

dull and glassy than the right. Mr. G. said he could merely distinguish light with it. Soon after Dr. Harlow arrived, Mr. Gage walked up stairs, with little or no assistance, and laid down upon a bed, when Dr. H. made a thorough examination of the wounds, passing the whole length of his fore-finger into the superior opening, without difficulty; and my impression is, that he did the same with the inferior one; but of that I am not absolutely certain; after this we proceeded to dress the wounds in the manner described by Dr. H. in the Journal. During the time occupied in dressing, Mr. G. vomited two or three times fully as freely as before. All this time Mr. G. was perfectly conscious, answering all questions, and calling his friends by name as they came into the room. I did not see the bar that night, but saw it the next day after it was washed."

Dr. Harlow's account of his first visit to the patient, and of the subsequent symptoms is here appended:—"Being absent, I did not arrive at the scene of the accident until near six o'clock, p.m. You will excuse me for remarking that the picture presented was, to one unaccustomed to military surgery, truly terrific; but the patient bore his sufferings with heroic firmness. He recognized me at once, and said he hoped he was not much hurt. He seemed to be perfectly conscious, but was getting exhausted from the hæmorrhage, which was very profuse both externally and internally, the blood finding its way into the stomach, which rejected it as often as every 15 or 20 minutes; pulse 60, and regular. His person and the bed on which he was laid were literally one gore of blood. Assisted by my friend Dr. Williams, of Proctorsville, who was first called to the patient, we proceeded to dress the wounds. From their appearance, the fragments of bone being uplifted and the brain protruding, it was evident that the fracture was occasioned by some force acting from below upward. The scalp was shaven, the coagula removed, together with three small triangular pieces of the cranium; and in searching to ascertain if there were other foreign bodies there, I passed in the index finger its whole length, without the least resistance, in the direction of the wound in the cheek, which received the other finger in like manner. A portion

of the anterior superior angle of each parietal bone, and a semi-circular piece of the frontal bone were fractured, leaving a circular opening of about three and a half inches in diameter. This examination, and the appearance of the iron which was found some rods distant smeared with brain, together with the testimony of the workmen, and of the patient himself, who was still sufficiently conscious to say that 'the iron struck his head and passed through,' was considered at the time sufficiently conclusive to show not only the nature of the accident but the manner in which it occurred. I have been asked why I did not pass a probe through the entire extent of the wound at the time. I think no surgeon of discretion would have upheld me in the trial of such a fool-hardy experiment, in the risk of disturbing lacerated vessels, from which the hæmorrhage was near being stanchied, and thereby rupturing the attenuated thread, by which the sufferer still held to life. You will excuse me for being thus particular, inasmuch as I am aware that the nature of the injury has been seriously questioned by many medical men for whom I entertain a very high respect. The spiculæ of bone having been taken away, a portion of the brain, which hung by a pedicle, was removed, the larger pieces of bone replaced, the lacerated scalp was brought together as near as possible, and retained by adhesive straps, excepting at the posterior angle, and over this a simple dressing—compress, night-cap and roller. The wound in the face was left patulous, covered only by a simple dressing. The hands and forearms were both deeply burned nearly to the elbows, which were dressed, and the patient was left with the head elevated, and the attendants requested to keep him in that position. Ten p.m. same evening.—The dressings are saturated with blood, but the hæmorrhage appears to be abating; has vomited twice only since being dressed; sensorial powers remain as yet unimpaired; says he does not wish to see his friends, as he shall be at work in a day or two; tells where they live, their names, &c.; pulse 65; constant agitation of the lower extremities. 14th.—7 a.m. Has slept some; appears to be in pain; speaks with difficulty; tumescence of the face considerable, and increasing; pulse 70; knows his friends, and is