The system of teaching I have referred to is commonly digression. known as the "Edinburgh method." In reality, it is the German method-though it eventually came into force in the famous Scotch school. Graves, in the introduction to his "System of Clinical Medicine" (published in 1843), speaking of methods of clinical teaching, draws attention to the lack of personal work on the part of the student in the medical schools of Great Britain, and contrasts these with the schools of France and Germany. In France the system adopted was certainly an improvement on the methods in vogue in his own country, but there were still many defeets. For the German method, however, he has nothing but praise, and describes somewhat in detail the manner in which the "praktikant" is required to examine, report and even prescribe for cases in the hospital, undergoing on all these points a strict cross-examination by the physician in the presence of his fellow-students.

To return to the theme; I wish to insist on the point that in clinical work you are to be actors, not passive spectators or supernumeraries on the scene. Avoid perfunctory performance of your hospital duties, and when you are reporting a case do so with as much zeal as if it were your first patient in practice. There is no better training than that obtained by thorough and independent examination at the bedside, controlled subsequently by your teacher's criticism. The cliciting of information, the careful sifting and arrangement of the patient's statements-one of the most difficult arts to acquire, and not unlike the cross-examination of a legal witness; the thorough and systematic physical examination-which tests your knowledge of normal signs and appearances; and finally the process of reasoning called into play in making a diagnosis from the data obtained-all these are mental exercises of great value, and require the exercise of your best intellectual powers. The committing of the whole to paper, in the shape of an orderly and well-written report-so seldom met with-cultivates precision of thought and diction-" writing maketh an exact man."

To make rational inferences from correct observations is in a few words the gist of the problem involved in the diagnosis of disease. At times this is an easy matter, given an accurate history and unequivocal signs of disease: at others, the indications are so scanty or obscure as to tax the ablest clinician's powers of observation and reasoning. You may have wondered how in certain cases a correct diagnosis has been reached from isolated and seemingly trivial signs. There is, however, nothing marvellous in this, it is not intuition, nor is there any mystery about it—nothing more than the facility