

swallowed a piece of bone; a sense of choking and dyspnœa ensued, which, after a time, subsided in a measure. The patient could not rest at night, and he expectorated quantities of mucus, and was unable to swallow anything excepting the smallest quantity of liquid, which produced considerable pain and uneasiness. The suffering continued, varying in intensity, until the fifth day, and even then he was of opinion that no bone had been swallowed, but laboured under the idea that a piece of meat had been arrested in its progress to the stomach. The difficulty of being able to know exactly what had passed into the œsophagus, is accounted for by the absence of many teeth, and a consequent deficiency in mastication. A probang mounted with a bit of sponge was passed into the œsophagus to its lowest part, where the foreign material was evidently lodged. Being so near the stomach I endeavoured to free the passage by forcing the obstructing material into the proper *digester*. Failing in this respect, the whale-bone probe, with double blunt hook, was introduced, and removed several small pieces of meat. The pain, irritation, and difficulty of swallowing still continued,

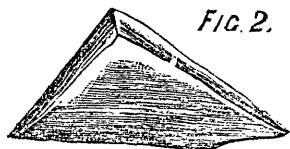


FIG. 2.

associated with most marked prostration. The hook was again passed, fully a distance of 14 inches, and fastened to what, I could not say; however considerable force was necessary to remove it, and that being accomplished, the bone (of which a representation is given full size, Fig. 2) appeared. After

a few days' uneasiness, all irritation subsided, and recovery took place without any apparent difficulty.

Ottawa, October 8th, 1862.

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ART. XLVIII.—*Examination by the Medical Board U. S. A. for the Reserve or Staff Surgeoncy.*

*To the Editor of the British American Journal.*

DEAR SIR,—Please find appended an account of the examination to be undergone by a candidate wishing to join the U. S. army as reserve or staff surgeon. I send my examination as a sample of the rest. It may interest your readers to know upon what plan the examinations are conducted. You will readily admit that they are pretty rigid, and I am sure nothing can be more thorough and at the same time more fair. The examinations are conducted by a Board, presided over by Drs. Allen and Brinton; and if they do not insure to the U. S. A. a good corps of surgeons, it will be from no lack on their part, as they are indefatigable in their exertions to place the medical department of the Army upon a high footing. Those who pass this board receive their commissions as Staff or Reserve Surgeons, are not obliged to follow the regiment, but they take charge of the various hospitals, and are sent for to the field when any battle takes place or is expected. The amount of practice they therefore get is more than if attached to a regiment, and the opportunities for acquiring surgery are innumerable. I shall write now and then any case which might be of more than ordinary interest.

I am, yours truly,

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