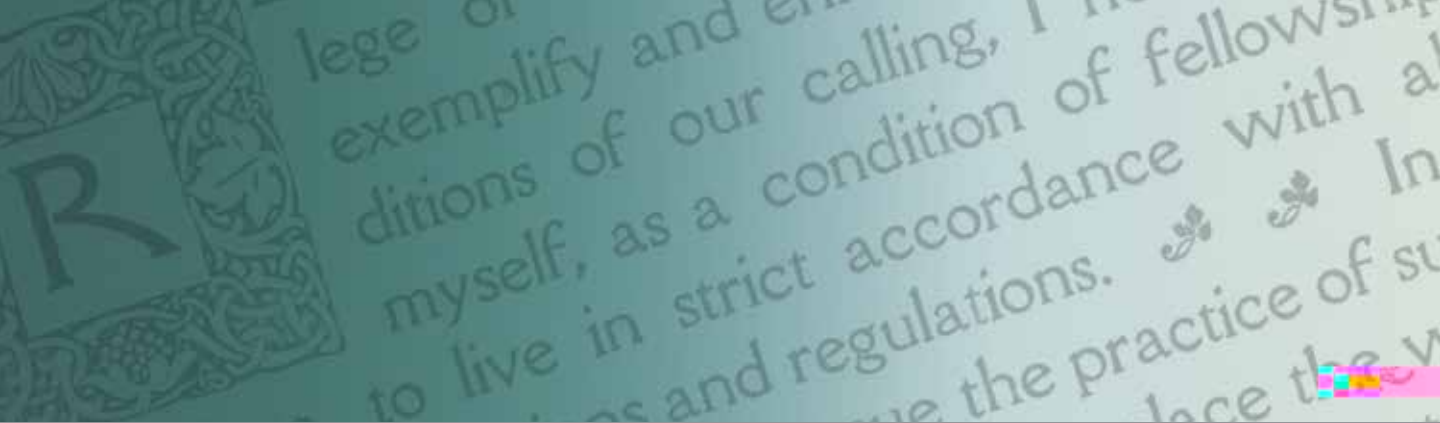




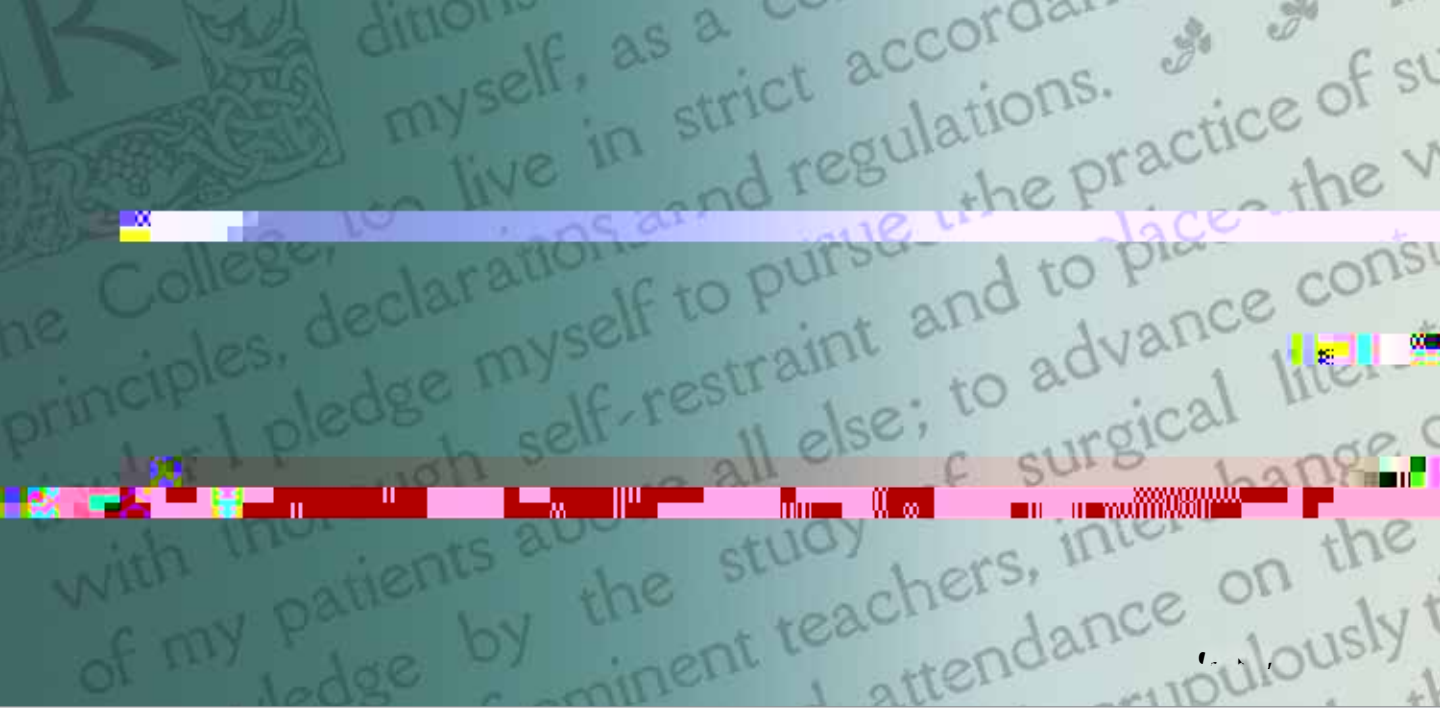


1880; obtained a two-year internship at Mercy Hospital; and opened his practice in Chicago. He wrote, "In those good old days, surgeons developed and were not made to order...one learned his surgery by seeking out emergency cases...those more interested in gynecological surgery literally learned it by operating on our patients."<sup>14</sup> After one year of practice, he performed his first abdominal operation, a bilateral oophorectomy "in a large west room of an apartment," which led to the death of the patient on his third post-op day. He wrote,

"There was lit Ae16.o16.9 (n)-1913 (r)-3 (a)-299 (r)-16.3 (a)7.3 (t)-26.7 (i)7.8 (t)-4 (ed i)-18.4 5 (T)-2Ay il6e...trwl.17.8 (-27.6 (-

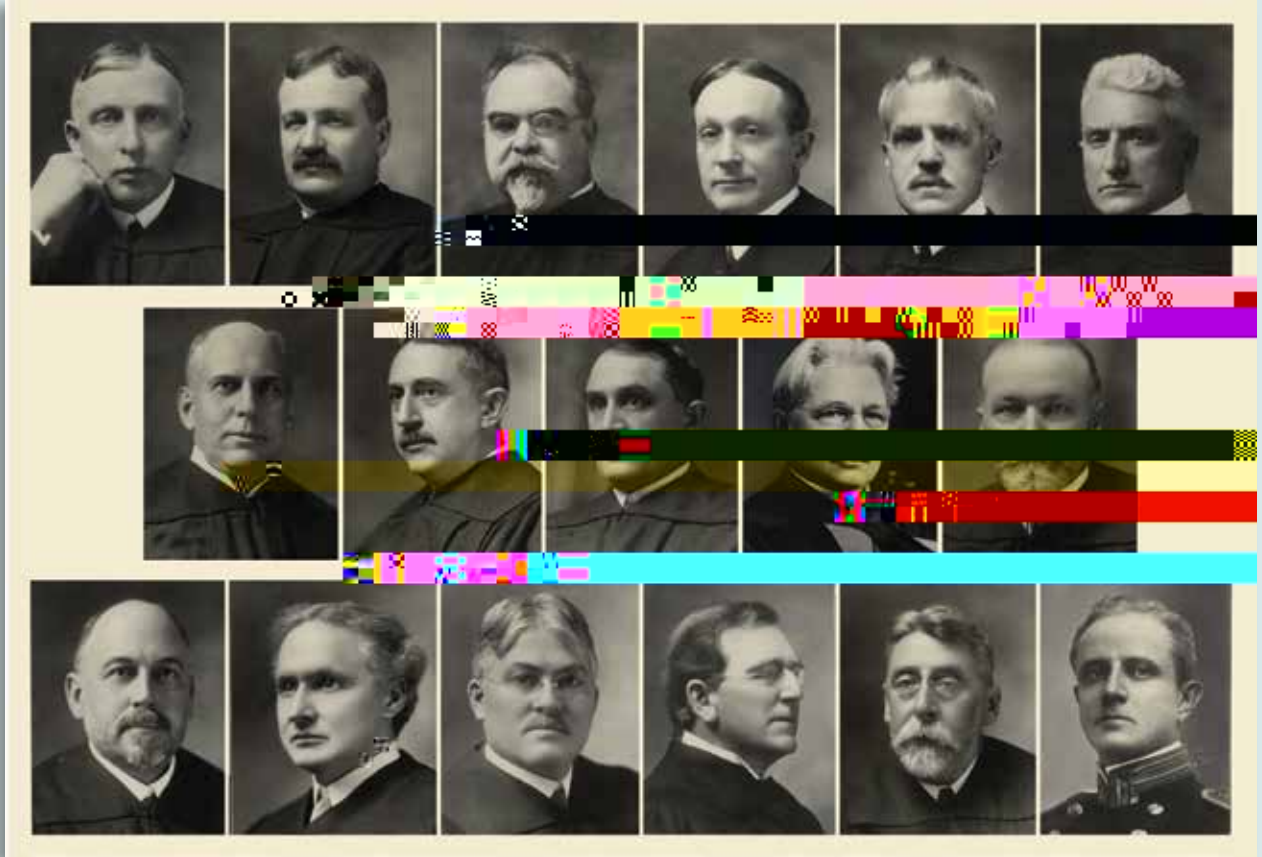


Article II of the *Bylaws* stated, “The object of the College shall be to elevate the standard of surgery, to establish a standard of competency and character for practitioners of surgery, to provide a method of granting fellowships in the organization, and



MD, FACS, said, “In this entire country there is not even a minimum of hospital standards.”<sup>8</sup> The Committee on Hospital Standards was established with Ernest

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### The Minimum Standard

1. That physicians and surgeons privileged to practice in the hospital be organized as a **definite group or staff**. Such organization has nothing to do with the question as to whether the hospital is "open" or "closed," nor need it affect the various existing types of staff organization. The word **STAFF** is here defined as the group of doctors who practice in the hospital inclusive of all groups such as the "regular staff," "the visiting staff," and the "associate staff."

2. That membership upon the staff be restricted to physicians and surgeons who are (a) **full graduates of medicine** in good standing and **legally licensed** to practice in their respective states or provinces; (b) **competent** in their respective fields and (c) **worthy in character** and in matters of professional ethics; that in this latter connection the practice of the **division of fees**, under any guise whatever, be **prohibited**.

3. That the staff initiate and, with the approval of the governing board of the hospital, **adopt rules, regulations, and policies** governing the professional work of the hospital; that these rules, regulations, and policies specifically provide:

(a) That staff meetings be held at least **once a month**. (In large hospitals the departments may choose to meet separately.)

(b) That the staff review and analyze at regular intervals their clinical experience in the various departments of the hospital, such as medicine, surgery, obstetrics, and the other specialties; the clinical records of patients, free and pay; to be the basis for such review and analyses.

4. That **accurate and complete records** be written for all patients and filed in an accessible manner in the hospital—a complete case record being one which includes identification data; complaint; personal and family history; history of **physical examination**; special examinations, such as **laboratory, clinical, and radiographic**; **working diagnosis**; medical or surgical treatment; gross and microscopic pathological findings; progress notes; final diagnosis; condition on discharge; follow-up and, in case of death, autopsy findings.

5. That **diagnostic and therapeutic facilities** under competent supervision be available for the study, diagnosis, and treatment of



## AMERICAN COLLEGE OF SURGEONS HAS APPROVED

WHICH HAS COMPLIED WITH THE MINIMUM STANDARD REQUIREMENTS OF THE AMERICAN COLLEGE OF SURGEONS AS FOLLOWS:

**I** THAT physicians and surgeons privileged to practice in the hospital be organized as a definite medical staff. Such organization has nothing to do with the question as to whether the hospital is open or closed, nor need it affect the various existing types of medical staff organization. The word **STAFF** is here defined as the group of doctors who practice in the hospital inclusive of all groups, such as the **regular medical staff**, the **visiting medical staff**, the **associate medical staff**, and the **convalescent medical staff**.

**II** THAT membership upon the medical staff be restricted to physicians and surgeons who are (a) graduates of medicine of approved medical schools, with the degree of Doctor of Medicine in good standing, and legally licensed to practice in their respective states or provinces; (b) competent in their respective fields; and (c) worthy in character and in matters of professional ethics; that in this latter connection the practice of the **division of fees**, under any guise whatever, be prohibited.

**III** THAT the medical staff initiate and, with the approval of the governing board of the hospital, adopt rules, regulations, and policies governing the professional work of the hospital; that these rules, regulations, and policies specifically provide:

(a) That staff meetings be held at least once each month. (In large hospitals the departments may choose to meet separately.)

(b) That the staff review and analyze at regular intervals their clinical experience in the various departments of the hospital, such as medicine, surgery, obstetrics, and the other specialties; the clinical records of patients, free and pay; to be the basis for such review and analyses.

**IV** THAT accurate and complete medical case records be written for all patients and filed in an accessible manner in the hospital; a complete case record being one which includes identification data; complaint; personal and family history; history of present illness; physical examination; special examinations such as **laboratory, clinical, and radiographic**; **working diagnosis**; medical or surgical treatment; gross and microscopic pathological findings; progress notes; final diagnosis; condition on discharge; follow-up and, in case of death, autopsy findings.

**V** THAT diagnostic and therapeutic facilities under competent supervision be available for the study, diagnosis, and treatment of patients; that in this latter connection the practice of the **division of fees**, under any guise whatever, be prohibited.

**THIS CERTIFICATE**—GRANTED BY AUTHORITY OF THE BOARD OF REGENTS OF THE AMERICAN COLLEGE OF SURGEONS

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