

region two parchmented areas of skin, each $\frac{1}{2}$ in. diameter, with hæmorrhages on the surface. No other external marks of violence. No appearance resembling a burn.

Head—Extensive ecchymosis beneath the scalp in occipital region, extending down towards the neck. The extravasated blood is completely coagulated.

Extending directly downwards from a point one inch below the left half of the lambdoidal suture to the *foramen magnum* is a fracture involving both tables of the occipital bone. Near the lower end of the fracture, a branch fracture, confined to the inner table, but splintering it in places, extends to the petrous bone on the right side. The broken edges of the bone are covered with blood.

Between the dura and the occipital bone, on the left side, is a solid dark blood clot as large as a hen's egg, the origin of which is seen to be a laceration in the posterior wall of the left lateral sinus. A blood clot the size of a walnut lies external to the pia on the inferior surface of the left lobe of the cerebellum. A little soft clot and fluid blood is seen over the base of the brain, extending anteriorly to the optic chiasm. There is superficial laceration of the under surface of both orbital lobes, with numerous hæmorrhagic points. Brain substance elsewhere normal. Ventricles of brain free from blood. No blood in 4th ventricle. Vessels not atheromatous.

Blood in heart chiefly fluid *but coagulated upon exposure*. Organs appear healthy and free from ecchymosis.

Verdict—Accidental death.

In this case the medico-legal question to be determined was whether the fall was caused by an electric shock. I stated that there was no evidence of a burn such as would result from contact with a "live" wire of high voltage, and that if a slight shock received from some part of the car had caused the fall, there was no post-mortem evidence of it.

CASE 50.—*Homicide from Effects of a Blow—Fracture of Bone—Meningitis.*—J. H., a boy aged 16, was stated to be struck on the head by another boy, with a lacrosse stick; fell over and became unconscious, with oozing of serum from the right ear. Symptoms of meningitis set in on the seventh day, and death occurred ten days after the injury.

Autopsy, made jointly with Dr. George Villeneuve, 32 hours after death, on June 19th, 1893.

Incision made by undertakers for injecting the body; in the right brachial artery and in peritoneum.

No external evidences of contusion or o'her injury about the head. A yellowish dried crust in right auditory meatus. A few small ecchymoses of the skin over right thigh, left knee and right iliac crest.

On removing scalp, a narrow line of ecchymosis extends for 4 inches horizontally along the lower border of the right parietal bone, averaging $\frac{1}{2}$ inch in width, and situated in the subcutaneous tissue, immediately