

Friday, 7th April.

From 9 to 11 a.m.—Materia Medica and Therapeutics.

“ 3 “ 3 p.m.—Midwifery other than Operative.

“ 3½ “ 4½ p.m.—Botany.

Saturday, 8th April.

From 9 to 11 a.m.—Theory and Practice of Medicine.

“ 11½ “ 12½ p.m.—Surgery other than Operative.

“ 3 “ 5 p.m.—Anatomy, descriptive.

“ 5½ “ 6½ p.m.—Anatomy, surgical.

The written examinations terminate on Saturday the 8th April, and the oral examinations take place on the Tuesday and Wednesday following.

On the day preceding the commencement of the oral examination the examiners shall meet and be constituted.

*Examiners and subjects for 1871.*

1. Dr. Sullivan.—Anatomy, Descriptive and Surgical.

2. Dr. H. H. Wright.—Theory and Practice of Medicine and Medical Pathology.

3. Dr. Sangster.—Chemistry Theoretical and Practical.

4. Dr. Covernton.—Physiology.

5. Dr. Hope.—Midwifery.

6. Dr. Tuck.—Materia Medica.

7. Dr. Sweetland.—Medial Diagnosis and Toxicology.

8. Dr. Lizarz.—Surgery.

9. Dr. Campbell.—Medical Jurisprudence.

10. Dr. Field.—Surgical Pathology.

11. Dr. Cornell.—Botany.

12. Dr. Carson.—Sanitary Science.

### EMBRYOTOMY AND STRYCHNINE.

We have received a communication from Dr. Doig, in which he speaks of having performed embryotomy in a case of arm presentation, where the woman had been in active labor four days before he was called. The waters having escaped two days before, and the uterus being strongly contracted down on the child, he found it impossible to turn, and hence very properly resorted to the above operation, which he completed with the aid of such humble instruments as a clasp-knife, “sharpened at the point and blunted at the heel, with a piece of stout wire, bent at both ends, for a tractor;” and notwithstanding the length of time the woman had been in vigorous labor, she made a good recovery. He also mentions five cases of what appear to have been strychnine poisoning; four ending fatally, three, at least, in the same

family; but he offers no explanation as to the introduction of the supposed poison. We propose sending a Toronto Coroner out there, as they evidently have nothing of the kind in that section.

### THE SYME TESTIMONIAL.

We have much pleasure in calling the attention of our readers to the fact, that a testimonial is about to be presented to Professor Syme, on his retirement from the chair of Clinical Surgery in the University of Edinburgh. The testimonial will take the following form:—1. A Fellowship for the promotion of Surgery in the University of Edinburgh, to be called the “Syme Surgical Fellowship;” and 2. A Marble Bust, to be placed in the University Library, or in the Hall of the New Royal Infirmary. The sum required for the proposed testimonial will be not less than £2,500 stg. The general committee for promoting the objects of the testimonial is composed of 350 gentlemen (former pupils of Mr. Syme, and others). Gentlemen in Ontario, wishing to add their names to the subscription list, will be furnished with circulars, by application to Dr. Norman Bethune, 24 Gerrard Street East, who is also authorized to receive subscriptions.

### HOMŒOPATHIC DIAGNOSIS.

A few months ago a certain Homœopathic practitioner, near Allegan, in the State of Michigan, was sent for to attend a lady in her confinement. On his arrival at the house he found her sitting up, (labor having only commenced,) when he examined her pulse, looked at her tongue, and made sundry enquiries which caused the husband to say, “Doctor, I fear you don’t understand my wife’s case,” to which he indignantly replied, “indeed sir I know all about it, for I had a man in just the same state last week down in Martin.”

### Correspondence.

#### FROM OUR NEW YORK CORRESPONDENT.

NEW YORK, May 3rd, 1870.

I begin my correspondence for the DOMINION MEDICAL JOURNAL by the details of a controversy in progress between two surgeons of this city, one of whom at least is known to fame. So far as the facts of the question in dispute have been made public they are these:—Dr. A. published in the January No. of the *N. Y. Medical Journal*, a paper entitled “Contributions to Practical Laryngoscopy.”