

with reference to all industries combined, for each state and geographic division and for each of the leading 130 cities.

The Abstract, which is issued in the form of a 722-page volume 9 $\frac{1}{2}$  by 6 $\frac{1}{4}$  inches in size, bound in cloth, is not for free distribution, but may be obtained by purchase from the Superintendent of Documents, Government Printing Office, at 65 cents per copy.

*Pituitary Standardization.* Studies from the Research Laboratory, Parke, Davis, & Co. Reprint No. 103, 1916. By H. C. Hamilton and L. W. Rowe.

*Proceedings of the Thirty-Eighth Annual Meeting of the Missouri Pharmaceutical Association,* held at Excelsior Springs, June 13-16, 1916.

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### UNITED STATES PUBLIC HEALTH SERVICE.

List of changes of duties and stations of commissioned and other officers of the United States Public Health Service for the seven days ended June 6, 1917.

Phar. F. L. Brown. Relieved at Reedy Island Quarantine Station and proceed to Philadelphia, Pa., for duty. May 31, 1917.

Phar. J. V. LaGrange. Granted 1 day's leave of absence, June 5, 1917. June 4, 1917.

Phar. F. S. Goodman. Proceed from Tampa Bay Quarantine Station not oftener than once each week on official business. June 11, 1917.

Epidemiologist A. W. Freeman. Granted 3 days' leave of absence enroute under orders of June 4, 1917. June 8, 1917.

Sanitary Inspector William Pryor. Proceed to San Francisco Quarantine Station to observe methods of fumigating by cyanide gas. June 11, 1917.

#### PROMOTION.

Phar. William G. Beucler. Promoted and appointed Pharmacist of the Second Class, effective December 27, 1916. June 11, 1917.

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### PHARMACISTS IN THE R. A. M. C.

The Pharmaceutical Society is to be commended on the action taken regarding the utilization of pharmacists, as such, in the R. A. M. C. The military authorities' reply is not, however, to be regarded as altogether satisfactory, for, on reference to *The Pharmaceutical Journal*, we frequently find the statement that "recruiting for the R. A. M. C. is closed." It is common knowledge that pharmaceutical work in our Army is frequently allotted to persons who possess no statutory civil qualification in pharmacy. As to the accepting only of men with a low medical classification—agreed that fighting men are needed urgently—I have yet to learn that any medical man classified for general service has, on this account, been sent as a combatant and his medical work handed over to a person not on the medical register. I am convinced that this question of the proper use of pharmacists, with a corresponding status in our army medical scheme, is one of the matters which should *not* be left until "after the war." It is to be hoped that the new Pharmaceutical Council will continue to press the Army authorities on the subject. Don't expect the Pharmaceutical Society to work a miracle; but let every pharmacist use his influence, when and where there is opportunity, with Members of Parliament and others to prove the justice of our claims for recognition. If H. M. Prison Commissioners demand a pharmaceutical qualification of the dispenser compounding medicines for inmates of convict prisons, surely our Army authorities must eventually agree that sick and wounded soldiers are, at any rate, *equally* deserving of the best pharmaceutical service available.

Geo. W. Gibson, in *Chemist and Druggist*.

London, N. W. 1, May 7, 1917.