Hospital, for the past year, affords a good illustration of this point. Among the total of 834 eye-patients, there were only 86 suffering from affections which could not have been diagnosticated with certainty by simple external inspection, with or without the aid of focal illumination; and of these 86, sixty were cases of error There remain only of refraction or defect of accommodation. 26 cases requiring a knowledge of the use of the ophthalmoscope to establish the diagnosis. That is about three per cent. of the entire number. In view of these facts, I say it would be idle to pretend that students are justified in neglecting the study of eye diseases on account of the difficulty of the subject. A still stronger case may be made out in favour of diseases of the ear, the vast majority of which belong to the so-called middle ear, and are associated with or dependant upon morbid conditions of the naso-pharynx, a region that every general practitioner is or should be competent to look after. The stumbling block here seems to be that only very few medical men provide themselves with the instruments necessary for examining and treating the parts affected; or if they have the instruments, they have not devoted sufficient time or attention to the subject to attain dexterity in their use, and yet there is not sufficient reason for this deficiency. Surely anyone who becomes skilled in the use of the vaginal speculum is quite well able to learn that of the aural speculum, and it is certainly not more difficult to learn how to manipulate the eustachian catheter than it is to acquire the knack of introducing the urethral catheter without occasionally making a false passage, an accomplishment I suspect rather rarely met with, even among surgeons of large experience. In any case the one thing necessary is constant practice, and for this there is plenty of material in the ophthalmic and aural department of our hospital, however it may be with the other instances mentioned. Anyone who learns to auscultate the heart and lungs can just as easily learn to auscultate the tympanic cavity, and the information thus obtainable is no less positive in the latter case than in the two former. I will go a step further, and risk the imputation of inculcating heretical maxims, by saying that in auscultation, for positive information the aurist has the advantage over his thoracic