

**THE TEACHING OF LARYNGOLOGY AND RHINOLOGY IN  
THE MEDICAL DEPARTMENT OF THE  
GEORGE WASHINGTON UNIVERSITY, WASHINGTON, D. C.**

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The teaching of the above mentioned subjects in the institution which I represent is divided into a didactic and clinical course of lectures. The didactic lectures are twenty-four in number. In this course of lectures a thorough grounding is given in the anatomy bearing upon this subject and these lectures are elucidated by many well prepared dry and wet specimens. It is considered essential that the student should have a recent and thorough exposition of this part of the course to quickly comprehend the lecturer in the description of the various discussed conditions of the organs under consideration. The mechanical devices necessary for the inspection, diagnosis and treatment of diseases of these parts are then explained and their method of use described. Then follows a series of lectures upon the acute and chronic catarrhal inflammation of the upper air tract. These subjects are thoroughly and carefully considered as to their etiology; pathology; symptomology; diagnosis, both simple and differential; and treatment. Lectures are also given upon the specific inflammations, as tuberculosis and syphilis. The sinus diseases are described and the more effective methods of relieving them indicated. Further lectures are given upon foreign bodies, epistaxis and lymphatic hypertrophies as affecting the naso-pharynx, fauces and lingual region. A lecture is also devoted to the subject of new growths, special attention being given to the most common varieties of neoplasm and to spurs and deflection of the nasal septum.

The clinical course is divided into an operative course, a course of clinical demonstrations and a course of clinical demonstration of the infectious diseases of the upper air tract. The operative course consists of one clinic a week throughout the year, during which the many major operations, as presented, are demonstrated before the class. These clinics are conducted at the University Hospital and at the Episcopal Eye, Ear and Throat Hospital by the chief of the teaching staff. For the purpose of clinical demonstration, the class is divided into sections, which present themselves in rotation at the dispensary services conducted by the writer at the University Hos-

pital and at the Episcopal Eye, Ear and Throat Hospital four hours a week throughout the scholastic year. At these dispensaries my clinical assistants, Drs. McKimmie, Dye and Seibert, teach the students the use of the light, the method of examination, the application of instruments, the diagnostication and treatment of diseases and the performance of the minor operations. The demonstration of infectious diseases of the upper air tract is conducted in the contagious wards at Providence Hospital, over which I have charge, with Dr. R. W. Walker as clinical assistant. In the suspect room, suspicious cases are demonstrated and differentiated. Diphtheria in its various phases is shown and the use of antitoxine demonstrated. Intubations are posted and students are admitted to witness the introduction and extraction of tubes.

The course of instruction is only open to qualified students of the fourth year. Every effort is directed to making the course as practical as possible. Diagrams, specimens and instruments are used whenever they can serve the purpose of increasing the attention and more clearly demonstrating the idea which is to be conveyed. It will be readily seen that in this course of lectures the teacher recognizes the fact that he is dealing with an undergraduate body, not with a finished product. In other words, he must appreciate the limitations of the student body as a recipient of knowledge and only give to it of thought that which it can assimilate and store up as knowledge. It is our effort not to produce specialists of laryngology and rhinology of the undergraduate, but to produce a medical graduate who has a good working knowledge of this department of medicine, a graduate who is capable of making use of instruments of precision and diagnosis, and of making diagnoses in those forms of special lesions which will come most frequently under his observation, as a young general practitioner and to endow him with the ability to recognize how far he may pursue the treatment of the condition and when he should cease to make such efforts.

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