CHAIRMAN—No, I am sure not. I would not think it was wise to have it.

DR. PRIMROSE—You could not have a purely consulting surgeon. You refer practically to medicine?

CHAIRMAN—Yes.

Dr. Reeve-You will remember that some time ago in speaking about some of the problems in connection with the hespital and University work, I mentioned that it was largely a matter of expense. If the trustees and governors wish to adopt a cast-iron rule, and pay the professors all round the same salary, they cannot get the men to do the work on the medical side, because they cannot afford to give up private work and consulting practice, so as to attend to their duties in the hospital, and as teachers also, without being recompensed. The governors and trustees must face this financial situation, and in the major departments must be prepared to recompense men so that they can give the time for teaching and for charity work and make all that is necessary from consulting practice. But it cannot be done if the governors of the University refuse to pay the medical men any more than they are paying the professors in Arts. It is in the air that these gentlemen are to get \$4,000 a year. You cannot get first-class talent in the medical profession for \$4,000.

Dr. Orn—I desire to ask Dr. Davison and Dr. Caven if they think the one-head principle, both in the University and in the Hospital, would tend to develop the best type of medical

student or medical practitioner.

Dr. Davison- $-\bar{No}$, I think not. I think two or three services would develop the best student and best practitioner.

Dr. Trow—I think our Dean is right in regard to this German one-man system. I spent a couple of years in Germany. The men who are at the head of departments are paid by the government, and they are paid liberally. In Germany things are all run on the military basis, and they think that they cannot run anything unless they have a captain at the head of it.

Prof. Mackenzie—To-day the medical clinic is not quite the same as that of twenty years ago, or even ten years ago. If the clinical work in the Toronto General Hospital is to improve, there must be attached to the medical services a laboratory in charge of a competent chemist. It is important that the patients should have the benefit of the latest chemical investigation. There should be investigations under a trained chemist of blood, of urine and feces; that is what they have adopted at Johns Hopkins, and is the so-called German system. Dr.