

said to him; during night was uneasy, moaning, and throwing the bed clothes off."

Next morning, December 10th, his condition had not improved. He was still as conscious as previously, but his respirations were more rapid, heavy and sonorous, about 36 per minute, his pulse 90, temperature 101 deg. During the day his condition did not improve, and the next day he was worse, temperature 102 deg.; pulse 106, weak and intermittent; respiration, 44, heavy, difficult and stertorous. In the afternoon he had involuntary movements of urine and feces, was unconscious, markedly cyanosed, breathing stertorously and with marked rattle in throat, head inclined to right side, pulse very weak and thready. Dr. Baines, who had charge of him, advised me to bleed him, which I did, taking away some eight or ten ounces with difficulty. Stimulants, strychnia, digitalis and ether were used with the result that the cyanosis somewhat lessened.

I may say that during the afternoon his wife was present, and she gave us the complete history, which we heard for the first time. She stated that his waggon was struck by the street car and he was pitched out. We have since, however, learned from the inquest, etc., that he was found with his heels in the waggon and his head on the pavement. He was assisted to his feet, and he stood at his horse's head and quieted it while his effects were being gotten together. She also stated that he walked from King Street to Bloor Street, a distance of some miles, went to his home and undressed himself, and retired. During the night the paralysis came on.

Dr. Fotheringham, passing through the ward, saw him and thought he should be seen by a surgeon. Dr. Peters being in the building, I asked him to see him, and after examining him and hearing his history, above related, he thought there was evidence of meningeal hemorrhage and advised trephining. I consulted with Dr. Baines, who concurred. Dr. Peters operated upon him at 6.40. He cut a horse-shoe flap over the right temporal region, disclosing considerable sub-aponeurotic hemorrhage, with clotting. The trephine was then introduced over the upper right Rolandic area, and the bottom being removed, clotted blood was discovered. Dr. Peters put in his finger, but could not find the dura mater. He began pulling out the clotted material, and again was dissatisfied with the result. A further trephining was done an inch and a half below and behind the right parietal eminence, again disclosing clotted material. After a time the clotted material, weighing eight or ten ounces, was removed, and resulted from the following condition: The dura