

MINNESOTA STATE BOARD OF PHARMACY.

The Minnesota State Board of Pharmacy gave an examination for registration as pharmacist the week of July 11th. Forty-four were successful in passing this examination. A large majority of those passing were graduates of the University of Minnesota College of Pharmacy. Every one of the graduates of the Minnesota University was successful in passing the examination, and remarks were made by one of the older members of the Board relative to the excellency of the papers of these young pharmaceutical graduates.

The Board of Pharmacy also passed additional regulatory measures in an endeavor to make the Pharmacy Law a better public health measure.

REGULATION NO. 5.

Whenever a pharmacy or drug store changes its location, it shall apply to the Board of Pharmacy for amendment of its annual permit to cover the new location. There shall be no charge for such amendment.

REGULATION NO. 6.

No permit shall be issued for a pharmacy or drug store which is kept open more than fifty-six hours per week, unless at least two registered pharmacists are employed in such pharmacy or drug store on a schedule that will assure the presence of one registered pharmacist at all times. This regulation shall not apply where the owner of a pharmacy or drug store is a registered pharmacist and is continuously and personally in charge of such pharmacy or drug store.

The Board took up the matter of classifying poisons into groups together with official antidotes, which is in line with the progressive pharmaceutical policies of other states such as California, New Jersey, Colorado and others. Other important regulatory measures were taken up for further study and consideration.

Plans were discussed for the meeting of the National Association of Boards of Pharmacy to be held in conjunction with the AMERICAN PHARMACEUTICAL ASSOCIATION and the American Association of Colleges of Pharmacy, August 21st-26th. The meeting of the Pharmaceutical Law Enforcement group with such men as Dr. Robert L. Swain of Maryland; Dr. Robert P. Fischelis of New Jersey; P. H. Costello of North Dakota; and S. H. Dretzka of Wisconsin, promises to be a most interesting one. Dr. Swain, chairman of this group, hopes to have a model pharmacy law well developed by the time the meeting rolls around. His discussions along this line will be of interest to every pharmacist in America. Every pharmacist in the Northwest should avail himself of this remarkable opportunity to hear the leaders in the pharmaceutical world who will be present at the A. Ph. A. meeting.

ALLOTMENTS TO THE STATES UNDER THE LAFOLLETTE-BULWINKLE ACT.

The U. S. Public Health Service has announced the following allotments, amounting to \$2,400,000, from the first year's appropriation of \$3,000,000. The states will be expected to supplement these allotments by appropriations from their own funds.

Alabama, \$72,294; Alaska, \$2701; Arizona, \$9639; Arkansas, \$47,650; California, \$103,791; Colorado, \$18,228; Connecticut, \$26,518; Delaware, \$5283; District of Columbia, \$16,860; Florida, \$38,055; Georgia, \$77,134; Hawaii, \$8088; Idaho, \$8019; Illinois, \$125,299; Indiana, \$59,380; Iowa, \$43,564; Kansas, \$31,909; Kentucky, \$57,318; Louisiana, \$50,871; Maine, \$13,486; Maryland, \$31,892; Massachusetts, \$69,623; Michigan, \$77,206; Minnesota, \$42,324; Mississippi, \$54,119; Missouri, \$67,376; Montana, \$8575; Nebraska, \$22,833; Nevada, \$2475; New Hampshire, \$8775; New Jersey, \$71,327; New Mexico, \$9023; New York, \$193,724; North Carolina, \$84,259; North Dakota, \$12,340; Ohio, \$110,784; Oklahoma, \$46,342; Oregon, \$16,077; Pennsylvania, \$165,082; Rhode Island, \$12,062; South Carolina, \$52,522; South Dakota, \$12,420; Tennessee, \$66,644; Texas, \$128,950; Utah, \$9183; Vermont, \$6286; Virginia, \$58,983; Washington, \$25,358; West Virginia, \$32,297; Wisconsin, \$45,368; Wyoming, \$4148; Porto Rico, \$34,587; and Virgin Islands, \$949.00.

A considerable portion of these large sums will be expended for the purchase of drugs, medicines and medical supplies, under the direction of the state health authorities, for the venereal disease campaign.