A tariff of medical fees recommended by the Shropshire Ethical Branch of the British Medical Association.

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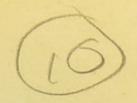
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TARIFF

OF

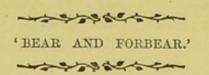
MEDICAL FEES

RECOMMENDED BY

THE SHROPSHIRE ETHICAL BRANCH

OF THE

BRITISH MEDICAL ASSOCIATION.



SHREWSBURY:

PRINTED BY WILLIAM WARDLE, MARDOL.

MDCCCLXX.

At the Annual General Meeting of the Shropshire Ethical Branch of the British Medical Association held in Shrewsbury, on the 3rd of October, 1870,

IT WAS UNANIMOUSLY RESOLVED,

'That the following Tariffs of Medical Fees which have been submitted to, and discussed by the Meeting, (having also been previously circulated among the Members for their consideration and emendations,) be approved, and recommended for general use by the Associates of the Branch.'

'That the cordial thanks of this Meeting be tendered to Dr. Styrap for the valuable time and thoughtful care he has devoted to the preparation of the Tariffs of Medical Fees—for which, and other zealous labours to promote the interest and uphold the honour of the profession, the Members desire to record their grateful appreciation and acknowledgment.'

TARIFF OF MEDICAL FEES.

The Council of the Shropshire Ethical Branch of the British Medical Association in issuing, in deference to the wishes of numerous practitioners, a Tariff of Medical Fees (founded upon that of the Manchester Medico-Ethical Association—an abstract of whose arguments in relation thereto, is herein embodied), deem it their duty most emphatically to disclaim the slightest wish or intention to dictate either to the members, or to other practitioners, in the matter of professional charges—which, so long as the medical and surgical, unlike the legal and other professions hesitate to base their title to remuneration upon the abstract value of their services, must, they feel assured, remain an open and vexed question.

Although the General Medical Council alone could promulgate anything like a compulsory scale of charges, your Council are of opinion that a recommendatory Tariff will not only prove useful as a guide to the junior practitioner—often in doubt as to the remuneration to which he is fairly entitled—but serve as a reference in cases of dispute: and thus tend to prevent litigation, and promote a friendly arrangement.

The scale (a purely recommendatory one, be it noted), after much thoughtful consideration, and consultation with the general body of practitioners throughout the county, and adjacent districts, has been drawn at such a rate that the humblest member of the profession need not hesitate to make it the basis of his charges—a rate calculated, indeed, rather in accordance with past usage, than what is essential to the maintenance of the proper status of the profession—due regard being had to the diminished value of money, and the increase of wealth among the several classes of the community. Ere many years have elapsed, a higher Tariff will doubtless be necessary. In the meanwhile, your Council would venture to express an earnest hope that every member, who, from seniority, or high professional status, may be in a position to do so, will not fail to charge higher fees, whenever the circumstances of the case justify them.

Your Council, while fully admitting that the *income*, rather than the *house rental* of patients, is the true principle on which to found a Tariff, have nevertheless deemed it expedient to make the latter (as being the least open to objection,) the basis of their division into classes. Exceptional cases, they need scarcely remark, will of necessity occur, in which the practitioner must use his own discretion:—as, for instance, in the case of *farmers*, *lodgers*, and *tradespeople*—from the rental of which latter a liberal deduction may be made, when not incurred solely for personal or family convenience.

On the whole, the following would seem to be a fair classification :-

Class I. When the house rental is from £10, to £25, per annum.

CLASS II. ,, ,, £25. to £50. ,, CLASS III. ,, ,, £50. to £100. ,, The scale, it may be remarked, commences with a class rental of £10. There is, however, a still lower grade of the commonalty that may fairly be called upon to pay more or less, according to their circumstances:—a class, which, for their own health's sake, it is very desirable, by affording them every reasonable facility for consulting qualified practitioners, to keep from the counter of the unqualified druggist, and the clutches of the quack. Though it has been found impracticable to arrange a scale specially adapted to the means of the class alluded to, your Council would earnestly impress upon the members the desirability of attending them at reduced fees. Not only would it be a boon to the poor themselves, but, in thickly populated districts, partially remunerative to the practitioner—independent of any higher source of satisfaction or reward. Such nominal charges, however, should always be made, if possible, for ready money.

No allusion, it may here be well to note, has been made to the subject of payment for medicines. It has been intentionally omitted, with the view to mark the sense of the Association upon the point in question, and, as far as possible, morally to enforce the important principle—that medical men should found their claim to remuneration, solely upon the value of their time and skill, and altogether ignore the objectionable system of 'drug payment!' Indeed, the practice of supplying medicines is rapidly dying out in continental states; and equally desirable is it, for the patient and practitioner, that it should become obsolete in this country—of which, however, there appears to be no immediate prospect. Under these circumstances, after a careful comparison of the respective advantages to patient and to practitioner, of prescribing and supplying medicines, or simply prescribing, your Council are of opinion that the Tariff is applicable to either case—inasmuch as, in the former, the cost of the drugs may be regarded by the practitioner as counterbalanced by the retaining hold he has upon the patient, irrespective of other contingencies.

In regard to Operations, Fractures, &c., the time and skill required vary so greatly in individual cases, and the amount influenced so much by the eminence and special qualifications of the operator, that to frame a scale of Surgical Fees—fairly adapted to all cases—is a matter of considerable difficulty. Your Council, therefore, in the present transition state of the profession, would simply recommend, as a minimum, the fees sanctioned by the Poor Law Board.

The Tariff is appended in a tabular form, with explanatory notes—the numerals to which respectively correspond.

Note.—In deference to the wishes of various members, an additional form of tariff (No. 2,) is appended for the guidance of those, who, from long established local custom, or other causes, find it impracticable to at once effect a change in the system of fees. In that event, the Council would strongly recommend such practitioners, while charging the items separately in the ledger, to send in a simple account for the sum total: and to allow any dissatisfied patient to refer to the ledger for particulars, rather than submit to the degrading system of 'drug details.'

TARIFF OF MEDICAL FEES,

INCLUSIVE OF MEDICINE.

CLASS I. When the house *rental is from £10. to £25, per annum.			
CLASS II. ,, ,,			,
Class III. ,, ,, ,, £50. to £100. ,,			
A.—GENERAL PRACTITIONERS.	CLASS I.	CLASS II.	CLASS III.
1. Ordinary Visit	2/6 to 5/0	3/6 to 7/0	5/0 to 10/6
2. Special Visit	A Visit and a Half.		
3. Night Visit	Double an Ordinary Visit.		
4. Mileage beyond One Mile from Home	1/0 to 1/6	1/6 to 2/0	1/6 to 2/6
5. Detention per Half-Hour	2/6 to 3/6	3/6 to 5/0	5/0 to 10/6
6. Advice at Practitioner's House	2/6 to 5/0	3/6 to 7/0	5/0 to 10/6
7. Letters of Advice, or Prescription	3/6 to 7/0	5/0 to 10/6	7/0 to 21/0
8. Consultations	Refer to Explanatory Notes.		
9. Attendance on Servants	2/6 to 3/6	2/6 to 5/0	
10. Two or more Patients in One House	Refer to Explanatory Notes.		
11. Midwifery	21/0	21/0 to 63/0	42/0 to 105/0
			and upwards.
12. Abortions	Refer to Explanatory Notes.		
13. Vaccination	5/0 to 7/0	5/0 to 10/6	7/0 to 21/0
14. Certificates of Health, &c	Refer to Explanatory Notes.		
15. Medicines Repeated	Refer to Explanatory Notes.		
B.—CONSULTANTS.	CLASS I.	CLASS II.	CLASS III.
1. Advice or Visit	21/0	21/0	21/0
2. Mileage inclusive of Fee	Refer to Explanatory Notes.		

The rental being taken as an average test of the income.

Explanatory Notes.

A.—GENERAL PRACTITIONERS.

- 1. Ordinary Visit,-Needs no explanation.
- Special Visit.—A visit of which notice is not given before 10 a.m., at which hour, the Practitioner is understood to commence his daily round; also, when immediate attendance is requested. Either incident is often embarassing to the practitioner, and entitles him to a larger fee.
- 3. Night Visit.—A visit made between 10 p.m., and 7 a.m.—for which, double the ordinary fee should be charged.
- 4. Mileage.—This is understood to commence at one mile from the Practitioner's residence, and should be added to the fee for the visit, according to the class.
- 5. Detention.—When at the desire of the patient, or from the urgency of the case, the Practitioner is detained more than half-an-hour, he is entitled to increased remuneration, at the rate of an ordinary visit, for every extra half-hour so detained. This, however, does not apply to Obstetric cases.

- 6. Advice at Practitioner's House.—The same charge, according to class, as for an ordinary visit; and the same addition for detention.
- 7. Letters of Advice, or Prescription.—The charge should be somewhat in excess of that for viva voce advice.
- 8. Consultations.—When the ordinary medical attendant has to meet another practitioner in consultation, he is fully entitled, from loss and disarrangement of time, to not less than double his usual fee. If, however, the consultations are frequent, the increase may be remitted at his discretion; and in the following case, also, if requested by the practitioner in attendance. When a General Practitioner is himself called in consultation, he is entitled to the Consultant's minimum fee of 21/0. Obstetric Consultations should be charged by arrangement between the Practitioners.
- 9. Attendance on Domestic Servants.—When paid for by their employer, or paying for themselves, the charge should be for patients in Class I or II, according to their position and circumstances. If the employer himself send for the Practitioner, he may fairly be held as the person responsible for payment.
- 10. Two or more Patients in One House.—If members of the same family, and paid for by one person, the full fee should be charged for the first, and a half visit for each of the others. When not of the same family, the full charge should be made for each.
- 11. Midwifery.—From long established custom, the fee is generally understood to include the after-visits, when few in number, and within the prescribed distance of an ordinary visit. It may also be well in certain cases among the lower grade, in Class I, to reduce the fee to 15/0, if paid within a month. The Obstetric Tariff necessarily admits of considerable latitude in regard to the fee, consequent upon the oft prolonged and harassing attendance in cases of difficult labour, and the varying pecuniary position of the several classes of society.
- 12. Abortions.—In simple premature labour, the same charge should be made as in ordinary cases of midwifery. In Abortions, the necessary visits should be charged as such, plus an additional fee for detention, in accordance with the principle laid down in No. 5.
- 13. Vaccination.—This is not included in the Obstetric Fee, and should be charged from 5/0 to 21/0 according to Class, or number of visits required.
- 14. Certificates.—Simple Certificates may be charged as Ordinary Visits, or Letters of Advice; but in cases of Life Assurance, or Lunacy, involving special examination and responsibility, 10/6 to 42/0 should be charged according to Class, and circumstances. The Assurance Fee of 10/6, however, should apply only to cases in which the amount insured does not exceed £50.
- 15. Medicines Repeated.—When, as frequently happens, a patient applies simply for a renewal of medicine—a visit being deemed unnecessary—the charge should be regulated by Class, as for Advice at Practitioner's House.

B.—CONSULTANTS.

- 1. Advice or Visit.—This includes Advice at Home, and Attendance within a mile—either alone, or in consultation with another practitioner. Two visits, except in consultation, are generally made for each fee.
- 2. Mileage inclusive of Fee.—For any distance not exceeding three miles, from 21/0 to 42/0, according to Class; and for every additional three, or moiety of three miles, 21/0.
- Frequency of attendance, and facilities for travelling by rail, may, in exceptional cases, and on the recommendation of the local attendant practitioner, be regarded as a valid reason for a moderate reduction of the fee.

The above fees are from one to two-thirds less than the usual consultation charges for mileage, &c., in London, Edinburgh, Dublin, and other large towns.

TARIFF OF MEDICAL FEES.

EXCLUSIVE (No. 2.) OF MEDICINE.

GENERAL PRACTITIONERS.	CLASS I. CLASS II. CLASS III.			
1. Visit within Postal Delivery	1/0 to 2/6 1/6 to 3/6 2/6 to 5/0 A Visit and a-Half. Double an Ordinary Visit. For First Mile.			
4. Journeys—Mileage	1/6 1/6 to 2/0 2/0 to 2/6 Per Mile Extra.			
	1/0 to 1/6 1/0 to 2/0 1/6 to 2/6 If the distance be only one mile, from 2/6 to 5/0 should be charged for taking out horse or carriage, according to Class.			
5. Detention per Half-Hour	Refer to Explanatory Notes. Refer to Explanatory Notes. 3/6 to 5/0 5/0 to 7/6 7/6 to 10/6 Refer to Explanatory Notes. Refer to Explanatory Notes. Refer to Explanatory Notes. 15/0 to 21/0 21/0 to 63/0 42/0 to 105/0 and upwards.			
12. Abortions	Refer to Explanatory Notes. 2/6 to 5/0 5/0 to 10/6 7/6 to 21/0 Refer to Explanatory Notes.			
Works	1½d. per week, per head. 1¼d. per week each member. N.B.—No Member of a Club should be entitled to Medical Attendance, &c., whose wages, salary, or income, exceed			
Medicines, &c. Mixtures 3xij	Thirty shillings a week. 3/6 to 4/6			
	When two or more are sent, a moderate decrease in the charge should be made.			
Drops	1/6 1/6 to 2/0 2/0 to 2/6 1/6 to 2/0 1/6 to 2/0 2/0 to 2/6 1/0 to 1/6 1/6 to 2/0 1/6 to 2/0			
Powdersvjvjiv ,,, iv Blisters Gargles and Lotions	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			

