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## OMC Pulse, Volume 03, No. 2, 1899

Omaha Medical College

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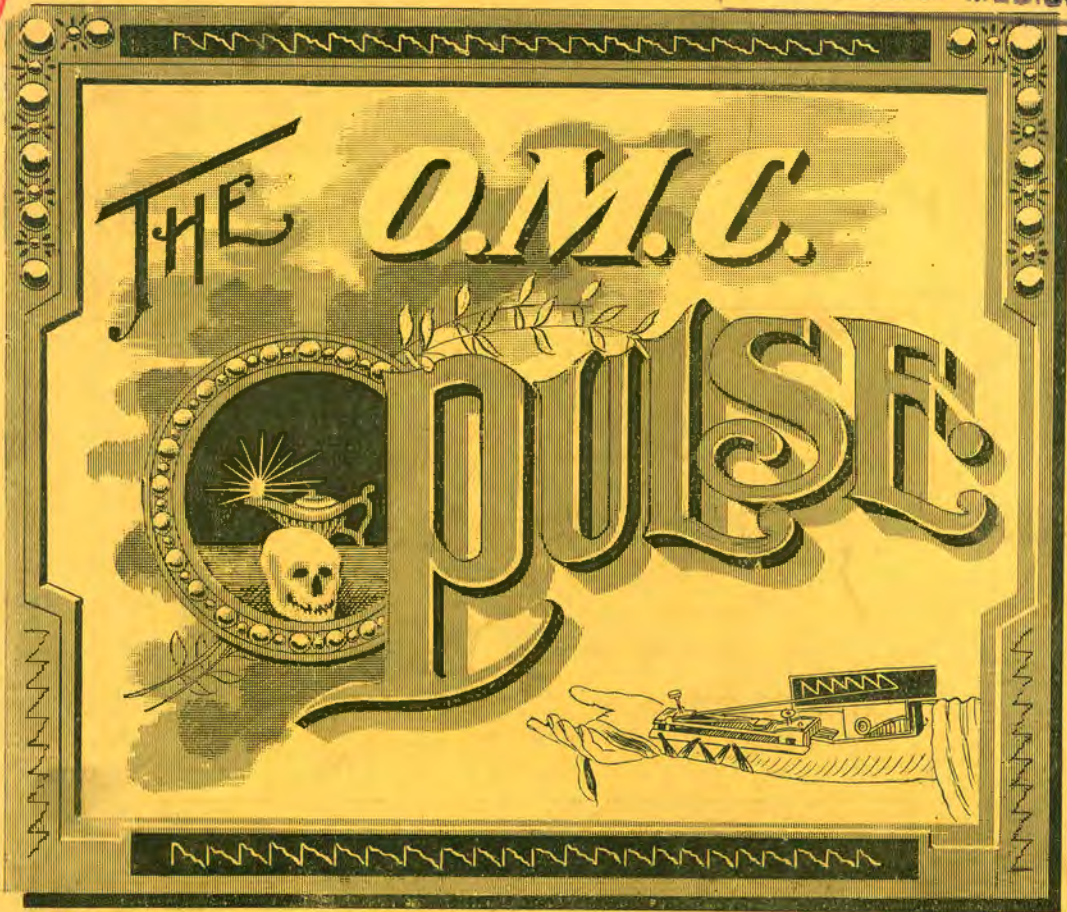
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Official Journal of the Omaha Medical College, Medical Department University of Omaha,  
OMAHA, NEB.

VOL 3.

OCTOBER, 1899.

No. 2.

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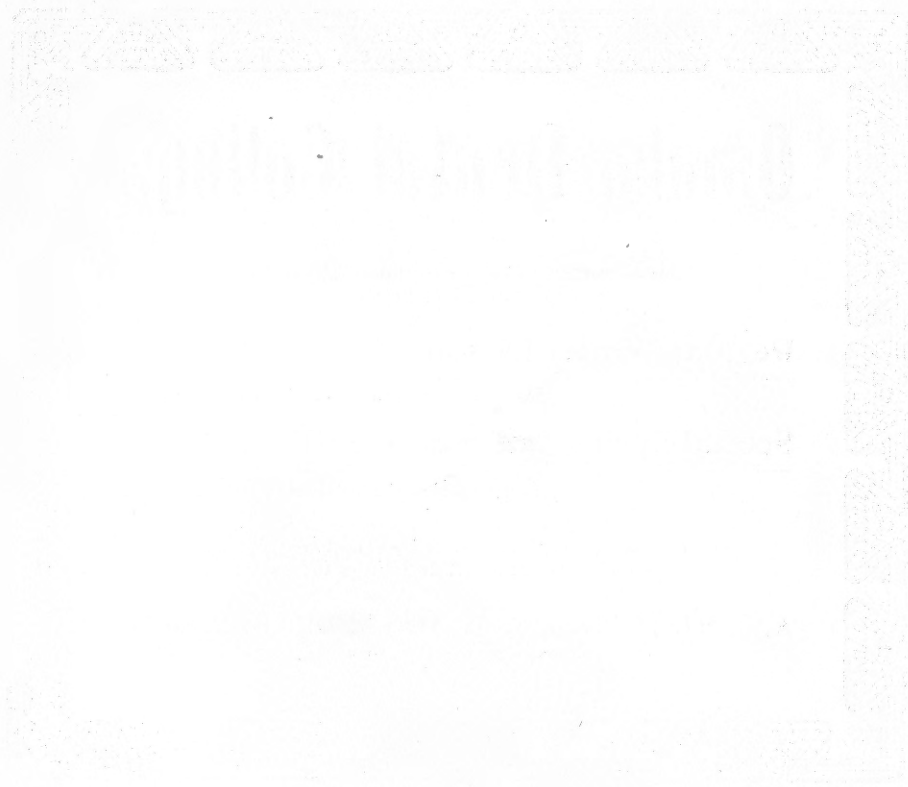


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---

WRITE FOR NEW CATALOGUE—  
JUST OUT.

**Bellevue, Nebraska.**



Bellevue, Nebraska

WHITE FOR THE BATHING  
JUN 1871



EDWARD W. CHASE. M. D.

# The O. M. C. Pulse.

VOLUME III.

OCTOBER, 1899.

NUMBER 2

## DR. EDWARD W. CHASE.

Dr. Edward W. Chase died Friday morning, October 6, at his home, 202 North Eighteenth street, of Bright's disease. Brief funeral services were held at the residence Saturday and his body was sent to Portland, for burial. He had kept up his practice of medicine until the middle of September, when he went to Colorado. His condition grew worse there and he returned home in a week. When it became known that his sickness was serious it created a sad surprise among the medical profession and the students. He was but thirty-nine years of age and the rewards of hard professional work were just beginning to come.

Dr. Chase was born in Portland, Maine, March 18, 1860. His early education was obtained in the public schools of Portland and he graduated from the Portland high school. He entered Bowdoin college at Brunswick, Maine, and graduated in medicine in 1886. At that time he was sick for two months and it is probable that his fatal disease had its beginning then.

After graduating in medicine Dr. Chase entered the Marine hospital service at Portland. A year later he came west and located in Omaha, where he met with success in the practice of his profession. In 1892 he went abroad and took special courses in obstetrics at Dublin. He also spent some time in Germany. On his return to Omaha he accepted the chair of obstetrics in the Omaha Medical College. In 1897 he was elected to the Board of Trustees and was secretary of the board in 1898-'99.

September 20, 1893, he married Marie Elizabeth Mills of Omaha, who survives him.

At the time of his death Dr. Chase was assistant surgeon of the Union Pacific railroad and obstetrician to Douglas county and Omaha M. E. Hospitals.

Dr. Chase was at all times intimately associated with medical affairs. He was a member of the Omaha, State and Missouri Valley medical societies.

As a teacher Dr. Chase was respected by every student. Esteemed for his many good qualities and his aid to students his death is regretted by faculty, alumni and undergraduates.

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### DEDICATION OF NEW BUILDING.

(From the World-Herald October 27.)

Dedication of the new west wing of the University of Omaha was observed last evening and the whole commodious building was thrown open for the inspection of the public and students.

There was a large attendance and the students, before the opening exercises began, kept the big structure resonant with their college slogan and foot ball war cry. The dedicatory address was delivered by Rev. T. J. Mackey and was an interesting and appropriate discourse.

The whole building, which stands at the corner of Pacific and Twelfth streets, has a frontage of something over 100 feet, and last night, brilliantly illuminated as it was, made a decidedly imposing appearance. The new wing, just completed, is of exactly the same dimensions as the old building, with an added story on both. All the apartments are handsomely fitted up and finished in highly polished oak.

On the first floor is the medical department, consisting of nine rooms, surgical clinics, drug rooms, and free dispensary for deserving poor. The second floor is occupied with amphitheater, lecture rooms, reading room, museum and apartments for the X-ray apparatus. On the third floor is the chemical laboratory for the students, the professor of chemistry's private laboratory and lecture rooms for demonstrations in anatomy and

chemistry, two dissecting rooms, with five slabs each, and biology and embryology laboratories. The fourth floor is devoted exclusively to microscopical science, with a laboratory for bacteriology, and one for histology and pathology, with stand and all modern appliances for each individual student. The latter department is roomy and spacious and one of the best lighted and ventilated rooms in the whole college.

In the dental department on the first floor is the laboratory, with a seating capacity of over 100, and with individual appliances for each student. There are also roomy lobbies and an office room. The reception room for patients is on the second floor, also the library, which will be made an extensive one by contributions from the students and faculty, also room for private business, with adjoining toilet rooms. On the third floor is a large operating room containing twenty chairs and with a capacity for twenty more, and lockers for each student. The room is supplied with all modern electrical apparatus and is complete as any in the land.

The old college building was completed in November, 1893, but becoming inadequate to the demands made upon it the new west wing was built, just doubling its capacity and adding improvements which leave nothing lacking calculated to contribute to the advantage and comfort of the students.

The course of study is graded, comprising four sessions of seven months each, conforming to the regulations of the Association of American Medical Colleges, of which the Omaha Medical college is a member.

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#### REV. MACKAY'S ADDRESS.

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Young Gentlemen of the Medical College: It is always a great pleasure for me to speak to young men. We are going to the sere and yellow leaf; you are beginning. The places of these gentlemen of the Faculty are soon to be occupied by you, and the first thing that you ought to think about is what you are going



to do in the future. You have already chosen the profession which you are going to follow, and now the question is how you are going to follow it with credit to yourselves and the benefit of humanity. Your profession is second only, if second, to the profession that I represent. Don't forget that you are to minister to the mind as well as to the body. You are going to grapple with problems that your predecessors never dreamed of. You are going to be brought face to face with problems that they never thought of. You are to be physicians, not only of the body, but of the mind as well. That is one of the things that I think ought to be impressed upon every medical student of the present day. I would place psychology at the beginning of medical studies. You cannot find the soul with the scalpel. We have never seen a thought. Yet a thought is a real thing. Are all other things real and the soul of man only a phantom? Oh no! Such cannot be.

You are going out into a world today that is teeming with spirituality and sub-consciousness, and unless you can meet it on scientific grounds, you will not succeed.

You have to meet the hundreds of fads that exist all around you today, and you must meet them on scientific grounds. You cannot meet them by ridiculing them. You must find out the truth of every system and attach that truth to your own system.

Until you of the medical profession unite with the theological profession, neither of us can reach the highest point in our different spheres. I would prefer that you unite the clergyman and the doctor, and every physician ought to be a clergyman. There is no dream of the magician that can excel the calling of a true physician. No man can get as near to humanity as he. You want to imbibe the spirit of perfect confidence in yourself and then commence on your patient. You must go forth from this institution feeling that you are equipped to meet the needs of this world, spirit, mind and body. God is always on the side of health. That is one thing that "Christian Science" has put a patent on, but there is no patent on it. There is no such

thing as a patent on truth. Truth is always the same and always will be the same through all eternity. God's will is perfect health. when you find that health is broken, God is on your side and nature is on your side. I believe that God cannot be separated from nature.

Don't be afraid of the clergyman in your work. If you cannot unite in your work the work of a clergyman, call in an intelligent one to aid you.

When you get out into this world of ours you will find that spirit is stronger than body. Try to keep both body and spirit under leash. If you would find an example of how that should be done get down your Bible and read of the example of Christ. Except in Him you will never find an example in all this world.

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#### PROF. KOCH'S REPORT.

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The report of Prof. Koch's study of malaria in Grossetto, Tuscany, Italy, is that man is the host of the malaria parasite during the winter months, and the hot weather brings on an acute attack of malaria during which time he is fed upon by the mosquito which carries infection to other persons. By the administration before the summer season of quinine to persons affected with malaria the preceding summer the disease would not appear, the mosquito would carry no infection and malaria would be eradicated. Malaria is very prevalent in Grossetto, and Koch observed that during the summer months the disease appeared first in previously infected persons and new cases did not appear for three weeks, during which time the mosquito had carried the infection. The malaria parasite has been found only in man and the mosquito.

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The official button of the American Medical association is just out. It is a design in gold and bears the letters M. A. M. A.

# The O. M. C. Pulse.

Volume 3.

Number 2.

A. B. LINDQUEST, '00, EDITOR.

H. A. REICHENBACH, '01, BUSINESS MANAGER.

Faculty Department  
Alumni Department  
Clinical Editor

W. F. MILROY, M. D.  
Dr. GEO. BICKNELL, 1404 Farnam St.  
HOMER DAVIS.

## CLASS EDITORS:

A. JEFFERSON, '00.

A. H. COOPER, '02.

L. M. LEISENRING, '01.

E. W. JACKSON, '03.

Publishers

OMAHA MEDICAL COLLEGE.

*SUBSCRIPTIONS.*—\$1.00 per Annum in Advance. Single Copies, 15c. Published monthly during the regular College session.

*ARTICLES* on subjects coming within the scope of the different departments of this journal are solicited from all our readers. Write on one side of the paper only; say what you mean to say, and be brief and plain.

Send all remittances as to subscriptions and advertising to *THE PULSE*, 1202 Pacific Street, Omaha, Neb.

Entered at Omaha Post Office as Second Class Matter.

## Editorial.

The Omaha Medical College has entered upon its nineteenth session under the most favorable circumstances. New laboratories, more room and more students make this year a notable one in the history of the college. New students number about fifty, several of whom enter advanced classes, which certainly speaks well for the O. M. C.

\*  
\* \*

College spirit is more in evidence at the O. M. C. this year than it has ever been before. To be sure, our worthy alumni in their undergraduate days did something to make history for their

followers, but it was class history, class spirit and not college spirit. They all tell us of good natured class strife, of class societies and of friendships formed by fellow sufferers in the pursuit of medical learning, but the only time they did anything in common was at the opening address and at the undergraduate banquet to the graduating class. There must be something aside from study to make college spirit. We are all working for the same profession, but our studies are not all the same and we do not all meet in the same lecture room. To work together we must go outside of the lecture room and there senior can know freshman and we can help one another and help the college. There we can organize and there latent energy become potential. That kind of spirit keeps the alumnus in closer touch with his alma mater. The student body took a step in the right direction when it met to organize the O. M. C. Athletic association. Liberal subscriptions were soon forthcoming and now a first and second team have the necessary suits and other foot ball paraphernalia. It is seldom that a foot ball team is organized with such good material as we have. All the boys have not played the last year, but they all know the game. Some good team work, training and coaching, backed by student enthusiasm, will give us a team of which we can justly be proud.

The organization of the Athletic association was followed by a glee club, which is already in possession of a piano and a good repertoire of college music. A banjo club is being talked of.

\*  
\* \*

The doctor meets daily with cases that have suffered at the hands of quacks. There was a forcible illustration of such a case at a recent clinic. The victim was afflicted with carcinoma of the lower jaw involving the adjacent structures on the left side—the case was inoperable. The growth began as an epithelioma of the skin. This was treated by a well-digger who applied his trade so industriously as to make an excavation inward to the mucous membrane of the pharynx.

Why not have a college pin.

\* \*

Alumni! Send in your dollar and get on the honor roll of  
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\* \*

W. L. Wilmoth will see to it that athletes are given due space  
in THE PULSE.

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The new X-ray machine is up and in working order. Need-  
less to say it is the best.

\* \*

Dr. Jonas met the students in the large lecture room on the  
afternoon of October 2 and outlined briefly the work for this year,  
and announced that the usual formal opening exercises would be  
held as soon as the construction of the new building was com-  
pleted, this having been delayed by circumstances over which the  
Board of Trustees had no control. He referred to the rousing open-  
ing of the old building in the fall of 1893, and said that we would  
soon have the opportunity of having another such celebration.

Dr. Jonas spoke briefly on the history of medical education,  
and contrasted the medical schools of twenty-five years ago with  
the advanced schools of the present day. "Modern tendency is  
object teaching. Formerly there were no laboratories. The pro-  
fessor demonstrated a few experiments before the class—a micro-  
scope was only seen from a distance, and some teachers called it  
'a tube with a hole at one end and a fool at the other.' Now, com-  
petition with accomplished men shows the necessity of the micro-  
scope and of laboratory training." At this point he described the  
new laboratories and apparatus. "Though at no time in the his-  
tory of our college has anything been lacking that was essential  
for good work, the increasing number of students, the lengthening  
of the course of study and the increasing clinical work has made it  
necessary to add space and apparatus. No expense has been

spared, changes are for the better, policy for the best. Clinical work is so arranged that the student gets practical experience in diagnosis and sees the technique of an operation—not only its grossness.”

Dr. Jonas then spoke of some points the student should always bear in mind. “Always be punctual. It is annoying when a person is not in his place when he belongs there. It is as easy to be punctual in medicine as in anything else—it is not even necessary to miss a meal. We should also be methodical in our work. Much success is due to method in work. Furthermore, we are here not only to learn science but good habits. Begin to be gentlemen here. Things have happened in medical colleges that do not bear repetition. Certain physical enjoyments are not for the best. Inhibition means something to college property every year. Students should co-operate with faculty to attain the best ends.”

It is so seldom during the college year that the students are addressed on any subject outside of the scientific curriculum that we quote above Dr. Jonas' remarks made on the first day of the session. They take us, for a moment, away from the technique of science, take up its history and then show us that we must have training in things that are incidental to success in scientific work as well as in all other work. As we advance in our work these latter suggestions impress us as being more and more essential. A case in point: At a first lecture two years ago students were urged to continue their literary reading. Fifteen minutes a day was pronounced sufficient, and, indeed, it would be, but how many have acted on that suggestion. Those fifteen minutes were probably spent in cramming scientific facts, which could be better learned by varying the monotony of a scientific grind with a little of the literary. We do not profess to know how those fifteen minutes were spent, but it is well to emphasize a few remarks that take us occasionally from the scientific sphere.

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#### ATHLETICS.

W. F. WILMOTH, '01, Editor.

Everything must have a beginning. It often happens that that which seemed the most certain of failure at first has proven very successful in the end. Athletics at the O. M. C. have in the

past consisted largely of "class fights," "sliding down the banisters," and other such amusements. With this number of THE PULSE we are very glad to announce to all our friends that our college has taken another step in the right direction—and she has taken many such steps since one year ago. We now have an Athletic association with a membership of seventy. We hope now that the above-said exercises may be relegated to the past, and the new college building remain unmarred, since the boys may have a more systematic way of giving vent to their pent-up feelings and of developing their physical beings.

Of course, the first step taken by the association was the organization and equipment of a foot ball team. Suits and equipment for two teams have been secured and every afternoon "the boys in white" may be seen developing muscle over the pigskin. We are glad to report good work and much enthusiasm. Such practice will insure a measure of success. Too much should not be expected from the team this year, as the season is already far advanced and the practice hour is short.

It takes time to make a foot ball team, but with Byron W. Hall as manager we think no stone will be left unturned that would in any way prevent success. It is his intention to have a few games this season, which will soon be announced.

We wish to make mention here of our high appreciation of the warm support and solid backing of our noble faculty. They certainly have reached the hearts of their students this year as never before. We are all grateful for the new (athletic) era in our college history.

But this is not all the good news. Arrangements have been made with the Y. M. C. A. whereby the students may obtain membership during the college year for a small fee. This gives us the advantage of the best gymnasium in the city. No student can afford to miss this opportunity. It would be well to form an O. M. C. gymnasium class and enter the in-door contests. This can best be arranged after the foot ball season is over.

The officers of the Athletic association are: President, W. L. Wilmoth; Vice President, C. Whiticker; Secretary, M. B. McDowell; Treasurer, W. H. Patterson. Dr. Gifford, from the faculty, with the above named officers, shall constitute a "Board of Trustees."

J. R. Montgomery was elected captain by the team.

#### BELLEVUE GAME.

Saturday was an ideal day for foot ball. A bright sun took the chill out of the atmosphere and Bellevue campus never looked better. Three hundred spectators stood on the side lines and cheered as though their never would be such a combination of good weather and good foot ball on Bellevue campus again. Neither team had any advantage in weight and the score—5 to 0 in favor of the Medics—shows that the game was stubbornly contested.

The game was called at two o'clock and Tornholm sent the ball to Bellevue's twenty-yard line. Kerr caught and advanced a couple of yards. Bellevue bucked the line for ten yards, which practically ended that style of play for them and they depended after that on kicking and a few end runs. Bandy punted thirty yards and the Medics bucked Bellevue's line for a touchdown—Lee, Wilmoth, Smith and Haller carried the ball. A mass play brought Wilmoth and the ball over the line. Lemar failed to kick goal.

Bellevue's kick-off now sent the ball to Jefferson, who fumbled. The ball was again fumbled in a mass play and Bellevue netted fifteen yards by two end runs and was held on the ten-yard line for three downs. The Medics advanced the ball thirty yards by bucking the line and the first half ended with the ball in the middle of the field.

Second half: Bandy kicked to fifteen yard line, Lee caught and advanced twenty yards. Smith took the ball for five yards, Haller for another five and Montgomery and Lemar added five more. Bellevue braced up and Allen lost five yards for an end



run. Bellevue got the ball on downs. Griffith got through their line and Bellevue started back three yards. Bandy punted for thirty yards. The ball was fumbled in a mass play and Bellevue tried for a goal from the field, but failed. Lemar kicked for forty yards. Bandy punted to Lee, who advanced ten yards. Bellevue held for downs, lost three yards, and time was called.

#### LINE UP.

|                      |                |                   |
|----------------------|----------------|-------------------|
| Haller               | Left End       | Koehler           |
| Montgomery (Captain) | Left Tackle    | Hanan             |
| Allen-Thulin         | Left Guard     | Hammond           |
| Tornholm             | Center         | Freeman (Captain) |
| Smith                | Right Guard    | Schofield         |
| Griffith             | Right Tackle   | Kerr              |
| Jefferson            | Right End      | Irwin             |
| Lemar                | Left Halfback  | Bolen             |
| Wilmoth              | Right Halfback | Whipple           |
| Moore                | Quarterback    | Butt              |
| Lee                  | Fullback       | Bandy             |

Twenty minute halves.

Officials: Mr. Taylor, Omaha; Lieut. Dichman, Ft. Crook.

Touchdown, Wilmot.

Substitutes: Thulin, Carr, Christie.

---

#### NOTES OF THE GAME.

Drs. Yeakel and Strader were there.

Chapman and Wells went down on wheels.

How did Griffith get through the line.

Lee played hard, had some hard falls and was hard to get around.

Haller is the lightest man on the team—135—but was always good for five yards and was always in the game.

## Clinical Department.

HOMER DAVIS, '00, Editor.

The new education recognizes that the practical with the theoretical, the "learning by doing" is the fundamental principle of education. The noted universities of the world are leaders in this method of teaching. It is a source of much gratification to note that this system is exemplified in the teachings of the Omaha Medical college. Qualified teachers, thoroughly equipped laboratories and ample clinical material afford instruction that taxes our receptive power to the limit.

We know that our teachers are men of national reputation in their specialties. We also know that we have an abundance of clinical material which is used to the very best advantage. Then our natural conclusion must be that the O. M. C. ranks among the first medical colleges of the land as to its advantages for training students for the medical profession.

The free college dispensary and the hospitals of the city in charge of the O. M. C. clinicians furnish more clinical material for the students than can well be utilized.

Since the opening of college, October 3, to the close of this clinic report, October 21, there have been sixty-nine surgical and medical cases brought before the students. The history of the patient and the disease have been thoroughly studied, the patients examined by the students for physical signs and symptoms, and in all cases the reasons for the especial line of treatment thoroughly explained. During surgical operations each step has been thoroughly demonstrated.

Many very interesting cases in the daily college dispensary are not included in the above number as there was neither time nor opportunity of showing them at the general daily clinic. Also the above number does not include the Senior gynecological clinic, nor the obstetric cases assigned the Senior students.

Full notes were taken by the clinical editor on the sixty-nine cases, but to publish all of them would take up too much space and would be nearly a repetition in some of the cases.

October 4. Dr. Jonas, M. E. Hospital. Early in the morning of the first day of the term Dr. Jonas opened clinics with the following:

1. Bassini operation for a direct inguinal hernia.

2. Removal of an extensive diffuse lipoma. Girl, age 10 years. History good. Health good, and development normal except that the right hip always seemed to be the larger with proportion constantly increasing. On examination the tissues over the region of the gluteus maximus were found to be much hypertrophied. An irregular area of skin two to three inches in diameter over the center of this mass resembled a naevus. Removed by excision, mass of tissue five to six inches across and one to three inches deep. The skin sutured over the wound and the usual dressings applied.

October 4. Dr. Gifford, M. E. Hospital:

3. Tracoma with resulting entropion.

4. Siderosis and glaucoma.

5. Episcleritis.

6. Paralytic divergent concomitant strabismus of right eye. Boy 10 years old. Received a hard bump on frontal bone eight months ago, followed immediately by above trouble due to paralysis of nerve supply to external rectus of right eye. Anaesthetised. Tenotomy of external rectus. Eye brought into place by shortening tendon of the internal rectus.

October 5, Dr. Gibbs, college clinic.

7. Mrs. ———, age 23. No children, no miscarriages. Complains principally of constant headache. Father, mother and two sisters alive and healthy. One sister died of tuberculosis. Had gonorrhoea at sixteen years of age. Never has been quite well since. Married at 21. Appearance, anaemic. Constipated. Pelvic pains. Scanty menstrual flow, which is irregular. Temp. normal, pulse 120. Prescribed a tonic of iron, quinine and strychnine, and laxative.

8. Suspected tuberculosis.

October 6, Dr. Milroy, college clinic.

Dr. Milroy spent most of the clinic hour in outlining some of the practical points to be observed in a general clinical examination.

9. Chronic bronchitis.

Oct. 7, Dr. Summers, Douglas county hospital.

10. Amputation. Mr. —, a laborer, injured eight weeks ago on left leg and foot by a powder explosion. Large areas of skin and some of the periosteum of the tibia destroyed. This caused localized areas of necrosis over the lower anterior aspect of the tibia which refused to repair after thorough trial. Foot becoming gangrenous. In order to save as much of the limb as possible a single flap operation was performed according to usual *modus operandi*. Flap taken from posterior part of leg, which was amputated at about middle of tibia. Skin grafts were taken above knee to cover ulcers over upper part of tibia.

11 and 12. A direct inguinal hernia and a hydrocele were brought before the students for diagnosis and differential diagnosis.

Oct. 7, Dr. Milroy, Immanuel hospital.

13. Erysipelas of face.

14. Typhoid fever, third week.

15. Hemiplegia with loss of speech.

16. Acute melancholia.

Oct. 7, Dr. Davis, Immanuel hospital.

17. Operation for hernia with undescended right testicle. Mr. —, age 19. Has noticed hard lump in right inguinal region since childhood. Two years ago soft reducible swelling appeared which was called a rupture. Basini operation performed and finding the testicle in the inguinal canal atrophied and cystic, it was removed, the cord being ligated with catgut and its stump returned into the abdominal cavity.

Oct. 9, Dr. Jonas, college clinic.

18. Serus synovitis of knee joint. Boy 6 years old. History of injury to knee by creeping, causing abscess over patella six weeks ago. Abscess opened and drained and healed. Inflammatory condition extended to synovial membrane of knee joint. Treatment: Plaster cast put on whole leg.

19. Suppurating wound in left side caused by removal of tuberculous kidney.

Oct. 10, Dr. McClanahan, college clinic.

20. Acute bronchitis, child  $2\frac{1}{2}$  years old.

21. Rickets and stomach trouble in colored boy 8 years old.

22. Marasmus, child 15 months old. Suspected tuberculosis.

23. Chorea (nearly recovered) and simple acute bronchitis. Girl 9 years old.

24. Nocturnal and diurnal enuresis, colored boy, age 6 years. Always healthy until two months ago. No other symptoms of disease.

Oct. 10, Dr. Anderson, college clinic.

25. Hypospadias. Boy 10 years old. Penis fairly well developed. Urethral opening about 1 cm back of frenum. Case will be operated on later.

Oct. 11, Dr. Jonas, M. E. hospital.

26. Infection of right hand and forearm. Mr. ———, 60 years old. Infection started from prick of a sand burr seven days ago. As the class were making special study of inflammation, this case was used to illustrate inflammation in all of its stages, characteristics and results. Many incisions made in all of infected area for thorough drainage.

27. Psoas abscess.

Oct. 11, Dr. Gifford, M. E. hospital.

28. Cataract, secondary glaucoma, and iridodialysis of right eye in boy 14 years old as a result of curiosity to see why a tomato can filled with powder and dirt had not exploded as per sched-

uled time early in the morning of last Fourth of July. Moral:  
 "Boys, don't monkey with the tomato can."

29. Spring catarrh, five years standing.

30. Abscess of lachrymal duct.

31. Iridodialysis with blood clot.

32. Tracoma with resulting ulceration of cornea, leaving  
 cornea opaque and flat.

33 and 34. Convergent concomitant strabismus.

Oct. 12, Dr. Gibbs, college clinic.

35. Suspected tuberculosis.

36 and 37. Myalgia.

38. Chronic constipation with resulting loss of appetite, nau-  
 sea and nervous symptoms.

39. Acute malaria, tertian type. Mr. ———, age 40 years.  
 Just returned from Kansas, where he was taken sick six weeks  
 ago. Chill every other day. No appetite, weak and nervous.  
 Chill just coming on. Pulse 84. Temp. 103½. Considerably  
 jaundiced.

Oct. 13, Dr. Milroy, college clinic.

40. Malaria in the condition called by the laity "dumb ague."

Oct. 14, Dr. Milroy, Douglas county hospital.

41. Chronic interstitial nephritis with resultant cardiac hy-  
 pertrophy followed by dilatation, and mitral obstruction and in-  
 sufficiency. All students noted "purring thrill," also presystolic  
 murmur characteristic of mitral obstruction, also mitral regur-  
 gitant murmur.

42. Suspected tuberculosis.

43. Inflammatory rheumatism with resulting valvular dis-  
 ease.

44. Paraplegia.

45. Rheumatoid arthritis.

46. Hemiplegia.

Oct. 14, Dr. Summers, Douglas county hospital.

10. Stump dressed and stitches removed. Condition most  
 excellent. Flap united by first intention. Skin grafts nearly all

taken. General condition good. Appetite fair. Has had very little elevation of temperature.

Oct. 16, Dr. Jonas, college clinic.

47. Sprained elbow.

Oct. 1-7, Dr. McClanahan, college clinic.

48. Summer diarrhoea or infection of alimentary tract. Baby 1 year old. Taken off breast 4 months ago. Has had indigestion ever since. Vomits frequently after taking food. Temp. per rectum  $101\frac{1}{2}$ . Tongue furred, mouth dry, anemic. Bowels very loose, slimy discharge. Treatment: Directed to use equal parts of boiled milk and rice water, and to one cupful of this mixture add one teaspoonful of lime water. The baby to be fed regularly and not too much. R. No. 1. Tablets Hydrarg. chlorid. Mite. gr. 1-10.

No. X Sig:—One tablet every hour, followed by a teaspoonful of castor oil in the morning.

R No. 2. Sodae Salicylate drachms 2, Elix Lacto peptin ounces 2. M.

Sig:—20 drops every 2 hours after No. 1 has been taken.

49. Anaemia.

21. Stomach trouble some better.

Oct. 18, Dr. Davis, college clinic.

50. Tubercular adenitis of cervical glands.

51. Varicocele.

52. Abscess of cervical gland.

Oct. 18, Dr. Gifford, M. E. hospital.

53. Double congenital zonular cataract with resulting nystagmus.

54. Traumatic puncturing of cornea.

55 and 56. Trachoma with resulting entropion and trichiasis.

57. Staphyloma as result of powder explosion five years ago.

58. Double congenital zonular cataract with resulting nystagmus. Brother of No. 53.

Oct. 19, Dr. Gibbs, college clinic.

7. Condition considerably improved generally.

35. Condition somewhat improved. No chills.

Oct. 19, Dr. Anderson, college clinic.

59. Gonorrhoeal rheumatism, affecting right knee and heel. Acute gonorrhoea four months ago. Pain in right knee and heel noticed one week ago. Pain now quite severe. Brought on a renewal of urethral discharge, by beer drinking.

60. Chronic urethritis.

Oct. 20, Dr. Milroy, college clinic.

61. General nervousness caused by removal of ovaries one year ago. Age 35. Temp. normal, pulse good. Complains of pains in various parts of body. Fairly well nourished.

62. Chronic constipation.

Oct. 21, Dr. Milroy, Douglas county hospital.

63. Chronic constipation, cystitis and general malaise.

64. Cardiac failure of compensation with resulting valvular disease. Mr. ———, age 35. Always strong and well until attack of rheumatism last winter. Attack lasted four weeks. Worked at hard labor during spring and summer. Six weeks ago taken sick of cardiac failure and went to county hospital. Treated as per below and discharged from hospital four weeks ago. Able to work only every other day. Then sick of same trouble two weeks ago and again went to county hospital. Pain over precordium. Apex-beat noticeable over an area extending from anterior axillary line to sternum. Heart action rapid and very irregular.

Radial pulse very weak. Area of dullness very much increased. The murmurs of mitral obstruction and regurgitation well marked and all students were given a good chance to study them. Treatment: Rest in recumbent position; Tr. digitallis 15 minims and Tr. strophanthus 3 minims every 3 or 4 hours; also iron and general tonics with especial attention to a nourishing diet. Improving under this treatment as fast as could be expected.

42. Condition about the same.



Oct. 21, Dr. Summers, Douglas county hospital.

65. Amputation of breast. Colored girl 16 years old. History good. Has noticed a tumor growing in left breast during past year. Tumor now, about  $2\frac{1}{2}$  inches in diameter, not movable and seems to be a part of the whole breast. Axillary glands enlarged, therefore suspicioned as a malignant growth.

Modified Halsted's operation. Lower incision made first. Upper incision and then breast amputated. Axillary vessels and nerves exposed and enlarged glands removed. Wound closed by one retention suture, five silk worm gut interrupted sutures, and a continuous catgut suture. A counter opening made in most dependent portion of axillary space in which gauze drainage was placed. Powdered boracic acid dusted over closed wound and covered by gauze and cotton, and a broad roller bandage—8 inches by 10 yards. This bandage included the left arm in the third turn.

10. General appearance very much improved. Has little pain. Ulcers half healed.

Oct. 21, Dr. Davis, Immanuel hospital.

66. Appendectomy.

67. Fracture of the internal condyle of the humerus with displacement of the fragment upward and outward over the lower anterior surface of the humerus. Boy 5 years old. Result of a fall several weeks ago. Flexion and extension of elbow joint limited about half. Rotation limited somewhat.

68. Carcinoma of left infra maxillary region, involving whole side of face and neck and all the lymphatic glands of this region. Case beyond operable measures.

69. Dilation of anus for anal fissure.

17. No complication in healing process. Slight bronchitis from ether anaesthesia. Patient still kept in bed.

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## A REPORT OF RECOVERY FROM TRAUMATIC TETANUS.

By L. B. VAN CAMP, M. D., '98, Resident Physician Douglas County Hospital.

As the percentage of recoveries from Tetanus, or what is known to the laity as lockjaw, is exceedingly small, a report of the treatment and recovery of a patient afflicted with a most

severe siege of this disease may be of interest alike to the medical profession and to the undergraduate.

On the 9th of September of this year a German farmer boy, age 15 years, was brought to this hospital exhibiting most severe symptoms of lockjaw. His previous history as given by him was as follows: Three weeks previous while working on a farm, he had received a cut with a corn knife between the first and second toes of the right foot. He complained of nothing for ten days after the injury. At noon on the eleventh day, while at the dinner table, he found that he could not completely close his lower jaw. His condition grew worse and on the fifteenth day after the injury of the corn knife he was seized with a severe chill, followed by a violent contraction of the muscles of the back, causing him to fall upon his face and rendering him unable to rise.

He was sent to the Douglas county hospital, where he came under my observations. He was then having a paroxysm every five minutes and even oftener on the slightest provocation, as, for example, a footfall, or the entrance of anyone into the room. His abdomen felt like a board, his whole body was rigid, there was, in a word, orthotomos. He had also the risis sardonius. His temperature was 101 and his pulse 96. Very constipated.

I ordered him thoroughly bathed in warm water and placed in a dark room, where he could be kept quiet. As the slightest noise caused him to have a paroxysm, he was kept under the influence of morphine sulphate, as well on this account as because he complained of severe pain in the back at each paroxysm. Hyoscine hydrobromate and potassium bromide were also used, but with an unsatisfactory result. His constipation was overcome by calomel, followed by a saline and when these remedies failed by an enema.

The principal treatment consisted, however, of the injection of Tetano-Toxine. On the first day at the hospital, which was the third day of frequent paroxysms, I injected 10 c. c. of the toxine hypodermically between the scapulae. The following day there was very little improvement, so 10 c. c. more of the serum

were injected into the lumbar region. On the third day there was improvement, the paroxysms were not as frequent or as severe. Opisthotonos, which was well marked from the beginning, still prevailed. Morphine hypodermically was still resorted to for allaying the pain and controlling the paroxysms. On the fourth day after the first injection, there was considerable improvement; the patient could open his mouth a little for the first time since he had been in the hospital. The paroxysms were growing less frequent and less severe. The toxine was again injected into the lumbar region.

On the fifth day there was a decided improvement, the mouth could be opened half way, the paroxysms were less painful and occurred not more than two or three times in an hour. Another 10 c. c. of the toxine was administered (making in all 50 c. c.) On the sixth day the symptoms had so far ceased that another injection was deemed unnecessary. The patient was now able to take nourishment, which had been of a liquid character at all times, without the use of a rubber tube, which had been used previously when his mouth was within an eighth of an inch of being completely closed.

On the tenth day after the first injection, the patient was able to sleep in bed, and on the fifteenth day after the toxine was first given the patient was discharged from the sick ward.

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#### ALUMNI NOTES.

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DR. GEO. H. BICKNELL, '95.

Dr. Nellie L. Clark, class of '98, is located at Clavis, Fresno county, California.

Dr. Harry Burdick, class of '99, has been appointed chief house surgeon in the Rock Springs, Wyoming, hospital.

Dr. C. E. Stevenson, class of '95, passed through Omaha recently on his way to Norfolk to buy a farm.

Dr. A. P. Fitzsimmons, class of '95, is now serving as surgeon in the United States army in the Phillipine Islands.

Dr. Voorhes Lucas of North Platte, class of '95, was in Omaha recently.

Dr. R. C. Knode, class of '99, is located and prospering at Sundance, Wyo.

Dr. H. S. Finney, class of '99, who is located at Saratoga, Wyo., was married recently.

Dr. Beatty, class of '99, has removed from Omaha to Chadron, Neb.

Dr. L. R. Markley, class of '82, has an interesting article on headache in the October number of the Medical Sentinel.

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### SENIOR NOTES.

ALF. JEFFERSON, Editor.

We are all here again: "The Lucky (?) Thirteen."

Betz, "our politician," is the democratic nominee for coroner of Sarpy county.

Bartlett believes two can live cheaper than one, so he came back with a wife. Congratulations, old boy!

The following class officers were elected for this year: S. A. Preston, President; A. P. Overgaard, Vice President; W. J. Douglas, Secretary; E. L. Rolfe, Treasurer; A. Jefferson, Class Editor.

Nielson was laid up for ten days with pneumonia, but seems to be none the worse for his trouble.

Preston quit the Emergency Hospital because he believes "a feller can make more money selling books—if he is on to it." We hope he is on to it.

Douglas was out in the state during vacation days and reports some interesting cases—some typical cases—notably one of scarlet fever in which "the rash appeared first on the face."

Davis is not losing any time. We observe he is taking full clinical notes for THE PULSE.

Where were all the Senios during Saturday's game.

Dr. Anderson's announcement that the best work in his course would win a prize at once exhausted the available supply of Taylors and Mathews.

## JUNIOR NOTES.

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L. M. LEISENRING, Editor.

We, of the class of '01, start in our new year with "a smile that is childlike and bland." And why not, pray? Are we not arrived at that goal of our last year's hopes and are we not Juniors? Good reason then for such constant stimulation of our risorius muscles.

We will try to keep the size of our heads to somewhat near the normal, Freshies and Sophs, and not do as last year's Juniors—i. e., pass by with supercilious countenances those behind us in the race for M. D.

There have been some changes in our class since we separated last April, some of our members having left our ranks under the mistaken impression that they could better themselves elsewhere. We say "mistaken" guardedly and with no fear for the consequences; for we believe that our college, with the array of talent making up our present faculty, can give as careful and thorough a course as any, with the advantage to each student, moreover, of more individual attention than he is apt to obtain in a larger school. We can only wish them "Godspeed and success," however, in their new locations. Most of them we will miss for their excellent qualities as students and for their genial good fellowship—some, Alas! with feelings of agreeable disappointment; for there are in every college, we must acknowledge, some few who, by their violation of principles of honor, are gladly noted among the missing. Nufsed.

The class is to be congratulated on its choice of officers for the ensuing year. The election was held October 9th and resulted in the selection of R. A. Hawthorne, President; A. A. Robertson, Vice President; B. W. Hall, Treasurer, and W. F. Herron, Secretary. They are all good men and will give a good account of themselves

"Here's looking at you!"

Joseph Dallal, of Damascus, Syria, is one of our new members. He is a graduate of Beyrouth, and was a surgeon in the Turkish army for five years, serving through the Graeco-Turkish war. His purpose in taking his present course is to acquire a better knowledge of our language, and our more advanced methods in medicine and surgery.

J. F. Jones, of Iowa City, is also a new member. He is all right.

W. F. Wilmoth was chosen President of our Athletic association. He makes a good presiding officer—and, say! have you watched him play half half-back on our team!

We were further honored by the selection of B. W. Hall as manager of the college eleven. He is a good man for the place and we will give him our hearty support.

Miss Wood is attending the Woman's Medical college at Chicago.

Shook goes to Rush Medical College, Chicago. We always noticed in our "scraps" his tendency to *rush*, so we should not be surprised at his choice.

"Good morning, G——! Have you used Bromo Seltzer?"

"I told you I didn't know!"

"Say, Preston! Give me two 'Taylors!'"

Which is the longest muscle in the body? Ask Gilmore.

Pass him up. Seniors. You know who.

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### SOPHOMORE SIFTINGS.

H. A. COOPER, Editor.

Oh those Sophomores! the only class! They're needed in everything. Fact is, it would be simply impossible to get along without them.

At a meeting of the Sophomore class held October 5th the following officers were elected: President, E. A. Van Fleet; Vice President, C. W. M. Poynter; Secretary and Treasurer, Miss Dora Henderson; Class Editor, A. H. Cooper.

We have been informed that Mr. Yoeder for some unknown and incomprehensible reason is taking his second year at Lincoln.

The Sophomore class is well represented on the foot ball team.

The old members of the class wish to extend a hearty welcome to the following new members: C. W. M. Poynter, Albion, Nebr.; J. D. Reid, Cedar Rapids, Neb.; M. S. Moore, Scotia, Neb.; B. W. Christie, Omaha, Neb.; Fred Lemar, Wahoo, Nebr.; D. B. Anderson, Toronto, Canada; Frank Tornholm, Villisca, Ia.; W. Y. Jones, Moore Park; H. D. Hully, Elliot, Ia.; Mr. Christensen, Lincoln, Neb.

On Saturday, October 14th, the class had the much appreciated pleasure of listening to a short talk on Anatomy by Dr. Bouffler, professor of surgical anatomy in Rush Medical college.

How about that Glee club, mostly Sophomores, isn't it? Even the editor was asked to join.

Mr. Montgomery comes to join us from the Illinois Medical college, having taken his first year there.

Mr. Jones is a graduate in pharmacy, from Valparaiso.

Mr. Anderson put in his Freshman year at Indianapolis.

Several of our new members, Mr. Poynter, Mr. Moore, Mr. Reid, Mr. Lemar, Mr. Christensen and Mr. Christie come from the State University, and show it by their ability to use both feet in getting on to chemistry and "such like."

At a meeting of the players held October 25th Mr. Montgomery was elected captain of the first team.

### FRESHMAN NOTES.

E. W. JACKSON, Editor.

The Freshman class of the O. M. C. held their first class meeting during the early days of the term and elected the following officers: Mr. Wherry, President; Mr. V. V. Vance, Vice President; Miss Nielson, Secretary; Mr. Iverson, Treasurer; Jackson, Editor.

The Freshmen, as a whole, are all enthusiastic over their work, and over the work of the O. M. C. They have the college spirit at heart and are doing their best to give the O. M. C. its due credit.

Freshmen are in line playing football. They are all right, because we have seen a certain Freshman, "Mr. Smith," make two touch downs with members of the Dental class.

When the Freshmen fall in line, and start their grand rush, you ought to see those Dents scratch for the back seats, as we always gain the day. But this is nothing more than holding up the honor and reputation of our preceding classes.

Anyone wishing to find the location of Poupart's ligament will inquire of Dr. Gennette and for spelling of same, Dr. Ransom will be pleased to inform you.

The opening of the new building will take place in a day and after such a time "pity us," as Dr. Stokes says we'll have to hustle.

## LIBRARY NOTES.

Dr. W. O. Bridges has made another donation to the O. M. C. Library. His latest donation comprises the following books:

Acton, Wm.—The Reproductive Organs, 1871.

Acton, Wm.—Venereal Diseases, 1848.

Byford, Wm. H.—Medical and Surgical Treatment of Women, 1867.

Bell, Chas.—Surgery, 1832.

Griffith, R. E.—Medical Botany, 1848.

Williams, C. J. B.—Principles of Medicine, 1848.

Meigs, C. D.—Females and Their Diseases, 1848.

Dickson, Samuel H.—Elements of Medicine, 1855.

Wilson, Erasmus—Human Anatomy, 1848.

Tweedie, Alex.—A System of Medicine, 3 vol., 1842.

Carpenter, Wm. B.—Principles of Human Physiology, 1847.

Carpenter, Wm. B.—Elements of Physiology, 1846.

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*Medical Letters may be addressed to:*

**MR. FELLOWS, 48 Vesey St., New York.**



- Churchill, Fleetwood—Diseases of Infants and Children, 1850.  
 Churchill, Fleetwood—Diseases of Females, 1847.  
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 Report of National Board of Health, 1879.  
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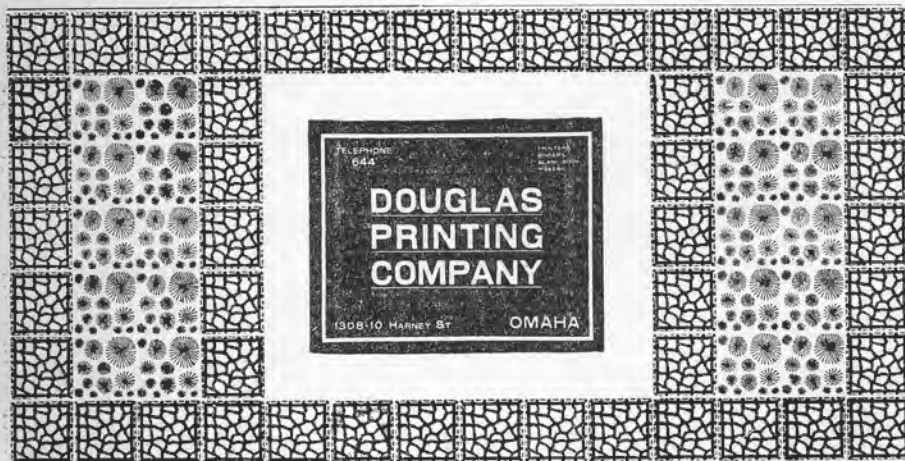
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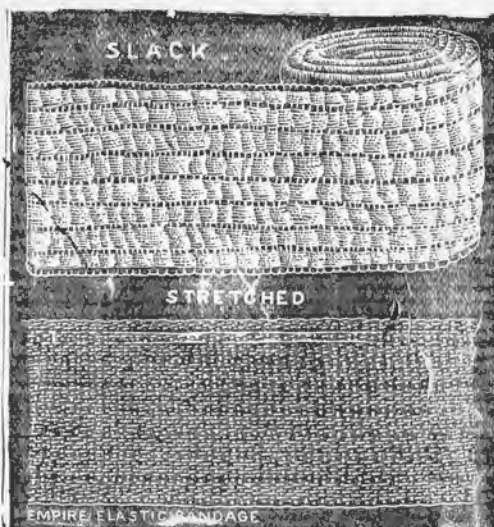
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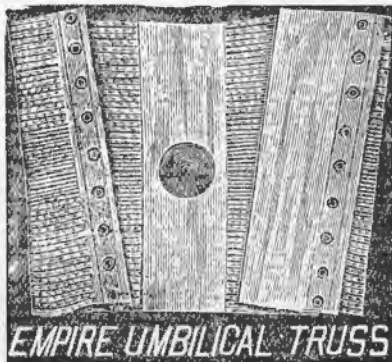
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**DR. J. E. SUMMERS, JR..**

ROOM 315 McCAGUE BLOCK.

— Surgeon in Charge



# SCIENTIFIC MEDICINAL NOVELTIES.

## ELIXIR TONGA COMPOUND WITH SALICYLATES.

EACH FLUID DRAM CONTAINS  
Tonga Barks ..... 30 grs.  
Ext. Black Cohosh ..... 2 grs.  
Sodium Salicylate ..... 10 grs.  
Pilocarpina Salicylate ..... 1-100 gr.  
Colchicum Salicylate ..... 1-500 gr.

This preparation thoroughly eliminates the viscid secretions of the system, and is an invaluable remedy in all **rheumatic conditions**. Its **anodyne** properties speedily remove all **neuralgic pains**, and if a continued treatment is given, will insure a permanent cure.

In **Sciatica**, an abatement of the pain will commence after a few doses.

In **La Grippe**, two teaspoonful every two hours will eradicate the disease and prevent dangerous after-effects. On account of its affinity for the excretory glands, and its alterative and eliminative action, it is an almost un-failing remedy in this disease. It is highly recommended in **Gout**, especially if used in connection with a purgative.

In **Lumbago** and **Neuralgic Headache** it has been used with much success.

**DOSE.**—One or two teaspoonsful in water every two hours until pain ceases, then before meals and on retiring.

In 8-oz. bottles.....each \$0.50 net.  
" 16. " " ..... " 1.00 "  
" 5-pint " " ..... " 4.50 "

Compare this price with that of proprietary articles of similar formula.

## PANAX COMPOUND. FOR CHRONIC DYSPEPSIA AND KINDRED TROUBLES.

This preparation contains in **palatable form** the active principles of Panax Schinseng (Gin-seng). It is a valuable agent for increasing the secretory action of the digestive organs, thereby assuring the proper performance of their functions. It is consequently a most valuable remedy in **Phtisis** and all wasting diseases. It has been used with benefit as a remedy for **Indigestion**, **Malnutrition**, **Torpid Stomach**, **Impaired Digestion**, **Flatulency**, **Heartburn** and **Colic**. It is of great value in cases of **Nausea** resulting from excessive use of alcoholic stimulants. It is a **general stomachic restorative**, stimulating the appetite, **aiding digestion**, **nutrition** and **assimilation** and increasing weight and **general strength**.

**DOSE.**—One teaspoonful, or more as indicated, three times daily before meals. For young children one to fifteen drops at meals.

In 1-pint bottles. .... \$1.00  
" 6. " " ..... 4.05

Compare this price with that of proprietary articles of similar formula.

## SOLANÆMIC.

### A NEUTRAL SOLUTION OF PEPTONATE OF IRON AND MANGANESE.

Indicated in **Anæmia**, **chlorosis** and **Scrofula**. In this preparation, by the association with peptone, the albuminates of Iron and Manganese are rendered easily digestible, and their ready assimilation with the blood is thus effected.

Solanæmic is essentially a **blood builder**, and is indicated in all cases resulting from a deficiency of red blood corpuscles. The evidences of its value are speedily exhibited by a change in the color of the skin, particularly of the lips, which become a ruddy red after one week's regular administration, thus proving conclusively an increase in the number of red blood corpuscles. It does not constipate, is non-astringent, and will not injure the teeth.

**DOSE.**—For adults, one tablespoonful three or four times daily. For children, one or two teaspoonful three times daily. Best administered in half a wineglass of water, milk or sweet wine.

In pint bottles..... \$0.60 net.  
" gallon " ..... 4.00 "

Compare this price with that of proprietary articles of similar formula.

## Elixir Chloroform Comp.

(LEE)

This elegant and palatable elixir is prepared after the formula of Dr. E. W. Lee, of Omaha, and contains Chloroform, Chloral Hydrate, Morphine Muriate, Tincture Cannabis Indica, Tincture Capsicum, dilute Hydrocyanic Acid.

It will be found a valuable **hypnotic** and an **anodyne** of unusual merit. It is **sedative**, **astringent** and **anti-spasmodic**.

It has been used with great success in **whooping cough**, **asthma**, **emphysema**, and gives much relief to patients suffering with **phtisical cough**.

As a remedy in **hysteria** it has also proven an eminent success, and has a marked effect in cases of **dysmenorrhœa** and **diarrhœa**, especially when accompanied with **tormina**. Some practitioners have found it to be valuable in **neuralgia**.

**DOSE.**—One half to one fluid dram (teaspoonful) as indicated.

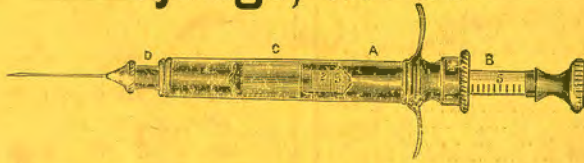
In 1-pint bottles..... each \$0.75  
" 5. " " ..... " 3.15

# The Mercer Chemical Co.,

STANDARD PHARMACEUTICAL PREPARATIONS,

OMAHA, NEB.

# Aloe & Penfold's All Metal Aseptic Syringe, No. 68



This instrument is constructed entirely of metal: the plunger and barrel are ground to fit so perfectly that an air-tight chamber is formed without the use of packings or washers of any description and so does away with the many objectionable features of the old style Hypodermic.

IT HAS the standard thread.

NO PACKING to dry out.

NO OIL to contaminate the fluid to be injected.

NO GROOVES around plunger to collect dirt, nor does the plunger fall out of the barrel just as the syringe is filled, as in case of most other aseptic syringes.

IT IS WITHOUT a doubt the most satisfactory metal aseptic syringe on the market.

IT IS PUT UP in a neat, compact aluminum case containing four tablet vials and two needles. Price, complete, \$2.25.



## THE GLOBE NEBULIZER

represents the nearest approach to perfection that has yet been reached, both in point of design, and in material, workmanship and finish. The soft-rubber parts are of the very best quality black rubber.

It is intended primarily for use in physicians' offices, but is also largely prescribed for home treatment, and may be operated either in connection with an air-compressing outfit or by hand.

They are used with marked success in the treatment of Respiratory and Aural Affections by the application of vapor massage.

## The Aloe & Penfold Co.

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Chemicals, Medical Books, Optical and  
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