was a superior first molar, which had been previously treated and made in an antiseptic condition. After applying the rubber dam, the temporary filling removed, and the canals dried with absorbent cotton, they were pumped full of alcohol, which was volatilized. The root canals were then thoroughly dried with Wooley's Root Canal Drier (similar to Evan's Root Drier), which was heated to a red heat, the copper plate being well carried up to the apex of the root. This operation was repeated several times until there was no steaming, which indicates the absence of moisture.

The root canals were next pumped full of eucalyptol, the excess was wiped out, the remainder volatilized by the use of a hot-air instrument. The roots were then filled with chlora-percha and gutta-percha cones.

The operator used glycerine as a lubricator in the search of difficult root canals, claiming it enables one to enter a canal quite easily that was to all intent and purposes closed. He also claimed by this root treatment that any substance remaining in the tubuli is rendered antiseptic and inert, but care must be taken not to anæsthetize the membrane beyond the apical foramen, for by so doing will have lost the indication by which the canals are known to be filled, and may force enough through the apex to cause further trouble.

I hold that if the root is in a healthy condition when you fill, that it is possible to have the chlora-percha go through and still be tolerated by the tissue. I saw a case where the sack had been pumped full and never given trouble.

Dr. Russel, of Keener, N.H., gave a very interesting clinic on porcelain inlay. He had a labial cavity in the right superior incisor. The cavity was prepared as nearly cylindrical as possible, then one of Russel's porcelain cylinders was chosen of the proper shade and slightly larger than the cavity. It was then cut off at a handy length for a mandrel and ground to almost the size of the cavity, by having the mandrel revolving in the engine, at the same time being ground on the lathe, rendering the inlay perfectly round. It was then placed to the cavity and revolved at a speed in the engine, grinding itself perfectly into the cavity. It was then cut off slightly flush, set in the cavity with cement, allowed to harden thoroughly and then polished down even with the tooth. The result was a beautiful inlay scarcely perceptible.

This operation was of special interest to me as a porcelain worker. I could not recommend any system more accurate, but it is so very limited in its uses, as few labial cavities conform in the cylindrical shape, or could be made to without sacrificing a large amount of solid tooth structure, as nine-tenths of the labial cavities are of a kidney shape, at the junction of the cementum and enamel and mostly of receded gums, in which case the "Land"