

predictions made by the assistance of the thermometer have proved correct. The following cases illustrate these remarks:—

A girl, aged 18, was admitted into Hospital. She was extremely weak, so that she had to be assisted into the ward. She had been ill eight days. During this time she had suffered from severe frontal headache and some diarrhoea. The motions were liquid. The tongue was thickly coated. The attack had commenced insidiously. There were no typhoid spots, and her abdomen was not distended. Her sister was at that time in the Hospital under treatment for typhoid fever. These circumstances were sufficient to render it highly probable that she suffered from typhoid fever. Her temperature, however, was normal, and thus our diagnosis was corrected. In two days she had so far recovered as to be able to dress and walk about the ward, and in a few days more she left the Hospital.

A girl, 22 years of age, was admitted into Hospital a month after her confinement. She felt slightly indisposed. Her appetite was good and her tongue clean. She assisted in the work of the ward. On careful examination very slight tenderness of one breast was discovered. Of this, however, she had not previously complained. Her temperature varied between 101° and 102° Fah. In a few days the breast became much enlarged, hard, red and tender, and subsequently an abscess of considerable size formed.

While advocating, however, the use of the thermometer, we by no means wish to lead our readers to the conclusion that the information it gives us enables us to disregard the remaining symptoms; for it is from these latter that the diagnosis must be mostly made. It is from these that the greatest information in respect of the treatment is obtained. Much care is necessary in the use of the thermometer. It is, therefore, advisable that we should make a few remarks respecting the method of its application.

The temperature of the body should be taken by a thermometer placed in the axilla. The patient should be in bed and undressed; otherwise the temperature of the surface of the body may be considerably below that of the internal parts. A difference of 2° , or even 3° , Fah. can easily result from the non-observance of this precaution. The patient should be in bed an hour before the temperature is taken, as this time is often regulated before the surface of the body recovers from the effects of the previous exposure. The patient should be placed diagonally on the right or left side; for if placed on their back patients are apt in their anxiety to retain the thermometer in the axilla to press the arm too firmly against the side. The axilla is thus converted into a cavity in which the bulb