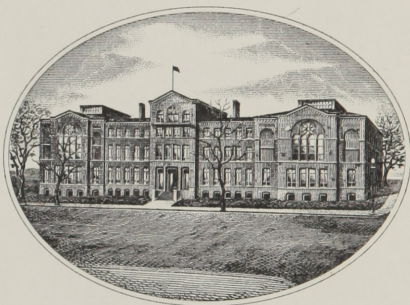


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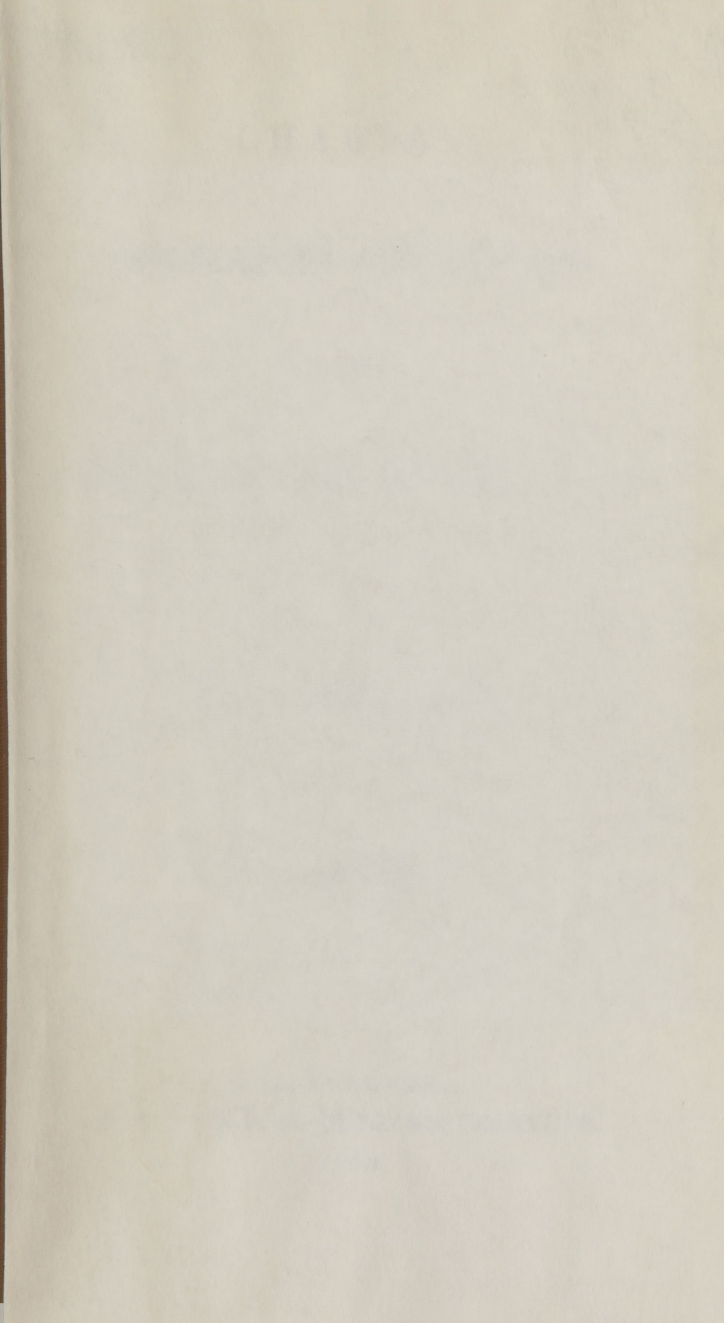
**CHARTER, ORDINANCES AND BY-LAWS
OF THE COLLEGE OF PHYSICIANS**

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CHARTER,

ORDINANCES AND BY-LAWS

OF THE

COLLEGE OF PHYSICIANS

OF

PHILADELPHIA.

—NON SIBI SED TOTI—

PHILADELPHIA:

T. K. AND P. G. COLLINS, PRINTERS.

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The College was instituted in January, 1787, and incorporated in March, 1789; the Ordinances and By-Laws were revised and finally adopted July, 1840; since which time various additions and amendments have been made to them, all of which are incorporated in the present revised edition. Approved, January, 1856.

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CHAPTER

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CHARTER.

AN ACT FOR THE INCORPORATION OF THE COLLEGE OF PHYSICIANS OF PHILADELPHIA.

1. Whereas, the Physicians of Philadelphia, influenced by a conviction of the many advantages which have arisen from literary institutions, have associated themselves under the name and title of *The College of Physicians of Philadelphia*:

2. And whereas, the objects of this college are to advance the science of medicine, and thereby to lessen human misery, by investigating the diseases and remedies which are peculiar to this country; by observing the effect of different seasons, climates, and situations upon the human body; by recording the changes which are produced in disease by the progress of agriculture, arts, population, and manners; by searching for medicines in the American woods, waters, and in the bowels of the earth; by enlarging the avenues to knowledge from the discoveries and publications of foreign countries; and by cultivating order and uniformity in the practice of physic:

3. And whereas, the said College of Physicians have prayed us, the Representatives of the Freemen of the Commonwealth of Pennsylvania, that they may

be created a body politic and corporate, forever, with such powers, privileges, and immunities as may best answer the laudable purposes which the members thereof have in view ; wherefore to assist and encourage the said College of Physicians, in the prosecution and advancement of useful knowledge for the benefit of their country, and of mankind,

4. *Be it enacted, and it is hereby enacted, by the Representatives of the Freemen of the Commonwealth of Pennsylvania, in General Assembly met, and by the authority of the same, That the members of the said College of Physicians, that is to say, John Redman, John Jones, William Shippen, Jun., Adam Kuhn, John Morgan, Benjamin Rush, Samuel Duffield, Gerardus Clarkson, George Glentworth, Thomas Parke, James Hutchinson, Robert Harris, John Carson, Benjamin Duffield, William W. Smith, John Foulke, Samuel Powell Griffitts, William Clarkson, William Currie, Benjamin Say, Andrew Ross, John Morris, Nathan Dorsey, James Cunningham, Caspar Wistar, Jun., Michael Leib, and John H. Gibbons, be, and the same persons are, and shall be, a body corporate and politic in deed and in name, by the name and style of "THE COLLEGE OF PHYSICIANS OF PHILADELPHIA," and, by the same name, they and their successors are hereby constituted and confirmed one body corporate and politic in law, to have perpetual succession, and to be able and capable to have, hold and enjoy any goods and chattels, lands, tenements, rents, hereditaments, gifts, and bequests, of what nature soever, in fee simple, or for term of years,*

life or lives, or otherwise; and also to grant, sell, alien, assign, or let the same lands, tenements, and premises, according to the nature of the respective grants and bequests made to the said corporation, and of the estate of the said corporation therein; provided, that the amount of the clear yearly value of such real-estate exceed not the sum of five hundred pounds, lawful money of this commonwealth.

5. The said corporation be, and shall be forever hereafter, able and capable in law, to sue and be sued, plead and be impleaded, answer and be answered unto, defend and be defended, in all or any courts of justice and other places, in all manner of suits, actions, complaints, pleas, causes, and matters of what nature or kind soever; and that it shall and may be lawful to and for the said corporation, forever hereafter, to have and use a common seal, and the same seal, at the will and pleasure of the said corporation, to break, change, alter, and renew.

6. For the well ordering of the said corporation and its affairs, there shall be, at all times hereafter, the following officers of the same; that is to say, one President, one Vice-President, four Censors, a Secretary, and a Treasurer, who shall be chosen, annually, from amongst the Fellows of the said College of Physicians, on the first *Tuesday in the month of July, forever hereafter,** or within one calendar month after the

* By a decree of the Court of Common Pleas, Dec. 3d, 1855, the clause in Italics was altered to read as follows: *Wednesday in the month of January next, and annually thereafter.*

same day, in any year; and that John Redman be the present *President* of the said College; John Jones, the present *Vice-President*; William Shippen, Jun., Adam Kuhn, Benjamin Rush, and Samuel Duffield, the present *Censors*; Samuel Powell Griffitts, the present *Secretary*; and Gerardus Clarkson, the present *Treasurer* of the said College: and shall be and remain the President, Vice-President, Censors, Secretary, and Treasurer, respectively of the said College, until they be superseded by a new election to be made by the Fellows of the said College as aforesaid; and all vacancies by death, resignation, or otherwise, which shall at any time hereafter happen in any of the said offices, may be filled by a special election, to be holden so often as occasion shall require.

7. The authorities and duties of the officers of the said corporation who are hereinbefore mentioned, and of any others which the said corporation shall see fit to appoint, the times of meeting of the said corporation, the admission of members, and the other concerns of the said corporation, shall be regulated by the by-laws and ordinances of the said corporation, heretofore made or to be made, touching the premises.

8. *Provided always*, That no by-laws nor ordinances of the said corporation, hereafter made, shall be binding upon the officers or members thereof, unless the same shall be proposed at one regular meeting of the said corporation, and enacted and received at another, after the intervention of at least thirty days. And that no sale, or alienation, or lease for above three years, of any part of the real estate of the said corpo-

ration, shall be valid, unless the terms and nature of such sale or lease be proposed at a previous meeting of the said corporation.

Signed by order of the House,

RICHARD PETERS, *Speaker.*

Enacted into a law, at Philadelphia, on Thursday, the twenty-sixth day of March, in the year of our Lord one thousand seven hundred and eighty-nine.

PETER ZACHARY LLOYD,

Clerk of the General Assembly.

ORDINANCES AND BY-LAWS.

CHAPTER I.

OF THE OFFICERS AND THEIR DUTIES.

1. THE officers (as required by the Charter) shall be a President, a Vice-President, four Censors, a Secretary, and a Treasurer, to be chosen annually, by ballot, on the first Wednesday in January, or within one calendar month thereafter.

2. The *President* shall maintain order at the meetings of the College, and shall sign all orders on the Treasurer, duly passed by the College. He shall have power to call special meetings at his own discretion; and it shall be his duty to call them, when requested in writing by six Fellows. He shall not discuss any question while in the chair, unless it be a question of order; and shall have no vote except when his vote may be necessary to decide a question.

3. The *Vice-President* shall perform the duties of the President in the absence of the latter officer, or at his request when present. In the absence of both the President and the Vice-President, a chairman shall be appointed *viva voce*.

4. The *Censors* shall inspect the records and examine the accounts of the College, and report thereon at the stated meeting in January. They shall take cognizance of all charges of a breach of the regulations of the College, preferred against a Fellow, and shall consider and determine the same, and report thereon to the College; provided that, in cases where a Censor is one of the parties concerned, the charge shall be referred to a committee of three, to be chosen by ballot, who shall act as censors *pro hac vice*.

5. An appeal from the decision of the Censors to the College, in these cases, shall always be reserved.

6. The *Treasurer* shall collect and receive all the moneys due to the College, and pay them only upon the order of the President, or other officer who may have presided at the meeting at which the appropriation was passed; and these orders shall be his vouchers for his expenditures. He shall present annually a statement of the finances of the College, at the stated meeting in December, and at such other times as the College shall direct.

7. The *Secretary* shall keep correct minutes of the proceedings of the College, and record them in a book provided for the purpose. He shall keep a list of the Fellows and Association, on which he shall note the date of the election of each: the time of his death, resignation, or loss of membership, and the residence of Associates. He shall cause to be inserted, in a book provided for the purpose, the biographical notices of deceased Fellows presented to the College. He shall receive and preserve all books of records,

and papers belonging to the College, provide certificates of membership, and perform such other duties as are appropriate to his office.

He shall be, *ex officio*, a member of the Committee of Publication.

CHAPTER II.

OF MEMBERS AND MEMBERSHIP.

1. The College shall consist of Fellows and Associates.
2. The Fellows shall be practitioners of medicine, of good character in their profession, residing within the city and incorporated districts of Philadelphia, and who are over twenty-four years of age.
3. The Associates shall be distinguished practitioners of medicine, residing without the limits above mentioned.
4. No person who gives his support to any system of practice, which is sustained by efforts to weaken or diminish public confidence in the science of medicine, or in the medical profession, or who, by advertisement, announces his claim to superior qualifications in the treatment of diseases, or of a particular disease; or who holds a patent, or a part of a patent for a surgical instrument; or gives a prescription to any apothecary, which he refuses to give to other apothecaries; or who deals in secret medicines,

or publicly recommends them, shall be considered eligible as a Fellow or Associate of the College. And, any Fellow or Associate who may be hereafter so engaged, shall forfeit his right to membership, on the fact being reported by the Censors. But an appeal from the decision of the Censors is permitted, as in other cases.

5. Candidates for Fellowship may be proposed in writing, at any stated meeting, by three Fellows. They shall be balloted for only at the stated meetings in January, April, July, and October; when, if four-fifths of the Fellows present vote in their favor, they shall be pronounced duly elected; *provided*, that no election for a candidate shall be gone into, unless there be present at least twenty Fellows.

6. All propositions for fellowship shall be read at the meetings of the College intervening between that at which they are presented and the meeting at which they are to be balloted for.

7. No candidate who is rejected shall be again proposed within twelve months from the period of such rejection.

8. The names of the persons proposed as candidates for Fellowship shall not be placed on permanent record, unless the said candidates shall be actually elected: and, in the case of the rejection of any candidate, the paper containing his nomination shall be destroyed immediately after the meeting, at which he is balloted for, has adjourned.

9. No person elected a Fellow shall be deemed a member of the College, until he shall have subscribed

the ordinances and by-laws, and paid his initiation fee; and if he omit the signing and payment above mentioned for three months, his election shall become void.

10. The *initiation fee* shall be fifteen dollars, payable at or before the signing the ordinances and by-laws, and the *annual contribution* shall be five dollars, payable, in advance, at the stated meeting in January. To all annual contributions that shall remain unpaid after the meeting in July, *ten per cent.* shall be added.

11. Any Fellow who shall decline the payment of his annual contribution for two successive years, shall forfeit his membership. Provided, however, that if any Fellow shall be absent from Philadelphia, on public service in the Army or Navy of the United States, for twelve months or more, at any one time, a deduction shall be made from the amount of his annual contributions, corresponding to the duration of his absence.

12. No Fellow who may remove from the city of Philadelphia, and Incorporated Districts, shall, in consequence of such removal, forfeit his Fellowship, but he shall be exonerated from the payment of the annual contributions.

13. No Associate, who may come to reside within the limits described in Chapter II. Sect. 2, shall be admitted to a Fellowship in the College, without being elected and introduced in the manner prescribed for the admission of Fellows.

14. The number of Associates shall not exceed forty, ten of whom shall be foreigners.

15. Associates shall have the privilege of attending the meetings of the College, but shall take no part in the transaction of its private business.

16. The signing of the Constitution adopted in 1788, shall be deemed a subscription to the ordinances and by-laws of the College, in force for the time being.

17. Every Fellow of the College shall receive a certificate of membership according to the annexed form, having the seal of the College affixed thereto, and signed by the President, Vice-President, and Censors, and countersigned by the Secretary.

Nos, Præses, Vice-Præses, Censoresque Collegii Medicorum Philadelphiensis, omnibus ad quos hæc pervenerint, salutem.

Testamur _____ virum doctum et medicinæ peritum, nostri Collegii Socium _____ adscriptum fuisse, omnesque ejus honores et privilegia, jure ritèque consecutum esse. In cujus rei fidem hisce literis, Collegii sigillo munitis, nomina nostra subjicimus.

Datum Philadelphia,

Anno Domini 18

_____	} <i>Censores.</i>		_____ <i>Præses.</i>
_____			_____ <i>V. Præses.</i>
_____			_____ <i>Secretarius.</i>

CHAPTER III.

OF MEETINGS.

1. The *Stated Meetings* shall be held on the first Wednesday in every month; from October to March inclusive, at 7½ P. M.; and from April to September inclusive, at 8 P. M. At which hours *precisely*, or as soon thereafter as a *quorum*, which shall consist of seven Fellows, shall have assembled, the meeting shall be organized.

2. At stated meetings, the following shall be the *order of business* :—

1st. The minutes of the preceding meeting shall be read for approval or correction.

2d. Newly elected Fellows may be introduced.

3d. Committees shall report.

4th. Motions and observations respecting the private business of the College, may be made.

5th. Written communications may be received.

6th. Verbal communications may be made.

7th. Miscellaneous business may be transacted.

3. At the stated meetings in *January, April, July, and October*, the balloting for Candidates for Fellowship may be gone into, after the second item of business has been transacted, provided there are present at least *twenty* Fellows.

4. At the stated meeting in *December*, the Trea-

surer and the Library Committee shall present their annual reports, and the President shall nominate a committee on Meteorology and Epidemics.

5. At the stated meeting in *January*, after the third item in the order of business shall have been dispatched, the Censors and Committee on the Museum shall present their annual reports; the annual appropriation for the library shall be made; and the officers of the College for the ensuing year shall be elected; after which, the business of the College shall proceed in the usual order.

6. At the stated meeting in *November*, the Committee of Publication shall be elected.

7. At the stated meeting in *February*, the report on Meteorology and Epidemics shall be made.

8. At *special meetings*, no business shall be transacted except that for which the said meeting has been called.

CHAPTER IV.

OF COMMITTEES.

1. The following shall be the mode of appointing Special Committees, excepting when otherwise ordered by a vote of the College. The President shall nominate one member, who shall be chairman of the committee, and considered responsible for the due performance of the duties enjoined on the com-

mittee. The chairman shall nominate the second member, the second the third, and so on, until the number agreed on shall be completed.

2. Committees shall report at the meeting immediately succeeding their appointment, unless it may be otherwise determined by an order or by-law of the College; and failing to make a final report at the proper time, unless a satisfactory reason therefor be given, they shall be discharged, and the matter dropped or referred to another committee, as the College shall determine.

3. All reports shall be made in writing, and signed by a majority of the committee.

CHAPTER V.

RULES OF ORDER.

1. No question shall be considered open for discussion, except when brought forward by motion duly made and seconded, and then distinctly stated by the presiding officer. The name of the mover of each motion to be entered upon the minutes.

2. Every motion shall be reduced to writing by the mover, if the presiding officer or any Fellow request the same.

3. Any Fellow may call for the division of a question, provided it comprehends two distinct propositions. A motion to strike out and insert shall be

deemed indivisible; but a motion to strike out shall not preclude either amendment or a motion to strike out and insert.

4. The mover, with the consent of the seconder, may withdraw any motion previously to its amendment, commitment, or to the question upon its final passage being put by the presiding officer.

5. When a Fellow speaks, he shall stand up, addressing himself to the presiding officer, and confining himself strictly to the question under consideration.

6. No Fellow shall be interrupted while speaking, except by a call to order.

7. The presiding officer shall decide all questions of order unless an appeal be made to the College, in which case the person appealing shall first state his reasons for appealing, and then the presiding officer his reason in support of his decision, but no further debate shall be allowed.

8. No Fellow shall be allowed to speak more than twice upon the same question, without permission being granted him by the College.

9. Whilst a question is under consideration, no motion shall be received excepting to adjourn, to lay the subject upon the table, to postpone, to refer to a committee, or to amend; which several motions shall have precedence in the order in which they are named.

10. A motion for adjournment shall always be in order, except when the College is voting on another question, or while a Fellow is speaking.

11. A motion to amend an amendment is in order, but not one to amend an amendment to the amendment. The question on the amendment shall be decided before that on the main question.

12. No motion shall be received to postpone the motion under discussion for the purpose of introducing a substitute.

13. A motion for postponement shall preclude commitment, and one for commitment shall preclude amendment, or a decision to the original question.

14. Motions for postponement, to lay upon the table, and for adjournment shall always be determined without debate.

15. A motion that has been negatived, cannot be again brought forward at the same meeting, excepting upon a motion to reconsider.

16. No question shall be reconsidered, excepting on the motion of two Fellows, who voted with the majority when the question was decided, and submitted at the meeting at which the same was discussed.

17. When a blank is to be filled, the question shall be first taken on the largest sum, greatest number, and remotest period.

18. Two Fellows may demand the yeas and nays on any question which is not required to be decided by ballot, and have them entered upon the minutes. The presiding officer in such cases shall always vote last.

19. No order shall be taken upon the report of any special committee, excepting to refer it back to

the committee, to lay it upon the table, or to obtain the sense of the College in relation to the resolutions appended thereto.

20. The presiding officer shall not discuss any subject while in the chair, but may assign his reasons on deciding a question of order. He shall have no vote excepting on a ballot, or upon a call for the yeas and nays.

CHAPTER VI.

SUMMARY OF TRANSACTIONS.

1. There shall be published at the termination of every three months, or as soon thereafter as circumstances will permit, a summary of the transactions of the College; comprising, 1. All written communications presented to the College, which the publishing committee may select, or the publication of which may be directed by the College. 2. A statement of all facts relating to the Science of Medicine, Surgery, or obstetrics, communicated verbally to the College by its Fellows; and 3. An abstract of all discussions upon subjects of general interest which shall take place at the meetings of the College, and such other of its transactions, the publication of which may be deemed expedient and proper.

2. The numbers of the said Summary of Transactions shall be furnished to each Fellow and Associate of the College without charge.

CHAPTER VII.

COMMITTEE OF PUBLICATION.

1. At the stated meeting of the College in the month of November, annually, there shall be elected (due notice of which election shall be given by the Secretary) a committee of three Fellows, to be denominated the Committee of Publication.

2. The duty of the said Committee shall be to decide upon, and prepare for publication the matter to be inserted in the numbers of the Summary of Transactions; and to superintend, generally, their publication.

3. The Secretary of the College, who shall be *ex officio*, a member of the committee, shall attend to the distribution of the numbers of the Summary to the Fellows of the College.

4. The Fellows shall have the privilege of reporting for publication the verbal communications and remarks presented by them at the meetings of the College.

5. No paper read before the College shall be published, otherwise than in the Summary of Transactions, as having been so read, without the consent of the majority of the Fellows present at the reading thereof—this consent to be expressed by vote.

CHAPTER VIII.

OF THE LIBRARY.

1. A Librarian and a Library Committee of three shall be elected at the stated meeting in January of every year. The committee shall attend to the increase and preservation of the Library; and shall carry into effect all such regulations pertaining thereto, as may be adopted by the College, and shall report upon its condition at the stated meeting in December.

2. At the stated meeting in January, the College shall appropriate such a sum as may be deemed compatible with its funds, for the use of the Library for the ensuing year.

3. At the close of the stated meetings, and at such other times as the Library Committee shall direct, each Fellow, upon applying to the Librarian, shall be allowed to take out any book or set of books, excepting such as, from time to time, the Library Committee may designate; and may retain the same until the next stated meeting. The Librarian shall enter, in a register kept for the purpose, the title of the books taken out, with the name of the Fellow by whom, and the date at which they are taken out.

4. If any Fellow shall detain the book or books delivered to him by the Librarian, longer than one

month, he shall pay a fine of twenty-five cents for every month the book or books are so detained.

5. If a book be lost by a Fellow, he shall either replace it, or pay double the value thereof, or of the set of books to which it belongs.

6. At the stated meeting in November, all the books shall be returned to the Library, to enable the Library Committee to make their final report.

CHAPTER IX.

OF THE MUSEUM.

1. At the stated meeting in January, there shall be elected a Curator, and Committee of three Fellows, who shall be denominated the Committee on the Museum.

2. The duty of the Curator shall be to prepare and set up such pathological specimens as the Committee on the Museum shall deem worthy of a place in the cabinet. He shall be, *ex officio*, a member of said committee.

3. The Curator shall label, and keep a correct catalogue of the specimens presented to the Museum, with the name of the donor; and, as far as practicable, a record of the case from which the specimen was derived.

4. The Committee on the Museum shall have a

general supervision of the Cabinet, and shall present, annually, in the month of January, a report of its condition.

CHAPTER X.

CODE OF MEDICAL ETHICS.

SECTION I.

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. Those obligations are the more deep and enduring, because there is no tribunal other than his own conscience to adjudge penalties for carelessness or neglect. Physicians should, therefore, minister to the sick with due impressions of the importance of their office; reflecting that the ease, 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 to 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 offence, if they be proffered with politeness, and evince a genuine love of virtue, accompanied by a sincere interest in the welfare of the person to whom they are addressed.

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 intri-

cate 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 feel-

ings 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 the 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.

SECTION II.

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 *nos-trum*, whether it be the composition or exclusive property of himself, or of others. For, if such *nos-trum* 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, however, to be obtruded officiously; as such unmasked 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 practise from some medical board of known and acknowledged respectability, recognized by the American Medical 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 rivalship 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 attendant 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 practised 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 friend-

ship, 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 ab-

solutely 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*, or, where both parties are Fellows of the College, to the Censors.

§ 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 and 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.

SECTION III.

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 regulation—the location, arrangement, and dietaries, of hospitals, asylums, schools, prisons, and similar institutions—in relation to the medical police of towns, as drainage, ventilation, &c., and in regard to measures for the prevention of epidemic and contagious diseases; and when pestilence prevails, it is their duty to face the danger, and to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

§ 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 paragraph of this article, should always be recog-

nized 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 bene-

ficence 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 liability to heavy penalties, and of making them obnoxious to punishment for resorting to the only means of obtaining it.

FEES.

The following Table of Charges being founded on a just consideration of the professional services which the Fellows of the College are called upon to perform, it will be considered a duty on their part to conform to it, whenever the circumstances of their patients are not such as clearly forbid it.

For a single visit or advice, in a case in which no further visits are required, \$5 to 10

This is not intended to apply to those cases in which the physician is considered the regular medical attendant of the individual or family.

For each visit, in a case in which the physician is in regular attendance, or for advice at his office 1 to 2

Every necessary visit on the same day to be charged, whatever may be their number, at the same rate.

When detained, for each hour	\$3
For a visit at a time appointed by the patient or his friends, during the daytime	2 to 5
For written opinion or advice to a patient	5 to 20
For a visit at night, after ordinary bedtime	5 to 10
For a first visit as consulting physician	5
For each subsequent visit as consulting physician, in the same case	2
For each visit of attending physician, when in consultation	2
For a visit as consulting physician during the night	10
In visits to distant patients, one dollar to be charged for every mile beyond two from the residence of the physician, in addition to the ordinary charge, and two dollars additional for crossing the river Delaware.	
An extra charge may be discretionally made for travelling at night, or on account of the badness of the roads, or the inclemency of the weather.	
For an opinion involving a question of law	10 to 50
For a post-mortem examination, in a case of legal investigation	25 to 50
For a post-mortem examination made at the request of the family or relatives of a deceased person	5 to 15
For a certificate of the state of health of an individual	5
For vaccination	5
For revaccination	2 to 5
For a case of midwifery	10 to 40
For the application of the forceps	10
For the operation of turning	10 to 20
For the operation of embryulcia	20
For any indisposition in the mother or child, after the tenth day from confinement, the charge for attendance as in ordinary cases requiring medical treatment. But when any <i>serious</i> ailment occurs in either mother or child within the ten days, a charge is to be made for each visit as in other cases of disease.	
For reducing fractures, and the first dressing	10 to 20
For reducing recent luxations	10 to 30

For reducing old luxations	\$50
For removal of stone from the bladder	100 to 300
For amputation of a leg or arm	50
For amputation at the shoulder or hip-joint	100 to 200
For amputation of a finger or toe	10
For the extirpation of large tumors	50 to 100
For the extirpation of other tumors	10 to 50
For trepanning	50 to 100
For the operation for cataract	75 to 150
For other operations on the eye and its appendages	10 to 50
For the operation for aneurism, subclavian, carotid, femoral	100 to 200
For the operation for strangulated hernia	50 to 100
For the operation for hare-lip	20 to 50
For the operation for fistula in ano	20 to 50
For fistula in perineo	50 to 100
For the operation for hemorrhoids	20 to 50
For the palliative operation for hydrocele	5 to 10
For the operation for the radical cure of hydrocele	20 to 30
For the operation for vesico-vaginal, or recto-vaginal fistula	50 to 100
For the operation for phymosis and paraphymosis	5 to 20
For the introduction of the catheter, in ordinary cases	1 to 2
For the introduction of the catheter, in cases of ob- struction	10 to 20
For division of stricture of the urethra	10 to 50
For the operation for artificial joint	20 to 100
For the operation of tracheotomy	20 to 50
For the operation for imperforate anus, vagina, &c.	10 to 30
For the Cæsarean operation	100
For the reduction of hernia by taxis	10 to 50
For extirpation of the tonsils	10 to 20
For the introduction of the stomach pump, in cases of poisoning	10 to 30
For the removal of foreign substances lodged in the pharynx or œsophagus	10 to 50
For the reduction of prolapsus ani	5 to 10
For examination per anum or vaginam	5 to 15

For the introduction of a pessary	\$5
For the introduction of a seton, or forming an issue	5
For tapping for ascites	10 to 20

In all Surgical cases, the charge for subsequent attendance to be in proportion to the time occupied and the trouble incurred.

It is recommended that in all cases of gonorrhœa and syphilis, a retaining fee of from \$10 to \$25 be required in advance, the subsequent charge being graduated by the amount of the after attendance in each case.

Physicians should present their account at least annually, or as much oftener as they may deem proper.

CHAPTER XI.

OF THE REVISION AND ENACTMENT OF ORDINANCES AND BY-LAWS.

1. No new nor amended ordinance or by-law (see the last clause of the Act of Incorporation), shall be binding on the Officers or Members of the College unless it shall be proposed in writing and subscribed by five Fellows, at one stated meeting, and enacted or passed at another, after the intervention of at least thirty days, nor unless it shall be passed by a majority of two-thirds, when there are not less than twelve Fellows present.

2. When it shall be in order for the College to act on an ordinance or by-law, it shall be announced by the Secretary to the Fellows in their notices.

FELLOWS AND ASSOCIATES

OF THE

COLLEGE OF PHYSICIANS OF PHILADELPHIA.

* Denotes deceased Fellows.

† Resignation of Fellowship.

|| Forfeiture of Fellowship.

(A.) Associates.

(N. R.) Non-resident Fellows.

ELECTED.

* John Redman,	Jan. 1787.
* John Jones,	" "
* John Morgan,	" "
* William Shippen, Jr.,	" "
* Adam Kuhn,	" "
† Benjamin Rush,	" "
* Gerardus Clarkson,	" "
* Samuel Duffield,	" "
* Thomas Parke,	" "
* James Hutchinson,	" "
* George Glentworth,	" "
* Abraham Chovet,	" "
* Andrew Ross,	" "
* William W. Smith,	" "
* James Hall,	" "
† William Clarkson,	" "
* William Currie,	" "
* Benjamin Say,	" "

ELECTED.

* Samuel Powell Griffiths,	Jan.	1787.
* Benjamin Duffield,	"	"
John Morris,	"	"
* John Carson,	"	"
* John Foulke,	"	"
Robert Harris,	"	"
* Nathan Dorsey,	April,	"
* John R. B. Rodgers,	"	"
* Caspar Wistar, Jr.,	"	"
* James Cunningham,	"	"
* Charles Moore,	"	"
* Michael Leib,	March,	1788.
* John H. Gibbons,	"	"
* Nicholas B. Waters,	April,	1789.
* Benjamin Smith Barton,	"	1790.
* Nicholas Way (Wilmington, Del.), (A.)	Aug.	"
* James Tilton (Dover, Del.), (A.)	"	"
* Isaac Senter (Newport, R. I.), (A.)	Nov.	"
* Thomas Redman,	July,	1791.
* William M'Ilvaine,	Nov.	"
* Plunket F. Glentworth,	Sept.	1792.
* Hugh Hodge,	Dec.	1793.
* Peter Renaudet (Bristol, Eng.), (A.)	April,	1795.
Charles Caldwell,	July,	"
* John Cumming,	Oct.	"
* Thomas C. James,	"	"
* William Annan,	June,	1796.
† Adam Seybert,	Nov.	1797.
* William Patterson (Londonderry), (A.)	Jan.	1798.
* William Boys,	Nov.	"
* David Hosack (New York), (A.)	Mar.	1800.
* Lewis J. Jardine,	July,	"
* Joseph P. Minnick,	Aug.	1801
* Thomas T. Hewson,	Dec.	"

ELECTED.

* John Coakley Lettsom (London), (A.)	Mar.	1802.
* Nathaniel Chapman,	Nov.	1807.
* Joseph Parrish,	"	1810.
* Henry Neill,	June,	1811.
* Samuel Bard (New York), (A.)	Aug.	"
* Samuel Stewart,	July,	1814.
* Joseph Woollens,	"	"
* Isaac Cleaver,	Feb.	1815.
William P. C. Barton,	June,	"
† Edwin A. Atlee,	July,	"
* John Moore,	Aug.	"
* Samuel C. Hopkins,	"	1817.
John Wilson Moore,	Dec.	"
* Samuel Emlen,	Aug.	1818.
* John C. Otto,	March,	1819.
† Elijah Griffiths,	April,	1821.
Jacob Bigelow (Boston), (A.)	May,	"
* John Ruan,	April,	1823.
* Joseph Hartshorne,	Dec.	1824.
Henry Bond,	July,	1825.
Robert M. Huston,	Sept.	1826.
John Bell,	Feb.	1827.
Hugh L. Hodge,	April,	"
Charles D. Meigs,	"	"
George B. Wood,	"	"
R. La Roche,	"	"
Benjamin Hornor Coates,	May,	"
John K. Mitchell,	Aug.	"
* Thomas H. Ritchie,	April,	1828.
Lewis P. Gebhard,	"	"
William Darrach,	May,	"
* William S. Coxe,	Jan.	1829.
Franklin Bache,	April,	"
* Daniel Drake (Cincinnati), (A.)	Dec.	1830.
Joseph Togno,	"	"
George Fox,	Sept.	1831.
* Charles Lukens,	Feb.	1832.

ELECTED.

	Edward Y. Howell,	June, 1832.
	Theophilus E. Beesley,	Oct. " "
*	Simon A. Wickes,	Nov. 1833.
	Caspar W. Pennock, (N. R.)	Sept. 1834.
	William W. Gerhard,	" "
	Thomas Stewardson (Savannah), (A.)	Jan. 1835.
	William Ashmead,	" "
	Reuben D. Mussey (Cincinnati), (A.)	Feb. " "
	P. Ch. A. Louis (Paris), (A.)	" "
	Reynell Coates,	" "
	John Marshall Paul, (N. R.)	May, " "
	Joseph Pancoast,	" "
	Isaac Hays,	Sept. " "
	John Rodman Paul,	Feb. 1836.
	Charles Noble,	March, " "
	D. Francis Condie,	May, " "
	Squire Littell,	" "
	Thomas D. Mütter,	" "
*	Isaac Parrish,	" "
*	John Revere (New York), (A.)	Dec. " "
	David Rutter,	Jan. 1837.
	Frederick A. Vandyke,	March, " "
	Anthony Bournonville,	May, " "
	W. S. W. Ruschenberger,	April, 1838.
	Samuel Jackson,	May, " "
	Robley Dunglison,	June, " "
*	Jacob Randolph,	Dec. " "
	Joseph Carson,	" "
	Joseph Warrington,	Jan. 1839.
	James H. Bradford, (N. R.)	" "
	Thomas S. Kirkbride,	" "
	George W. Norris,	" "
	Francis West,	Feb. " "
†	Benjamin D. Neill,	" "
	Rush Vandyke,	" "
	Edward Peace,	March, " "
*	Frederick Turnpenny,	" "

	ELECTED.
* George Cheyne Shattuck (Boston), (A.)	May, 1839.
* George M'Clellan,	" "
William D. Brincklé,	" "
William Pepper,	" "
Edward Hallowell,	" "
* Theodoric R. Beck (Albany), (A.)	July, "
* Samuel Colhoun,	Aug. "
William H. Klapp,	" "
Caspar Morris,	Sept. "
Frederick S. Eckard, (A.)	April, 1840.
* Carter N. Berkeley,	June, "
* Joseph Peace,	Oct. "
William S. Zantzinger,	Nov. "
David C. Skerrett,	Dec. "
W. Poyntell Johnson,	" "
Henry H. Smith,	Jan. 1842.
Peter Parker (China), (A.)	Feb. "
Charles Evans,	April, "
† Caspar Wistar,	" "
Benjamin W. Dudley (Lexington), (A.)	June, "
Nathan R. Smith (Baltimore), (A.)	" "
Gotthilf Moehring,	" "
* John Hubbard (Hallowell, Me.), (A.)	" "
* Thomas Sewall (Washington, D. C.), (A.)	" "
Robert Bridges,	July, "
Meredith Clymer, (N. R.)	" "
John D. Griscom,	Aug. "
John Ware (Boston), (A.)	Nov. "
Thomas Dillard,	" "
Paul Beck Goddard,	" "
Alfred Stillé,	Dec. "
John J. Reese,	" "
* Amos Twitchell (Keene, N. H.), (A.)	Jan. 1843.
John Forsyth Meigs,	June, "
John Wiltbank,	" "
* Henry S. Patterson,	Aug. "
Lewis Rodman,	Nov. "

ELECTED.

George L. Newbold,	Nov. 1843.
William Byrd Page,	Dec. "
Charles R. King, (N. R.)	" 1844.
David H. Tucker, (N. R.)	" "
* T. R. Brincklé,	Jan. 1845.
* Samuel G. Morton,	" "
Francis G. Smith,	May, "
Mahlon P. Hutchinson,	Sept. "
N. D. Benedict (E. Florida), (A.)	" "
Benjamin S. Janney,	" "
† Alexander Wilcocks,	April, 1846.
* Victor L. Godon,	June, "
Thomas F. Betton,	" "
Morris C. Shallcross,	" "
* William R. Grant,	" "
* Joshua M. Wallace,	" "
Washington L. Atlee,	" "
John Neill,	Aug. "
Henry Gibbons, (N. R.)	" "
John C. Warren (Boston), (A.)	" "
Samuel D. Gross (Louisville), (A.)	" "
Richard D. Arnold (Savannah), (A.)	Nov. "
Anthony E. Stocker,	Dec. "
J. Dickinson Logan,	Feb. 1847.
Gouverneur Emerson,	" "
Edward Hartshorne,	April, "
John L. Atlee (Lancaster), (A.)	June, "
Jonathan Knight (New Haven), (A.)	July, "
Alexander H. Stevens (New York), (A.)	" "
* James M'Naughton (Albany), (A.)	" "
* Moreton Stillé,	Dec. "
Caspar Wister,	Jan. 1848.
Robert A. Given,	" "
Joseph Klapp,	April, "
Samuel Jackson, (Prof.)	Nov. "
* Jonathan Pereira (London), (A.)	Dec. "
Robert Christison (Edinburgh), (A.)	" "

	ELECTED.	
Samuel Lewis,	Feb.	1849.
Justus Dunott, (N. R.)	"	"
Samuel L. Hollingsworth,	April,	"
John Hastings, (N. R.)	"	"
James M. Greene,	"	"
John L. Ludlow,	June,	"
John H. B. McClellan,	July,	"
William V. Keating,	"	"
D. Paul Lajus,	"	"
John K. Mason,	"	"
* William B. Wilson,	Oct.	"
Edmund Lang,	Nov.	"
Thomas S. Reed,	"	"
Beverly R. Wellford (Fredericksburg, Va.), (A.)	Jan.	1850.
Richard H. Townsend,	Feb.	"
Isaac Remington,	Mar.	"
John B. Tuft, (N. R.)	"	"
Edward R. Mayer,	Oct.	"
William R. Bullock, (N. R.)	Jan.	1851.
John B. Biddle,	"	"
Robert P. Thomas,	"	"
Henry E. Drayton	April,	"
Bernard Henry,	"	"
James J. Levick,	"	"
Joseph Leidy,	"	"
Wilson Jewell,	July,	"
Ellwood Wilson,	"	"
Henry Hartshorne,	Oct.	"
William Keller,	Jan.	1852.
William Mayburry,	"	"
Alfred L. Kennedy,	"	"
Ellerslie Wallace,	"	"
Thomas H. Yardley,	"	"
Fitz William Sargent,	April,	"
Thomas Hewson Bache	"	"
James V. Emlen,	"	"
Joseph Hopkinson,	"	"

ELECTED.

Owen Jones Wister,	April, 1852.
William H. Hooper,	“ “
Henry Tiedemann,	July, “
Jonathan M. Allen,	“ “
James L. Tyson,	Oct. “
Archibald Hall (Canada), (A.)	“ “
James E. Rhoads,	Jan. 1853.
Addinell Hewson,	“ “
Fleetwood Churchill (Dublin), (A.)	April, “
David Gilbert,	Oct. “
B. Howard Rand,	“ “
John M. Lever (London), (A.)	Jan. 1854.
G. Herman Robinett,	April, “
William Hunt,	“ “
R. A. F. Penrose,	“ “
Richard Clements,	July, “
William H. Gobrecht,	“ “
Joseph Parrish,	Oct. “
William D. Stroud,	Jan. 1855.
Nathan L. Hatfield,	“ “
Francis W. Lewis,	July, “
S. Weir Mitchell,	Jan. 1856.

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1856.

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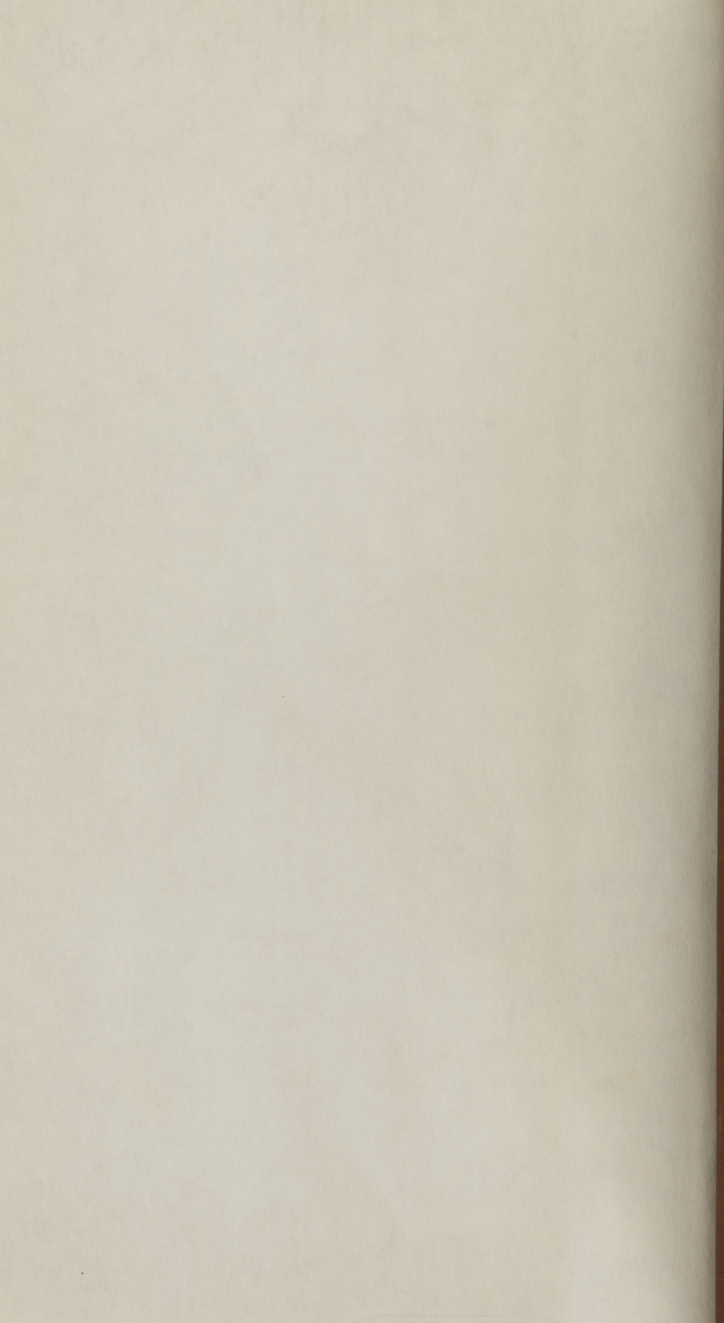
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