from the body various impurities circulating in the blood and lymph channel, and to flush out the kidneys. In other instances it may be used to supply the body with fluid when liquids cannot be swallowed or retained.

It is not safe to infuse into the intercellular spaces a greater quantity of liquid than one drachm to each pound of body weight in each fifteen minutes, for if this amount is exceeded the tissues become thoroughly saturated, drowned, so to speak, kidneys and skin being unable to exercte the liquid fast enough. (Hare.)

There is no excuse for not using it, since boiled water can be had almost anywhere. One teaspoonful of common table salt added to a pint of water will make about the right proportion, at least near enough for all practical purposes. Of course, where there is plenty of time, it should be made up with distilled water, and should be six-tenths of one per cent. in strength. If it is not possible to get distilled water, filtered boiled water will answer every purpose, and this is most generally used. One should not hesitate, if the sodium chloride cannot be had, to use plain boiled water in case of extreme emergency.

The temperature should be from 112 to 115 deg. Fahrenheit. If in a hurry, the temperature can be estimated by pouring some of the solution over the hand. It should feel comfortably hot, for some allowance must be made for the loss of heat in passing through the apparatus.

While many contrivances can be used for infusion or transfusion, the most satisfactory is Kelley's infusion apparatus, which is well known, simple and easily sterilized by hoiling.

The best method of administering salt solution is by the rectum, and an untrained person can administer the solution in this way: The ordinary rectal tube and the irrigating can are generally used, but a male catheter, enema point or piece of gum tubing inserted well up into the rectum will answer every purpose. The fluid should be allowed to flow in slowly. A pint to a pint and a half, or even two pints, may be considered the proper amount of the solution. It is well to turn the patient on the left side and elevate the hips, causing the fluid to run up into the sigmoid. On the operating table the Trendelenburg position is most favorable, allowing the fluid to run well up in the colon. If the patient is restless and cannot retain an enema, or when an enema cannot be given, the infusion should be reso 'ed to.

It is cetter to infuse than to transfuse, for the reason that