On entrance, patient looked pale and somewhat cyanosed—toxic. Some fulness in upper half of abdomen. Slight tenderness to pressure over whole abdomen, but most tender spot was two inches below and to the right of the umbilicus. Urine high colored, but otherwise normal.

OPERATION, August 13th, 5 p.m.—Median incision below umbilicus. Small amount of free serous fluid on entering cavity. Exploring hand found collapsed coils of small bowel in the pelvis. On attempting to deliver these the collapsed portion could not be re-discovered. The sigmoid being then examined was found to contain air, but was not disturbed. Nothing else found to explain obstruction. Other abdominal organs normal to palpation. Inasmuch as one of the coils of small bowel was somewhat distended and congested, the trouble was concluded to be due to a volvulus of the small intestine reduced during manipulations in delivering.

September 7th. Discharged. Uninterrupted recovery. Bowels, after operation, moved freely with purgatives and enemata, but not without.