the great cornu and that arising from the body was an interval where the lingual artery was uncovered by muscle. In some of the lower animals each portion is a separate muscle, which might explain the deficiency.

ANTERIOR BELLY OF THE OMO HYOID INSERTED INTO THE LOWER JAW.

In this case the anterior belly of the omo hyoid blended with the sterno-hyoid, and, passing up over the hyoid bone (to which it gave a few fibres) and the digastric muscle, was inserted into the lower jaw a little to the left of the symphysis. (See Fig. 1, *A*). Mc Whinnie (*London Medical Gazette*, 1846) mentions a similar case. I have once before seen this unusual insertion of omo hyoid. It occurred on both sides of the same subject.

TWO ANTERIOR BELLIES TO THE DIGASTRIC.

This occurred in the same subject and on the same side as the above-mentioned omo hyoid variation. The anterior belly divided into two, one of which was inserted into the body of the hyoid bone, and the other was inserted, as usual, into the lower jaw. The posterior belly ended in a tendinous raphé, from each side of which muscular fibres arose, those from the upper part being inserted into the lower jaw, and those from the lower passing down to the hyoid bone. There was no distinct binding down to the hyoid bone by fascia of the tendon. (See Fig. 1, *D*).

MUSCULAR SLIP FROM THE MASTOID PROCESS TO THE SERRATUS POSTICUS SUPERIOR.

This slip was noted as occurring on the left side of a muscular male subject. It arose from the mastoid process beneath the sterno-mastoid, passed over the splenius capitis and colli, and ended by a tendinous expansion in the upper edge of the serratus posticus superior an inch from the