

If this is done carefully, it may be done with perfect impunity, without adding anything to the discomfort of the patient during the healing of the gums, and hastening the absorption and improving the arch.

Use as few instruments as possible—an axiom which will apply with advantage to every operative and mechanical operation in Dentistry. If the patient will submit to lancing before inhaling the anæsthetic, it may be proper to lance around roots difficult to grasp; but if not, the haste with which the operation has to be performed where there are a large number to extract, demands economy of time, and lancing is not always advisable for cases where roots predominate. We use the bayonet-shaped alveoli forceps for the upper jaw, without changing, and with care it subserves the use of the lancet. First, clear away all roots with the alveoli forceps, if a change of instrument is required.

As soon as the patient is thoroughly under the influence of the anæsthetic, commence by extracting the teeth of the inferior jaw first, on either side, beginning at the roots farthest back, or at the dens sapientiæ. Extract the molars and bicuspid first, leaving the cuspids and incisors to the last.

A small bit of sponge at hand is useful to sop up the blood which may hide the roots from view. The importance of extracting the lower teeth first is obvious, as the blood flowing down from the extracted uppers, if the latter are first removed, would interfere greatly with the proper adaptation of the instrument, and some roots might be overlooked.

There are various precautions necessary, such as providing for hæmorrhage, vomiting, syncope, &c. Patients with long legs should be so placed as to put them out of kicking distance of your windows, lest they should take a notion to stretch them into the glass.

AN ESSAY,

Read by THOMAS ROWE, *before a meeting of the Dental Profession of Ontario, in the City of Toronto, Jan. 21, 1869.*

THE ANATOMY, PHYSIOLOGY, PATHOLOGY AND TREATMENT OF THE DENTAL PULP.

Of the organs with which the Dental Surgeon has to deal, there is none of greater importance to both patient and practitioner.

And I think I may safely say, there is not an organ in the entire