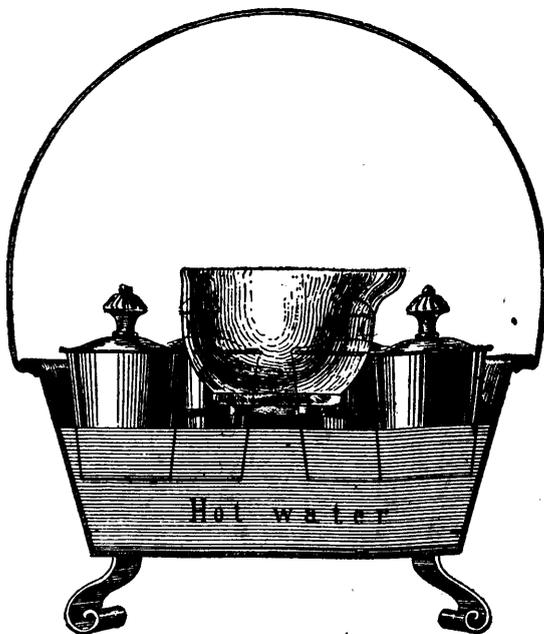
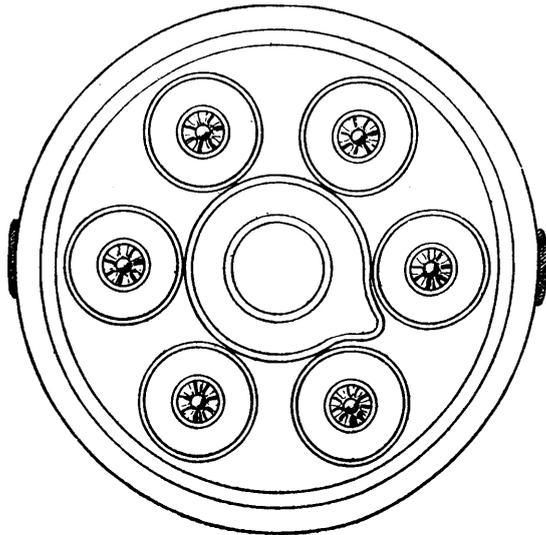


desired, and counting the number of cylinders or bulbs of air required to fill it.

By observing this precaution there is no danger of over-distending the bladder, as the exact degree of distension is determined by the number of cylinders of air introduced.



FIGURES 2 AND 3.

The external urethral orifice and surrounding parts are cleansed with soap and water

and bichloride solution (1 to 1000) by the nurse, after which the bladder is catheterized and the patient placed in the knee-breast posture, carefully protected by a sheet.

The patient should lie with chest flat on the table and her arms hanging over the sides, in order to make the bladder distend perfectly when the speculum is introduced.

A small pledget of cotton saturated with a twenty-per cent. solution of cocaine is inserted into the urethra and allowed to remain for 3 minutes, when the number ten vesical speculum can be introduced without giving the patient great pain. Frequently the patient complains of no discomfort until the end of the speculum impinges upon the inflamed mucous membrane.

Before the patient is placed in position, the gelatine, which has been previously sterilized, is immersed in a water bath and melted. For ordinary use in private practice or in a limited hospital service it is not necessary to have the elaborate apparatus here figured, but a small metallic ointment box is sufficient for all practical purposes.

The temperature of the water bath should be only sufficient to reduce the gelatine to the consistency of cold olive oil, as in this state it will adhere better to the balloon, which can be more easily rolled into the form of a suppository.

Before preparing the balloon for introduction into the bladder the hands should be disinfected. The bag is rolled between the thumb and forefingers in the same way as a hand-made cigarette. Into the concavity which naturally forms when the balloon is completely collapsed the gelatine is poured to overflowing, and the balloon slowly rolled, more gelatine being added until it assumes the form of a suppository well covered with the semi-fluid gelatine. It is now clasped with a long, slender crane's bill forceps, Fig. 4, and inserted into the bladder and released.