

Seven Doctors Of Union City, Indiana

How they have worked out a plan by which they give better service and avoid rivalry and jealousy among themselves

By Frank Hill

SEVEN doctors, in a town of less than seven thousand inhabitants, are carrying on a remarkably interesting new movement in the field of medicine. A similar plan is being followed in other towns. The movement is spreading; and its consequences are bound to be tremendously important.

The town where the seven doctors live is Union City, about eighty miles east of Indianapolis. Most of it is in the state of Indiana, but part of it spills over into Ohio. It is surrounded by a rich farming country and is connected with other communities by several railroads, an interurban line, and well-kept highways.

Like most places of its size, Union City was looked after, as to health, by physicians who were general practitioners. Each of them had his own group of patients, whom he treated for everything from measles and mumps to pneumonia and paralysis. They were obliged to do this because they were "family doctors."

Each of them would have liked to specialize in one line: to study that one line exhaustively, and to make himself an authority and an expert in certain kinds of cases. But as a general practitioner he could not do this. To make a living as a family doctor, he was obliged to take all the patients he could get, no matter what ailed them.

And he must try to get as many patients as he could! To do this, he must be a competitor and a rival of the other doctors. If one man's practice grew, it was inevitably at the expense of one or more of his fellow physicians.

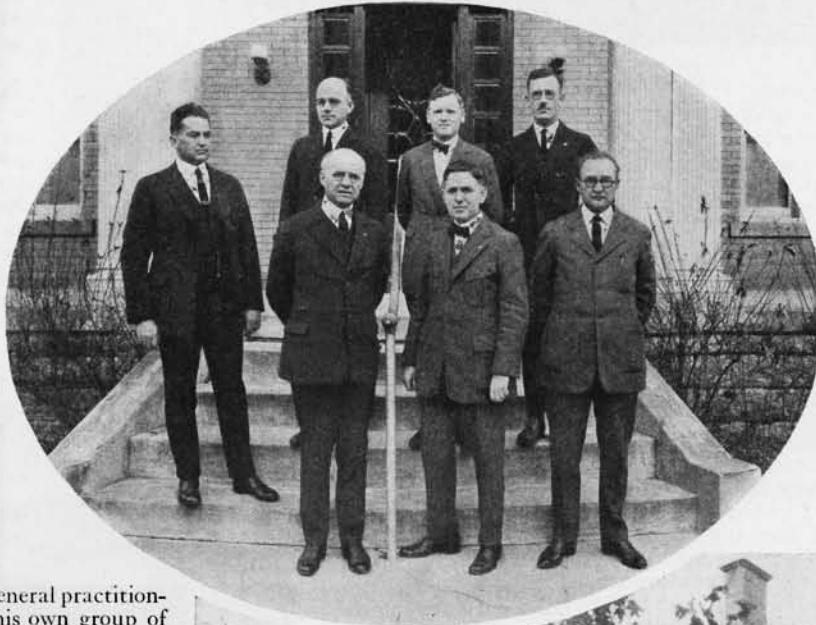
If one of the doctors had a case requiring special treatment, which he was not prepared to give, or a surgical operation which he could not perform, he sent the patient to a specialist, or a surgeon, in some city. He usually did this, even though he knew that one of the local physicians was competent to give the treatment or to perform the operation. For this local doctor was a competitor in general practice; and, therefore, if a patient were sent to him for special treatment the patient might *keep on* going to him.

The doctors could not afford to take this risk of losing patients to their local competitors, so they packed them off to the city specialists and surgeons, or tried

to handle the cases themselves, even though the thing might be a little out of their line.

In this respect, Union City was like countless other towns—your own town among them. Small-town physicians themselves realize this situation—much more keenly, in fact, than their patients do.

The seven Union City doctors, for instance, knew that the conditions under which they were working were far from ideal. It was out of the question for each of them to have all the up-to-date equipment for diagnosing and treating every disease. No one of them could have a complete X-ray



These are the seven doctors who have formed the Union City Clinic in order to give the people of that town the best medical, surgical, and dental care, and also to achieve a high standard of professional ability for themselves. They are Dr. F. Arthur Zeller, general surgeon; Dr. Robert W. Reid, X-ray and cystoscopy; Dr. Fred McK. Ruby, eye, ear, nose, and throat; Dr. Leland K. Phipps, diagnosis and internal medicine, Dr. George H. Davis, obstetrics and children's diseases; Dr. H. W. Detrick, genito-urinary diseases and anesthetist; and Dr. Fred A. Beatty, dentist. The accompanying article tells how these physicians have got away from the "family doctor" system of the small town and are giving the people of Union City the services of trained specialists instead

laboratory—or all the apparatus for making microscopic tests, or all the equipment for surgical operations. It simply couldn't be done.

The competition among them had resulted in more or less jealousy and hard feeling—just as it does in every town. But several of the doctors who were still on friendly terms used to talk the matter over, trying to figure out some plan by which they could work together, instead of all the time pulling apart.

This was a little more than six years ago. At that time, a small general hospital had been started in the town and one of the doctors had bought a private residence, intending to use it as a maternity hospital. Then the war came, and most of the doctors entered the service. There, while working under Uncle Sam, they got their first real insight into the value of coöperation; and they returned to Union City with quite a different outlook, and a new determination to evolve some kind of a get-together policy.

IN THE army they were obliged to specialize, and thus they gained a large amount of new and valuable experience. Military doctors don't waste time in general practice. Each man is required to become an expert in some one thing, and to be master of that subject. Why not apply the army plan of specialization to Union City? It was agreed among them that if some method could be devised by which each physician and surgeon in the town could be given all the cases requiring the exercise of his special skill, competition would be eliminated and better service rendered.

But how could they adjust the finances? Should they have a common fund for expenses, and then divide the profits equally?

No, that would not do; for the seven men who were considering the plan did not have an equal amount of practice. One or two were afraid they would be giving away business. Another very important question was the practical form the new venture should take. Which was more desirable: a partnership or a corporation? Neither was wanted, because of the liabilities and red tape involved. Of course one of the number could have taken the responsibility and employed the others; but that was not satisfactory, because no one wanted to be merely hired by the man who paid the salaries.

It gradually became evident that they could not pool their finances, form a corporation, or partnership, submerge personalities, or deprive any doctor of any honors or fees that might come to him in the course of his practice! You can see

that it was a difficult problem they had.

All this time, however, the doctors were getting better acquainted, and little personal differences were being ironed out. While working on their plan, they had begun already to send patients to one another, instead of to specialists in the cities.

Finally, after vainly trying to devise some method by which they could work together without developing friction over money or professional honors, they hit upon the happy idea of leaving the form of agreement to a man skilled in the law. In that one act they practiced the creed

seven doctors and surgeons had formed a compact to acquire property, to be known as "The Physicians' and Surgeons' Building," for use as offices for the practice of medicine and surgery. Each man was to pay his pro-rata share of the purchase price, and of the overhead expenses. Three trustees were named, one of the number being the Atlas State Bank.

After the details of this plan had been developed, the dwelling which one of the doctors had purchased before the war for a maternity hospital was transferred to the group of seven doctors for twenty thousand dollars, the title being held in

the name of the three trustees. Each doctor furnished his own equipment: office furniture, rugs, desks, etc. They computed the amount of money that would be required to maintain the property, to pay taxes, and the salaries of two women for office help, and then divided the amount according to the floor space occupied by each man. Once a month this money is deposited with the Atlas State Bank, and the bank pays all the bills. In the matter of fees, however, each doctor does as he always has been doing. He keeps all the money he receives from his own patients, and is not required to account to the others for any part of it. If he wants a nurse, or a clerk, he hires her, pays her himself, and she works for him exclusively. In case one doctor asks another doctor to assist, the assisting physician is paid by the one who employs him.

THE seven doctors in the clinic are no longer competitors in general practice. Each one confines himself to his specialty, unless required to do something else in an emergency. All of them are graduates and postgraduates of recognized medical schools, and all have had the varied experiences of a general practice. Here is the way they have divided the work of the clinic:

Dr. F. Arthur Zeller, general surgeon. Born in Ohio; graduate of the Greenville, Ohio, high school and of Centre College; graduate in pharmacy, graduate of Ohio Medical University; postgraduate Polyclinic Medical School of New York; postgraduate in Europe, 1902. Surgeon in Spanish-American war; surgeon in World War. Member Randolph County Medical Society, State Society, American Medical Association, American College of Surgeons.

Dr. Robert W. Reid, X-ray and cystoscopy. Born in Cincinnati, Ohio. Chief Roentgenologist Base Hospital No. 25, A. E. F. Graduate University of Cincinnati; interne and house physician, Cincinnati General Hospital; (Continued on page 95)

What I Don't Like About My Town

Prize Contest Announcement

WHAT is the most ridiculous, uneconomical, and generally foolish state of affairs in your town? If it isn't the doctors who are pulling against each other it may be the churches, or the lawyers, or the storekeepers, or the clubs. How about the struggle for silly social recognition that is making scores of families live beyond their incomes? What of the neighborhood cliques that devote time and energy to brawling against one another—time and energy that would pave streets, plant trees, or move mountains, if properly directed? Maybe the schools are suffering from the antiquated ideas of the Board of Education, or else they are being made the football of politics. How about the misapplied efforts and foolishly spent campaign funds of the political machines themselves? Isn't there a lot of absurd friction between employers and employees? What about some other of the long list of rivalries and petty jealousies and gee-hawing that are likely to spring up where any lot of highly individualized, sensitive, and often selfish human beings are herded together in a municipal group? What is the one thing more than anything else that your town needs?

Tell us about it, confining your letter to four hundred words. And, above all, be definite! Don't write a general lamentation; describe clearly an actual situation.

For the best letter of not more than 400 words we offer these prizes: \$20, first prize; \$10, second prize; \$5, third prize. Competition closes August 20th. Winning letters will appear in the November number.

Contributions to these contests cannot be returned; so make a copy of your contest letter if you want to preserve it. Manuscripts and inquiries not connected with the contest must be sent under separate cover to the Editor of THE AMERICAN MAGAZINE.

that has had so much to do with their subsequent success. They exalted the *specialist*. In order to get away from any possible local influences, due either to their personal relations with the lawyer, or to his knowledge of their affairs, they engaged an eminent attorney in a neighboring town to fix up a working agreement for them.

"What you want to do," he explained, "is to handle this undertaking as a business trust. That will enable you to own property, and it will avoid the complications and liabilities of a partnership or a corporation."

So he prepared the articles, stating that

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postgraduate work in Roentgenology, Cook County Hospital, Chicago, and of U. S. Army School at Ft. Riley, Kansas; Member of Indiana State Medical Society, American Medical Association; president of the Randolph County Medical Society.

Dr. Fred McK. Ruby, eye, ear, nose, and throat. Born in Union City, Indiana; A. B. and M. D., University of Michigan; postgraduate work in New York Eye and Ear Infirmary. First lieutenant, Medical Corps, U. S. A., Camp Greenleaf. President Randolph County Tuberculosis Association, secretary City Board of Health, vice president Indiana Academy of Ophthalmology, and Oto-Laryngology. Member American Medical Association, Indiana State Association, American Academy of Ophthalmology and Oto-Laryngology, Randolph Medical Society.

Dr. Leland K. Phipps, diagnosis and internal medicine. Born in Whiteland, Indiana; B. S. and M. D., Indiana University; United States Naval Reserve during the war. Member Randolph County, Indiana State, and American Medical Associations. Former president Johnson County (Ind.) Medical Society.

Dr. George H. Davis, obstetrics and children's diseases. Born in Ohio; graduate of Indiana University. Member of County, State, and American Medical Associations.

Dr. W. Detrick, genito-urinary diseases and anesthetist. Born in Bellefontaine, Ohio; Medical School, Eclectic Medical College, Cincinnati, Ohio; War Examining Board; post-graduate work in Chicago. Member of Randolph County, State, and American Medical Associations. Member of Board of Health, Union City.

Dr. Fred A. Beatty, dentist. Born in Indiana, graduate La Grange High School and Indiana Dental College. Major in A. E. F. Served in France from July, 1918, to July, 1919. Member Indiana Dental Society and National Dental Society.

WHILE the building housing the clinics was originally used as a dwelling, it is admirably adapted for its present purpose. It looks like an "institution" of some sort, with its high, curved porch and graceful supporting columns that reach up the full two stories. There is an atmosphere of quality at every turn. Spacious corridors above and below, ample rooms and high ceilings impress the visitor with the superiority of his surroundings. An office secretary stationed on the main corridor takes care of all callers and puts them in touch with the doctor they desire to see. A stenographer, for the common use of all the doctors, has a desk in a corner of the main waiting-room.

It should be mentioned that the little hospital, which is located in another part of the town, was purchased by one of the doctors in the clinic, and is being operated as his personal institution for the present. Five graduate nurses care for the patients. But a new hospital is to be erected on the lot adjoining the clinic; and when that is completed, the smaller hospital will be

closed and all of the equipment moved into the new building. The hospital will then be managed as a business trust, the same as the clinic is being handled. Plans have been drawn for a three-story building with a high basement, to cost seventy-five thousand dollars. The foundation and walls, however, are strong enough to carry two more stories.

DOCTOR ZELLER, the general surgeon, is dean of the clinic by virtue of his length of experience and his activities in forming the merger. He is a trustee in company with Dr. Robert W. Reid and the Atlas State Bank. In a business trust there are no officers, the authority being vested in the trustees.

"We are confident we have found a way by which towns can command the best possible medical service, and at the same time give physicians and surgeons a very desirable opportunity to do advance work," said Doctor Zeller, in describing the work of the Union City Clinic. "Because of the limitations of the average town, a specialist of any kind generally goes to a city to find a field large enough for his activities. However, when we began to get together in Union City, we found that there was enough for the specialists to do right here; and now we handle every kind of case."

"What was the first outstanding benefit of your clinic?" I asked.

"Facilities for diagnosis," he replied promptly. "When a doctor is going it alone, in general practice, he seldom has the equipment for finding out what ails a patient, especially in obscure cases. Then, as he has no alternative, he sends the patient to the city. And let me tell you," he added emphatically, "diagnosis is of supreme importance in any undertaking. Take a sick business. You are losing money. You don't know why. Stop guessing and call in an expert who can take that business apart and locate the trouble. Or maybe you are a failure, and you are guessing at the cause. Far better seek the help of a person of experience, and ask him to diagnose your case."

When a patient comes into our clinic, our first move is to find out scientifically his exact physical condition. Then we make a report of our findings, and let him accept or reject our recommendations as to treatment. As part of our equipment we have a complete X-ray outfit, which is used in making a diagnosis and is practically indispensable in getting at organic ailments. If we did not have this clinic we could not have the advantage of the X-rays. We are able to examine the teeth, or any organ of the body, and to make photographs. We have developed diagnosis to such a degree that doctors in surrounding towns are turning patients over to us for that purpose, just as we used to send them to Indianapolis or elsewhere."

"Do the people generally like to have a thorough diagnosis?" was my next question.



How I taught my children at home

MY husband was manager of one of the branch mills of a world-wide corporation. It was a fine position for so young a man. There was one great drawback, however—we had to live in a small milltown which offered none of the advantages we had both been used to. For ourselves we did not mind, but the education of our boy of 7 and our girl of 6 worried us.

We knew the associations they were now making, the habits they were now forming, the teaching they were now getting could never be made up for later—but what could we do? What would you have done?

It was with misgivings, therefore, that I started Jim at the local school. I knew his teacher, one of the town girls, a product of the same school with only the commonest kind of a common school education and no training or experience.

It seemed like a joke, but it became more and more a serious one. Jim was apparently learning nothing except bad language and behavior and we dreaded to think of sending our little girl into those surroundings.

One day Jim, Sr., returned from a trip and as soon as he stepped inside the house I knew something had happened.

"Mary," he shouted, "come here quickly, I've got it."

"Got what?" I cried. "Are we to move to New York?"

"Oh, no," he laughed—"but something better—as far as the children are concerned. On the train I met a man, bragging about his children—showed me their pictures—their school reports and all that, but what interested me most of all was a letter from his 7-year-old son—Jim is 7 and think what sort of a letter he writes!—well, I had to admit the man had an infant prodigy—which, however, he denied—just a normal child, he maintained—but—and this is the amazing thing—the boy had been taught by correspondence through his mother! Do you get that?"

"He was so enthusiastic about it that he got me excited and I stopped off at Baltimore, where this school is located."

"I found there a great private day school that specializes in the education of young children. I had explained to me that its Trustees, who maintain the school without any financial benefit, had obtained such remarkable results with their day pupils that they had decided to extend its usefulness so that pupils, no matter where located, could share in its advantages."

I threw my arms around Jim's neck, thrilled by his enthusiasm. "Let's order the course at once," I said.

"It's ordered already!" he replied. "There's the outfit there in my luggage!"

THAT was five years ago. Jim's promotion to the big city has at last come and we are now able to put both children in school, and what do you suppose the Principal said when I went to enter Jim—"You say he has finished the 6th year of Calvert and always has good reports?"

"Yes," I could truthfully answer.

"Well, then he can enter our high school department."

And he did—and what is more, is leading his class!

The little girl did the same in her school, and although both children spent their early years in a little milltown, they have—thanks to Calvert School—a broader knowledge and culture than most of their metropolitan friends.

If there is no school or only a poor one near you, let Calvert School come to you and give your child an exceptional education from Kindergarten to High School right in your own home. The school will gladly send you full information.

CALVERT SCHOOL

5 Chase St.

Baltimore, Md.

Jim Henry's Column

Is Mennen's the finest Shaving Cream ever made?

I know a millionaire who smokes nothing but seven cent cigars—formerly a nickel. And he is not a tightwad.

I don't want to give the idea that I move in wealthy circles, but I know another plutocrat who owns a Rolls Royce and a Ford—and uses the Ford half the time.

Mr. Mennen thinks I am the best salesman in the world—for Mennen Shaving Cream.

Mennen's is the best Shaving Cream in the world—if your face so rates it.

It's purely a matter of personal judgment.

The argument seems to be getting a bit tangled but what I started to write is this: It is just barely possible that you will like Mennen's a lot better than any soap you ever used.

A great many men do prefer it.

I met a man once who didn't care for Mennen's, but he mixed up the lather in his shaving mug—a victim of habit. He loves that mug. It was his grandfather's. His father was a modern shaver, at that. It was a case of what breeders call a "throw back."

It's queer the way I drift from my point. The idea is that it might pay to try Mennen's. Not recklessly, of course. Just a ten cent demonstrator tube to start. I send it to you by mail.

I really have no ulterior motive in suggesting that. There's very little profit in this demonstrator tube, considering that it costs over a dollar to get you to write for it and that I throw in a sample of Kora-Konia just so you won't get sore if you don't like the Shaving Cream. The Kora-Konia will keep your skin from getting sore, anyway, where muscles chafe. Keep it in your locker and use before a game of golf or tennis. Kora-Konia is great for babies—prickly heat, rashes and that sort of thing.

But to get back to Shaving Cream. After one trial, I feel pretty confident what your answer will be to that question I ask in the headline.

Jim Henry
(Mennen Salesman)

THE MENNEN COMPANY
NEWARK, N.J. U.S.A.



"Now you have raised a big question," Doctor Zeller responded. "Unless people are desperately sick they do not relish a general examination. But if they come in here, they cannot get any treatment until they have met our requirements. Not long ago we turned a man down because he would not permit us to locate the cause of his disease. There was something wrong, but he shrank from facing the truth. It is funny about people and their aches and pains," continued the doctor. "Actually they seem to enjoy fooling themselves. They will evade the facts and put off the matter of seeing a doctor just as long as they can. Such folks will go from one doctor to another, hoping to be told that nothing much is the matter with them. They like to kid themselves, and it makes them feel good to find a doctor who, also, will kid them. But that is not the way to deal with disease."

"WHAT is the outstanding effect of the clinic upon the doctors themselves?" I asked.

"In the first place, they cannot get into a rut," he replied quickly. "A doctor practicing alone lacks the constant clash of minds and comparison of experiences that we enjoy here. Every day we ask each other questions, especially in cases that may require the attention of more than one doctor. Naturally, we take pride in being able to answer at once. If we don't, we hurry down to the library and study the subject until we find out. Consultations are easy and frequent. Just recently, I had to handle a difficult surgical case. The diagnosis indicated a certain technique, and in talking it over I was asked to explain what I planned to do. When I had given my answer, one of the group asked why I did not do it another way. I gave my reasons. That sort of thing is stimulating and developing. But it is precisely what the average doctor in an average town has to get along without. He needs it and wants it; but he doesn't get it, except once in a great while in some general medical meeting. We get it every day.

All of us, at the Union City Clinic, belong to the local, state, and national medical societies, and we take all the publications bearing on our specialties. What is more, we read them. If we don't, we are likely to get cornered. Our duties are so distributed that it is easy for us to get away without any injury to our patients. We can relieve each other. That is where our experience as general practitioners is valuable. When a member of the group attends a convention, or hears a lecture, he comes back and tells all the rest; so we get the advantage of all that he has learned, plus his deductions. Early this week two of the doctors went to Anderson, fifty-four miles away, to hear a Chicago expert talk on the recent advances in his specialty. A few days later they drove thirty miles to hear a specialist talk about cancer of the stomach. Soon I am going away myself to listen to lectures and to make special investigations; and when I get back I'll pass my findings on to my associates."

"What are some of the results of your clinic that could not have been expected had you all remained in general practice?" I asked.

"One of them is the use of X-rays in

place of surgery. We have had several instances where X-rays have cured cancers around the nose and in the mouth. If we had not been equipped for such treatments it would have been necessary to use the knife, with its attendant pain and disfiguring scars. And let me impress you with the fact that such work is not done in many towns of this size! We are now treating a woman for an enlarged spleen by using X-rays, and she has been doing so well that she has gained twenty pounds since she started taking the treatments."

"How do the people like your clinic?"

"We have all we can do, and more are coming all the time. Last year we cared for four hundred patients in our hospital, and lost only four by death, which means that we had a mortality rate of only one per cent."

"Are the doctors in the clinic making any more money than they did?"

"Yes; on the whole they are doing better than when in general practice, and their incomes will gradually increase. More service is being given, with more satisfaction to all."

"Do you have a regular scale of fees?"

"No; we charge whatever we feel is a proper fee in any individual case. We do not reject anybody for lack of money. Very few try to deceive us as to their resources. I recall one case where an operation was performed on a young married woman. When it came time for her to leave the hospital, her husband asked for his bill. It had not been mentioned up to that time. Then I questioned him, and finally asked if he thought one hundred and fifty dollars was about right. He said it was not enough, and insisted on paying two hundred dollars. We do not have any charity beds at the hospital; but very often we give the medical attendance in the hospital without a fee. But pay is required for the hospital service."

"HOW do your charges compare with similar service in the cities?"

"Our general range of charges is lower, since our general expenses are less."

"What is the next big step in medicine?"

"More prevention. Why should we permit children to grow up under-fed and ailing, and then have to doctor them? It is far better to take them in hand in childhood. With this thought in mind, we have established a far-reaching follow-up system. When a baby is born, the specialist in charge of obstetrics instructs the mother, and requires her to bring the infant in for examination. No charge is made, but there is a fee for any prescriptions that may be required from time to time. The county Red Cross organization supports a general nurse who works among the schools, and we cooperate with her in all her activities. She has access to the clinic at all times, and tells us where no fee is to be charged. Furthermore, each doctor follows up his patients with letters of inquiry. We realize that there may be after-developments; and we have adopted this plan of finding out how the patients are getting along. This is an excellent plan for developing good will; and it also helps to prevent complications. For this purpose, a complete history of each case is kept on a card in the clinic files. Thus we all may know what each doctor has done in treating a particular patient."