

or to publish cases and operations in the daily prints, or suffer such publications to be made; to invite laymen to be present at operations, to boast of cures and remedies; to adduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

The Committee also drew the attention of the Association to article 4, sec. 1, of the American Medical Association's code, as follows:

A regular medical education furnishes the only presumptive evidence of professional abilities and requirements, and ought to be the only acknowledged right of an individual to the exercise and honors of his profession. Nevertheless, as in consultations the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner who has a license to practice from some medical board of known and acknowledged respectability, recognized by the American Medical Association, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But no one can be considered as a regular practitioner, or a fit associate in consultation, whose practice is based on an exclusive dogma to the rejection of the accumulated experience of the profession and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry.

As another matter which comes under this head, the committee would mention the injustice of the present system of club practice. In this province benefit societies are increasing in number every year, and the fees given for medical attendance are in most cases quite inadequate. Your committee think it might be well for the Association to give an opinion upon this subject.

Considerable discussion followed the reading of this report, which was adopted.

On the motion for the adoption of this report, Dr. Ross condemned club doctoring as commonly carried on. Dr. Oldright pointed out that a specialist might be excused for advertising his specialty for the purpose of notifying the public that he did not wish for general practice. Dr. Burnham argued that his experience showed that it was not even necessary for a specialist to advertise his specialty on the

door-plate to escape demands for general practice. The report was adopted.

The treasurer's report was a favorable one, showing \$109 to the credit of the Association.

Dr. Henderson introduced the report of the committee appointed to consider the question of a medical defence union as follows:—

The committee appointed to report on the motion of Dr. Henderson, regarding the formation of a medical defence union, beg to report that in their opinion it is desirable to appoint a committee whose duty it would be to consider appeals from members of this Association who may consider themselves persecuted by unfounded and malicious accusations. If requested, this committee will give professional advice to any member of this Association who may be defendant in a case of surgical malpractice, the Advisory Committee to consist of Dr. Moore, Brockville; Drs. Sullivan and Henderson, Kingston; Dr. Day, Trenton; Dr. Malloch, Hamilton; Drs. Thorburn, Richardson and White, Toronto; Dr. Eccles, London; Dr. Harrison, Selkirk; Dr. Taylor, Goderich; Dr. Thorburn chairman of the board. The report was adopted.

The Nominating Committee brought in the following nominations of officers for the ensuing year:

President, Dr. J. W. Rosebrugh, Hamilton; First Vice-President, Dr. H. M. McKay, Woodstock; Second Vice-President, Dr. Moore, Woodstock; Third Vice-President, Dr. Adam Wright, Toronto; Fourth Vice-President, Dr. Taylor, Goderich; General Secretary, Dr. J. E. White, Toronto; Treasurer, Dr. N. A. Powell, Toronto; Corresponding Secretaries, Dr. Fenwick, Kingston, Dr. McPhatter, Guelph, Dr. R. W. Powell, Ottawa, Dr. Shaw, Hamilton.

The nominations were adopted without amendment.

Dr. Richardson, the retiring president, then led his successor, Dr. Rosebrugh, to the dais, and that gentleman thanked the Association for the honour conferred on him.

The Association will again meet in Toronto next year.

NOTES.

We trust the guests of the Association at future meetings may have more attention paid