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in the middle west. Because silicosis offered some of the most difficult problems, the National Silicosis Conference was organized through the U. S. Department of Labor; some of the complicated problems arise because the control of silicosis involves examinations and in some instances, removal from employment. A great portion of the work of the Federal agency thus far has been rendering service to state labor departments. In industry we still have fairly good sized groups where the management denies the existence of any health hazards. There has been no success in attempting to get physicians to report cases of occupational diseases; labor groups are largely dependent upon complaints made by workers, all of which really should be investigated before assuming that they are not well-founded. The first investigation made by the Labor Department was that undertaken by JOHN ANDREWS in 1908, when he was sent to find out about "phossy jaw." State activities in industrial hygiene have been rather recent and New York has the largest unit of 34 people, providing an inspection service, passing on ventilation plans, and doing research in general with reference to industrial health hazards. It is important to have close association of the investigation work with an enforcement department, so that the knowledge may be properly applied. Governmental bodies should provide impartial experts for use in controversial matters. It is essential that all groups cooperate in protecting the industrial workman.

DR. W. J. McCONNELL, Secretary of the Industrial Hygiene Section of the American Public Health Association, of New York City, presented the subject "Independent Programs of Investigation and Prevention." The following groups have done investigation along these lines: (1) private foundations; (2) national associations; (3) universities; (4) trade associations; (5) insurance carriers; (6) industrial and mercantile groups; (7) organized labor; and (8) independent consultants. Of the private foundations, the Air Hygiene Foundation of Pittsburgh was mentioned and the present program in this organization outlined; among the national associations, the following were mentioned: American Association of Industrial Physicians and Surgeons; New York State Society of Industrial Medicine and Surgery; the Association for the Advancement of Industrial Medicine and Surgery; Central States Society of Industrial Medicine and Surgery; Chicago Society of Industrial Medicine and Surgery; Milwaukee Association of Industrial Physicians and Surgeons; Institute of Traumatic Surgery; Michigan Association of Industrial Physicians and Surgeons; American College of Surgeons; American Medical Association; American Public Health Association; American Society of Heating and Ventilating Engineers; American Standards Association; Illuminating Engineering Society; National Safety Council; National Tuberculosis Association; Philadelphia Health Council and Tuberculosis Committee; New York Tuberculosis and Health Association; Sara-

Laboratories. Of the universities which have offered courses doing special work along these lines are Harvard, Pittsburgh, Pennsylvania, and Northwestern. Trade associations which have promoted special activities are the American Foundrymen's Association, National Association of Manufacturers, and the Portland Cement Association. Among the insurance carriers which have conducted laboratory research or field studies or have otherwise contributed to our knowledge are Aetna, Hartford, Fidelity & Casualty, Employers Mutuals of Wausau, Wisconsin, Liberty Mutual, Maryland Casualty, Michigan Mutual, Employers Liability Assurance Corp., and Zurich. Of the life companies doing group work, the Metropolitan early did work in this field. Among the employers' groups are duPont, Union Carbide & Carbon, Chrysler, General Motors, and Westinghouse Electric. The labor groups have been somewhat backward as to unofficial developments, the exception being the Union Health Center of New York, which was established in 1934. (*Editor's note*—it is impossible to even sketch the activities of these various organizations in this abstract. Reference should be made for summaries of these activities to DR. McCONNELL's original paper, when it is published.)

Tuesday Afternoon Session

DR. HARRY MOCK, of Chicago, presented the subject "Industrial Surgery from the General Surgeon's Point of View." DR. Mock sketched the advances made in industrial and traumatic surgery during his 30 years' experience. Too often the surgeon is unprepared for the doing of major surgical work, and there is a distinct ethical principle involved here. Insurance companies have become greatly interested in industrial and traumatic surgery and have gradually insisted upon a better class of treatment. The railroads have done a great deal to elevate the plane of traumatic surgery—there are now 20 railroad surgeons' associations, large and small, where there were none 30 years ago, and the staffs of these groups have set a high standard. Emergency surgery has accomplished a great deal and there have been a number of advances, among them improvement in the technique and intelligent use of blood transfusion, and an outstanding improvement in the technique of care of skull fractures. New groups have been springing up all over the country in relationship to the practice of traumatic surgery, the latest being the American Association of Traumatic Surgeons. The quality of surgery in compensation cases at the present time is as good as that in private practice.

IN THE SYMPOSIUM ON MEDICAL SERVICE IN SMALL INDUSTRIAL PLANTS, DR. DONALD M. SHAFER, Consultant to the Committee on Healthful Working Conditions, National Association of Manufacturers, New York City, presented the paper on "Statement of the Problem," by DRs. VICTOR G. HEISE and DONALD M. SHAFER. In attempting to define what is meant by a small manufacturing group or a small plant, such a connotation has a different meaning in different trades. For a plant of 200 per-

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