

Huston (R. M.)

CHARGE

TO

The Graduates

OF

JEFFERSON MEDICAL COLLEGE,

OF PHILADELPHIA,

Delivered at the Public Commencement, March 8, 1856.

BY

ROBERT M. HUSTON, M. D.

WITH A LIST OF THE GRADUATES.

Published by the Graduating Class.

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PHILADELPHIA:

JOSEPH M. WILSON,

27 SOUTH TENTH STREET, BELOW CHESTNUT STREET.

1856.



GENTLEMEN :

THE toils and anxieties of the days of your pupilage are now passed, and you are about to enter on a new course of honour, and of usefulness to your fellow men.

The honourable board of Trustees of Jefferson Medical College of Philadelphia, by their president, with all the authority of the commonwealth of Pennsylvania, have pronounced you doctors of medicine, "*inter nos, et ubique gentium.*"

This is an event of great interest to you, and to your immediate relatives and friends, and of much gratification to the faculty and trustees of the Institution, which now enrolls your names on the long list of its alumni.

My colleagues of the faculty have assigned to me the grateful task of addressing you on this interesting occasion, to welcome you into the ranks of our time-honoured profession, to extend to you in their name a few words of parting counsel and advice. Often as I have, as your friend and teacher, counselled you in matters of professional instruction, and sometimes in affairs more purely personal, I have rarely felt the responsibility so powerfully as at this moment.

To exchange the feelings of conscious dependence on others for instruction in the essentials of the profession, which is to be the business of your future lives, for that which must assure you of being their peers—the proud and manly satisfaction that you have attained to the reward for which you have long and hopefully looked forward, and that henceforth you are to be not mere recipients, but dispensers of the treasures of our profession—are reflections well calculated to cheer your minds, and inspire you with grateful hearts. At a period of life when others are throwing away equal advantages, and wasting their time in idleness and frivolity, that you have had the courage and good sense to devote yourselves assiduously to the acquisition of a useful and honourable profession, is in the highest degree creditable, and must ever be to you a subject of the happiest reflection. To your parents and friends who have not only supplied you with pecuniary means for the purpose, but have denied themselves the comforts of your society during the long months that you have been thus laudably engaged, this auspicious termination of your pupilage, whilst it must occasion deep satisfaction, will cause them to look forward with an earnest hope to your further success in the new scenes and new duties and responsibilities, that are about to devolve upon you.

One of the first subjects of embarrassment will be the choice of a location in which to exercise your profession. At an early period in my professional career, in a conversation on this subject, with the venerable

Dr. Tilton, of Delaware—one of the three earliest graduates of the University of Pennsylvania, and for some years surgeon-general of the U. S. Army—he remarked to me: “Dr. Huston, I find that physic is like everything else; it thrives best in good ground.” In a district of country chiefly dependent on agriculture, if the land is sterile, as a general rule, the inhabitants are poor; and when that is their condition, the want of the comforts and conveniences which obtain under more favoured circumstances, greatly restricts the physician’s usefulness, besides limiting his income beyond the means of a bare subsistence. Too often this fact is not sufficiently considered by the new beginner. A very common object with the young physician is to find a field where he will have but little competition, and such situations are, for the most part, only to be had where the land is unproductive, and the population sparse—the very circumstances most to be avoided by the competent and well instructed.

Let me caution you against this common error. Your education has not been such as should make you shrink from fair competition, with the best and wisest of the profession. The poor and the afflicted will have claims upon you, which neither can nor ought to be disregarded; but I know of no principle in morals that can require a man to stultify himself by voluntarily choosing a situation, where neither professional success, nor pecuniary benefit is to be the fruit of his labours.

Why should you place yourself at a permanent dis-

advantage to avoid competition? There is much to be gained by a young physician in frequent intercourse with his more experienced brethren. "As iron sharpeneth iron, so does the countenance of a man his friend,"—or, as the motto on the seal of the Philadelphia Medical Society reads: "*Ex Collitione Scintilla,*"—the collision of the flint and the steel elicits the sparks.

A young physician, by submitting his treatment of a case to the friendly criticism of an honourable competitor of more extensive experience, will find it the most ready way to awaken reflection, and to correct any mistakes or hasty conclusions, into which he may have fallen. Occasionally, conscious error may mantle his cheek, but the regret which it will call up, will inspire caution for the future, and render him the safer and more successful practitioner. It may, perchance, happen to a young man that this open and confiding course may call down on him the sneers or ill-natured comments of an unprincipled brother; but it will be of little consequence, since it will be none the less instructive to him, whilst the candor and manliness of his conduct will be certain to secure the confidence and respect of his patient, although it may be at the expense of his traducer.

In your intercourse with neighbouring practitioners of good standing, never lose sight of the fact that they are your peers, and that whatever injustice is done to them is a wound to yourself and to your common profession. Let your deportment towards them be always

frank and magnanimous,—and be ever ready to yield a point where it involves no principle, rather than engage in controversy and contention. Let this be your conduct, and you will have nothing to apprehend, but much to gain from free competition with your professional brethren.

You have been carefully instructed in all that directly pertains to medicine, and therefore your studies in future will consist in great part in personal observation of the sick—comparing what you see with what you have read and have been told in lectures, and watching the progress of the art as disclosed in journals and the recent publications of competent observers. Medicine is a progressive science, and they who do not strive to keep pace with its onward course will inevitably fall in the rear. By this I do not mean that you should investigate all the crude theories and hypotheses that scheming minds may put forth, and still less the groundless assertions of facts that are ever and anon proclaimed by ignorant and interested individuals to excite wonder or entice the credulous victims of disease. Such is the character of nearly all the so called *improvements*, for which the world is indebted to the class of modern medical *reformers*. How different from the phenomena observed and reported by men whose character and attainments entitle them to our confidence and respect, or the rational inductions legitimately drawn from such data, promulgated by ingenuous minds! The conscientious and intelligent physician will *select* as

well as *seek* after knowledge—the laggard's post is not the place for him. The professional man who allows himself to fall behind in the race of improvement, besides the disgrace which he incurs, suffers deeply in conscience as well as in his worldly prospects. Interest, reputation, and self-respect will all urge you on to improvement in sound and practical knowledge. The man who is content to occupy an inferior position in a learned and liberal profession must expect to suffer many mortifications and disappointments in his daily progress.

But something more than a knowledge of what is ordinarily considered as constituting, strictly speaking, a medical education, is required for complete success in practice.

In a refined community, a physician is expected to be a polished gentleman, and therefore to have the *suaviter in modo*, as well as the *fortiter in re*. It is a high accomplishment to be able to adapt ourselves to the society in which we are thrown, by intelligent conversation, easy manners, and all the other graces which go to make up a character for refinement, and all this is necessary to inspire confidence in the minds of a well educated community, in the professional competency of a candidate for their patronage.

The early years of a physician's practice may be both pleasantly and profitably spent in laying a broad foundation for future usefulness and distinction, in the cultivation of the embellishments of life, and in storing his mind with the treasures of what are called the



auxiliary branches of medicine. You have already made creditable advances in the essential objects of a physician's studies. These may be profitably reviewed at your leisure, and such things as have escaped your attention supplied, and their value appreciated.

A more intimate acquaintance with "*belles lettres*," including a knowledge of those modern languages, as the French and German, which by extensive usage have become in a measure classical in our profession, is most desirable. Several branches of Natural Science, too, not embraced in the College curriculum, may be studied in vacant hours with much advantage. I will merely indicate Botany and Mineralogy, although others might be profitably included. Although but ancillary, they are highly ornamental, and of great utility in the every-day walks of life. That their successful pursuit requires much time and attention is no valid objection to a young physician, whose early professional life has so much unoccupied time, which, if not directed to some useful object, is very liable to be appropriated to ignoble purposes.

The laws of hygiene, especially in reference to the diseases most likely to occur in the particular locality where you exercise your profession, will necessarily occupy a portion of your attention, and never more appropriately than at the outset of your practice; and, as intimately connected with the subject, the consideration of the sanitary regulations proper to be adopted to guard against endemic and epidemic diseases. A physician is apt to be applied to by citizens and legis-

lators for instruction in matters relating to individual and general health, when the display of ignorance is not only embarrassing but highly inexcusable.

The course which I have sketched may seem long and irksome, and to promise little of pleasure or reward. But it will not prove so. To be able to spend pleasantly and with eventual profit, the time which must elapse before being fully engaged with strictly professional business, is a great privilege. Medicine affords, indeed, many priceless opportunities for improvement and useful occupation.

I have advised that in choosing a location, you should not select a place, which does not hold out the average prospects of eventual profit—but you are not to understand me as suggesting, that you can expect to find a spot so favoured that the people are all either wealthy or prosperous—for “*the poor*,” we are told, “*ye have always with you*,” and such are entitled to our especial regard. It was the benevolent and beautiful remark of one of the fathers in our profession, that “the poor were his best patients, for God was their pay-master.” Beside the delightful consciousness of doing good to the needy, the outgushing expression of grateful hearts for services which they cannot requite, and the interest inspired in the minds of their more fortunate neighbours who are the witnesses of your disinterested benevolence, will bring to you more than pecuniary reward.

In your duties to the sick, be ever faithful and attentive,—not backward and reluctant in rendering

your services, but always unwearied and hopeful—permitting no ordinary engagements to interfere with the punctuality of your visits. Remember that the profession of your choice imposes no common responsibility. Its duties demand the most unflinching sacrifice of time and personal convenience on the part of the physician, and such has ever been the opinion of the eminent men whose lives have been devoted to it. Who can estimate the value of life and limb when sacrificed by negligence or want of skill?

In your communications with patients and their friends, have a constant regard for truthfulness and the strictest integrity. How often do we hear a lack of candour charged on physicians,—sometimes, too, because of mistakes, rather than from a deliberate intention to mislead? To be deceived in diagnosis is a sad blunder; to err in prognosis is scarcely less unfortunate for the reputation of the professional attendant. Sometimes the apparent want of frankness proceeds from an amiable weakness, which shrinks from giving pain where the circumstances of the case do not promise a happy issue; nevertheless, such things are, if possible, to be avoided. Nothing, however good the intention, can excuse deception practised towards those who, by becoming our patients, repose in us the greatest confidence, and especially when it involves the question of recovery or death. Honour and self-respect alike demand the most perfect frankness under such trying circumstances. Caution, in the exercise of this candour, is unquestionably not only proper, but a duty,

lest the patient and his friends may be unnecessarily alarmed, and confusion and dismay be created in the minds of both, at a time when the greatest calmness and self-possession are required in order to give to the progress of the case the most favourable tendency.

—“Whatever cheerful or serene  
Supports the mind, supports the body too:  
Hence, the most vital movement mortals feel  
Is hope; the balm and life-blood of the soul;  
It pleases and it lasts.”

The practice of medicine has ever been esteemed a highly useful, and therefore commendable avocation. It has been dignified by the sanction of the wisest and best men, and rendered illustrious by the example of the learned and humane of all countries, in all periods of time:—and, furthermore, it has been hallowed by the precepts and example of the *Saviour* himself!

Go forth, then, in the faithful discharge of the duties of your noble profession; be kind and compassionate to all; and suffer nothing to interfere with the regularity of your attendance on those who invoke your aid, and the blessings of the afflicted and those who are ready to perish, will rest upon you.

# GRADUATES

OF  
JEFFERSON MEDICAL COLLEGE OF PHILADELPHIA,  
MARCH, 1856.

At a Public Commencement, held on the 8th of March, 1856, the degree of DOCTOR OF MEDICINE was conferred on the following gentlemen by the HON. J. B. SUTHERLAND, President of the Institution; after which a Charge to the Graduates was delivered by PROFESSOR ROBERT M. HUSTON.

NAME.	STATE OR COUNTRY.	SUBJECT OF THESIS.
Alexander, Charles T.	Kentucky.	Eclampsia.
Allen, James M.	Alabama.	Scarlatina.
Anderson, D. R.	South Carolina.	Pneumonia.
Banks, John L.	Virginia.	Smallpox.
Baxter, John S.	Georgia.	The Shoulder Joint.
Beall, R. L.	North Carolina.	Pneumonia.
Beeler, George (M. D.)	Kentucky.	Typhoid Fever.
Bennett, J. W.	North Carolina.	Remittent Fever.
Bloxom, John H.	Alabama.	Diagnosis.
Boucher, James H.	New York.	Remittent Fever.
Bowen, Julius M.	New York.	Medicine.
Bower, Franklin H.	Pennsylvania.	Retentio Alvina.
Bowman, John Davis.	Pennsylvania.	Acute Rheumatism.
Branch, John L.	Georgia.	{ Modus Operandi of Therapeutical Agents.
Brawner, Lucius W.	Georgia.	{ Colo-rectitis.
Brawner, William M.	Georgia.	{ Diarrhoea.
Brewster, T. Fort	Georgia.	{ The Heart.
Britton, George W.	New Jersey.	{ Responsibilities of the Young Physician.
Bruce, J. D.	North Carolina.	{ Constitutional Peculiarities of the Female.
Buck, Horatio B.	Maine.	{ Apoplexy.
Bunting, Ross R.	Pennsylvania.	{ Death.
Burroughs, Richard	Georgia.	{ Yellow Fever.
Burton, William H.	Virginia.	{ Relapsing Fever.
Butts, James A.	Georgia.	{ Scalds and Burns.
Byrd, W. B.	South Carolina.	{ Enteric Fever.
Cantrell, James Henry	Pennsylvania.	{ Hydrophobia.
Carlton, Henry H.	Georgia.	{ Hereditary Disease.
Carpenter, A. Jackson	Pennsylvania.	{ Uterine Hemorrhage.
Carswell, B. S.	Georgia.	{ Pleurodynia and Intercostal Neuralgia.
Casselberry, Jesse R.	Pennsylvania.	{ Eclampsia Gravidarum et Parturientium.
Chubb, Charles H.	Pennsylvania.	{ Anatomy of Diarthrodial Articulations.
Coad, Joseph R.	Pennsylvania.	{ Physiological Effects of Water.
Cochran, Henry King	Virginia.	{ Acute Pleurisy.
Cock, J. Walter	Texas.	{ Anæsthesia.
Cole, Lorenzo S.	Maine.	{ Entero-mesenteric Fever.
Collet, W. A.	North Carolina.	{ Typhoid Fever.
Cooper, Alfred M.	New Jersey.	{ Cataract.
Cotton, David B.	Ohio.	{ Placenta Prævia.
Crain, J. R.	Texas.	{ Scorbutus.
Crawford, William M.	Virginia.	{ Erysipelas.
Cropp, J. T.	Virginia.	{ Inguinal Hernia.
Crymes, A. C.	Alabama.	{ Diagnosis.
Cummiskey, James	Pennsylvania.	{ Auscultation and Percussion.
Cunning, Samuel B.	Georgia.	{ Acute Gastritis.

NAME.	STATE OR COUNTRY.	SUBJECT OF THESIS.
Dorsey, Frederic]	Maryland.	Croup.
Dozier, Allen S.	South Carolina.	Menstruation.
Druet, John T.	Ohio.	Scarlatina.
Dulaney, Nathaniel T.	Tennessee.	Hysteria.
Dunglison, Richard J.	Pennsylvania.	Apnoea.
Espy, Kirk	Pennsylvania.	Delirium Tremens.
Etheridge, John H.	Georgia.	Scarlatina.
Ewbank, William J.	Alabama.	Wounds.
Everett, P. Root	Ohio.	Intermittent Fever.
Farrar, George W.	Georgia.	Remittent Fever.
Fenn, M. B.	Alabama.	Reproduction.
Fisher, William	Virginia.	{ Arrestation of Traumatic Hemorrhage.
Foote, George A.	North Carolina.	Typhoid Fever.
Foote, W. W.	North Carolina.	Primary Cause of Disease.
Freeman, Ingraham B.	Nova Scotia.	Fracture.
Garland, Wilson	North Carolina.	Entero-mesenteric Fever.
Garnett, Algernon S. (M. D.)	Virginia.	Animal Heat.
Ghent, Henry C.	Alabama.	Digestion.
Gibson, John J.	Illinois.	Milk-Sickness.
Good, Samuel M.	Maryland.	Epilepsy.
Goodall, C. Parke	Virginia.	Typhoid Fever.
Gordon, David C.	Mississippi.	Dysentery.
Gorgas, Albert C.	Pennsylvania.	Anæmia.
Grant, William L.	Virginia.	Puerperal Fever.
Green, Bennett W. (M. D.)]	Virginia.	Inguinal Hernia.
Greene, J. M.	Alabama.	Feundation and Conception.
Gresham, Henry	Virginia.	{ Vomissements Opiniâtres Pendant la Grossesse.
Griesemer, John B.	Pennsylvania.	Pneumonia.
Haley, James	Mississippi.	The Profession.
Halley, H. Joseph	Virginia.	Theory of Inflammation.
Hammond, J. W.	Ohio.	Scarlatina.
Hanna, E. S.	Ohio.	Puerperal Peritonitis.
Hardesty, J. R. L.	Virginia.	Aneurism.
Hardy, William B.	Missouri.	Angeiolecitis.
Harnish, Tobias	Pennsylvania.	Chemistry of Fire.
Harris, Richard M.	Alabama.	Entero-mesenteric Fever.
Hathaway, Joseph Cushman	Massachusetts.	Cynanche Laryngea.
Herron, Levi B.	Tennessee.	Entero-mesenteric Fever.
Hickerson, James	North Carolina.	Remittent Fever.
Hildreth, Isaac F.	Ohio.	{ Inflammation of the Os and Cervix Uteri.
Hill, John	Ohio.	Secondary Treatment.
Hill, William]	Illinois.	Dysentery.
Hinkson, John F.	Barbadoes.	Tetanus.
Hobson, George Fearn]	Mississippi.	Yellow Fever.
Hoey, James W.	Pennsylvania.	Circulation of the Blood.
Holman, J. C.	Georgia.	Inflammation.
Homet, Volney	Pennsylvania.	Erysipelas.
Hooper, Philo O.	Arkansas.	Gunshot Wounds.
Hough, Thomas L.	New Jersey.	Papaver Somniferum.
Howe, William R.	Pennsylvania.	Intermittent Fever.
Hubbell, S. J.	Virginia.	Cynanche Trachealis.
Hudders, George W.	Pennsylvania.	Acute Dysentery.
Humphreys, George H.	Pennsylvania.	Fracture of the Forearm.
Humphreys, James P.	Tennessee.	Uterine Displacements.
Hunt, J. Spafford (M. D.)	Illinois.	Requisites for Medical Success.
Huntley, Oscar Hamilton	New Hampshire.	Metamorphosis of Tissue.
James, Jesse Y.]	Pennsylvania.	Dysentery.
Jenkins, John F.	Georgia.	Scarlatina.
Jennings, Napoleon B.	New Jersey.	Acute Gastritis.

NAME.	STATE OR COUNTRY.	SUBJECT OF THESIS.
Johns, Lynch D.	Virginia.	Influence of Ergot on the Uterus.
Johnson, Joe H.	Georgia.	Dysentery.
Johnson, John D.	Virginia.	Acute Peritonitis.
Jones, R. R.	Virginia.	{ Circumstances which modify Thera- peutical Indications.
Jones, U. B.	Alabama.	General Dropsy.
Jordan, William F.	Alabama.	Enterommesenteric Fever.
Keating, John L.	Georgia.	Hysteria.
Key, Thomas T.	Georgia.	Scarlatina.
Kibler, Benjamin H.	Virginia.	Cholera Infantum.
Lanier, J. D.	Alabama.	Puerperal Fever.
Laughlin, J. H.	Ohio.	Enterommesenteric Fever.
Lawson, H. M.	Georgia.	Gunshot Wounds.
Lazzel, James M.	Virginia.	Contagion of Typhoid Fever.
Le Hardy de Beaulieu, J. C.	Georgia.	Generation.
Lewis, Robert S.	Virginia.	{ Case of Erysipelas treated by him in 1855.
Long, Solomon	North Carolina.	Amenorrhœa.
Longsdorf, W. Harry	Pennsylvania.	Gunshot Wounds.
Love, John S.	Pennsylvania.	The Physician's Mission.
Lumpkin, James M.	Georgia.	Antiperiodic Agents.
Lunn, Lewis Thomas	Ohio.	Latent Pneumonia.]
Malone, Joseph H.	Georgia.	Scarlatina.
Marbourg, J. L.	Pennsylvania.	Medical Botany of Indigenous Herbs.
Mathews, Thomas P.	Virginia.	Mania a Potu.
May, David F.	Virginia.	Variola.
May, John W.	North Carolina.	Acute Dysentery.
McCartney, J. S.	Pennsylvania.	Neuralgia.
McChesney, Robert Aurelius	Virginia.	Inguinal Hernia.
McClellan, Ely	Pennsylvania.	Loose Cartilages in Joints.
McClintic, H. D.	Virginia.	Emetics.
McColleston, John Q. A.	New Hampshire.	Delirium Tremens.
McGlaughlin, Charles C.	Pennsylvania.	Scarlatina.
McKethan, J. C.	North Carolina.	Spermatorrhœa.]
McKneely, J. I.	Louisiana.	Scarlatina.
McLeod, Alexander	Alabama.	Scarlatina.
McMahan, R. W.	Ohio.	Epidemic Cholera.
McMullen, Thomas	Pennsylvania.	Amenorrhœa Suppressionis.
McNair, F. L.	Georgia.	Acute Peritonitis.
McNeil, Bernard A.	Pennsylvania.	Physiology of Digestion.
Mease, Levi A. (M. D.)	Illinois.	Nigrities Ossium.
Miller, Samuel P. H.	Virginia.	Amenorrhœa.
Mitchell, J. W.	Pennsylvania.	Scarlatina.
Mobley, Samuel Goode,	South Carolina.	Dysentery.
Moffett, Charles J.	Georgia.	Cirsocele.
Moore, J. Boardman	Virginia.	Anæsthetics.
Nash, J.	Virginia.	The Periosteum.
Nebinger, A. R.	Pennsylvania.	Scarlatina.
Nottingham, Southey S.	Virginia.	{ Diagnosis between Typhoid and Ty- phus Fevers.
Nunn, William C.	Virginia.	Vis Medicatrix Naturæ.
Pancoast, William H.	Pennsylvania.	{ The removal of Articular Cartilages from the Surfaces of Diseased Joints.
Park, Frank	Alabama.	Gunshot Wounds.
Patterson, Samuel D.	Pennsylvania.	Amputation.
Payn, Frederick G.	New York.	Porrigo Scutulata.
Perry, Joseph W.	Alabama.	Inflammation.
Philson, C. F.	South Carolina.	Menstruation.
Phister, Benjamin, Jr.	Pennsylvania.	The Language of the Tissues.
Pim, Louis T. (M. D.)	Missouri.	(Ad eudem.)
Prall, Claudius R.	New Jersey.	Typhoid Fever.
Pryor, William T.	Tennessee.	Puerperal Peritonitis.

NAME.	STATE OR COUNTRY.	SUBJECT OF THESIS.
Reber, Charles T.	Pennsylvania.	Laryngitis.
Reeves, Samuel	North Carolina.	Intermittent Fever.
Richardson, John M.	North Carolina.	Dysentery.
Richardson, Moses	Georgia.	Dysentery.
Rihl, Jacob L.	Pennsylvania.	Pneumonia.
Robertson, R. M.	Alabama.	{ Case of Gunshot Wound of the Sacrum treated by him.
Robertson, William S.	Iowa.	{ Typhoid Fever.
Robinson, Henry C.	North Carolina.	{ Fever.
Rutherford, Alexander D.	Pennsylvania.	{ Variola.
Sabine, Andrew	Ohio.	{ Milk Sickness.
Sankey, J. W.	Pennsylvania.	{ Chronic Gastritis.
Savidge, Aaron Raker	Pennsylvania.	{ Parotitis.
Saxon, C. A.	South Carolina.	{ Hernia.
Sayle, Robert	Tennessee.	{ Lobar Pneumonia.
Schiveley, George P.	Pennsylvania.	{ Rubeola.
Scott, J. Turner	Mississippi.	{ Epidemic Cholera.
Scott, Robert	Florida.	{ Pneumonia.
Selfridge, James M. (M. D.)	New York.	{ An undescribed Medicinal application of Cubebs.
Semple, James	Virginia.	{ Stricture of the Male Urethra.
Shaw, Daniel	Texas.	{ Acute Gastritis.
Simpson, Thomas W.	Maryland.	{ Epidemic Dysentery as it prevailed in Frederick Co., Maryland, in 1854.
Smith, G. Selden	Illinois.	{ Scarletina.
Smith, Hugh G.	Kentucky.	{ Puerperal Fever.
Snead, John D.	Virginia.	{ Pneumonia.
Spencer, W.	Indiana.	{ The Periodical Diseases incident to the Wabash Valley.
Stanley, Augustin O.	Georgia.	{ Pneumonia.
St. Clair, W. P.	Kentucky.	{ Dysentery.
Sternberg, James Herkimer	New York.	{ Inflammation.
Stevenson, W. Morton	Indiana.	{ Intermittent Fever.
Stewart, Jordan	Pennsylvania.	{ Therapeutic Action of Arsenic.
Strudwick, James W.	Alabama.	{ Intermittent Fever.
Stuckslager, Cyrus R.	Tennessee.	{ The Young Physician.
Sturdevant, S. Burton	Pennsylvania.	{ Erysipelas.
Sullivan, John M.	Pennsylvania.	{ Inflammation.
Taylor, Joseph Sheppard	Virginia.	{ Yellow Fever.
Terrell, J. E. G. (M. D.)	Georgia.	{ Epidemic Typhoid Fever of Georgia in 1854-5.
Thomson, George K.	Pennsylvania.	{ Measles.
Torbet, George A.	Indiana.	{ Epilepsy.
Trout, William F.	Pennsylvania.	{ Hygiene of Young Females.
Tucker, John A.	Georgia.	{ Autumnal Remittent Fever.
Tucker, William D.	Tennessee.	{ Fœtal Circulation.
Tupman, P. M.	Virginia.	{ Opium, its varieties, &c.
Van Horne, Augustus K.	Illinois.	{ Congestive Intermittent Fever.
Watson, John W.	South Carolina.	{ Epidemic Dysentery as it prevailed in South Carolina in 1853-4.
Watt, William	Texas.	{ Acute Pneumonia.
Weatherly, W. E.	Mississippi.	{ Strabismus.
Whitmire, James S. (M. D.)	Illinois.	{ The Agency of New Alkaloids in the treatment of Intermittent Fever.
Williams, Thomas F. J.	Virginia.	{ Dysentery.
Williamson, William T.	Delaware.	{ Typhoid Fever.
Wills, Alexander F.	Virginia.	{ Chronic Gastritis.
Wills, James L.	Virginia.	{ Acute Pneumonia.
Winchester, Edgar (M. D.)	Illinois.	{ Fractures.
Yates, T. Wesley (M. D.)	Mississippi.	{ Puerperal Fever.
Young, Henry N.	Mississippi.	{ Yellow Fever.

Total, 215.