

BY-LAWS

OF THE

Medical Society of the County of Albany

TOGETHER WITH

Its Organization and Code of Ethics.



1042

— "SALUS." —

BY-LAWS

OF THE

MEDICAL SOCIETY

OF THE

COUNTY OF ALBANY;

TOGETHER WITH THE ORGANIZATION OF THE SOCIETY, AND THE  
CODE OF MEDICAL ETHICS.

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PRINTED BY ORDER OF THE SOCIETY.

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ALBANY:  
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1877.





## PREFACE.

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This society is, perhaps, the oldest incorporated medical society in the State, having been organized almost immediately after the passage by the Legislature of the statute for the purpose, in 1806, and six months before the State society itself was organized. In membership, it ranks as the fourth among the county societies, or including non-resident members, it is the third, being preceded only by New York and Kings counties.

Upon the organization of the society a committee was appointed, consisting of Drs. Hunloke Woodruff, William McClelland and C. D. Townsend, the newly elected president, vice-president and secretary, to prepare a set of by-laws, and their report, after having had three readings, was adopted April 14, 1807, and signed by the members of the society. It will be found in the first volume of the printed *Annals of the Society*. Committees to amend these by-laws were appointed in 1808, 1819, 1825 and 1831, resulting in additions of minor importance. On these committees are the names, yet well remembered, of John G. Knauff, Charles D. Townsend, T. Romeyn Beck, Platt Williams, Joel A. Wing, Jonathan Eights, William Bay and James McNaughton. The by-laws were first printed in 1821, and again in 1828, together with the State law and a catalogue of the library: no copies of these publications are known to be in existence.

In 1839 a committee, consisting of Drs. Jonathan Eights, Peter Van Olinda and Peter Van Buren, was appointed to



revise the by-laws, and they reported a code, not very essentially differing from the by-laws as previously existing, which was adopted June 28, 1840. The printed copy in the hands of members of the society, bears the date of 1851. These are the by-laws which, for thirty-seven years, have been used for the ruling of this society.

The lack of completeness of these by-laws, and their inefficiency for various circumstances, has repeatedly forced itself upon the attention of the society, and in 1876 a committee was again appointed, consisting of Drs. Wm. H. Bailey, J. R. Boulware, Joseph Lewi, Thomas Beckett, W. G. Tucker and Lewis Balch, to revise the by-laws and draw up a new and more perfect code. At an adjourned annual meeting, held for the purpose, November 28, 1876, the report of this committee was received, and with some amendments adopted, and a copy forwarded to the State Medical Society for approval, in accordance with section 1, chapter 5 of their by-laws. Two amendments having been suggested by the standing committee on by-laws, to which the copy was referred, these, with certain others, were adopted at the annual meeting, held November 13, 1877; and the perfected code having received the approval of the authorized committee of the State society, as in conformity with the laws of the State and with the organization and by-laws of the Medical Society of the State of New York, became the law of this society.

F. C. CURTIS,  
B. U. STEENBERG,  
LEWIS BALCH,

*Committee of Publication.*

## ORGANIZATION OF THE SOCIETY.

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On Tuesday, July 29, 1806, the following physicians and surgeons of the county of Albany met in the city of Albany for the purpose of forming a Medical Society, in conformity with an act to incorporate Medical Societies, passed April 4, 1806, viz.: WILHELMUS MANCIUS, HUNLOKE WOODRUFF, WM. McCLELLAND, JOHN G. KNAUFF, CALEB GAUFF, A. HARRIS, J. W. HEGEMAN, C. VROOMAN, Jr., A. G. FONDA and C. D. TOWNSEND.

The following officers were elected:

HUNLOKE WOODRUFF, - - -	<i>President.</i>
WILLIAM McCLELLAND, - - -	<i>Vice-President.</i>
CHAS. D. TOWNSEND, - - -	<i>Secretary.</i>
JOHN G. KNAUFF, - - -	<i>Treasurer.</i>

It was resolved "That this society be known by the name of the Medical Society of the County of Albany." It was further resolved that the *Board of Censors* consist of five members, and the following were elected: WILLIAM McCLELLAND, WILLIAM ANDERSON, CHARLES D. TOWNSEND, JOSEPH W. HEGEMAN and ELIAS WILLARD.

A committee was appointed to draught a code of by-laws, and the second Tuesday in January was fixed upon as the time for holding the anniversary meeting.







# BY-LAWS

OF THE

## Medical Society of the County of Albany.

### CHAPTER I.

#### TITLE, OFFICERS AND MEETINGS OF THE SOCIETY.

ART. 1. This society shall be entitled the MEDICAL SOCIETY OF THE COUNTY OF ALBANY. It shall <sup>Title.</sup> consist of resident, non resident and honorary members.

ART. 2. The officers of the society shall consist <sup>Officers.</sup> of a president, a vice-president, a secretary, a treasurer and five censors, who shall be elected by ballot, by a majority vote, at the annual meeting. They shall hold office for one year, and until their successors shall be chosen. In case an office shall become vacant, in consequence of death, resignation, removal, or from any other cause, a special meeting shall be held, of which at least ten days' previous notice shall be given, for the purpose of filling such vacancy.

ART. 3. This society shall hold regular meetings in each year, as follows: An annual meeting to be <sup>Regular meetings.</sup> held upon the second Tuesday in October, and a semi annual meeting to be held upon the second Tuesday in May, at three o'clock, P. M., in the city of Albany. During the interval between the annual and the semi-annual meeting, regular meetings shall also be held for the presentation

of papers, the exhibition of specimens, scientific discussion, and such other business as is consistent with these by-laws, not less frequently than once in each month, at such time and place as the president and censors may deem convenient.

ART. 4. Special meetings. at his own option, or at the request in writing of not less than five resident members of this society.

ART. 5. Quorum. At all meetings of this society, fifteen resident members shall constitute a quorum; but a quorum shall not be requisite at a meeting devoted solely to scientific discussion.

## CHAPTER II.

### ORDER OF BUSINESS AND RULES OF ORDER.

ART. 1. Order of business. At the annual meeting, the order of business shall be as follows:

1. Reading the minutes of the last semi-annual meeting.
2. Reception of reports from officers of the society and from committees.
3. Election of members.
4. Motions and resolutions.
5. Miscellaneous business.
6. Amendment of by-laws.
7. The annual address.
8. Election of officers and delegates.

At the semi-annual meeting, as follows:

1. Reading the minutes of the last annual meeting.
2. Reception of reports.
3. Election of members.
4. Motions and resolutions.
5. Miscellaneous business.
6. Semi-annual address.

At the intervening regular meetings, as follows:

1. Reading the minutes of the last intervening regular meeting.



2. Nominations for membership.
3. Reception of reports.
4. Communications, discussions, reading of papers, and presentation of specimens in the order directed by the presiding officer.
5. Miscellaneous business.

ART. 2. The following shall be the rules of order Rules of order.  
of this society :

1. Any member who may speak on any subject or question before the society, shall rise and address the presiding officer.

2. Every member shall have the privilege of speaking twice on any question under consideration, but not oftener, unless by permission of the society.

3. Any member called to order while speaking, shall discontinue his remarks until the point of order is settled.

4. All resolutions and amendments shall be offered in writing, when required by any member.

5. No motion or resolution shall be considered, unless seconded ; nor question, unless stated by the presiding officer.

6. When a question is under debate, no motion shall be received but to adjourn, to lay on the table, for the previous question, to postpone, to refer or to amend ; which several motions shall have precedence in the order in which they are here arranged. The first three shall be decided without debate.

7. The yeas and nays on any question, when called for by five members present, shall be taken without debate, and recorded on the minutes.

8. All questions of order, not provided for by these rules, shall be determined by parliamentary usage.

### CHAPTER III.

#### DUTIES OF OFFICERS.

ART. 1. It shall be the duty of the president to preside at all meetings of the society, to call the meeting to order at the appointed time, and to preserve order President.



and decorum. He shall take the sense of the society on every motion made, and shall have the right to vote on all questions; but if he vote, and there be a tie, the question shall, in every such case, be considered as lost. All questions of order shall be decided by the chair, subject to an appeal, which shall be determined by vote without debate. He shall confer a diploma of license on such persons as are certified by the censors to be qualified for the practice of physic and surgery, on receiving for such diploma the sum of five dollars for the use of the society. He shall deliver an address at the annual meeting closing his official year. He shall be, *ex officio*, a member of the board of censors, of which he shall be the presiding officer.

ART. 2. The vice-president, in the absence of the  
Vice-president. president, shall preside and perform the duties of the president. He shall deliver an address at the semi-annual meeting. He shall be, *ex officio*, a member of the board of censors.

ART. 3. The secretary shall perform the duties  
Secretary. directed by the statutes and the by-laws and resolutions of the society. He shall keep in his book a full and distinct record of all the transactions of the society. He shall keep a chronological list of the members of the society, designating them as resident, non-resident or honorary, and also a list of those resident members who are not "in arrears with the treasurer," which shall be known as the "list of active members." He shall give due notice of all meetings of the society, in such a manner as it shall direct. He shall inform all persons proposed for membership of their nomination, and all persons admitted to membership, and all officers chosen, of their election, and notify members of committees of their appointment. He shall conduct the correspondence of the society, and keep on file

a record of the same. He shall transmit, annually, to the secretary of the State Medical Society, at or soon after the meeting of said society, a list of the officers, delegates and members of this society.

ART. 4. The treasurer shall perform the duties directed by the statutes, and the by-laws and resolutions of the society. <sup>Treasurer.</sup> It shall be his duty to present a bill of the annual dues to each member every year, showing all arrearages, and to demand payment of the same, if unpaid, at least twice during the succeeding year. For this purpose the treasurer is authorized to have the necessary blanks printed, and to employ a competent collector. He shall keep all funds of the society deposited in some solvent bank in the city of Albany, in the name of the society. He shall draw the same therefrom by checks signed by him as treasurer, approved by the president. On the written approval of the president, he shall pay all bills of the society as they become due. He shall render an account at every annual meeting of all the moneys received and expended by him, and of the balance remaining in his hands. He shall report to the society at the annual meeting the names of those on the "list of active members," and of those suspended for unpaid dues.

ART. 5. The censors shall perform the duties prescribed by the statutes and the by-laws and resolutions of the society. <sup>Censors.</sup> They shall examine the credentials and investigate the professional and personal character of each candidate for admission to membership, and report thereon to the society at the succeeding annual or semi-annual meeting. It shall be the duty of the censors to examine all candidates applying for license to practice physic and surgery, who have complied with the requisitions of the statutes of the State and the by-laws of this society;



and they shall, after such examination, if they find the candidate qualified, grant him a certificate to that effect, signed by each censor, which certificate shall entitle him to the diploma of this society on application to the president. Not less than three censors shall constitute a board for the examination of candidates. In case of the absence of one or more of the board of censors, the president may appoint a censor or censors *pro tempore*.

## CHAPTER IV.

### MEMBERS.

ART. 1. The members of this society shall be Classes. divided into three classes; resident, non-resident and honorary members. They shall be elected at the annual or semi-annual meeting.

ART. 2. Resident members shall consist of Resident members. physicians and surgeons who, being residents of the county of Albany, shall have been regularly elected, paid the initiation fee and signed the by-laws. Each resident member shall pay yearly to the treasurer, for the use of the society, the sum of ~~two dollars~~<sup>one</sup>, which shall be due, in advance, at the annual meeting, at which time the fiscal year of the society shall commence. Members who shall not have paid the annual dues for two years in succession, after having been twice in each year called upon to do so, are declared to be, at the expiration of that time, "in arrears with the treasurer," and their names shall appear on his list of members suspended for unpaid dues. Members "in arrears with the treasurer" shall neither be eligible to office nor entitled to vote at any annual meeting; neither shall they be entitled to the privilege of being notified of the meetings of the society. Any member who shall continue "in arrears with the treasurer" for one year, after



having twice received due notice of the existence of this by-law and of the amount due from him, shall have his name dropped from the roll, and he shall not be reinstated except upon the payment of all arrears, unless the society shall, by vote of two-thirds of those present at a regular meeting, otherwise determine.

This by-law shall be printed on all bills sent to members by the treasurer.

ART. 3. Any member, not in arrears with the society, who may permanently remove from the county of Albany, shall be known as a non-resident member. Non-resident members. Such member shall not be required to contribute to the funds of the society; shall not vote at any election, be eligible to any office or appointment, or receive notices or publications from or through the society, but, in all other respects, shall enjoy every right and privilege of a resident member. All questions of residence of members of this society shall be determined by the statutes regulating the residence of citizens in election districts. Physicians residing out of the county may be elected to non-resident membership, with the privileges as herein stated and in conformity with chapter five of these by-laws.

ART. 4. Honorary members may be nominated at any regular meeting and elected by a two-thirds Honorary members. vote at any subsequent annual or semi-annual meeting, provided they are recommended for election by the board of censors, to whom all nominations for honorary membership shall be referred. They shall be non-residents of the county. Not more than three honorary members shall be annually elected. Honorary members may take part in debate, but shall not be entitled to vote, nor shall they be eligible to any office.

## CHAPTER V.

## ADMISSION OF MEMBERS.

Applica-  
tions for  
member-  
ship.

ART. 1. Applications for membership may be made at any regular meeting upon a printed blank prepared for that purpose and furnished by the secretary, which shall state the full name and post-office address of the applicant. No application shall be considered unless accompanied by the initiation fee, which fee shall be returned if the applicant be rejected. During the interval between the semi-annual and annual meetings, applications may be made to the secretary. All documents and testimonials, relative to the candidate's professional and personal qualifications, shall be placed in the hands of the secretary, who shall lay them before the censors.

Action on  
application.

ART. 2. When the censors shall have made a report upon an application to the society, as provided for in chapter three, article five, the candidate, upon receiving a two-thirds vote of those present, shall be declared elected a member of the society. If demanded by any resident member, a separate vote may be taken upon each candidate.

Initiation  
fee.

ART. 3. The initiation fee shall be five dollars, and the annual dues shall commence at the next annual meeting after admission.

## CHAPTER VI.

## ETHICS AND DISCIPLINE.

Ethics.

ART. 1. The system of medical ethics,\* and the by-laws, rules and regulations of the Medical Society of the State of New York, which have reference to county

\* This system of ethics was adopted by this society in 1824; it may be found at page 231 of the first reprint of the State Society Transactions.



societies, together with the precepts of the code of medical ethics of the American Medical Association, shall be binding on the members of this society, and any intentional violation or disregard of the same shall be cause for discipline.

ART. 2. The board of censors shall take cognizance of all complaints of breaches of the code of ethics which may be laid before it, and endeavor to reclaim offenders before proceeding formally against them.

Action of  
censors.

ART. 3. Charges of violations of the laws of ethics of the society, or immoral conduct, shall be presented to the president in writing, inclosed in a sealed envelope, and with the words, "charges against a member" written thereon.

Charges.

ART. 4. The president, on receiving such charges, shall notify the censors to meet and examine the same and the evidence thereon.

Action  
of the  
president.

ART. 5. If the majority of the censors shall be of the opinion that the charges are well founded, they shall serve a copy of them upon the accused, and cause a special meeting of the society to be called to investigate them. Of this meeting the accused shall have at least ten days' notice in writing with an invitation to be present. Due notice of this meeting shall be advertised in at least two papers published in the county.

Further ac-  
tion of the  
censors.

ART. 6. After the investigation of charges, the society may, at its option, dismiss them, or proceed to discipline the accused.

Action  
of the  
society.

ART. 7. Discipline by the society may be of three kinds: Admonition, suspension and expulsion, and shall require the affirmative vote of three-fourths of all the resident members present.

Mode of  
discipline.



## CHAPTER VII.

## LICENTIATES.

Diploma of  
licentiates. ART. 1. Every person who, upon examination by the censors, in conformity with chapter three, article five of these by-laws, shall be found qualified for the practice of physic and surgery, shall receive from the censors a certificate to that effect addressed to the president of the society, who shall thereupon confer upon him the following diploma :

*“ To all to whom these presents shall come, or whom they may in any wise concern :*

The president and members of the Medical Society of the county of Albany, send greeting : Whereas (name of candidate) hath exhibited unto us satisfactory testimony that he has studied physic and surgery for the term and in the manner directed by law ; and has also, upon examination by our censors, given sufficient proofs of his proficiency in the healing art, and of his moral character ; therefore, by virtue of the power vested in us by law, we do grant unto the said (name of candidate) the privilege of practicing physic and surgery in this State, together with all the rights and immunities which usually appertain to physicians and surgeons.

In witness whereof we have granted this diploma, sealed with our seal and testified to by our president and secretary, at ” (place, day and year).

Declaration  
of candi-  
dates. ART. 2. Every person admitted to the practice of physic and surgery shall sign the following declaration :

I, A. B., do solemnly declare that I will honestly, virtuously and chastely conduct myself in the practice of physic and surgery, and that I will, with fidelity and honor, do every thing in my power for the benefit of the sick committed to my charge.

This declaration, so signed, shall be preserved in the archives of the society.

ART. 3. Every person receiving a diploma of license shall be notified by the secretary that he must deposit a copy of the same with the clerk of the county in which he may reside, and that until this is done, he is subject to penalty as an illegal practitioner.

Candidate to record his diploma with the county clerk.

## CHAPTER VIII.

### AMENDMENTS TO BY-LAWS.

ART. 1. Amendments proposed to these by-laws can only be adopted at annual meetings. They shall be proposed in writing at a previous regular meeting. A concurrent vote of three-fourths of the resident members present shall be necessary for their adoption.

Manner of amending.

ART. 2. At any regular meeting, any by-law may be suspended for any length of time, short of the next annual meeting of the society, by the concurrent vote of three-fourths of the resident members present, the motion to that effect being presented in writing.

Suspension of by-laws.

ART. 3. All by-laws, rules and regulations of this society inconsistent with these by-laws are hereby repealed.





CODE OF ETHICS  
OF THE  
AMERICAN MEDICAL ASSOCIATION,

ADOPTED BY THE  
MEDICAL SOCIETY OF THE COUNTY OF ALBANY,

November 28, 1876.

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OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND OF  
THE OBLIGATIONS OF PATIENTS TO THEIR PHYSICIANS.

ART. I. — *Duties of physicians to their patients.*

§ 1. A physician should not only be ever ready to obey the calls of the sick, but his mind ought also to be imbued with the greatness of his mission, and the responsibility he habitually incurs in its discharge. These 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.

§ 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 beyond 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 the physician, 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.

§ 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 interested motives.

§ 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 smooth the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquillity 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 a physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and avoid all things which have a tendency to discourage the patient and to depress his spirits.

§ 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 relatives 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 fanciful delicacy and mistaken liberality that moral duty which is independent of, and far superior to, all pecuniary consideration.

§ 6. Consultations should be promoted in difficult or protracted

cases, as they give rise to confidence, energy, and more enlarged views in practice.

§ 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 counsels, or even remonstrances, will give satisfaction, not offense, 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.

#### ART. II. — *Obligations of patients to their physicians.*

§ 1. The members of the medical profession, upon whom is enjoined the performance of so many important and arduous duties towards the community, and who are required to make so many sacrifices of 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.

§ 2. The first duty of a 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.

§ 3. Patients should prefer a physician whose habits of life are regular, and who is not devoted to company, pleasure or to any pursuit incompatible with his professional obligations. 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, 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.

§ 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 simulate those



depending on external causes, and yet are only to be cured by ministering to the mind diseased. 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.

§ 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 upon his physician the details of his business nor the history of his family concerns.

§ 6. The obedience of a patient to the prescriptions 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 self-constituted doctors and doctresses 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.

§ 7. A patient should, if possible, avoid even the *friendly visits of a physician* who is not attending him—and when he does receive them he should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy his confidence in the course he is pursuing and induce him to neglect the directions prescribed to 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.

§ 8. When a patient wishes to dismiss his physician, justice and common courtesy require that he should declare his reasons for so doing.

§ 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. Patients should also avoid calling on their medical adviser unnecessarily during the hours devoted to meals or sleep. 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.

§ 10. A patient should, after his recovery, entertain a just and enduring sense of the value of the services rendered him by his physician, for these are of such a character that no mere pecuniary acknowledgment can repay or cancel them.

#### OF THE DUTIES OF PHYSICIANS TO EACH OTHER AND TO THE PROFESSION AT LARGE.

##### ART. I.—*Duties for the support of professional character.*

§ 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.

§ 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.

§ 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 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.

§ 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 real 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.

#### ART. II. — *Professional services of physicians to each other.*

§ 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, how-

ever, 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 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.

ART. III. — *Of the duties of physicians as respects vicarious offices.*

§ 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 obligations 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-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.

ART. IV. — *Of the duties of physicians in regard to consultations.*

§ 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 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 of the aids actually furnished by anatomy, physiology, pathology and organic chemistry.



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

§ 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 by their common consent; and no *opinions* or *prognostications* should be delivered which are not the result of previous deliberation and concurrence.

§ 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 physician is out of the way, and similar explanations must be made by him at the next consultation.

§ 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.

§ 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.

§ 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.

§ 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 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 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 the minority, politely and consistently retire from any further deliberation in the consultation or participation in the management of the case.

§ 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 both of time and attention, at least a double honorarium may be reasonably expected.

§ 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.

ART. V.—*Duties of physicians in cases of interference.*

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

§ 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 his disorder; nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

§ 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.

§ 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.

§ 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.

§ 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.

§ 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.

[The expression, "patient of another practitioner," is understood to mean a patient who may have been under the charge of another practitioner at the time of the attack of sickness, or departure from home of the latter, or who may have called for his attendance during his absence or sickness, or in any other manner given it to be understood that he regarded the said physician as his regular medical attendant.]

§ 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 direction unless it be expressly desired; and, in this last case, to request an immediate consultation with the practitioner previously employed.

§ 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.

§ 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.



ART. VI. — *Of differences between physicians.*

§ 1. Diversity of opinion and opposition of interest 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*.

§ 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 feelings 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.

ART. VII. — *Of pecuniary acknowledgments.*

Some general rules should be adopted by the faculty in every town or district relative to *pecuniary acknowledgments* 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.

## OF THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND OF THE OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.

ART. I. — *Duties of the profession to the public.*

§ 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 especially 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, arrangements 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 to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

§ 2. Medical men should also be always ready, when called on by the legally constituted authorities, to enlighten coroners' 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 Jurisprudence. 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.

§ 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 of the public duties referred to in the first section of this article, 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 acknowledgment. But to individuals in indigent circumstances, such professional services should always be cheerfully and freely accorded.

§ 4. It is the duty of physicians, who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and impostors. Physicians ought to use all the influence which they may possess, as professors in colleges of pharmacy, and by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries from vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

#### ART. II. — *Obligations of the public to physicians.*

§ 1. The benefits accruing to the public, directly and indirectly, from the active and unwearied beneficence of the profession, are so numerous and important that physicians are justly entitled to the utmost consideration and respect from the community. The public



ought likewise to entertain a just appreciation of medical qualifications; to make a proper discrimination between true science and the assumptions of ignorance and empiricism; to afford every encouragement and facility for the acquisition of medical education, and no longer to allow the statute-books to exhibit the anomaly of exacting knowledge from physicians under a liability to heavy penalties, and of making them obnoxious to punishment for resorting to the only means of obtaining it.





