

a consultation must be held before the performance of any important operation.

The patient, Andrew Anderson, a Norwegian sailor, had been admitted on the 5th October, in typhoid fever of a very severe type, from which he had recovered, and had begun to move about the wards, and, it was supposed that from imprudently exposing himself to drafts, laryngitis had supervened, terminating in œdema. Croton oil liniment had been applied externally, and he had been put under mercury.

On examination, his countenance exhibited great anxiety, and was bathed in perspiration; respiration was most laboured and distressing, but Dr. Roy, the house surgeon, stated that it was not so much so as it had been. Dr. Landry expressed the opinion of his colleagues, that the mercury was evidently beginning to take effect, and, as the disease appeared to have extended to the bronchial tubes, that it would be well to defer the operation, in the hope that it might be unnecessary. It would not have been proper for me to have expressed my opinion, though, I must admit that, educated as I had been in the views so strongly expressed by the late Mr. Liston, on the impropriety of operating, when the disease had extended to the cavity of the chest, I concurred in the views of Dr. Landry.

It was agreed that the operation should not be then proceeded with, but that, in the event of emergency, Dr. Rowand should be immediately sent for. On returning home with Dr. Rowand, I remarked to him that I saw that he did not approve of the decision, and he admitted that such was the case.

Next forenoon Dr. Rowand notified me that he was about to proceed to the hospital to operate, and invited me to accompany him. On our arrival we found a frightful change had taken place; the man's countenance was livid; respiration was performed with the greatest difficulty; the pulse so weak and rapid as to be with difficulty counted; the hands were livid and cold, and on his brow there was the cold sweat of death; in short, he was almost moribund. Dr. Jackson was present, and, concurring in the propriety of even now operating, Dr. Rowand at once made the necessary arrangements, when, unexpectedly, the patient expressed opposition. An interpreter, however, being at hand, the nature of the operation was explained to him in his native language, when he signified his acquiescence.

He was placed in the proper position, his shoulders being supported by Dr. Roy. I held his right hand, having my fingers on the pulse. The first incisions were made, and Dr. Rowand had just divided the first ring, when Dr. Roy exclaimed, "He is dead." At the same