

quinquennial increments of £25 to £300; seven medical officers, at incomes ranging from £300 to £550.

Local Prison Service. Seven assistant surgeons, at £250, rising by quinquennial increments of £25 to £300. Six medical officers at £250. Four medical officers at £320, rising after five years to £350. Four medical officers at £400, rising by quinquennial increments of £50 to £500.

COLONIAL MEDICAL SERVICES.

THERE are a certain number of appointments in the Medical Services of the following Colonies, which are from time to time filled up by the Colonial Office: British Guiana, Jamaica, Trinidad, Windward Islands, Leeward Islands, British Honduras; Fiji; Sierra Leona, Gambia, Gold Coast, Lagos; Ceylon, Straits Settlements, Hong Kong; Cyprus, Gibraltar, St. Helena, and the Falkland Islands.

All applicants for medical employment in the Colonies must be between the ages of 23 and 30, and must be doubly qualified; preference will be given to those who have held hospital appointments as house-physicians and house-surgeons; certificates of moral character and of sobriety will be required, and every officer before being appointed will be medically examined by one of the consulting physicians of the Colonial Office.¹

Applications for medical employment in the tropical Colonies from persons in the United Kingdom must be addressed to the Private Secretary, Colonial Office, Downing Street, S.W., during the month of April in each year. Out of the total number so applying a list of candidates will be made who will be eligible to fill any vacancies which may occur during the year, but no promise whatever is held out that candidates will eventually receive an appointment.

It is not possible to forecast either the number or the nature of the vacancies which will arise in the course of any given year. The number during the last six years has varied from eight to eighteen, the average being between thirteen and fourteen a year. The list of candidates applying in April usually comprises sixty names. In Ceylon and Jamaica vacancies are almost always filled locally by the appointment of qualified native candidates.

It is for the West Indies and the West African Colonies that medical officers are chiefly required. The majority of the West Indian appointments involve medical charge of a district, including, as a rule, the care of a hospital, poor-house, asylum, or other institution, and free attendance on the aged and children. In West Africa the medical officers are also required to take charge of any hospital, public dispensary, lunatic asylum, or other Government institution at their respective stations, to supervise the sanitation of the district, to perform vaccination, and to give gratuitous attendance to all Government officials, and, in most cases, to the families of such officials also.

The rates of pay vary in the different colonies and depend to some extent upon whether private practice is permitted. In British Guiana the pay starts at £300 a year with quarters, is £500 to an officer in charge of a district, and rises to £900. In Trinidad the salary is £250 with quarters on appointment, £400 for a district appointment, with a quinquennial increment of £50 a year. In the Leeward Islands the salary in most cases is £250, in the Windward it varies from £200 to £400. In the Gold Coast the assistant colonial surgeons are paid £350 a year, rising by triennial increments of £25 to £400. In Lagos the commencing salary is £250, rising by triennial increments of £25 to £300 a year. Full details upon these and other points are contained in a memorandum² which will, we understand, be forwarded by the Private Secretary, Colonial Office, London, S.W.

Passage money on first appointment and leave of absence on half pay (in case of sickness or after six years' service, if the medical officer has given satisfaction in the discharge of his duties) are granted to medical officers under the colonial regulations; and those serving in West Africa are allowed six months leave with full pay and free passages home and out again after every twelve or fifteen months of continuous

residential service. With regard to pension, medical officers are usually on the same footing as other Government servants, but in cases where private practice is allowed the rule is that they are not entitled to pension except in West Africa.

BRITISH PRACTITIONERS ABROAD.

FOREIGN practitioners can practise medicine in Great Britain without restriction; but unless registered cannot recover their fees by legal process nor give medical evidence in courts of law, nor hold public medical offices. Under the Medical Act of 1886 the General Medical Council may recognise equivalent qualifications granted in countries which treat this country with reciprocity; after certain formalities such qualifications would be registrable. At present, however, no foreign countries have arranged to treat this country with reciprocity, and as a rule British practitioners are required in European countries to pass an examination of more or less severity. The following list contains particulars as to the regulations of the British Colonies as well as of foreign countries:

BRITISH COLONIES AND DEPENDENCIES.

AUSTRALASIA.

Australia.—The applicant must be registered by the Medical Board of the colony in which he proposes to practise. He may be required to prove the genuineness and authenticity of his diplomas.

New Zealand.—Certain legal formalities must be gone through, but there is no examination.

Tasmania.—A diploma must be verified by the Medical Examining Board.

DOMINION OF CANADA.

Except in British Columbia and Ontario it is necessary only to register British diplomas, but evidence of authenticity and genuineness may be required. For this registration a fee is charged, and in some cases there is also an annual tax. In British Columbia the Medical Council of the colony holds an examination, and there is a fee of 100 dollars; in Ontario an examination is held by the College of Physicians and Surgeons of Toronto.

SOUTH AFRICA.

There is a Colonial Medical Council both in the Cape of Good Hope and Natal. British diplomas are registrable after inspection and verification.

WEST INDIES.

British qualifications are everywhere recognised. In some instances they must be registered, for which a small fee is charged.

EUROPE.

Austria.—It is necessary to pass the State examination, or obtain a University Degree in Medicine, and to become an Austrian subject. Exemptions may be granted under very special circumstances.

Belgium.—Upon the advice of a jury which has a right to grant the diploma of Doctor, the Government can give permission to practise medicine to a foreign subject who possesses a diploma in Medicine, Surgery, and Midwifery.

Denmark.—Foreigners are required to pass the State examination.

France.—Under the new law a degree of M.D. obtained by examination before a French faculty will be indispensable.

Holland.—Foreigners are required to pass the State examination.

Germany.—Any person may practise medicine, but if he has not passed the State examination he does so at his own peril, and is liable to fine and imprisonment if convicted of a mistake.

Greece.—A State examination must be passed, but graduates of foreign schools may take their examination in French or English.

Italy.—A foreigner must (a) obtain an authorisation (*abilitazione*) from one of the Royal Universities of Italy; or (b) if he desire to practise only among foreigners he is at liberty to do so.

Portugal.—The State examination must be passed.

Roumania.—A State examination must be passed (*viva voce*).

Russia.—The State examination must be passed; but if the applicant possess the degree of M.D. from a university of high repute, the Minister of Education may give an authorisation after requiring the candidate to compose and defend a dissertation.

Norway.—The State examination must be passed.

Spain.—The State examination must be passed, but exemptions are sometimes granted on application through the British Ambassador.

Sweden.—The State examination must be passed.

Switzerland.—British practitioners are not allowed to practise even among their own countrymen, unless they have passed the State Examination conducted in French or German at one of the Universities—Bâle, Berne, Geneva, or Zurich.

Turkey.—An examination must be passed (fee £1 10s.) at Constantinople.

NORTH AMERICA.

United States.—The law varies in the different States and Territories

A. No regulations or inoperative.

Connecticut	Kansas	Ohio
District of Columbia	Maine	Rhode Island
Indian Territory	Massachusetts	Utah
Creek Nation		

¹ Dr. Gage Brown, 88, Sloane Street, London, S.W., Sir D. S. MacLagan, 23, Heriot Row, Edinburgh, and Dr. Hawtrey Benson, 57, Fitzwilliam Square, Dublin.

² Miscellaneous, No. 90, printed for the use of the Colonial Office.

b. Diploma to be registered with State or county officials.

Arizona	Idaho	Nebraska
Arkansas	Indiana	Nevada
Delaware	Michigan	Wyoming
Georgia		

c. Diploma to be endorsed by a college "in good standing," or by the State Medical Society, or by the State or Territorial Board of Examiners; or by the State Board of Health.

* Signifies that the applicant may be submitted to examination by the State or District Board of Medical Examiners.

*California	Louisiana	Pennsylvania
*Colorado	Maryland	*South Dakota
*Illinois	*Missouri	*Tennessee
*Indian Territory:	*Montana	*Texas
Choctaw Nation	New Hampshire	Vermont
Iowa	*New Mexico	*West Virginia
Kentucky	*Oregon	Wisconsin

d. Candidate is examined by State, Territorial, County, or District Board of Medical Examiners, or Board of Censors.

Alabama	Mississippi	North Dakota
Florida	New Jersey	South Carolina
Indian Territory:	New York	Virginia
Cherokee Nation	North Carolina	Washington
Minnesota		

Mexico.—No special requirements.

SOUTH AMERICA.

Argentine Republic.—The applicant's diplomas must be verified by the Argentine Consul in this country (fee £1 4s.). This should be done before leaving this country. On arriving at Buenos Ayres, the endorsement of the Argentine Consul in this country must be verified by the Argentine Foreign Office. Three examinations must be passed in the University of Buenos Ayres or Cordova:—First Examination: Anatomy with Dissections, Physiology, Pathology, Ophthalmology, and Gynecology. Second Examination: Clinical and Operative Surgery, Histology, Materia Medica, and Mental Diseases. Third Examination: Clinical Medicine, Pathology, Midwifery, and Toxicology. The fee for examination is 300 dollars, half of which is retained in case of rejection. The examinations can be passed consecutively at a few short intervals or separately; a rejected candidate is not readmitted to examination until after the lapse of six months. The examination is conducted *visà voce* in Spanish. Temporary authorisations to practise for six months may be obtained from the governor of a province, and the applicant may utilise this time to improve his knowledge of Spanish. The regulations for graduates of Spanish Universities are less onerous.

Brazil.—A State examination must be passed which is conducted in Portuguese or French.

Chili.—The regulations resemble those in the Argentine Republic; examination by the University of Santiago.

Peru.—An examination must be passed before the University of Lima. It is conducted in Spanish.

Uruguay.—The conditions are similar to those in the Argentine Republic; examination by the University of Monte Video.

DENTAL SURGERY.

REGULATIONS OF THE GENERAL MEDICAL COUNCIL.

CANDIDATES for a diploma in Dental Surgery are required to produce certificates of having been engaged during four years in professional studies, and of having received three years' instruction in Mechanical Dentistry from a registered practitioner. One year's *bona fide* apprenticeship with a registered dental practitioner, after being registered as a dental student, may be counted as one of the four years of professional study. The three years of instruction in Mechanical Dentistry, or any part of them, may be taken by the dental student, either before or after his registration as a student; but no year of such mechanical instruction shall be counted as one of the four years of professional study unless taken after registration.

A Register of Dental Students is kept by the Registrar of the General Medical Council, 299, Oxford Street, London.

Preliminary Education.—Dental students are subject to the same regulations as regards preliminary education as medical students. (This does not apply to dental students who were apprenticed or had commenced attendance upon professional lectures before July 22nd, 1878.)

THE ROYAL COLLEGE OF SURGEONS OF ENGLAND. LICENCE IN DENTAL SURGERY.

The candidate must be 21 years of age, must fulfil the conditions of the regulations of the General Medical Council, and must pass through the following curriculum:

(1) Instruction in Chemistry and Materia Medica, which may be attended before registration. (2) Attendance at a

recognised medical school on (a) Anatomy (one winter session), and Dissections (twelve months), (b) Physiology (six months), and Practical Physiology (three months); (c) Medicine (six months), and Surgery (six months), and Clinical Surgery (two winter sessions). (3) Attendance at a recognised school for two courses of lectures upon each of the following subjects: Dental Anatomy and Physiology (Human and Comparative), Dental Surgery, Dental Mechanics, and one course of lectures on Metallurgy, by Lecturers recognised by this College. Students are required to attend examinations which are held in the several classes, and to spend not less than three years in acquiring a practical familiarity with the details of Mechanical Dentistry, under the instruction of a competent practitioner. In the cases of qualified surgeons evidence of a period of not less than two instead of three years of such instruction will be sufficient. This instruction may be taken prior to the date of registration as a dental student, attended at a recognised dental hospital, or in the dental department of a recognised general hospital, the practice of Dental Surgery during the period of two years.

Examination.—The examination, which is held in May and November, comprises the following three parts:—

Written.—General Anatomy and Physiology, General Pathology and Surgery, Dental Anatomy and Physiology, and Dental Pathology and Surgery.

Practical.—(a) On the treatment of Dental Caries, and may be required to prepare and fill cavities with gold or plastic filling or material, or to do any other operation in Dental Surgery (candidates must provide their own instruments). (b) On the mechanical and surgical treatment of the various irregularities of children's teeth. (c) On Mechanical Dentistry.

Oral.—The several subjects included in the curriculum of professional education, and is conducted by the use of preparations, casts, drawings, etc.

Special Exemptions.—Candidates who have passed the Second Examination of the Examining Board in England, or who shall produce evidence of having passed the examination in Anatomy and Physiology required for the Licence in Surgery of the Royal College of Surgeons of Edinburgh, the Royal College of Surgeons in Ireland, or the Faculty of Physicians and Surgeons of Glasgow, or an Examination in Anatomy and Physiology required for a Degree in Medicine or Surgery at a University in the United Kingdom, will be exempt from re-examination in those subjects. Candidates who are Members of the College, or who have passed the Examination in Surgery of the Examining Board in England, or who shall produce evidence of having passed the Examination in Surgery for the Licence in Surgery of the Royal College of Surgeons of Edinburgh, the Royal College of Surgeons in Ireland, or the Faculty of Physicians and Surgeons of Glasgow, or an Examination in Surgery for a Degree in Medicine or Surgery at a University in the United Kingdom, will be exempt from re-examination in General Surgery and Pathology.

Fee.—The fee for the Diploma is £10 10s. over and above stamp duty. Further particulars may be obtained on application to the Secretary of the Royal College of Surgeons, Lincoln's Inn Fields, London, W.C.

THE ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

LICENCE IN DENTAL SURGERY.

THE candidate must fulfil the conditions of the regulations of the General Medical Council (see above); and the regulations as to curriculum are generally the same as those of the Royal College of Surgeons of England.

Examinations.—*First:* Anatomy, Chemistry, and Physiology (lectures on these subjects must have been attended). *Second:* Surgery, Medicine, Therapeutics, and the special subjects of Dental Anatomy and Physiology, Dental Surgery and Pathology, and Dental Mechanics.

Special Exemptions.—Candidates who have passed the first and second examinations for the triple qualification will be exempt from the first dental examination, and will have the advantage of being admissible either to the final dental examination or to the final examination for the triple qualification, or to both. But the first dental examination will not be held as equivalent to the first and second triple examination, and will admit to the final dental examination only. Candidates who are Licentiates of this College, or who may be registered medical practitioners, will require to produce certificates of attendance on the special subjects only, and will be examined in these only for the Dental diploma. And candidates who shall produce satisfactory evidence of having passed in any of the subjects of the first dental examination before any Dental or Surgical Licensing Board recognised by the Royal College of Surgeons of Edinburgh, will be exempt from examination in such subject or subjects; but no examination will be recognised as giving exemption unless it is coextensive in its scope with the examination of this College, and is the only or final examination on the subject or subjects required by the Board at which it was passed.

Candidates who commenced their studies prior to October 1st, 1890, are only required to attend a modified curriculum.

Fee.—The fee for the diploma is £10 10s.

A copy of regulations, giving a list of preliminary exami-