

of them will be whether you prefer the old-fashioned napkin, or pad as it is now used. You must remember, there are lots of people yet who talk of their common sense, usually the mother of your patient ; she may be opposed to what they are pleased to call the new-fangled ideas of the doctor. Such people are dangerous, and here it is your tact will come into service, to minimize any mischief they may do. There is no question of the superiority of the pad of jute, either the carbolized or the sublimated. You will see, therefore, that sufficient jute, either carbolized or sublimated, according to the physician's wishes, is obtained, and also the gauze to enclose each pad. We will suppose now that all your preparations are complete, and the expected event has commenced. You will be able to note this by your patient complaining of perhaps slight pains in the back and over the abdomen. These pains are slight at first, and might be mistaken for flatus, but they come and go, and gradually increase, until there is no doubt left of what is going on, and you send for the accoucheur, and get things, your patient and yourself ready for the confinement. While you are waiting for the physician, you will have your sleeves rolled up above your elbows, and you will scrub your hands and forearms with soap and warm water, and nail brush, and then thoroughly immerse them in a sublimate solution of 1-2000. You can then prepare your pads and cover them with a sterilized towel, so that they may not become contaminated. The physician arrives, and after a few questions, chiefly to know when the pains first began and when the bowels were last moved, he will ask you to prepare the parts of the patient in the same way as you have treated your hands and arms. While you are doing this, he will be making his own hands and arms aseptic. After which an examination is made. You see, there has been no preliminary douche advised. In ordinary private practice it is wholly unnecessary. I admit there is some divergence of opinion upon this point, but the majority would agree, I think, upon its uselessness. It is different, however, in those cases that are sent in labor to a Maternity Hospital, cases that may have been examined, too frequently perhaps, by a careless midwife or an equally careless physician. Again, such hospital cases are only too frequently suffering from specific diseases, when not only a preliminary douche is required but a thorough bath as well. This will also hold good when your patient's confinement is a difficult one, and either manual or instrumental interference is required. Here, the usual surgical aseptic precautions must be