twenty-two calibre revolver up to the modern artillery of to-day. Of smaller missles, the solid steel rifle ball has the greatest penetrating force. Have seen one fired into a railroad rail from the side. At the same time, unless penetrating a vital part or organ, it does the least damage to the human organism. Wound track usually closes instantly beltind it. Not considering heavier projectiles, the soft-nosed, steel-jacketed rifle ball is the most dangerous missle fired; it always produces a fearful injury, especially a very ragged wound at point of exit.

This was a soft-nosed, steel-jacketed rifle ball, thirty-thirty calibre Winchester. The injuries caused by the different projectiles vary all the way from the types of wounds just mentioned, up to the crushing, lacerating wounds caused by shot and shell from artillery.

There are several points about the symptoms, diagnosis and prognosis of gun shot wounds of the chest that are extremely interesting. Death speedily follows a shot through the heart. Cases are on record where men have made a short run before falling even after being shot through the heart. Wounds of the larger vessels of the thorax are very speedily fatal.

Sometimes there is very little external hemorrhage in such cases. Wounds to the left of the median line of the thorax are far more dangerous to life, as a general rule, because of the presence of the heart and great vessels.

There has recently been in Jaurez a remarkable case. A government official shot himself twice, from before backwards, on the left side, yet did not die. Both balls went through his body and out of his back on the left side. In general wounds from side to side of the body are more dangerous than those from before backwards. We must bear in mind the arch of the diaphragm and consider the possibility of injury of the liver, in the case of a wound from before backward, low down on the right side. On the left side, a wound in a similiar situation may injure the stomach.

These anatomical facts are of the greatest importance when we are considering the diagnosis, prognosis and treatment of a gun-shot wound of the chest. General peritonitis, following injury of the liver or stomach, is what, on more than one occasion, I have seen the post-mortem reveal.

Given a simple through and through wound of the chest, from before backwards, then we must consider the danger of death from shock, or later from septic pneumonia. Now let us consider shortly the treatment of gun-shot wounds of the chest. If perforation of the stomach is suspected, an abdominal section should at once be done, and, any opening found carefully closed; the parts being thoroughly cleaned by irriga-