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arly eys. It is important if chronic or frequently recurring. Pain in the abdomen—colic—may be renal, biliary, or due to an attack of appendicitis. Endeavor to locate the site of the pain, and give the number, date, duration and severity of the attacks.

Liver and Spleen.—The Liver can be examined while the applicant is standing for any evidence of tenderness or bulging. The situation is marked by percussion, usually it does not extend below the ribs. On the opposite side the spleen can be outlined.

Rectum.—If any suspicion should exist that disease of the Rectum was present, it should be examined after questioning to determine, if possible, whether hemorrhoids, cancer, or fistula exist; this part not being usually examined unless there seems to be good reason to do so.

Rupture.—If the applicant has a Kupture the Medical Examiner should satisfy himself that a suitable truss is worn; if the rupture is said to be cured, a careful examination should be made to verify this.

Genito-Urinary Organs.—The determination of the presence or absence of disease in these organs, which tend to shorten life, deserves special consideration at the hands of Medical Examiners in Life Assurance cases. If there is any suspicion of disease of Penis or Testicles, these parts should be carefully examined. Many Companies, in order to reach trustworthy conclusions, lay down guides or rules for conducting an examination of the urine in a uniform Statistics tend to show that even with all care a large proportion of unprofitable risks are through disease of the kidneys not discovered at the time of acceptance by the This Company requires that the specimen of urine shall be passed in the presence of the Examiner, or that the Examiner shall give some evidence or satisfactory assurance that the specimen was that of the applicant. Applicants suffering from albumen or sugar have now and then fraudulently substituted normal urine for their own, and although