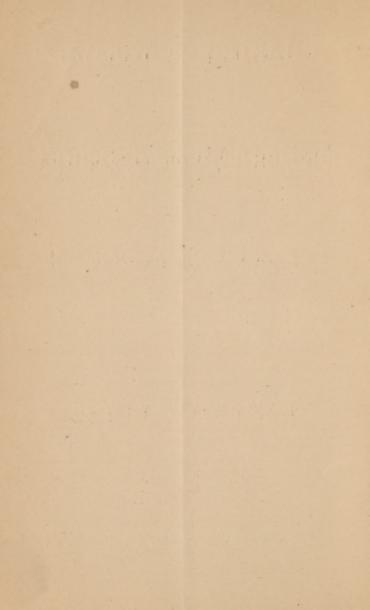
STATE OF NEW JERSEY,

AND

TABLE OF FEES.

Adopted 1846, Revised 1877.

CAMDEN, N. J.: PRINTER BY S. CHEW, COR. FRONT AND MARKET STREETS. 1877.



CONSTITUTION.

ARTICLE I.

Title of the Society.

The title of this society shall be, "The District Medical Society of the County of Camden, State of New Jersey."

ARTICLE II.

Objects of the Society.

The objects of this society shall be the advancement of knowledge upon all subjects connected with the healing art; the organization of the profession in connection with the American Medical Association, the elevation of the character, and the protection of the rights and interests of those engaged in the practice of medicine, and the study of the means calculated to render the medical profession most useful to the public, and subservient to the interests of humanity.

ARTICLE III.

Members of the Society.

The society shall consist of regular physicians, subject to the provisions of Article I of the By-Laws.

ARTICLE IV.

Election of Members.

Section 1. Every candidate for membership shall be proposed, in writing, by three members who have personal knowledge of his qualifications.

Section 2. Every proposition for membership shall state the place and date of graduation, and other facts relating to the candidate, which may aid the censors in the performance of their duty.

Section 3. Every proposition for membership shall be referred to the censors, who shall inquire into the character and standing of the candidate proposed, and report at the next meeting as to his eligibility for membership, but no ballot shall be taken until the subsequent meeting, when, if two-thirds of the ballots deposited shall be in favor of the candidate, he shall be declared duly elected.

Section 4. No candidate for membership who is rejected shall be again proposed within twelve months thereafter.

Section 5. Candidates for membership shall be ballotted for in the following manner: The presiding officer shall appoint two tellers, who shall affix the name of each candidate on the cover of a separate compartment of the ballot box, and shall place the said ballot box in a position not open to the observation of any other than the member at the time of voting. No member present shall be excused from voting, except by the consent of the society. When all the members present have voted the tellers shall

proceed to count the votes deposited, and they shall present a written report of the result to the President, who shall then announce the election of those candidates who have received the requisite number of ballots.

Section 6. A member elect before being admitted to the full privileges of membership, shall sign the Constitution and By-Laws of this society, a copy of which shall be furnished him at the time, pay the initiation fee, and be present at one of the meetings; but if he shall neglect or refuse to comply with these conditions, without a reasonable excuse, for the space of six months his election shall become void.

Section 7. When a member elect is present for admission into this society, the presiding officer shall address him as follows:

"Having been duly elected a member of the District Medical Society of the County of Camden, you do solemnly declare, that, so long as you shall continue a member of the same, you will comply with all its laws and regulations, and use your best endeavors to promote its objects." To which the member elect shall respond affirmatively.

ARTICLE V.

Certificate of Membership.

SECTION 1. Every member shall receive a certificate of membership signed by the officers of the society, in the words following:

"The District Medical Society of the County of Camden, State of New Jersey."

"This is to certify, that — — , has been duly elected a member of this society, on the — day of —, A. D. 18—.

"In testimony whereof, the seal of the Society and the signatures of the President and Secretary have been hereto affixed, this —— day of ———, A. D. 18—.

— — , M. D., President, — — , M. D., Record Sec'y.''

ARTICLE VI.

Resignation of Members.

All resignations of membership shall be made in writing, and be accompanied with a certificate from the Treasurer, that all dues to the society have been satisfied; but no member shall be permitted to resign while charges are pending against him.

ARTICLE VII.

Censure and Expulsion of Members.

If any member shall violate the laws or regulations of this society, upon a charge in writing against him being presented to the Censors, it shall be their duty to notify the accused member of the same, and if, after a due investigation, they consider the charge to be sustained, they shall report the case with their decision to the society, at its next stated meeting, notifying the accused member of the time when the said report is to be made. If the accused member shall fail to come forward and exculpate himself he shall be reprimanded,

suspended or expelled, by a vote of two-thirds of the members present; but no vote for the reprimand, suspension or expulsion of a member shall be taken, excepting at a stated meeting, at which not less than twenty members are present, and of which meeting and report of the Censors due notice has been given.

ARTICLE VIII.

Officers of the Society.

Section i. The officers of the society shall be a President, a Vice-President, a Recording Secretary, a Treasurer and five Censors, and a Nominating Committee of three members, who shall be elected by ballot at the annual meeting in May, and shall serve until their successors are elected. At the stated meeting in May five Censors shall be elected, one to serve for one year, one for two years, one for three years, one for four years, and one for five years; and annually thereafter one Censor shall be elected for five years. All other officers shall be elected annually.

Nominations for Officers.

Section 2. Nominations for officers and delegates shall be made at the stated meeting in May, and no member shall be put in nomination who is in arrears for the annual contribution of the current year.

ARTICLE IX.

Meetings of the Society.

Section 1. The stated meetings of the society shall be held on the second Tuesday in May and November.

SECTION 2. Special meetings may be called by the President whenever requested in writing by five members of the society.

Section 3. For the transaction of the ordinary business of the society, twelve members shall be a quorum. But for scientific and literary purposes, unless an actual count be called for, a quorum shall always be presumed. For the election of officers, members and delegates, or for altering the Constitution and By-Laws, fifteen members shall be a quorum. For the reprimanding, suspension or expulsion of a member, twenty members shall be a quorum.

ARTICLE X.

Funds of the Society.

SECTION 1. An annual contribution of two dollars shall be due and payable by each member at the annual meeting in May or November, and also any assessment the society may deem needful.

Section 2. Members elect upon signing the Constitution, shall pay to the Treasurer an admission fee of five dollars.

Section 3. Every member neglecting or refusing to pay the amount of his contribution for six months, and if in arrears at the close of the year (application for the amount having been made by the Treasurer), he shall be reported to the society as delinquent, with the amount of his arrearages, and in case payment be not made within six months thereafter, he shall forfeit his right of membership; which forfeiture shall be duly reported to the society by the Treasurer.

ARTICLE XI.

Code of Ethics.

This society adopts as a part of its regulations, binding upon all its members, the Code of Ethics adopted by the American Medical Association.

ARTICLE XII.

Election of Delegates.

Delegates to the American Medical Association, the Medical Society of the State of New Jersey, and to adjacent District Medical Societies, shall be elected annually, at the stated meeting in May, by ballot; provided, however, that by the unanimous consent of the members present, the election may be made viva voce.

ARTICLE XIII.

Amendments.

This Constitution shall not be altered or amended, unless the proposed alteration or amendment be made in writing, at one of the stated meetings, and receive the assent of two-thirds of the members present at the subsequent stated meeting.



BY-LAWS.

ARTICLE I.

Of Members.

Section 1. To entitle a person to membership in this society, he must be a citizen of the county of Camden, a graduate of at least one year's standing of a respectable medical school, and of good moral and professional reputation.

Section 2. No physician removing into this county shall be eligible for membership, until after he has been engaged one year in the regular practice of medicine within the county.

Section 3. Any physician who shall procure a patent for a remedy or instrument of surgery, or who recommends patent remedies or nostrums, or who shall enter into an agreement with an apothecary to receive pecuniary compensation or patronage for sending his prescriptions to said apothecary, or who makes any reduction in the fee bill of this society because of owning a drug store, or who prescribes a proprietary or copyright remedy without knowing its composition,

or who shall hereafter give a certificate in favor of a patent remedy or instrument, shall be disqualified from becoming or remaining a member.

ARTICLE II.

Duties of Officers.

SECTION 1. The President shall preside at the meetings of the society, preserve order, and perform such other duties as custom and parliamentary usage may require. At the close of his term of office he shall deliver a public address.

Section 2. The Vice-President shall, when called upon, assist the President in the performance of his duties and during his absence, or at his request shall officiate in his place.

Section 3. The Recording Secretary shall keep correct minutes of the proceedings of the Society, which, when approved, he shall fairly transcribe in a book to be kept for that purpose.

He shall have charge of all papers belonging to the society, except those appertaining to the office of Treasurer. He shall send to each member due notice of all meetings of the society, stating in the said notice the names and residences of the candidates to be ballotted for, and the special business to be transacted. He shall notify the society of its meetings, and of the decease of any of its members.

Section 4. The Treasurer shall receive all moneys belonging to the society and disburse the same as directed by a warrant signed by the President and countersigned by the Recording Secretary.

On or before the Second Tuesday in May, he shall furnish to the Nominating Committee a list of the names and places of residence of members, who are elegible as officers and delegates in accordance with Sec. 1, Art. VIII, of the Constitution.

Section 7. The Censors shall inquire into the character and standing of all candidates for membership, and report in writing as to their elegibility at the next stated meeting. They shall investigate any disagreement which may occur between members, and endeavor to restore harmony. When a member is charged with an infringement of the laws of the society, or the Code of Ethics, the Censors shall fully and impartially investigate the same, and if they deem the charge to be well founded, shall report the case to the society at its next stated meeting, together with their decision.

ARTICLE III.

Meetings of the Society.

The stated meetings shall be held at II o'clock, A. M. Adjourned and special meetings shall be held at such hours as shall be particularly designated.

ARTICLE IV.

Order of Business.

Section 1. All meetings of the society shall be called to order at the appointed hour by the President, or in his absence by the Vice-President. In the event of the absence of the President and Vice-President a chairman pro tempore shall be appointed.

Section 2. At the stated meetings the business shall be conducted in the following order:

- 1. The Recording Secretary shall register the names of the members present.
- 2. The minutes of the last stated meeting shall be read.
 - 3. Members elect shall be introduced.
 - 4. Unfinished business shall be considered.
- 6. Reports of Officers and Committees shall be heard.
 - 7. Propositions for membership shall be received.
 - 8. Candidates for membership shall be ballotted for.
- 9. Amendments to the Constitution shall be considered.
 - 10. New business shall be considered.
 - 11. President's address.
 - 12. Election of officers of the society.
 - 13. Auditing Treasurer's account.
 - 14. Adjournment shall be in order.

ARTICLE V.

Amendments.

These By-Laws may be altered or amended at a stated meeting by a vote of two-thirds of the members present; *provided* that a written notice of such amendment or alteration be presented at the meeting of the society next preceding said stated meeting.

CODE OF MEDICAL ETHICS,

Adopted by the New Jersey Medical Society.

ARTICLE I.

Duties for the support of professional character.

Section 1. Every individual, on entering the profession, as he becomes thereby entitled to all its 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 while, by unwearied diligence, he resorts to every honorable means of enriching the science, he should entertain a due respect for his seniors, who have, by their labors, brought it to the elevated condition in which he finds it.

Section 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, an unclouded head, may be essential to the well-being, and even to the life, of a fellow creature.

Section 3. It is derogatory to the dignity of the profession to resort to public advertisements or private cards or hand-bills, 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 suffer such publications to be made; to invite laymen to be present at operations, to boast of cures and remedies, to adduce 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.

Section 4. Equally derogatory to professional character is it, for a physician to hold a patent for any surgical instrument or medicine, or to dispense a secret nostrum, whether it be the composition or exclusive property of himself or of others. For, if such nostrum be of any efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality; and, if mystery alone give it value and importance,

such craft implies either disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

ARTICLE II.

Professional services of physicians to each other.

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 upon 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 attendance, and 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.

ARTICLE III.

Of the duties of physicians as respects vicarious offices.

SECTION 1. The affairs of life, the pursuit 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 obligation for such service should be awarded to him. 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 confinued 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.

ARTICLE IV.

Of the duties of physicians in regard to consultations.

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 personal 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 a regular practitioner, or fit associate in consultation, whose practice is based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry.

Section 2. In consultations, no rivalship or jealousy should be indulged; candor, probity, and all due respect, should be exercised towards the physician having charge of the case.

Section 3. In consultations, the attending 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 further 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 it 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 with their

common consent; and no *opinions* or *prognostications* should be delivered, which are not the result of previous deliberations and concurrence.

Section 4. In consultations, 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 treatment, as any subsequent unexpected change in the character of the case may demand. But such variation, and the reasons 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.

Section 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 cases 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.

Section 6. In consultations, 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.

Section 7. All discussions in consultation should be held as secret and confidential. Neither by words 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 failure.

Section 8.* Should an irreconcilable diversity of opinion occur when several physicians are called upon to consult together, the opinion of the majority should be considered as decisive; but if the numbers be equal on both sides, 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 occurrence, 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 a minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

Section 9. As circumstances sometimes 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 of time and attention, at least a double honorarium may be reasonably expected.

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

ARTICLE V.

Duties of physicians in cases of interference.

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

Section 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 disingenious hints given relative to the nature and treatment of his disorder; nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

Section 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.

Section 4. A physician ought not to take charge of, or prescribe for a patient who has recently been under the care of another member of the 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 and 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 stage of treatment, affords no evidence of a lack of professional knowledge and skill.

SECTION 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 care of the patient to the latter immediately on his arrival.

SECTION 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 further attendance be requested, should resign the case to the latter on his arrival.

Section 7. When a physician is called to the 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.

Section 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 further than is absolutely necessary with the general plan of treatment; to assume no future directions, unless it be expressly desired; and, in this last case, to request an immediate consultation with the practitioner previously employed.

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

Section. 10. When a physician 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.

ARTICLE VI.

Of Differences between Physicians.

SECTION 1. Diversity of opinion, and opposition of interests, may, in the medical as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur, and cannot be immediately terminated, they should be referred to the

arbitration of a sufficient number of physicians, or a court-medical.

Section 2. As peculiar reserve must be maintained by physicians towards the public, in regard to professional matters, and as there exist, numerous points in medical ethics and etiquette through which the feeling of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the subject matter of such differences nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be personally injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

ARTICLE VII.

Of Pecuniary Acknowledgments.

Some general rules should be adopted by the faculty in every town or district, relative to *pecuniary acknowl-cdgments* from their patients; and it should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit.

ARTICLE VIII.

This Society adopts the code of ethics established, or that may be hereafter established by the American Medical Association.

NEW TABLE OF FEES,

AND RATES OF CHARGING FOR MEDICAL AND SURGICAL SERVICES, ESTABLISHED BY THE NEW JERSEY STATE MEDICAL SOCIETY, AT THE ANNUAL MEETING IN MAY, 1874, FOR THE FUTURE GOVERNMENT OF ITS MEMBERS.

OFFICE BUSINESS.

Advice,	\$1	00	to	5	00
" by letter,	5	00	66	15	00
" at night, double.					
" in venereal diseases (payable					
in advance),	5	00	66	25	00
In cases requiring the applications					
of remedies the charge to be doubled.					
Application of galvanic battery,	I	00	66	3	00
Leeching, cupping, opening abscesses					
and other minor surgical opera-					
tions,		00			
Vaccination,	. 2	00	66	5	00
Catheterization,		00		~	
Excising Uvula,		00			
" Tonsil,	. 10	00	66	15	00
Extracting tooth or cutting child's					
gums,		50	66	1	00

Examinations with instruments as					
speculum, laryngoscope, ophthol-					
moscope, sphygmograph, etc.,	\$3	00	to	20	00
Certificate in case of illness, or for a					
Life Insurance Policy,	3	00	66	5	00
MISCELLANEOUS.					
Chemical and microscopical exami-					
nations of Urine,	\$5	00	66	30	00
Chemical analysis in case of poison					
or suspected poison,	50	00	66	300	00
Other chemical or microscopical					
examinations to be charged accord-					
ing to the trouble and expense in-					
volved					
Post Mortem,	10	00	66	30	00
" if subject is exhumed,	30	00	66	100	00
Each assistant is entitled to a fee.					
Opinion as an expert,	30	00	66	200	00
Efforts for the restoration of the					
poisoned,	5	00	66	50	00
Efforts if stomach-pump is used,	20	-00	-66	100	00
Efforts for the restoration of the					
drowned,	10	00	66	100	00
Administration of anæsthetics,	10	00	66	100	00

GENERAL PRACTICE.

Ordinary visits, (If the distance exceeds one mile, a half²dollar for each mile may be added.) \$2 00 to 5 00

Advice given to other patients at the same visit to be charged as office business

Visits after 9 o'clock P. M. or before 7 A. M., or in haste, or in extraordinary circumstances, to be charged double.

Remaining in attendance all night, Detention, in addition to visit, per hour,

Visits in contagious diseases to be charged according to the trouble and exposure involved,

Consultation visit (mileage to be added),

Attending physician entitled to consultation fees.

Administering enema, in addition to charges for visit,

Administering hypodermic injection, Other special services to be charged as in office business.

MIDWIFERY.

Ordinary case,

(With visits the first week.)

Case requiring version or forceps,
Craniotomy or cæsarean section,
Induction of premature Labor,
Attendance in case of Abortion,

Visits after the first week or extra visits during the first week, to be charged as in general practice. \$10 00 to 20 00

I 00 " 2 00

4 00 " 10 00

5 00 " 50 00

1 00 " 3 00

1 00 " 2 00

\$15 00 to 100 00

20 00 " 150 00 50 00 " 200 00

30 00 " 100 00

10 00 " 40, 00

In any case when detained in constant attendance longer than six hours, an additional charge per hour may be made as in general practice.

SURGERY.

Visits and consultation same as in general practice.

Wounds,	each dressing,	\$2	00	to	10	00
"	requiring ligaturing of ves-					
sels,		10	00	66	100	00
Simple	fractures, first dressing:					
Bones of	Hand,	5	00	66	10	00
66	Forearm, Arm or Shoulder,	10	00	66	40	00
	Foot,	5	00	66	15	00
	Leg,	20	00	66	50	00
44	Thigh or Hip,	30	00	66	100	00
46	Spine, Ribs or Sternum,	10	00	66	50	00
Compour						
one ho	If more.					
One-na	at more.					
	ations, reduction of:					
Disloc		5	00	"	20	00
Disloc	ations, reduction of:	-	00	66		00
Disloc Bones of	ations, reduction of: Thumb or Fingers,	15				00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow,	15	00	66	50	00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow, Shoulder,	15 15 5	00	66	50	00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow, Shoulder, Toes,	15 15 5 10	00	66	50 50 10 30	00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow, Shoulder, Toes, Ankle,	15 15 5 10 30	00	66	50 50 10 30	00 00 00 00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow, Shoulder, Toes, Ankle, Knee,	15 15 5 10 30 50	00 00 00 00	66	50 50 10 30 75 150	00 00 00 00
Disloc Bones of	ations, reduction of: Thumb or Fingers, Wrist or Elbow, Shoulder, Toes, Ankle, Knee, Hip,	15 15 5 10 30 50 10	00 00 00 00	66	50 50 10 30 75 150 30	00 00 00 00 00

Amputation or resection (of extrem-					
ities)	\$10	00	to	200	00
Trephining,	20	00	66	75	00
Paracentesis abdominis or thoracis,	10	00	66	30	00
If the aspirator is used the charge					
is to be doubled.					
Removal of Tumors from external					
surface of body by incision, liga-					
ture, electricity or cautery:					
Small, non-malignant,	5	00	66	30	00
Large or malignant,	50	00	66	200	00
Aneurism by ligature, or compression,	, 50	00	66	150	00
Ovariotomy, or removal of tumors					
from uterus,	100	00	66	500	00
Lithotomy, or Lithrotity,	100	00	66	300	00
Tracheotomy, œsophagotomy, or					
pharyngotomy,	30	00	66	100	00
Herniotomy,	50	00	66	150	00
Reduction of hernia by taxis,	5	00	66	30	00
Extraction of foreign bodies from					
nasal or aural passages,	5	00	66	15	00
Extraction of foreign bodies from					
trachea or œsophagus,	10	00	66	50	00
Operations for the relief of congeni-					
tal deformities as hare-lip, etc.,	20	00	66	100	00
Operations for Fistula,	30	00	66	200	00
" upon the Eye and Ear,	10	00	66	200	00
" Genito-Urinary					
Organs,	30	00	66	100	00
" Rectum,	30	00		100	
" Auto plastic,	-	00		200	

"Orthopedic, \$20 00 to 75 00
The Assistant Surgeon is entitled

to charge half fees.

All other medical services not specified to be charged accordingly.

It is earnestly recommended by the Society, that bills for professional services be rendered as often as once in six months.

Any number of visits made in a single day should be charged at not less than the usual rate, since cases requiring such frequent visits must involve more than ordinary responsibility; and many of the visits must be paid at inconvenient hours.

Professional services are entitled to compensation at the time the same are rendered.

In the cities and towns in the State contiguous to the cities of New York and Philadelphia, the rates of charging for medical and surgical services may reasonably correspond with the rates of those cities.

ORGANIZATION.

The District Medical Society of the County of Camden was organized at Haddonfield, New Jersey, August 14th, 1846, under a warrant from the New Jersey Medical Society, dated May 12th, 1846, and issued to the following licensed Physicians and Surgeons:—

JAÇOB P. THORNTON, M. D. RICHARD M. COOPER, M. D. JAMES RISLEY, M. D. CHARLES D. HENDRY, M. D. OTHNIEL H. TAYLOR, M. D. ISAAC S. MULFORD, M. D.

The following Officers were elected at the above meeting:—

President, James Risley, M. D.
Vice President, Othniel H. Taylor, M. D.
Secretary, Richard M. Cooper, M. D.
Treasurer, Jacob P. Thornton, M. D.



PRESIDENTS OF THE SOCIETY.

1846 to 1847, JAMES S. RISLEY, M. D. 1848 to 1851, ISAAC S. MULFORD, M. D. 1852 to 1853.

CHARLES D. HENDRY, M. D. 1854.

A. DICKINSON WOODRUFF, M. D.

JOHN W. SNOWDEN, M. D.

1856,

OTHNIEL H. TAYLOR, M. D. 1857.

THOMAS F. CULLEN, M. D.

1858, SYLVESTER BIRDSELL, M. D.

JOHN V. SCHENCK, M. D.

1860,

BOWMAN HENDRY, M. D. 1861.

NAPOLEON B. JENNINGS, M. D.

1862,

HENRY E. BRANIN, M. D. 1863.

J. GILBERT YOUNG, M. D. 1864.

JOHN R. STEVENSON, M. D. 1865.

H. GENET TAYLOR, M. D.

ALEXANDER MARCY, M. D. 1867.

JAMES M. RIDGE, M. D.

1868,

JONA. J. COMFORT, M. D. 1869.

ALEXANDER M. MECRAY, M. D. 1870,

J. ORLANDO WHITE, M. D. 1871.

RICHARD M. COOPER, M. D. 1872.

ISAAC W. HEWLINGS, M. D. 1873.

JOHN V. SCHENCK, M. D. 1874.

*RICHARD M. COOPER, M. D.

JOHN W. SNOWDEN, M. D. 1876.

ALEXANDER MARCY, M. D.
4877,

EDWIN TOMLINSON, M. D.

LIST OF THE MEMBERS

OF THE

DISTRICT MEDICAL SOCIETY,

OF THE

COUNTY OF CAMDEN, STATE OF NEW JERSEY,

WITH THE DATES OF ELECTION.

40	Deno	tes d	leceased	mem	hers.

†	Jacob P. Thornton				1846.
*	Richard M. Cooper				1846.
1	James Risley				1846.
*	Charles D. Hendry				1846.
*	Othniel H. Taylor.				1846.
*	Isaac S. Mulford .			4.	 1846.
‡	A. D. Woodruff .				1847.
*	Bowman Hendry .				1847.
ģ	Daniel M. Stout .				1847.
†	Benjamin W. Black	wood		-	1847.
	John V. Schenck .				1848.
1	Edward J. Record.				1848.

[†] Denotes resignation of members.

[#] Denotes removal from the county.

[|] Denotes expelled.

Denotes dropped from the rolls.

	John W. Snowden.				1849.
*	John J. Jessup .				1849.
1	Robert M. Smallwood				1849.
1	Jacob Gregg				1850.
	Thomas F. Cullen.		-		1850.
1	Sylvester Birdsell.				1850.
1	Ezekiel C. Chew .				1851.
‡	B. Fullerton Miles				1852.
11	G. W. Bartholomew				1854.
‡	Richard C. Dean .				1854.
	N. B. Jennings .				1857.
*	W. G. Thomas .				1857.
*	Henry Ackley .				1859.
	H. Genet Taylor .				1860.
	Henry E. Branin .				1860.
	J. Gilbert Young .				1863.
	John R. Stevenson.				1863.
	Alexander Marcy .				1864.
	James M. Ridge .				1866.
‡	Jona. J. Comfort .				1866.
1	Peter V. Schenck .				
	H. A. M. Smith .				1867.
	Alexander M. Mecray				1867.
t	T 37 4 1 00				1867.
	T. F. Smith				1867.
+	John M. Sullivan				1867.
	J. Orlando White .				1868.
	I. W. Hewlings .				1870.
	Randal W. Morgan				1870.
	J. W. McCullough.				1871.
	John R. Haney .				1871.
	D. Parrish Pancoast				1871.
‡	R. B. Okie				1871.
	Isaac B. Mulford .				1871.
	Thomas Westcott .				1871.

W. H. Ireland .				1871.
George W. Boughma				1871.
Edwin Tomlinson.				1872.
C. H. Shivers				1873.
Maximilian West .				1875.
E. B. Woolston .				1876.
E. L. B. Godfrey .				1876.
W. P. Melcher .				1876.
James A. Armstrong	g .			1876.
Thomas G. Rowand				1876.
E. J. Snitcher				1876.
D. W. Blake				1876.
W. A. Davis				1877.
Dowling Benjamin				1877.
John S. Miller .				

HONORARY MEMBERS.

REV. JOSEPH F. GARRISON, M. D., Camden. A. D. WOODRUFF, M. D., Maryland. RICHARD C. DEAN, M. D., U. S. N. PETER V. SCHENCK, M. D., St. Louis, Mo.

At the annual meeting of the District Medical Society of the County of Camden, held May 9th, 1876, the following committee were appointed to revise the Constitution and By-laws of the Society:

H. GENET TAYLOR, M. D. JOHN V. SCHENCK, M. D. JAMES M. RIDGE, M. D.



