

from the front platform of a car at Harlem and had his right foot crushed by the wheel. His friends carried him to a surgeon in the neighborhood, who placed an ordinary bandage on the limb, without any compress over the vessels. In bringing the man to the hospital, the rough jolting of the carriage set the wound bleeding, and by the time he reached his destination he was apparently lifeless. The vessels were tied, and stimulants administered, but he never rallied. Death occurred six hours after his admission. His injuries, independent of the hæmorrhage, might, indeed, have terminated his life; still the chances would have been in his favor if a compress had been applied to the limb to prevent bleeding. The fact that such a thing was not done showed either culpable negligence or deplorable ignorance. It is through such treatment that the percentage of deaths from accidents is increased to an unnecessary degree. To remedy these evils, a thorough knowledge of the treatment of accidents should be impressed on the memory as indelibly as are the letters of the alphabet. Nor should this knowledge be entirely confined to medical colleges and professional men. Non-professionals, with a moderate share of common-sense, might learn to control hæmorrhage, relieve syncope, extract foreign bodies, resuscitate the drowned, and administer an antidote in cases of poisoning. Such knowledge would assist, rather than retard, the labor and usefulness of professional persons.

The varieties of hæmorrhage constitute a large and important class of emergencies. Loss of blood, when profuse, is always attended with danger, and necessitates immediate treatment.

The term "hæmorrhage" is applied to a flow of blood