piles. The last was a herniotomy in which he did a McEwen operation by twisting the sac up with a catgut suture, and, making a depression for it under the internal oblique at upper end of wound, held it there by a stitch through the skin with the end of the catgut suture he employed for the sac.

At the Ruptured and Crippled Hospital Coley in his usual skilful manner did several !terniotomies (Bassini's). He told me that he and Bull had done 525 Bassini's with only 5 relapses—three in adults and two in children. One can see a great variety of orthopoedic work at this institution also. At the N. Y. School of Clin. Medicine, Valentine illustrated his method of urethral irrigation for gonorrhoea. The operation is simple and the procedure apparently harmless. He uses 1—3000 permanganate for ant. urethra and 1—6000 for post urethra and bladder. He considers that many cases of gonorrhoea, which are apparently cured, but which suddenly break out again, are due to foci in the vesiculae seminales and prostate, and for this condition he illustrated massage of these structures.

At the Post Graduate Lloyd did two herniotomies (Bassini) and three appendicitis operations. In the latter he sweeps the finger towards the caput from the outer side and hooks up the appendix. He treats the stump by incising the serous coat $\frac{1}{2}$ inch from base before division and folds it back like a sleeve. Then, taking two sutures through the mucous membrane to hold the appendix up, he cuts it off and touches the lumen with ac. carbol. Next he tightens these two sutures and inverts the folded back peritoneum by Lambert's suture, and to make all secure folds the whole of the base by Lambert's suture back into the caecum. At the same institution Phelps did an excision of the hip for tubercular trouble and exhibited a child on whom he had operated the week before for congenital dislocation.

At the City of New York rhospital Stimson did two operations for appendicitis in the usual manner and a sarcoma of the nasal mucous membrane, which had penetrated the super. maxilla and orbital plate.

At the Polyclinic, Tuttle used Kelly's rectal tube by which an ulcer high up in the sigmoid could be clearly seen, as well as the entire mucous membrane of that portion, and Van Arsdale