

## WHERE DOES THE HOSPITAL PHARMACIST STAND?\*

BY EDWARD SWALLOW.<sup>1</sup>

According to a recent extensive survey the number of dispensaries in the United States exceeds 4000. Of the 3944 dispensaries listed, 935 are out-patient dispensaries which provide general medical and surgical service for their patients, while 3009 are special dispensaries such as those for tuberculosis and venereal diseases; mental hygiene and baby and child clinics; dispensaries of eye, ear, nose and throat and orthopedic hospitals; dispensaries connected with industrial plants; out-patient departments to United States Marine and U. S. Veterans' Hospitals and relief stations. Among the 935 general dispensaries are 678 out-patient departments of general hospitals. The immense importance of these dispensaries to the public is indicated by the fact that, including a reasonable estimate for the seventy-five general dispensaries known to exist but from which reports are not received, these institutions handled about 4,500,000 patients during the year who, during that time, made approximately 16,000,000 visits. To-day our hospitals, numbering in the thousands, not only function as hospitals but as scientific and educational institutions. That many more hospitals are to be built in the near future can be judged by the fact that \$300,000,000 worth of new construction is in view.

Considering the above authentic statement we have to come to the conclusion there must be thousands of men and women engaged in the work of hospital pharmacy, and though we are aware from reports cropping up now and again of some of these institutions not employing registered pharmacists to compound and dispense medicines, there is no doubt that the great majority comply with the law and recognize the grave importance of having registered pharmacists in their pharmacies. Consider for a moment the enormous amount of skilled work, the grave responsibility attached to preparing, compounding and dispensing the millions of prescriptions issued by these institutions every year. Not only is it absolutely necessary that each one of these prescriptions be compounded accurately and honestly but it is necessary the ingredients shall be up to the full standard requirements as to strength and purity, otherwise the patient does not get the full benefit of the doctor's advice and learning and the doctor himself is liable to suffer in reputation and himself draw wrong conclusions as to the value of certain treatment for the complaint from which the patient is suffering. It is important that the patient, whose life and physical welfare is the chief object in hospital work, shall receive all the attention and care which the combined science of the medical profession, and allied sciences such as pharmacy, can give. The physician, pathologist, bacteriologist, X-ray specialist, dentist, all function progressively along the line of their training and scientific knowledge and the hospital pharmacist should do the same in every respect. The hospital pharmacy is the most logical place in the world for professional pharmacy as a science to be practiced strictly up to

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\* Section on Practical Pharmacy and Dispensing, A. Ph. A., Asheville meeting, 1923. As a result of the discussion on this and the succeeding paper Resolution No. 20 was formulated by the House of Delegates, A. Ph. A., and adopted—see minutes of Association in this issue of the JOURNAL.

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the standards of learning and knowledge taught in the schools and colleges of pharmacy, and if it is not practiced here it is hard to understand where it can be practiced as taught. Here the pharmacist should find the opportunity of putting to daily use his knowledge of the correct manner of storing drugs so they will not lose their virtues; of examining by scientific methods the purity and strength of his potent fluidextracts, tinctures, etc., by the process of assaying. His knowledge of sterilization, analysis, microscopy and therapeutics should all be functioning so that scientific results may follow his work.

All science is an accumulation of facts. Facts are of value only as they may be applied to life. To memorize a million facts for which one will have or find no use is the act of an educated imbecile, not of a wise man. The hospital pharmacy being removed from the commercial markets and stress of modern competition is a sacred shrine upon whose altar the disciple of professional pharmacy may lay daily offerings of the fruits of his learning and science in the great and noble work in which he is engaged when helping in the battle against disease. Education is a sacred trust, a heritage which grows and multiplies with use and is not lightly to be sold for a mess of pottage. It is a man's duty to himself to see that his acquired knowledge is put to good use both in his work and in his own interest, otherwise the accumulation of knowledge is barren of results and useless. On the other hand it is no use seeking to occupy a rank which one's knowledge will not justify nor permit him to keep.

According to the figures given above we have thousands of men and women, registered pharmacists, who are engaged in hospitals. Are they functioning as professional men and women according to the knowledge and science taught them in the schools and colleges of pharmacy? Have they every facility found them in the way of apparatus necessary for the operation of assaying and other scientific methods for analysis and scientific work generally? If, as a body, they are not called upon to do particular kinds of scientific work which their knowledge makes them capable of performing whose fault is it? Is it because the powers that be are not satisfied with the extent of their scientific training or because the pharmacists themselves are backward in any way in asserting their claims? Or what?

Hospital pharmacists of many years' experience (of course there are brilliant exceptions to the rule who function as they should) who hear or read these lines, will recognize an effort has been made to draw a picture of hospital pharmacy true to life; the principal features have not been too boldly brought out into relief, nor lines drawn too heavily anywhere. Generally speaking the hospital pharmacist occupies a position of a nondescript variety where he is held responsible for work which requires both scientific training and knowledge but somehow misses the respect and honor accorded to a professional man. Life and health and the proper functioning of the medical profession (as far as the important item of medicine goes) depend upon his skill, accuracy and learning yet somehow he is in the same kind of predicament as a man who has by years of study finally become an architect only to find himself thought capable of doing only a carpenter's work, which he gets the credit of doing, but misses the higher privileges and respect which are rightly his by reason of his superior knowledge.

Is this state of affairs due to the fact that the hospital pharmacist really needs more education and deeper scientific knowledge before he can honestly apply for

admittance among the recognized professions? Will the hospital pharmacist be content to remain the handmaiden of medicine or has he the longing for higher things, the desire for greater achievements which only exact science can make possible? Education begins with life; it is the purpose of life; the means towards its destiny. Here in America it is our noble destiny to help rather than harm, to struggle for rather than against mankind and to seek our own success in the success of all.

Will this spirit be manifested in the hospital pharmacists of America and lead them forward on a glorious path of progress lighted by the beneficent rays of science

"Whose power is such that whom she lifts from earth,  
She makes familiar with a heaven unseen,  
And shows him glories yet to be revealed."

Where does the hospital pharmacist stand?

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### SOME PRIVATE AND QUASI-PUBLIC HOSPITALS AND THE DRUG STORES.\*

BY JOSEPH JACOBS.

It is well, sometimes, to recur to principles and fundamentals to see if current practices are in ways of error, with the hope of calling for the remedies, if wrongs appear, and leading practice back into proper channels, if found astray.

The fifth enumerated article of the Constitution of our Association calls upon us to "Suppress empyricism, and to restrict the dispensing and sale of medicines to regularly educated Druggists and Apothecaries."

It is often said—and in derogation of modern Pharmacy—that, from New York City to the humblest hamlet of our country, the "Blue Light Drug Store" is a thing of the past; that our cities and towns are afflicted with pharmacies that are no more than department stores, where you may purchase any article of domestic adaptation or personal comfort and adornment. These commentators say "you find the tall prescription desk, it is true, but its pill-tile where pills are rolled out, divided with the spatula, rounded with fingers and thumb, dusted, and delivered in little round paste-board pill boxes"—is now an antique. The man with the pestle, say our critics, "no longer smells of socrotine aloes or valerianate of ammonia." The odor of rubber goods, toilet soaps and the ice cream corner pervade his fashionable raiment, and he wraps and delivers toys, toilet articles, hair nets and dolls as deftly as the old apothecary compounded and presented prescriptions. Their parenthesis thought is that the modern druggist is often flagrantly profiteer and revels in great riches. But, in the light of what follows, what do we see? Is his name blazoned as director of banks or trust companies; are central sky-scrapers on his tax returns? Rather do we look for such magnates among the hardware dealers, the coal merchants or the opticians of his vicinity. The druggist is, meanwhile, renter of the location sheltering his so-called department store.

There are many causes for this condition to be seen clearly on most casual reflection. Modern labor-saving devices are multiplied and many of them commandeered by Pharmacy; processes of compounding have been simplified and improved; and store fixtures and arrangements are made more convenient for both

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