

SECTION ON EDUCATION AND LEGISLATION, AMERICAN PHARMACEUTICAL ASSOCIATION

MINUTES OF THE FIRST SESSION.*

(The Chairman's Address and the Secretary's Report.)

The first session of the Section on Education and Legislation was called to order in Hotel Chalfonte, Atlantic City, Tuesday, September 5, 1916, at 3.30 P.M., by Chairman Frank H. Freericks, who stated that owing to the absence of associate officers, Wilber J. Teeters would preside while he read his address.

ADDRESS OF THE CHAIRMAN.

At San Francisco it was the pleasure of this Section to re-elect the Chairman, and also honor again its Secretary and one of the Associate Members. Those among us to-day who had the good fortune and, I am sure, the very great pleasure, of attending the convention at San Francisco on that extreme other side of the continent, and who perchance at that time happened into the opening session of our Section, may well wonder that there is to be an address from the Chairman of the Section. At least, I incline toward a suspicion that in my re-election there may have been the forethought that the Chairman, having said all that he might reasonably be expected to say for several years, would, when re-elected, give other members a chance. Our friends so minded, if any, shall not be altogether disappointed, but I serve notice now, that the distance from San Francisco to Atlantic City is very great indeed; that from August, 1915, to September, 1916, is more than a year, and finally that in this age of ours new happenings, new problems, the stride of progress which formerly seemed to crowd a year now almost fit into the day. In accepting the honor which you last year saw fit to again bestow, I fully determined to do my best in rendering service, not fully appreciating, I fear, that through the very hearty and generous coöperation of the membership, and particularly of the leaders in association work, it was the good fortune of the Section last year to present an exceptionally instructive and enlightening program. Would that all of you who last year found the distance too great might have not so found it. Yet, in so far as it concerns the reports and papers which the Section will entertain at this meeting, I am sure that those who were with us last year, and who unfortunately are not with us this year, will have equal cause for regret.

It would serve no good purpose for the Chairman to again discuss his rather extensively stated views on our educational and legislative problems in general. Augmented and supported, however, by the helpful thought which was advanced by Dr. William C. Alpers, Prof. J. U. Lloyd and Prof. Joseph P. Remington in their papers on "Qualification Requirements for Teachers," "Pharmaceutical Apprenticeship," and "Coöperation," respectively, I may now be pardoned for again pointing out that the future of retail pharmacy, at least, will be largely dependent upon more general and more complete education of the coming pharmacist on a level with the requirements exacted from the coming physician; and above all, upon the greater coöperation and better understanding between our colleges of medicine and colleges of pharmacy, which, in the interest of pharmacy, should be sought by the faculties of our colleges of pharmacy. Leaving the general aspects and the reference to conditions as we sought to present them last year, it will be my aim to bring to your minds at this time the broad, noteworthy trend of the past year in so far as it concerns our Section and its work.

* Papers with discussions of the subjects will be printed apart from the minutes, hence only the title of the paper will be mentioned in the minutes.

The Pharmacopœia and the National Formulary.—The new United States Pharmacopœia and the new National Formulary are soon to be a part of the law of the land. They will present splendid opportunity for study to the pharmacist who means to keep abreast with the times. In that connection, the thought advanced by Dr. Joseph Weinstein last year should be in mind. A general study of the latest standards in pharmacy by physicians and pharmacists can without doubt be made deeply interesting and distinctly worth while. The various branches of the Association in their respective fields can make an effort of this kind the means of coming into closer touch with local medical societies. Every wide-awake person is interested to learn about the new, and if our A. Ph. A. branches and other local bodies, and where these do not exist, if the one or few members of the Association in every smaller community will prepare a program for discussing the more important new things to be found in the Pharmacopœia and National Formulary, they are certain to have splendid attention and are certain to create a greater appreciation for standard pharmaceuticals. Every physician when informed that the new Pharmacopœia and the new National Formulary are the official standards will feel obliged to know about them, and will be sure to accept a well-presented opportunity for knowing. Gatherings of pharmacists and physicians to consider the new works in pharmacy should be arranged for without delay, and a number of such general gatherings will be fully warranted for that purpose. Their success will, of course, largely depend upon a correct planning of the arrangements and subject matter. Incidentally they will start an opportunity for better acquainting the physician with the standard preparations of real merit, even though they be not new. By all means the pharmacists of every section of the country should arrange to accept this splendid opportunity, and the work might best be served by providing a Central Committee to map out a most suitable program, which then could be followed in the various centers. No doubt, such a committee, if deemed advisable, should act under the authority of the Association itself, or under the Section on Practical Pharmacy and Dispensing.

The new Pharmacopœia and the new National Formulary as the basis of legal requirement bring to mind also the propaganda which has been carried on in past years with ever increasing activity for the use of standard pharmaceutical products, largely under the auspices of the National Association of Retail Druggists. Splendid work in various sections of the country has been done, and the effort has been mostly, if not altogether, voluntary. Doubtless all are agreed that much more might be done; that the efforts can be better coördinated and less spasmodic. While, no doubt, such work brings its compensation in one form or another to those who carry it on, it is a question whether it should not be attempted along broader and more thorough-going lines which are beyond the individual and local effort. I submit for your most earnest consideration, that the State has a duty to perform in that connection. The Federal Government and the several states see fit to impose drug standards; they make them a law. Such drug standards are the result of much study and work on the part of the best minds in medicine and pharmacy. Presumably, yes admittedly, they contain the best; and preparations which find a place there-under should without doubt have a preference for medicinal use. Why is it that a sufficient and general knowledge, necessary knowledge if you please, should be made dependent upon the voluntary effort of pharmacists, and be at their expense? If the State prescribes a standard for the most useful medicines, if in fact it makes them a part of the law, why should it not be the duty of the State to inculcate knowledge and correct understanding of their existence and use among the men who should know of such existence and use? Our federal and state governments expend hundreds of thousands, and millions of dollars for experimental and educational work in agriculture; why may they not expend, at least, a fraction of such sums in educating the physicians to use the best for the treatment of disease in human beings? With all sincerity I urge that our Federal Foods and Drug Department and our several state boards of pharmacy should be authorized to, and should have adequate appropriations for carrying on the propaganda which is now dependent upon the unselfish and painstaking effort of individual pharmacists and their associations. A splendid and creditable work could thus be carried on for which the state not only ought to pay, but for which with proper understanding it will be glad to pay. It seems to me that this offers wonderful opportunity for authoritative advancement of legitimate pharmacy.

The Federal Revenue Narcotic Law.—The so-called Harrison Law has during the year met with at least one serious test of its validity, and in that respect has been found wanting. Possession of the narcotics has been held by the Supreme Court not to be in conflict with federal law, and to that extent Section 8 of the Harrison Act providing for the contrary has been held invalid. The unwarranted ruling of the Internal Revenue Department with reference to the exempted quantities in Section 6 as applied to physicians' prescriptions continues in force notwithstanding the most logical arguments and reasons showing that the ruling is not only contrary to the law, but also to common sense. The ruling and its continued enforcement evidences an obstinacy beyond comprehension. The splendid influence for good to be found in the law, the good which its enforcement has brought about, no one can deny. That the good largely has been the result, not of enforcing the law as it was found, but rather the result of an enforcement of unwarranted regulations which have the assumed character of law, is also more plainly apparent, and tends only to prove its weakness. It must be admitted that, if the authorities charged with the enforcement of the law may impose regulations, which are really added law, in order to accomplish its purpose at all, then they may with equal justice construe the law to suit their own purpose even though it be in conflict with its expressed provisions, and even though it places a burden where a burden should not be placed. In view of the certainty that the law must now have early amendment, it no longer serves a purpose to hesitate in pointing out the weak spots and the insufficiencies, for, if amendment is to be had, it should be real amendment, so that the value of the law will not be found in regulations which go beyond its letter and which really are without warrant. There continues, and has from the first existed, a very gross misunderstanding of the scope of the law and of the authority of the federal government in its enactment. Very generally the impression prevails that the so-called Harrison Law is purely a police measure, and even those who are charged with its enforcement seem to suffer from that view. Those who have such faulty conception overlook entirely that the relationship of the federal government to the traffic in narcotic drugs, or in anything else, is limited to the exercise of the taxing power and to interstate commerce transactions. Provisions which have the character of police regulations can be only included as an incident to the two federal functions mentioned. Necessarily the exercise of the police power as an incident merely means restrictions and limitations, and the scope of any incidental police power so exercised is bound to be confined to rather narrow limits. In my opinion, the law contains a number of provisions, not speaking at all of regulations promulgated under it, which cannot be defended under the Federal Constitution. The more important ones may be changed so as to retain their beneficent influence and so as to more nearly appear as necessary incidents to the exercise of the taxing power, but in their present form they cannot stand the test. Of course, it is thoroughly appreciated that many of the weak provisions in the law have been intended—are intended—for good, but as part of the law they are, nevertheless, faulty. To provide that one who pays the tax as a retail dealer in narcotics may sell only at retail on the written order of a doctor, is the making of a provision which cannot in reason be held necessary as an incident to the taxing power, or its exercise. To provide that a doctor cannot act in the discharge of his profession, cannot prescribe necessary medicines for his patient unless he would become registered as a dealer in drugs, in which he has absolutely no intent to deal, is to provide for an absurdity, and on a proper test it will be so held. The Federal Narcotic Law in the face of developments already had is bound to be amended, and it is now the duty of those directly concerned to see that it is properly amended so that it may be as effective as possible within the confines of the Federal Constitution. Meanwhile there is an urgent need for amendment of most state narcotic laws so as to supply those needed police regulations which are beyond the power of federal government and which cannot be claimed to be a necessary incident to the exercise of the taxing-power.

Stephens-Ashurst Bill.—The principle embodied in the original Stevens Bill has substantially been carried into what is now known as the Stephens-Ashurst Bill, and the campaign against price demoralization in proprietary articles has been vigorously continued. Some differences of opinion seem to have arisen between the advocates and supporters of this so necessary legislation, and, of course, differences of opinion among the advocates of

any cause are bound to produce delay and harmful results. Undoubtedly the National Association of Retail Druggists is the original organized champion of some change in our federal laws to permit a reasonable and necessary price control, and its opinion and wishes in that respect should meet with a most thorough consideration on the part of all concerned. It has seemed to me that all proposed legislation on the subject to this time has served only to popularize the fundamental idea, to produce the necessary consideration, leading eventually to the enactment of some suitable law or amendment to existing law; and in my opinion the present Stephens-Ashurst Bill can only serve that purpose. On that account, difference of opinion should be earnestly avoided, and is entirely unnecessary, though those who are concerned more particularly with relieving evil conditions as they prevail in the drug trade should be prepared to submit a proper form of change in our laws at the opportune moment. Our Association should lend every assistance in advocating the principle of price maintenance.

Our Patent and Trade Mark Laws.—Your Committee on Patents and Trade Marks will make its report, and I do not mean to anticipate it in any manner. However, it seems within my province to bring more directly to your attention that the Paige Bill, known as H. R. 11967, to amend the laws relating to patents is finding very general support, and its chances for ultimate enactment seem constantly to improve. It is my purpose to bring to your attention a provision of the Paige Bill which seems to meet with very general approval, but which somehow does not appeal to my sense of justice and fairness. It is provided in the Paige Bill, that "In case any drug, medicine, medical chemical, coal-tar dyes or colors, etc., on which a patent for a definite process has been granted is not manufactured in the United States by or under the authority of the patentee within two years, etc., then said patentee shall have no rights under the Patent Laws of the United States as against any citizen of the United States who may import from other sources, or who may produce or manufacture or sell." Clearly this provision singles out medicines, etc., and coal-tar dyes or colors. Just why the patentee of coal-tar dyes or colors and of medicinal chemicals, etc., should be obliged to manufacture his article within the United States and the patentee of all other articles should not be so obliged, I do not fully understand. If it is unfair, inexpedient and improper to require that all patentees of all articles shall manufacture within the United States, then it would seem to be equally so with reference to those included within the provision. If the provision is dictated because of petty jealousy and because of a special selfish aim directed at the particular progress of one foreign nation, then it is unworthy and in conflict with American sense of fairness. Above all in that connection, I submit for your consideration that specially directed punitive measures are bound sooner or later to reflect and to react, and well may we give serious thought to this, for the day is sure to come when we will be leaders in such activity and industry, and then the unfairness and special punishment which we would now so thoughtlessly impose will be sure to revert upon us. This thought is submitted, not with the assurance that it is essentially correct, but in order to make certain that it will not be overlooked by those who are disposed to be fair and who have a due regard for the future.

Survey of the Pharmaceutical Teaching Institutions.—The Committee entrusted with this work last year has been continued, and we look for a further report from it through Chairman Hugh Craig. Every encouragement should be given this work as originally planned by Mr. Craig, because ultimately it will be of far reaching beneficent influence.

Publication of Formula.—There is a continued and growing advocacy for in some manner requiring the formula publication of proprietary medicines. The greatest interest is centered in the New York City Ordinance which prescribed such publication. With some show of reason those responsible for the New York City Ordinance at almost the last moment changed its requirements so as to provide, only, for a publication of potent drug content instead of a complete publication of formula. It seems, however, that in so changing the requirements to be more nearly fair, no attention whatever has been given to defining what shall constitute a potent drug, and thus for all practical purposes the effect of the ordinance remains as it was originally framed. It may be seriously doubted that, even though publication in some form be deemed necessary and correct, it should be attempted locally. It may also be seriously doubted that the advocates of such local legislation have at heart the public welfare as much as an injury to the proprietary medicine business, though they may con-

tend that every injury to such business is in keeping with public welfare. It is submitted that primarily further restrictions upon the manufacture and sale of proprietary medicines should be general; that they should not go beyond the true need of public welfare, and finally that in so far as possible they should be without injury to established property rights, or what should be established property rights.

The National Association of Boards of Pharmacy.—This opportunity is accepted to acknowledge receipt of a set of resolutions which were adopted last year by the National Association of Boards of Pharmacy, which prove the interest of said Association in advanced Pharmaceutical Legislation. An active coöperation should be sought and maintained between this Section and the National Association of Boards of Pharmacy, because they can be distinctly helpful to each other in the study and in the dissemination of a correct understanding with reference to legislative needs concerning pharmacy.

A Federal Commission to Investigate and Report on the Status of Pharmacy and Its Needs.—Such a Commission has been proposed by the National Association of Drug Clerks. The aim evidently in mind is to ultimately secure by means of such a commission some sort of a national pharmacy law. The thought of a national pharmacy law is not new by any means, but the proposal to create a commission by act of Congress with the intent to ultimately secure federal legislation seems to be original. The rather heroic attempt to thus accomplish attracts attention. At the request of the National Drug Clerks Association, the proposition was submitted to the Voluntary Conference for Drafting Modern Laws Pertaining to Pharmacy, and this matter is referred to in a separate report on the work of the Conference. It seems proper, however, that it be here briefly discussed: Without speculating upon the possibility of securing favorable action on the part of Congress, we may well reflect upon the effect of such favorable action. The original proposition, as made, contemplates that such commission shall be constituted in a particular manner, evidently to safeguard the correct interest of pharmacy, but it must be in mind that just such specification of detail always has the least chance of being retained in ultimate legislation. The grave danger of having any such commission as is proposed, if there be some chance for securing it, will rest in the fact that it will be constituted of, or under the control of, authorities who lack practical knowledge and understanding. The proposition is involved with the possibility of much harm and without promise of compensating good. If there be need to do the work which it is proposed that such a commission shall do, then does it not appear to be more feasible that it act under the authority of the American Pharmaceutical Association rather than to be made dependent upon an Act of Congress, the final provisions of which no one can predetermine?

Now, as regards the end which is sought by means of such a proposed commission, it would appear that it is advanced without due regard for constitutional limitations which control our Federal Government. A national pharmacy law in the sense that it would control activities within the several states is an impossibility. The authority of the Federal Government over pharmaceutical activities cannot go beyond provisions which may govern in interstate commerce and in the employment of pharmacists in its army, navy and hospital service, or, more broadly speaking, in connection with exercising the prescribed functions of the National Government. In view of the fact that time and again the desirability of national legislation concerning pharmacy has been advanced, it may not be out of place if the subject matter have greater attention and thought. Uniformity in pharmacy legislation throughout the several states is one of the greatest needs. It does seem strange that a citizen qualified to practise pharmacy in one state shall not be permitted to practise it in all of the states. Admittedly, the Federal Government is without power to impose its authority on the several state authorities in this respect, but there is a possibility that the Federal Government may in connection with its own functions exercise an authority which under certain restrictive measures would be gladly accepted by the authorities of the several states. Such has been well demonstrated by the Federal Foods and Drug Act, and many other instances might be cited. In connection with its exclusive control over interstate commerce, the Federal Government might well prescribe the qualifications of those who would send pharmaceutical products from one state into another, and assuredly it may exercise such authority in connection with its employment of pharmacists. If pharmacy may so within limits be regu-

lated under the authority of the Federal Government, it, of course, can provide a standard which would be acceptable to the most exacting state authorities, and thus with the usual regard of the several states for the action and authority of the Federal Government, a class of pharmacists might be created who would be authorized to follow their profession in every part of the country. Many important features need very careful consideration before any such plan be actively promoted, but it does seem worthy of consideration.

The Voluntary Conference for Drafting Modern Laws Pertaining to Pharmacy.—A separate report of the work of the Voluntary Conference will be made at a later session of the Section, and the matter is here referred to merely to make certain that the continuation of the work will find proper attention. It was recommended by the Chairman of the Section last year that the incoming officers of the Section be provided with a fund of one hundred dollars in order to continue the work, but since it was thought well to re-elect the Chairman, the matter of having such fund provided was not pressed, or, more correctly speaking, was waived. In my humble judgment, circumstances now require that the continued work of preparing a model for Modern Pharmacy Laws be frankly considered and referred to in plain words. Your Chairman has come to hold the impression that those who have primary control of the funds of the Association did not last year regard with favor the one hundred dollar appropriation which was then urged. I am not prepared to say that such appropriation is absolutely essential, because it will depend entirely upon whether it is thought well to carry the work to its completion, and, if so, who will be selected to do it. However, I can say with a sense of absolute conviction, that those in charge of the Association finances who last year did not regard with favor an appropriation of one hundred dollars, entirely failed to appreciate the possibilities of the work; they failed to appreciate the existing very general desire for modern model of laws, and the prevailing opinion for its need, and finally, I am afraid that they failed to appreciate the opportunity which our Association has in that connection to maintain its leadership and prestige. It is true that the thought of doing the work and of creating a Voluntary Conference having its members in every state, for that purpose, originated with the Chairman of the Section, who, having been honored, felt it his duty to undertake something that might be distinctly worth while. In that respect, the proposition had something of a personal character, and ordinarily it may be correct to allow a matter dependent upon personal initiative to rest at the point to which it is carried because of such initiative, but the almost immediate and warm response and the very general attention which this particular work has attracted convince me that, in the interest of our Association and in the interest of pharmacy, this is a case which should be carried beyond the point of individual initiative, and that the responsibility for completing the work should be shouldered by the Association with a good will and with a whole heart. A very fair start has been made, though it has been somewhat disappointing that some of the Voluntary Conference Members expected a complete draft of a Modern Law to come out of the mill in about two or three months, or in even a year, but with proper enlightenment the difficulty which was thus encountered can be met and overcome. It is clear to me now, however, that the responsibility of carrying on the work, if such is to be done, should not center in one person, but that a compact committee, of say five members, should be in charge of it together with the Voluntary Conference which has been created. So far as it concerns your Chairman, it gives him very great pleasure to say that the interest which was shown in response to his limited effort has been more than gratifying, and he feels himself fully compensated. If he has failed to convince others, he certainly has convinced himself that in the interest of our Association the work was proposed at exactly the proper time; and also, that the rank and file in pharmacy regard it to be needed work, and finally, that the rank and file in pharmacy throughout the country accept without question that it properly should be carried on under the auspices of the American Pharmaceutical Association, and the certain knowledge of that fact is particularly pleasing. For your earnest consideration I submit the recommendation that the Association, as such, be requested by this Section to appoint a committee of five of its members who together with the Voluntary Conference, already created, and as a part of the work of this Section, shall carry through the plan of preparing a draft of modern laws pertaining to pharmacy which may serve as a model and which shall be known as, "The Model of the American Pharmaceutical Association."

Respectfully submitted,

FRANK H. FREERICKS.

THE CHAIR: We have heard this excellent and comprehensive address of your Chairman; what is your pleasure?

F. E. STEWART: I move that a committee of five be appointed to consider the recommendations of the Chairman, and I am sure that if we carry out the propaganda outlined therein we will not be accused of doing nothing for the retail drug trade in the United States.

Seconded.

Carried.

The Chair then appointed the following committee: E. A. Ruddiman, chairman, Tennessee; A. W. Linton, Washington; Claire Dye, Ohio; W. F. Rudd, Virginia; H. V. Arny, New York.

REPORT OF THE COMMITTEE ON CHAIRMAN'S ADDRESS.¹

(1) It is the sense of your Committee that a Central Committee should be appointed by the incoming chairman of Section on Education and Legislation to consist of three members whose duty it shall be to provide a suitable program for acquainting the medical and pharmaceutical professions with the recent revision of U. S. P.

(2) The Committee favors the general idea as expressed by our chairman concerning public aid for dissemination of pharmaceutical knowledge. We suggest, however, that the specific application of such aid be along two lines:

(a) The admirable pamphlets published by the United States Public Health Service.

(b) The establishment by the several States of pharmaceutical experiment stations similar to that already established in Wisconsin.

(3) The Committee heartily endorses the following recommendations made by the Chairman:

"I submit the recommendation that the Association as such be requested by this Section to appoint a Committee of five of its members who, together with the Voluntary Conference, already created, and as a part of the work of this Section shall carry through the plan of preparing a draft of modern laws pertaining to pharmacy which may serve as a model and which shall be known as 'The Model of the American Pharmaceutical Association.'"

Respectfully submitted,

E. A. RUDDIMAN, *Chairman.*

WORTLEY F. RUDD, *Secretary.*

THE CHAIRMAN: The next order of business is the report of Secretary R. A. Kuever.

REPORT OF THE SECRETARY OF THE SECTION ON EDUCATION AND LEGISLATION OF THE AMERICAN PHARMACEUTICAL ASSOCIATION.

GENTLEMEN: The report of your secretary this year is largely statistical. It has been compiled from information received directly from the heads of the various institutions of pharmaceutical learning and from the secretaries of the various state boards of pharmaceutical examiners. An effort has been made to compile it in such a way that reference may easily be made.

Regarding the work of the schools of pharmacy much interesting information has been found. The legislative changes are very few this year because so few general assemblies meet during the even years.

This report is divided into two divisions: Educational Advances and Legislative Changes.

A special effort has been made to make this report complete, covering every state in the Union and every recognized educational institution. Replies, however, were only obtainable from eighty percent of the schools. Why twenty percent should refuse or neglect to give the information desired is not a question your secretary wishes to answer.

¹This report was adopted during the second session, but for convenient reference is printed here. The recommendations were favorably acted upon and referred to the Association.

EDUCATIONAL ADVANCES.

The following questions, in outline form, were sent to the dean of each school of pharmacy:

- Date.....
1. *Name of school*
 2. *Number of students, 1915-16*.....
 3. *Number of graduates, 1915-16*.....
 4. *Minimum entrance requirements for 1916-17*.....
 5. *Educational advances adopted during the past year*
 6. *Is military training required?*
 7. *If so, when adopted?*
-DEAN.

The following are the replies, alphabetically arranged, according to the states in which the schools are located:

ALABAMA:

- (1) 1. Department of Pharmacy, Alabama Polytechnic Institute.
2. Fifty-two.
3. Sixteen.
4. Two years of high school work or its equivalent.
5. No report.
6. Yes.
7. 1872.
- (2) 1. School of Pharmacy, Birmingham Medical College.
2. Reported discontinued.
- (3) 1. Department of Pharmacy, University of Alabama.
2. No report.

CALIFORNIA:

- (4) 1. California College of Pharmacy, University of California.
2. Ninety-seven.
3. Thirty-three.
4. Two years of high school work for Ph.G. degree; four years of high school work for Ph.C. and Phar.B. degrees.
5. A new, elaborate, curriculum for the course leading to Ph.C.
6. It is not.
- (5) 1. College of Pharmacy University of S. California. No report.
- (6) 1. Department of Pharmacy, College of Physicians and Surgeons of San Francisco.
2. No report.
3. No report.
4. Two years of high school work.
5. None.
6. No.
7. Twelve years ago.

COLORADO:

- (7) 1. School of Pharmacy, University of Colorado.
2. Thirty-two.
3. Six.
4. Four years of high school work.
5. Just a gradual raising of standards.
6. No, but should be.
7. A number of the students are members of the National Guard.

DISTRICT OF COLUMBIA:

- (8) 1. National College of Pharmacy, George Washington University.
2. Fifty-four.
3. Fifteen.
4. Four years of high school work or the equivalent.
5. Quantitative determination of pharmacopoeial products purchased from local pharmacies.
6. Optional.
7. 1915.
- (9) 1. Pharmaceutic College, Howard University.
2. Sixty.
3. Seventeen.
4. The completion of a four-year course in an accredited high school.
5. Raising the requirements from two years of high school work to the completion of a four-year course in an accredited high school.
6. No.

GEORGIA:

- (10) 1. Atlanta College of Pharmacy.
- No report.
- (11) 1. Pharmacy Department, University of Georgia.
2. Fifteen.

3. Seven.
 4. Eight units or two years of high school work.
 5. A course in accounting for 1916-17 has been added—three hours per week for thirty-six weeks.
 6. No, but under advisement.
- (12) 1. School of Pharmacy, Mercer University.
2. Twenty-seven.
 3. Eight.
 4. Two years of high school work for the two years' course and four years for the four years' course.
 5. Commercial pharmaceutical course added. Entrance requirements increased for the two years' course to three years of high school work which goes into effect in 1917.
 6. No.
- (13) 1. Southern College of Pharmacy. No report.
- ILLINOIS:
- (14) 1. School of Pharmacy, Northwestern University.
2. Seventy-two.
 3. About thirty-eight.
 4. Fifteen units of accredited high school work.
 5. Pharmaceutical Chemist Course increased to three years of eight and one-half months each.
- (15) 1. School of Pharmacy, University of Illinois.
2. One hundred and ninety-nine.
 3. Forty-three.
 4. Graduation from high school of accredited grade (four years' course of fifteen Illinois units of credits).
 5. Advanced from two to four years of high school entrance.
 6. No.
- (16) 1. Central States College of Pharmacy, Loyola University. No report.
- INDIANA:
- (17) 1. School of Pharmacy, Purdue University.
2. Sixty-seven.
 3. Thirty-six Ph.C. graduates; five B.S. graduates.
 4. High school graduation or its equivalent.
 5. School will dispense the prescriptions written by the University physicians. Commercial pharmacy added.
 6. Yes, for the four-year students.
 7. Several years ago.
- (18) 1. School of Pharmacy, University of Notre Dame.
2. Thirteen.
 3. Four.
 4. One year of high school work for Ph.G.; two for Ph.C.; and four years for B.S. in Ph.
 5. No report.
 6. For the first two years.
 7. 1912.
- (19) 1. School of Pharmacy, University Valparaiso.
2. About one hundred and seventy-five.
 3. Seven Ph.C.; thirty-seven Ph.G.
 4. Two years of high school work for Ph.G. Four years for Ph.C. and B.S. in Pharm.
 5. The B.S. in Pharmacy has been added.
 6. No.
- (20) 1. Indianapolis College of Pharmacy.
2. Sixty.
 3. Twenty-nine.
 4. One year of high school work or its equivalent.
 5. No report.
 6. No.
- (21) 1. Tri-State College of Pharmacy. No report.
- IOWA:
- (22) 1. College of Pharmacy, State University of Iowa.
2. Fifty-seven.
 3. Twenty-three Ph.G.; two Ph.C.
 4. Four years of accredited high school work.
 5. Advanced from three to four years of high school work for entrance.
 6. Yes.
 7. 1916.
- (23) 1. Highland Park College of Pharmacy.
2. Eighty-five.
 3. Thirty.
 4. One year of high school work for Ph.G.; four for Ph.C.

5. Advanced from two to four years of high school work for Ph.C. course.
6. No.

KANSAS:

- (24) 1. School of Pharmacy, University of Kansas.
2. Sixty-five.
3. Eighteen.
4. Four years of high school work from an accredited school.
5. Principally in graduate courses. Also business course.
6. No.
- (25) 1. Louisville College of Pharmacy.
2. Sixty.
3. Sixteen.
4. One year of high school work.
5. Addition of Phar.C. and Phar.D. courses.
6. No.

LOUISIANA:

- (26) 1. New Orleans College of Pharmacy.
2. Fifty-eight.
3. Twenty-seven.
4. Completion of first year of high school or its equivalent.
5. No report.
6. No.
- (27) 1. School of Pharmacy, Tulane University of Louisiana.
2. Thirteen.
3. One.
4. Three years of high school work.
5. None.
6. No; physical training, yes.
7. 1912.

MAINE:

- (28) 1. Department of Pharmacy, University of Maine.
2. Twenty-two.
3. Seven.
4. Seventeen years of age, three years of high school work or its equivalent.
5. Changed the entrance requirements from two to three years of high school work. By 1919 a full high school course will be required.
6. Only of the B.S. students (four years).
7. Has always been required of the four-year men.

MARYLAND:

- (29) 1. Department of Pharmacy, University of Maryland.
2. Ninety-nine.
3. Twenty-one.
4. One year of standard high school work including one language other than English.
5. No report.
6. No.

MASSACHUSETTS:

- (30) 1. Massachusetts College of Pharmacy.
2. Two hundred and seventy.
3. Thirty-one Ph.G.; seven Ph.C.
4. Completion of one year or more of a high school course, or its equivalent.
5. A loan fund established for needy and worthy students.
6. No.

MICHIGAN:

- (31) 1. College of Pharmacy, University of Michigan.
2. One hundred and twenty-six.
3. Fifteen.
4. Four years' work in an approved high school.
5. No report.
6. No.

MINNESOTA:

- (32) 1. College of Pharmacy, University of Minnesota.
2. One hundred and five.
3. Thirty-three.
4. Full four years' high school graduation.
5. Beginning with 1916-17 the regular course will cover three full University years.
6. Yes.
7. 1915-16.

MISSISSIPPI:

- (33) 1. Department of Pharmacy, University of Mississippi.
2. Forty-five.
3. Twenty-two.
4. Two years of completed high school work; four years for the Ph.C. course.
5. 1917-18 four years of completed high school work will be required for all degrees.
6. No.

MISSOURI:

- (34) 1. St. Louis College of Pharmacy.
 2. One hundred and seven.
 3. Forty.
 4. One year of high school.
 5. None.
 6. No.
- (35) 1. Kansas City College of Pharmacy and Natural Sciences.
 2. Fifty-eight.
 3. Twenty-nine.
 4. Two years of high school work—seventeen years of age.
 5. From one to two years of high school work.
 6. No.
- (36) 1. School of Pharmacy, National University of Arts and Sciences.
 No report.

MONTANA:

- (37) 1. School of Pharmacy, University of Montana.
 2. Thirty.
 3. Eleven.
 4. Four years' high school or its equivalent.
 5. Increase from three to four years of high school work for entrance to degree course.
 6. No. May be optional.
 7. Steps are being taken now to provide this training which may be compulsory.

NEBRASKA:

- (38) 1. College of Pharmacy, Creighton University.
 2. Sixty-nine.
 3. Twenty-three.
 4. One year of high school work.
 5. Microscopical examination of drugs has been made to cover two full years of laboratory work. Service in the prescription dispensary of the medical school has been changed from an opportunity to a requirement. Beginning in the fall of 1916 a laboratory course in the manufacturing of organic pharmaceuticals will be initiated.
 6. No.
- (39) 1. College of Pharmacy, University of Nebraska.

2. Thirty-six.
 3. Nine.
 4. Four years of high school work.
 5. No report.
 6. Of four-year men only.
 7. With the establishment of the University.

NEW JERSEY:

- (40) 1. Department of Pharmacy, College of Jersey City.
 2. Eleven.
 3. Two.
 4. One year of high school.
 5. Preliminary requirements have been raised to one year high school for Ph.G., Phar.M. and four years of high school for Ph.C.
 6. No.
- (41) 1. New Jersey College of Pharmacy.
 2. One hundred and fifteen.
 3. Forty-one.
 4. Eighth grade grammar certificate of graduation.
 5. None.
 6. No.

NEW YORK:

- (42) 1. Albany College of Pharmacy, Union University.
 2. One hundred and six.
 3. Forty-seven.
 4. Fifteen regent counts—the equivalent of one year of high school work.
 5. This requirement will be changed. Beginning with the session of 1918-19 thirty counts will be required.
 6. No.
- (43) 1. Brooklyn College of Pharmacy.
 2. Three hundred and eighteen.
 3. Thirty-five.
 4. Fifteen regent counts.
 5. None.
 6. No.
- (44) 1. Buffalo College of Pharmacy, University of Buffalo.
 2. One hundred and seventy-three.
 3. Fifty-two.
 4. Good moral character—seventeen years of age—one year successfully completed work in high school.

5. Practical laboratory examination for each pharmacy class at mid-term and end of session under state board conditions.

(45) 1. College of Pharmacy, City of New York, Columbia University.

2. Five hundred and five.
3. One hundred and sixty-two.
4. One year of high school work (15 regents' counts), and seventeen years of age.
5. Thirty hours of lecture and thirty hours of practical work in accounting in first year. Candidates for B.S. degree must meet all requirements of college entrance examination board.

6. No.

(46) 1. College of Pharmacy, Fordham University.

2. Eighty-four.
3. Thirty-two.
4. One year of high school work or its equivalent.
5. After January 1st, 1918, not less than two years of high school work or its equivalent.

6. No.

(47) 1. School of Pharmacy, Syrian Protestant College.

No report.

NORTH CAROLINA:

(48) 1. Leonard School of Pharmacy, Shaw University.

No report.

(49) 1. School of Pharmacy, University of North Carolina.

No report.

NORTH DAKOTA:

(50) 1. School of Pharmacy, North Dakota Agricultural College.

2. Thirty-five.
3. Eight.
4. Two years of high school work.
5. No report.
6. Yes.
7. Required by law.

OHIO:

(51) 1. Cleveland School of Pharmacy, Western Reserve University.

2. One hundred and eight.

3. Twenty-two.

4. Two years of high school work.

5. A two years' course of not less than 1,200 hours leading to the degree Ph.G. A third-year course of not less than 800 hours, about one-half of which must be devoted to chemistry, leading to the degree Ph.C. An average of 75 percent, and a satisfactory thesis must be presented for this degree. An additional course of not less than 1,000 hours, of which one-third or more must be devoted to original investigative work and for which a thesis and examinations before Faculty and Board of Trustees must be made and for which the degree, Doctor of Pharmacy, is given.

6. No.

7. May 15, 1916.

(52) 1. College of Pharmacy, Ohio Northern University.

No report.

(53) 1. College of Pharmacy, Ohio State University.

2. Ninety-four.

3. Five four-year, and twenty-one two-year men.

4. Two years of high school work for the two years' course and high school graduation for the four years' course.

5. A course in commercial pharmacy has been added.

6. Yes.

7. 1885.

(54) 1. Toledo College of Pharmacy, Toledo University.

No report.

(55) 1. Cincinnati College of Pharmacy.

2. Forty-eight.

3. Thirty-nine.

4. Two years of high school work.

5. No report.

6. No report.

7. No report.

OKLAHOMA:

(56) 1. School of Pharmacy, State University of Oklahoma.

2. Seventy-four.

3. Fifteen.

4. Two years of high school work for Ph.G. and four years of high school work for Ph.C. and B.S.
5. Course now meets requirements of the New York Department of Education from which registration was received.
6. No.

OREGON:

- (57) 1. School of Pharmacy, North Pacific College.
2. Thirty-eight.
3. Nineteen.
4. Two years of high school work.
5. No report.
6. No.
- (58) 1. Course in Pharmacy, Oregon Agricultural College.
2. Seventy.
3. Ten B.S. and two Ph.G.
4. Four years of high school work. For the vocational course which is offered for the first time this year, two years of high school is required.
5. Four years of high school work as entrance to all courses excepting the vocational course.
6. Yes.
7. 1884.

PENNSYLVANIA:

- (59) 1. Pittsburgh College of Pharmacy, University of Pittsburgh.
2. Two hundred and twenty-two.
3. Eighty-nine.
4. Two years of high school work.
5. Entrance requirements raised from one to two years.
6. No.
- (60) 1. Department of Pharmacy, Medico-Chirurgical College.
- No report.
- (61) Pharmaceutical Department, Temple University.
- No report.
- (62) 1. Philadelphia College of Pharmacy.
2. No report.
3. No report.
4. No report.
5. Entrance requirements are to be increased from one year of standard high school work to two years or its equivalent, beginning with the session 1917-18.
6. No report.

RHODE ISLAND:

- (63) 1. Rhode Island College of Pharmacy and Allied Sciences.
- No report.

SOUTH CAROLINA:

- (64) 1. College of Pharmacy, Medical College, State, South Carolina.
2. Twenty-two.
3. Twelve.
4. A minimum age of seventeen years and evidence of the satisfactory completion of education beyond the eighth grade equivalent to fifteen counts.
5. None.
6. No.

SOUTH DAKOTA:

- (65) 1. Department of Pharmacy, South Dakota State College of Agriculture and Mechanic Arts.
2. Thirty-three.
3. Nine.
4. Four years of high school work.
5. None.
6. Yes, pharmacy students are required to take military training the same as other students.
7. 1887.

TENNESSEE:

- (66) 1. Department of Pharmacy, Vanderbilt University.
2. Thirty-four.
3. Fifteen.
4. Fourteen Carnegie units—the equivalent of four years of high school work.
5. Entrance requirements advanced from three to four years. Work for a Ph.C. degree now covers three years.
6. No.
- (67) 1. School of Pharmacy, University of Tennessee.
2. Fifteen.
3. Four.
4. Three years of high school work or its equivalent.
5. Ninety-six hours of physics added to the course, making the total number of hours for the two years' course 1635.
6. No.
- (68) 1. Meharry Pharmaceutical College, Walden University.

2. Forty-eight.
3. Seventeen.
4. Two years of high school work which must include one year each of Latin and physics.
5. No report.
6. No.

TEXAS:

- (69) 1. School of Pharmacy, Baylor University.
2. Forty-four.
 3. Five.
 4. One year of high school.
 5. Expect to raise requirements in fall of 1917.
 6. No.
- (70) 1. School of Pharmacy, University of Texas.
2. Fifty-two.
 3. Twenty.
 4. Eight high school units.
 5. None.
 6. No.
- (71) 1. College of Pharmacy, Department Southern Methodist University. Report discontinued.

VIRGINIA:

- (72) 1. School of Pharmacy, Medical College of Virginia.
2. Ninety-five.
 3. Twenty-five.
 4. Satisfactory completion of one year of high school work for the Ph.G. degree and graduation from high school for the degree of Ph.C. The former is a two years' course and the latter a three-year one.
 5. Minimum entrance requirements for 1917-18 will be two years of high school work.
 6. No.

WASHINGTON:

- (73) 1. College of Pharmacy, University of Washington.
2. Sixty.
 3. Twenty-five from the two-year course. Two from the four-year course. One from the five-year course.
 4. Four years of high school work. Students over eighteen years of

age, who have at least two years of high school work, are admitted as special students but are not candidates for a degree.

5. Degree for two-year course changed to Ph.G. Three-year course introduced leading to the degree Ph.C.
6. Yes.
7. 1909.

- (74) 1. Department of Pharmacy, State College of Washington.
2. Forty-three.
 3. Twelve.
 4. Two years of high school work for the Ph.G. degree, and four years for the Ph.C. and B.S. in pharmacy degrees.
 5. A three-year course added.
 6. Yes.
 7. When the College was founded, twenty-five years ago.

WEST VIRGINIA:

- (75) 1. Courses in Pharmacy, School of Medicine, West Virginia University.
2. Twenty-one.
 3. None.
 4. Four years of high school work or its equivalent; students are admitted as special students who have had at least two years of high school work and two years of practical experience, but they are not candidates for degrees.
 5. Certificate of Graduate in Pharmacy changed to degree of Ph.C. Three-year course installed leading to the degree Ph.C., and a four-year course added which leads to the degree B.S. (Pharmacy).
 6. Yes—all under twenty-three years of age.
 7. Conforms to general University rules which were in effect when the department was established.

WISCONSIN:

- (76) 1. Course in Pharmacy, University of Wisconsin.
2. Thirty-seven.
 3. Ten.

- | | |
|--|---|
| <ol style="list-style-type: none"> 4. One year of high school work for the two-year course and four years of high school work for the four-year course. 5. No report. 6. For men in the four-year course, but not for those in the two-year course. 7. It has always been required of four-year University students. | <ol style="list-style-type: none"> (77) 1. School of Pharmacy, Marquette University. 2. Forty. 3. Thirteen. 4. Two years of high school work and eighteen years of age. 5. A new medical dispensary has been equipped and a medicinal plant garden has been started. 6. No. |
|--|---|

EDUCATIONAL SUMMARY.

At the present time there are seventy-three more or less generally recognized schools of pharmacy in the United States, of which forty-two hold membership in the American Conference of Pharmaceutical Faculties. It is to be regretted that, in addition, there are about one-third as many more unrecognized schools, which have no entrance requirements and give no regularly outlined courses of instruction. They are the so-called "plugging courses" and "diploma mills" which have for their apparent purpose the preparation of young men and women for the licensing examinations. Such institutions should not be tolerated. Without standards they have resulted in too large a number of druggists in many of the states, and the small amount of pharmaceutical practice thus obtained by the average druggist has made it necessary for many to engage chiefly in closely related commercial activities. Hence pharmaceutical service to the people has suffered and the original intent of the state in creating and licensing a group of citizens to render exclusive and expert pharmaceutical service, has been largely defeated.

In 1910 a motion prevailed before this association favoring the inspection of pharmaceutical schools by the Carnegie Foundation, and the statement was made that such inspection would undoubtedly be undertaken at once. Thus far, however, no such investigation has been made, so it would seem that this association should assume the responsibility of having it begun immediately. Such an investigation would undoubtedly reveal conditions similar to those which existed in the medical institutions proving that many of the schools are not adequately prepared, with either laboratory equipment or teaching staff to give proper pharmaceutical instruction.

About one-sixth of the states in the Union now require a pharmaceutical diploma for the licensing examination either by board ruling or by law. In several states bills making graduation a prerequisite will be introduced this coming winter. The number of states making such requirements will gradually increase and it will give rise to granting diplomas for inferior work unless an investigation and standardization of pharmaceutical schools is undertaken.

During the past fiscal year three schools have been discontinued. The School of Pharmacy, Birmingham Medical College, was absorbed by the Department of Pharmacy, University of Alabama, at Mobile. The Department of Pharmacy, Southern Methodist University at Dallas, Texas, has been indefinitely discontinued. The Department of Pharmacy, Medico-Chirurgical College was merged with the Philadelphia College of Pharmacy.

The following data obtained from the reports of the various schools are of interest in this connection: Thirty-five percent require only one year of high school work, or its equivalent, for admission—thirty-three percent demand two years of preparatory work—five percent require three years, and twenty-six percent require the completion of four years of preliminary education.

Those requiring one year:

School of Pharmacy, University of Notre Dame.
 Indianapolis College of Pharmacy.
 Highland Park College of Pharmacy.
 Louisville College of Pharmacy.
 New Orleans College of Pharmacy.
 Department of Pharmacy, University of Maryland.
 Massachusetts College of Pharmacy.
 St. Louis College of Pharmacy.
 Department of Pharmacy, College of Jersey City.
 New Jersey College of Pharmacy.
 Albany College of Pharmacy.
 Brooklyn College of Pharmacy.
 Buffalo College of Pharmacy.
 College of Pharmacy, City of New York.
 College of Pharmacy, Fordham University.
 Philadelphia College of Pharmacy.
 School of Pharmacy, Baylor University.
 College of Pharmacy, Medical College of State of South Carolina.
 School of Pharmacy, Medical College of Virginia.
 Course in Pharmacy, Creighton University.

Those requiring two years:

Department of Pharmacy, Alabama Polytechnic Institute.
 California College of Pharmacy, University of California.
 Department of Pharmacy, College of Physicians and Surgeons, San Francisco.
 Pharmacy Department, University of Georgia.
 School of Pharmacy, Mercer University.
 School of Pharmacy, Valparaiso University.
 Department of Pharmacy, University of Mississippi.
 Kansas City College of Pharmacy and Natural Sciences.
 School of Pharmacy, North Dakota Agricultural College.
 Cleveland School of Pharmacy, Western Reserve University.
 College of Pharmacy, Ohio State University.
 Cincinnati College of Pharmacy.

Eight of the above-mentioned institutions, or thirteen percent, have increased their entrance requirements by one year or more of high school work during the past year. They are:

Department of Pharmacy, Alabama Polytechnic Institute.
 Pharmaceutic College, Howard University.
 School of Pharmacy, Mercer University.
 School of Pharmacy, University of Illinois.
 Department of Pharmacy, University of Maine.

School of Pharmacy, State University of Oklahoma.
 School of Pharmacy, North Pacific College.
 Course in Pharmacy, Oregon Agricultural College.
 Pittsburgh College of Pharmacy, University of Pittsburgh.
 Meharry Pharmaceutical College, Walden University.
 School of Pharmacy, University of Texas.
 Department of Pharmacy, State College of Washington.
 School of Pharmacy, Marquette University.

Those requiring three years:

School of Pharmacy, Tulane University of Louisiana.
 Department of Pharmacy, University of Maine.
 School of Pharmacy, University of Tennessee.

Those requiring four years:

School of Pharmacy, University of Colorado.
 National College of Pharmacy, George Washington University.
 Pharmaceutical College, Howard University.
 School of Pharmacy, Northwestern University.
 School of Pharmacy, University of Illinois.
 School of Pharmacy, Purdue University.
 College of Pharmacy, State University of Iowa.
 School of Pharmacy, University of Kansas.
 College of Pharmacy, University of Michigan.
 College of Pharmacy, University of Minnesota.
 School of Pharmacy, University of Montana.
 School of Pharmacy, University of Nebraska.
 Department of Pharmacy, South Dakota State Agricultural College.
 Department of Pharmacy, Vanderbilt University.
 College of Pharmacy, University of Washington.
 Courses in Pharmacy, School of Medicine, West Virginia University.

Kansas City College of Pharmacy and Natural Sciences.
 School of Pharmacy, University of Montana.
 Pittsburgh College of Pharmacy, University of Pittsburgh.

During the school-year 1915-16 four thousand, seven hundred and fourteen students were enrolled in the sixty schools given above and one thousand, two hundred and ninety-six students were graduated. Assuming that it is fair to base the total number of pharmaceutical students in the United States, during the past school-year, on the statistics obtained from the eighty percent of schools, the total number would be five thousand, six hundred and fifty-seven, and the total number of graduates for the year, one thousand, five hundred and fifty-five.

Ten years ago, in eighty pharmaceutical schools, five thousand, nine hundred and twenty-nine students were enrolled, and one thousand, eight hundred and thirty-six were graduated.

Special attention should be called to the fact that the College of Pharmacy, University of Minnesota, has adopted a three-year minimum course of instruction which goes into effect this year.

The College of Pharmacy, University of Iowa, was a pioneer this year in conducting a druggists' conference. The program consisted of lectures and discussions on pharmaceutical business principles and salesmanship. It was open, without cost, to the druggists of the state and the students of the school. The attendance was good, considering that the idea was new, and from the interest shown it has been decided to give such a conference annually. A special effort will be made this coming year to acquaint the druggists of the state with the ninth revision of the United States Pharmacopœia.

If an excuse were needed for such a conference it could be met by stating that many men are better pharmacists than they are business men. The underlying principles of systematic organization and better salesmanship can be outlined in a few days' work, and if the state can co-operate in building up a better business and knowledge of salesmanship, it is well worth while.

The following topics were presented by experts in their respective fields: "The Modern Drug Store," "The Druggist and His Trade," "The United States Pharmacopœia," "Knowing Your Goods," "Effective Advertising," "The Evolution of the Apothecary Shop," "Salesmanship," "How I Reorganized My Store and What Came of It," "Efficiency in a Drug Store," "A System of Accounts for Drug Stores," etc.

LEGISLATIVE CHANGES.

During the past fiscal year there have been very few legislative changes affecting the profession of pharmacy. A comparatively small number of states have legislative sessions in the even years. A great deal of pharmaceutical legislation is being planned for the coming winter both by the various state associations and the pharmaceutical examining boards. Nineteen-fifteen was probably the most successful year American pharmacy has ever had from a legislative standpoint. Many states were successful in securing some very desirable laws as well as defeating undesirable bills. It is to be hoped that in 1917, in the various sessions, pharmacy will fare as well or a little better, if possible. This can only be accomplished by having thoroughly organized pharmaceutical bodies—especially active legislative committees in the various state associations—working county pharmaceutical societies, and by having each individual pharmacist constantly on the firing line. Pharmacists should assume the offensive rather than the defensive. The enemies of the pharmaceutical profession are constantly mobilizing their forces. There will not be a single legislative session this coming year in which some inimical measures will not be introduced. It will take an equally well mobilized pharmaceutical force to defeat such bills. And such mobilization will require the enlistment of every pharmacist in the profession.

The following is a summary of legislative changes during the past fiscal year:

Arizona.—The Legislature convened during the month of July, at which time the state association attempted to secure some pharmaceutical legislation but was unsuccessful. No change in this state, therefore, since May, 1913.

Kentucky.—The general assembly convened but no changes were made in the laws pertaining to pharmacy.

Maryland.—The general assembly convened. No changes were asked for and no changes were made.

Massachusetts.—This state had one important change in the law which broadened the definition of the drug business from the sale of narcotics and the dispensing of prescriptions to the sale and keeping and exposing for sale of all potent drugs, including narcotics and the dispensing of prescriptions.

Mississippi.—A law has been passed which provides that the governor can appoint only men to the state board of pharmacy who shall have had not less than five years of practical experience as retail pharmacists and who shall be in addition graduates of a recognized college of pharmacy. In Section 22 of the same act a recognized college is defined as one holding membership in the American Conference of Pharmaceutical Faculties.

Missouri.—The only change in this state, since 1909, is relative to the sale of narcotics. Section 5786 modifies the narcotic law so that it will conform to the Harrison Anti-narcotic Law.

New Jersey.—In this state the legislature meets every year. During the past five years one new law was proposed and it was turned down. No change since 1915.

New York.—Section 233 has been amended to read "3. Had prior to beginning the first year of study in the school 30 units or the equivalent" in place of "15 units." This refers to entrance requirements.

Oklahoma.—A meeting of the Oklahoma Pharmaceutical Association was recently held at Sulphur, at which time resolutions were passed to introduce a bill during the next meeting of the legislature, raising the fee for annual renewals from two dollars to two and one-half and have the board of pharmacy remit the fifty cents to the Association in order that the Association might be self-sustaining and have money to hold meetings and operate successfully.

Rhode Island.—The general assembly convened but no changes were made in the pharmaceutical laws.

Texas.—No changes since 1907. Secretary Walker says: "We have now prepared amendments to our present law which will be presented at our next meeting of the legislature in January, 1917, and we feel almost assured of a successful passage of our proposed amendments."

Virginia.—The legislature was in session but no laws were passed which affect the practice of pharmacy.

Washington.—No change since 1909.

Respectfully submitted,

R. A. KUEVER, *Secretary.*

Moved by L. E. Sayre that this report be received, and that the thanks of the Association be extended to the Secretary. Seconded by M. I. Wilbert.

Motion carried.

Education has improved the pharmacist just as it has raised the standard of all callings. Organization has become more perfect, and there is certainly a greater tendency amongst members of the craft to put aside petty jealousies and work together for the good of all. The most perplexing problem, and one which is still unsolved, is, How to restrain the man who is not amenable to moral suasion, and still persists, for reasons best known to himself, in playing a lone hand. Some of these "lonely-furrow" pharmacists are the best of good fellows individually, but no arguments can make them see that modern conditions of industrial life have made it well-nigh impossible for the individual to ignore the principle expressed in the old adage, "United we stand—divided we fall." Pursuing the argument further, there is the man who, devoid of ethical considerations, embarks systematically on a line of conduct which brings discredit on the craft as a whole. His sole object in life is to make money. He steers as close to the wind as it is possible to do. He takes risks which most men decline under any circumstances to run. He gambles on the chance of not being found out. How are such men to be restrained? It is for our pharmaceutical leaders to find the remedy.—*Austral. Jour. of Pharmacy.*
