

sickness, he is indisputably usefulest of all men. Him savage and civilized will honour. As a Lord Chancellor under one's horsehair wig there might be misgivings, still more so, perhaps, as a Lord Primate under one's cauliflower, but if I could heal disease I should say to all men and angels without fear 'En! Ecce!'"

THE PORTALS AND PROSPECTS OF THE PROFESSION.

HAVING made up his mind to enter the medical profession by some as yet uncertain avenue and at some time, whether near or far, the intending student must consider which avenue is the avenue for him—when the question of the time of his entry will very largely resolve itself. Happy at this stage is the man who has relatives or disinterested friends to advise him at each step, or who, in default of these, is able to procure advice at each parting of the ways. Any candidate may easily, through mere ignorance, either choose a portal which is so difficult to get through that time and energy that might more profitably be used in some other direction are wasted in disheartening efforts, or he may select one which, he finds when it is too late, does not lead far enough to satisfy his legitimate ambition. If such mistakes are to be avoided the advice of some one who knows the ground thoroughly is almost indispensable. Nothing can take the place of counsel of this kind, but to those who have no such adviser the following remarks, it is hoped, may be useful.

THE QUESTION OF A DEGREE.

Whether the candidate is to aim at taking a University degree or be content with a qualifying diploma is perhaps the first question to be answered. Formerly the problem was one in which the *res angusta domi* formed a large factor, but now that local universities are springing up on every hand, the accidental difficulties in the path of a would-be undergraduate are becoming wonderfully less, so that the problem has now become simpler, and indeed little more than an abstract question. Though the obligatory medical curriculum is the same for all students, the value of the qualifications which give the right to practise varies according to the estimate in which they are held by the profession and the public respectively. If a candidate looks forward to a career as a consulting physician, he must necessarily obtain a degree in medicine from a recognized university, and become a Member of the Royal Colleges of Physicians of London, Edinburgh, or Dublin, according to the part of the United Kingdom in which he proposes to practise. If he wishes to devote himself to surgery, he need not take a degree, but he must obtain the Fellowship of one of the Royal Colleges of Surgeons. In other spheres of practice a diploma in medicine, surgery, and obstetrics is sufficient. There can be no doubt, however, that the possession of an M.D. degree gives a practitioner a decided advantage in the eyes of the public, and on this account the desirability of obtaining one must be urged on every student.

REQUIREMENTS OF GENERAL EDUCATION.

The next step is to pass a preliminary examination in Arts recognized by the General Medical Council, if a certificate of having passed such an examination either before leaving school or subsequently is not already held. The main lines of the route for those seeking to enter the medical profession have been laid down by the General

Medical Council, and the requirements of that body will be found set forth in detail at p. 506. Whatever preliminary examination is selected it is important that the precise requirements demanded of candidates should first of all be ascertained, for valuable time may be lost if these are not exactly complied with. The matriculation examination of the University of London is somewhat more exacting than the other preliminary examinations; with some exceptions, however, it is essential for the London University degrees (these exceptions are given in detail at p. 511), and as it will serve for most, if not all, of the other medical diplomas, and for many degrees, it may safely be chosen in place of any other Preliminary Examination.

THE CHOICE OF A MEDICAL SCHOOL.

Apart from considerations of locality and expense, the question of what school should be chosen is probably decided on two factors—the eminence of the staff and the size of the hospital. In regard to the former it is right to point out that the reputation (it may be world-wide) of the consulting staff should have no influence on the decision, as they, with few exceptions, take no part in the work of teaching in the school. The same remark applies in less degree to the senior members of the acting staff, as they, being presumably engrossed with many affairs outside the school, leave the greater part of the teaching to their younger colleagues. With regard to the size of the hospital, it must suffice to say that a large number of beds is not necessarily an unmixed advantage, as more food for thought and more time for calm observation may sometimes be obtained if the number is not excessive. The chief consideration, however, which is apt to be overlooked is that the teaching and opportunities for training in the subjects of medicine proper, surgery, and obstetrics, including gynaecology, should be of the best. Given this then, any special facilities for obtaining an extensive knowledge of the preliminary sciences, such as chemistry, botany, zoology, and physics, are heartily to be welcomed as providing a good mental training. The former is essential; the latter, however desirable, must occupy a subsidiary position. The choice of a school may in some instances be modified by the chance of or success in obtaining entrance scholarships, and it may be well to remember that in the event of wishing from any unforeseen circumstances to change the medical school in the middle of the curriculum, the only difficulty that is likely to arise would be from having previously paid what is known as a "composition fee" to a particular hospital.

COST OF MEDICAL EDUCATION.

In counting the cost of the educational period of the medical life the manifold helps which are available in regard to expense should not be ignored. There are entrance scholarships at nearly all the schools and there are besides other pecuniary aids peculiar to individual schools (having perhaps their highest development at the present day in the Scottish Universities); in addition to these there is a goodly number of what may be called open scholarships and prizes. For the ordinary man the cost of medical education resolves itself into the cost of the hospital training and the cost of living during the five years of the curriculum. The composition fee for all the necessary classes at most schools, including hospital practice, may be taken as something between £125 and £150; the precise figures may be obtained for the different schools in the

succeeding pages. The cost of living is greater in London and in the older universities of England than at the newer provincial universities, or at those of Scotland and Ireland. Speaking generally, the entire cost may be taken as something between £600 and £1,000, the precise figure varying both with the particular place of study and with the individual student's habits, mode of life, and success in passing examinations.

THE STAGE OF PROFESSIONAL EDUCATION.

Having passed the preliminary examination, and having actually commenced medical study at one of the recognized schools, no time should be lost in obtaining registration as a medical student by the General Medical Council, as the regulation five years' curriculum is usually held to date from the day of registration, and delay may thus mean compulsory lengthening of the already long probationary period. Such registration is not required by the Royal Colleges of Physicians and Surgeons of England and some other qualifying bodies, but it is by most, and the student would be well advised not to omit this step, whatever his objective may be. Valuable and individualistic advice in regard to the curriculum may be obtained by all new students at the schools from their respective Deans, and further on will be found some observations in regard to the course of professional training which have a general application. If the advice so acquired be diligently followed, medical qualification becomes, except for accidents, almost an automatic process; the difficulties will be there, but the way will at least be plain.

AN INTERMEDIATE STATE.

After a qualification to practise has been obtained there is usually a more or less prolonged transitional stage between the medical student and the established medical practitioner. This period may most advantageously be used in gaining experience by serving as house-physician, house-surgeon, or casualty medical officer, in a hospital, working as assistant to a busy practitioner, or, like Ulysses, seeing the manners and customs of many men by travel as ship's surgeon or otherwise.

THE PROSPECTS OF THE PROFESSION.

The particular line a man will follow in his life work will to a large extent depend on his opportunities, and to some extent on his aptitudes. If he can afford to wait and has the necessary equipment then he will probably develop into a physician or surgeon, or a specialist in a more limited sense. If his tastes lie in the direction of general practice then he will be wise to distribute his interests and energies over the whole field of medicine impartially. Operative surgery, which in a town may usually be delegated to others, is, to a considerable extent, a necessity in country practice—and the country practitioner, placed far away from professional assistance, is without doubt the general practitioner in his highest development.

Besides general and consulting practice other opportunities for good work and a fair income are the Public Health Service—dealing with that increasingly important subject, preventive medicine, and having a most intimate relation with the social well-being, prosperity, and future development of the nation and empire. The navy, the army, and the Indian Medical Service all offer certain attractions, not the least of which is the certainty of a fair pension at the end of a relatively short term of service. The

Colonial Service, the Prison Service, lunacy appointments, and resident Poor-law appointments also offer advantages which are not to be obtained by the general practitioner, but they have mostly some compensating limitations. Particulars of all these spheres of practice will be found in the following pages. For the few, teaching appointments in the medical schools may be obtained which often carry with them opportunities for original research.

THE WAITING TIME AND SOME OF ITS DANGERS.

The most trying time of the medical man's life from the beginning of professional study onward is probably while he is waiting for practice. It is then that he may be tempted to allow himself to be farmed by the commercial combinations known as Co-operative Friendly Societies; here it is therefore that he should be most vigilant and strenuous in detecting and avoiding that which is evil or even doubtful. For the young consultant waiting for practice teaching posts, private tuition, various sorts of literary work, may help to provide a sufficient income. For the man who starts as a general practitioner without buying a practice or a partnership, or who has no private income, there are Public Health appointments, Poor-law appointments, including that of public vaccinator, certain workmen's clubs, and other similar means of obtaining an introduction to practice. A public appointment, indeed, is often of very great value, even though it bring in no immediate pecuniary advantage. But the waiting time is at the best a trying time, affording abundant opportunities for the practice of the virtues of patience and courage.

CONCLUSIONS.

It is a sound principle on which to act that the newly qualified man should associate himself in as cordial a manner as possible with the established medical men in the district by attending the local meetings of the British Medical Association, joining the local medical society, or in some other way of showing himself friendly. He should strictly follow, to the best of his knowledge and ability, the recognized etiquette of the profession, for he may be assured that it has a deeply rooted principle working for the general good, while for his real success nothing, in the end, will help more than a faithful adherence to the spirit of the old rule "Do as you would be done by."

THE MEDICAL CURRICULUM.

THE course of professional training through which a student who desires to enter the medical profession must pass is, under existing regulations, essentially the same in all cases. The universities and medical corporations differ from each other rather in the severity of the various examination tests which they impose than in the subjects of study, which are laid down by the General Medical Council, and are broadly the same for all. The minimum period of study after registration as a medical student is five years, whether the curriculum be passed in England, Scotland, or Ireland, and whether the student is seeking a university degree or a college diploma. Although in the case of the universities the minimum period of study is the same as that for a diploma, some students find, as a matter of fact, that it is necessary to spread their work over a longer period. Before, therefore, deciding upon a university course the intending student should carefully