

The hand had been crushed by the rollers of a printing press. The index finger was completely smashed, and the integument entirely torn from the dorsal surface of the hand, while that on the palmar surface was badly lacerated. The palmar arch was not injured, and there appeared to have been no undue amount of hemorrhage.

On pinching the fingers sensitiveness was found to be present in all but the first. This was then amputated, two vessels were ligatured, $\frac{1}{4}$ gr. morphia given, and the patient conveyed to bed; the hand elevated, and cold water dressings applied.

Oct. 12th.—Doing well; slight oozing.

Oct. 13th.—Wound dressed, pulse good, tongue foul.

Oct. 14th.—Appetite poor; tongue foul.

Oct. 16th.—Complains of a great deal of pain in the hand. To have dressings of boiled linseed oil and carbolic acid.

Oct. 17th.—Very restless, and in much pain, a poultice applied to the back of the hand; 20 grs. chloral hydrate to be taken as required.

Oct. 18th.—To-night patient became delirious on the following morning was quiet, but at night he became worse.

Oct. 22.—Doing well; delirium all gone; has slept well each night, middle finger unhealthy looking.

Oct. 30th.—The middle finger is quite gangrenous and black, and was consequently removed, otherwise doing well.

Nov. 2nd.—granulations looking flabby, to be dressed with *Lolio Rubra*.

Dec. 19th.—The granulations being in a healthy condition, three grafts were put upon the dorsal surface, and a narrow strip of plaster put over them, and ordered to remain for 24 hours undisturbed.

Dec. 21.—All the grafts took, and the surface is healing up nicely.

Discharged Dec. 25th, 1872.

Case III. TREPHINING.—M. D. æt. 22, admitted into the Hospital Oct. 22nd, 1872, under Dr. Bethune's care. He had received a kick from a horse on the left side of the head, near the junction of the frontal and parietal bones. The right side was paralyzed, the tongue could be protruded, but could not be moved to the right side.