ist Dr. Clarke has few compeers in Canada, and as an effective organizer we know of no equal, Rockwood asylum has for years stood as a model for similar institutions throughout the length and breadth of the Dominion. We congratulate Dr. Clarke on this recognition by the State. It is a promotion and we submit.

UEEN'S Medical Faculty have decided that they have no use for "drones." In future only "workers" will be allowed to remain. A student who is systematically neglecting his work, or slabbering all over his course, squeezing through a subject here and there, will have to find other quarters. With this we are in entire sympathy.

REPORT OF CASE OF CEREBRAL EMBOLISM.

CLAIM as an excuse for reporting the following case these points of interest:

- 1. Well marked hemiplegia immediately following though not dependent upon alleged violent blow to left temple.
- 2. Absence of heart murmurs to support a diagnosis of cerebral embolism.
 - 3. Autopsy revealing clot in middle cerebral artery.

On Saturday, May 20th, I was called to see Mrs. M. H., married, and about fifty years of age. Upon examination I noticed a left hemiplegia including left side of face. Pulse normal, temperature 99½°. She was stupid, but could be roused and answered a few questions quite intelligently. After her arrival at hospital a more minute examination was made and the following points noted:—Hemiplegia left-sided, complete loss of motion and sensation, ptosis of right eyelid, right pupil medium, no reaction to light, left pupil normal, tongue deflected, no aphasia, no coma. A bruise was found on left temple, also on left knee.

Beyond the fact that she was known to be an alcoholic, her history was negative.