“Declare the past, diagnose the present, foretell the future.”

—Hippocrates
Introduction to the Centennial History of the American College of Physicians

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The American College of Physicians (ACP) is celebrating the 100th anniversary of its founding in 1915. To celebrate that milestone, the ACP Board of Regents commissioned a centennial “history.”

This history is a collection of stories chronicling the environment and events that shaped and defined the College as the professional society it is today. The stories were truly written by hundreds of Members, Fellows, Masters, College leaders, and ACP staff who contributed time and talents to ACP through chapters, committees, councils, boards, meetings, publications, and public presentations over the century. A timeline of major events and historical figures that helped shape the first 100 years of the College history is online at www.acponline.org/about_acp/history/timeline/. In recording this centennial history, the editors and authors are deeply grateful for all these contributions. The title, *To Serve Our Patients and Profession: A Centennial History of the American College of Physicians (1915–2015)*, reflects the way the College sees itself as a service organization to put patients first and to preserve and enhance the best traditions of our profession.

To understand how the College and American medicine evolved over the past century, we sought to document what happened within the College during that time as well as why and how these events transpired. What were the critical actions taken by the College leaders, either prospectively, as the future was anticipated, or in response to external forces? The ACP Archives provided much of the historical detail for each of the chapters, although there were some restrictions on access to committee minutes as determined by the Board of Regents (BOR).

Five previous published ACP histories—by Piersol (1), Morgan (2), Rosenow (3) Moser (4), and Lemley (5)—detail our first 75 years. The authors and editors relied on these records as foundations for their work here. Accordingly, the centennial history more strongly emphasizes the past 25 years—1990 to 2015—and for some of the chapters the history began only in the last quarter century. Major external events—such as the state of medical education and practice in the early years; the influenza epidemic of 1918; the world wars; the Great Depres-
The College has survived and thrived by being an adaptable organization. Its adaptability is well illustrated by its embracing, initially reluctantly then wholeheartedly, the changes that came with the digital revolution.

The digital revolution began in about 1980 and involved changing from analog and mechanical technologies to digital technology for information exchange, changes discussed at the College very early. It is easy now to forget how physicians communicated before 1980. Most physicians and hospitals were then still completely dependent on the typewriter and handwritten communications. Medical libraries were full of traditionally produced books and bound medical journals. Many physicians recall going to the library to use Index Medicus, a record of the tables of contents of medical journals begun in the 1870s.

The first ACP membership database “computer” was installed in the College in 1970. By the early 1980s the ACP, through its members, committees, and staff, was at work to understand the potential of computers and digital technologies. For example, at its January 1983 meeting, the Educational Policy Committee (EPC) discussed computerization of the offices of ACP, development of a computer version of MKSAP VII and buying a mainframe computer. The Telecommunications Subcommittee discussed these topics, as well as the ACP’s potential uses for videotapes for teaching and a “hands on computer workshop” at the upcoming annual meeting in Atlanta. Richard J. Reitemeier, MD, MACP, then ACP President, met with the Committee and advised that he hoped by December 1983 the BOR would have clear policy regarding the new information management technologies. The EPC strongly recommended that the BOR adopt a proactive position and recommended the topic “Computers and Clinical Medicine” as the theme for the 1985 Annual Meeting, but it was disappointed when the Scientific Program Committee chose “Carcinogenesis.” On learning that its recommendation had been rejected, the committee reaffirmed its conviction and proposed a new theme, “Medical Informatics,” for the next meeting, believing that it might sound more appealing.

The College hired computer experts as consultants, and Ted Shortliffe, MD, PhD, MACP, a national leader in the development of medical informatics, agreed to develop a questionnaire to assess interest in an ACP users’ group. Beginning in 1984 the Educational Policy Committee, chaired by Jordan Cohen, MD, MACP, focused on MKSAP, including such enhancements as indexing questions and potentially adding more illustrations, and even motion and sound.

The BOR, in response to strong urging from the EPC, approved hiring a Director of Medical Informatics at the November 1985 meeting, but the recruitment proceeded very slowly.
Frank Davidoff, MD, MACP, began work at ACP on 1 July 1987. He accepted and endorsed plans for a vigorous effort to build medical informatics. In the interim, he became deeply involved in the computerization of MKSAP, fostered development of the Clinical Efficacy Assessment Project, new versions of the In-training Exam, and applications of information technology to membership and other College activities. It was fortuitous that not too long after Dr. Davidoff came to ACP, the new headquarters building was opened, with careful consideration to the wiring and infrastructure needs for computers and connections, a woefully difficult problem at the old headquarters. The new headquarters and the emergence of the Internet were a fortuitous and powerful combination for advancing the missions of the College.

After Dr. Davidoff’s appointment, the focus was still on MKSAP. Creating a searchable version of MKSAP, called “HyperMKSAP,” was the first project, a CD version with answers on paper. To move materials to the Internet for web-based distribution required an online address. The College tried to get the address “acp.org,” but it was not available because it already belonged to the American Center for Physics. ACP committees and staff came up with many ideas, but finally settled on “acponline.org,” the address the College is still using.

The ACP Associates were important voices calling for more Internet applications for information and communication. ACP soon created Resnet. This CompuServe-based, resident-driven project was really a forerunner of chat rooms. Resnet was a good idea, but it was not used as much as expected. At the time managing content was just too complicated and difficult, and it was finally discontinued in the late 1990s. Similarly, by the mid-1990s, the Board of Governors had burgeoning interest in Internet applications: to communicate with members, to plan annual chapter meetings, and to connect with one another and the Philadelphia office and leadership. “Governor’s Assistant” was started, but too many governors and members did not have e-mail addresses or use the Internet. As a result this idea also floundered for a while. After Dr. Davidoff became editor of Annals, he led the journal to become an online publication. His successor as the College, Senior Vice President for Education Herbert Waxman, MD, FACP, continued the emphasis on finding ways to facilitate uses of information technology (IT) in all of ACP’s educational programs and services.

By the late 1990s IT was part of almost every activity of the College: planning and conducting meetings, workshops to help members move into the digital age, planning and distributing educational materials, and making ACP materials increasingly available through the ACP Website.

The Chapters

This centennial history has 14 chapters written by 29 authors, all knowledgeable about the subject matter of their chapters. The selection of the topics for the book was influenced and to a large extent determined by centennial history topic surveys of the College membership, College governance (dating back to 1990), and the College staff, all conducted by the College Research Center. The response to the surveys was heartening—there was and remains great interest in the history of the College.

The titles of the chapters and their authors are profiled in the table of contents. The reader will be treated to a series of authoritative and topical stories, which can be read in sequence or individually; each chapter is a self-contained story.

“First 75 Years: 1915–1990” (Chapter 2) was written by two former ACP Presidents, Clifton R. Cleaveland, MD, MACP, and Fred Ralston Jr., MD, MACP, and details the first 75 years
of the College’s existence. It begins with the vision of one man, Heinrich Stern, MD, a New York physician who was heavily influenced by the Royal College of Physicians of London. Stern sought to develop a comparable but very American College of Physicians, an organization whose mission would be to improve the educational and medical practice standards of American medicine, a vision embodied in the Mission and Goals of ACP in 2015. The reader will see that the College went through several periods, some quite difficult, moving from a fledgling autocratic organization to a stable and increasingly democratic professional society and, finally, to an outward-facing and influential College.

“Leadership and the American College of Physicians” (Chapter 3), authored by Walter McDonald, MD, MACP, and Alan R. Nelson, MD, MACP, former Executive Vice Presidents of ACP and the American Society of Internal Medicine (ASIM), portrays the critical importance of leadership in the history of the College. There are many examples in the ACP history where leadership was sorely needed and the right leaders stepped to the fore and guided the College around treacherous shoals. One such example was the aftermath of the death of the College founder, Heinrich Stern, in 1918, when the College was temporarily without the leadership it needed to survive. A self-appointed “Rescue Committee” of Frank Smithies, MD, MACP (Chicago), Clement Jones, MD, FACP (Pittsburgh), and William Gerry Morgan, MD, MACP (Washington, DC), persuaded the governing council (all New York members) to make the College a broader national organization, reorganize the College administration, and move the headquarters to Chicago. In retrospect, this intervention likely saved the College.

Drs. McDonald and Nelson were influential leaders of the successful merger of ACP and ASIM in 1998. They describe three distinct leadership stages in the evolution of the College over the past 100 years, stages that, when completed, strengthened ACP as a leader within American and international medicine. These stages are:

- The evolution from an autocratic toward a more democratic organization;
- Moving from an exclusive to an inclusive organization; and
- Moving from an inward-looking to an outward-acting organization.

Subsequent chapters present the story of how ACP progressively engaged in public policy and advocacy, promoting better health care, and becoming an international organization.

“Historical Perspective on the Annual Session and Chapter Meetings of the American College of Physicians” (Chapter 4): Jack Ende, MD, MACP, Regent and former Scientific Program Chair of the ACP IM 2009 national meeting, and Marie Brown, MD, FACP, Governor (Illinois) and former Scientific Program Chair of the ACP IM 2007 annual meeting, wrote this chapter. Although informal clinical sessions had been associated with College meetings as far back as 1917, the first formal ACP scientific session—plenary topics included tuberculosis, syphilis, general medicine, and practical record keeping—was held in Chicago in February 1920, beginning a long tradition of educational excellence. The annual meeting also established important traditions honoring excellence in internal medicine and fostering collegiality within the profession. With the exception of the World War II years, ACP has held annual scientific sessions, which are now the flagship meetings of internal medicine. Regional scientific
meetings, particularly as the College regional, state, provincial, and international chapters developed, also flourished and are detailed in this chapter.

“Annals of Internal Medicine 1927–2015: Helping Define Internal Medicine” (Chapter 5), written by Thomas John (Jock) Murray, MD, MACP, former Chair of the ACP BOR, and an accomplished author and editor, is devoted to the history of *Annals*, which began publication in 1927 and has evolved into a widely respected peer-reviewed scientific journal that also provides practice guidance to the profession. *Annals*, ably guided from its inception by excellent editors (who are profiled in the chapter), is now one of the top five medical journals.

“MKSAP: The Medical Knowledge Self-Assessment Program MKSAP” (Chapter 6) was written by Philip Mackowiak, MD, MACP, Emeritus Professor of Medicine at the University of Maryland, former ACP Governor, and author of *Post Mortem* (published by ACP), and Philip A. Masters, MD, FACP, MKSAP17 Editor-in-Chief, accomplished medical educator, and ACP Senior Physician Educator and Director of Content Development. MKSAP, now in its 16th edition, has a long and remarkable history of helping members to assess and understand their medical knowledge, address knowledge gaps (a fundamental tenet of professionalism), and prepare College members via innovative digital and Internet-based formats for high-stakes exams, such as those used in the American Board of Internal Medicine certification and recertification exams.

“Evidence and Clinical Practice: The College Guidelines Program, Physicians’ Information and Education Resource (PIER), and Smart Medicine” (Chapter 7): Harold (Hal) Sox, MD, MACP, a former College President, Clinical Efficacy Assessment Subcommittee Chair, *Annals* editor, and Chair of the U.S. Preventive Services Task Force, wrote this chapter. This chapter primarily focuses on the history of the College’s Clinical Efficacy Assessment Project, which continues today as an exemplar of clinical guidance for physicians based on the systematic review of scientific evidence. PIER was an early and serious effort to bring current practice knowledge to the clinician and bedside in the form of guidance statements, predicated on the available evidence. The innovative approach to clinical-decision support embodied in PIER continues today in the form of ACP Smart Medicine, an online clinical-decision support tool that delivers point-of-care access to evidence-based recommendations.

“Books to Health Tips: ACP Publications and Communications for Physician and Patient Education” (Chapter 8) was written by Dennis Schaberg, MD, MACP, former Regent, ACP Treasurer, Chair of the ACP Publications Committee; Donna Sweet, MD, MACP, former Chair of the Board of Regents, Chair of the Board of Governors, and the ACP Foundation; and Allison Ewing, ACP Director of Public Relations and Web Communications. It chronicles the College history of communicating news and other popular information to its members and patients. Communication efforts include the current *ACP Internist* and *ACP Hospitalist* and their predecessor publications. ACP also provides educational material for physicians and patients through a range of vehicles (other than *Annals* and MKSAP), initially via books and other printed materials and now primarily through the College Website and other electronic formats. The ACP Foundation, founded in 1998, greatly improved our understanding of health literacy and how best to begin to address literacy challenges for our patients.
“Ethics and Professionalism: Professing and Living Our Principles” (Chapter 9): The College, a moral community defined by the highest ethical and clinical standards from the very beginning of its history, has asked its member Fellows to pledge to conform to the College ideals and promise to uphold those ideals in the practice of medicine. This chapter, detailing the history of the College’s work in developing and promulgating standards in ethics and professionalism, was written by Joseph Fins, MD, MACP, former Chair of the ACP Ethics Committee, and Lois Snider Sulmasy, JD, the Director of the College’s Center for Ethics and Professionalism. ACP Ethics Manual, first published in 1985 and now in its sixth edition, and the Physician Charter on Medical Professionalism, published in 2002 in Annals, are examples of the ethics and professionalism work developed and published by ACP and the ACP Foundation.

“The Quest for Diversity and Inclusiveness at the American College of Physicians (1915–2015)” (Chapter 10): ACP began its history in 1915 as an autocratic organization of white men; the first women were elected to Fellowship in 1920, a seminal moment in College history. Wayne Riley, MD, MPH, MBA, MACP, ACP President-elect, and Valerie E. Stone, MD, MPH, FACP, former College Regent, are very knowledgeable about diversity—gender, ethnic, and racial—and about disparities in the care of our patients. Their chapter details the ACP progress, at times difficult, toward becoming a democratic and professional organization in which the rights and privileges of membership are granted to all members and for our patients to be treated with equity and respect, regardless of circumstance.

“The American College of Physicians and Public Policy” (Chapter 11) was written by two experienced and knowledgeable authors and leaders, Lynne Kirk, MD, MACP, former ACP President and ACP Health and Public Policy Committee Chair, and Robert Doherty, ACP Senior Vice President, Government Affairs and Public Policy. The College, from its founding, focused on its educational mission and assiduously avoided health policy and politics until 1978, when the Division of Health and Public Policy was established; a Health and Public Policy office opened in Washington, DC in 1980. The College has undertaken major policy initiatives, including developing a broad body of health policy for the complex Affordable Care Act (ACA) and coalition leadership, with key stakeholders, to advocate for its passage with the Congress and White House. The merger of the College and the ASIM in 1998 reinforced and solidified the ACP–ASIM policy and political presence in Washington and, to a large extent, nationally.

“Improving Health Care Delivery” (Chapter 12): The practice of medicine has evolved remarkably since the practice days of Dr. Richard Cabot in the Back Bay of Boston. Over the past hundred years, medical practice has advanced in ways unimaginable to an internal medicine specialist in 1915. The explosion of knowledge and the internist’s ability to access and mobilize that knowledge, especially over the past 30 to 40 years, have dramatically altered the delivery of care. The division of labor in the care of patients continues; with the hospitalist movement, no longer does a general internist typically care for patients in the outpatient and inpatient settings. This important story of the reshaping of medical practice is told by Yul Ejnes, MD, MACP, former Chair of the BOR and an internist in private practice in Cranston,
Rhode Island; Jamie Newman, MD, FACP, a hospitalist and medical historian at the Mayo Clinic in Rochester, Minnesota, and leader of the Society of Hospital Medicine; and Michael Barr, MD, MBA, FACP, the former ACP Senior Vice President of the Division of Medical Practice.

“The American College of Physicians as an International Organization” (Chapter 13) was authored by Virginia Hood, MBBS, MPH, MACP, former ACP President and Professor of Medicine at the University of Vermont, who hails from and trained in Australia; José A. Rodriguez Portales, MD, MACP, Professor of Medicine at the P. Universidad Católica de Chile in Santiago; and James Ott, the ACP Senior Vice President, International Programs. After 100 years, the American College of Physicians is poised to realize its potential as a global organization, now having 15 international chapters on 3 continents and over 11,000 members in 132 countries on 6 continents. However, as the story will tell, evolution toward a global organization happened episodically over the century and was not without opposition.

“The Future of the American College of Physicians and Internal Medicine” (Chapter 14): This final chapter in the College centennial history is authored by Robert M. Centor, MD, MACP, the current Chair of the BOR, and Steven E. Weinberger, MD, FACP, the College Executive Vice-President and CEO. What will the future hold for ACP and internal medicine as we look back on the past 100 years? Will we know how to succeed as an organization over the next century of progress and change? ACP is in a much better position to address those challenges than our founders were in 1915—and they succeeded. Drs. Centor and Weinberger are well positioned to answer those questions for us.

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References