

past, in this Province, have been changed. If amendment means improvement, correction, change for the better, then have I difficulty in unreservedly qualifying the hasty legislation in the ancient capital, last session, where three bills went in, to satisfy the fancies of three orders of mind, and one came out, satisfying fully, I believe, no order of mind.

The Province of Ontario has a central examining board, and the medical press and profession of that Province have pronounced in its favour. The Province of Quebec has, as yet, no central board, yet nothing short of it will satisfy the wishes of those who look only to the well-being of the profession, and of the community.

Medical education, as well as the preparation for it, belongs to each Province. It is useless, therefore, to speak of medical legislation for the whole Dominion; or of having a medical act to apply to, and to govern, the whole Dominion. But it should be an easy matter to introduce measures simultaneously, in the several Local Legislatures, each for its own Province, yet all alike, so that the practitioner in one part of the Dominion could be a practitioner in all; but central examining boards, one for each Province, and an uniform standard for the whole, must be elements in that system.

To compel persons, having a license to practise in one part of the Dominion, to obtain another to practise in another part of the same Dominion, seems to be an anomaly, but an anomaly which can be remedied only by a parity of medical legislation in the several Provinces.

How much more liberal is the present action in Great Britain, where the English College of Physicians has passed a by-law, by which even foreign practitioners may be legalized in England. Any candidate for the College license "who shall have obtained a degree in medicine or surgery at a British, Colonial, or Foreign University, recognized by the College, after a course of study, and an examination satisfactory to the College, shall be exempt from re-examination on such subjects as shall in each case be considered as necessary."

In this way, foreign and colonial practitioners may join the English College of Physicians, and so "find entrance to the Register"—the Medical Council of Great Britain still retaining the duty of accepting the conditions for admission to the Register of foreign graduates. It appears to me to be the duty, as well as the interest of this Association, to endeavour to effect such changes as would lead to a like generous action.

In our recent act, some most serious defects occur which, it is to be hoped, may soon be remedied. As the law now stands, it is competent for one or two persons in the large cities, not over-scrupulous as to means, so to gather up and manipulate proxies as to change the composition of the Board at an election. One active

man in Quebec or Montreal may control matters at any time for the whole Province, and practitioners residing in the town, or in country districts, may, without their knowledge or consent, be made instruments for the purpose. In Ontario, it is different. There, each medical school has *one* in the Council of the College of Physicians and Surgeons, not *two* as here; and those outside the teaching bodies must not only be residents of the several territorial divisions for which they are elected, but "one shall be so elected from each of the territorial divisions by the registered practitioners of Medicine *resident in such division.*" And the divisions are those "as established previous to the Confederation of the British American Provinces for election of members of the Legislative Council of the late Province of Canada." With us each member of the College of Physicians and Surgeons, the moment he enters the profession has 40 votes for election purposes! He may use one in favour of the representative of his district or division, and still have 39 votes remaining for those outside of it; and may either vote, or transfer them to the most clamorous. It may be readily understood how such a defect in a law might lead to unseemly cabals, if not to confusion and injustice. It is to be hoped the anomaly that exists in our election procedure in this Province,—an anomaly for which I can find no parallel elsewhere,—will be removed.

QUALIFICATIONS FOR PASSENGER SERVICE.

Through the medical press of this country, attention has been drawn to the refusal to recognize Canadian qualifications for emigrant and passenger service on board British ships; and the matter has been taken up by the Transatlantic Medical Press and the Medical Council of Great Britain. The Board of Trade has rescinded the order, and Canadian Surgeons continue to exercise the privileges they have enjoyed, since emigrants first came to our shores. But the law still exists, and it is competent for the British authorities to return, at any time, to their former action. The qualifications of holders of Canadian diplomas have not yet been recognized, but their continued employment is acquiesced in. Many have asked that the subject be settled definitely. How can we ask for it till we obtain for the holders of Canadian diplomas recognition all over our own Dominion? Can we ask Great Britain to concede to us what we do not concede to each other? I say this, not to interfere with the courteous and most generous action on the part of the British authorities, but to stimulate you to renewed efforts to make such satisfactory arrangements as will enable holders of diplomas from one part of the Dominion to practise in all. The profession of medicine is a liberal one; not mean, narrow, or selfish. Being liberal, although