20th, and by 22nd Dec. had skinned over. The limb was during treatment kept on a posterior splint. This splint was removed during Christmas week and movements of the limb begun. In a few days complete restoration of movement in the knee joint was effected, and to-day this joint is as supple as the other. Whether the epiphyseal growing line has been permanently injured cannot yet be decided with certainty. There is at present writing (April 15th) no appreciable difference in length of limbs. The child has since thrived well, weighing 16 lbs. when 5 months old.

It is evident from the deep-seated character of the infection in both finger and tibia that the infecting bacteria were carried by blood. It is difficult to account for the blood infection however in such an infant. There are two possible sources, the umbilical cord and the intestine, and the former seems to be the more probable despite the fact that the cord healed well. The favorable termination is exceedingly gratifying.

W. T. CONNELL.

OBITUARY.

R. C. de St. Remy, '02, died on April 7th in St. Vincent Hospital, New York, with a recurrence of his old heart trouble (mitral incompetence following rheumatism), after an illness of several weeks. Dr. St. Remy was one of Queen's honor graduates, winning the house surgeoncy in the General Hospital as result of his final examinations. The past year he has been a house surgeon in the Manhattan Eye and Ear Hospital, New York. Never strong physically, Dr. St. Remy won the affection of his classmates by his quiet, cheerful manner, his patience and happiness of disposition. To his relatives the Quarterly extends most sincere sympathy.