the inner surface of the thigh and of the abdominal wall will be exposed. The white cord representing the inguinal ligament lies in the bottom of the inguinal furrow. Appearing from beneath the ligament in this position, and passing to the surface of the thigh are the femoral nerve, artery, and vein, covered by an exceedingly thin layer of muscle belonging to the sartorius. The three structures may be separated from one another, and the muscle pulled away at the same time, by working lengthwise along the structures with the fine forceps. The artery must be thoroughly cleared for about 3 cm. from the inguinal ligament. Care must be exercised in this operation to avoid breaking its branches or the tributaries of the vein. The artery lies in front of the vein and is distinguishable by its smaller size, flattened or collapsed condition, and by its white coloration. The vein will be found greatly distended with blood. The nerve lies in front and partly on the lateral side of the artery.

When the femoral artery has been fully exposed, a ligature of coarse thread, previously moistened, may be passed around its base, close to the inguinal ligament. An ordinary single knot may be placed on the ligature, but must be left loose until the cannula is inserted. By grasping the bare edge of the artery at about 2 cm. from the ligament, the operator may make a V-shaped incision in the vessel with fine scissors. The tips of the scissors are directed toward the ligament. The incision must be clean-cut, and care must he taken not to cut more than halfway through the vessel. By taking up the little angular flap with the fine forceps, the cannula may be worked into the vessel and pushed well down into it beyond the inguinal ligament. The knot is then tightened by a gentle even pull on the ends of the thread. The knot

At the moment when the cannula is securely fastened into the vessel, the clamp is to be removed from the connecting tube and the fluid allowed to run in. At the beginning of the process a little care in arranging the animal will be amply rewarded by convenience in dissection. The hind limb on the side opposite the incision should be drawn backward. The front limbs should be drawn apart, so that the breast is well exposed, and held in this position by a thick cord, or, better, a stout flexible wire, passing around the back of the animal. The body should be turned slightly to the operator's left.

The animal is sufficiently embalmed in two hours. About eight animals may be kept on the table by one operator, provided he has at his disposal a sufficient number of cannulae, one for each specimen, since the first may be taken off the apparatus after the eighth has been put on.

Since small difficulties frequently occur in the process, especially in placing the cannulae and in keeping them clear of obstruction, a number of points may be mentioned which indicate to the operator just how the operation is succeeding. The entrance of the cannula into the artery, in the first place, is usually accompanied by a slight rise of blood into its tip. General muscle contractions in the recently killed animal are a safe indication of uniform flow of the fluid to these and also other parts

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