

Notwithstanding the eloquence of the *Arena* article, sixteen of the most enlightened physicians of the United States have taken up the standard of state qualifications for all; New York and Pennsylvania are among the number, and now the law is that "in all cases a foreign physician is required to take an examination before one of the state boards before he can be legally licensed." The clause in the New York law permitting the endorsement of licenses from other state examining boards, applies solely to other states in that country, and is at present inoperative, as no state maintains in all respects the requirements fixed by the New York law.

If a doctor from Prince Edward Island were to move from here to the State of New York, although legally qualified in this province for twenty years, he must take an examination before he can be a legal practitioner there. New York has the undoubted right to take this stand, and we have the undoubted right to require also that all New York and all other physicians take an examination before our state boards before they can be legally licensed, and our standard in medical education is higher than that of New York.

Let no man therefore take up the false cry of monopoly in this matter. Improvement in the quality of the article cannot be called class legislation; and mighty as the article of the *Arena* appears, it hits away and beyond the mark, and misconstrues entirely the great object and aim of higher medical education.

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## Original Communications.

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### MISTAKES IN PRACTICE.\*

BY DR. GEO. HODGE.

It is often said, and I believe truly, that we learn more from our mistakes than from our successes. This being so, I should now be fairly well learned. As I can look back upon the past and readily recall many, too many, of them. As experience, often dearly bought, on the part of the doctor and patient is our best guide amidst the pitfalls that surround us, I think it a profitable task to go over

the ground of our past experiences and gather up the lessons taught us by our failures and mistakes.

Mistakes may be divided into two classes, viz., avoidable and unavoidable. I wish to-night to speak of the former class only, and in doing so it will be necessary for me to use the personal pronoun "I" more frequently than I otherwise care to, as I draw almost exclusively from my own experience.

I believe that avoidable mistakes are for the most part due either to carelessness in the examination of the patient or to our approaching the case with a pre-conceived opinion as to what is the matter, and thus we shut our eyes to facts which would be patent enough if we brought an unprejudiced mind to the case.

During the early years of my practice, I was called to attend a young man suffering from pneumonia. He was very ill and at the end of the time when convalescence usually commences, the temperature, instead of becoming normal, kept up; the cough, instead of disappearing, continued and was dry and barking; the lung, instead of clearing, remained dull. These symptoms, with the physical signs that must have existed had I looked for them, were surely enough to make me suspect the true nature of the case; however, I looked upon it as a case of consolidation of the lung following pneumonia. An old practitioner was called from a neighboring town. In consultation he agreed with me that it was a case of consolidated lung and attributed the cough to an elongated uvula which he promptly removed, without, however, affording any relief to the cough. I never even suspected what was the matter with this patient till he fell into the hands of another practitioner, who was fortunate enough to diagnose the case as one of *empyema*. An operation was suggested and readily agreed to by his friends, with the result that the patient immediately after the operation began to improve and soon regained his former state of health. At the time I felt very much crestfallen on account of this error, but I have since then learned that there is no more common source of error than the subtle development of *empyema* after an acute illness. I have more than once had a sort of satisfaction in finding that others make this same mistake, and I cannot but think that two of this society who

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