and occasional dissections, and for examining purposes they would require to review their subject, a work which all teachers of Anatomy are required to do as well.

As to Physiology and Histology, although many are well read in these subjects, still so much of them are experimental and laboratory work that very few, other than teachers could devote the necessary time to them.

Paris, Feb. 6th, 1890.

Dr. R. W. Powell:

- 1. Yes. It seems to me that the teaching bodies are best qualified to determine the best mode of instilling information, and, in their own interests, they are likely to keep pace with enlightened systems of teaching; and in my opinion, it is not a part of the duty of the Ontario Medical Council to insist absolutely on a fixed number of lectures in the six months' course, viz., 100.
- 2. If, from the nature of the rules insisted upon by the Ontario Medical Council, the teaching bodies have, in spite of themselves, to adopt a didactic plan of teaching, then six months becomes too short a time to include laboratory and hospital work with 100 didactic lectures.
- 3. So far as I am aware, the examinations are well conducted and sufficiently rigid to protect the profession.
- 4. The present mode of selecting examiners is no doubt open to question; it has long been my opinion that examiners in the primary branches ought to be selected for their peculiar aptitude in that branch, or for special qualifications, and for no other reasons.

Because a man teaches a special subject year after year he is, in consequence, the more familiar with it, and it cannot be successfully urged that teaching disqualifies a man to examine.

Ottawa, Feb. 9, 1890.

Dr. F. R. Eccles, London Medical College:
1. I do.

2. You can't have your cake and eat your cake. If a student spends his time taking a second course of didactic lectures, he cuts short his hospital work. I hope all the schools will

fall in with the idea of only compelling students to take one course of didactic lectures.

- 3. I do not.
- 4. I do not.

London, Feb. 6, 1890.

Dr. W. Osler, the Johns Hopkins Hospital:

We have not received a direct reply from Dr. Osler, but take the following extract from a letter that appeared last month in the Montreal Medical Journal: "I do not think the Boards are elevating the standard of medicine in demanding so many lectures, but it must not be forgotten that the schools have, until recently, been wedded to the old plan. I do not know a Canadian faculty in which five years ago it would have been possible to carry out a scheme of graded education. In how many is it possible to-day? Now that a four years' curriculum is the rule, and the option of a year with the physician is no longer allowed, the Board and Colleges could easily unite on a scheme of instruction on advanced modern lines. teaching in each year should be separate, courses of lectures should not be repeated, and laboratory and tutorial work should take the place of much of the didactic teaching. carry out this plan effectively, the fees would have to be increased in order to pay for additional instructors."

Baltimore, Jan. 2, 1890.

Dr. Francis J. Shepherd, McGill Medical College:

Your questions treat of subjects of vital importance to modern medical education, and I have much pleasure in replying to them.

the Boards (not only Ontario) require about twice as much attendance on didactic lectures as is necessary for the good of the student. A short time ago the British Medical Council complained that the Scotch Universities over-lectured their medical students; what would they say to our Boards, which require attendance on nearly double the number of lectures demanded by the Scotch Universities? Why, our students have to attend over (2,000) two thousand lectures; this means a daily attendance of five lectures for four years, thus leaving but a small portion of time