side, the inter-transverse ligament. There was dislocation between the articular surfaces of 6th and 7th on the right side. The articular processes on the left side were not dislocated, but there was a fracture extending through the base of the transverse process of the 7th; this part of the vertebra was broken into three pieces. The only union between the 6th and 7th was by means of the anterior common ligament, which was intact. The distance between the vertebræ was such that the finger could be introduced easily between the two bones. The cord was evenly compressed, and hence the paralysis was symmetrical. The pia mater was injected a couple of inches up from the seat of dislocation, and it was observed downwards for about three inches (as far as the end of bones which were taken out), but it probably extended further down than this. There were a couple of small clots beneath the dura mater, at the seat of injury. The grey matter of the cord was softened and very red. This redness extended up and down for about three-quarters of an inch. The white matter was softened but not congested.

Lungs.—The posterior and dependent parts are extentensively congested. Anterior portion not much congested; crepitant.

Heart.—About 2½ oz. sluid in pericardium; two patches of lymph on visceral layer; none on parietal. Left ventricle hypertrophied. None of cavities distended with blood. A large ante-mortem clot in right ventricle adherent to the walls. All valves sufficient. An atheromatous nodule size of a small pea at the bottom of one of sinuses of Valsalva.

Spleen and liver congested. Kidneys especially congested. The marks where the needles had entered the bowels, visible; slight redness round each aperture, and in one place where several apertures had been made as the needle had been partially withdrawn and again pushed in, several times, the vessels of the intestines, for several inches on