

## AMERICAN COLLEGE OF SURGEONS

### PRESIDENTIAL ADDRESS

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**T**O-DAY the history of surgery in the United States and Canada is opened to a new page. When at some future time the historian comes to write upon that page the record of events that have led up to this meeting, he will record the taking of another step, let us hope a long one, in the progress of medicine in general, and of surgery in particular, in Canada and the United States. What is consummated here to-night is destined to produce a deep and lasting impression upon medical progress, not alone in these countries, but indirectly the world over. It therefore behooves us who are most intimately concerned in and identified with this movement to weigh well our every action with regard to it, to make haste slowly in order to disarm unfriendly criticism and avoid mistakes, which may delay indefinitely the reaping by the public and by the profession of the full benefits desired and which, it is confidently expected, will result from our action. Who can foretell the extent of the influence the American College of Surgeons may exert in the coming years upon the profession of surgery in Canada and the United States? If it is rightly used, it may be more far-reaching in its effect than even the most sanguine among us now dares hope. This surely will be so if every one of us does his full duty and uses his opportunities as a Fellow of the College to make it the power for good that its founders and well-wishers want it to become. But in order to accomplish anything at all worth while, it must first obtain the confidence and the united and enthusiastic support of the best element in the profession. With this whole-hearted backing, its influence and power for good will be unlimited.

The present and future welfare of our profession has been for a long time uppermost in the minds, and very close to the hearts, of many of us. We have pictured to ourselves in this connection a profession ennobled by men actuated solely by their desire to devote their time and their talents to the relief of suffering humanity, willing, yes glad, at any time, if need be, to lay down their own lives for those of their fellow-men; whose membership should embrace only men of singleness of purpose, unselfish, high-minded, zealous in their efforts to wrest from nature the keys to her many mysteries; men who unconsciously, perhaps, in character and conduct, reflect in vary-

ing degree the life and spirit of the Great Physician; a profession free from taint of commercialism or graft, in which there shall be no room for the base, the unscrupulous, the ignorant or the unskilled; in which the test for membership has to do only with character and attainment. Are our ideals too high? Are we striving after the unattainable? Is it worth while to make the effort?

Our hopes and dreams, so long dim, shadowy and unreal, are about, in part at least, to assume definite and concrete form. We are assembled here this evening to witness, indeed to assist at, the birth of a new agency for good both to the public and to the profession; to bid Godspeed to this lusty infant, the American College of Surgeons, the offspring of a fruitful union between a deep-rooted and praiseworthy desire within the profession to elevate its standards of ethics and efficiency, and a lively sense of the urgent and long-felt need of its accomplishment. In domestic circles, the advent of "a little stranger," fraught, as it is, with the gravest consequences of joy or sorrow to those most nearly concerned, is usually characterized as "an interesting event." This happy and historic occasion is rendered doubly interesting, first, because of the great possibilities for the accomplishment of untold good that it presages, and second, because it is graced by the presence in our midst of the President of the Royal College of Surgeons of England, and other honored guests, of the courtesy and significance of whose visit at this time we are fully conscious and for which we are deeply appreciative and grateful.

The aim of this new organization and the reason for its existence lies in its disinterested and unselfish efforts to elevate the standards of the profession, moral as well as intellectual, to foster research, to educate the public up to the idea that there is a difference between the honest, conscientious, well-trained surgeon and the purely commercial operator, the charlatan and the quack; furthermore that the term "surgeon" means something more than a suave manner, a glib tongue, a private hospital, a press agent, and the all too easily acquired diploma. The standardization of surgery is absolutely essential to guard the public against such as these, as well as to preserve the honor of the guild itself. So far as the public is concerned, it is necessary to protect it from the wolves in sheep's clothing, from those who would prostitute their high office for the purpose of gain; from the ignorant and the untrained; from those who by reason of the lack of surgical judgment and skill are incompetent. That such are present in considerable numbers in our profession, and that they continue to ply their nefarious trade in every community of any size, with reckless disregard of the consequences, unfortunately cannot be denied. Are we to sit idly by while the fair name and fame of our profession are being dishonored and defiled? Is there nothing that we can do to protect the public and ourselves? Our presence here this evening is an answer to these questions. The American College of Surgeons has been called into being as an active,

vigorous, virile protest upon the part of the profession itself against this unhappy state of affairs.

The Board of Regents recognizes that it is of vital importance that this College should be started in the right way, for "as the twig is bent so the tree inclines." The public and professional minds should therefore be at once thoroughly disabused of any wrong impression that this College is to be run by any one man or set of men, or by or in association with any pre-existing organization for his or their personal gain or aggrandizement. The American College of Surgeons is no surgical trust, no close corporation for the benefit of the few. It plays no part whatever in medical politics, it does not interest itself in the advancement of any individual, corporation, or group of individuals, nor in any special school or cult of medicine. It stands only for the good of humanity and the uplift of professional standards of morality and education. If it does not fulfill its special mission, if it fails in any one particular, now that its organization has become an accomplished fact, it is your own fault. By its constitution and by-laws, the power has been placed, through your representatives, in your hands. The responsibility for failure to use this power rests solely with yourselves. The officers of the College are your servants, not your masters, and any attempt upon the part of any man or set of men to reverse this relation is a distinct usurpation of power and should be dealt with accordingly.

At the outset, great difficulty was encountered in deciding upon the method of organization, and upon the charter members of the College. Much thought and discussion were given to a determination of the proper requirements for admission. The plan adopted is not without objection, but it is a beginning and it seemed, after mature deliberation, to be the best working scheme. That it is not perfect, and that from time to time it will need to be amended to meet changing conditions, is fully realized by the Board of Regents. By the present arrangement, doubtless some will be admitted to fellowship who may prove unworthy. But if, after the most careful scrutiny, such should prove to be the case, it is only necessary that the facts be brought before the Board, when the proper remedy can be applied in the appointed way. Adequate means for this have been provided.

I want here and now, without any evasion or equivocation, to put the responsibility for the management of its affairs where it rightly belongs, upon the shoulders of each and every individual fellow of the American College of Surgeons, upon officers and fellows alike, and in my turn as the one whom you have chosen as the first head of the College, as solemnly to affirm that in my every decision and action as President of this College, I shall be guided solely by what appears to me to be for the highest good of humanity. This will receive the first consideration. Subservient to this will come professional and private considerations. May this idea ever dominate the spirit and control the action of the College!

The biblical injunction to "Train up a child in the way he should go, and when he is old he will not depart from it," has given ample evidence of its truthfulness in practice, and of its wisdom as a general policy and rule of action. It is generally admitted, I believe, that the present wave of lax morals in public, private and professional relations of life can on the one hand be traced directly to a lack of early home training, and on the other, to a lowered moral tone in the professional schools and colleges. He was an illustrious member of our own profession, Oliver Wendell Holmes, I believe, who said that "A child's training should be begun with his parents." It is too late to follow this injunction in the case of our infant whose birthday we now celebrate, although from time to time certain sporadic and ill-fated attempts have been made in this direction by far-seeing individuals and societies, whose ideals of professional conduct and attainment were higher and more advanced than those of their fellows — all honor to them! It is rather late, I say, to begin the training of the parents after the birth of the child, but the future development and usefulness of the child may be influenced and controlled through those who stand sponsor for it, namely its officers and Board of Governors. Here, let me repeat, lies the individual responsibility of every Fellow to use his personal influence and his vote, to create a sentiment in the College itself and in the profession at large, an ideal at once lofty, pure, free from sordid taint of commercialism or graft, that has to do only with character and service.

An unselfish devotion to the cause of suffering humanity has ever been the glory and the crowning honor of the medical profession. The conception and formation of the American College of Surgeons is simply a *bona fide* effort upon the part of the profession to cleanse its escutcheon of some of the dark blots with which it is stained. Of these, one of the foulest is the demoralizing practice of fee-splitting. The influence of this hydra-headed monster, insidious and pernicious as it always is, pervades and dominates certain localities in both countries to such an extent that the whole moral tone of the profession in those communities is so lowered, that its effect upon those who practice it is to be seen and felt in the inferior character of their work. The fact that this practice is so rife in certain states as to prompt the legislatures of those states to enact laws making it a crime to split fees, is a sufficient commentary upon the way in which it is regarded by the public, and should cause every honest member of the profession to hang his head for shame that in this day, and in this enlightened generation, such a thing is possible. To the credit of the profession be it said that the initiative in this matter was taken, in one state at least, by a member of our profession. An important function of this College is to wage a relentless war of extermination upon this degrading and dishonest practice, so fatal to professional honor and integrity.

But this, unfortunately, is not the only blot. We surgeons realize only too well that we are but human, and that there are none of the

frailties common to the race but pertain to us. We are all of us, if we are honest enough to admit it, conscious of the fact that we are continually, with the best of intentions, committing errors of judgment or of execution or both. It is hard enough at best to avoid making mistakes, and no one is free from them, even after years of special preparation and study to fit himself to bear the grave responsibilities incident to and inseparable from our most arduous and exacting profession. If surgeons who, in spite of every effort, of the use of every safeguard known to science, and in spite of study and research, of wide reading, deep thought and constant observation of the work of the masters in the best clinics, make occasional mistakes, what of those who, either through ignorance or in the hope of gain, without adequate preparation or proper qualification, are recklessly and continually taking the lives of their fellows in their hands, with results too often disastrous to the health or life of those who trust themselves, often unwittingly, to their care. What of these? Again I ask, Are we to sit quietly by when we know that this sort of thing is going on?

Whether we will or no, we are in a sense "our brother's keeper," and every one of us has a personal interest and a direct responsibility in this matter. I want to bring this state of affairs to the attention of every thinking member of the profession. I beg you to consider well these things, to discuss them with your fellows, to have in mind constantly what it all means; and then, with all the vigor that I possess, I want to press for an answer to the question: What are you going to do about it?

This organization was formed for the express purpose of doing away, as far as possible, with these very evils of which we have been speaking. The American College of Surgeons of itself is powerless to correct this lamentable state of affairs unless it has the hearty, united and material support of all thoughtful surgeons. If every individual Fellow of this College should make it his business, by every means in his power, to back up the efforts of this organization to eliminate commercialism and graft, to raise the standard of morals, of ethics, and of education in the profession, the time will not be far distant when surgery will have purged itself of some of the foulest blots that stain its past.

We are not foolish enough to expect that the millennium will come all at once as the result of our efforts, but we have a reasonable ground to hope and a right to expect that by our united endeavor we can at least hasten the day when we can look our accusers in the face and truthfully say, both as individuals and as a profession, "We have honestly tried to do our whole duty, to eliminate from our ranks those who would dishonor and disgrace us, to elevate the standards of morality, of education, and of ethics, to make our profession as nearly as possible like the ideal that every one of us has pictured for it in his mind." But some one will say, "Here is just another effort to make it harder for a poor doctor with surgical aspirations to earn an honest living. I have my diploma from a reputable medical college,

I have fulfilled all of its requirements, I have passed the state board of medical examiners, I belong to my state or city medical society, I am a member in good standing of the American Medical Association, I attend its meetings regularly, and read its journal; furthermore, I belong to one or more special societies. I have, in fact, complied with all existing requirements, and, having done so, as a freeborn American citizen, if I choose to practice surgery, it's nobody's business but my patients' and my own, and I propose to continue to do so." This may all be very true, and the speaker possibly actuated only by the best of motives; but is he right, is he justified, without special training and preparation, in taking the enormous risks involved? Think what they are from the patient's standpoint — human life, health, happiness, the relief of pain or deformity, restoration of function, the ability to earn an honest living; and from the standpoint of the surgeon, personal and professional honor and reputation, honesty and a good conscience. All these are involved and more. What then shall we do? Here presents an opportunity for every forward-looking member of the profession to bear his share of the burden, to use his influence toward bringing about, and that speedily, the much-to-be-desired reforms in the profession, to hasten the day when the practice of surgery will be limited to surgeons. It is not intended to make it harder for the properly equipped surgeon to practice his profession, but it is intended to discourage and render difficult in every way possible the habitual performance of surgical operations by everyone, no matter what his connections or his titles or his social or even professional standing may be, who is not properly trained and equipped according to accepted standards.

And how is this Utopian state to be brought about? Who are to be the judges of fitness? What standards are to be applied? Difficult questions all, and hard to answer, and yet by no means impossible of solution. To the optimistic vision all that is necessary is proper ideals, a quickened professional conscience, enlightened public opinion, intelligent thought, honesty of purpose, concerted action, the fearless performance of one's duty, unpleasant as that sometimes may be; then a little time, and more will have been accomplished toward the uplift of our profession than it is possible now to foresee. The effect of this movement must inevitably be felt along all lines of medical education and endeavor. The medical colleges, the fountainhead of the evils to which reference has been made, will be shamed out of turning loose upon the public such material as in the past, raw, crude and unfinished as much of it has been. Hospitals will be stimulated to greater endeavor, in the proper care of their patients, to appoint to staff positions only competent and well-trained surgeons, to provide better facilities, more modern, scientific and up-to-date methods and apparatus. Standardization and regulation of hospitals will thus inevitably be hastened. The internes trained in these hospitals will directly benefit by the better instruction and opportunities thereby afforded. A wider horizon and a

grander vision will be instilled into the rising generation. Thought will be stimulated, research encouraged, and higher professional ideals inculcated.

But in order that the American College of Surgeons may fulfill its highest destiny, it is essential that its standards should ever be high, its aims lofty. There is no compromise with the forces of evil, nor can there ever be. To hesitate or waver in its steadfast purpose to accomplish certain much needed reforms is to lose irretrievably its vantage ground. Upon those of us to whom has been entrusted the laying of the foundations of this College, a great responsibility devolves. We must set the pace, we must sound the keynote in this campaign of professional righteousness. What shall it be? There can be but one answer. Unless one's ideals are of the highest, one's efforts in this direction are foredoomed to failure. *Character and efficiency of service* are our battle-cry. They are the principles fundamental to the success of our cause.

Need I ask: "What has character to do with surgical practice? What does it stand for in any walk of life? How does its presence or absence affect the individual surgeon or his work?" It may appear to some that such questionings in this assemblage are idle and wholly out of place. Would that they were! We cannot shut our eyes to the fact, sad as it is, that from time to time certain members of our profession, few comparatively there are, I am constrained to believe, yet nevertheless some, who are willing to sell their birthright for a mess of pottage; whose ethics are so low as to permit them, in one way or another, to barter away their professional honor for pecuniary gain or temporary prestige; whose morals are so debased as to allow them to make use of their professional relations, sacred and inviolate as they should ever be, as a means to gratify their lust or otherwise to further their own base purposes. The character of such as these is inevitably reflected in their work. Thoroughness and conscientiousness are not the result of an intellectual process, but spring from character. Work that lacks thoroughness and character is essentially unscientific. Yes, character, that which makes a man what he is, that which lifts him above the common herd, that which stamps his work as extra-ordinary, must ever be a *sine qua non* for membership in this College.

Attainment is the companion and handmaiden of character. They are inseparable. It is impossible to conceive of a characterless individual as capable of accomplishing anything that is good or noble or that is really worth while. It is no more possible to conceive of an individual with character as a colorless, unproductive nonentity. Character compels action and is the forerunner of real attainment. In these latter days we hear a great deal about efficiency. In this workaday world, it is the supreme test that is applied to all forms of human endeavor. It may be measured in dollars and cents, in public service in some of its various forms, or it may be expressed in terms of one's ability to prolong human life and to relieve human suffering. In whatever way it may find visible or tangible

expression, it is something to be striven for, the goal that is always ahead, and the attainment of which is a constant incentive to higher purpose and to greater endeavor. Efficiency may be limited to one subject, to narrow specialization for instance, when its development is apt to be warped or one-sided; or it may find its highest expression not alone along one line of service but along many. This, it seems to me, is what should ever be encouraged by this College — the highest development of the greatest efficiency along all lines of public service relating in any way to our profession. With this ideal ever before us, there is no limit to the benefit that may be rendered humanity through the agency of this College. The education of ourselves and the public in a thousand different directions along right lines; more rational and improved medical education; higher professional and moral standards; the stimulation of scientific research, clinical as well as experimental, in the ward and by the bedside, as well as in the laboratory; these are but few of the many activities in which it may and should early engage.

After character comes attainment, which in turn is largely dependent upon adequate and thorough preparation and education. We must take a firm stand for the elevation of educational standards. It is our proud boast that medicine has come to be the learned profession. It requires more preliminary preparation, a longer period of study, harder work, more extensive knowledge upon the part of the graduate of medicine than the graduate of any of the other professional schools. In this day and generation and in this assemblage, extended argument in favor of higher medical and surgical education would prove out of place, but since it is fundamental to a proper understanding of the science and to a satisfactory performance of the art of surgery, I may be pardoned for dealing with this aspect of the subject a little more at length.

It will be readily admitted, I believe, that the physician above all others, is the man whose education should be broad, for to him are entrusted the lives of his fellow-men. An inexperienced physician, old or young, without adequate preliminary and professional training, should not be permitted to practice so serious a profession. Unfortunately, however, for one reason or another, such permission is granted far too easily at the present time. The fault lies partly with the public in not only permitting but, to a certain extent, encouraging the ignoramus and the charlatan. It would go a long way toward the eradication of this evil if the public, dull, stupid and slow to learn as they so often are in matters vitally affecting their health, would exercise more care and discrimination in the selection of medical men, especially surgeons. But the blame for this deplorable condition of affairs lies chiefly with the profession itself, for it is a lamentable fact that medical education and ideals in this country are low; lower, perhaps, than in other civilized countries. The reason for this is because our medical colleges are, on the whole, so far below the standard set by the rest of the civilized world that it shames us to make a comparison.



This uplift movement, for such it is, should naturally, perhaps, have had its origin in the medical schools where from the very beginning of his career the loftiest aims and ideals should be inculcated into the mind of the student of medicine, the future surgeon. But a single moment's reflection must convince anyone of the utter hopelessness of such a project springing from the chaotic tangle in which medical education is at present enmeshed. Reference has already been made to the fact that enormous strides have been made in the last few years toward the standardization of medical schools and the elimination of the more glaring faults in our medical education, but even the most optimistic of us must admit that the work in this field has only just begun.

These facts have long been known and bitterly deplored by the more enlightened members of the profession, but the investigations of the American Medical Association, covering a period of several years, and the exhaustive work of Mr. Abraham Flexner of the Carnegie Foundation, recently published, no longer leave the public any valid excuse for its ignorance of or apathy toward the prevailing conditions. As a result of the effect produced by this report, a considerable number of low-grade medical colleges throughout the country have been compelled to close their doors, and vast improvement has been made in others. In this connection let me quote from the late Dr. M. H. Richardson, a man who was himself the personification of the best type of surgeon, and who represented the highest ideals in the profession. He says: "The task before me is a serious criticism of what is going on in every community. There is to my mind no doubt whatever that surgery is being practiced by those who are incompetent to practice, by those whose education is imperfect, who lack natural aptitude, whose environment is such that they can never gain that personal experience which alone will really fit them for what surgery means to-day. They are unable to make correct deductions from histories, to predict probable events, to perform operations skillfully, or to manage after-treatment." What a scathing criticism! The especial sting in it lies in the fact that it is unfortunately true.

From the very nature of the case, surgery must be considered as a specialty. The attributes of specialism are insight, knowledge and experience, and their proper application to practice is impossible without thorough comprehension and mastery of the subject. This can only be satisfactorily done by one who has been trained from his youth up, and who has been thoroughly well grounded in the fundamentals of the science. Unless one knows and thoroughly appreciates the principles concerned in the handling of tissues, in the repair of wounds, in the causes and results of inflammation, in the characteristics and manner of growth of malignant disease, in the principles of physical science involved in the production and reduction of fractures and dislocations, and in a hundred other points of importance, which time would fail us to mention, he cannot ever hope to

get a thorough grasp of questions which are vital to the complete understanding and proper management of surgical problems of everyday occurrence.

It has been said that a surgeon, like a poet, is born and not made. Personally, I do not believe that this statement is altogether true. Unquestionably, some individuals are born with a natural aptitude for surgery, a something which has been characterized as the "surgical instinct," and which every teacher can recognize at once as present in varying degrees in the medical students under his care. It is very far from the writer's purpose to belittle in any way the art of surgery, which is of very great importance and which in the hands of some skilled operators certainly has become developed to the highest degree. It must be conceded, nevertheless, that however high a pinnacle the art may occupy, the science of surgery always will overshadow it, and unless one is well grounded in the principles of true scientific surgery, it must degenerate into something of a trade, a sort of sleight-of-hand performance. My honored preceptor, the late Dr. John Homans of Boston, a man of wide experience and excellent judgment and possessing in an unusual degree the characteristics and knowledge which we have been endeavoring to describe, remarked upon one occasion: "Any fool can cut off a leg; it takes a surgeon to save one." This very well illustrates the point I am endeavoring to make. Surgery is not alone an art, there is a wide distinction between operator and surgeon. The day of the barber surgeon is over. "It is a science founded upon certain fundamental principles, without a thorough knowledge and understanding of which no man can do his patients or himself justice."

Now what is the application of all this? If our premises are correct, the conclusion is obvious, namely, that no doctor, no matter who, without a thorough surgical training, has the moral right to attempt to make a practice of surgery. He may succeed in doing certain minor operations or even certain major operations well; he may learn to do mechanically certain things satisfactorily to his patient and to himself, and he may have a fair percentage of success; but, sooner or later, he will meet his limitations, and in attempting to go beyond these, with his small and imperfect equipment, some of the catastrophes of surgery will happen, and then who pays the price of his ignorance and temerity? Yes, let me repeat, surgery is far too serious a matter to be lightly undertaken by those who are not thoroughly trained in the fundamental principles underlying its proper performance.

Right here let me sound a note of warning, and in so doing I do not wish to be misunderstood — the tendency nowadays is toward the multiplication of hospitals, a tendency that is to be encouraged under proper safeguards. With the general proposition that a hospital is the only place in which to be sick—that is, surgically sick—I am in the heartiest accord, provided only that the hospital is under proper management and that the surgeon (for I am speaking now only of the surgical aspects of the question) is thoroughly

competent to handle surgical cases. But what do we see? As a matter of fact, hospitals are multiplying in many of the smaller towns, towns of a few thousand inhabitants where there are few or no skilled surgeons, and — here is the danger — where the general practitioner, against his better judgment, is tempted to essay the rôle of surgeon. There are two general reasons for this aside from the undesirability of performing any operation in a private house. In the first place, the responsibility for a surgical operation in a private house is undivided. The surgeon alone is responsible for the good or bad results, whereas in a hospital it is somewhat different. The cause of this is not easily explained; but it is true, nevertheless, that in the case of a patient operated upon in a hospital, there is not the same feeling of individual responsibility upon the part of the surgeon held by the community at large as in the first instance. In the second place, under the cover of the hospital and in the more or less seclusion of its operating room, the would-be surgeon is tempted to do things that he would not dare to do under other circumstances. Particularly is this true where the operating room is furnished with all the modern appliances of the up-to-date hospital. I have in mind now a certain beautiful operating room in a hospital in a small city, a room walled and ceiled with marble, finished with polished brass and shining glass, everything in it of the costliest description. What is the result? It would appear to the uninitiated impossible, in such an hygienic sanctuary, to commit a surgical sin; and yet one constantly sees in that operating room heinous crimes committed against the most fundamental surgical principles and technique, which ought always to be kept inviolate. And why is this? Because, of those who habitually use this room, not one is a trained surgeon; they have, so to speak, just picked it up. In the gradual evolution of this palpably wrong condition of affairs, the surgeon himself, or more strictly speaking, some surgeons, are not wholly blameless.

There is no royal road to surgery. There is no such thing as surgery made easy. There is no trick about it that can be learned in a ten-lesson course by watching the manual dexterity of some especially clever operator, and hearing him vociferously declaim against the old accepted principles of the fathers or sneer at the newer scientific or so-called laboratory methods. It is easy to be led by such false gods into believing that anybody can perform a surgical operation; it looks so easy and it seems so simple, as they do it. But do not be misled into the fatal error of supposing that that is all there is to it. It means a long, hard journey, years of close application and study, of mental and manual training, of observation and investigation in hospital, ward and laboratory, before a man can acquire the experience, the insight, the judgment in sufficient degree to entitle him to the proud distinction of being rightly called a surgeon, and all that it implies. Says Valentine Mott, than whom few were better qualified to judge: "We regard those as surgeons, and those alone, who have by conscientious devotion to the study of our science, and the daily habitual discharge of its multifarious

duties, acquired that knowledge which renders the mind of the practitioner serene, his judgment sound, and hands skillful, while it holds out to the patient rational hope of amended health and prolonged life."<sup>1</sup>

The remedy for all this is obvious: do not abolish hospitals, but restrict the practice of surgery to the trained surgeon. There would then be no further excuse for such books as that which has recently appeared by Barnesby entitled, "Medical Chaos and Crime," much of the contents of which is unfortunately only too true.

There is another side to this question. The inexperienced operator, owing to the lack of proper training and insufficient experience, is often necessarily at fault, both as to his judgment and execution. He is attempting to do something that, in the vast majority of cases and for the reasons above mentioned, he is not competent to do. He is placing himself in a false position before the community, and is laying himself open to charges which, in the present enlightened condition of the public, and certainly in some parts of the country, it would be difficult for him to disprove. The thoroughly conscientious man will think twice and go very slowly before allowing himself to be forced into this position. Of course, I am not now referring to those cases of emergency surgery which every physician may be called upon to perform. In these instances, common humanity demands that the best be done for the patient, and that immediately, even to the extent of a capital surgical operation, in order to relieve suffering or to save life.

Then, too, this matter of operating by those not prepared for it tends toward the lowering of moral and ethical standards in other directions. It is a great temptation to do this sometimes, because the vast majority of doctors are dependent for their living upon the returns from their practice; and it frequently means a great deal for a doctor to turn over to the surgeon a good patient, perhaps wealthy and prominent in the community, in which event the surgeon, after the operation, may collect a substantial fee, while the doctor too often receives little or no recognition or pecuniary return for his advice and services.

The cure for all this is to come by enforcing the highest standards in medical education and in medical ethics and, it is to be hoped, an added year in an approved hospital as a prerequisite to practice.

It is our duty, yours and mine, to see that medical education is limited to those institutions that can and do give proper opportunities to their faculties and students, and who have sufficient honesty and backbone to hold both strictly to account. We should also strive to arouse public sentiment in support of this necessary advance. The signs of the times are fortunately most encouraging; a widespread and intelligent interest is being taken in educational problems. Particularly is this true of medical education, with a resulting increase in moral and material support. En-

<sup>1</sup> Quoted by Barnesby.

couraging, too, is the growing number of medical schools which, against tremendous odds, are struggling to modernize their equipment and methods of instruction, to foster research and idealism, and to turn out only such graduates as any one of us might welcome in case of sickness, and to whom we can confidently entrust the future maintenance of the highest medical standards and the progress of medical science and practice.

The point which we have been endeavoring to make clear, and it is the basis of our whole argument, is that education, broad, long continued, conscientious, thorough, is the foundation of all good, sound surgical judgment and practice, and that without such previous training, there is in truth no such thing.

This then is our confession of faith. This is what this College stands for. If our premises are correct, we are inevitably forced to the conclusion that some test must be required for admission to fellowship in the College; that some standard of morality, of ethics, and of ability must be set, and that it must be high. What this shall be for the future is yet to be determined. For the present, in selecting the charter members, those in authority have aimed high. Fitness for membership has been based solely upon character and efficiency. The Regents have endeavored to do their whole duty as they saw it, in no "I am holier than thou" spirit, without partiality and without hypocrisy. How well they have builded, the future alone can determine. This much is sure: they have done their best to start the College along right lines, to make it a power for good, to make fellowship in it a reasonable guarantee of ability and a badge of honor to be sought after by every honest surgeon and, when obtained, to be cherished and upheld with the most jealous care.

I cannot let this occasion pass without some expression upon the part of my associates on the Board of Regents and myself, of our keen appreciation of the honor that you have bestowed upon us in entrusting to our care at this critical time the management of the affairs of this College. Words are inadequate to express all that is in our hearts. As their spokesman I will not attempt the impossible, but will simply give expression to the hope shared by us all, that this beginning so auspiciously made may prove a happy augury for the future usefulness and success of the College, and that the plans laid for its organization and continuation may prove to have been so well conceived and executed that it may continue to grow and expand along right lines, in ever-increasing usefulness and highest service to mankind, in signal honor to our beloved profession, and thus in some small measure justify your selection.

Fellows of the American College of Surgeons, I thank you for the honor that you have conferred upon me. The confidence and trust that you, my friends and fellow-workers in a common cause, have imposed in me, will, so long as I live, remain an incentive to higher purpose and nobler endeavor.

What an opportunity we have before us! How stimulating to one's

energies, how inspiring! The responsibility is great and there is a vast work waiting to be done, much of it irksome and disagreeable, and many pitfalls beset our path, to avoid which will require the exercise of tact, skill and courage of no mean order, and an unwavering steadfastness of purpose upon the part of those in authority.

Surgeons of Canada and of the United States, Fellows of the American College of Surgeons, are you willing to undertake this task? Are you ready to place above aught else the honor and the advancement of your profession and the good of your fellow-men?

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In conferring the honorary fellowships President Finney spoke as follows:

SIR RICKMAN JOHN GODLEE

Student, versatile author, distinguished surgeon, surgeon to His Majesty King George V, worthy member of a family whose name is known and honored wherever antiseptic surgery is practiced, President of the Royal College of Surgeons of England, the highest honor within the gift of his professional associates at home. His presence here is a renewed evidence of the mutual high regard and esteem held for each other by the two great English-speaking nations.

WILLIAM WILLIAMS KEEN

Nestor of American surgery after a professional life covering fifty-two years. As a leader of the Jefferson School of Philadelphia, he links us with the great professional names of the nineteenth century. Army surgeon, teacher, operator, writer, publicist, patron of art, traveler, promoter of the best in higher education, public-spirited citizen, recipient of the greatest gifts in American medicine, Honorary Fellow of the Royal College of Surgeons of England and of Edinburgh, he is honored throughout Europe. Wherever good surgery is regarded, there he is quoted.

ROBERT FULTON WEIR

Distinguished surgeon of New York; for fifty-four years he has been a prominent figure in the American profession. Army surgeon, brilliant teacher, skilled technician, forceful writer, for more than two generations he has contributed constantly to our knowledge and to the operations of surgery. Honorary Fellow of the Royal College of Surgeons of England, he has aided greatly to win European respect for the work in science of his fellow-countrymen.

## JOHN COLLINS WARREN

A surgeon eminent in our annals, who for nearly fifty years has upheld the best Harvard traditions. An early follower of Lister, he helped introduce the antiseptic era to America. A tireless investigator, a sound teacher, a cogent writer, a safe and progressive operator, Honorary Fellow of the Royal College of Surgeons of England, Professor Emeritus of Surgery in Harvard University, he is a worthy representative of ancestors famous in American medicine.

## WILLIAM STEWART HALSTED

Surgeon, teacher, investigator, honored at home and abroad; contributor to the progress of science. One of the four distinguished founders of the Johns Hopkins School of Medicine. His gifts to surgical technique, to numerous valuable operations now the standard, and to many great advances in surgical physiology and pathology have brought to him international renown. Honorary Fellow of the Royal College of Surgeons of England and of Edinburgh, with undiminished vigor he still pursues his valuable career.