



**Bulletin American College of Surgeons, Vol. 6:
Report of Hospital Conference Held at
Philadelphia, October 24, 1921 (Classic Reprint)**

American College of Surgeons

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Excerpt from Bulletin American College of Surgeons, Vol. 6: Report of Hospital Conference Held at Philadelphia, October 24, 1921

You have all undoubtedly asked yourselves why this program of the American College of Surgeons has been received with so much approval, why it has attracted so much attention, why it has had so much influence.

Scientific medicine is developing so rapidly that of necessity it is reducing the number of the medical profession in proportion to the people they have to care for. Medicine, therefore, is becoming more wholesale and institutional, less retail and domiciliary. That of necessity has placed an enormous responsibility upon the hospital, because the hospitals must be the institutions in which the wholesale or group medicine is practised.

The American College of Surgeons is responsible for the standardization of hospitals, because in its early days it found it necessary to standardize its own environments. For instance, in making a standard for admission to fellowship, it was necessary that we ask the candidates to furnish us the reports of fifty major operations and fifty minor operations, in lieu of an examination. These reports began to come in. They were on all kinds of forms. There was absolutely no standard record on which they could give us the evidence of their own ability to practise surgery. Soon we were asked from every direction to furnish a standardized system of records, to suggest a form upon which these records could be given to the College. We attempted to do that. A committee was formed for the purpose, and we furnished, wherever required, a set of standardized records. Then what happened? The hospitals a great many of them began to ask us if we could not in some way furnish these same standardized records or forms to them, which, of course, we were very glad to do.

That was the first step in the standardization of hospitals. Then, early during the war, it became necessary for us to have some other minimum standards that would apply to the hospitals in the camps, the army hospitals. And in Washington was called a conference of medical officers and we discussed a minimum standard for military hospitals.

After that, in one year, the American College of Surgeons formulated its minimum standard for hospitals. Is there anything that a hospital can leave out of that standard and be a hospital? First, records; second, staffs, with staff meetings; third, a competent and honest staff; fourth, laboratories. That is practically the minimum standard of the American College of Surgeons. Any hospital that cannot furnish this minimum standard is not a hospital. It is the very minimum thing we could ask of hospitals to do in order to have us recognize them as hospitals.

That led immediately to a survey of the hospitals to ascertain which hospitals met this minimum standard. For the last three or four years surveyors employed by the College have visited all of the hospitals of one hundred or more beds in the United States and Canada.

Summary of Yearly Reports

In 1918, of the 692 general hospitals of one hundred or more beds, in the United States and Canada, 89 met the standard; in 1919, 198; in 1920, 407, or 57 percent; and this year 579 of a total of 764 hospitals, or 75 percent, meet the standard of the College.

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