mistake is not so serious and does not unman him, as it would if he were working on a patient. By the time the course is completed he is in a position to take a patient without doing the individual an injustice. He has learned manipulation. He knows where to expect pulp exposures. He is informed as to the number of pulp canals in certain teeth, and where the openings ought to be. In short, he has built the foundation, and I verily believe he has built it in the proper way. I know of no other system so effective and practical for the beginner. I do not believe its importance is fully realized by the profession."

This department, including prosthetic technics, has become so general in the dental colleges of this continent that a National School of Dental Technics was formed last August, consisting of the professors and demonstrators in this subject from the different colleges. This is not in any sense a legislative body, but a gathering of instructors to discuss the best methods of carrying on this branch of dental education. Dr. D. M. Cattell, of Chicago, is president of this organization. In a paper read by him before the World's Columbian Dental Congress, he sums up the aims of this

course of instruction under four heads:

" I. Manual training.

"2. System. Each step following the other in methodical order.

"3. A greater familiarity with teeth. Outward forms, inner channels, structure and plan of development.

"4. Individual reasoning. Teaching students how to think for

themselves, to believe nothing just because 'Pa says so.'"

In March, 1893, the Board of Directors of the Royal College of Dental Surgeons of Ontario decided to introduce a course of technics into the curriculum of their College. After one year's experience of its benefits, the course was considerably extended. It includes both operative and prosthetic.

OPERATIVE.

The work in this branch includes: I. A study of technical terms. This is an explanation of most of the terms used throughout the course.

2. Topographical anatomy of the teeth. As far as possible each student is suplied with a typical tooth of each class. The several surfaces, lobes, developmental lines, sulci and other surface markings are noted. The upper and lower teeth are compared as also the temporary and permanent.

3. Macroscopic anatomy—cutting sections longitudinal and transverse. Printing silhouettes with these sections. Studying form, location and size of pulp chamber and canals and thickness of enamel and relative proportion of crown and root. Each student must be supplied with a vise and file. He selects a tooth from a