

below Pouparts ligament, causes the pulsation and bruit to cease. It is not distinctly limited or circumscribed. Its long diameter, which corresponds to the axis of the limb, is $4\frac{1}{2}$ to 5 inches. Its transverse diameter is from $2\frac{1}{2}$ to 3 inches. Its direct anatomical supply cannot be made out. It is freely movable over the bone, and has no attachment to the skin. It has no bony envelope. It is of 11 years standing, and the patient says it was caused by an injury.

Drs. Stewart and Hurlburt showed a fair haired, delicate boy, aged 6 years, who is wearing Sayre's "plaster jacket" for lateral curvature of the spine. Previous to the application of the jacket he was disinclined to move about, but since it was put on he runs about freely, and his general health is improving rapidly. He says that he is free from pain and annoyance.

Dr. Bethune read a very instructive paper on typhoid fever. He gave the details of 3 cases of this disease, which he considered occupied the borderland between well marked typhoid and the so-called simple continued fever. In two of the reported cases there seemed to be but little doubt but that the fever arose spontaneously.

Dr. Towler reported an unique case which came under his observation in obstetrics lately. As a full report of this case will shortly appear in the LANCET, it will be unnecessary to give an abstract of it here.

Drs. McDonald and Graham were appointed to read papers at the next meeting of the Association, which will be held in Clinton, on the 16th April, 1878.

TARIFF OF FEES.—The following is the tariff of fees adopted by the Huron Medical Association:

Office Consultation.....	\$1 00 to \$2 00
Ordinary Consultation with another Physician	2 00 to 4 00
Ordinary Visits during the day....	1 00 to 1 50
Ordinary Visits during the Night..	1 50 to 2 00
Mileage—Any distance up to two miles	2 00
Mileage—beyond two miles	50 per mile.
For Night Visits—25 to 50 per cent additional.	
Written Opinion.....	2 00
Passing Catheter.....	2 00
Extracting Teeth....	50
Setting Fractures and Reducing Minor Dislocations.....	5 00 to 10 00
Setting Fractures and Reducing Major Dislocations.....	10 00 to 50 00

Administration of Chloroform, &c.	2 00 to 5 00
Natural Labor.....	5 00 to 10 00
Mileage over two miles.....	extra.
Difficult, Complicated or Instrumental Labors.....	10 00 to 20 00
Removal of Retained Placenta....	5 00
Speculum Examination	1 00 to 2 00

Toronto Hospital Reports.

(Reported by Wm. McKay, Trinity Medical School.)

PERFORATION OF THE STOMACH.

Jane McN—, aged 22, a native of Canada. Admitted into the Hospital on the 13th of December, 1877, complaining of pain in the stomach, also in the back of the chest and shoulders. She first noticed it one night in August last when she was running for a medical man, and attributed it at the time to the exertion. The pain extended to the limbs, and has been more or less severe. For the past two weeks she has not had much appetite and has been vomiting a great deal; was able to work until four days ago; since then she has been feeling generally worse and now feels almost unable to move. Has been perspiring freely for some days past but not previously. Has been somewhat constipated habitually, and especially so within the past five days. Has had several enemata but without effect. Tongue coated brown and mouth has been thickly coated for three or four days. Pulse is wiry and quick 152; respiration is somewhat laboured and causes pain in the posterior part of the chest. "Changes" have been scanty but quite regular every three weeks for some time past. For the past few days micturition has been painful and scalding, and urine is scanty, with a dark sediment. Has had no sleep for two nights past on account of pain. For two weeks past has felt a hardness over the stomach, and the entire abdomen is now tender, causing pain on slight pressure. Was ordered repeated turpentine enemata which relieved the lower bowel. Also stimulants to support the strength, and morphia to allay pain.

Dec. 14th.—Died at one o'clock p. m.

Dec. 15th.—Post-mortem examination shows the pericardium inflamed on the outer and left surface, and containing rather more fluid than normal. Internally it is inflamed at the base. The heart weighs $10\frac{1}{2}$ ounces. The right ventricle contained a small quantity of fluid blood, and a large well organized clot. The left ventricle is empty; the valves are normal. The auricles each contain a large firm clot extending to the ventricles. The lungs are emphysematous on the surface and espe-