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MONTREAL, FEBRUARY, 1893.

THE MEDICAL BILL.

The new Medical Bill, which is now before the Legislature of the Province, is of sufficient importance to the profession to deserve editorial prominence. It has been framed by the College of Physicians and Surgeons with a view to the better regulation of the profession, but more especially for the purpose of establishing a uniform standard for admission to practise. This portion of the Bill has raised a storm of protests from the Universities from, whom many of their privileges would thus be taken away. Anyone at present who passes the Provincial Board's matriculation examination or who possesses a University degree of B.A., and who after four years of study obtains a University M.D., has no further examination to pass; he has only to present his diploma at the semi-annual meeting of the Board and to pay a fee in order to receive his licence. There have been doubts at various times in the past whether the examinations of the different Universities possessing this privilege were all equally rigorous, and in order to provide a guarantee that they were all serious, assessors were appointed by the College of Physicians to be present at the examinations. This method, it would seem, has not been altogether satisfactory, for in the Bill before us, every candidate for licence, whether he possesses an M.D. degree or not, must be again examined by the Provincial Medical Board before he can obtain it. The only exception to this rule is, strange to say, in favor of graduates of British,

Colonial or French Universities. Thus, while the Medical Board will be compelled by law to re-examine the M.D.'s of McGill and Bishop's College, they can if they wish give an Australian M.D. a licence to practise, without any examination whatever.

Nay more, even the holder of the humble British diploma of L.S.A. may be granted a licence to practise without a final examination. This unjust clause has no doubt been introduced by the framers of the Bill in order to obtain reciprocity with other countries, or, in other words, to enable an odd Canadian M.D. to practise in England without taking a diploma. But Great Britain has distinctly told us that she will not have reciprocity until there is one central examining board for the whole of Canada. And in our opinion it is just as well that it is so. For every one of our graduates out of employment here, there are at least a hundred British graduates starving in England. So that if the new medical bill be passed, and the fact becomes known in England, we might see hundreds of L.S.A. granted a licence, while our own high class graduates were obliged to pass an examination. It would be far better to abandon reciprocity, and let Canadians desiring to practise in England take a British qualification in the future as they have done in the past.

Paragraph 3980A. says: The Board of Examiners shall be divided into committees of three members, of whom two shall be professors of Universities and one physician not engaged in teaching, or one University professor and two physicians not engaged in teaching. The candidates are examined by each committee; each committee shall examine on a different subject of the programme. The examination shall be written and oral.

The ninth alteration in the present law requires among other things two thousand five hundred and eighty lectures. This is considered by many to be a mistake at a time when the whole tendency of progress in medical teaching lies in the direction of practical work rather than of didactic lectures. It would, we think, be far better to reduce very materially the number of didactic lectures and increase the number of hours attendance at the hospitals and dispensaries. We are glad to see, however, that item 13 of paragraph 4, of article 3985 requires four courses of six months each in