

ECLAMPSIA BEFORE, DURING, OR AFTER LABOR.

Remove false teeth, if present.

Prevent patient from injuring herself; use several pillows as buffers.

Prevent her from biting her tongue, by covering an ordinary clothes-pin or large spoon handle with gauze, and holding it between the teeth during convulsion.

Darken room if possible, and keep the patient very quiet.

If there is much blood or mucus in mouth and throat, turn patient on her side, with head in a position to allow liquids to run out of the mouth.

HEMORRHAGE BEFORE OR DURING LABOR.

Keep patient absolutely quiet; elevate the foot of the bed.

THE NEW-BORN BABE.

Weigh the baby at once, anoint with albolene, examine the cord for bleeding, the head for meningocele, etc., the back for spina bifida, etc., the limbs for talipes and other deformities, the whole body for birth-marks, etc.; notice if babe turns blue, and examine for imperforate anus.

Bathe the babe as soon as convenient, and thereafter every day; apply dry dressing with boric acid over cord, remove this dressing and apply a new one after each bath.

If babe weighs less than five pounds, anoint with albolene and wrap in flannel or cotton wool, or both, taking care to keep it very warm until ordered by the attending obstetrician to wash and dress it.

Let babe nurse every six hours during first day, every four hours during second day, and every two hours for twenty minutes during third day and thereafter, except at night, when he should nurse at half-past ten, half-past four, and in morning, half-past eight.

Take the temperature twice every day.

Weigh baby before each daily bath.

DIRECTIONS FOR HOUSE PHYSICIAN.

Examine each patient on day of admission, especially as to condition of heart, lungs, and kidneys, and also general health, and record.

If there is any nasal or vaginal discharge, have a bacteriological examination made, and record the results.

Examine by abdominal palpation for position and presenta-