

dilute chloralum and the parts brought carefully together with five sutches, lint wet with the chloralum and a bandage applied, and the patient removed to his bed. Pulse, 88, respiration free, slow and easy.

9 P.M.—Pulse, 80; skin cool, slight discharge of grumous fluid from wound, the peculiar color being due to the action of the chloralum on the blood; has had milk, tea and toast.

4th.—Skin cool; pulse, 76; tongue moist and slightly coated, slept well, evacuations natural. Both stumps look well and the patient very comfortable.

6th.—The left stump has again assumed its former healthy action. No unfavorable symptoms except a little formation of matter at the outer angle of both stumps. Injected lotion into the small cavities and applied pads over them, and the bandages as before. General health excellent.

9th.—Both stumps dressed and alternate sutches cut, but not removed; some pus still bagging above left internal ankle.

11th.—As above. Removed the two ligatures and the remaining sutches from right stump. The amount of pus over left inner ankle diminished. General health excellent.

12th.—Discharge from left inner ankle less and from right inner angle commenced, as it did in the left, but extending more backwards towards division of tendo-Achillis. Most of the line of incision healed, but considerable thickening at outer angle. The pad and bandage on the left having materially assisted in diminishing the discharge from it and modelling the surface of the stump, I applied the same treatment to the right, having first injected the sac of the abscess with some of Liston's lotion. The patient having suffered from diarrhœa during the night, I ordered him some chalk mixture and chlorodyne, with rice diet.

13th.—Improving steadily, quantity of discharge less and parts less sensitive. Bowels still slightly relaxed. Gave a couple of lead and opium pills.

14th.—Three weeks to day since operation was performed on left foot, cicatrization good over the central four-fifths of the wound. The corners alone open. As the calcaneum has not yet united to the tibia, to obtain their consolidation applied a bandage from above the centre of the calf of the leg down behind the os calcis, thence forwards and upwards along the front of the tibia as high as the point of departure—a portion of the ends being left free for use, as will be