

how to organize material which he has collected from laboratory experiments and from library research; it develops a sense of responsibility, serves as an apprenticeship for those who plan to enter graduate work and, most important of all, it engenders a scientific attitude so necessary in the development of a professional point of view.

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DENTAL PROFESSION MEETS IN NEW YORK.

BY GEORGE C. SCHICKS.*

Dentistry holds, yearly, at least three conventions of national importance, that of the American Dental Association and the meetings held annually in New York and Chicago.

The Greater New York December Meeting of the First and Second District Dental Societies was held in the Hotel Pennsylvania the first week in December. It was the eleventh annual session and was very well attended by dentists and those in allied professions from all parts of the United States, from Canada and South America.

The program for the New York Meeting is always interesting; it was especially so this year.

Dentists have a characteristic way of offering what might be called specialized graduate courses of instruction to their members in the form of clinics. Each clinic is scheduled for three days and two hours each day is devoted to them. The duration of each class is one hour, though some have two-hour sessions, therefore six different classes may be met by each lecturer during the three days. Clinicians usually give one lecture to the general assembly during the week in addition to meeting the regular classes. Members of the dental profession may attend the clinics on payment of five dollars. It is surprising and pleasing to note the number of dentists who, each year, eagerly await the opportunity to register for such instruction.

The dentists had a wide choice of subjects to choose from in the 23 clinics available. Many of them were of particular interest to the pharmacist as well as to the dentist. Those having more or less specific application to the profession of pharmacy were:

1. Root Surgery Fundamentals Essential to Success, Clinician U. G. Rickert, Professor of Therapeutics and Materia Medica, University of Michigan, and also a member of the Council on Dental Therapeutics.
2. Surgical Treatment of Pyorrhea, Clinician Theodore O. Peterson, Past-President, Second District Dental Society.
3. Pre-Operative and Post-Operative Treatment, Clinician C. Raymond Wells, Chief of Dental Service, Queens General Hospitals, New York.
4. Root Amputation for the General Practitioner, Clinician E. Blumenthal, Director Dental Department, Greenpoint Hospital, Chief of Dental Department, Beth Moses Hospital, Brooklyn, New York.
5. Medication, How and What to Prescribe, Clinician George C. Schicks, Assistant Dean and Professor of Materia Medica, Rutgers University, College of Pharmacy.

One morning was given to the combined Medical and Dental discussion of the Report of the Sub-Committee on the Study of Curricula of Medical and Dental Schools in the United States and Canada. The Report was presented by M. O. Magid, M.D., and discussed alternately

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by medical and dental practitioners. The Committee urged a better understanding between the two professions. A list of subjects was mentioned with the suggestion that they be taught in the Medical and Dental Colleges so that each would have a better knowledge of fundamental and special sciences applicable to each profession. In part, the medical men thought that the dentist should receive more instruction in anatomy, pathology, physiology, bacteriology, hygiene and physical diagnosis as it pertains to the practice of the physician. The dentists suggested that the physician should be better trained in maxillidental surgery, dental infection and its relation to diseases elsewhere in the body, oral diagnosis, etc. It was brought out that out of all the Medical Colleges not more than fourteen made any reference to stomatology in their curricula. Hospital internship is not required of the dentist graduating from College at the present time. The report recommended that the dentist be required to have hospital experience so that he is better equipped to enter the practice of his profession. Dental Colleges have recently had a study made of their curricula by the Carnegie Survey Committee.

One evening was devoted to Topic Discussions. A list of subjects such as Preventive Dentistry, Nutrition and Diet, Operative Dentistry, Porcelain Restorations, and many others were scheduled as "Clinic Sessions without Clinics." Each topic is assigned to a Leader, who answers a set of printed questions outlined in the general program and asked of the Leader by the chairman of the session. Those attending the discussions are also permitted to ask questions, thus affording the dentist an opportunity to obtain information on the problem with which he is individually concerned.

Commercial houses occupied considerable space with their exhibits. It is interesting and gratifying that there are fewer displays of those products not approved by the Council on Dental Therapeutics.

There is much that those interested in Pharmacy can learn by attending dental conventions. There is a real opportunity for the ethical pharmacist to acquaint himself with the uses dentists have for medication. The pharmacist who is a specialist in his profession will find the dentist willing to go more than half way to do his part in rendering a service with the pharmacist which will aid in advancing public health.

COMMITTEE REPORTS

REPORT OF THE COMMITTEE FOR THE COLLECTION OF INFORMATION PERTAINING TO PROFESSIONAL PHARMACY.

BY MARVIN J. ANDREWS, *Chairman*.

The Committee for the Collection of Information Pertaining to Professional Pharmacy was appointed by Chairman Henry M. Burlage in accordance with a recommendation passed by the Section on Practical Pharmacy and Dispensing at the 1934 meeting held in Washington, D. C.

As implied by the name, the duty of this Committee was to contact (1) Deans of all Schools of Pharmacy, (2) Secretaries of State, City and County Pharmaceutical Associations and (3) Hospital Pharmacies in an effort to collect any information that may be used to promote the best interests of Professional Pharmacy. With this in view it was thought best for the Chairman of the Committee to assume the responsibility of contacting the first two groups, but due to the size of the third group, namely, Hospital Pharmacies, each member of the Committee should assume the responsibility of contacting the hospitals located in the States, assigned to them.

With this in view the members of the Committee were assigned to contact the hospitals located in the following States.

Marvin J. Andrews	Delaware, District of Columbia, Maryland, New Jersey and Pennsylvania.
Ralph W. Clark ¹	Iowa, Kansas, Missouri and Wisconsin.
W. G. Crockett	Kentucky, Ohio, Virginia and West Virginia.
Richard D. Franklin	Connecticut, Massachusetts and Rhode Island.

¹ Officers of Section and ex-officio members of the Committee.