

be observed and appreciated; you will be credited with all the prosperous accidents of the case, get the credit of the cure, and gain a host of warm admirers, who will magnify and herald you far and wide as being doubly skillful in making the blind see, the deaf hear, the lame walk, the broken whole again, the senseless well, the weak and debilitated strong, rotten lungs sound again; and, even though you receive little or no pecuniary reward from them, it will serve as a mental gymnasium, help to train and develop your professional character, show your skill and ingenuity, augment your fame, and educate both your hand and your eye, and school you in the art of recognizing, studying, and treating the very diseases you will daily be called upon to attend all the days of your life; besides, teaching you to overcome the thousand and one embarrassments encountered by the beginner, and bring you eventual success in life. And when success does come, forget not those by whom it came, and with grateful heart be true to all the friends of your struggling years.

"Thine own friend, and thy
Father's friend, forsake not."

Take care to promise old chronic cases—that more experienced physicians have pronounced incurable, and annoying and troublesome, but penniless patients, taken for older physicians who wish to discard them—nothing but that you will do your best for them. Never stake your reputation on their cure, and allow yourself plenty of time in speaking of the period necessary for the trial, instead of promising too much, or good results too soon.

You will find it comparatively easy to get practice in the slums and among the moneyless poor, and relatively hard to do so among the wealthier classes. Your practice will probably begin in cellars and garrets, lanes and back streets, among the poorest of the poor, the degraded and the vicious,—even in hovels of filth and vermin, in putrid alleys and fetid courts, where

"I have counted two-and-seventy stenches,
All well defined."

You will also be called to attend people who wash with invisible soap, in imperceptible water, and use immaterial towels, who will furnish astonishing illustrations of

"The survival of the filthiest;"

and will also enter dens of iniquity and vice, where you must pick your way through mud and mire amid

"Poverty, hunger, and dirt,"

where your reputation will extend much more rapidly than in comfortable quarters; but, no matter whether in mansion, cottage, or hovel, every man, woman, or child you attend, white and black, rich and poor, will aid in enriching your experience and in shaping public opinion by giving you either a good or a bad name.

"Over rough roads, indeed,
Lies the way to medical glory."

Bear in mind that the wheel of fortune sometimes makes the poor rich, and a few of the more grateful kind then remember the physician who remembered them. Attending the servants of the rich, however, who are sick at their service places, or paid for by the latter, will not improve your reputation much with the powers above stairs: at any rate, not nearly so much as attending the same patients at their own homes, or on their own account. Proud and haughty people who, in their minds, couple you professionally with their servants, garrets, and kitchens are apt to form a low opinion of your status, and of the nature and class of your practice. It is also true that if you attend a poor person gratuitously you will seldom, if ever, be called to his rich relatives; and if Dame Fortune ever makes that poor patient rich, even he may become supercilious, and drop you.

Nor will you find it very satisfactory to attend people who "just call you in to see a sick member of their family," *because* you are attending across the street or in the neighborhood. Those who select you or send for you because they prefer you to all others will be your best and most devoted patients.

The adoption of a specialty, to the exclusion of other

varieties of practice, is successful with but a few of those who attempt it. It should never be undertaken without first studying the whole profession and attaining a few years' experience as a general practitioner.

You are not obliged to assume charge of any case, or to engage to attend a woman in confinement, or to involve yourself in any way against your wish; but, after doing so, you are morally, if not legally, bound to attend, and to attend properly, even though it may be a charity or "never pay" patient. At the same time you have a right, should necessity arise, to withdraw from any case by giving proper notice.

Bear in mind that ethical duties and legal restraints are as binding in pauper and charity cases as in any other, for both ethics and law rest upon abstract principles, and govern all cases alike.

You will probably find hospital and dispensary patients, soldiers, sailors, and the poor, much easier to attend than the higher classes; their ailments are more simple, definite, and uncomplicated, the treatment more clearly indicated, and the response of their system is generally more prompt, and one can usually predict the duration, issue, etc., of their cases with great accuracy. With the wealthy and pampered, on the other hand, there is often such a concatenation of unrelated or chronic symptoms and strange sympathies, or they are described in such indefinite or exaggerated phrases, that it is difficult to judge which one symptom is most important to-day or which will be to-morrow.

With hospital patients, sailors, soldiers, paupers, etc., on the contrary, there are but two classes,—the really sick, suffering from affections of a well-marked type, and malingerers. Such practice is apt to lead the unguarded youth to a rough-and-ready habit of treating every patient as very ill, or else as having little or nothing the matter with him; later, he finds that these crude or possibly overactive methods may answer in public institutions, but they will not suit the squeamish people

with nerves tuned to a high key, so often seen in private practice, with indefinite or frivolous ailments, for which the physician trained in a hospital could hardly fail to feel and manifest contempt. Hospital practice is so different from private that but few members of our profession shine conspicuously as practitioners in both spheres. An illustration of this fact is afforded in colleges and medical societies; for the greatest Ciceronian orators in the colleges, and the most fluent debaters and paper philosophers in medical societies, are not necessarily the best or most successful practitioners. The fields are decidedly different, and may lead the mind in different directions. In a word, the possession of didactical knowledge, and the power of applying it at the bedside, are very different things.

Observe and strictly practice every acknowledged rule of professional etiquette. For this purpose it is your duty to familiarize yourself at the very threshold of your professional career with the "Code of Ethics of the American Medical Association," and never to violate either its letter or its spirit, but always scrupulously to observe both toward all *regular* graduates practicing as *regular* physicians. But remember that you are neither required nor allowed to extend its favoring provisions to any one practicing *contrary* to the liberal tenets that govern all regular physicians, no matter who or what he may be.

I am not sure that the medical profession of any other country besides ours has a code of written ethics. Possibly old countries from long custom can dispense with them. But in our Young Land of Freedom the very nature of society requires that physicians shall have some general system of written ethics to define their duties, and, in cases of doubt, regulate their conduct toward each other and the public in their intercourse and competition. Every individual in the profession is, of course, supposed to be a gentleman, actuated by a lofty professional spirit, striving to do right and to avoid wrong, and, even were there no written rules at all, the vast majority would naturally conform to the rules of justice and honor, as far as they understood

them. As a consequence, each one's action, when scanned by watchful and knowing eyes, might probably be considered fair in nine doubtful cases out of ten, while in the tenth one might honestly err greatly, or conclude differently from his neighbor on some mooted point, or might be found differing in opinion only from some jealous or captious rival, or crafty, unprincipled competitor, with whom an honorable agreement would be impossible.

The absence of rules for our government would also leave Dr. Allforself and others at liberty to frame their own codes, which might violate all logic and all propriety,—

“The wrong-doer never lacks a pretext,”—

and no matter how equivocal their position, or how crooked and insincere their ways, no one would be in position to prove that they acted from unworthy motives, and not from error of judgment, even in the most flagrant violation of the cardinal, the glorious old-fashioned Golden Rule, the climax of all ethics, laid down by Confucius, and quoted by “Our Saviour,” “Do unto another what ye would he should do unto you, and do not unto another what you would not should be done unto you,”—truly, a world of ethics in a nutshell, an ocean of morals in a drop.

The non-existence of a code would also make it possible for Dr. G. to pounce on the patients of Drs. A., B., C., D., E., and F. like a wolf on sheep, and to carry on a regular system of infringements, self-advertising, certificate-giving, and wrongdoing in general, regardless of their rights, and still claim to be as honorable as Socrates, while those aggrieved would have no visible standard of appeal by which the contrary could be proved.

In view of these and many other facts, it has been found necessary to have a code of written ethics for regulating the conduct of physicians toward each other and toward the public generally.

Dr. Thomas Percival, an English physician, in a small book published in London in 1807, proposed an admirable code of

ethics, which, excepting a few alterations made necessary by the lapse of time and the advance of medical science, is the identical code adopted by the American Medical Association in 1847, and which from then until now has instructed and governed nine-tenths of our profession throughout this broad land, protecting the good and restraining the bad, just as the Ten Commandments of Holy Writ instruct and restrict mankind in general.

You and every other true physician among us unquestionably owe to it his sacred allegiance.

You and all other physicians are supposed to have studied this code, and to be familiar with its requirements. The moral claim which it has upon you rests not upon any obligation of personal friendship toward your professional brethren, but upon the fact that it provides for every relation, contingency, and occasion, and is founded on the broad basis of justice and equal rights to every member of the profession, shining like the pole-star to guide and direct all who wish to pursue an honorable course; and, being founded on the highest moral principles, its precepts can never become useless till regenerate and infallible human nature makes both codes and commandments unnecessary. It is the great oracle of right and reason, to which you can resort and study the moral aspect of all the subjects that are likely to confront you from time to time, and no better code of moral principles can be found anywhere.

To this lofty code, in a great measure, is due the binding together and elevation, far above ordinary avocations, of the medical profession of our land, and the esteem and honorable standing which it everywhere enjoys.

By its dignity and justness it remains as fresh and useful to-day as when the profession adopted it, more than forty years ago, and if you faithfully observe its canons you can truthfully exclaim: “I feel within me a peace above all earthly dignities, a clear and quiet conscience.”

Professional morals are an important part of medical education, and it is as much the duty of every medical college in

America to acquaint its students with the precepts of the code of ethics of the American Medical Association, and to furnish to each of its alumni a copy of it with his diploma, as it is for a mother to familiarize her children with the Ten Commandments.

In our land the code is regarded as the balance-wheel that regulates all professional conduct, and neither Professor Bigbee nor Dr. Littlefish can openly ignore it without overthrowing that which is vital to his standing among medical men. If in the struggle and competition for practice you desire to act unfairly toward your brethren, the code will compel you to do the evil biddings of your heart by stealth; and even then your unfairness will seldom go undetected or unpunished, for the great God of Heaven has declared that "Whatsoever a man soweth, that shall he also reap." Any one upon whom you encroach in an unprofessional manner will feel himself justified in retaliating with your own weapons, and you will reap a crop similar to the seed sown. Whenever you sow a thistle or a thorn you will reap thistles or thorns, whenever a wind is sown a whirlwind will be reaped; whilst the sweeter seeds sown by others will be yielding to them sweeter fruits.

When called to attend a case previously under the care of another physician, especially if the patient and friends are dissatisfied with the treatment, or if the case is likely to prove fatal, be carefully just. Do not disparage the previous attendant by expressing a wish that you had been called in sooner, or criticise his conduct or his remedies; it is mean and cowardly to do either. In all such cases do not fail to reply, to the questions of the patient or his inquiring friends, that your duty is *with the present and future, not with the past*. Inform yourself as to what line of treatment has been followed in the case, but refuse either to examine or criticise the previous attendant's remedies. Let your conversation also refer strictly to the present and future and not to the past, and in no way allude to the physician superseded, unless you can speak clearly to his

advantage. As a rule, the less you say about the previous treatment, the better.

To take a mean advantage of any one whom you have superseded, besides being morally wrong, might engender a professional hornet, which, in retaliation, would watch with a malignant eye and sting fiercely wherever opportunity offered. Eschew all sorts of *finesse*, and let courtesy, truth, and justice mark every step in your career. Seek, moreover, to enhance your profession in public esteem on every fitting opportunity, and defend your brethren and your profession, also, when either are unjustly assailed. Indeed, to fail to defend the reputation of an absent professional brother, even by a conspiracy of silence, when justice demands you to speak, is not only unprofessional, but is more or less dishonorable, and implies a quasi-sanction of the libel.

Every physician has his successes, and also his failures. Where you are highly successful in diagnosis, or have worked wonders in treatment after others have failed, observe a proper degree of modesty, and avoid pushing your triumph so far as to wound the feelings or mortify the pride of your less-fortunate predecessors, on the principle of

"Hit him again, he has no friends."

Take just credit, but be guarded in your words and actions, and take no undue advantage of their errors, that you may not in turn invite disparagement or arouse hatred.

"No man likes to be surpassed by men of his own level."

We all know there are a thousand unwritten ways to show an ethical spirit and a thousand undefinable ways to evince an unethical one. When you doubt whether this or that patient is fairly yours or another's, give your rival the benefit of that doubt. Never be tenacious of doubtful rights, but let your every-day conduct, in this and all other respects, entitle you to the esteem of your medical neighbors.

Also, while alive to your own interests, do not captiously