nails; rinse in sterile water and then in a one per cent. solution of lysol or cresoline. Keep one of these solutions in a sterile basin on the small table beside the operator, and rinse hands from time to time. Put on operating-gown. The attending obstetrician may, and the intern must, wear rubber gloves in making vaginal examinations, which shall be as few as possible.

Management of Patient in Latter Part of Labor.

Let the patient lie on her left side during the last expulsive pains, and let her turn on her back while the child is being expelled, or immediately after its delivery.

Keep one hand on fundus, press gently or irritate slightly

with finger-tips, without using force.

After separation and passage into vagina, or after thirty minutes, endeavor to express placenta by pressure on fundus.

If placenta is retained, send for attending obstetrician, but in case of emergency, such as serious hemorrhage, introduce gloved hand and extract.

In all other cases of retained placenta, place a bichloride guard over vulva, and wait until an attending obstetrician arrives, but at the same time watch for hemorrhage.

Tie cord after pulsation has nearly ceased, or in five minutes.

Examine placenta carefully, measure and weigh.

Report all injuries and tears of the soft parts to an attending obstetrician, who shall treat or instruct as to treatment.

MANAGEMENT OF PATIENT AFTER LABOR.

See that directions for the nurses are properly carried out. See that patient gets a cathartic on the evening of the day after labor.

Watch carefully the uterus for involution.

Keep patient in bed not less than nine full days.

DIRECTION FOR CASES OF EMERGENCY.

Eclampsia.

Use mouth-wedge at once.

Give hypodermic of morphine at once, half-grain, also another hypodermic, quarter-grain, in half an hour, and a third hypodermic in one hour if convulsions are not controlled in the meantime.

See that patient is kept very quiet, and protected from cold

and drafts.

If the patient becomes conscious, give calomel, 3 grains, as soon as possible, and magnesium sulphate, 2 drachms, every half-hour.