

that may be at hand, and give it the stethoscope to play with, but, above all, talk to it. The soothing effect of a sympathetic voice is very apparent in dealing with children; even an infant will often show no fear so long as you talk to it.

Any instrument that it may be necessary to use should first be made a plaything, the subsequent examination being often much facilitated by so doing. It may not be out of place to mention here a little point in the use of the stethoscope which will often be found of value in the examination of infants and even of older children. In placing the end of the instrument on the chest, holding it in the usual way between the forefinger and thumb, rest the little finger and ring-finger on the skin of the chest for a few seconds before bringing the end of the stethoscope in contact with the skin. The warm fingers seem to prepare the child for the unaccustomed sensation of the hard and too often cold stethoscope. This may seem but a trifling point, but it may make just the difference between a difficult and an easy examination. Do not touch a child till it has had a good look at you. Plenty of occupation is afforded in the meantime by talking to the mother or nurse.

Then, with regard to special instruments—the thermometer, for instance, which is constantly in use, put it into the axilla and hold it there gently, with your eye on the column of mercury, talking to the child all the while, and even drawing its attention to it. If the forearm is not restrained, it will be possible to do this for a minute or two, during which you may watch the mercury quickly rise to a certain height, after which it proceeds more leisurely. If the child become restless, withdraw the instrument—the half-degree or so which the column may rise afterwards will be of little importance in drawing conclusions, whereas a fit of crying or any fright will render all further observations difficult. Some advise that the temperature should be taken in the rectum, and no doubt there is more safety from possible error by so doing; but if the medical man is making the observation himself the axilla is reliable, or it may be taken in the groin, or well down between the scrotum or labium and thigh. The latter is the place if the child be asleep, but the reading will be, probably, not quite so high as in the axilla, and still less so than in the rectum. Whenever the surface has been exposed by bathing, or otherwise, the rectal temperature is