based upon researches conducted by the pathologist and his assistants, and much of the work done that has given the hospital so commanding a reputation emanates from the same source. attempt a description of the hospital without plans would be tiresome. Ample provision is made for pay patients, and the charges are not excessive. patient department is very largely attended and popular among the poorer classes. . Here some fifteen or eighteen doctors may be found at work daily. Fairly accurate histories are taken of every patient and filed away for reference. A small charge is made for medicine, ten cents a bottle, I think.

The management of the hospital is somewhat different from that which usually prevails. The general management is placed in the hands of the medical superintendent, who has nothing to do with the treatment of cases. He is the executive officer of the board of trustees. His duties in many respects resemble those of a superintendent of a lunatic asylum.

The patients are placed directly under the care of heads of departments known as the physician-in-chief, surgeon-in chief, and gynæcologist-in-chief, who receive a salary of \$5000.00 per annum, and are permitted to engage in private practice.

There is also a chief pathologist who receives a similar amount. Under each chief are three or four resident assistants who, in most instances, are not salaried. The residents usually remain two years. It is needless to say that these positions are very much coveted.

The present physician-in-chief is the well-known Canadian, William Osler, formerly of Montreal, who is generally

regarded as a tower of strength. Among the resident staff are Dr. Hewettson of Montreal, Dr. Barker of Toronto, and Dr. Cullen of Aylemer, Ontario. The lady superintendent of nurses, Miss Hampton, is also, I believe, a Canadian. A fair sprinkling of the same element is found among the students.

The work done in the in-door departments is of the highest character, and the reports issued from time to time are eagerly sought for both at home and abroad.

As yet I have seen but little of the work done in the surgical and gynæcological departments having had only time to spend in the medical wards.

Every effort is put forth to make an accurate diagnosis and give a scientific value to the report of the case.

In respect to therapeutics, great attention is given to hygiene and dietetic measures, drugs being only prescribed when imperatively demanded. Polypharmacy is abhorred and new agents employed with very considerable caution. A student who comes here with the expectation of obtaining a fancy list of prescriptions will be very much disappointed. Rational therapeutics as I have said prevail, although empiricism is not wholly rejected nor unfortunately can be at the present time.

An excellent opportunity is afforded for studying fever, as a very large percentage of the cases admitted are of this character. In northern climes there is usually little difficulty in arriving at a diagnosis, here the prevalence of malaria complicates the question. The differentiation is here accomplished by one or more examinations of the blood. The absence of Laverans organisms, of which I shall speak on another occasion, excludes