

cavity that the operator scooped it out in handfuls, and the floor of the operating theatre was rather suggestive of a slaughter-house. Both patients were subsequently reported as doing well. Harris operated on two cases of gall stones. In the first case a single stone was found at the juncture of the duct with the duodenum, and in order to remove it, it was necessary to open the duodenum. This patient died a day or two subsequent to the operation. In the second case a number of stones were found in the ducts. These were worked back to the gall-bladder, and removed in this way through a cholecystotomy wound. Patient made a good recovery.

A case of tumor of the cerebellum was diagnosed by Church and operated on by Fenger. The operation proved the diagnosis to have been correct, but the result was fatal.

Senn's clinics, given three times a week at Rush Medical College, constitute one of the most striking features of surgical teaching in Chicago. These clinics generally last for four or five hours or more. The first part of the time is taken up with exhibiting patients who have been previously treated, and in making the diagnosis of fresh cases. A short time before the clinic commences a certain number of students are given cases to examine and diagnose. These students then come before the class along with the patients, read their histories, and give their diagnoses, being questioned and criticized by Dr. Senn, who at the same time makes running comments and remarks to the rest of the class. It struck me as being a very valuable method of clinical instruction.

The latter part of the time is taken up with operating. The amphitheatre, where the operations are performed, is very large; but Senn describes his operations so graphically as he goes along that one almost imagines he sees details that are scarcely visible to the eye. Senn has rather an unpleasant habit of occasionally raising and lowering the voice, which is at times quite aggravating. He has, however, a good command of clear, vigorous English, and must be possessed of a very robust constitution to stand the strain of operating and lecturing for hours at a time in the manner he does. He still advocates very strongly the treatment of tubercular joint troubles by the injection of an emulsion of iodoform in glycerine, and I should imagine, from what I saw, that this class of cases constitute quite a large share of his hospital practice.

Another man who struck me as being an excellent clinical teacher is Van Hook, of the North-Western. His classes are not very large and he makes no pretensions at oratory, but he has a very clear and pleasant manner of describing his work as he operates. He is probably best known outside of Chicago by his work on the ureter.

Many new methods of diagnosing abdominal troubles have been introduced during the last few years. Among these are more care-