

follow up every trifling ethical infringement, difficulty, or apparent contradiction, as if you were ever on the watch for provocations and angry collision with your neighbors, and courted a war with everybody for what you may be pleased to call your "rights." A certain amount of jarring and clashing in a profession like ours is unavoidable; allow liberally for this; school your feelings; bury pettiness, captiousness, and narrowness in the ocean of oblivion, and maintain a friendly attitude toward all fairly-disposed neighboring physicians. Unless you do so, many questions will arise that cannot well be adjusted by an appeal to the code, and you will become involved in useless, rancorous, and endless controversies and reprisals with those whose paths may happen to cross your own.

Sometimes—

"The very silliest thing in life
Creates the most material strife."

You will find it both inconvenient and embarrassing to pass and repass a medical neighbor between whom and yourself there exists a chronic feud, or individual estrangement, jealousy, and hatred, as, also, to meet any one else with whom, through enmity or other cause, friendship and speaking acquaintance have ceased. If ever you have cause to believe a medical neighbor has treated you unfairly, or misconstrued your own conduct or motive, instead of the fierce onslaught and bitter rejoinder, go or send directly to him, and in an earnest but urbane manner make or ask an explanation.

Eschew all doubtful expedients that relate to getting patients and profits, as though you cast off or assume the code of ethics just as suits your purpose; and be very careful not unjustly to encroach on any other physician's practice; also, never attempt unjustly to retain any patient to whom you are called in an emergency; if you are in doubt whether you were deliberately chosen, or only taken in the emergency, do not hide yourself behind a mean technicality of ethics, but ask the direct question. If you learn that another was really preferred to you, surrender

the patient to him on his arrival, even though you may be, for politeness' sake, asked to continue in attendance. Circumstances may even require you to have the former attendant sent for in a case, either to take charge of it or for consultation.

Acts of neighborly kindness are frequently performed by physicians for one another, and go far, very far, toward neutralizing the ruffles, stings, and collision of interests which the very nature of our profession makes inevitable. If your conduct toward other physicians at such times is invariably just and honorable, as if arising from a simple desire to do that only which is right, it will in due time be recognized and appreciated, and will not only assist in making your road pleasant, but, if you ever unwittingly infringe, one and all will acquit you of any intentional error.

When you are called, in an emergency, to prescribe for a patient who is under the care of another physician, it is better to leave for him a copy of your prescription, that he, knowing its exact character, may be able to judge whether or not he should continue its use.

Be it your invariable rule never to visit a patient who is under the care of a brother physician, as a "smelling committee," or medical detective for the patient's beneficial society, with a view to ascertain whether he is malingering, or for an employer, friend, or relative who is anxious and apprehensive in regard to his illness, or for one in fear of an impending damage-suit, with a view to report thereon, without the distinct sanction of the attending physician. It would be a still greater wrong to clandestinely remove the bandages from fractures, ulcers, etc., applied by another physician, whether it be to change treatment or merely to examine the case.

Be also extremely discreet and chary of visiting patients under the care and treatment of other physicians, even for social purposes, as it is a frequent cause of suspicion and contention.

Never take charge of a patient recently under the care of any regular physician without first ascertaining that he has been

formally notified of the change. The principle that governs such cases is this: When a person is taken ill he is at liberty to select any physician he prefers, but after making a selection, and when the case has been taken charge of, if for any reason whatever the patient wants to change, he must, in doing so, follow the established custom, for if there are any hard thoughts against the other physician, or unpleasant scenes with him, the patient and his friends should have them, not you.

The dissatisfied persons who wish to discard their medical attendant and employ you, will sometimes contend that the rules relative to taking charge of patients, recently under the care of another physician, are harsh and unjust, and peculiar to the medical profession. Neither of these statements is true, for our custom is identical with that which prevails everywhere among all classes of people, which requires the formal discharge of the old employé before a new one can take his place. Besides, no person, whether menial, mechanic, or physician, can fill a vacancy till one exists.

Be especially chary of taking cases in families into which you have ever been called in consultation, more particularly if you were called in at the former attendant's suggestion, on account of your supposed greater merits, for he, chagrined at his displacement, will be apt to scan every feature of the change, and, if there be any ground at all for suspicion, he will conclude that, instead of obeying the Golden Rule, and sternly refusing to supplant him, you have taken advantage of the introduction *he* gave you, ingratiated yourself in, and ungenerously elbowed him out.

"I taught you to swim, and now you would drown me."

You will sometimes be called to a patient, and, upon going, will find that he is under the care of some other physician, and will, of course, refuse to attend; but you will almost surely be urged just to look at the patient and tell what you think; or whether the attending physician's treatment is not wrong; or to prescribe for him; with the assurance that the other physician

shall be kept in ignorance of your visit. Bear in mind that honor and duty require you to do right in these and all other positions in which you may be placed; not through fear, or for policy's sake, but because it is right to do right, and for the other equally broad reason that you yourself would be cognizant of the wrong, whether the other knew of it or not, and it would lower you in your own eyes; decline, therefore, courteously but firmly, their solicitations, with an impressive assurance that you desire to possess your own respect as earnestly as you do that of others. Unless a great emergency exists, you should determinedly refuse either to sit in judgment on another's work, or in any way to interfere; if, however, the case be one of urgency, your services should be rendered for the attending physician, and you should leave a note telling him what you have done. Take care to make no charges for such services.

When persons are inveighing to you against an attending physician, or one who has been discarded, and finding fault with his treatment, or at the patient's being so long unrelieved, you should never suggest that he be discharged, so that you may supplant him, as it would seem like piracy, or intriguing for a brother's place not vacant.

The rules regarding previous attendance are much less stringent in floating office practice than in regular family practice, and it is not essential to inquire whether an office patient is under the care of another; I believe that all of the most eminent physicians prescribe for all ordinary office patients with but little regard as to who has been attending, or where, or when. Most people, with long-standing, or peculiar, or indefinite ailments, are unwilling to resign themselves to the stroke of Providence until numerous physicians have been tried in vain; and a patient with heart trouble, cough, or a skin disease, will occasionally consult almost a dozen physicians at their offices in as many weeks. The principle followed is simply this: Office advice to strangers is everywhere cash, and the payment of the fee frees the patient to go subsequently to whomsoever else he pleases.

You will see much to condemn in regard to ethics, both in the profession and in the laity. Should you ever feel constrained to attack or impugn any one's conduct, do it in an open, manly way, and never covertly or anonymously,—for underhand, clandestine, and dark-lantern attacks are despicable.

"All ambushed attacks are both cowardly and mean."

Be punctilious in your endeavors to do every person justice. If you err at all in this respect, let it be in liberality. Suffer injustice, rather than participate in it. Sometimes, even though the letter of ethics allows you to take a patient, it may be unkind or unwise, or brutal to do so; use such opportunities to harmonize, rather than to disrupt. You can do this, and yet not make a habit of cheating yourself out of patients.

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Always keep some good vaccine virus on hand, both for the fees it secures, when there is a demand for vaccination, and for fear of a sudden outbreak of small-pox.

Vaccination, although a trifling operation, is a prolific cause of criticism and reproach to physicians; take your time, and do it skillfully and thoroughly. In lieu of humanized virus or arm-to-arm vaccination, use calf-virus whenever it is possible to obtain it; it is more popular, and not capable of communicating syphilis, scrofula, etc., and needs less defense. In no case use any but pure virus, and be ever ready to defend its purity with proof if any one you vaccinate suffers any mishap through it.

Remember that you are legally as well as morally bound to vaccinate a person after promising to do so. Besides the regrets and harsh criticism your neglect would generate, a suit for damages might follow, if the patient should get small-pox while awaiting the fulfillment of your promise.

Do not begin the unjust custom of vaccinating children gratuitously, in cases where you have officiated at their birth, as is the habit with some. Make the same charge also for re-vaccinating any one, to test whether his former vaccination is

still protective, whether it takes or not, as you would if he never had been vaccinated before, as revaccination succeeds in but a small proportion of those it is tried upon, and the charge is for making the test.

A public vaccine physician should never insist upon vaccinating a child or other unvaccinated person who is known to have a discreet, watchful medical attendant, unless small-pox is actually prevailing. They should, on the contrary, be referred to him.

You should, of course, make no extra charge for repeating primary vaccinations till they take, no matter how long the interval between the trials; also, make but one charge for any person who has revaccination attempted, no matter how often, if during the same epidemic or small-pox scare. Many people believe a vaccination protects as long as the scar shows plainly. The truth is, a vaccine scar lasts for life, while the protective influence of vaccination gradually disappears in some people. A typical vaccine scar merely shows the vaccination once took properly, not that it still protects.

Some people think a revaccination must be made to take anyhow, even though they are still protected by the old one. You cannot catch fish where there are none, no matter how you bait your hook; nor set a pile of stones on fire, no matter how good the matches.

Another error regarding small-pox: Many people imagine that it can only thrive when the weather is cold; this is a mistake, as it may prevail with intensity at any season. Indeed, severe epidemics of it often prevail in tropical countries where there is perpetual summer.

Avoid volunteer practice, and be very cautious how you go out of your way to persuade people to let you remove warts, extract tumors, efface tattoo-marks, destroy nævi or superfluous or disfiguring hairs, and do other minor surgical operations gratuitously, with assurances of success. There is always a possibility of serious or fatal sequelæ; the most trivial operation—

even a puncture on the tip of the finger by a pin, needle, or splinter—is occasionally followed by death, and you should not, especially in private practice, induce people to let you involve yourself for their benefit, without being paid for your risk and responsibility; for instance, it is an ugly matter to have a wart you have insisted upon tampering with become an ulcerating epithelioma. It is better, indeed, to avoid all unrequited work, and all gratuitous responsibility, other than what charity calls for.

For similar reasons do not persuade people to effect insurance on their lives, or in any particular company, as all such ventures carry a possibility of disappointment or failure that might involve you.

Wisdom in recognizing cases that are likely to involve you in suits for malpractice, and in foreseeing and forestalling the suits themselves, is also a valuable power. Take care that this wisdom does not come too late or cost you too much. Remember that when you are employed professionally you are regarded as contracting that you possess and will exercise ordinary skill in your profession, and that you will be guilty of no negligence. Beyond this you are not responsible for the result, no matter how bad, as medicine is not an exact science; but if you fail either in ordinary skill or care, you are legally liable to the injured person to the full extent of the damage sustained. Skill should, of course, be measured by the time and place in which it is exercised; whether on land or on ship-board, in places where facilities are few, or where they are many, are matters to be taken into account. In your professional rounds you will not find the various diseases as clearly marked as they are in the books,—not labeled as plainly as the bottles in a pharmacy,—therefore a mistake in diagnosis is not sufficient cause for action, and every physician may be, and often is, mistaken; indeed, many cases are so obscure, or masked, or irregular, or complicated, that nothing but an autopsy, and sometimes not even that, can reveal their exact nature.

Never fail promptly to send in your professional account to dissatisfied patients who may be unjustly attempting to injure your reputation and practice, and especially to such as may be threatening to sue you for malpractice, whether or not you expect them ever to pay it. If you cowardly shrink from doing so in such cases, it will be quoted as proof that you are guilty of what they charge, and that you know it. The presentation of your bill will give you a better position before the public, and raise an issue that greatly tends to checkmate them. In all such cases *do not fail to charge the maximum fee.*

When you are to be a witness in court in a grave case, courteously but firmly decline to give any person connected with the opposite side either a verbal or written statement of what you saw, heard, or observed in the case, or what your opinion is, or what your testimony will be. Also, if need be, dispute their right to question you at all on the subject.

If you are yielding in this respect, you may actually aid them to set traps for you, by distorting your statement from its proper meaning and intent, or to rebut it on the witness-stand, or to prepare to charge that you are lacking in medical knowledge, and thus bring both justice and yourself to grief. Often, in such cases,

“Your enemy makes you wise.”

Firmly but courteously inform such agents that you will not give the desired information, but that they can elicit all you know on the witness-stand.

When giving evidence in court, whether as plaintiff, defendant, or witness, endeavor to keep cool and self-possessed, and give your evidence with manly and honest candor; guess at nothing, and express no opinion for which you cannot give the why and wherefore.

There is no class or profession other than our own whose members habitually confront and confute one another in the courts and before the public. Our so-called psychological experts, specialists, and other would-be highly scientific repre-