

KEEPING ABREAST OF THE TIMES

Specialization - Generalization

This is an age of specialization. The need for specialists in the Army is fully appreciated by the Surgeon General, and it will be his aim to do everything possible to promote and support the ambition of any officer of the Medical Department who desires to qualify as a specialist. In assigning an officer to duty every reasonable effort will be made to detail him to duties connected with his specialty.

However, it is to be remembered that the functions of the Medical Department cover an extensive field and there will be times when it will not be possible, under the exigencies of service requirements, to retain an officer permanently in one line of work.

During a tour of duty occasions will arise, particularly at the smaller stations, where an officer who has been following a specialty closely, will be called upon, perhaps suddenly, to perform general Medical Department duties. In directing or passing upon administrative and professional matters of a general nature an officer's judgment is influenced largely by his knowledge of the progress being made in fundamental Medical Department subjects.

While it is not to be expected that an officer, who has devoted years of study to internal medicine as a specialty becomes ipso facto qualified to perform major operative surgery merely through the issuance of an order assigning him to a duty requiring those qualifications, he should nevertheless, and as far as possible, attempt to keep himself informed of the theory and progress being made in all phases of Medical Department activities which play an essential role in its success during peace or war. Identically the same may be said of the laboratory man, or any other officer, whose entire time is taken up by one specialty.

Without a moment's notice, any of these men, by virtue of their rank or because of a military emergency, may have the functions of command thrust upon them, in which event an up-to-date knowledge of administrative methods becomes of paramount importance. Under these circumstances there will arise every day weighty questions upon which sound decisions cannot be made in the absence of a well-balanced professional and administrative education.

That some danger exists today in permitting too close a confinement to one specialty, to the exclusion of other professional and administrative matters equally as important in the operation of the Medical Department, is confirmed by reports being received in this office relating to the results of recent examinations for promotion, particularly in the cases of junior officers.

In these examinations it is clearly disclosed that many officers possess a knowledge, theoretical if not practical, of a specialty that would compare favorably with that of the leaders of those specialties in civil practice. On the other hand there has been exhibited by some of them a regrettable lack of knowledge and interest in collateral subjects equally as important to the Medical Department.

Having in mind an old adage, it may be said that the very nature of the multiferm duties required of an officer of the Medical Department will seldom permit us to have more than a few "Masters". Of necessity we must always have a preponderance of "Jacks".

Owing to the stress and variety of work with which the Medical Department finds itself confronted the Surgeon General views the existing tendency with some feeling of alarm as to just what end results the practice of specialization, which he approved and desires to encourage, is going to bring about. Fear is entertained that we are going too far afield and heving too closely to one line of thought and action.

The Surgeon General is insistent that the high standard of promotion examinations, which may be taken as an index of an officer's ability to discharge any function that may devolve upon him, be maintained and successfully met by all concerned. Obviously, an officer cannot qualify in these promotion examinations without attempting to keep up-to-date, in theory if not in practice, in the collateral subjects of great moment to the Medical Department but perhaps of little direct connection with the work upon which he happens to be engaged. This applies particularly to those junior officers of less than five years service.

Without putting a damper upon specialization, how may the problem be solved and the desired results achieved?

In view of the demands being made upon the Medical Department incident to the reorganization of the Army, the Surgeon General believes that for the present the remedy must remain a local matter. It is primarily one of direct responsibility upon the various commanding officers concerned. Until the return to normal is effected it is the desire of the Surgeon General to avoid the issuance from this office of mandatory orders on this subject.

Believing that the sounding of this warning as to the trend of specialization is not only warranted but timely, he urges that every department and corps area surgeon, division surgeon, commanding officer of the larger hospitals, and of other commands, who are on the ground and know just how far we can go in this matter, take steps to correct the possible bad results of too much specialization.

In the opinion of the Surgeon General much good can be accomplished at each station by having the officers assemble at regular intervals for an exchange of ideas and discussion of current professional and administrative matters. These meetings may be termed conferences, talks, lectures, or what-not, provided that they are properly directed and deal in a systematic manner with the subject under consideration. It is urgently recommended that as practicable all officers be assembled thrice weekly for a one hour conference on each of the following topics:

ADMINISTRATIVE

At this meeting all orders, bulletins, circulars, etc. received during the current week should be read in full if necessary, but at least discussed until they are understood by all.

The reason for the promulgation of these administrative items, and how they fit into the military machine should also be made clear. If one-half hour were devoted to these communications it is believed that the remainder of the hour might well be given over to a discussion of the major phases of military administration with particular reference to the broad organization and functions of the Medical Department, but not neglecting those basic military principles affecting other branches of the service and the Army as a whole. For example a new Manual for Courts-Martial has recently been issued. It contains many radical changes from the old system. The new material might well be given attention in these "talks". Army Regulations are being wholly revised, new pamphlets now being published at frequent intervals.

PROFESSIONAL

It is believed that this field can best be covered by following the practice that has been in vogue for many years in some of our general hospitals and at our larger stations, i. e., by conducting "Journal Classes". To the uninitiated it might be said that each officer is assigned a journal, preferably one relating to a subject in which he is specializing. Once a week all officers are assembled, and with the senior officer presiding, each officer in turn gives a brief abstract of interesting or progressive items appearing in the current journal he has reviewed. The primary aim of these journal classes, it is to be remembered, is only to bring out new features. When his turn comes an officer is often heard to remark that "I have before me the February 7th number of the Journal of _____ and there is nothing of special interest in it to report.

On the contrary the next officer may say "In the Annals of _____ for January I find two articles of special interest to this meeting. One of them is by Dr. _____ on the subject of "Fractures of Long Bones". In the article he brings out several interesting points, namely - - -. I find another article by (name) on (date) (here give discussion)."

CLINICAL

Wherever suitable arrangements can be made and material is available a clinic should be held once a week at the hospital and attended by all the officers whose duties will permit them to attend. Interesting cases should be presented, examined, and discussed.

In lieu of the presentation of clinical material, under this heading there could also be given demonstrations in operating room technique, new procedures in laboratory methods, in the X-ray laboratory, etc.

As a routine measure, in all those cases terminating in death, as soon as the pathological report is completed all officers should be assembled for a discussion of both the clinical and pathological findings.

Conference on sanitation and communicable diseases can be made intensely interesting. Whenever opportunity affords local outbreaks of communicable diseases can be assigned selected officers for study and report on the value of the control measures employed.

In the division camps, clinics held at the hospital should prove particularly helpful, in that medical officers engaged solely on dispensary (out-patient) service can in that way keep in touch with the methods of treatment being followed in cases hospitalized by them.

REPORT OF THE ARMY SCHOOL OF NURSING

Prepared for the annual meeting of the League of Nursing Education, Kansas City, April 11-15, 1921.

At the time of the report presented at the Atlanta Convention in May, 1920, there were five hundred twenty-eight students in the Army School of Nursing, Since that time forty have finished the course and twenty have

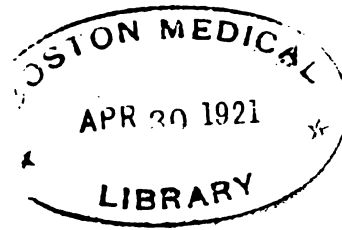
A.E.C.

VOLUME 4 No. 8

APRIL 15, 1921

ISSUED SEMI-MONTHLY

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MEDICO-MILITARY REVIEW

FOR

THE MEDICAL DEPARTMENT

U. S. Army

SUPPLEMENT TO

THE BULLETIN, S. G. O.



OFFICE

of

THE SURGEON GENERAL

WAR DEPARTMENT

WASHINGTON