Forearm : *Contusions :* usually heal well, even with much swelling ; 4—8;

Wounds : often complicated with injury of vessels, nerves, and tendons ; suture beneficial even years later.

Crushing : causes extensive separation of skin ; 4—12 H. ; often p.p.d.

Fractures : of both bones, 8—12 ; (ischaemic paresis of muscles from tight bandaging ; at first easy to treat ; if only noticed after removal of splints, leaves permanent effects ; interference with pronation and supination from bony adhesions, callus, or malposition, require operation ; false joint, may not cause disability ; in other cases, operation and fixation needed ;) treatment by extension in supine position.

Fractures of Ulna : in upper third, often dislocation ; 8—12 ; old neglected cases cause functional disturbance, operation and resection of head of radius or ulna.

In middle or lower third, 8—10 ; (pseudarthrosis or impaired rotation).

Fractures of Radius : in upper and middle thirds, pseudarthrosis if fragments not opposed but one supine and the other prone ; in lower thirds, Colles' Fracture forms 10 per cent of all fractures, often called fracture of the forearm ; or treated as sprained wrist ; 3 weeks fixed and 4 weeks gymnastics ; massage good, even in worst cases, but may take one to two years. (fracture of lower end of ulna may leave pain and disturbed function ; comminution of lower fragment, or fractures of carpal bones ; compound fractures, results bad ; worst results due to paralysis from tight plaster bandage).

Wrist : *Sprain :* massage, 2—4 ; with rest treatment, function disturbed for months ; heavy work might be better done than delicate hand movements.

Dislocation : rare ; usually means fractured radius.

Tenosynovitis : suppuration, 2—4 ; often relapses ; common about thumb in certain occupations, smith, carpenter, joiner, farm labourers, washerwomen.

Hand and Fingers : *Contusion and crushing :* from severe injuries, hence often protracted ; in crushing of ungual phalanx, remove nail to lesson risk of infection ; 2—4.

Sprains : 2—6 ; often lead to stiff joint with thickening ; benefited by massage.

Dislocations : rare ; Röntgen ray examination important ; 3—6 ; operation gives good results.

Fractures : bony union, 3—8 ; if soft parts are much injured and inflamed, 4—12 B.

Wounds : early treatment important ; first aid should be simple, water dressings, or iodoform gauze ; unskillful use of carbolic acid or perchloride of iron liable to produce gangrene ; infection of wounds most important, and phlegmon may occur through infection by callosities or small foreign bodies.

General considerations for assessing cases of hand injury.—The younger the person the greater the chances of adaptation ; new conditions or change of employment and ultimate improvement of condition ; heavier compensation needed for old persons. Sex : Men are better able to find work with injured hand than women, as the latter do chiefly fine hand work ; common labourers do not use fine finger movement ; skilled labour needs especially high compensation, if the injured finger is used in special occupation ; women require special compensation for deformity ; previous injury, if not already compensated for, should increase the amount of disability. Estimation of the loss of power of hand or arm to be tested quantitatively, the angle to which flexion is possible and the force in various parts to be tested and compared with the opposite hand ; the special effects of injury to nerves, as seen in the claw hand from beginning of the ulna nerve with the loss of