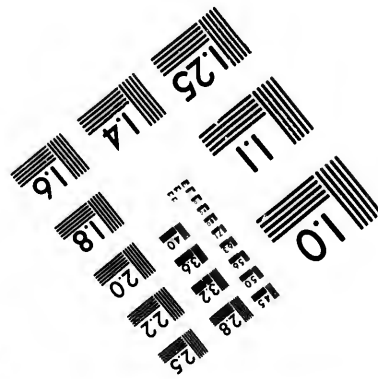
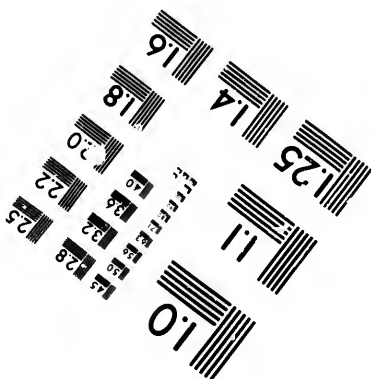
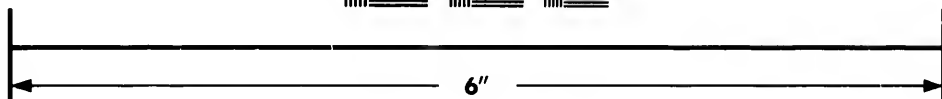
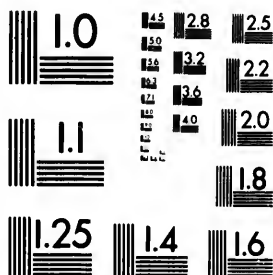


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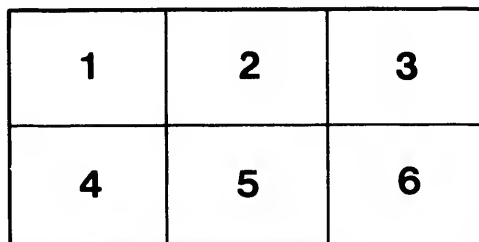
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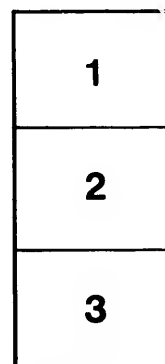
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ORIGIN AND ORGANIZATION

OF THE

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CANADIAN MEDICAL ASSOCIATION,

WITH THE

PROCEEDINGS OF THE MEETINGS

HELD IN

QUEBEC, OCTOBER, 1867, AND MONTREAL, SEPTEMBER, 1868.



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ORIGIN AND ORGANIZATION

OF THE

CANADIAN MEDICAL ASSOCIATION,

1867.

At the Semi-Annual Meeting of the College of Physicians and Surgeons of Lower Canada, held at Montreal on the 12th May, 1867, Dr. Marsden of Quebec, one of the Governors, and formerly President of the College, presented a valuable Report of the proceedings of the Meeting at Cincinnati, Ohio, a few days before, of the American Medical Association, to which he had been named Delegate of the College.

He mentions, as amongst the most important proceedings of the meeting of the Association, the unanimous adoption of a report of the section on Medical Education, of which the learned and accomplished Professor Samuel D. Gross, of Philadelphia, was Chairman; which recommended some changes in the course of medical education and lectures, by which some of the less important elementary branches of medical science would be shortened, and the more momentous and practical branches, as medicine and surgery, increased; which also recommended that the *minimum* period of medical study for graduation and practice, should be four years; and which deprecated the system which permits Universities and Colleges to grant licenses "*ad practicandum*" to their own students; and suggested the propriety of having but one examining board, before which all persons desirous of obtaining a license to practise medicine and surgery should be examined, before becoming legally qualified practitioners.

Dr. Marsden concludes his report thus: "In consequence of the important changes that are about to take place in this great and growing country under Confederation, and in view of the beneficial influence which the American Medical Association exercises on the medical ethics of the United States of America, your delegate would respectfully offer the suggestion that the formation of a Canadian Medical Association, to consist of all members of the profession in good standing, in the Dominion of Canada, is worthy of the serious consideration and action of this College."

No action having been taken by the College of Physicians and Surgeons of Lower Canada on this report, the Quebec Medical Society, many of whose members were Governors of the College, called a meeting of the Society at the Laval University, on Wednesday, the 29th of May.

The result of that meeting was the nomination of a Committee composed of Drs. Sewell, Marsden, Russell, Tessier, Simard, Larue, and H. Blanchet, who were instructed "to consider and report upon the propriety of obtaining such alterations in the law as will require the holders of degrees or diplomas to appear before the Provincial Medical Board for Examination for License *ad practicandum*, and to make such other suggestions as they may deem fit."

In conformity with the above resolution, the Committee met at the same place on Wednesday, the 5th of June, and organised, by calling Dr. Marsden to the chair, and electing Dr. Russell, secretary.

The important subject submitted to the Committee for consideration and report, having been freely and fully discussed, it was *unanimously* Resolved—

1st. That in the interests of the public and the medical profession it is desirable to adopt such means as will insure a *uniform* system of granting licenses to practise medicine, surgery, and midwifery *throughout the Dominion of Canada*.

2nd. That in future all medical degrees or diplomas of Universities, Colleges, or Schools, whether British or Colonial, shall have merely an honorary value; and that licenses to practise medicine, surgery, and midwifery in the Dominion of Canada, shall be granted by a Central Board of Examiners, before which all holders of degrees or diplomas in medicine or surgery shall appear for examination.

Your Committee further recommends that a Committee be named by your Society to confer with the various Universities, Colleges and Medical Schools in Canada, on the subject of the establishment of a Central Board of Examiners in medicine, surgery, and midwifery, before which all candidates for license to practise medicine in the Dominion of Canada shall be examined.

The whole, nevertheless, respectfully submitted.

(Signed,) W. MARSDEN, M.D.,
Chairman.

R. H. RUSSELL, M.D.,
Secretary.

Laval University, Quebec,
5th June, 1867.

The Quebec Medical Society met again, on the 18th June, at the Laval University, and adopted the following report, which was sent to every known member of the medical profession in the Dominion of Canada (amounting to nearly three thousand), with the annexed circular :

REPORT.

Whereas, by the "British North American Act, 1867," the Union of the Provinces of Canada, Nova Scotia, and New Brunswick is effected, and united Legislative and Executive action secured ; and

Whereas, closer connection must necessarily take place in all the relations of life, religious, moral, and social ; and

Whereas, "uniformity of laws in Ontario, Nova Scotia, and New Brunswick" is provided for in the said Act ; and

Whereas, uniformity in the laws which regulate life and health, and especially those governing the exercise of the medical profession, stand pre-eminent :

Therefore, the Medical Society of Quebec,—the oldest city in the Dominion of Canada,—deems it a duty to take action in the premises, and has come to the conclusion, that the most equitable, surest, and best means of attaining the desired end, will be by an union of the members of the medical profession of the Dominion of Canada in conference, at as early a period as practicable after the consummation of the union of Canada shall have taken place under Her Most Gracious Majesty's proclamation.

Wherefore the following resolutions were unanimously adopted, and are now respectfully submitted to the consideration of the medical profession of Canada, for such action as may be agreed upon in conference.

Resolved 1. That in the interests of the public and the medical profession it is desirable to adopt such means as will insure a *uniform* system of granting licenses to practise medicine, surgery, and midwifery, throughout the Dominion of Canada.

Resolved 2. That in future all medical degrees or diplomas of Universities, Colleges, or Schools of Medicine, shall have merely an honorary value ; and licenses to practise medicine, surgery, or midwifery, in the Dominion of Canada, shall be granted by a Central Board of Examiners, in each Province, before whom all holders of degrees in medicine, or diplomas for surgery or midwifery, shall appear for examination.

Resolved 3. That a committee of seven members be named by the Medical Society to confer with the various Universities, Colleges, and Medical Schools in Canada, on the subject of the establishment of a Central Board of Examiners, before which all candidates for license to practise medicine in the Dominion of Canada shall be examined.

Resolved 4. That the Quebec Medical Society recommends the calling

of a Convention of Medical Delegates from Universities, Colleges, Schools, Medical Societies, &c., in the Dominion of Canada, to meet at the city of Quebec, on the second Wednesday in October, 1867, for the purpose of adopting some concerted action on the subject of medical legislation, in conformity with this report, and for the formation of a *Canadian Medical Association*.

The whole respectfully submitted.

W. MARSDEN, M.D.,
Chairman.

R. H. RUSSELL, M.D.,
Secretary.

Laval University,
Quebec, 18th June, 1867.

Laval University,
Quebec, 25th June, 1867.

To——

SIR,—I have the honour to transmit for your information the following report of a Committee of the Quebec Medical Society, and to solicit your assistance and co-operation in the protection of the interests, the maintenance of the honour and respectability, the advancement of the knowledge, and the extension of the usefulness of the medical profession of Canada.

I am also instructed to invite all Universities, Colleges, Schools of Medicine, and Medical Societies in Canada, to send delegates to the proposed Conference; and respectfully suggest that cities, towns, or counties, where no such institutions or organisations exist, do call meetings of the members of the medical profession in their respective localities, for the purpose of electing delegates to represent them at the meetings of the Conference, which will be held at the Laval University, in the city of Quebec, in the Province of Quebec, on Wednesday, the 9th day of October next, and following day.

I have further to request that all delegates shall be furnished with proper credentials, in order that they may be duly accredited as such at the Conference.

I have the honour to be, sir,

Your obedient servant,

R. H. RUSSELL, M.D.,
Secretary.

MINUTES OF THE PROCEEDINGS AND ORGANIZATION
OF THE CANADIAN MEDICAL ASSOCIATION, HELD AT
LAVAL UNIVERSITY, QUEBEC, 9TH AND 10TH OCTOBER,
1867.

The following duly qualified members of the Medical Profession of the Dominion of Canada, and Delegates, met at the Grand Hall of the Laval University at Quebec, on Wednesday, the 9th October, 1867, at 10 A.M.

Dr. James A. Sewell, President of the Quebec Medical Society, took the Chair, and Dr. A. G. Belleau acted as Secretary.

The following persons were present :

PROVINCE OF QUEBEC.

U. ARCAND,.....	<i>Becancour.</i>	CHS. TIMOTHÉ DUBÉ, <i>Trois Pistoles.</i>
F. J. AUSTIN,.....	<i>Sherbrooke.</i>	CHARLEMAGNE DUBUC,.. <i>Montreal.</i>
GEO. BADEAU,.....	<i>Three Rivers.</i>	J. A. DUCHESNAU,..... <i>Terrebonne.</i>
P. BAILLAIRGEON,.....	<i>Quebec.</i>	G. H. DUFRESNE,.. <i>St. Stanislas de</i> <i>Bastican.</i>
CHS. BATTERSBY,.....	<i>Waterloo.</i>	GEORGE DUNN,.. <i>Rivière du Loup</i> <i>en Haut.</i>
Hon. J. O. BEAUBIEN, <i>Montmagny.</i>		F. X. DUPLESSIS, <i>St. Ferdinand de</i> <i>Halifax.</i>
A. G. BELLEAU,.....	<i>Quebec.</i>	F. DUSSAULT,..... <i>Quebec.</i>
ED. BELLEAU,.....	<i>St. Michel.</i>	A. G. FENWICK,..... <i>Three Rivers.</i>
P. BENDER,.....	<i>Quebec.</i>	GEORGE E. FENWICK, .. <i>Montreal.</i>
J. G. BIBAUD,.....	<i>Montreal.</i>	W. W. FORREST,..... <i>St. Clair.</i>
H. BLANCHET,.....	<i>Quebec.</i>	J. E. FORTIER,..... <i>Quebec.</i>
J. B. BLANCHET,.....	<i>Quebec.</i>	L. A. FORTIER, <i>St. Clet, Soulanges.</i>
Hon. J. G. BLANCHET,.....	<i>Levis.</i>	W. FULLER,..... <i>Montreal.</i>
VERCHERES DEBOUCHERVILLE,...	<i>Beauharnois.</i>	AMÉDÉE GABOURY, <i>St. Martin, Isle</i> <i>Jésus.</i>
G. A. BOURGEOIS, <i>St. Grégoire de</i> <i>Nicolet.</i>		W. GARDNER,..... <i>Beauharnois.</i>
ALPHONSE BRODEUR, <i>Roxton Falls.</i>		ROMUALD GARIEPY, ... <i>Montreal.</i>
A. T. BROUSSEAU,.....	<i>Montreal.</i>	J. B. GARNÉAU,..... <i>St. Anne de la</i> <i>Pérade.</i>
FRANCIS W. CAMPBELL, <i>Montreal.</i>		SÉRAPHIN GAUTHIER, ... <i>Montreal.</i>
L. CATELLIER,.....	<i>Quebec.</i>	FRANÇOIS X. GENDRON, <i>St. François</i> <i>du Sud.</i>
ALEXIS CHARBONNEAU, ... <i>St. Paul</i> <i>L'Hermite.</i>		J. B. GIBSON, <i>Dunham, Missisquoi.</i>
TIBURCE CHAREST,.....	<i>Beauport.</i>	F. D. GILBERT,..... <i>Halley.</i>
G. CHEVALIER, <i>Bedford, Missisquoi.</i>		GEORGE GRENIER,..... <i>Montreal.</i>
JOSEPH COTÉ,.....	<i>St. Valier.</i>	R. HAMILTON,..... <i>Sutton.</i>
C. G. COUILLARD,.....	<i>Ste. Marie</i> <i>(Beauce.)</i>	O. A. HÉBERT,..... <i>Quebec.</i>
ADOLPHE DAGENAIS, ... <i>Montreal.</i>		WM. H. HINGSTON, ... <i>Montreal.</i>
SAMUEL DAVID,.....	<i>St. Ours.</i>	R. P. HOWARD,..... <i>Montreal.</i>
A. L. DEMARTIGNY,.....	<i>Etchemin.</i>	P. A. IMBLAU,..... <i>St. Famille.</i>
C. L. DEMARTIGNY, .. <i>Beauharnois.</i>		CAMILLE LAFONTAINE, ... <i>Berthier</i> <i>en Haut.</i>
N. DE RAINVILLE, <i>St. Bartholémi.</i>		ALFRED JACKSON,..... <i>Quebec.</i>
ALPHONSE DESCHAMPS, ... <i>Montreal.</i>		
P. DESJARDIN,.....	<i>Quebec.</i>	
L. DION,.....	<i>Quebec.</i>	

EUSTACHE LEMIRE,..... <i>Montreal.</i>	H. PELTIER,..... <i>Montreal.</i>
J. ETIENNE LANDRY,..... <i>Quebec.</i>	F. H. PERRAULT,..... <i>Pointe aux</i> <i>Trembles, Montreal.</i>
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C. O. LEBEL,..... <i>St. Gervais.</i>	F. R. RINFRET,..... <i>Quebec.</i>
B. H. LEBLANC,..... <i>Pointe St.</i> <i>Charles, Montreal.</i>	EDMOND ROBILLARD,..... <i>Montreal.</i>
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ALEX. LESAGE,..... <i>St. Grégoire le</i> <i>Grand.</i>	L. THÉLESPHORE ROUSSEAU,..... <i>St.</i> <i>Casimir.</i>
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F. S. PALARDY,..... <i>Verchères.</i>	L. L. VOLIGNY,..... <i>St. Elizabeth.</i>
C. SMITH PARKE,..... <i>Quebec.</i>	A. VANDERHEYDEN,..... <i>Lévis.</i>
	CHARLES VERGE,..... <i>Quebec.</i>
	W. WAKEHAM,.. <i>Leeds, Megantic.</i>
	J. L. WHERRY,..... <i>Quebec.</i>
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W. S. HARDING,	<i>St. John.</i>	P. PROVOST,	<i>Memramcook.</i>

GENTLEMEN,—The Duke of Buccleuch, on opening a scientific meeting last month in Dundee, said it would be a bad compliment to himself, as well as to the Society who had elected him to the honourable position of chairman, to declare that he was unequal to the task. Now, perhaps, the noble Duke really felt, and I have no doubt really was, quite able to perform the duties which devolved upon him on that occasion, with credit to himself and advantage to the meeting. I have *not*, I regret to say, this inward conviction; on the contrary, I know many of my colleagues who would have filled this chair better than I can hope to do. Having, however, been called upon as President of the Quebec Medical Society, to preside at the opening of this interesting and important meeting, I shall do so to the best of my ability, trusting to my friends and the members generally for their consideration and support. I should be proud on any occasion to act as the representative of my colleagues; I am particularly so on the present, surrounded by so many eminent medical practitioners, from all parts of this new and great Dominion of Canada; met together for the first time in convention, to discuss topics connected with the advancement of the medical profession, the development of science, and the elevation of the standard, as well of general, as of professional, education. Among the various associations which are the least tainted with selfishness, and therefore tend most to elevate our nature and benefit mankind, are those having such objects in view as I have just detailed. Whatever tends to raise and dignify our profession, tends also to the comfort and well being of society. Whatever tends to make individual members of that profes-

sion better men and better physicians, contributes most materially to the advantage of the public at large. There is nothing selfish, then, in this or similar conventions which are annually taking place throughout the world. We are not seeking our own aggrandisement, nor our own individual advantages; we desire to promote the general welfare of our fellow-men, and shall rest content to benefit with the mass. We, in this part of the Dominion, have long known and felt the advantages of an association similar to the present, to a limited degree, I admit; but the profession having been incorporated for many years, we have managed our own affairs and enjoyed advantages which, I believe, our brethren in other parts of Canada do not possess. We are to all intents and purposes a medical convention on a small scale; and having tasted the good fruit arising from this source, is one great reason why we wish so earnestly to see these advantages extended throughout the whole Dominion. Gentlemen, I look upon this day as a most important one in the history of Canada—one replete with interest and full of bright promises for the future, not only to us, but to society at large. Moreover, I am satisfied that this meeting has a national as well as a scientific importance, which must commend itself to all reasonable and right thinking men. I might here show what associations similar to this have done on the other side of the Atlantic; I might point to the high *status* which medicine holds in Great Britain and Ireland; I might show how largely these meetings have contributed to the scientific reputation of British and continental medicine; how they have drawn together large bodies of professional men, and cemented that social bond of unity and good feeling which should always exist among men engaged in the same glorious work of relieving the sick and suffering, of saying a word of comfort to the depressed, or of extending the hand of sympathy to the destitute and friendless. I might also point to the improved system of education, both general and professional, which is now being insisted upon throughout the world; to the sifting ordeal through which young men have to pass before they are entrusted with the lives of their fellow creatures; to the many points connected with hygiene, so intimately interwoven with the welfare of mankind, which have been discussed and fully ventilated in these meetings. All this, and much more, have these associations effected both at home and abroad. May we not then look for similar good results from the Canadian Medical Association, now being so happily inaugurated. Does not this large meeting of medical men, many of whom have left extensive practices, and have travelled four, five or six hundred miles to be present here, and to add their quota to the store-house of Canadian medical science—does not this fact alone, I say, augur well for our future destiny. Why should our reunions not succeed and result in the same manner as similar meetings have done in other countries? I can see no reason why they should not; but there must be no lukewarmness—no

hanging back—no petty jealousies to mar the general harmony—we must all put our shoulders to the wheel—we must all work heartily, and final success must crown our efforts. I would now do what perhaps I should have done at first, namely, offer my thanks and those of the other members of the Quebec Medical Society to the delegates and other members of our profession now present,—very many of whom are here in answer to our invitation,—not only at a great sacrifice of personal comfort, but also at a great pecuniary loss, to assist in deliberating upon those important subjects in which we are all so much interested, and which are to be submitted to the consideration of the meeting. As I said before, the presence of so large a number of delegates is a guarantee of our ultimate success, and these gentlemen deserve, as I am authorized to say they have, our most cordial thanks.

With these few introductory remarks, I will now conclude, and enable the meeting to proceed at once to the business of the day, a programme of which you will find on the table.

The following order of proceedings was then adopted :

1. Chairman to take the chair.
2. Appointment of Committee to examine Credentials, &c.
3. Formation of a CANADIAN MEDICAL ASSOCIATION.
4. Appointment of Nominating Committee for Election of Officers, &c.
5. Election of Officers.
6. Committee to frame Constitution, By-Laws, &c.
7. Committee on Preliminary Education.
8. Committee on Medical Education.
9. Committee on Uniform System of granting Licenses.
10. Committee on Medical Statistics.
11. Committee on Medical Registration,
12. Committee on Hygiene.
13. Committee to fix time and place for the next Annual Meeting.
14. Committee of Arrangements for the next Annual Meeting.
15. Committee on Medical Ethics.

Dr. Joseph Steverman, of Lunenburg, Nova Scotia, proposed, seconded by Dr. Alfred Jackson, of Quebec, that the following gentlemen : Drs. C. V. Berryman, of Toronto, Alfred Jackson, of Quebec, Joseph Steverman, of Lunenburg, Nova Scotia, W. S. Harding, of St. John's, New Brunswick, be appointed a Committee to examine and verify the credentials from such delegates as may hereafter arrive.

Moved in amendment by Dr. W. H. Hingston, of Montreal, seconded by Dr. G. E. Fenwick, of Montreal.

That all the Medical men present, being regular practitioners in the Dominion of Canada, be members of this meeting, and that the following be a Committee to register their names and places of residence :

Dr. C. V. Berryman, of Toronto, Dr. Hector Peltier, of Montreal, Dr. D. McNeil Parker, of Halifax, Nova Scotia, Dr. Joseph Steverman, of Lunenburg, Nova Scotia, Dr. W. S. Harding, of St. John's, New Brunswick. Carried.

Moved by Dr. William S. Harding, of St. John's, New Brunswick, seconded by Dr. William Marsden, of Quebec : That it is expedient for the medical profession of the Dominion of Canada to form a medical association to be named the *Canadian Medical Association*. Carried.

Moved by Dr. J. B. Garvie, of Halifax, Nova Scotia, seconded by Dr. Hilarion Blanchet, of Quebec :

That the Officers of the Canadian Medical Association shall be elected annually and shall be a President ;—four Vice-Presidents, one for each Province ;—one General Secretary ;—four Corresponding Secretaries, one for each Province ;—and a Treasurer. Carried.

Moved by Dr. F. Zéphyrin Tassé, of St. Laurent, Montreal, seconded by Dr. Francois Hubert Alexandre Larue, of Quebec, that a Nominating Committee be appointed, composed of Dr. William Marsden, of Quebec, Dr. Pierre Olivier Tessier, of Quebec, Dr. Edmond Robillard, of Montreal, Dr. Robert P. Howard, of Montreal, Dr. A. M. Rosebrugh, of Toronto, Dr. W. S. Harding, of St. John's, New Brunswick, Dr. G. A. Hamilton, of St. John's, New Brunswick, Dr. Joseph Steverman, of Lunenburg, Nova Scotia, Dr. James R. DeWolf, of Halifax, Nova Scotia, Dr. John H. Sangster, of Toronto, Dr. H. H. Wright, of Toronto, Dr. John R. Dickson, of Kingston.

Moved in amendment by Dr. James H. Richardson, of Toronto, seconded by Dr. R. W. Hillary, of Aurora, Ontario :

That the election of four Vice-Presidents and Secretaries be left to the delegates of each Province. This amendment was lost.

Moved in amendment by Dr. E. D. Worthington, of Sherbrooke, seconded by Dr. F. D. Gilbert, of Hatley :

That the nominating Committee for the election of Officers be composed of two representatives from each of the Incorporated Schools of the Dominion of Canada, and two from each of the several Provinces not connected with the Medical Schools.

This amendment was withdrawn and the main motion carried.

The meeting then adjourned till afternoon.

AFTERNOON SESSION.

The meeting re-opened at 3½ P.M.

Dr. William Marsden, of Quebec, chairman of the nominating committee, presented the following report:

The committee to whom was referred the nomination for the election of officers, beg to report that they have unanimously agreed to recommend the following gentlemen :

The Honourable Dr. Charles Tupper, C.B., of Halifax, Nova Scotia, President.

Dr. Hector Peltier, of Montreal, Vice-President, and Dr. Duncan C. McCallum, of Montreal, Secretary for the Province of Quebec.

Dr. R. S. Black, Vice-President, and Dr. James R. DeWolf, Secretary for Nova Scotia.

Dr. LeBaron Botsford, Vice-President, and William S. Harding, Secretary for New Brunswick. Dr. E. M. Hodder, Vice-President, and Dr. William Canniff, Secretary for Ontario.

Dr. A. G. Belleau, of Quebec, to be General Secretary, Dr. Robert H. Russell, of Quebec, to be Treasurer.

The whole respectfully submitted.

WILLIAM MARSDEN, M.D.,
Chairman.

The Honourable Dr. Charles Tupper, C.B., of Halifax, Nova Scotia, was then proposed and unanimously elected President of the Canadian Medical Association.

The Honourable Dr. Tupper, in acknowledging the compliment he had received by being elected first President of the Association, addressed the members as follows :—

GENTLEMEN :—I am sure you will believe me when I say that, taken entirely by surprise, I can find no words adequately to express the deep emotions excited by the great and undeserved honour which you have just conferred. Her Majesty the Queen was graciously pleased to mark her appreciation of my services in promoting the political union of the British North American Provinces, and I have had the high gratification of being seven times elected to represent my native county in the Parliament of my country; but I can assure you that no distinction that I have ever received has been a source of greater gratification or pride than my appointment by the vast body of distinguished and able representatives of the medical profession which now fill this Hall. When I see before me so many gentlemen who have, by their great learning and professional attainments, achieved a European as well as British American reputation, I feel deeply my unworthiness to fill the high position to which your kindness has elevated me; but, inadequate as I may be to discharge the important duties of President of the Medical Association for the Dominion of Canada, I will yield to no man in an ardent desire to promote to the best of my ability the interests of the profession to which I have the honour to belong. The last time I was in this Hall, it devolved upon me to respond, on behalf of the Union Delegates from the Maritime Provinces, to an address presented to us by the distinguished faculty of the far-famed University of Laval. The organization of this association is but a fitting sequel to the Union of these British American Provinces which

has now been consummated, and which will, I hope and believe, give increased elevation to all those institutions, whether political, professional or social, upon which the status and character of a country must depend. It is not my province now to speak, but to listen; but I cannot refrain from saying that I trust our deliberations will show to the world that our leading objects are to protect the health and lives of the people of this Dominion from the unskilled treatment of incompetent men, and to provide in the most effectual manner for the due qualification of the members of a profession so important as our own. Again thanking you, gentlemen, for the great honour you have done me, I must beg that kind co-operation and support at your hands, without which I should be quite unequal to the position in which you have been pleased to place me.

Dr. Hector Peltier, of Montreal, was proposed and unanimously elected Vice-President for the Province of Quebec. Dr. Duncan C. McCallum, of Montreal, was then proposed as Secretary for the Province of Quebec. [Dr. L. A. Fortier, of St. Clet, proposed in amendment, seconded by Dr. A. Dagnais, of Montreal, that the name of Dr. Jean Philippe Rottot, of Montreal, be substituted for that of Dr. D. C. McCallum, of Montreal.

This amendment was withdrawn.

Dr. F. D. Gilbert, of Hatley, proposed in amendment, seconded by Dr. A. G. Fenwick, of Three-Rivers, that the name of Dr. W. H. Hingston, of Montreal, be substituted for that of Dr. Duncan C. McCallum, of the same place. Dr. Hingston declined to be put in nomination.

Dr. Seraphin Gauthier, of Montreal, proposed in amendment, seconded by Dr. J. C. Poitvin, of St. Martin, that Dr. C. F. Painchaud, of Varennes, be named Secretary for the Province of Quebec. The amendment was lost.

The amendment of Dr. F. D. Gilbert, of Hatley, was then renewed and carried, namely, that Dr. W. H. Hingston, of Montreal, be elected Secretary for the Province of Quebec.

Dr. Alfred G. Belleau, of Quebec, was proposed as General Secretary.

Proposed in amendment by Dr. Eustache Lemire, of Montreal, seconded by Dr. A. T. Brousseau, of Montreal, that the name of Dr. F. H. A. Larue, of Quebec, be substituted. Lost.

Dr. Alfred G. Belleau, of Quebec, was then elected General Secretary.

Dr. R. S. Black, of Nova Scotia, was proposed and unanimously elected Vice-President for Nova Scotia, and Dr. James R. De Wolf, Secretary for Nova Scotia.

Dr. Le Baron Botsford, of New Brunswick, was proposed and unanimously elected Vice-President for New Brunswick, and Dr. W. S. Harding, Secretary for New Brunswick.

Dr. E. M. Hodder, of Toronto, was then proposed Vice-President for Ontario.

Dr. James H. Richardson, of Toronto, proposed in amendment, second-

ed by Dr. Alexander McMaster, of Toronto, that the name of Dr. Beaumont be substituted for that of Dr. Hodder.

Dr. Robert H. Russell, of Quebec, proposed, seconded by Dr. F. D. Gilbert, of Hatley, that the views by vote of the delegates from Ontario be obtained before proceeding to the election of the Vice President for the Province of Ontario. The amendment was withdrawn.

Dr. J. H. Richardson's amendment was then put to the vote and lost.

The original motion, proposing Dr. E. M. Hodder, of Toronto, as Vice-President for Ontario, was then put to the vote and carried.

Dr. W. Canniff, of Belleville, was proposed and unanimously elected Secretary for Ontario.

Dr. Robert H. Russell, of Quebec, was proposed and unanimously elected Treasurer of the Canadian Medical Association.

Dr. Edward Rousseau, of Quebec, proposed, seconded by Dr. J. Marmette, of St. Thomas, Montmagny, that Dr. Joseph Painchaud, of Quebec, be elected Honorary President of the Canadian Medical Association.

Dr. James Arthur Sewell, of Quebec, proposed in amendment, seconded by Dr. William Marsden, of Quebec, that the consideration of this matter be postponed till the by-laws to regulate the Convention shall have been adopted. Carried.

Dr. James Arthur Sewell, of Quebec, proposed, seconded by Dr. William Marsden, of Quebec, that the meeting do adjourn till Thursday, the 10th October, at 9 A.M.

SECOND DAY.

The Canadian Medical Association met in the Hall of the Laval University, October 10th, at 9½ a.m.

Honourable Dr. Charles Tupper, C.B., in the Chair.

The minutes of the last meeting were read and approved.

Moved by Dr. William Canniff, of Belleville, seconded by Dr. John R. Dickson, of Kingston :

That the members of the Press be admitted to all the deliberations of the Canadian Medical Association. Carried.

Moved by Dr. A. M. Rosebrugh, of Toronto, seconded by Dr. William Marsden, of Quebec :

That the members of this Association be assessed the sum of four dollars for the current year, and that the Treasurer be requested to receive the same from the members present.

Moved in amendment by Dr. Edouard Rousseau, of Quebec, seconded by Dr. Leonard A. Fortier, of St. Clet, that the annual subscription be only two dollars. Lost.

Proposed by Dr. W. H. Hingston, of Montreal, seconded by Dr. James deWolf, of Halifax, Nova Scotia :

That the sum of three dollars be substituted,
The original motion being withdrawn.

Proposed by Dr. F. D. Gilbert, of Hatley, seconded by Dr. E. Worthington of Sherbrooke :

That the sum of four dollars be the annual subscription. Lost.

Dr. W. H. Hingston's amendment, namely, that the annual subscription be three dollars, was then put to the vote and carried. Yeas 41, nays 39.

Moved by Dr. J. B. Gibson, of Dunham, County of Missisquoi, seconded by Dr. P. O. Tessier, of Quebec, and

Resolved,—That a Committee of seven members be appointed to frame a constitution and by-laws for the government of the Canadian Medical Association, to report at the next annual meeting, and that the following gentlemen do form the said Committee :

Dr. J. E. Landry, of Quebec ; Dr. William Marsden, of Quebec ; Dr. Hector Peltier, of Montreal ; Dr. W. H. Hingston, of Montreal ; Dr. H. H. Wright, of Toronto ; Dr. John H. Sangster, of Toronto ; and Dr. William Canniff, of Belleville.

Moved by Dr. J. R. Dickson, of Kingston, seconded by Dr. Francis W. Campbell, of Montreal :

That the following gentlemen do compose a committee on Preliminary Education :

Dr. J. A. Sewell, of Quebec ; Dr. J. R. Dickson, of Kingston ; Dr. McNeil Parker, of Halifax, Nova Scotia ; Dr. George A. Hamilton, of St. John's, New Brunswick ; Dr. Robert P. Howard, of Montreal ; Dr. J. P. Rottot, of Montreal ; Dr. William T. Aikins, of Toronto ; and Dr. J. H. Sangster, of Toronto.

Moved in amendment by Dr. J. A. Duchesneau, of Terrebonne, seconded by Dr. L. A. Fortier, of St. Clet :

That the name of Dr. C. F. Painchaud, of Varennes, be added to the Committee. Carried.

The original motion, with Dr. C. F. Painchaud's name, was then read and carried.

Moved by Dr. J. E. Landry, of Quebec, seconded by Dr. Hilarion Blanchet, of Quebec :

That a committee be appointed to report on such means as will ensure a uniform and elevated system of medical education throughout the Dominion of Canada, and that the said committee be composed of Dr. F. H. A. LaRue, of Quebec ; Dr. William Bayard, of New Brunswick ; Dr. Robert P. Howard, of Montreal ; Dr. W. H. Hingston, of Montreal ; Dr. J. R. Dickson, of Kingston ; Dr. W. T. Aikins, of Toronto ; and Dr. E. H. Trudel, of Montreal.

This motion was withdrawn.

Moved by Dr. J. E. Landry, of Quebec, seconded by Dr. J. G. Blanchet, of Lévis :

That a committee on General Education be elected without specifying the names—Carried.

Then the following gentlemen were proposed and elected members of the said committee :

Dr. F. H. A. LaRue, of Quebec; Dr. J. R. Dickson, of Kingston; Dr. R. P. Howard, of Montreal; Dr. H. H. Wright, of Toronto; Dr. E. H. Trudel, of Montreal; Dr. James H. Richardson, of Toronto; Dr. C. V. Berryman, of Toronto; Dr. E. Worthington, of Sherbrooke; Dr. Alexander McMaster, of Toronto; Dr. E. D. Burdett, of Belleville; Dr. William Bayard, of New Brunswick; Dr. McNeil Parker, of Nova Scotia; Dr. P. O. Tessier, of Quebec; and Dr. C. F. Painchaud, of Varennes.

Moved by Dr. R. H. Russell, of Quebec, seconded by Dr. W. T. Aikins, of Toronto :

That a committee of twelve members be appointed to report on the best means to secure an uniform system of granting licenses to practise Medicine, Surgery and Midwifery, throughout the Dominion of Canada.—Carried.

Moved by Dr. W. E. Scott, Montreal, seconded by Dr. George E. Fenwick, of Montreal :

That the following gentlemen be appointed a committee to report on an uniform system of granting licences :

Dr. J. E. Landry, of Quebec; Dr. P. O. Tessier, of Quebec; Dr. P. Munro, of Montreal; Dr. G. W. Campbell, of Montreal; Dr. McNeil Parker, of Halifax, Nova Scotia; Dr. J. R. De Wolf, of Halifax, Nova Scotia; Dr. James Richardson, of Toronto; Dr. J. R. Dickson, of Kingston; Dr. C. V. Berryman, of Toronto; Dr. William Canniff, of Belleville; Drs. W. S. Harding and George A. Hamilton, of St. John, New Brunswick.

Moved in amendment by Dr. F. D. Gilbert, of Hatley, seconded by Dr. J. B. Gibson, of Dunham :

That the committee on the system of granting Licences be the same as the General Education committee, and that the name of Dr. G. W. Campbell, of Montreal, be substituted for that of Dr. R. P. Howard, of Montreal.—Carried.

Moved by Dr. W. H. Hingston, of Montreal, seconded by Dr. Edmond Robillard, of Montreal, and it was resolved :

That a committee of eleven members be named to report on the best means of obtaining a vital system of statistics, and that the following gentlemen be members of the said Committee,—Dr. J. C. Taché, of Ottawa; Dr. F. H. A. LaRue, of Quebec; Dr. G. E. Fenwick, of Montreal; Dr. W. H. Hingston, of Montreal; Dr. W. Canniff, of Belle-

ville ; Dr. William Bayard, of New Brunswick ; Dr. H. S. Muir, of Halifax, Nova Scotia ; Dr. Z. Tassé, of St. Laurent, Montreal ; Dr. W. S. Harding, of St. John, New Brunswick ; Honble. Dr. Beaubien, of St. Thomas, Montmagny ; and Dr. James Thorburn, of Toronto.

Moved by Dr. J. N. DeRainville, of St. Bartholémi, seconded by Dr. Edward Lindsay, of Quebec :

That a committee of seven members be formed to consider the best means of securing the proper registration of licensed practitioners in medicine throughout the Dominion of Canada.

Proposed in amendment by Dr. H. H. Wright, of Toronto, seconded by Dr. W. T. Aikins, of Toronto.

That the Committee on Registration be the same as the one on By-laws. Carried.

Dr. F. W. Campbell's name, of Montreal, was substituted for that of Dr. W. H. Hingston, of Montreal, at the request of the latter gentleman.

Moved by Dr. C. V. Berryman, of Toronto, seconded by Dr. J. B. Blanchet, of Quebec :

That the Committee on Public Hygiene be the same as the one on Statistics.

Dr. W. H. Hingston, of Montreal, proposed in amendment, seconded by Dr. Edmond Robillard, of Montreal :

That the word " Hygiene " be added to the word " Statistics " in the motion for the Committee on Statistics. Carried.

Moved by Dr. Edouard Rousseau, of Quebec, seconded by Dr. D. E. Burdett, of Belleville :

That a committee be named to name the place and time of next meeting of the Canadian Medical Association.

Moved in amendment by Dr. John Herbert Sangster, of Toronto, seconded by Dr. F. D. Gilbert, of Hatley :

That the first annual meeting of the Canadian Medical Association be held on the first Wednesday of September, 1868, in the city of Montreal.

Moved in amendment by Dr. H. H. Wright, of Toronto, seconded by Dr. W. Canniff, of Belleville :

That the next annual meeting of the Canadian Medical Association be held on the first Wednesday of June 1868. The original motion was then carried.

The arrangements for the next meeting, in Montreal, were then left to the members of the Association from that city.

Moved by Dr. P. O. Tessier, of Quebec, seconded by Dr. John H. Sangster, of Toronto, and

Resolved,—That the following gentlemen be named a committee to draw up a code of Medical Ethics for the government of the profession :

Drs. William Marsden and James Arthur Sewell, of Quebec ; Dr. T. S. Parker, of Guelph ; Dr. A. M. Rosebrugh, of Toronto ; Drs. George A. Hamilton and Waddell, of St. John, New Brunswick ; Dr. J. B. Garvie, of Halifax, Nova Scotia ; Dr. Joseph Steverman, of Lunenburg, Nova Scotia ; Drs. Munro and Hector Peltier, of Montreal ; Dr. Bevoil, of Toronto ; Dr. William Canniff, of Belleville.

Moved by Dr. D. McNeil Parker, of Halifax, Nova Scotia, seconded by Dr. J. R. DeWolf, of Halifax, Nova Scotia :

That all payments of moneys connected with the Association shall be on the order of the Vice-President, countersigned by the Secretary of the Association. Carried.

Moved by Dr. John Herbert Sangster, of Toronto, seconded by Dr. D. McNeil Parker, of Halifax, Nova Scotia, and unanimously resolved :

That the cordial thanks of this Association are due and are hereby tendered to Dr. James Arthur Sewell, President of the Quebec Medical Society, and to the members of the same Society for their earnest and continued exertions in the originating and carrying to a successful issue the formation of a Medical Association for the Dominion of Canada, and that the members of this Association cannot separate without giving expression to their very high sense of the courtesies extended to them, and their appreciation of the very excellent arrangements for the comfort and convenience of the delegates and others.

Moved by Dr. Robert Palmer Howard, of Montreal, seconded by Dr. D. McNeil Parker, of Halifax, Nova Scotia, and

Resolved unanimously, that the thanks of this Association are due, and are hereby tendered to the Reverend Mr. Methot, Rector of Laval University, for the kindness and public spirit with which he has afforded accommodation to the Association at its first meeting.

Moved by Dr. E. D. Worthington, of Sherbrooke, seconded by Dr. F. D. Gilbert, of Hatley :

That the President, the Honble. Dr. Charles Tupper, C.B., do now leave the chair. Carried.

Dr. James Arthur Sewell, of Quebec, having been called to the chair.

Moved by Dr. W. E. Scott, of Montreal, seconded by Dr. R. P. Howard, of Montreal, and

Resolved,—That the thanks of this meeting be voted to the Honorable Dr. Charles Tupper, C.B., for his able and impartial conduct in the chair, which has added so much to the success of the meeting.

Moved by Dr. E. D. Worthington, of Sherbrooke, seconded by Dr. F. D. Gilbert, of Hatley :

That the proceedings of this conference be published in the Canada Medical Journal, and that 300 copies of that journal be sent to the several Vice-Presidents for distribution ; also that 200 copies of the proceedings

of the conference be struck off in French, in pamphlet form, under the care of the Editors, and that they be distributed. Carried

It was also decided that the conveners of reports of the different committees do meet in Montreal two days before the next annual meeting in that city.

The meeting then adjourned till the first Wednesday of September, 1868, in the city of Montreal.

The following are the standing Committees appointed on the 10th October, 1867, at Quebec, and continued on motion Friday, 4th September, 1868, at Montreal.

Committee on By-Laws.

Dr. WM. CANNIFF, *Belleville, O., Chairman.*

“ WM. MARSDEN, *Quebec, Q.*

“ J. E. LANDRY, *Quebec, Q.*

“ HECTOR PELTIER, *Montreal, Q.*

“ W. H. HINGSTON, *Montreal, Q.*

“ H. H. WRIGHT, *Toronto, O.*

“ J. H. SANGSTER, *Toronto, O.*

Committee on Preliminary Examination.

Dr. R. P. HOWARD, *Montreal, Q., Chairman.*

“ G. H. SANGSTER, *Toronto, O.*

“ D. McNEIL PARKER, *Halifax, N. S.*

“ G. A. SEWELL, *Quebec, Q.*

“ J. P. ROTTOT, *Montreal, Q.*

“ G. A. HAMILTON, *St. John, N. B.*

“ W. T. AIKINS, *Toronto, O.*

“ C. F. PAINCHAUD, *Varennes, Q.*

Committee on Medical Education.

Dr. F. A. H. LARUE, *Quebec, Q.*

“ J. R. DICKSON, *Kingston, O.*

“ R. P. HOWARD, *Montreal, Q.*

“ H. H. WRIGHT, *Toronto, O.*

“ E. H. TRUDEL, *Montreal, Q.*

“ J. H. RICHARDSON, *Toronto, O.*

“ C. V. BERRYMAN, *Toronto, O.*

“ E. D. WORTHINGTON, *Sherbrooke, St. Francis, Q.*

“ A. M. McMASTER, *Toronto, O.*

“ D. E. BURDETT, *Belleville, O.*

“ W. BAIRD, *St. John, N. B.*

“ D. McNEIL PARKER, *Halifax, N. S.*

“ P. O. TESSIER, *Quebec, Q.*

“ C. F. PAINCHAUD, *Varennes, Montreal, Q.*

Committee on Granting Licenses.

Dr. G. W. CAMPBELL, *Montreal, Q., Chairman.*

“ F. A. H. LARUE, *Quebec, Q.*

“ J. R. DICKSON, *Kingston, O.*

“ H. H. WRIGHT, *Toronto, O.*

“ E. H. TRUDEL, *Montreal, Q.*

“ J. H. RICHARDSON, *Toronto, O.*

“ C. V. BERRYMAN, *Toronto, O.*

“ E. D. WORTHINGTON, *Sherbrooke St. Francis.*

“ A. M. McMASTER, *Toronto, O.*

“ D. E. BURDETT, *Belleville, O.*

“ W. BAIRD, *St. John, N. B.*

“ D. McNEIL PARKER, *Halifax, N. S.*

“ P. O. TESSIER, *Quebec, Q.*

“ C. F. PAINGHAUD, *Farences, Q.*

Committee on Vital Statistics and Hygiene.

Dr. W. H. HINGSTON, *Montreal, Q., Chairman.*

“ W. CANNIFF, *Belleville, O.*

“ W. BAIRD, *St. John, N. B.*

“ J. C. TACHÉ, *Ottawa, O.*

“ F. H. A. LARUE, *Quebec, Q.*

“ G. E. FENWICK, *Montreal, Q.*

“ H. S. MUIR, *Halifax, N. S.*

“ L. Z. TASSÉ, *St. Laurent de Montreal, Q.*

“ W. S. HARDING, *St. John, N. B.*

“ HON. J. O. BEAUBIEN, *Montmagny, Q.*

“ JAMES THORBURN, *Toronto, O.*

Committee on Medical Registration.

Dr. W. MARSDEN, *Quebec, Q., Chairman.*

“ J. E. LANDRY, *Quebec, Q.*

“ H. PELTIER, *Montreal, Q.*

“ F. W. CAMPBELL, *Montreal, Q.*

“ H. H. WRIGHT, *Toronto, O.*

“ J. H. SANGSTER, *Toronto, O.*

“ W. CANNIFF, *Belleville, O.*

Committee on Medical Ethics.

Dr. W. MARSDEN, *Quebec, Q., Chairman.*

“ J. A. SEWELL, *Quebec, Q.*

“ T. S. PARKER, *Guelph, O.*

“ A. M. ROSEBRUGH, *Toronto, O.*

“ G. A. HAMILTON, *St. John, N. B.*

- " WADDELL, *St. John, N. B.*
- " J. B. GAEVIE, *Halifax, N. S.*
- " JAMES STEVERMAN, *Lunenburg, N. S.*
- " P. MUNROE, *Montreal, Q.*
- " H. PELTIER, *Montreal, Q.*
- " J. BOVELL, *Toronto, O.*
- " W. CANNIFF, *Belle Me, O.*

Publishing Committee.

- DR. A. H. DAVID, *Montreal, Q., Chairman.*
- " CHARLES SMALLWOOD, *Montreal, Q.*
- " A. G. BELLEAU, *Quebec, Q., General Secretary.*
- " W. H. HINGSTON, *Montreal, Q.*
- " F. W. CAMPBELL, *Montreal, Q.*
- " W. MARSDEN, *Quebec, Q.*
- EDMOND ROBILLIARD, *Montreal, Q.*

Committee of Arrangements.

- DR. F. M. HODDER, *Toronto, O.*
- " C. V. BERRYMAN, *Toronto, O.*
- " C. B. HALL, *Toronto, O.*
- " W. CANNIFF, *Belleville, O.*
- " JAMES H. RICHARDSON, *Toronto, O.*
- " JAMES THORBURN, *Toronto, O.*
- " G. P. DEGRASSI, *Toronto, O.*

Auditing Committee.

- DR. J. P. ROTTOT, *Montreal, Q.*
- " C. SMALLWOOD, *Montreal, Q.*
- " W. FRAZER, *Montreal, Q.*
- ALFRED G. BELLEAU, M.D., *General Secretary.*
- WM. H. HINGSTON, M.D., *Local Secretary for Quebec.*
- WM. CANNIFF, M.D., *Local Secretary for Ontario.*
- W. S. HARDING, M.R.C.S.L., *Local Secretary for New Brunswick.*
- JAS. R. DEWOLF, M.D., *Local Secretary for Nova Scotia.*

MINUTES
OF THE
FIRST ANNUAL MEETING
OF THE
CANADIAN MEDICAL ASSOCIATION,
HELD IN THE CITY OF MONTREAL, PROVINCE OF QUEBEC, CANADA,
SEPTEMBER 2ND, 3RD, AND 4TH, 1868.

The Association met at 11 o'clock, a. m., Wednesday, the 2nd September, in the Lecture Room of the Natural History Society. The chair was taken by the Hon. C. Tupper, M.D., C.B., of Nova Scotia, President of the Canada Medical Association, supported by the following Vice Presidents: E. M. Hodder, M.D., of Toronto, Ontario; Rufus M. Black, M.D., of Halifax, N.S.; Le Baron Botsford, M.D., of St. John, N.B.; and Hector Peltier, M.D., of Montreal, Quebec. Dr. Joseph Painchaud, the Doyen of the profession in Quebec, was invited to a seat on the platform.

A. G. Belleau, M.D., General Secretary; W. Canniff, M.D., Secretary for Ontario; W. S. Harding, M.R.C.S.L., Secretary for New Brunswick; and W. H. Hingston, M.D., Secretary for Quebec, were present.

The President then submitted the following order of proceedings, which was distributed among the members:

1. Chair to be taken at 10½ a.m.
2. Local Secretaries to register names, and report on credentials.
3. Minutes of last meeting to be read.
4. Reception of members by invitation.
5. Reading of letters from absentees.
6. Annual Address of President.
7. Reception of Reports of Special Committees.
8. Voluntary Communications.
9. Appointment of Nominating Committee.
10. New Business.
11. Selection of time and place of next meeting.
12. Report of Nominating Committee, and Election of Officers.
13. Unfinished and Miscellaneous business.

The attendance was large, the room being nearly filled.

The President said that as many of the names had already been registered by the Local Secretaries, they had better have the minutes read.

The Secretary, Dr. Belleau, then read the minutes of last session, held at Quebec.

The minutes were approved.

The following is a list of the Delegates and Members present :

PROVINCE OF QUEBEC.

ULR. ARCAND,.....	<i>Becancour.</i>	ROMUALD GARIÉPY,.....	<i>Montreal.</i>
PIERRE BEAUBIEN,.....	<i>Montreal.</i>	G. P. GIRDWOOD,.....	<i>Montreal.</i>
ALFRED G. BELLEAU,.....	<i>Quebec.</i>	R. T. GODFREY,.....	<i>Montreal.</i>
W. E. BESSEY,.....	<i>Montreal.</i>	ALPHONSE HÉBERT,.....	<i>Quebec.</i>
J. B. BLANCHET,.....	<i>Quebec.</i>	R. P. HOWARD,.....	<i>Montreal.</i>
HILARION BLANCHET,.....	<i>Quebec.</i>	W. H. HINGSTON,.....	<i>Montreal.</i>
JOHN BELL,.....	<i>Montreal.</i>	ANDREW W. HAMILTON,.....	<i>Melbourne.</i>
ALPHONSE BRODEUR,.....	<i>Roxton Falls.</i>	NAPOLEON JACQUES,.....	<i>St. Hyacinthe.</i>
A. T. BROSSÉAU,.....	<i>Montreal.</i>	R. H. KENNEDY,.....	<i>Montreal.</i>
JOSEPH G. BIBAUD,.....	<i>Montreal.</i>	C. E. LEMIEUX,.....	<i>Quebec.</i>
EDWARD S. BELLEAU,.....	<i>St. Michel.</i>	JOSEPH LEMAN,.....	<i>Montreal.</i>
ALFRED BAUDET,.....	<i>Coteau du Lac.</i>	PRAXÈDE LARUE,.....	<i>St. Augustin.</i>
G. W. CAMPBELL,.....	<i>Montreal.</i>	J. A. MORSON LAPIERRE,.....	<i>St. Jean Baptiste.</i>
F. W. CAMPBELL,.....	<i>Montreal.</i>	C. A. LESAGE,.....	<i>St. Grégoire le Grand.</i>
JOSEPH COTÉ,.....	<i>St. Valier.</i>	B. H. LEBLANC,.....	<i>Pointe St. Charles.</i>
TIBURCE CHAREST,.....	<i>Beauport.</i>	GÉDÉON LAROCQUE,.....	<i>Longueuil.</i>
JOSHUA CHAMBERLIN,.....	<i>Freligsburg.</i>	A. B. LAROCQUE,.....	<i>Montreal.</i>
C. B. CHAGNON,.....	<i>St. Pie.</i>	G. A. MASSON,.....	<i>Laprairie.</i>
JOS. P. L. DESROSNIERS,.....	<i>Montreal.</i>	P. MUNRO,.....	<i>Montreal.</i>
ADOLPHE DAGENAIS,.....	<i>Montreal.</i>	EDWIN MUNRO,.....	<i>Montreal.</i>
FRANÇOIS DUSAUT,.....	<i>Quebec.</i>	P. E. MOUNT,.....	<i>Montreal.</i>
C. L. DEMARTIGNY,.....	<i>Beauharnois.</i>	J. W. MOUNT,.....	<i>Acton Vale.</i>
J. A. DUCHESNEAU,.....	<i>Terrebonne.</i>	WILLIAM MARSDEN,.....	<i>Quebec.</i>
ALPHONSE DESCHAMPS,.....	<i>Montreal.</i>	R. L. MACDONNELL,.....	<i>Montreal.</i>
C. DUBUC,.....	<i>Montreal.</i>	D. C. MACCALLUM,.....	<i>Montreal.</i>
A. H. DAVID,.....	<i>Montreal.</i>	WILLIAM B. MALLOCH,.....	<i>Montreal.</i>
NAPOLEON DUCHESNOIS,.....	<i>Varennes.</i>	M. R. MEIGS,.....	<i>Bedford.</i>
L. A. E. DESJARDINS,.....	<i>Montreal.</i>	RICHARD S. MARKELL,.....	<i>Aultsville.</i>
G. S. DEBONALD,.....	<i>Montreal.</i>	PATRICK O'LEARY,.....	<i>Montreal.</i>
JOHN ERSKINE,.....	<i>Waterloo.</i>	JOSEPH PAINCHAUD,.....	<i>Quebec.</i>
G. E. FENWICK,.....	<i>Montreal.</i>	G. F. PAINCHAUD,.....	<i>Varennes.</i>
A. G. FENWICK,.....	<i>Three Rivers.</i>	CHARLES PICAULT,.....	<i>Montreal.</i>
WILLIAM FULLER,.....	<i>Montreal.</i>	E. G. PROVOST,.....	<i>Sorel.</i>
L. A. FORTIER,.....	<i>St. Clément.</i>	JOHN W. PICKUP,.....	<i>Beauport.</i>
J. E. FITZPATRICK,.....	<i>Baie St. Paul.</i>	FREDERICK PARÉ,.....	<i>Sherbrooke.</i>
WILLIAM FRAZER,.....	<i>Montreal.</i>	F. X. PERRÉAULT,.....	<i>Pointe aux Trembles.</i>
A. A. FERGUSON,.....	<i>Franklin.</i>	HECTOR PELTIER,.....	<i>Montreal.</i>
GEORGE FLEURY,.....	<i>St. Léon.</i>	J. C. POITEVIN,.....	<i>St. Martin.</i>
J. B. GARNEAU,.....	<i>St. Anne de la Pêrade.</i>	R. F. RINFRET,.....	<i>Quebec.</i>
AMÉDÉE GABOURY,.....	<i>St. Martin.</i>		

EDOUARD ROUSSEAU,.....	<i>Quebec.</i>	F. W. SHERIFF,.....	<i>Huntingdon.</i>
JULES ROBITAILLE,.....	<i>Quebec.</i>	WILLIAM SUTHERLAND,..	<i>Montreal.</i>
J. P. ROTTOT,.....	<i>Montreal.</i>	COLIN SEWELL,.....	<i>Montreal.</i>
EDMOND ROBILLARD,...	<i>Montreal.</i>	JOHN B. SELLEY,.....	<i>Montreal.</i>
G. E. ROY,.....	<i>Boucherville.</i>	ROBERT THOMPSON,.....	<i>Montreal.</i>
ARTHUR RICARD,.....	<i>Montreal.</i>	C. F. F. TRESTLER,.....	<i>Montreal.</i>
JOHN REDDY,.....	<i>Montreal.</i>	EUGENE HERCULE TRUDEL,	<i>Montreal.</i>
GEORGE ROSS,.....	<i>Montreal.</i>	MAGLOIRE TURCOT,..	<i>St. Hyacinthe.</i>
JOHN J. ROSS,....	<i>Ste. Anne de la Perade.</i>	J. M. TURCOT,.....	<i>Montreal.</i>
H. C. RUGG,.....	<i>Compton.</i>	HONORÉ THIÉRIEN,..	<i>Rivière David.</i>
W. E. SCOTT,.....	<i>Montreal.</i>	P. O. TESSIER,.....	<i>Quebec.</i>
S. B. SCHMIDT,.....	<i>Montreal.</i>	E. H. TRENHOLME,.....	<i>Montreal.</i>
CHARLES SMALLWOOD,..	<i>Montreal.</i>	ALFRED VILBON,.....	<i>Montreal.</i>
C. J. SAMSON,.....	<i>Quebec.</i>	THOMAS B. WHEELER,..	<i>Montreal.</i>
		E. D. WORTHINGTON,...	<i>Sherbrooke.</i>

PROVINCE OF ONTARIO.

LLEWELLYN BROCK,.....	<i>Toronto.</i>	G. J. FOTTS,.....	<i>Belleville.</i>
G. H. BOULTER,.....	<i>Stirling.</i>	A. M. ROSEBRUGH,.....	<i>Toronto.</i>
W. H. BROUSE,.....	<i>Prescott.</i>	JAMES H. RICHARDSON,..	<i>Toronto.</i>
C. W. BINGHAM,.....	<i>Ayr.</i>	EDWARD T. ROBERTS,	<i>Hawkesbury.</i>
G. V. BERRYMAN,.....	<i>Toronto.</i>	ROBERT STEWART,.....	<i>Bellville.</i>
WILLIAM CANNIFF,.....	<i>Belleville.</i>	M. SULLIVAN,.....	<i>Kingston.</i>
R. A. CORBETT,.....	<i>Port Hope.</i>	J. S. SCOTT,.....	<i>Toronto.</i>
G. J. DEGRASSI,.....	<i>Toronto.</i>	A. C. SINCLAIR,.....	<i>Martintown.</i>
R. EDMONDSON,.....	<i>Brockville.</i>	JAMES THORBURN,.....	<i>Toronto.</i>
SAMUEL HENRY FEE,...	<i>Kingston.</i>	ROBERT THIBODO,.....	<i>Belleville.</i>
EDWARD M. HODDER,...	<i>Toronto.</i>	J. C. TACHÉ,.....	<i>Ottawa.</i>
W. J. HENRY,.....	<i>Ottawa.</i>	E. VANCORTLAND,.....	<i>Ottawa.</i>
A. H. JOHNSON,.....	<i>Portsmouth.</i>	OCTAVIUS YATES,.....	<i>Kingston.</i>
DEWITT H. MARTYN,...	<i>Kincardine.</i>		

PROVINCE OF NOVA SCOTIA.

RUFUS S. BLACK,.....	<i>Halifax.</i>	CHARLES TUPPER, C.B....	<i>Halifax.</i>
ARTHUR MORAN,.....	<i>Halifax.</i>	W. N. WICKWIRE,.....	<i>Halifax.</i>

PROVINCE OF NEW BRUNSWICK.

W. BAYARD,.....	<i>St. John.</i>	CHARLES JOHNSTON,.....	<i>St. John.</i>
LEBARON BOTSFORD,...	<i>St. John.</i>	GEORGE E. KEATOR,....	<i>St. John.</i>
EDWIN BAYARD,.....	<i>St. John.</i>	P. PROVOST,.....	<i>Memramcook.</i>
W. S. HARDING,.....	<i>St. John.</i>	JAMES T. STEVES,.....	<i>St. John.</i>
G. A. HAMILTON,.....	<i>St. John.</i>		

The President announced that the next order of the day was the reception of members by invitation. The members of this Association had been invited to send a delegate to the American Medical Association, held in May last at Washington. In consequence of his (the President's) absence, however, no action had been taken. At the meeting of the American Medical Association several delegates were appointed to attend this meeting.

(The President here read a letter from Dr. Davis, of Chicago, one of the delegates appointed at the annual meeting at Washington, to the effect that circumstances had prevented him from attending the present Convention.)

The President next spoke of the benefits arising from the interchange of communication with the medical men of the United States, and hoped arrangements would be made to represent the Canadian Medical Association at the next meeting of the American Association. He had still hoped that some members of the American Association would be present.

Dr. W. H. Hingston, Secretary for the Province of Quebec, then read letters from Dr. J. C. Taché and Dr. Edward Van Courtland, of Ottawa, regretting their inability to attend the Convention. A letter was also read from Mr. Murray, the Secretary of the Literary Club, placing that institution at the disposal of members.

The President, Dr. TUPPER, then delivered the Annual Address. He said :

GENTLEMEN,—The sixth order of the day, which has been placed in my hand since I entered this room, is the Annual Address of the President. Standing, as I do, in the presence of members of the profession so much more distinguished in every branch of the profession than myself, though somewhat accustomed to public speaking, I should have great hesitation in attempting to give an annual address, were it not that I know that the motto of the very honorable profession to which we belong is everywhere recognized to be "Deeds, not words." Hence you will not expect from me any lengthened observations in relation to which so many of you are infinitely better qualified to treat than the gentleman upon whom you have conferred the great and undeserved honour of making him the first President of the Association. But, in retiring from the chair in which you have so kindly placed me, I would do great injustice to my own feelings if I did not avail myself of this opportunity to express to you the great importance I attach to this meeting of the Association. In October last, in Quebec, the Association was formed by some one hundred and sixty-six prominent members of the medical profession, representing all parts of the Dominion of Canada. At a time when a political Union of the Provinces had been accomplished it was thought advisable to unite more closely the members of the profession in the Provinces, so that they might become better acquainted with each other, and might consult respecting the best

means of elevating the profession and advancing its interests, and thereby be advancing the interests of the people of this great Dominion. The business of the first meeting was necessarily of a preliminary character. To committees of able and intelligent members of the profession was entrusted the duty of submitting, at this most important meeting of the Association, the results of their deliberations, in order that the great body of the Association might deliberate upon the important matters presented to them, and take such measures as they believe would conduce to the advancement of the great object they have in view. I say I would do great injustice to my own feelings if I did not avail myself of an occasion like this to express the deep importance which, in my judgment, attaches to this meeting—an importance to which my feeble language cannot do adequate justice. I regard it as important, because I hold it to be a meeting of members of a profession the most noble, the most unselfish, and the most influential of any secular profession or calling. (Cheers.) The most noble, because our lives are devoted to the God-like work of relieving human suffering, and of contributing to that which is felt to be the most important object—not only the relief of human suffering, but the preservation of human life, whenever it is possible that human means may aid in its preservation. The most unselfish, because it is the only profession which, I believe, uniformly gives its untiring services, without fee or reward, whenever suffering humanity demands attention and consideration at our hands. (Cheers.) The most influential, because, knowing, as it does, no distinction of creed, no distinction of nationality, no distinction of class, no distinction of party, the members of our profession form the connecting link between all creeds, all nationalities, all parties, and all classes; requiring, as they do, a liberal education in order to the successful discharge of the high duties of their profession, and no ordinary amount of talent; passing, as they do, from one class to another, from members of one political party to another, they have an opportunity of exercising a moral and political influence which I believe is fully admitted to be certainly second to that of no other profession. (Applause.) It is not strange that, engaged as they are in the relief of suffering humanity, connected as they are with that which bears most deeply and most seriously upon the human mind of anything that can bear upon it, they should acquire the influence they do. Who can witness the anxiety with which the parent, husband, brother, sister, or friend, turns to the medical adviser, without knowing and appreciating the immense influence that he must necessarily and naturally acquire? He is looked for not only to relieve the body, but also to relieve that deep, mental anxiety, which perhaps is greater than any other feeling that the human mind can experience. It is this which gives the medical profession an ascendancy and an influence which devolves upon them a responsibility more deep and

more important than it is possible for me to express in any language I can offer. It is necessary not only that members of this profession should be learned, in order to discharge the important duties of a profession which requires the deepest and most accurate knowledge, but they should also be good and patriotic—inspired by a lofty patriotism that will prompt them to avail themselves of the great opportunity that Providence has thrown in their way of advancing the best interests of their country, and to do all they can to elevate, intellectually and morally, the communities in which they are placed. (Cheers.) The members of the medical profession are oftentimes without those advantages which are enjoyed by members of the other professions. Those of the camp, the senate, the pulpit, may have to encounter difficulties, but they have the sympathy of numbers to sustain them. Their ministrations, their official duties are performed in the presence of large numbers of people. They have an excitement calculated and qualified to sustain them in the discharge of the duties to which they are called. Without these stimulants, the members of the medical profession have to encounter fatigue and danger, and oftentimes what is worse to bear, ingratitude for the most earnest and most successful labours it is possible to perform. (Cheers.) The soldier, it is true, goes out to battle and exposes his life, but the excitement of the struggle, the hand to hand contest, sustains him, and well he knows that if successful the Victoria Cross will decorate his breast. The medical man exposes himself to dangers equally great, to pestilence more deadly than the most murderous fire to which the soldier can be exposed; and, unsustained by the excitement which attends the soldier, he steadily, manfully, nobly discharges his duties in the most effective manner to his fellow man, knowing that no distinction awaits his success, knowing, too, as I have said before, that perhaps he may be very poorly compensated or his services very poorly appreciated. (Loud cheers.) But, though we have not the advantage of those who engage in commerce, who, though they have to undergo toil and anxiety, yet reap the rich reward of wealth, yet we have the proud consciousness to sustain us of discharging the highest and holiest duties that man can ever be called to discharge,—that of promoting the happiness and comfort of his fellow men. (Cheers.)

One of the most important subjects that will engage the attention of this Convention is Medical Education. To the position to which I have drawn your attention, a position of influence so great, of importance so deep, there attaches a very grave and serious responsibility. It becomes necessary, therefore, that we should, by combination and co-operation with each other, adopt such a course as will give to those who are entering upon our profession, the high qualifications and high attainments so necessary to the proper discharge of duties of so important and noble a character. The subject of Medical Education, therefore, is a subject

which will engage the serious attention of the Convention. Every member has the deepest interest in knowing that the qualifications of those who are to come after him shall be of the very highest character that it is possible to attain. In proportion as medical men are qualified for the performance of their duties will they deserve and receive the confidence of the public. The subject of a proper system of registration of medical men is of less importance to the members of the medical profession than to the community at large. We owe it to our fellow men to provide some means whereby the great mass of the people may rightly distinguish between those qualified for the duties of the profession and those unqualified. If such means be not devised, injurious consequences affecting the health and happiness of the people would result. Then, again, the question of medical ethics, the question of the relation of professional men to each other, and to those who entrust themselves to their professional care, is also a subject which will be brought under the notice of this Convention. I do not think that any elaborate code of medical ethics is required. I believe a profession such as ours, so learned, liberal and exalted, and exposed as we are to difficulties inseparable from the practice of a profession like our own, which has no public tribunal to which appeal can be made—the only true code of ethics is attention to the golden rule, “Do unto others as we wish to be done by.” (Loud cheers.) The professional man who stands by that golden rule will exhibit in all his dealings, both with his professional brethren and the community at large, the character of the true gentleman, and will require little else, I believe, for his guidance. Before I sit down, I will make a few observations in relation to the great importance of unanimity in our proceedings. There is an old saying—I wish I could say it was an old slander—that “doctors differ.” While we know that it is impossible for men to see eye to eye in every matter, and to hold precisely the same views, yet I do feel that, in view of the high position of this Association and the more important objects we seek to attain, it is one of its first duties to give a gentlemanly and generous consideration to each other's opinions, whether we differ from them or not. The only way to make this organization a success is by conceding, as much as possible, to those differences of opinion which must necessarily exist in the discussion of those matters to which we are called to give attention. I wish to say that the eyes of this Dominion are upon us. Our meeting will result in good or evil, just according to the spirit that we enter upon the discussion of those difficult questions, and the amount of accord and agreement that may prevail amongst us. I will not detain you longer. I feel most deeply your kindness in elevating me to the high position of your President, and I wish to say, before retiring from this chair, that I retire to the rank of a private member with a disposition to return

your kindness and consideration, by doing in that private capacity, or in whatever position I may occupy, all in my power to advance the objects of this Association and the profession, which I regard as more important than any other secular calling. I beg to thank you most kindly for the great honour conferred upon me, and will take more pleasure in sustaining some other person in the chair than I have had in occupying it.—
(Loud cheers.)

The General Secretary then read the Treasurer's Report, with letter accompanying, tendering his resignation as Treasurer.

Moved by Dr. W. H. Hingston, of Montreal, seconded by Dr. E. M. Houder, of Toronto :

Resolved,—That the Treasurer's report be submitted to a committee of three auditors, and that this committee be composed of Dr. J. P. Rottot, of Montreal, Dr. James H. Richardson, of Toronto, and Dr. Steves, of St. John, New Brunswick.

Dr. W. Canniff, of Belleville, chairman of the Committee of Organization, read the Report of the Committee, together with the Constitution and By-Laws.

Moved by Dr. Charles Smallwood, of Montreal, seconded by Dr. Pierre Beaubien, of Montreal :

Resolved,—That the Report be received, translated into French, and printed for the use of members in both languages.

Dr. Marsden, the Chairman of the Committee on Medical Ethics, read the Report of the Committee, recommending the adoption of a code of Ethics.

It was moved by Dr. Jean Gaspard Bibaud, of Montreal, seconded by Dr. P. O'Leary, of Montreal, That this meeting do now adjourn, 1.30 p.m., till 3 p.m.—Carried.

AFTERNOON SESSION.

The discussion on the Code of Ethics was briefly resumed, and one or two amendments were proposed.

The President announced that the matter would come up for discussion to-morrow.

Dr. William Marsden, of Quebec, chairman of the committee appointed in October last, read a Report on Medical Registration.

The President said as the matter was one of some importance it had better be deferred till to-morrow. It was then

Moved by Dr. W. H. Brouse, of Prescott, seconded by Dr. S. B. Schmidt, of Montreal :

Resolved,—That the report be laid on the table and its consideration deferred till to-morrow.

Dr. R. P. Howard, of Montreal, chairman of the Committee on Preliminary Examination, presented the following report :

PRELIMINARY EDUCATION.

The committee on Preliminary Examinations beg to submit the following recommendations :

1. That all persons intending to study medicine in the Dominion of Canada be required to pass a matriculation examination in preliminary education, and that their professional education shall be held to commence from the time of their having passed such matriculation examination.

2. That the Matriculation examination for students in medicine in the Dominion of Canada shall be (with some alterations to be presently mentioned) that recommended by the Council of Medical Education and Registration of Great Britain, and adopted in the amended Medical Act of Upper Canada, and shall be as follows :

"Compulsory English or French language, including grammar and composition ; Arithmetic, including vulgar and decimal fractions ; Algebra, including simple equations ; Geometry, first two books of Euclid ; Latin, translation and grammar ; Natural History and Logic ; and one of the following optional subjects ; Greek, French or English (according to nationality of students) ; German—and the committee are of opinion that Mental and Moral Philosophy should be made compulsory at as early a period as possible."

3. That although an acquaintance with Greek is very desirable, yet, as the British Medical Council have (at their meeting in July last, 1868,) deemed it advisable to defer at present enforcing a knowledge of Greek on all medical students in Great Britain, this Committee, while recommending that language to all students, doubt the propriety of at present fixing the period at which a knowledge of it shall be compulsory.

4. That with the view of rendering the Matriculation examination efficient and uniform, it be conducted by persons engaged in general teaching, and officially connected with the Universities, Colleges, or Seminaries of the Dominion.

5. That the certificate of having passed the Matriculation Examination shall testify that the student has been examined in (1) English or French language, including Grammar and Composition ; (2) Arithmetic, including vulgar and decimal fractions ; (3) Algebra, including simple equations ; (4) Geometry, first two books of Euclid ; (5) Latin, including translation and grammar ; Natural Philosophy and Logic ; and in one of the following optional subjects : Greek, French, or English, according to nationality of student, German.

6. That a degree in Arts of any British or Canadian University, or of

any other University of good standing, be accepted as a sufficient qualification to enter upon the study of medicine.

7. That all the students presenting themselves for this examination shall pay the sum of—dollars prior to examination, and, in the event of failure, half the sum shall be returned.

All of which is respectfully submitted.

R. P. HOWARD,
Chairman.

Moved by Dr. W. H. Brouse, of Prescott, seconded by Dr. G. A. Hamilton, of St. John, New Brunswick :

Resolved,—That the report on Preliminary Examination be received and laid over for further consideration.

Dr. William Bayard, of St. John, New Brunswick, chairman of the Committee on Medical Education, presented the report of the said committee.

ON PROFESSIONAL EDUCATION.

As the curriculum of professional study required before obtaining a license to practice, is now, since the action of the Medical Council of Upper Canada in 1866, almost the same in Upper and Lower Canada, your Committee have not many new suggestions to make, but rather to reproduce, with such alterations and additions as have appeared to them advisable, the regulations at present existing in the Provinces of Ontario and Quebec, with the view to their adoption by the sister Provinces of Nova Scotia and New Brunswick.

1. The Committee recommend that professional education shall extend, as now, over four years from the passing of matriculation examination, not less than three of which should be passed at an incorporated University, College or School of Medicine approved of; but your Committee strongly recommend that the above period of four years be so passed.

2. That besides the six months' winter session, there shall be in each year a summer session of three months, so that nine months in every year shall be spent in the continuous acquisition of professional knowledge and learning.

3. That the following branches of medicine shall constitute the curriculum of Professional education, which all medical students must furnish proof of having pursued before presenting themselves for a license to practise medicine, surgery and midwifery :—

Descriptive Anatomy ; Practical do., or Dissection ; Chemistry ; Materia Medica ; Institutes of Medicine, consisting of Physiology and General Pathology ; Theory and Practice of Medicine ; Principles and Practice of Surgery ; Midwifery, and Diseases of Women and Children, of each of which, courses of six months shall be required.

Clinical Medicine, Clinical Surgery, of each of which two courses of three months shall be required; Botany, Medical Jurisprudence, Practical Chemistry, of each of which one course of three months shall be required.

4. Provided, however, that two three months' courses of Practical Chemistry may be accepted in lieu of one six months' course of Theoretical Chemistry; and one three months' course of Practical Physiology, with a three months' course of Pathological Anatomy, may be accepted in the place of one six months' course of Institutes; and a three months' course of Public Hygiene may be accepted in the place of the course of Medical Jurisprudence.

5. Every student shall furnish proof of having studied Practical Pharmacy for a period of three months.

6. All students must give proof by ticket, that they have attended, during twelve months, the practice of a general hospital whose daily average of indoor patients is not less than fifty, and that they have attended the practice of a lying-in hospital for six months.

7. That all graduates of recognized Universities and Colleges of the United States who shall have passed, before commencing their medical studies and matriculation examination, equivalent to that recommended by this Association, unless they are graduates of Arts, shall attend one full course of lectures at some University or incorporated medical school in the Dominion of Canada, and complete four years of medical study, provided they have completed the curriculum recommended by this Association.

8. That there shall be two examinations—primary and final. The primary shall comprehend the branches of Anatomy, Materia Medica, Chemistry, Institutes of Medicine, and Botany, and the final shall comprehend the branches of Theory and Practice of Medicine, Surgery, Midwifery, Medical Jurisprudence, Clinical Medicine, and Clinical Surgery, and that the primary examination shall be passed at the end of the third year.

9. That the age of 21 years shall be the earliest age at which any medical degree or diploma shall be granted.

10. That the professional examinations shall be conducted in writing or orally.

W. BAYARD, M.D.,
Chairman.

Moved by Dr. Pierre Beaubien, seconded by Dr. S. B. Schmidt, of Montreal:

Resolved,—That the report be received and laid over for further consideration.

Dr. W. H. Hingston, of Montreal, as chairman of the Committee of Statistics and Hygiene, presented the report of the said committee.

Moved by Dr. Pierre Beaubien, of Montreal, seconded by Dr. Charles Smallwood, of Montreal:

Resolved,—That the report be received and deferred for further consideration.

Dr. J. P. Rottot, of Montreal, as chairman of the Committee of the Auditors, presented the report of the said committee.

Dr. C. Smallwood, of Montreal, moved, seconded by Dr. E. H. Trenholme, of Montreal :

Resolved,—That the report be received and adopted.

Moved by Dr. William Marsden, of Quebec, seconded by Dr. W. H. Brouse, of Prescott :

That the nominating committee for the Province of Quebec be composed of the following members : Dr. P. Beaubien, of Montreal ; Dr. P. O. Tessier, of Quebec ; Dr. J. P. Rottot, of Montreal ; and Dr. E. D. Worthington, of Sherbrooke.

After some discussion, it was

Moved in amendment by Dr. R. P. Howard, of Montreal, seconded by Dr. Robert Craik, of Montreal :

That the nominating committee for the Province of Quebec be composed of the following members :—Dr. Pierre Beaubien, of Montreal ; Dr. E. Rousseau, of Quebec ; Dr. W. Frazer, of Montreal ; Dr. W. Marsden, of Quebec ; and Dr. E. D. Worthington, of Sherbrooke.

This amendment was put to the vote and carried on the following division :—Yeas, 55 ; Nays, 47.

Moved by Dr. E. M. Hodder, of Toronto, seconded by Dr. George P. DeGrassi, of Toronto :

Resolved,—That the nominating committee for the Province of Ontario be composed of the following members :—Dr. James Thorburn, and Dr. C. V. Berryman, of Toronto ; Dr. Walter James Henry, of Ottawa ; Dr. DeWitt H. Martyn, of Kincardine ; and Dr. Michael Sullivan, of Kingston.

Moved by Dr. E. D. Worthington, of Sherbrooke, seconded by Dr. G. A. Hamilton, of St. John, New Brunswick :

Resolved,—That the nominating committee for the Province of Nova Scotia be composed of the following members :—Dr. Rufus S. Black, Dr. Arthur Moran, and Dr. W. N. Wickwire, of Halifax ; N.S.

Moved by Dr. W. S. Harding, of St. John, New Brunswick, seconded by Dr. S. B. Schmidt, of Montreal :

Resolved,—That the nominating committee for the Province of New Brunswick be composed of the following members :—Dr. Le Baron Botsford, Dr. James T. Steves, and Dr. Keator, of St. John, New Brunswick.

Moved by Dr. William Marsden, of Quebec, seconded by Dr. W. H. Hingston, of Montreal :

That the eleventh clause of the order of proceedings be suspended, viz., the selection of time and place of the next meeting. This motion was lost.

Moved by Dr. Rufus S. Black, of Halifax, N.S., seconded by Arthur Moran, of Halifax, N.S. :

That the city of Halifax, N.S., shall be the place of the next meeting.

Moved in amendment by Dr. E. M. Hodder, of Toronto, seconded by Dr. C. V. Berryman, of Toronto :

That the city of Toronto shall be the place of the next meeting.

Moved in amendment to the amendment by Dr. W. H. Brouse of Prescott, seconded by Dr. W. H. Hingston, of Montreal :

That the city of Ottawa shall be the place of the next meeting.—Lost.

The amendment proposed by Dr. E. M. Hodder was then put to the vote and carried.

Moved by Dr. E. M. Hodder, of Toronto, seconded by Dr. Gedeon LaRocque, of Longueuil :

Resolved,—That the annual meeting shall take place on the second Wednesday of September, 1869, in the city of Toronto, Province of Ontario.

Dr. W. H. Hingston, on behalf of the Committee of Arrangements, announced the following entertainments :

1. A *Conversazione* at the William Molson Hall of McGill College, on Wednesday evening, the 2nd September, at 9 p.m.

2. A *Dejeuner* at the St. Lawrence Hall, at 9 a.m., on Friday, the 4th of September.

The Convention then adjourned till Thursday, at 10.30 a.m.

SECOND DAY.

THURSDAY, SEPTEMBER 3RD, 1868.

The Association was called to order at half-past ten, the President, Dr. Tupper, in the chair, supported by Dr. Black, Dr. E. M. Hodder and Dr. Botsford, Vice-Presidents.

The Secretary read the minutes of the last meeting, which were confirmed.

DR. MARSDEN rose to call the attention of the meeting to the formation of a Dental Association, two gentlemen from which attended yesterday's sitting, as delegates to the Convention. He submitted that these gentlemen, being specialists, and not regular members of the faculty, were not entitled to sit at the meetings of the Convention. After a discussion, the subject was referred to the Secretaries, whose duty it was to examine the credentials of all gentlemen claiming to sit at the meetings.

The President having announced that the Constitution and By-Laws were not yet ready for distribution, being still in the printer's hands, suggested the consideration of the Report on Statistics and Hygiene, whereupon it was

Moved by Dr. W. Canniff, of Belleville, seconded by Dr. Charles Smallwood, of Montreal : That the Association do now consider the report on Statistics and Hygiene—Carried.

Whereupon Dr. W. H. Hingston read the same, when it was

Moved by Dr. John Reddy, of Montreal, seconded by Dr. R. Edmondson, of Brockville : That this report be received and adopted—Carried.

Dr. W. Canniff, secretary for Ontario, read letters from Dr. Grafton Tyler, of Georgetown, D. C., and Dr. Allee, of Harrisburg, Pennsylvania, expressing their pleasure at the formation of a Canadian Medical Association, and their regret at being unable to attend the convention.

Dr. G. W. Campbell, of Montreal, on motion, read the Report on a Uniform System of Granting Licenses, as follows :

As the reports of the committees upon Preliminary and Professional Education embody the suggestions for the regulation of the qualifications of candidates for license in the Dominion of Canada, comparatively little remains for this committee to report.

Your Committee beg leave respectfully to recommend :

1. That every candidate for license shall furnish proof : 1. That he has attained the age of twenty-one years ; 2. That he has passed the Matriculation examination, and has completed the curriculum of professional study recommended by your committee upon these subjects ; 3. That he has pursued his studies for a period of not less than four years from date of passing his Matriculation examination.

2. That no person shall hereafter receive a license to practise medicine, or be permitted to register a degree or diploma within the Dominion of Canada, unless such degree, diploma, or license has been obtained from some University, College, or incorporated School of Medicine in Her Majesty's dominions, whose requirements for graduation or licensing are equal to the minimum curriculum recommended by your committee on Medical Education.

3. That the professional examinations recognized shall be conducted in writing and orally, and that clinical examinations shall be conducted at the bedside in a practical manner.

4. That this Committee would recommend that there should be formed a general Medical Council of Education and Registration for the Dominion of Canada, who should have the supervision of medical education, and should be empowered to appoint visitors to the different universities, colleges, and licensing bodies in the Dominion, to ascertain that the minimum curriculum is duly enforced, and the examination fairly conducted.

5. That a degree, diploma, or license from recognized bodies, should only be received for what it sets forth, and that the holder should be subjected before receiving license to an examination in the branches of medicine not specified in the document.

6. Your committee, in conclusion, recommend that persons entitled to registration in Great Britain should have the same privilege granted to them in the Dominion of Canada.

G. W. CAMPBELL, M.D., *Chairman*.

On motion of Dr. Charles Smallwood, of Montreal, seconded by Dr. Pierre Beaubien, of Montreal, the report was received and laid on the table.

Moved by Dr. Edward Brousseau, of Quebec, seconded by Dr. Samuel B. Schmidt, of Montreal, and

Resolved,—That this report be printed, and distributed to the members of the Association, and be taken into consideration at the next annual meeting.

Dr. R. Edmonson, of Brockville, moved, seconded by Dr. W. H. Brouse, of Prescott: That the time allowed to each speaker shall be five minutes, and that no one but the mover shall be allowed to speak twice on the same subject—Carried

Dr. Hingston then read the following letter from Ed. Barnard, jr., on the subject of Mineral Waters:

‘MONTREAL, 3rd Sept., 1868.

“GENTLEMEN,—May I be allowed to call your attention to the accompanying extracts of official reports of Dr. T. Sterry Hunt, F.R.S., Chemist to the Geological Survey of Canada, giving the analysis of the Varennes mineral waters, and also to notes written years ago by a distinguished member of your society—Dr. Charles F. Painchaud, of Varennes. Both gentlemen have, in their papers, earnestly requested the medical profession to look into the merits of these waters, which, besides many other valuable medicinal properties, contain ‘two rare bases—baryta and strontia—which have never hitherto been observed in any of the mineral waters of this continent.’ (See Dr. Hunt’s report.)

“Dr. Painchaud claims to have used them for years with repeated success in the treatment of several diseases, and both the above named gentlemen insist on their value and unite in their desire to have their virtues looked into by the medical faculty.

“These strong recommendations will be my excuse for troubling you so far as to request your naming a committee to report on the medicinal value of the waters which will be supplied you fresh from the ‘Saline Spring.’

“Dr. Hunt has for years recommended these waters to be charged with carbonic acid gas, stating that by this simple process they could be made fully equal and superior in some respects to those of the Seltzer and Congress Springs. Waters thus prepared will be placed at your disposal.

"The report of such a committee, if favourable, might materially assist in starting anew, as a place of summer resort, the Springs of Varennes, which a century ago were greatly frequented by the descendants of the old French *emigres*, besides bringing to Canada a number of American tourists, who would be attracted by the incontestable beauty of the locality, many invalids would derive benefit from the use of the waters.

I have, &c.,

(Signed,)

EDW. BARNARD.

The Chairman and Members of the Medical Convention.

After some desultory conversation, it was moved by Dr. W. H. Brouse, of Prescott, seconded by Dr. G. J. Potts, of Belleville :

That the letter be received and placed on the files, it not being in the province of the Association to accede at present to the request therein contained.

Moved by Dr. A. H. David, seconded by Dr. Joshua Chamberlain, of Freligsburgh, and

Resolved,—That the meeting do now adjourn till two p.m.

AFTERNOON SESSION.

The President, Dr. Tupper, resumed the chair at half-past two o'clock.

Dr. A. H. David moved, seconded by Dr. G. H. Boulter, of Stirling, And it was resolved, that the report on the plan of organization of the Association and By-laws be considered clause by clause. The meeting then proceeded to the consideration of this report, and a number of clauses were adopted with some alterations.

Moved by Dr. Robert Craik, of Montreal, seconded by Dr. John Reddy, of Montreal :

That the meeting do now proceed to the election of officers.

Moved in amendment by Dr. W. H. Hingston, of Montreal, seconded by Dr. E. H. Trudel, of Montreal :

That the meeting do continue to consider the Report on By-laws.—Carried.

The Association then resumed the consideration of the constitution, and adopted the remaining clauses with some amendments.

It was then moved by Dr. W. H. Brouse, of Prescott, seconded by Dr. G. W. Campbell, of Montreal and :

Resolved,—That this Constitution as now amended be the Constitution of this Association.

The President now called upon the committee to report upon the nomination of officers for the current year, when Dr. DeWitt Martyn, the Secretary, presented the following report :

COMMITTEE ROOM,

CANADIAN MEDICAL ASSOCIATION, SEPT. 3RD, 1868.

MR. PRESIDENT,—The Nominating Committee beg leave to recommend unanimously that the following gentlemen be elected officers of this Association for the year 1868-69.

THE HON. CHARLES TUPPER, M.D., C.B., *President.*

ALFRED G. BELLEAU, M.D., *General Secretary.*

DR. HILARION BLANCHET, *Treasurer.*

VICE-PRESIDENTS.

G. W. CAMPBELL, M.A., M.D., *Quebec.*

EDWARD M. HODDER, M.D., *Ontario.*

LEBARON BOTSFORD, M.D., *New Brunswick.*

HONOURABLE D. McNEIL PARKER, M.D., *Nova Scotia.*

LOCAL SECRETARIES.

J. P. ROTTOT, M.D., *Quebec.*

W. CANNIFF, M.D., *Ontario.*

W. S. HARDING, M.R.C.S.L., *New Brunswick.*

ARTHUR MORAN, M.D., *Nova Scotia.*

All which is respectfully submitted on behalf of the Committee.

(Signed,)

P. BEAUBIEN,

Chairman.

DEWITT H. H. MARTYN,

Secretary.

The Hon. Dr. Charles Tupper, C.B., was then proposed and unanimously elected President of the Association.

Three cheers for Dr. Tupper were then proposed and heartily given.

Dr. Tupper, in thanking the assembly for their acknowledgment of his re-election, said he was at a loss to express his gratification at the honour they had again conferred upon him, a gratification doubly intensified when he recollected the circumstances of his election last year. There was, however, to him a subject of regret in their making this selection, in that, among them were men wise, high, honourable and distinguished, with reputations not confined to the immediate locality, but extending to the whole of the Dominion, the adjoining Republic, and even to Europe; it was, he repeated, a subject of regret to him that, among these men, they had not found some one to fill the high and honourable post they had that day again conferred upon him. The circumstance of his election, nevertheless, whilst causing in him the feeling to which he had just given expression, led him also the more fully to appreciate the

great honour and distinction they had done him. He would add, at the risk of appearing egotistical, that although he had been disposed to yield up the high place which he had filled with so much pleasure to himself, yet he would yield to no living man in his constant and anxious desire to advance the true interests of his profession, and to carry out in their highest sense, and all their integrity, the objects of the Association of which they were members. The Association, as he conceived it, was formed for the benefit of the profession and interests of society generally. For himself, out of the past six months, he had only had leisure to spend one month with his family, therefore it would be apparent to them that any leisure time at his disposal would naturally be devoted to them; but in the case of the Medical Convention he had felt his duty to be imperative, and that to perform that duty he must at all risks and at no matter what inconvenience place himself at their service on this occasion (cheers), and it was in pursuance of that first duty that he had come among them that day. He believed that the future of the Association was a future of greatness, and a future of extended usefulness, and he felt that his place was really and truly among them. When this great Dominion was being constituted, he had been offered a cabinet portfolio, and at various times other high offices in various spheres of usefulness, but such offers he had invariably declined, feeling better able to devote himself with a greater prospect of usefulness to his fellow men, and to the profession at large. In his present state, and on that account, if on that account alone, he felt that he was entitled to be relieved from the claims of other public duties, in order that he might devote himself to the high and honourable profession to which he ventured to say he had devoted the most valuable hours of his life; to which he had consecrated such powers as he possessed, and to which he was bringing up his eldest son. Such had been his life, such his highest ambition; and it was with this devotion to the profession that he had entertained that feeling of regret to which he had given expression in the most forcible manner in his power. And now nothing remained for him but to thank them most warmly for their re-electing him as their president. (Cheers.)

Dr. A. G. Belleau, of Quebec, was proposed and elected General-Secretary.

Dr. Hilarion Blanchet, of Quebec, was proposed and unanimously elected Treasurer.

Dr. G. W. Campbell, of Montreal, was proposed as Vice-President for the Province of Quebec.

Moved in amendment by Dr. Tessier, of Quebec, that the name of Dr. W. Marsden, of Quebec, be substituted for that of Dr. G. W. Campbell.

Dr. W. Marsden here left the hall objecting to his nomination, and the

amendment was then lost, the original motion being carried on division, and Dr. G. W. Campbell, of Montreal, was declared elected Vice-President for the Province of Quebec.

Dr. E. M. Hodder, of Toronto, was then proposed and unanimously elected Vice-President for the Province of Ontario.

Dr. LeBaron Botsford, of St. John's, New Brunswick, was proposed and unanimously elected Vice-President for the Province of New Brunswick.

The Honourable D. McNeil Parker, of Halifax, Nova Scotia, was proposed and unanimously elected Vice-President for the Province of Nova Scotia.

Dr. J. P. Rottot, of Montreal, was proposed and unanimously elected Secretary for the Province of Quebec.

Dr. W. Canniff, of Belleville, was unanimously re-elected Secretary for the Province of Ontario.

Dr. W. S. Harding, of St. John's, New Brunswick, was unanimously elected Secretary for the Province of New Brunswick.

Dr. A. Moran, of Halifax, Nova Scotia, was unanimously elected Secretary for the Province of Nova Scotia.

On motion of Dr. Edward Rousseau, of Quebec, seconded by Dr. W. H. Brouse, of Prescott, a vote of thanks was unanimously passed to the retiring officers.

Dr. P. Beaubien, of Montreal, seconded by Dr. J. G. Bibaud, moved :
That this meeting do adjourn till 11 a.m. to morrow. Carried.

THIRD DAY.

FRIDAY, SEPTEMBER 4TH, 1868.

The Association was called to order by the President at half-past eleven.

The minutes of the last meeting were read by the Secretary and approved.

Moved by Dr. W. Marsden, of Quebec, seconded by Dr. A. G. Fenwick, of Three Rivers,

Resolved,—That the Report on the By-Laws be taken into consideration.

Accordingly the meeting then proceeded to take the By-Laws into consideration, clause by clause, and amended some of them as now printed.

Moved by Dr. Charles Smallwood, of Montreal, seconded by Dr. A. H. David, of Montreal,

Resolved,—That the Report on the By-Laws as amended be adopted.

It was then moved by Dr. W. Marsden, of Quebec, and seconded by Dr. E. H. Trudel, of Montreal,

That the Report on Medical Registration be adopted. Carried.

Moved by Dr. W. H. Hingston, of Montreal, seconded by Dr. J. P. Rottot, of Montreal,

Resolved,—That the Report on Medical Ethics as amended be adopted.
Moved by Dr. W. Marsden, of Quebec, seconded by Dr. Charles Smallwood, of Montreal,

Resolved,—That the committee of arrangements for Ontario be composed of the following members: Dr. E. M. Hodder, Dr. C. V. Berryman, Dr. James H. Richardson, Dr. James Thorburn, Dr. W. Canniff, Dr. C. B. Hall, Dr. G. P. DeGrassi.

Dr. A. B. LaRocque, of Montreal, presented the second annual Report of the Montreal Sanitary Association, which was referred to the committee on Statistics and Hygiene.

Moved by Dr. Pierre Beaubien, of Montreal, seconded by J. A. Duchesneau, of Terrebonne,

Resolved,—That the Printing Committee be composed of the following members: Drs. A. H. David, Charles Smallwood, W. H. Hingston, F. W. Campbell, Edmund Robillard, of Montreal, W. Marsden, of Quebec, and the General Secretary.

Moved by Dr. Robert Craik, of Montreal, seconded by Dr. R. P. Howard, of Montreal,

Resolved,—That all Standing Committees of last year be continued during the ensuing year.

Moved by Dr. W. Marsden, of Quebec, seconded by Dr. J. P. Rottot, of Montreal,

That the Association do reconsider the vote given at the last meeting on the Mineral Springs of Varennes.—Lost.

Moved by Dr. William Bayard, of St. John, New Brunswick, seconded by Dr. A. G. Fenwick, of Three Rivers,

Resolved,—That the thanks of this Association be given to the following Steamboat and Railway Companies—Grand Trunk Railway Company; Richelieu Steamship Company; Canadian Navigation Company; Quebec and Gulf Ports Steamship's Company; Great Western Railway Company; International Steamboat Company between St. John, N.B., and Portland; for the courtesy and generosity extended to the members of this Association in reducing their fares, and that the Secretary do forward a copy of the above resolution to the managers of the companies alluded to.

Moved by Dr. Pierre Beaubien, of Montreal, seconded by Dr. W. Marsden, of Quebec,

Resolved,—That the thanks of this meeting are due to the Natural History Society, for having placed their rooms at the disposal of the members of the Canadian Medical Association.

Moved by Dr. Robert Craik, of Montreal, seconded by Dr. Samuel Henry Fee, of Kingston,

Resolved,—That the following members be named as auditors for the cur-

rent year—Dr. J. P. Rottot, Dr. W. Fraser, Dr. Charles Smallwood, of Montreal; and that the secretary do forward them all the accounts.

Moved by Dr. W. H. Hingston, of Montreal, seconded by Dr. P. Beaubien, of Montreal,

Resolved,—That the thanks of the Association are due to the Press for the liberal manner in which they have reported the proceedings of the Association.

Dr. W. H. Hingston, of Montreal, read a letter from J. B. Edwards, Ph. D., on behalf of the Montreal Chemist's Association, referring to pharmaceutical education, and advocating a separate and special course of study for pharmaceutical students.

Moved by Dr. W. H. Hingston, of Montreal, seconded by Dr. A. B. LaRocque, of Montreal,

Resolved,—That this letter be received and referred to the section on chemistry.

Moved by Dr. W. E. Scott, of Montreal, seconded by Dr. R. T. Godfrey, of Montreal,

Resolved,—That the President do now leave the chair and be replaced by Dr. Pierre Beaubien, of Montreal.

Moved by Dr. W. E. Scott, of Montreal, seconded by Dr. Robert Craik, of Montreal, resolved unanimously,

That a vote of thanks be given to the Honble. Dr. Charles Tupper, C.B., President of the Canadian Medical Association, for his very able conduct in the chair, which has conducted so much to the interests and harmony of the Association and despatch of business.

On motion of Dr. A. H. David, of Montreal, seconded by Dr. Charles Smallwood, a vote of thanks was also given to the General Secretary and to the Local Secretaries for the manner in which they have performed their duties.

Dr. William Marsden, of Quebec, presented letters of apology from two delegates of the American Medical Association for non-attendance at this meeting. Charles A. Lee, M.D., of Peekskill, N. Y., Professor of Materia Medica and Hygiene of the University of Buffalo, having been named delegate to the State Medical Convention, returned home at too late a period to be present at the meeting in Montreal; and Christopher C. Cox, M.D., L.L.D., late Lieutenant Governor of Maryland, who was suffering from indisposition. Both gentlemen expressed their deep regret at the unavoidable circumstances which deprived them of the pleasure of meeting their Canadian professional brethren, and cordially united in kind wishes for the success of the Association in the noble cause of Medical education and improvement.

Moved by Dr. Gédéon LaRocque, of Longueuil, seconded by Dr. W. E. Scott, of Montreal, and

Resolved,—That this Association do now adjourn to meet on the second Wednesday of September, 1869, at Toronto, Ontario, at 10 o'clock A.M.

A. G. BELLEAU, M.D.,
General Secretary.

J. P. ROTTOT, M.D., *Local Secretary*, Quebec.

W. CANNIFF, M.D., *Local Secretary*, Ontario.

W. S. HARDING, M.R.C.S.L., *Local Secretary*, New Brunswick.

ARTHUR MORAN, M.D., *Local Secretary*, Nova Scotia.

TREASURER'S REPORT.

Your Treasurer has the honour to report that, in accordance with the resolution proposed by Dr. W. H. Hingston, of Montreal, seconded by Dr. J. R. De Wolf, of Halifax, N. S., "That the members present be assessed in the sum of three dollars for the current year, and that that sum be paid forthwith to the Treasurer," he collected the sum of one hundred and ninety-eight dollars from sixty-six members, whose names are registered in the Treasurer's book which accompanies this report.

The Quebec Medical Society having paid all the expenses incurred up to the adjournment of the Convention on the 10th day of October last, no calls have been made upon the funds of the Association.

The sum of twenty dollars was placed in the hands of the General Secretary, on the order of Dr. H. Pelletier, Vice President for the Province of Quebec, countersigned by the General Secretary, to meet contingent expenses, for stationery, postage, blank books, etc., that would be required during the year. That order is attached in the Treasurer's book.

The Association ordered three hundred copies of the *Canada Medical Journal*, containing the proceedings of the first Conference, to be sent to the Vice Presidents for distribution among the members, on the condition, publicly guaranteed to the meeting by one of the Editors of that Journal, that the price would not exceed ten cents a number—thirty dollars for three hundred copies.

That account has not been settled, because the publishers now demand seven dollars and a half more than the sum agreed for, and your Treasurer did not feel himself justified in paying an amount that exceeded a contract made in good faith.

The whole respectfully submitted.

(Signed,) R. H. RUSSELL, M.D., EDIN., M.R.C.S., LOND.,
Treasurer C. M. A.

Quebec, 1st September, 1868.

REPORT OF THE AUDITORS.

The Committee appointed to examine the statement of the Treasurer of the Association beg leave to report that they have examined the Treasurer's books, and found them correct.

With reference to the item of \$37.50 claimed by the publishers of the *Canada Medical Journal* for the numbers of the Journal containing the report of the meeting of the Association in Quebec last year, your Committee would report that they are of opinion that there must have been some misunderstanding on the matter, and that as the sum charged is in accordance with that usually made under such circumstances, your Committee would advise that it be paid.

Respectfully submitted.

(Signed,) J. P. ROTTOT, M.D.,
Chairman.

Montreal, 2nd September, 1868.

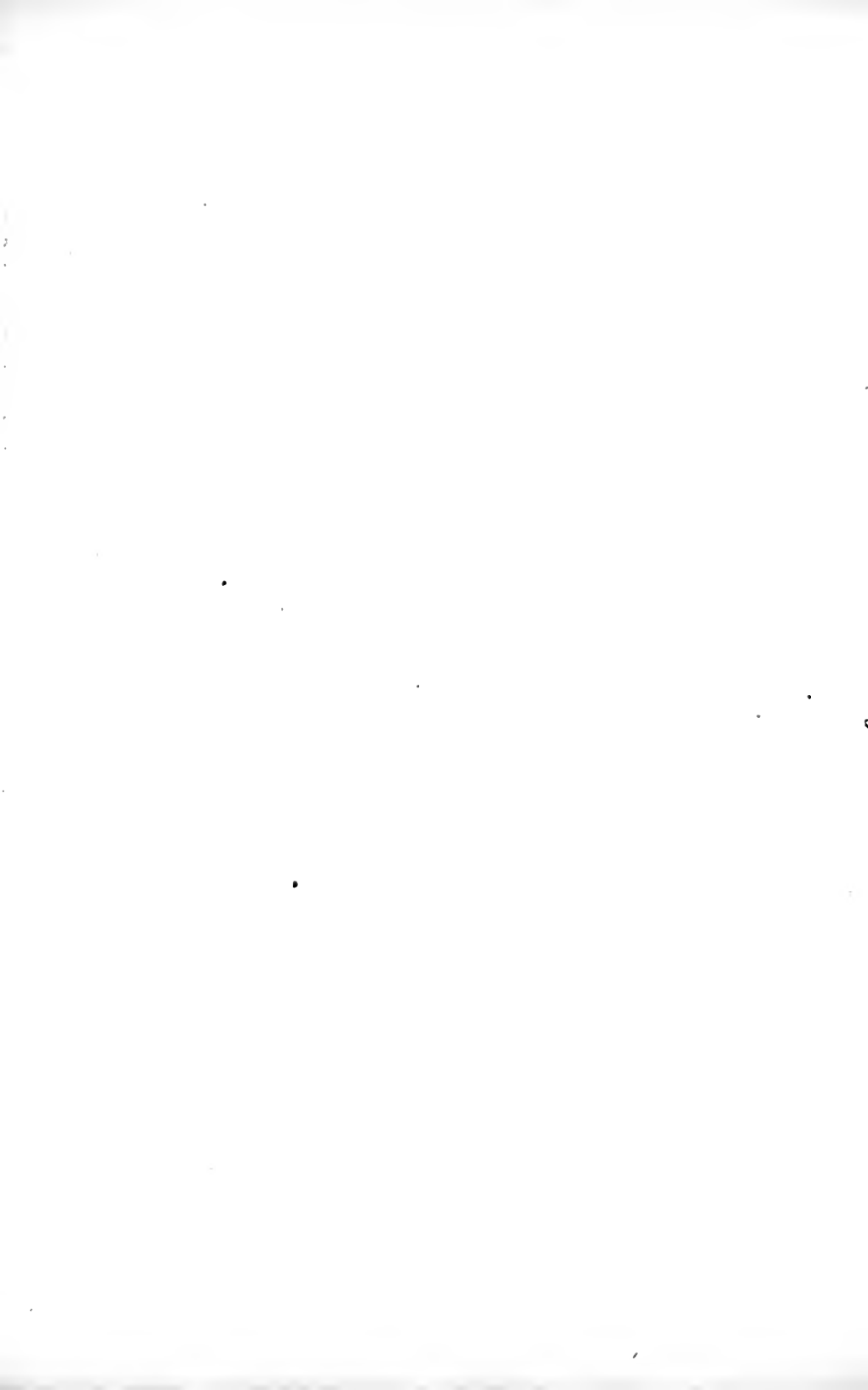
APPENDIX.

REPORTS OF COMMITTEES

AS PRESENTED,

WITH THE

RESOLUTIONS AS AMENDED AND ADOPTED.



A.

PLAN OF ORGANIZATION

OF THE

CANADIAN MEDICAL ASSOCIATION.

Whereas the Conference of the Medical Profession, held at the City of Quebec, in October, 1867, resolved that it is expedient for the Medical Profession of the Dominion of Canada to form a Medical Association, to be called the "Canadian Medical Association;" and whereas such an organization as will give a frequent, united, and decided expression of the medical opinion of the country, must tend to advance medical knowledge, and elevate the standard of medical education, besides directing and controlling public opinion in regard to the duties and responsibilities of medical men; and serve to excite emulation as well as harmony in the profession, and to facilitate and foster friendly intercourse among its members: Wherefore,

Be it resolved: On behalf of the Medical Profession of the Dominion of Canada, that the members of the Medical Conference held at Laval University, in the City of Quebec, on the 9th October, 1867, and all others who, in pursuit of the above-mentioned objects, may unite with or succeed them, shall constitute the Canadian Medical Association, and that for the organization and government of the same, they adopt the following regulations:

1.—TITLE OF THE ASSOCIATION.

This Society shall be known and distinguished by the name of
" *The Canadian Medical Association.* "

2.—THE MEMBERS.

The members of this Society shall be composed of all licensed members of the Medical Profession of the Dominion of Canada, in good and regular standing, and whose practice is not based on any exclusive doctrine, and

who signify their desire to become members of the Association to any one of the Secretaries previous to the close of the first annual meeting, to be held in Montreal on the first Wednesday of September, 1868.

The members of this Association shall collectively represent the common interests of the Medical Profession in the Dominion, and shall hold their membership either as delegates, as members by invitation, as permanent members, or as honorary members. The Delegates shall receive their appointments from the governing bodies of Medical Societies, Medical Colleges, Hospitals, Lunatic Asylums, and other permanently organized medical institutions of good standing in the Dominion, or country to which they belong. Each Delegate shall hold his appointment for one year, or until another is appointed to succeed him, and shall participate in all the business and affairs of the Association.

Each local Medical Society shall have the privilege of sending *one* delegate to the Association. The faculty of medicine of every University, or regularly constituted medical college, or chartered school of medicine, shall have the privilege of sending *two* delegates. The medical staff of every chartered, municipal or other public hospital, containing a hundred inmates or more, shall have the privilege of sending *two* delegates; and every other permanently organized medical institution of good standing shall have the privilege of sending *one* delegate.

No delegate who shall be under sentence of suspension or expulsion from any local medical society of which he may have been a member, shall be received as a delegate by this Association, or be allowed any of the privileges as a member, until he shall have been relieved from the said sentence by such local society.

No one expelled from this Association shall, at any time thereafter, be received as a delegate or member, unless by a three-fourths vote of the members present at the meeting to which he is sent, or at which he is proposed.

Members by Invitation shall consist of medical practitioners of reputable standing from sections of the Dominion not otherwise represented at the meeting. They shall be appointed by invitation of the meeting, after an introduction from, and on being vouched for, by any of the members present, or by any of the permanent members: They shall hold their connection with the Association until the close of the annual session at which they are received, and shall be entitled to participate in all its affairs, as in the case of delegates.

The *Permanent Members* shall consist of all those who have served in the capacity of delegates, and of such other members as may be admitted by a two-third vote, and shall continue permanent members so long as they remain in good standing in the body from which they were sent. Permanent members shall at all times be entitled to attend the meetings,

and participate in the affairs of the Association, so long as they shall continue to conform to its regulations. Every member elect, prior to the permanent organization of the annual meeting, or before voting on any question after the meeting has been organized, must sign these regulations, inscribing his name and address in full, specifying in what capacity he attends, and, if a delegate, the title of the institution from which he has received his appointment.

Honorary Members shall consist of such foreign delegates or members of the Medical Profession, not resident within the Dominion, as have distinguished themselves in medical or surgical science or literature, and as may be elected by a unanimous vote of the members present at any meeting of the association. Their connection with the association shall be permanent, and they shall be entitled to participate in all its proceedings without contributing to the funds.

3.—MEETINGS.

The regular meetings of the Association shall be held annually, and commence on the second Wednesday in September. The place of meeting shall never be the same for any two years in succession, and shall be determined by vote of the Association.

4.—OFFICERS.

The Officers of the Canadian Medical Association shall be a President; four Vice-Presidents (one for each province); four Assistant-Secretaries (one for each province); one General Secretary, and a Treasurer. Nomination shall be made by a committee of *sixteen* members, of whom *five* shall be from the Province of the Quebec, *five* from the Province of Ontario, and *three* from Nova Scotia and New Brunswick respectively, if present. But the Association shall have the power to elect other member or members than those nominated.

Each officer shall hold his office for one year, excepting the General Secretary, who shall remain in office until another is elected to succeed him.

The President and Vice-Presidents shall assume the functions of their respective offices at the beginning of the annual meeting next succeeding their election; all other officers shall enter upon their duties immediately after their election.

The President shall preside at the meetings, preserve order and decorum in debate, give a casting vote when necessary, and perform all the other duties that custom and parliamentary usage may require.

The Vice-Presidents, when called upon, shall assist the President in the performance of his duties, and during the absence, or at the request of the President, one of them shall officiate in his place.

The General Secretary shall record the minutes and authenticate the

proceedings; give due notice of the time and place of each next ensuing annual meeting; notify all members of committees of their appointment, and of the duties assigned to them; hold correspondence with other permanently organized medical societies, both domestic and foreign; serve as a member of the Committee of Publication; see that the published transactions are promptly distributed to all the members who have paid the annual assessment; and carefully preserve the archives and unpublished transactions of the Association.

The *Assistant Secretaries* shall act as Corresponding Secretaries in their respective Provinces, and aid the General Secretary in recording and authenticating the proceedings of the Association; serve as members of the Committee of Arrangements; and perform all the duties of General Secretary, temporarily, whenever required to do so.

The *Treasurer* shall have the immediate charge and management of the funds and property of the Association. He shall be a member of the Committee of Publication, to which Committee he shall give bonds for the safe keeping and proper use and disposal of his trust; and, through the same Committee, he shall present his accounts, duly authenticated, at every regular meeting.

5.—STANDING COMMITTEES.

The following Standing Committees, each composed of seven members, shall be organized at every annual meeting, for preparing, arranging, and expediting business for each next ensuing year, and for carrying into effect the orders of the Association not otherwise assigned, namely: a Committee of Arrangements, and a Committee of Publication.

The *Committee of Arrangements* shall, if no sufficient reasons prevent, be mainly composed of seven members residing in the place at which the Association is to hold its next annual meeting; and shall be required to provide suitable accommodations for the meeting; to verify and report upon the credentials of membership; to receive and announce all essays and memoirs voluntarily communicated, either by members of the Association or by others through them; and to determine the order in which such papers are to be read and considered.

The *Committee of Publication*, of which the Secretaries and Treasurer must constitute a part, shall have charge of preparing for the press, and of publishing and distributing such of the proceedings, transactions, and memoirs of the Association, as may be ordered to be published. The six members of this Committee, who have not the immediate management of the funds, shall also, in their own names, as agents for the Association, hold the bond of the Treasurer for the faithful execution of his office, and shall annually audit and authenticate his accounts, and present a statement of the same in the annual report of the Committee; which report shall

specify the character and cost of the publications of the Association during the year ; the number of copies still at the disposal of the meeting ; the funds on hand for further operations ; and the probable amount of the assessment to be laid on each member of the Association for covering its annual expenditure.

6.—FUNDS AND APPROPRIATIONS.

Funds shall be raised by the Association for meeting its current expenses and awards from year to year, but never with the view of creating a permanent income from investments. Funds may be obtained by an equal assessment of not more than five dollars annually, on each of the members, by individual voluntary contributions for specific objects, and by the sale and disposal of publications, or of works prepared for publication.

The funds may be appropriated to defraying the expenses of the annual meetings (including the necessary expenses of General Secretary in maintaining the necessary correspondence of the Association ;) to publishing the proceedings, memoirs, and transactions of the Association ; to enabling the standing committees to fulfil their respective duties, conduct their correspondence, and procure the materials necessary for the completion of their stated annual reports ; to the encouragement of scientific investigation by prizes and awards of merit ; and to defraying the expenses incidental to specific investigations, under the instructions of the Association, where such investigations have been accompanied with an order on the Treasurer to supply the funds necessary for carrying them into effect.

7.—PROVISION FOR AMENDMENT.

No amendment or alteration shall be made in any of these articles after the next annual meeting, except at the annual meeting next subsequent to that at which such amendment or alteration may have been proposed ; and then only by the vote of three-fourths of all the members in attendance.

BY-LAWS.

I.—ORDER OF BUSINESS.

The order of business at the annual meetings of the Canadian Medical Association shall at all times be subject to the vote of three-fourths of all the members in attendance, and, until permanently altered, except when for a time suspended, it shall be as follows, viz :—

1. The calling of the meeting to order by the President, or, in his absence, by one of the Vice-Presidents.

2. The report of the Committee of Arrangements on the credentials of members, after the latter have registered their names and addresses, and the titles of the institutions which they represent.

3. The reception of members by invitation.

4. The election of permanent members.

5. Reading of the minutes of the last day's proceedings by the Secretary.

6. The reading of notes from absentees.

7. The annual address of the President.

8. The reception of reports of special committees and voluntary communications, and their reference to the appropriate sections.

9. The appointment of the Nominating Committee, who shall also be charged with the nomination of the Standing Committees.

10. The reading and consideration of the reports of the Standing Committees of Publication ; on Medical Education ; on Medical Literature ; and on Prize Essays.

11. Resolutions introducing new business, and instructions to the Permanent Committees.

12. Reports from the several sections.

13. The report of the Nominating Committee, and the election of officers of the Association.

14. The selection of the next place of meeting.

15. Unfinished and miscellaneous business.

16. Adjournment.

II.—SECTIONS.

The general meetings of the Association shall be restricted to the morning sessions. The afternoon sessions shall be devoted to the hearing of reports and papers, and their consideration, in the following section :—

1. Chemistry, Materia Medica and Medical Jurisprudence.

2. Practical Medicine and Obstetrics.

3. Surgery, Anatomy and Physiology.

4. State Medicine and Psychology.

The members of the Association assembled shall have power to resolve themselves into sections and choose their own officers.

All essays, voluntary communications, and reports (except those of the officers of the Association and those of the Committee of Publication,) on Medical Education, Medical Literature, and Prize Essays, shall first be presented to the Association by a brief abstract, and referred to the appropriate sections, in which they shall be examined and discussed ; after which they shall be returned to the General Secretary of the Association, accompanied by an expression of opinion as to whether they are worthy of publication or not. And the Secretary shall pass all such as are thus

designated to be worthy directly to the Committee of Publication ; and such as are not so designated, shall be retained by the Secretary, or returned to their authors, as the latter may indicate.

III.—STANDING COMMITTEES.

The following are the Standing Committees of the Association, to be filled by the Committee on Nominations, and to report at the next annual meeting subsequent to their appointment, viz. :—Committee of Arrangements ; Committee of Publication ; Committee on Prize Essays ; Committee on Medical Education ; Committee on Literature ; Committee on Climatology and Epidemic Diseases ; and Committee on Canadian Medical Necrology.

The Committee of Publication shall append to each volume of the Transactions hereafter published, a copy of the Constitution, By-laws, and Code of Ethics, of the Association. It shall print conspicuously, at the beginning of each volume of the Transactions, the following disclaimer, viz. :—“ The Canadian Medical Association, although formally accepting and publishing the reports of the various standing committees, holds itself wholly irresponsible for the opinions, theories, or criticisms therein contained, except when otherwise decided by special resolution.” It shall be the duty of the same committee to determine the price at which the printed transactions of each session will be furnished to others than delegates and members.

The Committee on Prize Essays shall consist of five members residing in the same neighbourhood, whose duty it shall be, in the interval between the present and the next succeeding annual sessions, to receive papers upon any subject, from any persons who may choose to send them ; to decide upon the merits of these papers, and to select for presentation to the Association, at its next session, such as they may deem worthy of being thus presented. The Committee shall have power to form such regulations as to the mode in which the papers are to be presented, and as to the observing of secrecy, as they may think proper ; and also to award two prizes, of fifty dollars each, to the best two volunteer communications reported on favourably by them, and directed by the Association to be published.

The Committees on Preliminary Medical Education and Medical Literature, after the present year, shall each consist of twelve members, in which each Province shall be represented, to be appointed annually.

The Committee on Climatology and Epidemic Diseases shall consist of four members from each of the Provinces of Quebec and Ontario, and two from Nova Scotia and New Brunswick, whose duty it shall be to report upon its medical topography, epidemic diseases, and the most successful

treatment thereof, and the same shall continue to hold their office for three years.

The Committee on Canadian Medical Necrology shall consist of five members of the Association, representing each Province, whose duty it shall be to procure memorials of the eminent and worthy dead among the distinguished physicians of our country, and present them to the Association for publication in their Transactions.

IV.—ASSESSMENTS.

The sum of three dollars shall be assessed, annually, upon each delegate to the sessions of the Association, as well as upon each of the permanent members, for the purpose of raising a fund to defray the necessary expenses of the Association. The payment of this assessment shall be required of the delegates and members in attendance upon the sessions of the Association previously to their taking their seats and participating in the business of the session. Each delegate and member who has paid his annual assessment, shall be entitled to receive a copy of the printed Transactions of the session.

No assessment shall be made upon members by invitation, or upon permanent members not present at the annual meeting. But all members of either class who shall pay to the Treasurer a sum not less than the annual assessment paid by delegates and members in attendance, shall be entitled to a copy of the printed Transactions for the year in which such payment is made.

V.—DELEGATES TO FOREIGN MEDICAL SOCIETIES.

It shall be the duty of the Nominating Committee to report the names of delegates to represent this Association at the meetings of the British Association, the American Medical Association, the Medical Societies of Europe, and such other scientific bodies as may be affiliated with this Association; but in the absence of action by the Association, the President shall have the power to make these appointments.

VI.—DUTIES OF MEMBERS.

No one shall be permitted to address the Association, unless he shall have first given his name and residence, to be distinctly announced from the chair. The member may be required to go forward and speak from the stand. No one shall speak more than once on the same subject, and not more than ten minutes at one time; but the mover will be permitted to reply.

No one appointed on a special committee, who fails to report at the meeting next succeeding the one at which he was appointed, shall be continued on such committee, or appointed on any other, unless a satisfactory excuse is offered.

It shall be the duty of every member of the Association, who learns that any existing medical school departs from the published conditions of graduation, to report the fact at the annual meeting ; and, on proof of the fact, such school shall be deprived of its representation in this body.

Any of the foregoing may be suspended temporarily on a unanimous vote.

WILLIAM CANNIFF, M.D., *Chairman.*
WILLIAM MARSDEN, M.A., M.D.
HECTOR PELTIER, M.D.
WILLIAM H. HINGSTON, M.D.

B.

REPORT OF THE COMMITTEE ON STATISTICS AND HYGIENE.

The Committee on Statistics and Hygiene have to report that, as regards the former, this country is now an almost unexplored field, and as regards the latter, no distinct and definite views are held, except in the practical application of them by physicians and others engaged in the art of preserving health, and of warding off disease. For these reasons the Committee require to make observations that might otherwise appear elementary, and will reverse the order in which they occur.

For purposes of practical utility, Hygiene has been divided into general and special, or into public and private, relating to those laws which regulate the life of the individual, and the application of those laws to the sanitary wants of a community, or to each individual composing that community. A subject of such vast moment has not received, at the hands of medical writers, that attention its importance demands. Ever and anon a disease sweeps with fatal strides over a portion of the earth's surface, when measures are adopted to stay its dreaded course, or to be relieved of its presence. But doubts have arisen whether measures ill-considered and hastily adopted, have not done much to aggravate the evils they were intended to alleviate. Of the necessity for some general laws on the subject there can be no doubt. Moses, the Law-giver, inculcated the care with which diseases occurring by infection and otherwise are to be prevented. Those laws were imposed upon the people, and were enforced with rigour. Although some portions of them were evidently intended to apply to the land in which the Israelites then lived, and the circumstances in which they were then placed, yet, after a lapse of so many ages, we cannot but admire the sanitary code which drew the distinction between clean and unclean beasts—which forbade the eating of blood—which was intended to prevent the spread of skin and infectious diseases generally—which prevented the accumulation of human excretions and emanations—and which prevented man, when sick, or when dead, becoming a source of disease and death to his fellow-man. Beyond Holy Writ, and less perfect than Holy Writ, we first meet with sanitary rules in the writings of Hippocrates, in his

Essay on "Airs, Waters, Places." We need not here allude to the ancient Latin authors who here and there inculcate hygienic precepts. Until within the memory of living man, public health, as a distinct branch of medical science, was unknown. Here and there, throughout Europe, we find disjointed attempts, by municipal and other corporate bodies, to preserve the health of those they govern. But the first successful effort was made in France to make the health of the people the first care of the *Government*. At the beginning of this century, under the first Napoleon, a Council of Health was formed, to superintend the sanitary operations in the capital, and, half a century later, the whole of France was placed under the surveillance of Central and Departmental Councils. In Great Britain matters moved more slowly, and it was not until Dr. Southwood Smith urged the importance of sanitary laws, that the Government became fully alive to their necessity. Then was introduced The Nuisances Removal Act, followed by the Baths and Wash-houses Act, The Town's Improvement Clauses Act, and The Public Health Act of just twenty years ago. The latter Act was productive of vast good, and the death rate of eight towns in England decreased from 30.5 per 1000 to 24.6 per 1000, a decrease in round figures of 6 per 1000. The Common Lodging House Act, The Labouring Classes Lodging House Act, The Interment Act, and a Vaccination Extension Act, and others, have been passed; but a concise, yet comprehensive law, for all sanitary purposes, has yet to be introduced to the Legislature of Great Britain.

In the United States of America progress has been but partial. In 1866 the State of New York resolved itself into a Sanitary district, composed of the counties of New York, Kings, West Chester and Richmond. The time for action was not too soon, for the mortality in some districts was very great. But the result of the labours of the Sanitary Commission, in the city of New York alone, in one year, was remarkable—3,152 lives less being lost in the city than in the year preceding, notwithstanding the increased population. "Yet it was a season of incessant rains and excessive humidity throughout a wide extent of country, the large towns suffering an unusual amount of sickness."

If the state of matters in Great Britain and the United States was so bad, it is scarcely necessary to add, that in Canada legislation has been confined to a single Act, passed in a period of alarm, and only intended to deal with epidemics as they occurred. Yet is there no branch of science more important than that which relates to man's physical and moral condition; which deals with the external, physical and chemical agents on which his health or life depends—and particularly in Canada, where persons are exposed to a new set of influences, which may shorten or prolong life, benefit or injure health, cure or cause diseases, in proportion to the manner in which they are understood.

In Canada—with one of the healthiest climates in the world—the mortality in some of the cities is very great, and the necessity for action is urgent. Here and there in Canada certain municipalities have taken steps to remedy existing evils, but their efforts are too partial in their action, and too limited in their sphere to be productive of any important advantages. A necessity, therefore, exists for the introduction by the General Government—or simultaneously by the Local Governments—of a comprehensive system of sanitary laws, not so complete, perhaps, as those of the Mosaic code, nor so severe in the punishment of any violation of them. The details of such a Bill, or Bills, will, with the permission of this Association, engage the attention of this Committee.

The report on vital statistics will be submitted at a later period of the session.

The whole, nevertheless, respectfully submitted.

WILLIAM H. HINGSTON, M.D., *Chairman.*

WILLIAM BAYARD, M.D.

WILLIAM CANNIFF, M.D.

GEORGE E. FENWICK, M.D.

J. THORBURN, M.D.

Montreal, Sept. 2, 1868.

C.

REPORT OF THE COMMITTEE ON REGISTRATION.

The Committee appointed in October last, at Quebec, to consider the best means of securing the proper registration of licensed practitioners throughout the Dominion of Canada, beg leave to report, that after mature deliberation they recommend that this Association take the necessary steps to have carried through the Dominion Legislature an Act similar (in so far as it is adapted to this country) to the Medical Act of Great Britain, passed in 1858, and that a committee be appointed to carry this report into execution.

That the members of the Association may have an idea of the Act which the Committee recommend, they name a few of its leading features, viz. :

A council called the "General Council of Medical Education" is established. This Council consists of one person chosen from and by each of the various licensing bodies and the English Universities. The five Scotch Universities choose two members between them. Six members are also named by Her Majesty. A registrar and branch registrars are appointed. Provision is made to register all licensed practitioners, up to a certain date, for a nominal sum. Qualifications obtained after the passing of the Act pay a higher fee for registration. Council has the right to demand of any body their course of study and character of their examinations, and any member of the Council may attend the examinations.

None but registered practitioners to be able to recover charges in a court of law.

A severe penalty is named for any one falsely pretending to be registered.

All of which is respectfully submitted.

WILLIAM MARSDEN, M.A., M.D.,
Chairman.

FRANCIS W. CAMPBELL, M.D.
WILLIAM CANNIFF, M.D.
HECTOR PELTIER, M.D.

Montreal, September 2, 1868.

D.

CODE OF MEDICAL ETHICS,

CONSISTING OF

1. THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND OF THE OBLIGATIONS OF PATIENTS TO THEIR PHYSICIANS.
 2. THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION AT LARGE.
 3. THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND OF THE OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.
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OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND OF THE OBLIGATIONS OF PATIENTS TO THEIR PHYSICIANS.

ART. I.—*Duties of physicians to their patients.*

§ 1. A physician should not only be ready to obey the calls of the sick at all times, but his mind should be attuned to the greatness of his mission and its responsibilities. These obligations are the greater, because ordinarily there is no other tribunal to appeal to than his own conscience in case of neglect. Physicians ought, therefore, to minister to the sick with due regard to the importance of their office, reflecting that the comfort, health, and lives of those committed to their charge depend on their skill, attention and fidelity. Physicians should unite tenderness with firmness, and condescension with authority, and thus inspire their patients with gratitude, respect and confidence.

§ 2. Every case committed to the charge of the physician should be treated with serious attention and humanity. Reasonable allowance should be made for mental infirmity and the caprices of the sick. Secrecy and delicacy, when required by peculiar circumstances, should be strictly observed, and the familiar and confidential intercourse to which physicians are admitted in their professional visits, should be used with discretion, and with the most scrupulous regard to fidelity and honour. The obligation to secrecy extends beyond the period of professional services; no circumstance connected with the privacies of personal or domestic life,—infirmities of disposition, or stain of character, observed during professional attendance,

should ever be divulged by the physician, except when he is imperatively required to do so. So great is the necessity of this obligation that Courts of Justice protect professional men in their observance of secrecy under certain circumstances.

§ 3. Frequent visits to the sick are in general requisite, since they enable the physician to arrive at a more perfect knowledge of the disease—to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give useless anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of interested motives.

§ 4. A physician should studiously avoid making gloomy prognostications, as they savour of empiricism, and magnify the importance of his services in the treatment of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger when it really occurs; and even to the patient himself, if absolutely necessary. This office, however, is so peculiarly alarming when executed by him, that it ought to be declined whenever it can be assigned to any other person of sufficient judgment and delicacy. For the physician should be the minister of hope and comfort to the sick; that by such cordials to the drooping spirit, he may smooth the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments. The life of a sick person can be shortened, not only by the acts, but also by the words or the manner of a physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and to avoid all things which have a tendency to discourage the patient and depress his spirits.

§ 5. A physician ought not to abandon a patient because the case is deemed incurable, for his attendance may continue to be highly useful to the patient, and comforting to the relatives around him, even to the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing, to fanciful delicacy and mistaken liberality, that moral duty, which is independent of, and far superior to, all pecuniary considerations.

§ 6. Consultations should be encouraged in difficult or protracted cases, as they give rise to confidence, energy, and more enlarged views in practice.

§ 7. The opportunity which a physician not unfrequently enjoys of promoting and strengthening the good resolutions of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His counsels, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness, and with a genuine love of virtue, and a sincere interest in the welfare of the patient to whom they are addressed.

ART. II.—*Obligations of patients to their physicians.*

§ 1. The Members of the Medical Profession, upon whom so many arduous duties are imposed, and who are required to make so many sacrifices of ease, comfort and health for the welfare of mankind, have certainly a right to expect that patients should entertain a just sense of the duties which they owe to their medical attendants.

§ 2. The first duty of a patient is to select as his medical adviser one who has received a regular professional education. In no trade or occupation does mankind rely on the skill of an untaught artist; and in medicine, confessedly the most difficult and intricate of the sciences, the world ought not to suppose that knowledge is intuitive.

§ 3. Patients should prefer a physician whose habits of life are regular, and who is not devoted to company, pleasure, or any pursuit incompatible with his professional obligations. A patient should also confide the care of himself and family, as much as possible, to one physician; for a medical man who has become acquainted with the peculiarities of constitution, habits, and predispositions of those he attends, is more likely to be successful in his treatment than one who does not possess that knowledge.

A patient who has thus selected his physician should always apply for advice even in what may appear to him trivial cases, for fatal results often supervene on the slightest accidents. It is of still more importance that he should apply for assistance in the early stage of violent diseases; it is to a neglect of this precept that medicine owes much of the uncertainty and imperfection with which it has been reproached.

§ 4. Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important, as many diseases of a mental origin simulate those depending on external causes, and yet are only to be cured by ministering to the mind diseased. A patient should never be afraid of thus making his physician his friend and adviser; he should always bear in mind that a medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to it. However commendable a modest reserve may be in the common occurrences of life, the too strict observance of it in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease which might have been readily prevented had timely intimation been given to the physician.

§ 5. A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms he will convey much more real information by giving clear answers to interrogatories, than by the most minute account of his

own framing. Neither should he obtrude upon his physician, the details of his business nor the history of his family concerns.

§ 6. The obedience of a patient to the prescriptions of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness to influence his attention to them. A failure in one particular may render an otherwise judicious treatment dangerous, and even fatal. This remark is equally applicable to diet, drink and exercise. As patients become convalescent they are very apt to suppose that the rules prescribed for them may be disregarded, and the consequence, but too often, is a relapse. Patients should never allow themselves to be persuaded to take any medicine whatever, that may be recommended to them by the self-constituted doctors and doctresses who are so frequently met with, and who pretend to possess infallible remedies for the cure of every disease. However simple some of their prescriptions may appear to be, it often happens that they are productive of much mischief, and in all cases they are injurious by contravening the plan of treatment adopted by the physician.

§ 7. A patient should, if possible, avoid even the friendly visits of a physician who is not attending him—and when he does receive them, he should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy his confidence in the course he is pursuing, and induce him to neglect the directions prescribed to him. A patient should never send for a consulting physician without the express consent of his own medical attendant. It is of great importance that physicians should act in concert; for, although their modes of treatment may be attended with equal success when employed singly, yet conjointly they are very likely to be productive of disastrous results.

§ 8. When a patient wishes to dismiss his physician, justice and common courtesy require that he should declare his reasons for so doing.

§ 9. Patients should always, when practicable, send for their physician in the morning, before his usual hour of going out; for, by being early aware of the visits he has to pay during the day, the physician is able to apportion his time in such a manner as to prevent an interference of engagements. Patients should also avoid calling on their medical adviser unnecessarily during the hours devoted to meals or sleep. They should always be in readiness to receive the visits of their physician, as the detention of a few minutes is often of serious inconvenience to him.

§ 10. A patient should, after his recovery, entertain a just and enduring sense of the value of the services rendered him by his physician; for these are of such a character, that no mere pecuniary acknowledgment can repay or cancel them.

OF THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION
AT LARGE.

ART. I.—*Duties for the support of professional character.*

§ 1. Every individual, on entering the profession, as he becomes entitled to all its privileges and immunities, incurs an obligation to exert his best abilities to maintain its dignity and honour, to exalt its standing, and to extend the bounds of usefulness. He should, therefore, observe strictly such laws as are instituted for the government of its members ;—should avoid all contumelious and sarcastic remarks relative to the faculty as a body ; and while, by unwearied diligence, he resorts to every honourable means of enriching the science, he should entertain a due respect for his seniors, who have, by their labours, brought it to the elevated condition in which he finds it.

§ 2. There is no profession, from the members of which greater purity of character, and a higher standard of moral excellence are required, than the medical ; and to attain such eminence is a duty every physician owes alike to his profession and to his patients. It is due to the latter, as without it he cannot command their respect and confidence ; and to both, because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent upon the faculty to be temperate in all things, for the practice of physic requires the unremitting exercise of a clear and vigorous understanding ; and, on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye, and an unclouded head may be essential to the well-being, and even to the life, of a fellow-creature.

§ 3. It is derogatory to the dignity of the profession to resort to public advertisements, or private cards, or handbills, inviting the attention of individuals affected with particular diseases—publicly offering advice and medicine to the poor gratis, or promising radical cures ; or to publish cases and operations in the daily prints, or suffer such publications to be made ; to invite laymen to be present at operations, to boast of cures and remedies, to adduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

In the case, however, of a physician or surgeon commencing the practise of his profession or removing to another locality, a simple announcement by an unobtrusive card in the public prints is unobjectionable.

§ 4. Equally derogatory to professional character is it for a physician to hold a patent for any surgical instrument or medicine ; or to dispense a secret *nostrum*, whether it be the composition or exclusive property of himself or of others. For, if such nostrum be of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality ; and if mystery alone gives it value and importance, such craft

implies either disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

ART. II.—*Professional services of physicians to each other.*

§ 1. All practitioners of medicine, their wives, and their children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician afflicted with disease is usually an incompetent judge of his own case; and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or any one who, by the ties of consanguinity, is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice. Under such circumstances, medical men are peculiarly dependent upon each other, and kind offices and professional aid should always be cheerfully and gratuitously afforded. Visits ought not, however, to be obtruded officiously; as such unasked civility may give rise to embarrassment, or interfere with that choice on which confidence depends. But if a member of the faculty, whose circumstances are affluent, request attendance, and as honorarium be offered, it should not be declined; for no pecuniary obligation ought to be imposed, which the party receiving it would wish not to incur.

ART. III.—*Of the duties of physicians as respects vicarious offices.*

§ 1. The affairs of life, the pursuit of health, and the various accidents and contingencies to which a medical man is peculiarly exposed, sometimes requires him temporarily to withdraw from his duties to his patients, and to request some of his professional brethren to officiate for him. Compliance with this request is an act of courtesy, which should always be performed with the utmost consideration for the interest and character of the family physician, and when exercised for a short period, all the pecuniary obligations for such service should be awarded to him. But if a member of the profession neglect his business in quest of pleasure and amusement, he cannot be considered as entitled to the advantages of the frequent and long-continued exercise of this fraternal courtesy, without awarding to the physician who officiates the fees arising from the discharge of his professional duties.

In obstetrical and important surgical cases, which give rise to unusual fatigue, anxiety, and responsibility, it is just that the fees accruing therefrom should be awarded to the physician who officiates.

ART. IV.—*Of the duties of physicians in regard to consultations.*

§ 1. A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the

only acknowledged right of an individual to the exercise and honour of his profession. Nevertheless, as in consultations the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner, who has a license to practise from some medical board of known and acknowledged respectability, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But no one can be considered as a regular practitioner or a fit associate in consultation, whose practice is based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry, or who assumes any special name or title but that of a physician or surgeon.

§ 2. In consultations, no rivalry or jealousy should be indulged; candour, probity, and all due respect should be exercised towards the physician having charge of the case.

§ 3. In consultations, the attending physician should be the first to propose the necessary questions to the sick; after which the consulting physician or physicians should have the opportunity to make such further inquiries of the patient as may be necessary to satisfy him or them of the true character of the case. They should then retire to a private place for deliberation; and the one first in attendance should communicate the directions agreed upon to the patient or his friends, as well as any opinions which it may be thought proper to express. But no statement or discussion of it should take place before the patient or his friends, except in the presence of all the faculty attending, and by their common consent; and no opinions or prognostications should be delivered which are not the result of previous deliberation and concurrence.

§ 4. In consultations, the physician in attendance should deliver his opinion first; and when there are several consulting the junior should deliver his opinion first, and so on in the order of seniority. No decision, however, should restrain the attending physician from making such variations in the mode of treatment as any subsequent unexpected change in the character of the case may demand. But such variation, and the reasons for it, ought to be carefully detailed at the next meeting in consultation. The same privilege belongs also to the consulting physician if he is sent for in an emergency, when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

§ 8. The utmost punctuality should be observed in the visits of the physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be

an ample reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere, and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period, after which the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present, he will of course see the patient and prescribe ; but if it be the consulting one, he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case he may examine the patient, and give his opinion in writing, and under seal, to be delivered to his associate.

§ 6. In consultations, theoretical discussions should be avoided, as occasioning perplexity and loss of time. For there may be much diversity of opinion concerning speculative points, with perfect agreement in those modes of practice which are founded, not on hypothesis, but on experience and observation.

§ 7. All discussions in consultation should be held as secret and confidential. Neither by words nor manner should any of the parties to a consultation assert or insinuate that any part of the treatment pursued did not receive his assent. The responsibility must be equally divided between the medical attendants—they must equally share the credit of success as well as the blame of failure.

§ 8. Should an irreconcilable diversity of opinion occur when several physicians are called upon to consult together, the opinion of the majority should be considered as decisive ; but if the numbers be equal on each side, then the decision should rest with the attending physician. It may, moreover, sometimes happen that two physicians cannot agree in their views of the nature of a case, and the treatment to be pursued. This is a circumstance much to be deplored, and should always be avoided, if possible, by mutual concessions, as far as they can be justified by a conscientious regard for the dictates of judgment. But in the event of its occurrence, a third physician should, if practicable, be called to act as umpire ; and if circumstances prevent the adoption of this course, it must be left to the patient to select the physician in whom he is most willing to confide. But, as every physician relies upon the rectitude of his judgment, he should, when left in the minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

§ 9. As circumstances sometimes occur to render a special consultation desirable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty whose assistance is required in such cases, should sedulously guard against all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may be reasonably expected.

§ 10. A physician who is called upon to consult, should observe the most honourable and scrupulous regard for the character and standing of the practitioner in attendance; the practice of the latter, if necessary, should be justified, as far as it can be consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out which could impair the confidence reposed in him, or affect his reputation. The consulting physician should also carefully refrain from any of those extraordinary attentions or assiduities which are too often practised by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favour of families and individuals.

ART. V.—*Duties of physicians in case of interference.*

§ 1. Medicine is a liberal profession, and those admitted into its ranks should found their expectations of practice upon the extent of their qualifications, not on intrigue or artifice.

§ 2. A physician, in his intercourse with a patient under the care of another practitioner, should observe the strictest caution and reserve. No meddling inquiries should be made—no disingenuous hints given relative to the nature and treatment of his disorder, nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

§ 3. The same circumspection and reserve should be observed when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided, except under peculiar circumstances, and when they are made, no particular inquiries should be instituted relative to the nature of the disease, or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

§ 4. A physician ought not to take charge of or prescribe for a patient who has recently been under the care of another member of the faculty in the same illness, except in cases of sudden emergency, or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or been regularly notified that his services are no longer desired. Under such circumstances, no unjust, illiberal insinuations should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candour and regard for truth and probity will permit; for it often happens that patients become dissatisfied when they do not experience immediate relief, and, as many diseases are protracted, the want of success in the first stage of treatment, affords no evidence of a lack of professional knowledge and skill.

§ 5. When a physician is called to an urgent case, because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the care of the patient to the latter immediately on his arrival.

§ 6. It often happens in cases of sudden illness, or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under these circumstances, courtesy should assign the patient to the first who arrives, who should select from those present, any additional assistance that he may deem necessary. In all such cases, however, the practitioner who officiated should request the family physician, if there be one, to be called, and, unless his further attendance be requested, should resign the case to the latter on his arrival.

§ 7. When a physician is called to the patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regular attendant, and with the consent of the patient, to surrender the case.

§ 8. A physician, when visiting a sick person in the country, may be desired to see a neighbouring patient who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances; to interfere no further than is absolutely necessary with the general plan of treatment; to assume no future direction, unless it be expressly desired; and, in this last case, to request an immediate consultation with the practitioner previously employed.

§ 9. A wealthy physician should not give advice gratis to the affluent, because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficent one; and it is defrauding, in some degree, the common funds for its support, when fees are dispensed with, which might justly be claimed.

§ 10. When a physician who has been engaged to attend a case of midwifery is absent, and another is sent for, if delivery is accomplished during the attendance of the latter, he is entitled to the fee, but should resign the patient to the practitioner first engaged.

ART. VII.—*Of differences between physicians.*

§ 1. Diversity of opinion and opposition of interest may, in the medical as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur, and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians or a court-medical.

§ 2. As peculiar reserve must be maintained by physicians towards the public in regard to professional matters, and as there exist numerous points in medical ethics and etiquette, through which the feelings of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the sub-

ject matter of such differences nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

ART. VI.—*Of pecuniary acknowledgments.*

Some general rules should be adopted by the faculty, in every town or district, relative to pecuniary acknowledgments from their patients, and it should be deemed a point of honour to adhere to these rules with as much uniformity as varying circumstances will admit.

OF THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND OF THE OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.

ART. I.—*Duties of the profession to the public.*

§ 1. As good citizens, it is the duty of physicians to be ever vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens; they should also be ever ready to give counsel to the public in relation to matters especially appertaining to their profession, as on subjects of medical police, public hygiene, and legal medicine. It is their province to enlighten the public in regard to quarantine regulations—the location, arrangement, and dietaries of hospitals, asylums, schools, prisons, and similar institutions—in relation to the medical police of towns, as drainage, ventilation, &c.,—and in regard to measures for the prevention of epidemic and contagious diseases; and when pestilence prevails, it is their duty to face the danger, and to continue their labours for the alleviation of the suffering, even at the jeopardy of their own lives.

§ 2. Medical men should also be always ready, when called on by the legally constituted authorities, to enlighten coroners' inquests and courts of justice, on subjects strictly medical—such as involve questions relating to sanity, legitimacy, murder by poisons or other violent means, and in regard to the various other subjects embraced in the science of medical jurisprudence. But in these cases, and especially where they are required to make a post-mortem examination, it is just, in consequence of the time, labour, and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium. Medical men should also be properly paid for attendance as witnesses in criminal cases.

§ 3. There is no profession by the members of which eleemosynary services are more liberally dispensed than the medical; but justice requires

that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain of the public duties referred to in the first section of this article, should always be recognized as presenting valid claims for gratuitous services ; but neither institutions endowed by the public or rich individuals, societies for mutual benefit, for the insurance of lives, (the certificates for which should be sent confidentially to the company and paid for,) whether furnished by the medical adviser of the company or by the family physician, or for analogous purposes, nor any profession or occupation can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty, or to testify to the state of health of persons wishing to insure their lives, obtain pensions, or the like, without a pecuniary acknowledgment. But to individuals in indigent circumstances, such professional services should always be cheerfully and freely accorded.

§ 4. It is the duty of physicians, who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and impostors. Physicians ought to use all the influence which they may possess, by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

ART. II.—*Obligations of the public to physicians.*

§ 1. The benefits accruing to the public, directly and indirectly, from the active and unwearied beneficence of the profession, are so numerous and important, that physicians are justly entitled to the utmost consideration and respect from the community. The public ought likewise to entertain a just appreciation of medical qualification ; to make a proper discrimination between true science and the assumptions of ignorance and empiricism ; and to afford every encouragement and facility for the acquisition of medical education.

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1868-9.

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FENWICK, A. G.....	<i>Three Rivers, Q.</i>	1867
FENWICK, GEO. E.....	<i>Montreal, Q.</i>	1867
FERGUSON, A. A.....	<i>Franklin, O.</i>	1868
FITZPATRICK, JOHN E.....	<i>Baie St. Paul, Q.</i>	1868
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JOHNSON, CHARLES.....	<i>St. John, N. B.....</i>	1868
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KEATOR, GEO. A.....	<i>St. John, N. B.....</i>	1868
LACHAINE, A.....	<i>Levis, Q.....</i>	1867
LAFONTAINE, CAMILLE.....	<i>Berthier En haut.....</i>	1867
LANDRY, J. E.....	<i>Quebec, Q.....</i>	1867
LAPIERRE, J. D.....	<i>Montreal, Q.....</i>	1867
LAROSE, D. L.....	<i>Pointe aux Trembles, Q.....</i>	1867
LARUE, F. H. A.....	<i>Quebec, Q.....</i>	1867
LARUE, PRAXEDE.....	<i>St. Augustin, Q.....</i>	1867
LAROCQUE, A. B.....	<i>Montreal, Q.....</i>	1868
LAROQUE, GIDEON.....	<i>Longueil, Q.....</i>	1868
LASSISSERAIE, P. O.....	<i>Somerset, Q.....</i>	1867
LAVOIE, NAPOLEON.....	<i>L'Islet, Q.....</i>	1867
LEBEL, C. O.....	<i>St. Gervais, Q.....</i>	1867
LEBLANC, B. H.....	<i>Point St. Charles, Q.....</i>	1867
LEMAN, JOSEPH.....	<i>Montreal, Q.....</i>	1868
LEMIEUX, C. E.....	<i>Quebec, Q.....</i>	1867
LEMIRE, EUSTACHE.....	<i>Montreal, Q.....</i>	1868
LENOIR, ALPHONSE.....	<i>Montreal, Q.....</i>	1867

LEPAILLEUR, L. A	<i>Chateauguay, Q.</i>	1867
LESAGE, ALEXANDRE	<i>St. Gregoire, Q.</i>	1867
LINDSAY, E.	<i>Carouge, Q.</i>	1867
MARSDEN, WM.	<i>Quebec, Q.</i>	1867
MARMETTE, J.	<i>Montmagny, Q.</i>	1867
MARTIN, VINCENT.	<i>Chicoutimi, Q.</i>	1867
MARTYN, DEWITT H. H.	<i>Kincardine, O.</i>	1868
MACDONNELL, R. L.	<i>Montreal, Q.</i>	1868
MACCALLUM, D. C.	<i>Montreal, Q.</i>	1868
MALLOCH, W. B.	<i>Montreal, Q.</i>	1868
MARKELL, RICH'D.	<i>Aultsville, Q.</i>	1868
MASSON, G. A.	<i>Laprarie, Q.</i>	1868
MCGOWAN, H. W.	<i>Bolton Bedford, Q.</i>	1867
MEIGS, M. R.	<i>Bedford, Q.</i>	1867
MACMASTER, ALEX. M.	<i>Toronto, O.</i>	1867
METIVIER, M. M.	<i>Iberville, Q.</i>	1867
MICHAUD, A. THOMAS.	<i>Kamouraska, Q.</i>	1867
MILLET, G. D.	<i>Lanoraie Berthier, Q.</i>	1867
MIGNAULT, A.	<i>St Francois Montmagny, Q.</i> ..	1868
MORAN, ARTHUR.	<i>Halifax, N. S.</i>	1868
MORIN, C.	<i>St. Nicholas, Q.</i>	1867
MOUNT, G. W.	<i>Acton Vale, Q.</i>	1867
MOUNT, P. E.	<i>Montreal, Q.</i>	1867
MUIR, HENRY SKEY.	<i>Halifax, N. S.</i>	1867
MUNROE, E., Jun.	<i>Montreal, Q.</i>	1867
MUNROE, P.	<i>Montreal, Q.</i>	1867
O'LEARY, P.	<i>Montreal, Q.</i>	1868
PARE, FREDERICK.	<i>Sherbrooke, Q.</i>	1868
PAINCHAUD, JOS.	<i>Quebec, Q.</i>	1867
PAINCHAUD, C. F.	<i>Varennes, Q.</i>	1867
PALMER, R.	<i>Riverside Hopewell, O.</i>	1867
PARKE, C. SMITH.	<i>Quebec, Q.</i>	1867
PARKER, D. McNEIL, Hon., V.P. ..	<i>Halifax, N. S.</i>	1867
PACQUET, A. H.	<i>St. Cuthbert, Q.</i>	1867
PALLARDY, F. S.	<i>Vercheres, Q.</i>	1867
PELTIER, HECTOR, V. P.	<i>Montreal, Q.</i>	1867
PERRAULT, F. X.	<i>Pointe aux Trembles, Q.</i>	1867
PICAULT, CHARLES.	<i>Montreal, Q.</i>	1868
PICKUP, JOHN W.	<i>Beauport, Q.</i>	1867
POISSON, U. M.	<i>Arthabaska, Q.</i>	1867
POTVIN, J. C.	<i>St. Martin, Q.</i>	1867

POTT, J. G.	<i>Belleville, O.</i>	1868
POULIN, L. S.	<i>St. Hubert, Q.</i>	1867
PROVOST, E.	<i>Sorel, Q.</i>	1867
PROVOST, P.	<i>Memramacook, N.B.</i>	1867
REDDY, JOHN	<i>Montreal, Q.</i>	1868
RICARD, ARTHUR	<i>Montreal, Q.</i>	1868
RICHARDSON, J. R.	<i>Quebec, Q.</i>	1868
RINFRET, F.	<i>Quebec, Q.</i>	1867
RICHARDSON, JAMES H.	<i>Toronto, O.</i>	1867
ROBILLARD, EDMOND	<i>Montreal, Q.</i>	1867
ROBITAILLE, JULES	<i>Quebec, Q.</i>	1868
ROBITAILLE, OLIVIER	<i>Quebec, Q.</i>	1867
ROSEBRUGH, A. M.	<i>Toronto, O.</i>	1867
ROSS, GEORGE	<i>Montreal, Q.</i>	1868
ROSS, J. J.	<i>St. Anne de la Perade, Q.</i>	1868
ROTTOT, JEAN PHILIPPE, S.	<i>Montreal, Q.</i>	1867
ROBERTS, ED. T.	<i>Hawkesbury, O.</i>	1868
ROUSSEAU, ED.	<i>Quebec, Q.</i>	1867
ROUSSEAU, JOS. OVIDE	<i>Nicolet, Q.</i>	1867
ROUSSEAU, L. TÉLESPHORE	<i>St. Cassimir, Q.</i>	1867
ROY, F. E.	<i>Quebec, Q.</i>	1867
ROY, GUILLAUME ERNEST	<i>Boucherville, Q.</i>	1867
ROY, SALUSTE	<i>St. Jean Port Joli, Q.</i>	1867
ROY, LOUIS	<i>Quebec, Q.</i>	1867
ROY, THOMAS G.	<i>St. Joseph Louis, Q.</i>	1867
RUGG, H. C.	<i>Compton, Q.</i>	1868
RUSSELL, ROB. HY., T.	<i>Quebec, Q.</i>	1867
ROBINSON, CHARLES	<i>Peel, O.</i>	1867
RUTHERFORD, H. C.	<i>Dundas, O.</i>	1867
SAMPSON, C. G.	<i>Quebec, Q.</i>	1868
SANGSTER, JOHN H.	<i>Toronto, O.</i>	1867
SCHMIDT, S. B.	<i>Montreal, Q.</i>	1868
SCOTT, W. E.	<i>Montreal, Q.</i>	1867
SCOTT, G. S.	<i>Toronto, Q.</i>	1868
SELLY, JAS. B.	<i>Montreal, Q.</i>	1868
SEWELL, JAS. A.	<i>Quebec, Q.</i>	1867
SEWELL, COLIN	<i>Montreal, Q.</i>	1868
SHERRIFF, F. W.	<i>Huntingdon, Q.</i>	1868
SIMARD, L. G. A.	<i>Quebec, Q.</i>	1867
SINCLAIR, C. A.	<i>Martintown, O.</i>	1868
SIROIS, D. F. A.	<i>St. Paschal, Q.</i>	1867
SMALLWOOD, CHARLES	<i>Montreal, Q.</i>	1868

SMITH, E. D.....	<i>Digby, N. S.</i>	1867
STANSFIELD, JAMES.....	<i>Lorette, Q.</i>	1867
STRANGE, O. S.....	<i>Kingston, O.</i>	1867
STEVERMANN, JOSEPH.....	<i>Lunenburg, N. S.</i>	1867
STEVES, J. T.....	<i>St. John, N. B.</i>	1868
STEWART, ROBT.....	<i>Belleville, O.</i>É.....	1868
SULLIVAN, M.....	<i>Kingston, O.</i>	1868
SUTHERLAND, WM.....	<i>Montreal, Q.</i>	1868
TACHE, J. C.....	<i>Ottawa, O.</i>	1868
TASCHEREAU, ADOLPHE.....	<i>Levis, Q.</i>	1867
TASCHEREAU, J.....	<i>Quebec, Q.</i>	1867
TASSE, F. Z.....	<i>Montreal, Q.</i>	1867
THERIEN, H.....	<i>Yamaska, Q.</i>	1837
THIBODO, ROBERT.....	<i>Belleville, O.</i>	1868
TETU, LUDGER.....	<i>Riviere Onelle, Q.</i>	1867
THORBURN, JAMES.....	<i>Toronto, O.</i>	1867
THOMPSON, ROBT.....	<i>Montreal, Q.</i>	1868
TRENHOLME, E. H.....	<i>Montreal, Q.</i>	1868
TRESTLER, CHARLES F. F.....	<i>Montreal, Q.</i>	1868
TRUDEL, E. H.....	<i>Montreal, Q.</i>	1868
TUPPER, CHAS. HON, C. B., P.....	<i>Halifax, N. S.</i>	1867
TURCOT, MAGLOIRE.....	<i>St. Hyacinthe, Q.</i>	1867
TESSIER, P. O.....	<i>Quebec, Q.</i>	1867
TURCOT, J. M.....	<i>Montreal, Q.</i>	1867
VALADE, F.....	<i>Ottawa, Q.</i>	1867
VANCORTLAND, E.....	<i>Ottawa, O.</i>	1868
VANDERHEYDEN, A.....	<i>Levis, Q.</i>	1867
VERGE, CHARLES.....	<i>Quebec, Q.</i>	1867
VILBON, ALFRED.....	<i>Montreal, Q.</i>	1868
VOLIGNY, L. L.....	<i>St. Elizabeth, Q.</i>	1867
WAKEHAM, W.....	<i>Leeds, Megantic, S.</i>	1867
WHEELER, THOS. B.....	<i>Montreal, Q.</i>	1868
WHERRY, J. L.....	<i>Quebec, Q.</i>	1867
WICKWIRE, W. N.....	<i>Halifax, N. S.</i>	1868
WORTHINGTON, E. D.....	<i>Sherbrooke, Q.</i>	1867
WRIGHT, HENRY HOVER.....	<i>Toronto, O.</i>	1867
YATES, OCTAVIUS.....	<i>Kingston, O.</i>	1868

