

And if this be so, why not explicitly state the exact facts? Commissioner or Board of Trustees—the responsibilities legally rest with the head. Such responsibility can be delegated but not evaded, and here it is placarded that he who runs may read, and that we to whom is delegated the doctoring may clearly know to whom we are answerable. For these, the appointers, are themselves directly responsible to the public whose servants we all are.

12 Chart No. 5 shows an interesting experiment wherein Commissioners Kingsbury and Wright decided to dare to relegate to six doctors power to organize the professional work. There are no laymen to direct and order in matters bearing on the professional care of the sick. The powers and functions of this Advisory Committee are clear-cut. They are general rather than detailed. These men recommend policies and general plans. They nominate only the three chiefs, though they confirm other nominations. *Inspection and report* is no small part of their duty.

13 Chart No. 6 broadly defines the work of the chiefs, jointly and severally. Note first their joint responsibilities, then their several duties, and, to avoid confusion, last of all the duty of the Chairman. Note that the Chairman of the active staff is not, as might be thought at the first glance, the physician in chief, but any one of the three, and the office may well rotate.

14 Charts No. 9-10. Nursing. From the nursing profession, as far as representative editors, state authorities, teachers, and text books were consulted, no information was obtainable of an attempt to chart and diagram and define active hospital nursing as a whole. Difficulties that arose between the head of a training school and an energetic and original head nurse opened up the question whether there existed clear-cut definitions of authority and functions. Not finding these, I hazarded the outlines given in Charts No. 8 and 9. It goes without saying that the hours of the duties of an operating-room nurse or the head of the maternity service, or the head of the dispensary, differ markedly from those of the head nurse in a ward or on a private floor. I know little or nothing of their organization and am, therefore, well aware that this chart can be shot full of holes. But somebody has got to set up a target. It is also true as a general proposition that, in issuing such a program, it is better to overload with details than to give a mere outline. It is easier to pare than to pad. It is also manifest that hospitals differ according to the size of the work in the various departments and the special work of institution, and there may be great

variety in the discretion given to head nurses according to the variation in their experience and their executive ability. It is hard to see, however, how one can develop charted studies of these organization systems without experimentation. Certainly publication will develop comparisons and to bulletin on blackboards of hospitals some such definition of functions is to invite profitable discussion. This large group of women, some little trained in co-operative activity, in various degrees of authority over other women, working under conditions of tension, are in particular need of definition of service, however splendid their spirit may be.

Now as to graphic presentation—for example, temperature charts. That the Army and the College of Surgeons and leading hospitals are at variance among themselves in the form of our most common graphic symbol is a reflection of the indifference in our so-called scientific attitude which would raise a smile on the face of any efficiency engineer or industrial worker. (Chart published elsewhere.)

Nor are our other graphic symbols in any better case. The baby weight charts present no uniformity. The diagrams of chest diseases show a little better agreement. But it is not too much to say that in picking up the published reports in general, one cannot read the graphic symbols of temperature or weight or what-not without careful study or translation into the language of one's own temperature chart or weight chart. In a specialty where graphic symbols could be of the widest utility, we have no standard scale of diagrams of the body, or of parts of the body, no symbol that means a fracture, no symbol that stands for fluid or flatness or foreign body or cyst or tumor or pus or any of the hundred matters that might thus be portrayed to the very great saving of time and resulting in an enormous addition to the clarity and usefulness of our scientific reports. The war may bring this about: the National Council of Defense has asked me to take it up and I therefore urgently request all those who have pride in any experiment in this line to forward the material for consideration by a representative committee.

How such graphic symbols may become imbedded in practice and generally clearly understood is perhaps best stamped by map usage. Anyone who looks at a government map understands that a horizontal line with two or three little short upright lines above it means a marsh. A continuous wavy line signifies a brook or river. Contour lines running in certain formations indicate elevations. The double line is a road—a good road is heavy—dotted lines running off from it denote a poor road, the single dotted line a