

explained to the young man, and his parents, the necessity of an operation, to which they readily consented.

I continued the liquor potassæ and hyoscyamus for a few days; gave a few aperients, composed of hyd. chlorid and pulvis rhei; consulted with some of my medical friends, who agreed with me in the immediate propriety of removing the calculus by the lateral operation. We appointed an hour; I invited as many students as the room would conveniently hold, placed the patient on the table, applied the bandages to the hands and feet, and with the much esteemed and valuable assistance of the medical men present, after putting the patient under the influence of chloroform, proceeded with the operation. On introducing the forceps, I seized the stone in the region of the bladder indicated by the sound, and, after careful lateral motion and traction, succeeded in extracting whole a calculus about the size and shape of a sheep's kidney, weighing three ounces, less fourteen grains; externally composed of oxalate of lime, covered with small transparent octahedral crystals over four-fifths of its surface, which portion of the stone was encysted, the remaining fifth, or free surface, appeared to have been worn perfectly smooth by the action of the opposite wall of the bladder.

After the operation, the ligatures were removed and the patient placed in bed. There was no catheter introduced into the wound, through which the urine flowed for a few days, after which it resumed its old channel, and in a fortnight he was convalescent.

Since the operation, his health has rapidly improved. He has become stout, and has a ruddy complexion. He is so altered in appearance that his former friends would scarcely know him.

Montreal, 18 November, 1855.

ART. XX.—*Administration of Chloroform.* By DR. STEANE, Lachine.

The object of this communication is to recommend a method for ensuring some safety in the administration of chloroform. In the view of most practitioners, the great danger to be avoided, is an over-dose of the chloroform, and suffocation from deficient ingress of atmospheric air to the lungs; and its present mode of administration does not well ensure against this; for, unlike other medicines of powerful efficacy, we cannot give a quantity of it to the patient, and say it is the particular dose, and hardly be able to depend on it sufficiently and safely; for it must be breathed, and therefore mixed with an irregular quantity of atmospheric air, losing much of the vapor during expiration and nearly