

## PROCEEDINGS OF THE LOCAL BRANCHES

"All papers presented to the Association and Branches shall become the property of the Association with the understanding that they are not to be published in any other publication prior to their publication in those of the Association, except with the consent of the Council."—Part of Chapter VI, Article VI of the By-Laws.

ARTICLE III of Chapter VII reads: "The objects and aims of local branches of this Association shall be the same as set forth in ARTICLE I of the Constitution of this body, and the acts of local branches shall in no way commit or bind this Association, and can only serve as recommendations to it. And no local branch shall enact any article of Constitution or By-Law to conflict with the Constitution or By-Laws of this Association."

ARTICLE IV of Chapter VII reads: "Each local branch having not less than 50 dues-paid members of the Association, holding not less than six meetings annually with an attendance of not less than 9 members at each meeting, and the proceedings of which shall have been submitted to the JOURNAL for publication, may elect one representative to the House of Delegates."

Reports of the meeting of the Local Branches shall be mailed to the Editor on the day following the meeting, if possible. Minutes should be typewritten with wide spaces between the lines. Care should be taken to give proper names correctly and manuscript should be signed by the reporter.

### BALTIMORE

The regular monthly meeting of the Baltimore Branch of the AMERICAN PHARMACEUTICAL ASSOCIATION was held at the Hotel Emerson, Friday, December 21, 1934. The meeting was called to order by President B. Olive Cole who introduced the speakers of the evening.

The first speaker, Wm. B. Baker, of the School of Pharmacy, University of Maryland, discussed his recent work on the standardization of aconite preparations. Mr. Baker pointed out in the course of his address that the conflicting reports of early investigators on the value of aconite as a therapeutic agent are believed due primarily to the fact that the drug and its preparations decrease rapidly in potency. The instability of the drug and its preparations is believed to be caused by the decomposition of the active principle, aconitine.

Experimental studies were made with the object in view of determining the rate of deterioration of aconite preparations, and of determining which of the stabilizers in use are the most efficient. Incidentally, the accuracy of the U. S. P. X method of assay was also studied. It was concluded that the use of hydrochloric acid as a stabilizer for tincture of aconite is superior to acetic and hypophosphorous acid as stabilizers, provided the preparations are adjusted to the correct hydrogen-ion concentration ( $p_H$  2.3-3.0); that aconite in the form of the whole drug deteriorates rapidly and the powdered drug even more so; that the resistance of guinea pigs to aconitine is consistent, provided the weight range specified by the U. S. P. X is strictly adhered to, and further provided that these guinea pigs are in absolutely healthy, normal condition; and that the advisability of the use of aconitine as a bio-assay standard should receive more extensive consideration.

The second speaker, Wm. H. Hunt, of the School of Pharmacy, University of Maryland, discussed the bio-assay of strophanthus preparations. The therapeutic classification of the drug was given and this was followed by a discussion of the chemistry of strophanthus. It was pointed out that a considerable amount of criticism has been directed at the various bio-assay methods of strophanthus preparations. After careful investigation it was pointed out that the modified Hatcher-Brody cat method, the Trevan mortality curve frog method as modified by Chapman and Morrell, and the U. S. P. X one-hour frog method, all had been found to yield results which agreed within the limits of experimental error. Mr. Hunt further stated that the Knudson and Dresbach chemical method of assay was observed to yield inconsistent results which were rarely in agreement with the results obtained by the physiological methods.

The last speaker, Harry Rosen, also of the School of Pharmacy, University of Maryland, selected as his topic, "Pyrethrum." Among other interesting things about pyrethrum discussed by Mr. Rosen the following was especially interesting. It was pointed out that reference to another pyrethrum, *anacyclus pyrethrum*, or pellitory occurs in the literature and one should always indicate the particular pyrethrum intended. The pyrethrum known as insect flowers was

the topic of discussion. The historical and commercial aspects of pyrethrum were presented. In reviewing the chemistry of the subject it was pointed out that some volatile substance other than the pyrethrins which possess toxic activity occurs in the drug. The difference in toxicity of the drug to warm and cold blooded animals was pointed out. Finally, the various chemical and physiological methods of assay were discussed.

The papers were discussed by Drs. A. G. DuMez, R. S. Fuqua, M. R. Thompson, John Glassford, J. C. Bauer, and others present.

A rising vote of thanks was tendered to the speakers for their interesting papers.

Before adjournment, President Cole appointed the Nominating Committee for the year 1934. This committee, it was pointed out, is expected to report at the January meeting in 1935.

The committee consists of the following: *Chairman*, Aquilla Jackson; *Mrs. Grace Lotz Kahler* and *Simon Solomon*.  
*C. JELLEFF CARR, Secretary.*

#### JANUARY.

The first meeting in 1935 of the Baltimore Branch of the AMERICAN PHARMACEUTICAL ASSOCIATION was held at the Hotel Emerson, Friday, January 11th, President B. Olive Cole was in the chair.

The president reported on the activities of the Branch during 1934 and pointed out the general success of the organization for the year. The secretary-treasurer reported that the average attendance for the six meetings in 1934 was fifty members. The total membership now standing at 170. Particular attention was called to the new student membership in the AMERICAN PHARMACEUTICAL ASSOCIATION presented by the Branch annually to some student selected by the Faculty of the School of Pharmacy, University of Maryland.

The minutes of the December meeting were read by the secretary-treasurer and approved.

The report of the Committee on Membership was read by Chairman Gilbert Joseph. It was moved by C. Jelleff Carr that the report be accepted—carried.

The report of the Committee on Professional Relations was given by Chairman Simon Solomon, who pointed out the activities of Marvin J. Andrews in his U. S. P. and N. F. publicity work in Maryland and expressed the opinion that this was of great benefit in bringing about better professional relations between the physician and the pharmacist. In addition he mentioned the possibility of pharmacists conducting clinical laboratories or engaging in more professional types of activities. The report was discussed by Dr. A. G. DuMez who pointed out the opposition which the American Medical Association feels toward clinical laboratories conducted as accessories to retail pharmacies. He expressed his inability to understand why pharmacy students upon graduation go into purely commercial enterprises. Dr. DuMez stated that, in his opinion, the consolidation of the forces of pharmacy was necessary and that a decided effort should be put forth by pharmacists to bring about such a consolidation. Dr. John C. Krantz, Jr., stated, in discussing the problem, that the over-production of pharmacists by the schools of pharmacy was of paramount importance in producing many of our problems. It was moved by Wm. F. Reindollar that the report of the Committee be accepted—carried.

The report of the Committee on Education and Legislation was presented by Dr. A. G. DuMez. The work of the National Association of Boards of Pharmacy and American Association of Colleges of Pharmacy was mentioned. The status of the new food and drugs bill introduced into the new Congress by Senator Copeland known as S 5 was discussed. Dr. DuMez expressed the belief that some satisfactory bill would eventually be evolved whereby the old Food and Drugs act of 1906 could be amended to the satisfaction of all agencies concerned. It was moved by Wm. F. Reindollar that the report be accepted. The motion was seconded and carried.

The report of the Committee on Science and Practice of Pharmacy was presented by Chairman R. S. Fuqua; the report was comprehensive and exceedingly interesting. It was moved by Wm. F. Reindollar that the report of this committee be accepted with thanks and the committee discharged—carried.

The report of the Nominating Committee was given by Simon Solomon. After discussion the following were nominated for offices for 1935. *President*, Wm. F. Reindollar, *Vice-President*, A. N. Hewing, *Secretary-Treasurer*, C. Jelleff Carr. The secretary was instructed to cast the ballot in accordance with the wishes of the Nominating Committee.

After installation of the officers President Reindollar appointed the following committee chairmen: *Membership*, Gilbert Joseph; *Professional Relations*, Marvin J. Andrews; *Science and Practice of Pharmacy*, Dr. J. C. Krantz, Jr.; *Education and Legislation*, Dr. J. C. Bauer.

C. JELLEFF CARR.

#### CHICAGO.

The monthly meeting of the Chicago Branch, AMERICAN PHARMACEUTICAL ASSOCIATION, was held on Tuesday, December 18th, at the University of Illinois College of Pharmacy.

As this was the close of the year for the Branch the secretary-treasurer, L. Templeton, read a report of the financial condition of the Branch. This was followed by a report of the committee on nominations for officers for the coming year. The nominations were unanimously accepted by the members present. They are: *President*, G. L. Webster; *First Vice-President*, S. W. Morrison; *Second Vice-President*, R. A. G. Linke; *Third Vice-President*, H. M. Emig; *Secretary-Treasurer*, L. Templeton; *Delegate to the House of Delegates*, L. Templeton; *Committee Chairmen: Membership*, Thomas F. Rylands; *Legislation*, J. Riemenschneider; *Practice*, I. A. Becker; *Medical Relations*, D. Bernard Fantus; *Publicity*, A. E. Ormes.

A motion was passed to appoint a committee to draft a resolution against the repeal of the local Arvey ordinance, the repeal of which would prevent the medical schools of the city from using the impounded and unclaimed dogs for research and scientific purposes.

The speaker of the evening was O. C. Durham of the Abbott Laboratories. He discussed "Allergy from the Standpoint of the Manufacturer and Pharmacist." The following is a brief summary of the discussion.

The field of allergy is comparatively new. Only a few years back the Medical Schools were not giving training in this now important subject.

The word "allergy" was coined to mean an over-sensitiveness of the body to some particular thing. About ten per cent of the people are affected by some ordinary thing that does not affect the average person.

People only recognized the afflictions of allergism less than 100 years ago. An English doctor afflicted by pollens began an investigation. He made collections of pollens, collections of air samples, laboratory tests, skin tests and extractions; this was about 1870.

In 1903, a German doctor made serums by injecting the pollens into horses. His attention was called to the fact that the horses, by their nature of eating, probably already were inoculated with the pollens. The serums obtained were not a success.

As late as 1906 most doctors did not think that pollens caused allergisms. The idea prevailed that there was not enough pollen in the air to cause a reaction. Proof now shows that the per cent of pollen needed to give reactions is very small. The treatment now is to inject the pollen in small doses, gradually increasing the doses so that the patient becomes accustomed to the pollen. The sufferers should either take these treatments or stay away from the source of the disturbance.

Dextrose and water are most commonly used as the vehicle for pollen injection.

There are geographical, calendar and individual complications in pollen reactions. The pollens are caught on glass plates and are easily identified. This gives a clue as to what pollens are in the air and narrows down the possibilities of the ones causing the trouble. Slides were shown that gave much information as to pollen production, collection, methods of transmission and extraction.

The standard treatment is to give sixteen doses with increasing strengths. The injections are made hypodermically just below the outer skin. Skin reactions are the clue to the offending pollen. Many pollens belong to the same botanical group, hence the patient may be sensitive to all these but should be immunized only against those pollens of the group that are in the particular locality.

Mention was made of allergisms toward many things that we eat, such as rice, tomatoes and cabbage. It was emphasized that all is not known about allergism, why particular substances cause a disturbance with some people and not with others, the exact chemical nature of the substances, or how they act on the tissues of the body. However, sufficient progress has been made so that to-day extracts are made of the offending pollens and in most cases give relief to sufferers.

L. TEMPLETON, *Secretary-Treasurer*.

## NEW YORK.

The December meeting of the New York Branch of the AMERICAN PHARMACEUTICAL ASSOCIATION was held in the Brooklyn College of Pharmacy, Long Island University, on the evening of December 10, 1934. About ninety members and their guests attended.

As the meeting was called to order, President Ballard expressed the thanks of the New York Branch to the Kings County Pharmaceutical Society for their kind invitation to hold the December meeting in the Brooklyn College of Pharmacy. The report of the secretary was then read and accepted.

Chairman Lehman, of the Committee on Education and Legislation now reported as follows:

A bill is expected to be introduced in the next Congress, instituting Unemployment Insurance, the cost of which is to be met by a 4% tax on pay-rolls. Whether the employer or the employee is to pay the tax, has not been decided as yet.

Owing to the defeat of Congressman Clyde Kelly of Pennsylvania, a valuable ally is lost to the sponsors of price stabilization: it is hoped, however, that another strong member of the House of Representatives will take up the burden of introducing another Capper-Kelly bill.

A bill amending the Pure Food and Drugs law will be offered at the next session of Congress; Senator Copeland is preparing an amended Tugwell Bill which he hopes will meet all objections. This was announced by Secretary of Agriculture Wallace on November 24th. An admirable draft of an amended pure food and drugs law was published by W. Bruce Philip, former Washington representative of the N. A. R. D., which could be adopted in its entirety, and fill all requirements.

The NRA has approved the amendment to the Retail Drug Code making the payment of assessments mandatory. The budget is still under consideration, however.

Violators of Code Laws have been found guilty by the courts in New York and Virginia. In New York the violator was guilty of substitution and the one in Virginia violated the minimum price provision.

The committee on legislation of the New York State Pharmaceutical Association intends to introduce several bills in this session of the Legislature, among them one preventing the sale of prophylactic remedies and appliances (for the purpose of preventing venereal infection) by anyone except a registered pharmacist; another, a price stabilization bill similar to the California Law (Little of Junior Capper-Kelly Bill) and also several important amendments to the pharmacy laws.

Mayor La Guardia signed the 2% sales tax law, which went into effect December 10th. Sales are taxed on all merchandise except foods, beer, physicians' prescriptions and newspapers. The tax is to be paid by the purchaser in the following manner: All sales of 12¢ or under are free of tax; all sales from 13¢ to 62¢, inclusive, 1¢ tax; all sales from 63¢ to \$1.00, inclusive, 2¢ tax; 1¢ tax on every 50¢ or fraction thereof, when the amount of sale is more than \$1.00.

Regarding the Bronx Drug Clerks Strike, Judge Frankenthaler denied the demand for an injunction against picketing, which was to be foreseen in the present attitude against interference with peaceful picketing. The matter will have to be argued in court.

Dr. Ballard thanked Chairman Lehman for his report and called upon Auditor Bilhuber, for a report; He announced that he had examined the accounts of the Branch and had found everything in perfect order.

Chairman Dauer, of the Committee on Progress of Pharmacy, then reported on several new proprietary preparations, among them: Tuberculin, P.P.D., Theelin in Oil, Ergone (Sensibamin), Larostidin, Gastric-Mucin and others.

President Ballard then announced the appointment of the following members on the Nominating Committee to report at the next meeting: *Chairman*, R. S. Lehman; E. A. Bilhuber and L. N. Brown.

The business part of the meeting being over, the chairman introduced the first guest speaker of the evening, Dr. Frederick Schroeder, who discussed "Modern Medicine in Relation to Prescription Writing."

Dr. Schroeder briefly reviewed some of the good work done in prescription writing propaganda last winter; he expressed the opinion that the plan of approach was, however, not entirely satisfactory, and that results were not sufficient for the time and effort spent.

In conducting the propaganda campaign the following program was followed:

1. Lecturers were sent to hospitals to discuss prescription writing with internes.
2. Formularies were mailed monthly to physicians.
3. The failure of medical schools to teach therapeutics was criticized and efforts were made to reinstate the course.
4. The exhibit of U. S. P. and N. F. products provided by Dr. Lascoff was frequently used.
5. Physicians were urged not to write for proprietary products, particularly where a similar product was official.

In all this, nevertheless, one important point was ignored, Dr. Schroeder maintained, and this was the subject he wished to discuss.

In introducing his idea, the speaker began by pointing out that therapeutics is a modern branch of medicine. The slow and late development of therapeutics was due to the fact that it is founded on a thorough knowledge of physiology, pathology and pharmacology. It has only been in recent times that great advances were made in these branches. Furthermore, the study of therapeutics was long hampered by a school of therapeutic nihilism.

In the second half of the nineteenth century real progress began with the study of the effects of drugs on animals. The profound effects of organic chemicals were soon discovered and anesthetics and disinfectants came into use. Systematic research was instituted, biochemistry became a science and provided a knowledge of vitamins and endocrines. Endocrine therapy began in 1891 with the administration of thyroid; in 1921, Insulin came into use for diabetes, and now we have a remedy for pernicious anæmia—Liver.

Progress in chemo-therapeutics and in the development of biological products is progressing rapidly, and new and far more satisfactory remedies have been found for many of the ailments to which man is heir.

The results of all of this have produced the following:

1. Preparation of medicines goes from pharmacist to manufacturer.
2. The choice of remedy becomes difficult for the physician, because of intensive advertising.
3. New standards of value are necessary in comparing these new products.

In summing up, Dr. Schroeder showed that years ago, for many diseases and ailments numerous prescriptions were written; to-day, specific biologicals are available, new chemo-therapeutic agents, or proper diet rules are followed. Systematic treatment has replaced symptomatic. All this progress in therapeutics has contributed very largely to a reduction in prescription writing. Dr. Schroeder suggested that the pharmacist keep himself thoroughly acquainted with these new advances, he should go back to an all drug pharmacy, and should direct his efforts to encouraging prescription writing among veterinarians who still use "old therapy."

Following Dr. Schroeder, the chairman introduced Dr. Jacob Sarnoff who spoke on the "Romance of Surgery."

Unfortunately it is impossible to give, in writing, a satisfactory report of Dr. Sarnoff's presentations, since most of his material consisted of special moving picture films showing surgical operations in progress. The pictures were greatly admired by every one and the comments made by Dr. Sarnoff made the presentation intensely interesting.

In connection with Dr. Schroeder's address, Dr. Sarnoff pointed out that modern surgery was also largely responsible for a reduction in prescription writing.

At the close of Dr. Sarnoff's address a rising vote of thanks was accorded both speakers.

RUDOLF O. HAUCK, *Secretary*.

#### NORTHERN OHIO.

The monthly meeting of the Northern Ohio Branch was held on November 9, 1934, at the Faculty Club of Western Reserve University.

This meeting was given over to discussion of the report of a committee appointed for the purpose of formulating a set of principles of coöperation between the Cleveland Academy of Medicine and the Cleveland Academy of Pharmacy.

The committee reported that in conjunction with a similar committee representing the Academy of Medicine it had adopted an expression of thought, in printed form, which will enable

both practicing physician and pharmacist to cooperate with one another for the good of the patient. This expression of thought was approved and a copy of the resolution ordered forwarded to all members on the rosters of the Academies of Medicine and Pharmacy in Cleveland. It reads as follows:

A. The welfare of the public requires a close cooperation between an intelligent well-trained medical profession and a pharmaceutical profession equally intelligent and equally well trained in its special field.

B. Personal contact between the physician and the pharmacist is essential in securing and maintaining this cooperation.

C. The relationship between these two groups is not stationary but will require a continuous modification and elaboration of concepts and principles with changing conditions.

#### CONCEPTS.

Following are the concepts upon which the above principles are based:

1. The public is entitled to the best possible medical care.
2. Such medical care postulates not alone competent doctors but accurate and ethical pharmaceutical service.
3. The natural corollary is that these two are mutually interdependent.
4. The mutual understanding of the codes of conduct of the two groups obviously will facilitate the service each can render to the other.
5. The establishment of an understanding acquaintance between the pharmacist and the physician who practises in his district is essential for intelligent cooperation.
6. The maintenance of this understanding once established depends upon the ability of the pharmacist to meet his obligation as a scientifically trained person.
7. This understanding acquaintance is based upon personal contact not only in the pharmacy but in the office of the physician as well.
8. Under these circumstances the discussion of mutual problems is facilitated and the obligation of the pharmacist to make available to the doctor information of the progress of pharmacy can be best met.
9. Furthermore the public is entitled to the best and most accurate professional pharmaceutical service at the lowest cost consistent with a reasonable profit to the pharmacist for this service.
10. Such a service cannot be furnished to the public through the use of proprietary medicines of known or unknown formulas since they are not designed for this purpose.
11. The use of proprietaries by doctors, either by prescriptions, sample or word of mouth, tends to favor self-medication with its attendant dangers to the patient.
12. It is the obligation of the medical men to be familiar with the action of drugs and prescription writing so that he will not have to take advantage of formulas suggested by proprietary medicine manufacturers or by their detail men.
13. The pharmacist by virtue of the accuracy of his information should supplant the detail men.
14. The discussion of details of the mechanics of pharmacy will naturally follow the establishment of this cooperation between physician and pharmacist.

By mechanics we mean counter prescribing, office dispensing, methods of handling prescribed proprietaries, cost of extra services aside from cost of materials and true pharmaceutical service and similar details affecting the working relationship between physician and pharmacist.

The ninth meeting of the Northern Ohio Branch of the AMERICAN PHARMACEUTICAL ASSOCIATION for the year 1934 was held at the Faculty Club of Western Reserve University, Cleveland, Friday evening, December 14th.

A resolution was passed directing the secretary to formulate certain by-laws that may be adopted later by the Branch in order that more definite standards of practice may be promulgated in relation to the public and, especially, to the medical profession. The most controversial factors involved are:

(a) Type of window displays.

(b) Relative prominence of professional and non-professional items of merchandise on counter displays.

(c) Itemized list of minimum equipment in the prescription department.

(d) Minimum list of reference books in library.

The following officers for 1935 were elected:

*President*, Harry E. Speer; *Vice-President*, Ellsworth Loesch; *Secretary*, Neil T. Chamberlin; *Treasurer*, Herbert Decker.

Members of the Council are:

1935, E. D. Davy, F. W. Gehrung, Eugene Remy, H. E. Speer.

1936, A. L. Flandermeyer, W. W. Hosler, Ellsworth Loesch, Edward Spease.

1937, Herbert Decker, Z. M. Gibson, N. E. Scribner, A. E. Walleck.

1938, F. J. Bacon, N. T. Chamberlin, A. P. Gegenheimer, E. L. McFetridge.

NEIL T. CHAMBERLIN, *Secretary*.

#### PHILADELPHIA.

The November meeting of the Philadelphia Branch of the A. P. A. was held at the Philadelphia College of Pharmacy and Science on Tuesday evening, November 13, 1934.

The speaker was Dr. David Klein, president of the Wilson Laboratories of Chicago, who spoke on glandular products from the pharmaceutical standpoint.

He began with a discussion of the present Pharmacopoeial assays for substances such as pepsin and suggested that a standard pepsin be used in connection with the present method.

For the assay of Pancreatin he suggested the preparation of a better substrate, as the starch used at present is liable to be converted in heating.

In addition to the assay for powdered Thyroid it would be advisable to include assays for the tablets and capsules as well.

He then spoke of desiccation and defatting of glandular products and mentioned the most advisable methods to be used for different glands.

The need for chemical tests for products such as anterior and posterior pituitary and liver extract was made apparent.

Dr. Klein stated that color uniformity was impossible to maintain in ovarian products because of difference in pigmentation of summer and winter foods.

He was not in favor of the use of ratios for the determination of the relationship between fresh and dried glandular materials. He suggested the adoption of standard dosages for products such as Thyroid, so as to prevent confusion among physicians.

Dr. Klein concluded his lecture with a discussion of the active principles of the ovary, pituitary, suprarenal and thyroid. Colored pictures of the glands were shown as lantern slides.

About 30 minutes of discussion preceded the adjournment.

E. H. MACLAUGHLIN, *Secretary*.

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#### F. E. R. A. PRESCRIPTION PRICE SCHEDULE.

BY L. A. SELTZER.

Prescriptions covered by this schedule are classified as follows: Simple Liquids, Compound Liquid Mixtures, Liquids Administered in Drop Doses, Bulk Powders, Capsules, Powders, Tablets, Suppositories, Ointments, Compound Ointments, Lotions and Gargles.

*Simple Liquids* are those which contain one item only, such as a U. S. P. and N. F. or other liquid preparation commonly carried in readiness for dispensing. In computing the cost of *Simple Liquids*, the material is priced at 15 cents per oz., to which a fee of 25 cents is added; this sum divided by 2 constitutes the price. Thus a 4-oz. mixture should be priced at 43 cents.

*Compound Liquid Mixtures* are those consisting of two or more ingredients, the dispensing of which constitutes compounding. In computing the price of *Compound Liquids*, the material is priced at 25 cents per oz., to which a fee of 25 cents is added; this sum divided by 2 constitutes the price. Thus a 4-oz. mixture in this class should be priced 63 cents.

*Liquids Administered in Drop Doses*.—In computing the price of prescriptions of liquids administered in drop doses, the material is priced at 25 cents per oz., to which a fee of 75 cents is

added; this sum divided by 2 constitutes the price. Thus a 1-oz. or 2-oz. prescription in this class should be priced at 50 cents and 63 cents, respectively.

*Bulk Powders.*—In computing the price of medicine dispensed in the form of bulk powder the material is priced at 25 cents per oz. by weight, to which a compounding fee of 50 cents is added; this sum divided by 2 constitutes the price. Thus a 4-oz. prescription in this class should be priced 75 cents.

*Capsules and Powders.*—In computing the price of capsules and powders the material is priced at the rate of 3 cents for each unit, plus a 50-cent fee, this sum divided by 2 constitutes the price. Thus twelve units in either of those two classes should be priced 43 cents.

*Tablets.*—In computing the price of tablets, the price is based on the manufacturer's wholesale list plus  $\frac{1}{2}$  cent for each tablet, plus a 50-cent fee; this sum divided by 2 constitutes the price.

*Suppositories.*—In computing the price of suppositories, the material is priced at 5 cents for each unit, plus compounding fee of \$1.00 divided by 2 constitutes the price. Thus, twelve suppositories should be priced 80 cents.

*Ointments.*—In computing the price of ointments, the price of 1-oz., 2-oz. and 3-oz., is determined empirically at 50 cents, 75 cents and \$1.00, respectively, which prices are divided by 2. In the event four or more ounces are prescribed, the material is charged at the rate of 12 $\frac{1}{2}$  cents per ounce plus a \$1.00 fee; the sum in each case divided by 2 constitutes the price. Thus, the final price of 1-oz. should be 25 cents; 2-oz., 38 cents; 3-oz., 50 cents; 4-oz., 75 cents; 6-oz., 88 cents; 8-oz., \$1.00.

*Compound Ointments* are those containing two or more ingredients, the dispensing of which constitutes compounding. In computing the price of *Compound Ointments*, the price of 1-oz., 2-oz., 3-oz. is determined empirically at 50 cents, 60 cents and 85 cents, respectively. In the event that four or more ounces are prescribed, the material is charged at the rate of 25 cents per oz. plus \$1.00 compounding fee, the sum in each case being divided by 2. (S. L. Hilton suggests a higher basic price for ointments, because of additional time and labor required.)

*Lotions.*—In computing the price of lotions, the material is priced at 10 cents per oz., plus a 50-cent fee; divided by 2 equals the price. Thus, 4-oz. calamine lotion should be priced 45 cents.

*Gargles.*—In computing the price of gargles, the material is priced at 5 cents per oz., plus a 50-cent fee; divided by 2 equals price. Thus, 4-oz. Dobell's Solution should be priced 35 cents.

*Exceptions.*—In the event that in any prescription the cost of any ingredient exceeds the amount allotted as material, then the actual net cost of such expensive ingredient should be added to the amount provided for cost of material in any of the above formulas.

*Specials.*—Through your Committee, the F. E. R. A. has arranged to supply Insulin at 15 per cent above wholesale cost. Mineral oil, cod liver oil, milk of magnesia, etc., when prescribed in the quantities usually marketed under their respective labels and in case the labels must be replaced by a prescription label giving physician's directions for use are priced as follows: Double the ruling selling price, add 25 cents for labeling fee and divide this sum by 2.

*Warning.*—With reference to prescriptions dispensed which are not U. S. P. or N. F. you are cautioned that the government will not allow a larger fee than a like amount of official preparation would cost. If it exceeds that amount, you have recourse to calling the physician or returning the prescription to the patient without filling.

Do not fill prescriptions for bandages, surgical dressings or other preparations which are available for office treatments.

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#### THE ATLANTIC CITY SESSION AMERICAN MEDICAL ASSOCIATION.

The fifteen sections of the Scientific Assembly A. M. A., have appointed exhibit committees to assist in the promotion of section exhibits at the Atlantic City session and in the coördination of activities between the Scientific Assembly and the Scientific Exhibit.

#### EDUCATIONAL DIRECTORY.

Part IV, Educational Associations and Directories, "Educational Directory," 1935, issued by the U. S. Department of the Interior lists the American Association of Colleges of Pharmacy and the AMERICAN PHARMACEUTICAL ASSOCIATION.

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