

to the extent of supplying their sons with material of questionable pathogenicity from their every-day medical practice.

Among the topics investigated by the 1930-1931 class were, agglutination tests on *B. abortus*, identification and bacterial count of washings from raw hides, blood count and morphology of the corpuscles of patients suffering from intestinal parasites, comparison of Board of Health sputum samples, bacterial count of well and spring water, etc.

From the foregoing brief outline of these courses, it can be readily seen that the work for the retail pharmacist consists largely of behavior and knowledge objectives. Experiments are in the nature of vicarious experiences in that they are mainly demonstrated, but nevertheless real.

On the other hand, the B.S. candidate, trained to become the diagnostic analyst with a cultural background, is able and ready to participate in the necessary skills and techniques of this specialized field.

COLUMBIA UNIVERSITY, COLLEGE OF PHARMACY.

WASHINGTON STATE ASSOCIATION DISCUSSES PRESCRIPTION PRACTICE.

L. D. Bracken, of Seattle, and Ronald P. Robertson, of Spokane, directed a prescription symposium; the subjects included:

Detailing Physicians.

1. Own Preparations.
2. U. S. P. and N. F. Preparations.
3. Pharmaceutical Specialties.
4. Proper Price for Prescriptions, Office Supplies, Pharmaceutical Service.

Delivery Methods and Costs.

How to Keep Adequate Store Records.

Credit to Physicians and Patients.

Stock Control.

Merchandising Stock for Prescription Stores:

1. Ethical Patents and Their Scope.
2. Toilet Lines.
3. Rubber Goods and Sundry Lines.
4. Window and Interior Displays:
 - A. Professional.
 - B. Merchandising.



U. S. P. and N. F. Display of Minn. Pharm. Assoc. at Minn. State Med. Assoc., 1932.