

ificate of matriculation in arts from the registrar of any Canadian university, together with proof of having passed the examination in arts at the end of the first year. Provision is also made for students to pass a preliminary examination who failed previous to entering on the study of medicine. This more liberal policy is more in accord with that insisted upon by the General Medical Council of the United Kingdom. That body accepts the matriculation certificates of a number of examining boards, nineteen at least, as equivalent to their own, thus affirming, I think, that matriculation, as a test that a candidate is fitted to enter on his professional studies, may be accepted by them when such examination is in all respects equivalent to the standard they require. Let us hope this much-discussed question is settled now for many years. The second is the proposed lengthening of the medical session, making it eight instead six months, and reducing the number of years from five to four ; also abolishing the one summer session at present obligatory. Such a plan has much to recommend it, looked at from the students' as well as the teachers' standpoint. Everyone is aware that much more work is exacted from the medical student of to-day than from those who studied even ten years ago. More work means more time ; this the students complain they cannot have in the present session of a little over five months, not that there is any desire to increase the number of lectures, but it should be so arranged as to allow methods, practical and clinical, to have fuller scope. Again, the teacher of a didactic or even a clinical course has at present to crowd all his work into too short a period. This arrangement would make a change in this, and also allow him now and then to go to other schools while in session, observe their methods, see their hospital practice, and fit himself more efficiently for his work. As at present arranged, such visits to foreign hospitals or laboratories can only be made in summer, at which time many are closed or in charge of assistants. The measure of benefit is consequently so reduced as to make it doubtful if it be worth such an effort to obtain it. Reciprocity between Canada and the United Kingdom is every now and then discussed, but has so far yielded no practical result. I understand that the Canadian Medical Association appointed at its last meeting a committee to report on the subject. It is difficult to see how this very desirable result can be obtained unless, first of all, we secure registration between the several provinces of the Dominion. If a graduate of Ontario, passing with the highest honor at the Provincial University, stamped with the hall mark of the College of Physicians and Surgeons of Ontario, cannot legally practise his profession in Quebec province, in older Canada, to say nothing of the newer and more distant provinces that comprise the Dominion, how can we ask with any reasonableness reciprocal registration from Britain ? Let us begin at home. See if the difficulties to interprovincial