

cheap drug in small quantities, at same price, 15c.

(d) The bottle or jar used in a prescription is always charged extra, and in entering the price on a prescription it must be for the medicine only, the bottle or jar being charged for according to the schedule.

COPIES.—(a) Avoid giving copies of prescriptions if possible; but if the customer insists on it, then he must have it, but the word "copy" must not be written on it or any writing or number which would indicate the fact to other druggists that it had been put up before. The original prescriptions are always to be kept if possible, giving the customer a copy if he demands it.

(b) Under any circumstances an original prescription must never be taken out of the Prescription-book to give to the customer.

PRESCRIPTION COUNTER.—(a) The prescription clerk will see that his counters are kept perfectly clean and neat. As soon as a prescription is checked off, return the stand-bottles to their places on the shelves and clean up all the utensils used.

(b) He must see that all dispensing-bottles are kept full, or nearly so.

(c) He must enter at once on the Want-book, or on the Manufacturing-book, any article that is wanted.

(d) Quiet must be observed when compounding prescriptions, especially when the customer is present, as any loud talking, asking questions, or apparent inattention excites distrust and weakens confidence on the part of the customer.

(e) The prescription clerk must put away in their respective places all drugs and chemicals that are received in the store, and also fill all the tincture-bottles.

ADDRESS OF PATIENT.—Inquire the name and address of every person who leaves a prescription to be prepared, and write it on the back of the prescription. This precaution need not be observed if the prescription is paid for at the time it is left. But in all cases when a stranger leaves a prescription, the clerk must try and get payment in advance if it can be secured without giving offence to the customer.

Prescription Prices.

Among the many evil effects noted as coincident with the cutting of prices upon proprietary medical preparations is the extension of the warfare in many instances, so that it threatens that most important article in the druggist's stock—his skill. The bete noire of the pharmacist is now the man who can get his prescriptions filled cheaper somewhere else, and the existence of this state of affairs would seem to call for the earnest attention of the various trade organizations, and, in fact, should act as an incentive to further organization. There may be differences of opinion as to the possibility of

maintaining prices upon goods, which, like other commodities, are subject to the fluctuations incident to competitive buying and selling, but there should be no difference in the attempt to maintain proper prices upon brains. It is perfectly proper that the public, which now requires, through legal enactment, a certain standard of knowledge for the pharmacist, should be reminded that such things must be paid for, and if the druggist does not attend to this himself no one is going to do it for him.

The difficulties in the way of maintaining prices upon prescriptions are mainly those which come from a lack of fellowship on the part of members of the profession, and it only requires the sacrifice of a little superfluous pride and a great deal of unjust suspicion as to the motives and character of competitors to induce harmonious co-operation. In spite of what is said against the code of ethics of the medical profession, there is no doubt that its existence has done much to prevent the physician's remuneration being lowered to the cut-throat standard. And in this matter there are difficulties which the pharmaceutical profession does not have to meet. There are differences in the skill and reputation of medical practitioners which call for varying degrees of remuneration, but practically there should be very little, and theoretically none at all, as far as the proficiency and reputation of the pharmacist with the public is concerned. The physician depends for success upon his judgment in treating diseases, and this success is measured by the apparent results. The most complicated ailments naturally command the services of the most skilful physician, but the pharmacist, who is up to the standard which is now demanded, is competent to act as a conjudtor to either the famous city physician or his more remote prototype of the saddlebags.

The construction of proper schedules of prices and their maintenance are all within the scope of present organizations. Where there are but two druggists in a community, they should be a unit upon this point, and where there is but one, he should organize with himself for the maintenance of the dignity and well-being of his profession. There is also hope that in thus uniting upon something concerning which opinion is all upon one side, the difficulties may be smoothed for the adjustment of that other problem of cut rates upon "proprietary."—*Pharmaceutical Era*.

Interesting Exhibit.

One of the most interesting exhibits at the sixty-second annual meeting of the British Medical Association is that of Frederick Stearns & Co., of Detroit, Mich., which adjoins that of Thomas Christy & Co., who act as the firm's agents in this country. The center-piece of the stand is a small tube containing a pale brown substance in tiny crystals, to which has been given the name of "Panjecorine." The

substance consists of the alkaloids of Cod Liver Oil, and is the result of the labors of MM. Gautier and Morgues, two French chemists, who have spent a considerable amount of time in Cod Liver Oil research. The principle alkaloid in the oil is Morrhaine; next comes Aselline. Up to the present it has not been found possible to separate the alkaloids, which are here shown in combination. It is claimed that "Panjecorine" possesses two thousand times the strength of the ordinary Cod Liver Oil. Cod Liver Oil preparations are among the leading articles of Messrs. Stearns & Co., and in the firm's "Wine of Cod Liver Oil," which is also shown, the question of producing an absolutely palatable article, containing 25 per cent. of oil, as represented by its active medicinal constituents, has, it is said, been solved.—*The Chemist and Druggist, Aug. 4, 1894.*

The Deadly Chemist.

The chemist is infinitely more dangerous than the idiot with an unloaded gun. The prospective victim of the unloaded gun has a chance to reason with the demented creature by flooring him with a chair. Or, he can dodge. Not so with the absent-minded chemist's victim, who nourishes his system from a large bottle of kill-me-quick, on which, as on a tombstone, the chemist has written the victim's name and how to take it to produce the undesired effect.

The careless chemist is the enemy of the entire human family, including himself, for it is self-evident that it is a short-sighted policy for a chemist to persist in feeding his cash customers on ratsbane. Our observations confirm a previous impression that after a man has been inserted into a silent tomb he ceases to be a source of revenue to the chemist, or to anybody else except to those who have tombstones to sell. Far better would it be for the chemist to prolong as indefinitely as possible the lives of customers who buy a pennyworth of tooth-powder for a shilling, and other articles at similar rates.

It is only fair to state that the chemist is not always to blame. The modern doctor persists in following the example of his pre-Adamite predecessors in writing prescriptions in Latin, and in a hand that looks like a Venetian blind that had been twisted by rheumatism and subsequently struck by lightning.

Some of the doctors imagine that because Napoleon Bonaparte, who was also pretty good at sending people suddenly into the next world, wrote a villainous hand, their writing should also create the impression that it was done in the dark, while they were under the influence of *spiritus frumenti*—but it is a mistake.—*Amusing Journal*.

LYCETOL is recommended by Wittzack as of equal value with piperazine as a uric acid solvent. It is a derivative of piperazine, and, being very deliquescent, he prescribes it in the form of a tartrate. Subcutaneous administration is unwise.