

duty to anatomy has ended. This should not be the case. For after all, what is the knowledge of any subject that a student obtains during his college days, or how long will this knowledge abide with him unless he constantly adds and renews it. What is his knowledge of pathology, of obstetrics, of surgery, of the practice of medicine? Why barely enough to enable the student to successfully prosecute his work in post college days. No man who has any regard for his position will rest content with the knowledge he has obtained during his college life. He provides himself with text books and journals, with apparatus where necessary, that his learning may be increased and refined. Now, what about anatomy? How many medical graduates ever take the slightest interest in this subject, or if it be studied at all the duty is performed in a way that yields no practical results. This want of anatomical knowledge is often painfully manifest in imperfect and incorrect diagnosis, in the dread and hesitation evoked by the slightest surgical operation, in the humiliation of medical witnesses. It would be of little value to point out this condition of affairs were there no remedy available. It is because there is a remedy, and that too within the reach of every physician, that I mention the subject at all. For far less than he has expended in loading his shelves with often times useless medical works, he can supply himself with a complete anatomical outfit. To be studied at all, the work should be entirely practical, by actual dissection on the human cadaver. For this purpose no elaborate preparations are necessary. I do not anticipate there would be much difficulty in securing a subject. To any one who has not forgotten his student days the matter is quite possible. But if he does not wish to renew his youth in this respect his object may be obtained legally and easily through the Inspector of Anatomy, one of whom should be appointed for each municipality. If such is not the case the physician has himself to blame.

A mixture containing 6 parts alcohol, 1 glycerine, 1 carbolic acid, is injected into the aorta or femoral artery. The body should then be placed in a fitting receptacle. A well-jointed wooden box, the size of an ordinary coffin, and lined with zinc will answer the purpose admirably. The cost will be trifling. Into this should be placed a few gallons of methyl alcohol. After about four days or a week the body should be injected with a mixture of shellac and alcohol, sufficient alcohol to take up the shellac. This mixture may be colored with a carmine solution. An ordinary large size hard rubber syringe will suffice for injecting purposes. When prepared in this way the tissues