

The upper end of the incision reached to within two inches of the umbilicus. The tumor being thus fully exposed, and some very slight hemorrhage being arrested, Well's trochar was introduced and about a pint of clear fluid escaped from a small cyst. The cutting tube was then protruded and a larger cyst entered and emptied. This process was repeated again and again till there was sufficient space gained to admit the hand, when the tumor was found to be extensively adherent throughout its upper and back part, which adhesions were, however, easily broken up, and then with the hand placed on the posterior part of the growth, the trochar was inserted into cyst after cyst till the tumor was sufficiently reduced to permit its protrusion from the cavity of the abdomen. The left fallopian tube was greatly elongated, and enlarged to the size of the little finger, and lay over the anterior face of the cyst looking very much like a portion of adherent intestine.

The pedicle, which was about two inches long and two and a half inches broad, was secured by a strong hempen ligature, made of three plies of fine shoemakers' thread, well carbolized. The pedicle was divided in the middle, and each half tied separately, when the cyst was separated by dividing the pedicle across, about one half inch above the ligatures. Slight hemorrhage from the fallopian artery took place on account of the ligatures of the pedicle becoming slack from the change of position of the tissues after division had been accomplished. Fresh ligatures were applied and cut off short near the knot, when all hemorrhage ceased. The cut surface was carbolized with the strongest fluid carbohc acid, its surface sponged to remove any excess of the liquid and the pedicle then returned to the abdominal cavity. The right ovary and uterus were found to be quite healthy, the cavity of the abdomen was carefully examined for clots or foreign bodies, well sponged out with carbolized sponges and carbolized water, and then the incision was closed by five deep sutures of the same material as the ligatures, and the superficial surface secured by four horsehair sutures, also well carbolized.

The wound was then covered with two layers of carbolized lint (previously well dried), and secured by three broad straps of adhesive plaster, passed from side to side.

A thick layer of cotton wool was placed over the whole abdomen, and secured by a broad flannel bandage, pretty firmly applied.

The patient was then placed in bed, and warmly covered up.

The quantity of fluid removed was 28 lbs.

The fluid in some of the cysts was of a pale straw color, and in others clear as crystal.

The weight of the solid cyst was $2\frac{1}{2}$ lbs., making with the fluid a total of $30\frac{1}{2}$ lbs.

The patient rallied well and gradually returned to consciousness, and complained of a feeling of soreness at region of wound. Also, had some slight chills about 7 p. m., when I placed her upon $\frac{1}{4}$ drop of Tr Aconite every half hour. Her temperature reached 99.4° the evening of operation, 99.6° on 3rd day, the same on evening of 5th day, after which it was normal. The pulse went as high as 96 on 1st, 2nd and 3rd days, after which it gradually decreased, and after 6th day continued normal.

Sept. 3rd.—Slept quietly at intervals during the night. Has less pain in abdomen. Skin acting well. Passed flatus several times during the day. Sleeps quietly by spells; frequent escapes of flatus, but complains of nausea this morning; skin rather dry. Nausea is attributed to taking some extract of beef. In the afternoon vomited freely, after which felt quite easy and comfortable. Tongue dry, has slight brown fur in centre.

Sept. 4th.—Early this morning, 4 a. m., vomited a quantity of sour fluid and bile, which gave much relief. Skin acting well—urine, which has been drawn off every 6 hours, is for first time somewhat scanty and high colored. Vomited again this a. m. at 9 o'clock. Discontinued Aconite as skin acts well, and gave Lithia water and Soda and Bismuth; also, milk and lime water. No pain anywhere. Dressed the wound and found had united by first intention (and without formation of pus), except at two points where the skin had accidentally been brought in contact with the subjacent tissue of the opposite side of wound. Tongue moist and less furred.

5th—All going well; sleeps soundly; flatus troubles by times, but is freely passed. Tongue cleaner. During afternoon husband raised a disturbance in the sick room, in consequence of which I found patient suffering from violent agitation, distressed with flatus, nausea and vomiting; gave lithia water and remained till agitation had subsided, and ordered perfect quiet. Husband repeated his antics in the