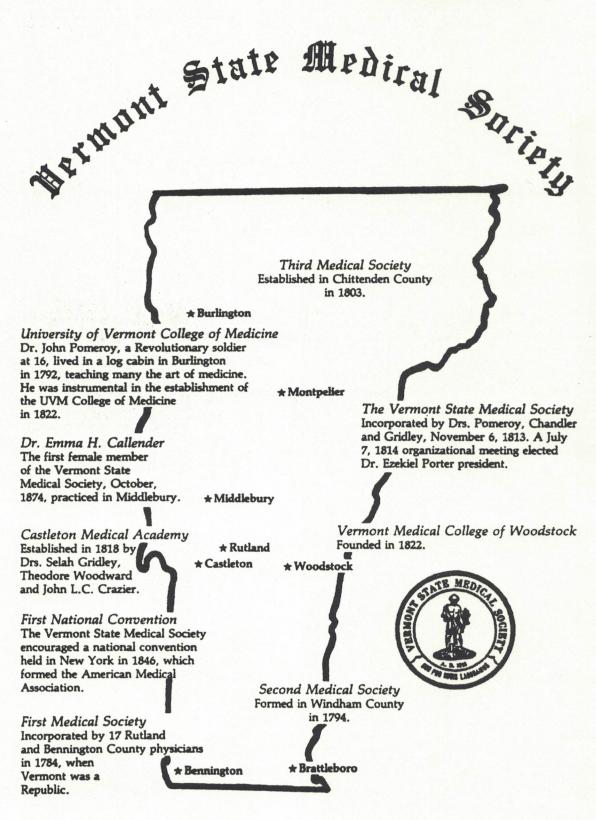
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THE VERMONT STATE MEDICAL SOCIETY YESTERDAY . . . AND TODAY

The Vermont State Medical Society was incorporated by an act of the State Legislature on November 6, 1813, evolving from the dedication to medicine of the physicians from Rutland and Bennington Counties, who established the first Medical Society of the Republic of Vermont in October of 1784. Its record of service to humanity and to those serving the ills of mankind has withstood the test of time and serves as a rallying point for the men and women of this most honored profession.

Following is a look at the Society

past . . . and present.

Prepared by the Executive Office Staff
of the
Vermont State Medical Society

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State of Vermont

By the first Medical Society as by law Established David Dewey having been approved by the Censors is hereby admitted a Member of the same and entitled to every privilege and immunity thereunto belonging and with full confidence we Recommend him to the Public as a safe and successful Practitioner in Physic and Surgery.

Witness our President and Seal of the Society this 7th day of September, 1801.

John Sargent

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FOR EVERY MEMBER . . . a proud heritage

Leadership and innovation mark the proud heritage of the VERMONT STATE MEDICAL SOCIETY.

As a member, this is your inheritance.

On the 27th of October, 1784, the General Assembly of Vermont passed an act incorporating seventeen physicians from Rutland and Bennington counties into the "First Medical Society of Vermont" at a time when Vermont was an independent republic with its territory claimed both by New York and New Hampshire.

The "Second Medical Society" was formed in Windham in 1794. On the 29th of December, 1803, nine physicians of the Chittenden County area met in Essex to establish a medical society which was then chartered as the "Third Medical Society." This group met quarterly, keeping a record of its activities until 1815. When the State Society was formed, it dissolved to become the Chittenden County Society within the framework of the state organization.

The act to incorporate the Vermont Medical Society was passed by the State Legislature on November 6, 1813. The act authorized the physicians of each county to form their own local associations which were to meet semi-annually and elect three members to serve as delegates to the State Society. The organizational meeting of the State Society was held in Montpelier on July 7, 1814. From then on, regular meetings were held until 1828. There was then a lapse until 1841, when the organization was reactivated and has continued without interruption from then until now.

Most of the physicians of the time had been trained by the apprentice method. A relatively well-to-do young man who had had some classical education and who could be spared from his family might join the house-hold of a doctor for as long as seven years. He had access to the doctor's library, cared for the doctor's horse, mixed medicines and accompanied the doctor on his rounds, assuming more and more responsibility as he learned to do so. The better preceptors could be selective about whom they chose as pupils, usually charged a fee and insisted upon diligent habits of study. There were no legal standards nor any regulation of the practice of medi-

cine; often apprentices were treated as inexpensive servants rather than trainees and then were released to get along as best they could. As late as 1833, Benjamin Lincoln, professor of Anatomy and Surgery at the University of Vermont, wrote "Of all the methods of gaining livelihood invented by Yankee ingenuity, no one secures its object so effectively and with so little expense of mental labour as 'turning doctor'."

Doubtless, when Drs. Pomeroy, Chandler and Gridley met with their colleagues in 1814 to organize the Vermont Medical Society, they enjoyed the good fellowship and the intellectual stimulation of exchanging scientific observations. But, they had a more serious and pressing purpose. They went to Montpelier on horseback over rough roads or blazed forest trails, to consider regulating the practice of medicine.

In the absence of any laws, the individual reputable physician had no way of protecting himself and his professional reputation. No workable method had been found to keep the scoundrels and the well meaning non-rational healers from competing for the patronage of the public, but the legislators were apparently willing to grant legal sanctions to the formation of medical societies who could police themselves, choose their associates with care and do everything possible to maintain the prestige of the profession. Anyone at all could still advertise and promote a sure cure for consumption, but the public now had a guide, if it wished to avail itself of the opportunity, to determine which practitioners were approved by their peers.

It was in this context that medical societies in America were formed, and having accomplished this objective, the doctors still had the major problem of determining upon whom to place the label of membership. It was decided that this could best be done at the local level and it was the County Society which was given the prerogative of electing censors whose duty it was to examine candidates for admission. The minutes of early meetings are full of discussions and proposals as to how much preliminary education would be required of a candidate and in which subjects he should be examined. The censors were also given the duty (still an onerous one) of investigating the behavior of a member against whom a complaint had been made and to recommend censure or expulsion, if warranted.

With the founding of the Castleton Medical Academy in 1818, the medical college of the University of Vermont in 1822, and later the Vermont Medical College of Woodstock, organized medicine in Vermont lost one of its major functions, that of presiding over medical education. It is probably

no coincidence that the years 1828 to 1841, during which the medical society held no meetings, were those in which the medical colleges in Vermont flourished. The State Society continued throughout its history to take a major interest in medical education. Censors were accredited to the medical schools where they investigated and reported on the facilities available for teaching and joined the faculties in examining the candidates for degrees.

In 1825 and 1826, the Vermont Medical Society sent out circulars to the societies in the other New England states and New York, proposing a substantial increase in the requirements for admission to medical school, a minimum course of study, and uniform standards for licensure for practitioners. These proposals were studied and debated at the various state meetings, counterproposals made and amplified so that eventually, in 1846, a national medical convention was held in New York City. This, in turn, led to the formation of the American Medical Association.

After considerable effort on the part of Vermont physician members of the Medical Society to regulate and enforce by law the practice of medicine, the Legislature did pass an act in 1876 which provided that anyone offering his services to the public as a practitioner of medicine or who assumed the title of doctor be required to obtain a certificate from either a county or the State Medical Society. The penalty for the first offense was a fine of not less than \$15 nor more than \$200. It would seem that this might have offered the kind of control which was needed, but the difficulty then lay in lack of enforcement. Dr. C. S. Caverly of Rutland, then chairman of the Board of Censors, reported to the Society in 1891 that it was common knowledge that people were still practicing illegally, but that it was difficult to get anyone to make a public complaint. He urged the membership to work for better and more enforceable legislation.

In 1904 a State Board of Medical Registration was set up to consist of seven physicians in active practice and not members of the faculty of a medical college. Three members were to be of the "regular school," two of the homeopathic and two of the eclectic. The candidates had to be twenty-one years old, of good moral character and be graduated from a legally chartered medical school.

In 1976, members of the Society were influential in the establishment of a State Board of Medical Practice, which operates currently as the licensing and censoring board for the State of Vermont.

During the early days, the Society had serious financial problems. The Legislature had granted it the "power to receive a gift or purchase — property both real and personal to an amount not exceeding \$10,000." As Dr. Henry Jackson said in 1881, that duty was sadly neglected. The minutes of the organizational meeting held in July of 1814 record that a \$2 tax was voted against each county, primarily for the purpose of acquiring a library. It was voted also that each year at the annual meeting, the president was to deliver an address or pay the Society \$25. The second president, Dr. Ezekiel, took advantage of this alternative. Each county society was to be fined \$25 if it did not send one or more of its delegates to the annual meeting. These latter fines were seldom collected and the amount due was cut down to more realistic proportions and finally omitted entirely, provided each county would contribute \$2 of the \$10 it was supposed to collect from each applicant for admission. In 1828, a resolution was passed asking the Legislature for money, but nothing ever came of that. In 1819, Dr. Erastus Torry presented a bill for \$30 for expenses incurred on a trip to Northfield, Massachusetts, as a representative of Vermont to a conference held to discuss the formation of a national pharmacopeia. The total amount in the treasury at that time was \$18.52. It was not until 1851 that regular dues of \$1 each year were required of each member.

The Vermont State Medical Society did not overlook its obligation to "the improvement of the theory and practice of the healing art." Rarely was there a meeting of a county society that did not include a scientific or clinical paper. The practice continues today at both the county and state society levels.

It is impossible to read the early records of the Society without a sense of pride in its heritage. We can recognize, as from a great distance, these brothers and sisters in the universal fraternity which is medicine and admire what they were able to accomplish. By joining with fellow physicians, the individual can benefit from a combined effort. The Society provides an indispensable mechanism through which the skilled professional can exert influence in concert with professional colleagues, reflecting a majority opinion. The strength of the medical profession in Vermont depends on its members joining together to speak out and reflect this majority opinion.

Not to be ignored is the fact that in 1846, Elizabeth Blackwell applied for enrollment in the Castleton Vermont Medical School. Despite convention, Dr. Joseph Perkins accepted her as a student, apparently without consulting faculty or trustees. By the time the acceptance reached Miss Blackwell, however, she had already enrolled at Geneva Medical College, from which the first woman physician was graduated in 1849.

The JOURNAL OF THE AMERICAN MEDICAL WOMEN'S ASSOCIATION points out that in October, 1874, Dr. Emma H. Callender of Middlebury was elected to membership at the annual meeting of the Vermont State Medical Society. Apparently her election created neither fanfare nor fuss as no comment was made of it in the Annual Report. In a short obituary at the time of her death, the Society did point out that Dr. Callender was the first female member. Currently, more than ten percent of the physician members of the Society are women.