

likely find something under the point at which this patient locates the pain—in the back of his head. I have seen him every day for four or five days, and he puts his finger upon the same spot each time in indicating the seat of pain. No pain has been manifested at any other point, except the small tender spot where you observe a small nodule near the site of the original injury. We sometimes have attacks of epilepsy from irritation from cicatrices. The only question in my mind is whether or not removal of this tender spot in front would have any effect upon the case. The condition of the arm is still improving, and if the nerve centre of the arm had been cut through, it seems to me there would not have been such marked improvement.

I am inclined to think that the best thing to do is to remove this little nodule in front first, and if that fails to relieve him, then trephine over the

painful point at the back part of the skull.

Worried Wife—"Oh, doctor: what has detained you? I sent for you at 12 o'clock; my husband is very low indeed." Doctor (complacently)—"Yes, I received your call then, but as I had an engagement with another patient in this neighborhood at 6 o'clock, I thought I'd make one job of it and kill two birds with one stone."—*Judge.*

Dr. Plaintork—"Madame, your husband must have eaten something that has disagreed with him to bring on this gastric attack." Mrs. Murray Hill—"That's not possible. He dined at home yesterday, and I cooked the dinner myself." Dr. Plaintork—"Ah, indeed! That explains it. I will have to use my stomach pump."—*Texas Siftings.*

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