busy practitioner. We receive a large number of British and American medical journals, from which we intend to make careful and judicious selections. This we will be able to do in a more satisfactory manner than heretofore, as our list of exchanges is large and varied, and the space at our disposal much increased.

Our reviews and notices of books will be carefully attended to.

The future numbers of the *Canada Lancet* will be issued *promptly* on the first of every month.

With a view to increase our circulation, a specimen copy of the *Canada Lancet* will be sent to every medical man in the Dominion, who is not already a subscriber, whose name we can obtain. A polite note will be enclosed in each, with a form of application attached, and we trust that all those who have the welfare of the profession at heart will do us the kindness to send their names.

AXILLARY THERMOMETER, USES OF.

The exact temperature of the skin can only be obtained by means of the thermometer, the sensation communicated to the hand being very unreliable. The instrument, however, requires to be especially adapted for that purpose. The bulb of the instrument is placed in the axilla and the arm folded across the chest. It is allowed to remain ten or fifteen minutes, and the temperature read off before being removed. The natural temperature of the body is about 98° or 99° F. but in disease it may rise to 110° F If the thermometer does not indicate abnormal heat, there is no febrile condition present, so that the physician may be materially assisted in his diagnosis in otherwise doubtful cases. When the thermometer indicates 100° or 101° F. the fever is of a mild type, when 105° very severe, and if it rises to 108°, 109° or 110° death is almost certain. The temperature has been found very high in fatal cases of scarlatina and tetanus. When convalescence begins the temperature gradually declines, but in some cases there are remarkable fluctuations, as in typhoid fever, and hence the thermometer should be used twice a day.