1. Have the patient sit or lie down. It is a matter of common observation that the heart beat is less forceful in the recumbent position and hence less blood is forced from the wound. In the erect position loss of blood soon tells on the brain which is situated so high. Loss of consciousness quickly follows.

2. Elevate the part. Blood, like water, will not run up hill and in following this well known principle of physics the force of gravity is acting against the force of the heart and less blood escapes. In varicose bleeding the flow is often completely checked by this method.

3. Expose the wound. Remove the clothing over the wound as rapidly as possible so that you may see the extent of the injury and how best to treat it.

4. At once apply pressure to stop the hemorrhage.

(a) If the wound is small apply pressure with the fingers directly on the wound. Then after cleansing, substitute for the fingers a pad of dressing and a bandage applied tightly enough to stop the bleeding.

(b) If the wound is large and the method just mentioned fails to secure the cessation of hemorrhage pressure must be applied on the "pressure point." By this I mean the point in the vicinity, and in the case of arteries on the side of the wound towards the heart, where the severed vessel can be pinched and the flow of blood through it stopped. For example, if the upper part of the thigh is severely wounded, apply pressure with one thumb over the other at the middle of the fold of the groin where the femoral artery comes out over the bone. In this situation the hold must never be relaxed as there is no appliance which will properly hold the artery in this place. The same is true of the carotid artery in the neck. Pressure must be made against the back-bone behind, and it is necessary to apply pressure above and below the wound because of colateral circulation. By this is meant that the blood from the sound side of the neck is forced across to the other side and comes from the end of the cut artery farthest from the heart. The wrist and hand is another situation where the collateral circulation must be borne in mind. If the upper arm is cut pressure is made on the brachial artery at the inner side of the biceps muscle as it lies next the bone. One could go on and ennumerate the various places where pressure could be made to stop hemorrhage, but it is sufficient for the purpose of this paper to say that nearly every region of the body has its pressure point or points, and it is the duty of every student of First Aid to put himself in possession of the knowledge of where these points are. Having found the pressure points with the fingers, and the bleed-