

2. A girl playing around the table accidentally pulled the table cloth and upset a pot of hot tea over her chest. One of the company present frantically pulled the child's clothes off, undoubtedly with good intentions, but the result was the skin was torn off the chest, necessitating her detention for three months in the hospital, where her life was despaired of for some time. In after life, when she became a mother, she was unable to suckle her offspring, in consequence of those injuries preventing the proper development of the breast.

3. Two cyclists were riding along a greasy road, when one had a side slip, throwing him beneath the wheels of a heavy van, which passed over one of his thighs, completely smashing the bone; the broken ends of the bone severing the main artery. His friend sent a messenger to the nearest doctor, about 30 yards away, and stood by his friend, seeing his life's blood ebbing away. Upon the arrival of the medical man life was pronounced extinct.

4. A man with a weakness of the lungs, whilst stooping down broke a blood-vessel, the blood gushed out in great quantities. His colleagues picked him up and carried him to the nearest doctor, but he had not proceeded many yards when he died in their arms.

2. A little child was sitting in a baby chair in front of the fire, when the mother, going to the fire for some purpose, accidentally caught the handle of a saucepan of boiling water, and tipped it over both feet and legs of the child. A first aid who happened to be present, treated the injuries as instructed. After a few days in bed and a little convalescence, the doctor discharged the child none the worse for its misadventure.

3. Father and son were driving in an automobile, and while attempting to make a short turn the back part of the machine struck a telegraph post with great force, pitching both occupants into the roadway. The father sustained a compound fracture—that is, a fracture where the bone has been driven through the skin—in addition to this the main artery was severed. The son, who had a knowledge of first aid, applied the proper treatment, stopped the bleeding, and conveyed him to the hospital, where he was complimented upon saving his father's life.

4. A lady was knocked down by a passing vehicle. The wheel passed over her chest, breaking several ribs, and the broken ends penetrated the lungs. Blood gushed out of her mouth. A first aider, happening to be on the scene, treated her under first aid rules; sent for a doctor, who ordered her removal to hospital by ambulance, where she ultimately recovered.

Let us take another form of comparison to show the value of this knowledge. Some little time back, a man was knocked down by a street car, causing a simple fracture of the thigh bone, that is to say, the bone only was broken, and none of the parts adjacent thereto, such as the tissues or arteries were injured. The bystanders, with the idea of getting the poor fellow out of the way of passing traffic, lifted him to a perpendicular position, with the weight of his body on the broken leg, thereby causing the broken bone to become further displaced, and to pierce the femoral, or main artery of the thigh. As a result of this well meant but ignorant action on the part of the public, the man died from loss of blood before the services of a medical man could be obtained. Had the driver or conductor of the street car in question, been instructed in the principles of first aid, and made use of such knowledge, the poor fellow's life could easily have been saved, and the company they were serving thereby saved heavy claims for damages.

The case of possible deaths from drowning demands special attention. Such may occur from the upsetting of a boat, a careless step by the river side, on the dock or harbor quay. In many of these there may be willing hands to save, but few possess sufficient knowledge to quickly restore animation and consciousness. Ignorant and careless handling of the supposed victim by drowning has often unwittingly completed the work of suffocation by immersion, and one can

realize what this means in this country, where an average of 700 drowning accidents occur every year.

First aid is a branch of work entirely different from that of the surgeon. It is special, and differs from the special training which every student receives. The medical student is taught to use all the best and most approved methods, while the first aid student is taught to use whatever is nearest to hand in the most scientific way possible. He must make a bandage out of a necktie or a handkerchief. He must improvise a tourniquet from a belt or brace; for splints he must utilize a stick, a rifle, an umbrella or folded newspapers, and construct a stretcher out of a couple of broomhandles and coats.

The officials of the C.P.R. centre of the St. John Ambulance Association have for some time past realized the value of this movement to their employees and to themselves, as is seen from the fact that they are now organizing first aid classes amongst all classes of employees throughout the railway system, so that no matter where an accident may happen, there you will find an ambulance man able and



S. A. Gidlow,
General Organizing Secretary, St. John Ambulance
Association, C.P.R.

willing to render instant attention to persons suffering from accident or sudden sickness. The cost of instruction and the books and first aid material necessary, are furnished by the management free of charge. A lecturer is provided, who gives one lecture a week to the men until the full course of five lectures has been given. The syllabus of instruction is as follows:

FIRST LECTURE.—Preliminary remarks, objects of instruction, etc. A brief description of the human skeleton, bones, joints, and the muscular system. Signs, symptoms and treatment of fractures, dislocations, sprains and strains. The triangular bandage and its application.

SECOND LECTURE.—The heart and blood vessels. The circulation of the blood. The general direction of the main arteries, indicating the points where the circulation may be arrested by digital pressure or by the application of the tourniquet or by other means. The difference between arterial, venous and capillary bleeding, and the various extemporary means of arresting it. The triangular bandage and its application.

THIRD LECTURE.—A brief description of

the nervous system. First aid to persons suffering from shock or collapse after injury, injury to the brain, collapse from drink, epilepsy, fainting, hysteria, sunstroke, electric shock, effects of lightning, and convulsions in children. First aid in cases of frost-bite, burns, or scalds, injury by vitriol throwing, wounds, bites of animals, stings of insects. What to do when the dress catches fire. The triangular bandage and its application.

FOURTH LECTURE.—A brief description of the organs and mechanism of respiration. The immediate treatment of the apparently drowned, or otherwise suffocated, artificial respiration; treatment for choking. First aid to those poisoned. The immediate first aid treatment of injuries to the internal organs, and of those suffering from internal hemorrhage. Foreign bodies in the eye, ear and nose.

FIFTH LECTURE, (FOR MALES ONLY).—Improvised method of lifting and carrying the sick or injured. Methods of lifting and carrying the sick or injured on stretchers. The conveyance of such by rail or in vehicles.

FIFTH LECTURE, (FOR FEMALES ONLY).—Preparation for reception of accident cases. Means of lifting and carrying. Preparations of bed. Removing the clothes. Preparations for surgeon.

As soon as ever the lectures are finished, the men are taken in hand by one of the company's ambulance instructors, whose duty it is to teach the practical work, such as the proper application of bandages and splints, to various parts of body and lifting and carrying the injured on stretchers, etc. The reader may not think the placing of a man on a stretcher of much importance, but it is really a very important part of the work, as a great deal of damage may be done in placing a man on a stretcher.

No man is allowed to give instruction in the practical work before he is fully qualified, and before any such man is fully qualified to act as instructor, he must hold the certificate, voucher, and medallion of the St. John Ambulance Association, and these honors can only be obtained after three years constant application to first aid work, during which time he must attend three courses of lectures, and undergo three examinations in first aid, each examination more exacting than the previous one, before he obtains the medallion, or full qualifying badge of the Association. Before the instructor allows his class to go up for examination, the members of the class are expected to answer a series of test questions, and to do the practical work in connection with them. Below are given a few of each grades of questions, which the first aid student is expected to answer:

FIRST TEST.—What is first aid to the injured. What are signs? What are symptoms? What results of injuries must receive the first attention? What steps must be taken beyond the actual treatment of injury? How would you remove clothing when necessary? What must the first aid student not do? What is elementary anatomy? What is elementary physiology? Etc. etc. etc.

SECOND TEST.—What organs are concerned in the circulation of the blood? Trace the circulation of the blood through the organs and lungs. How many kinds of hemorrhage are there? In what way should arterial hemorrhage be controlled? What is a tourniquet? Describe the various main arteries? What is a fracture? State the general signs and symptoms that may be present in cases of fracture. What apparatus may be necessary for the treatment of fracture? How may splints and bandages be improvised? Give the general rules for the treatment of fractures, etc.

THIRD TEST.—State the general treatment for burns and scalds. What steps should be taken when a woman's dress takes fire? State the signs, symptoms and treatment for frost bite. State the