

to settle down to a level—and that the lowest level of professional fees—from which they find it difficult to rise. There is too much tendency to dull routine in charges. There should exist a wide range of charges for medical services, depending on several factors, such as the severity of the case, time given to it, the dangers to the physician and his practice, and the ability of the patient to pay. People should be impressed with the fact that the fee bill represents the minimum fee for ordinary services only, and that when special attention is required a fee in accordance with it should be expected. This is done in surgical cases; why not in medical cases? The price of a visit does not necessarily pay for services rendered. When, therefore, physicians try to collect something for extra services they are invariably confronted with the settled price of a visit. Such a procedure by no means compensates the physician under all circumstances. A rich man will have his life saved for a thousandth part of what he will pay a lawyer to save his business, and then he will object to the physician's bill. The lawyer long ago learned to value and to charge for special services according to their value and according to the ability of the client to pay; he no longer charges so much a visit or consultation. When a physician has saved a patient from death or from poisoning he should charge for a major operation, which is what has really been performed, and he should not send a bill for \$2 for a night call. It is the medical profession's duty to educate the unthinking public to appreciation of the fact that it takes more skill and a finer quality of judgment to carry a patient through a long period of critical expectancy terminating in a successful accouchement, than to amputate an arm or leg, and that physicians should be paid accordingly. In attending contagious diseases, physicians incur danger to themselves, their family and their practice. They should be compensated for the risk and the loss sustained by a reward at least double that received in ordinary cases. There is no need of rendering an itemized account to patients. In making out a bill, medical men should take into consideration time, ability and service; nothing less than this will insure the justice that they deserve. Unless physicians come to some understanding of this kind with themselves, unless they ask for a professional fee in proportion to their service and without fixed rates, they will never be paid for what they do. For example, during certain stages of a case of pneumonia or diphtheria, it is important that they be able to watch the case very closely and adapt treatment to the varying conditions, instead of making a regular visit and going back to the office to await further summons. If a lump charge be made, they will feel