

was pleased to term its "Code of Ethics," we, profiting by their experience and report, may devote our attention and energies to the ethical inculcations of that higher civilisation to which our profession contributes no small part.

In becoming a law, which means "a rule of conduct prescribed by authority and containing a penal clause to be enforced by designated tribunals," their "Code of Ethics" ceased to be ethical.

The "Medical Code of Ethics" was taken from a book written more than a century ago by Dr. Percival, of England. The title was at first "Medical Jurisprudence and Ethics," but a more correct title would have been "The Duties of a Physician." In 1847 this was adopted by the American Medical Association, and was originally a purely advisory document—the only status that can be given an ethical declaration if it remains ethics. A prominent medical man, who has struggled faithfully to rid his profession of the difficulties and dilemmas into which its "Code" seems to have plunged it, strongly advocates the elimination of the "Code of Ethics," that the real cause of ethics be materially advanced. Apropos of this, he quotes Herbert Spencer as affirming that "A code of perfect personal conduct can never be made definite. Many forms of life, diverging one from another in considerable degrees, may be so carried on in society as continually to fulfil the conditions to harmonious co-operation. And if individuals representing various types of activities may thus lead lives that are severally different, no specific statement of conduct of the activities universally required for personal well-being is possible." It is believed that, freed from the restraining influence of a specific formula of conduct, from a mere creed, the profession will take up on a philosophical basis a studious consideration and a more faithful observance of the principles of right conduct as applying, not merely to the medical profession itself, but to society in general.

In "Ethics or a Code of Ethics" Miss Dock ranks (most rightly) independence of outside control in our personal and professional affairs as one of our first and weightiest obligations to ourselves and to one another.

To be assistants to the medical profession is quite another matter from allowing ourselves to become *protégées* of the same. It is an amusing fact that we do not find ourselves mentioned in their so-called "Code of Ethics," not even in its revision. This is sufficient reason to consider it by no means "good form" in our etiquette and ethics to carry our professional dilemmas to them for adjustment and counsel.

We owe to all such as are accorded general recognition the fair and honourable dealing due our chiefs, but no special favours and partiality.

If we are careful to give them fair dealing, the same is at all times our due from them.

What of the ethical responsibilities of others to us? What of the ingratitude, want of appreciation—in short, the lack of justice to the nurse on the part of patients and their friends? of physicians who accept all courtesy and loyalty and give none in return? Should not such be "anathema maranatha" to us and to our profession?

The order of nursing seems beset with the tragic influences that Tennyson describes as testing and finally ending the Order of the Round Table and its King—*i.e.*, the tendency of a few to struggle for highest things for self and others only to find much work undone through the folly and weakness of their followers.

Organisation, unity of purpose, and earnestness are essential to our progress and success. When will we realise it? The ideal knight, the pure-hearted, will lose his life to save his ideals and his fellows. This is an ethical principle which we may profitably adopt.

As a national association a "Code of Ethics" (bone of contention, as medical men have wisely termed it) does not seem at all one of our needs and requirements—nor, in fact, any part of our equipment.

Yes, it should be our aim and purpose to stimulate the development of "the science of right conduct." All high developments for reason, or taste, or conscience are difficult, and represent drill and practice. The much-talked-of preliminary course, already adopted by some of our nursing schools, should begin in the kindergarten; for the human soul and character in youth is not a machine, which being well oiled and got in working order, "the immortal locomotive may be started, at twenty-five or thirty years old, express from the Strait Gate on the Narrow Road." The establishment of vital hopes and habits is in youth; a moment of this formative age, once past, the appointed work can never be done again, or the neglected blow struck on cold hardened metal.

We need to fulfil more thoroughly our mission in home-life, the home of our patients, our friends—to encourage that appreciation of attention to "what is worth while" which leads to the proper and careful training of children; to a thorough, broad, practical, and purposeful education of heart, mind and body.

In addressing a recent graduating class at a medical school a gifted Southern Senator endeavoured to impress upon the young doctors that the age of chivalry is not dead and gone—the principles for the defence of which the knights of old gave even life itself are still to be protected and zealously guarded—namely, purity, truth, beauty, the protection of the weak and suffering.

One of the prominent divines of our day pronounces it the glory of our age that the modern hero stands forth armed, not with sword and spear,

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