5. The research of family antecedents will he considered as an important element of greatest moment in the younger applicants.

6. In cases of remote anteceding attacks of appendicitis, the examiner must carefully investigate the existence of signs which might reveal the slightest awakening of the old appendicitis.

7. Every case of chronic and of recurring appendicitis must be rejected.—*Med. Examiner.*

TYPES OF ENTRANCE AND EXIT WOUNDS AS SEEN IN THE SOUTH AFRICAN CAMPAIGN.

C. S. Wallace: Typical Wounds caused by Normal Small-Bore Bullets.—A perfect, underformed, small-bore bullet entering at right angles to the surface makes, as a rule, a round hole slightly smaller than the bullet itself. Around this aperture is a narrow ring about one-sixth of an inch in breadth, from which the cuticle has been removed, and which appears some hours after the receipt of the injury as a red border to the wound. A little later, this ring, as well as the actual hole, is covered with a dark scab, which consequently is larger than the hole which it covers. The bullet in its passage inwards pushes in front of it the skin, which is thus brought into contact with the sides of the bullet and bruised by it. The projectile, then passing on, stretches and perforates the skin, and gains admission through a hole which is smaller than the actual diameter of the bullet.

Typical Wounds Caused by Normal Small-Bore Bullets.—When the axis of flight of the bullet is inclined at less than a right angle to the surface, the wound in the skin becomes oval, and the breach of surface, therefore, is slightly bigger. When the angle is very oblique the bullet traverses a certain track of skin, depressing it more and more until actual perforation takes place. The skin, therefore, is bruised and the cuticle destroyed for some distance from the aperture of entrance. This damaged area of skin shows as a red raw place when the wound is recent. The shape of the contused area is roughly that of an isosceles triangle with a rounded apex, and the sides are slightly bent outwards. The base is formed by the perforation in the skin. The breadth is often more than that of the actual bullet. Bullets passing out through the skin obliquely make an oval aperture of exit, and this, if the line of flight is greatly inclined to the skin, is