

the pus being black and thin in character, the first superior bicuspid, black, dead and abscessed, the second bicuspid, and wisdom tooth, vital and in good condition, the first and second molars missing and with gums healed, the mucous membrane hypertrophied, congested, and of purple hue; the color around the wisdom tooth normal. The probe passed in the wound where the teeth had been extracted passed back into the throat and on either side of the sequestrum; all the bone on this side of the jaw, anterior to the second bicuspid was destroyed, although the walls of the antrum were not penetrated. The left nares was nearly closed, due to a deflection of the septum, with a large nasal spur, and pressure on the periosteum in the region of the inferior turbinate, with a well defined line of demarkation formed around the sequestrum.

Operation—The patient was given ether by Dr. J. G. McCarthy and I was assisted by Dr. Beers; Mr. X.'s physician being present. The dead bicuspid was extracted, a denuder passed between the dead and living bone to thoroughly free the periosteum; then with a heavy pair of forceps the sequestrum was firmly grasped, gradually loosened and removed; this was followed by a fierce gush of blood, fully one pint in all, the vessels having disgorged themselves in about a minute, when the entire surface of the wound was curetted, granulations and debris removed, the hæmorrhage being checked by hot water, the wound was sterilized with hydrogen peroxide and firmly packed with iodoform gauze. Time of operation ten minutes: time between first inhalation of ether until patient was conscious, twenty minutes. Dr. Craik expressed himself as being highly gratified with the operation, and thanked me for allowing him to see it, and said it was the cleanest operation he had ever seen on the jaw, and the only one without cutting through the face. The patient made rapid recovery, no fever or untoward symptoms following the operation.

The case was redressed on second day, and on Dr. Beers' strong recommendation, I used for the first time "Pheno-Banum" a preparation composed of carbolic acid, Balsams of Peru, Tolu and Benzoin, which was supplied by Dr. Henry Ievers, and found it to be of much value in retaining the dressing in place. The case was seen by me for three days in succession, and redressed with the same preparation, the effect of which was very marked, as healthy granulation had set up under its influence on the third day, there being no pain or inflammation when I left the case in charge of Dr. Beers, who continued the same treatment; the wound rapidly healed, new tissue filling in except in a very small space between gum and nares, through which the probe could be passed, the bone having been very nicely reproduced.

On May 29th, 1896, Mr. X. came to my office in New York for correction of nasal stenosis; I took away a large spur from the left