quite dark and congested in appearance, and also a small part of upper end. Between the fibrous capsule and kidney proper was about an ounce of blood-stained serum. I explored the kidney and its pelvis for stone, but could find none. I then concluded to split the kidney, and if nothing else were found, to unite the parts with mattress sutures. On secondary consideration, however, fearing this might not relieve the hematuria, and confident that, even if patient were able to stand it, no further operative procedure would be permitted, I removed the kidney. Operation took one hour and twenty minutes. Patient made practically an uneventful recovery.

The 24 hours previous to operation, patient voided only twelve ounces of urine, and the same quantity in the 24 hours subsequent to operation. The next 24 hours fifteen ounces were passed. The urine gradually increased in quantity, until at the end of three weeks patient was passing from twenty-five to thirty-two ounces in 24 hours. Temperature never went above 100, excepting upon evening of third day it reached 100 4-5. The nurse telephoned on the ninth day that the dressings had suddenly become soaked with blood. I removed dressings and found that a rather severe venous oozing had occurred from wound, which was controlled by packing with gauze, saturated with adrenalin solution. This oozing, however, was quite free for two or three days. I can't account for this hemorrhage so long after operation. For several days after operation there was quite a considerable amount of albumen in urine. This, however, gradually disappeared, and in four weeks' time the urine was normal, as follows: S. G. 1022. Faintly acid. No albumen. No sugar. No test made for quantity of urea. Apparently normal from the S. G. Heavy precipitate, which dissolved on heating.

Microscopically:—Amorphous urates. A few calcium oxalate crystals. No casts, pus, nor blood.

I forwarded kidney to Detroit Clinical Laboratory, and received the following report:

LABORATORY REPORT NO. 1051.

Physician—J. P. Kennedy. Patient—Miss K. Date Received—Nov. 10, 1906. Date Reported—Nov. 21, 1906. Character of Specimen—Kidney.

The kidney shows an unusual amount of fat in the pelvis, extending into the calyces, and an obscuring of the normal markings, especially of the pyramids. There is no noticeable abnor-