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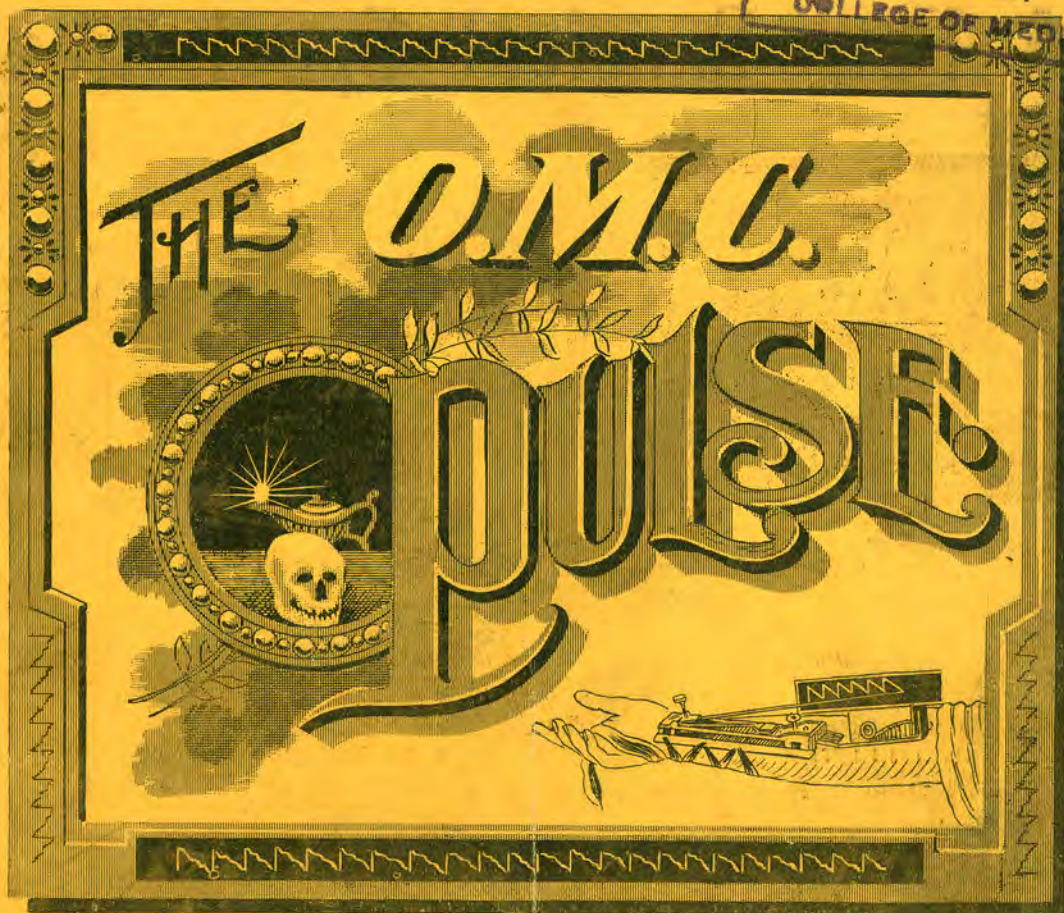
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Official Journal of the Omaha Medical College, Medical Department University of Omaha,  
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No. 5

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College.

# The O. M. C. Pulse.

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## THE CARE OF THE MOUTHS AND TEETH OF CHILDREN.

ALFRED O. HUNT, D. D. S.

In the results obtained from the many scientific investigations in medicine and surgery, as well as dental surgery, they lead one to believe that some time in the future, not so far away, the very best remedial methods will be confined to prophylactic treatment, which will at least reduce either the number of diseases or mitigate their severity and duration.

The alimentary canal will be among the first to be considered to accomplish these results. At the beginning of this canal are situated the mouth and teeth. Any abnormal condition present here will, of course, interfere with the proper mastication of food, and thus to an extent prevent proper assimilation. Nor is this all that may happen. Diseases of the throat and nose may cause mouth breathing, a very pernicious habit, resulting in a disarrangement of the teeth by the pressure of the muscles of the cheek and lips against them, the mouth being open constantly. The effect is more noticeable on the upper teeth. This pressure forces them out of a normal position and malocclusion with the lower teeth and faulty mastication follows.

This article being written for THE PULSE, and as it will come more under the notice of the medical practitioner than the dental practitioner, I do not expect to say much of those conditions that relate to the throat, nose and the eyes, as they belong to other specialties, but from the structural and functional conditions that exist in the nerve and blood supply of all parts of the head, it is not strange that any one of them so connected may be disturbed by pathological lesions located in the mouth or teeth. That this is so has been noticed and continues to be noticed in Ophthalmic literature. Reports are abundant where this connection has been traced to the cause mentioned; more particularly where there has been a lack of accommodation in the eyes. When the disturbance in the teeth was corrected, the trouble with the eyes was also removed.



Reports are also abundant in dental literature where neural disturbances in different parts of the body have finally been found to originate in some dental lesion.

While the process of dentition is essentially a physiological one, and proceeds to its final culmination without serious conditions in a very considerable number of cases; on the other hand, there are many more deaths occurring during this period than at other times, whether due to the eruption of the teeth, or that the latter is only an incident.

Other parts of the system are being developed contemporaneously. The changes in the stomach and intestinal tract preparatory to the reception and digestion of solid food make the child more sensible to irritation, and less capable of resisting disease. Any undue excitement, sudden or prolonged change of temperature, indigestion, eruptive fevers and so forth, may change the physiological process of dentition to a pathological one. Under circumstances like these, it is not easy to decide always to what to ascribe the prevailing conditions. Authors do not agree in regard to these disturbances. It will be wise though to relieve or prevent as many of these conditions as our present knowledge of the developmental process will allow us to do.

The teeth are among the first organs of the body to be developed. The dental follicle in which the tooth is developed is not unlike the Graffian follicle in many respects, at least in the sense that it is an organ, developing many structures within itself, to a final completion and maintaining their functions through the external blood and nerve supply, until the final loss of the organ, the tooth. At the fourth week of embryonal life, the first evidences of the dental follicle begin to appear. At the eighteenth week the enamel and dentine of the tooth begin to calcify. Underneath is the dentine bulb which furnishes the pabulum for the building of the future tooth. These parts develop in this relation until the crown of the tooth is making an effort to perforate the overlying gum tissue. If this is readily done, there is no disturbance following, or accompanying the process. But should there be forcible resistance of the gum tissue, the hard calcified portions of the crown of the tooth are forced backward against the underlying vascular tissue and irritation and pain is the result. Should this be long continued, this irritation involves the nerves and any neural demonstration may follow. The remedy is the lance, cutting a deep incision until contact is felt with the tooth; this giving in most cases instant relief. That there may be a cicatrix formed is not of so much moment, as the relief from other and more aggravating conditions.

The time occupied in the development and complete calcification of the deciduous teeth extends over a period of two years and a half, including the time in embryo. Constant care is necessary during all this time that all cause of inflammation may be prevented or removed. Should inflammation from any cause be allowed to exist, the child shuns all exercise or use of the teeth. The food is not properly prepared to enter the stomach for final assimilation. The principal cause of the decay of the teeth has been shown to be the production of lactic acid by the bacteria present in the mouth in an active state. Alkaline antiseptic mouth washes and early and constant attention should be given to secure the best hygienic conditions in the mouth, throat and the nasal passages. As the medical practitioner has under his care these little ones long before it is generally supposed that their mouths need the attention of the dentist, very great responsibility is therefore resting upon them. It is a common mistake to think that the best thing to do with the teeth is to remove them, whenever they become troublesome, from the cavities of decay. There is no greater mistake than this. The deciduous teeth should not all be lost until from the tenth to the twelfth year. It is just as important to prevent extensive decay in these teeth during their life time, as it is to preserve the permanent teeth during their life.

In the earliest years, the child should have the dentist's care, long before the destruction of the tooth has arrived at the stage of producing pain. Prophylaxis is so well understood by the dentist of today that if these little people were placed under their care and kept there, such a thing as the toothache or the premature loss of the teeth would not be the rule as now, but the exception. The habit of cleansing the mouth and teeth would be early formed, the tendencies to irregularities of the teeth corrected at a time most easy of accomplishment. If this course were followed persistently, there would not be the fear and dread of having the teeth attended to that now exists. Strange as it will seem to the uninitiated, children that are so managed come without hesitation or fear to have anything necessary done and feel a pride in the good condition and appearance of their mouths. It is not difficult to realize that this early care and constant attention to the deciduous teeth will result in a better condition of the permanent teeth. With good teeth well taken care of, there certainly would follow thorough mastication, good digestion, and proper assimilation of food products. After this, good blood, good circulation, splendid vigor. Exercise and motion would be spontaneous and nothing but good health could result.

## SMALL POX.

BY V. L. TREYNOR, M. D.

Smallpox is an acute, infectious disease, characterized by an eruption which passes through four stages, namely; papule, vesicle, pustule and scab. Prior to the discovery of vaccination by Jenner in 1798, smallpox was regarded as the most fatal of all diseases, it causing the death of five hundred thousand people annually in Europe alone. In 1707 an epidemic of smallpox occurred in Iceland, and was attended with a terrible loss of life; eighteen thousand persons, out of a total population of fifty thousand, succumbing to it in one year. In 1734 more than two-thirds of the population of Greenland was lost through this disease. These are but two of the many epidemics which might be noted, but they indicate the enormous death rate incident to this scourge in former times.

*Etiology.*—Strange as it may appear, the nature of the contagion of smallpox is as yet undetermined. It has been ascribed by some authorities to micro-organisms in the pox, but, as Osler says, "They are the ordinary pus cocci, and the part which they play in the affection is by no means certain," and, quoting him still further, "It is not a little remarkable that in a disease, which is rightfully regarded as the type of all infectious maladies, the specific virus still remains unknown."

*Symptoms.*—Three distinct forms of smallpox are described: First, *Variola vera*, divided into *discreet* and *confluent*; second, *Variola haemorrhagic*, and, third, *Varioloid*.

Four distinct stages occur, namely, the stages of incubation, invasion, eruption and dessication. The stage of invasion occupies from nine to fifteen days, on an average about twelve. It has been known to last but eight days, and has been prolonged to the twentieth day. It is not usual for patients to complain of any definite symptoms during this stage.

*Invasion.*—The symptoms of this stage are, intense headache, backache, accompanied by nausea or vomiting, these symptoms being usually preceded by a chill in case of an adult or convulsions in case of a child. The temperature rises rapidly; on the first day it may reach 103 to 104 Fahrenheit, and on the second and third days may go still higher. Marked delirium may be present, and this is especially likely to occur where the temperature is unusually high. These symptoms, particularly the pain in the back and head, are much more severe than those experienced during the stage of invasion of other contagious diseases, and are so suggestive as to always cause suspicion in the

face of an epidemic. It is in this stage that the initial rashes occur, and these assume two forms, namely, the *diffuse scarlatin* and the *macular* or *measly*. These, as a rule, are not general, but are limited, as Simon has stated, to certain favorite areas. They are most frequently seen on the inner surfaces of the thighs, the inner aspect of the arms, and in the lateral thoracic region and in the region of the lower abdomen. These rashes, in the epidemic at Montreal in 1875, according to Osler, occurred in from 10 to 16 per cent. of all cases, and they are of considerable value from the standpoint of diagnosis.

The initial fever and the constitutional symptoms reach their height by the end of the third or beginning of the fourth day, when the eruption begins to show itself. Small red spots appear on the forehead and forearms, and during the succeeding twenty-four hours the remaining portions of the face are also involved, and the trunk as well. As the papules become larger, they assume a more livid color, and they impart a sensation as if there was shot beneath the skin, when the finger is passed over them. With the eruptions, the temperature and general symptoms subside, and this is one of the important diagnostic points in this as compared with other eruptive diseases. From the third to the fifth day the papules change into vesicles, these gradually filling with a clear fluid and presenting a slight depression in the center, this being the umbilication of the vesicle. On the sixth to the eighth day the contents of the vesicles change to a milky hue and finally become pustular, and owing to the filling of the pustule its top becomes globular instead of flat, and it assumes a peculiar yellowish color owing to the presence of pus. It is during this period that the secondary fever manifests itself. The temperature rises, but in "discreet" cases it remains high for only a short time, from 24 to 30 hours on the average, and on the tenth or eleventh day there is a second fall of temperature, and if the case has progressed favorably convalescence begins.

*Stage of Dessication.*—The process of dessication ensues, and is first observed on the parts on which the eruption appeared earliest. This stage occupies a variable period, and in the typical cases observed by the writer lasted from three to four weeks. In the "confluent" form all of the symptoms in the stage of invasion are quite likely to be more severe, the eruption being more extensive, the secondary fever higher and more pronounced, desquamation occupying more time, and is rather more prone to result in pitting. The writer has had no experience with the haemorrhagic form, but it is said to be almost uniformly fatal.

The third type mentioned, *varioid*, is a modified form of



smallpox occurring after vaccination, and in this type the symptoms are usually much less pronounced, although those incident to the stage of invasion may be severe. The papules appear at about the same period as in the *discreet* form, but they are few in number and are usually confined to the hands and face, and they undergo the successive changes of desquamation quite rapidly, and secondary fever does not occur. The complications of smallpox are many, and it is impossible to consider them in so brief a paper as this.

*Prognosis.*—William L. M. Welch reports 2,831 cases of variola, with a death rate of 54 18-100 per cent. He also reports 2,169 cases of varioloid, with a death rate of but 1 29-100 per cent. Osler reports that in the epidemic at Montreal in 1885 and 1886, of the 3,164 deaths, 2,717 were children under ten years of age. Death results, in the early stages, from the toxic effect upon the nervous system, and it occurs during the secondary fever also; the stage of invasion and that at which the secondary fever occurs thus being the dangerous periods of the disease. The average death rate for all ages being high.

*Diagnosis.*—This disease may be confounded with measles, scarlatina, syphilis, glanders in the pustular form, and other eruptive diseases, but by a proper consideration of the initial symptoms of each a differential diagnosis should not be difficult in the majority of cases.

*Treatment.*—The treatment of smallpox, so far as the writer knows, is general. During the stage of invasion it may be necessary to relieve the pain with opiates, and it is always well to unload the alimentary tract with calomel or salines. The diet should be nourishing and easily digested. Cold drinks should always be freely administered. If the fever is high, it should be controlled by the cold pack or cold bath. The question of the prevention of pitting is one which has commanded a great deal of attention. In the writer's opinion, the various means which have been employed for this purpose are valueless, except that the application of remedies which have a soothing effect and relieve the intense itching, tends to prevent this disfigurement simply because of the lessened disturbance of the pustules by the patient.

The important points in connection with this disease, in so far as the general public is concerned, are, first, how to control an existing epidemic, and, second, how to prevent future epidemics. Both of these problems would be exceedingly easy of solution, if the general public could be made to realize the value of proper vaccination and quarantine regulations. The suppression of an epidemic entails the segregation of all who are afflicted with

the disease, as well as all these who have been exposed, and the thorough disinfection of all premises occupied by those afflicted, including contents, clothing, furniture, etc. These sanitary regulations, coupled with universal and frequent vaccination, will not only control a present epidemic, but will guarantee immunity from future ones, and were it not for ignorance and prejudice vaccination alone would, if thorough and frequent, make small-pox a practically unknown disease in comparatively short time.

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### THE DOCTOR FROM A CLERGYMAN'S STANDPOINT.

BY REV. W. D. PATTON, CLERK OF THE COLLEGE.

I have been requested by the editor of THE PULSE to say something of the physician from the clergyman's standpoint. I think I can safely say that there is no one, even among the learned professions, who looks upon the well-equipped physician with more sympathy and appreciation than the minister of the Christ, the great physician who went about daily doing good, and ministering to the needs of suffering humanity.

The *thoroughly educated* and *thoroughly equipped* and *conscientious* physician holds a place of the greatest importance in his relations to his fellow man; while his responsibility and opportunities for doing good can hardly be overestimated. We speak of the *learned* physician, *fitted* for his *high calling*, not only by academic and medical training of a high order; as a man of good common sense, with wisdom to apply his knowledge in the common practice of his profession, and at the critical moment; and also as a man of gracious demeanor, and refined sympathy, whose very entrance *into*, and presence *within* the chamber of sickness is a blessed benediction. Of course there are other types of the doctor and plenty of them, who have been admitted into this noble profession, and are neither an honor to the profession, nor a blessing to humanity. And this brings me to a vital phase of this subject which I wish to discuss briefly because of its practical utility, hoping I may say something to stimulate and encourage our young men in their worthy endeavors to prepare themselves for a propitious entrance upon this, their chosen profession.

Preparation, *thorough* preparation, HONEST preparation, is an absolute necessity to success in your life work. To pass through the medical curriculum and obtain a diploma may be accomplished in a superficial manner, by "stuffing" and "coaching," by "hook and crook," but the man stands nine chances out of

ten to be a failure as a physician. *And why?* Because the foundation is deficient, and his effort to build a grand life structure upon a foundation of broken fragments loosely put together with "untempered mortar" is simply building a structure which is destined to wreck when the crucial test comes, and the man is doomed to ignominious failure. No man wishes his life work to be a failure. Any young man who starts out to prepare for any one of the professions, and ignores the opportunities afforded him in the initial year or years of his course of study, expecting to apply himself with more assiduity during the latter years of his course will find that he has wasted his opportunities and dissipated his chances of success.

The student who enters upon a course of preparation for his life work, as a physician, resolved to attain an honorable eminence in his profession, must also recognize as vital to the attainment of this noble purpose a rigid, earnest, honest application all through the course from the first day of the Freshman year to the last examination day of the Senior year. The student who belittles the opportunities of the Freshman year, and dallies over the grave duties of the Sophomore year, will find like Samson that the Delilah of indolence or pleasure has shorn him of the locks of his strength and power, and left him a mere inefficient weakling.

The student who thinks he can be a hobo the first year of his college course, a hodge podge the second year, and graduate a serious-minded, *cultured* and *refined* gentleman, fitted to command the respect and esteem of educated and cultured people, will find to his discomfiture that he has put on a misfit and cannot exchange it.

At the opening of this twentieth century, considering the high attainments of our civilization in general, and the special attainments of a large per cent of our social fabric, the successful physician must of necessity be not only thoroughly equipped for his profession, but must be a *gentleman*. He is most likely to be successful who starts out upon a course of preparation with a high ideal before him, sets his mark high, and keeping in view its attainment, bends his energies and powers of body and mind to the attainment of that high ideal, reaching upward toward the mark he has set before him, and with high and noble resolves and concentrated effort strives to reach thereunto. The man of major attainments finds room in the medical profession, as in all the professions, and not only so, but he commands the respect and esteem and appreciation of his fellowmen and is an honor to his profession; while the man of minor attainments must jostle

and struggle in the midst of an ever increasing crowd, and have slight recognition, and little appreciation, because he has been "weighed in the balances and found wanting."

And the man who succeeds and makes his way to the top, does not reach such eminence at a single bound, nor does he reach it by some fortuitous chance; but by plodding diligently he rises step by step, by the genius of a steadfast purpose and unflagging perseverance he reaches higher and attains more and more.

In conclusion I would say to the students of both departments of this college, that the possibilities of the young man or young woman of the present day, in this great country of ours, with its great educational facilities, I would say that *your* possibilities are limited only by the endowment of your energy and the genius of unremitting perseverance.

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## Clinical Department.

W. L. WILMOTH, M.D., Editor.

Seemingly to every business there are some dull days. This has been more or less true in the clinical world at the college. For some unknown reason clinical material has been a little less abundant the past month than during any of the preceding months. Perhaps this is due to the more severe weather and to the fact that many are too sick to be able to come to college clinics. It can not be due to the student body, having usurped these cases, have appropriated them to themselves. Perhaps it is owing to the prosperous times throughout the land. With plenty of work and good pay, many people are able to pay a family physician that otherwise would not be able to do so. Other theories have been advanced as to this slight falling off of clinical material, one of which we think is worth mentioning here. We have heard it said by more than one that persons have been offended and perhaps driven from the clinic by thoughtless conduct on the part of students in general. Of course we have no means of knowing if such statements are true or not, but it is perhaps possible, and at least deserves the careful consideration of every student in the college, the lower classmen as well as the higher. It is to the students' highest interest to have and to keep the clinics as good as it is possible to have them, and also to help to make them better. The patient is likely to misjudge the conduct of the student, and to feel hurt, when there is no cause for offense. For his reason all students should be in attendance at the proper time and considerate of the feelings of the patients.



In the December number of THE PULSE, 1899, Dr. Rolhf, '00, gave a report of a case of pulmonary tuberculosis. It will be of interest to our Alumni and outside friends to hear that our friend and patient is yet alive. To refreshen your memories we will give a brief history of the case. In September, 1896, Mrs. ———, first applied for treatment. Even then her condition was serious and tuberculosis well advanced. The patient was given instruction on hygienic and dietetic measures. She was also put on strychnine treatment, beginning with 1-30 gr. t. i. d. She continued faithfully attending the clinic that year and the next, constantly improving and gaining strength. The strychnine was constantly increased as the patient was able to stand it, until finally she was taking  $\frac{1}{2}$  gr. per day. In 1898 and 1899 the patient came to clinic but once or twice through the winter, or when she was suffering from cold or other trouble. About two weeks ago she made her last visit to the college and reports continued good health as far as tuberculosis is concerned. She assures Dr. Milroy she is faithful to her little strychnine tablets and never fails to take her prescribed amount daily, about  $\frac{1}{2}$  gr. While we cannot claim a positive cure in this case certainly much good has been done, life has been prolonged and made enjoyable.

An interesting case has been attending Dr. Aikin's clinic during the past few months. Interesting because it is a good example of the condition of the mind in cases of imaginary bodily ailments. This man had visited a physician (quack) so he says, in Iowa, who convinced him he was being constantly poisoned and that it was only a matter of a short time until he should "pass in his checks." This has been weighing on his mind constantly ever since, and he imagines he is afflicted with all the diseases that flesh is heir to. He has been treated with tonics and put on restricted diet to get his system in the best of shape, and to satisfy his mind that something is being done, while it has been the object of the Doctor and students to convince him that he is really getting much better. He has gained in weight and this is in the doctor's favor. He also is willing to acknowledge that he feels much better now, and so it seems he is in a fair way toward recovery. Similar cases are not uncommon, and it is interesting to note the relation of the body to the mind in these diseased conditions.

The embryo doctor as well as the laity, often believes there is no disease the physician cannot cure. When he enters a medical college he has visions of his future marvelous career, and thinks of the miraculous cures he will soon be able to perform. Ere he finishes his senior year he begins to realize after all, the

doctor is but human. Cases sometimes return many times before there is any decided improvement in their condition. One case in particular has been very stubborn and unyielding to treatment. This is a case of chorea in a young lad about twelve years of age. He has been attending clinic every few weeks all the year, but little improvement has been noted. The case is a severe one, however, and perhaps instructions are not carried out as well as they ought to be. At his late visit to the college there was some improvement in his physical condition, although little change was noted in regard to muscular twitching and contractions.

An interesting case of Ptyalism came to the college clinic about the middle of February. The patient had been taking the "compound cathartic pill," which resulted in salivation. A number of the students had never seen a case of Ptyalism, and so were glad to have this privilege.

About the same time a very typical case of ascites came to the Methodist hospital. The abdomen was distended to the utmost and all the signs were present. The succussion wave and the dilated veins were especially noted by the students. Paracentesis was performed and about  $3\frac{1}{2}$  gallons of water taken from the abdomen.

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# The O. M. C. Pulse.

Volume 4.

Number 5

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Publishers

OMAHA MEDICAL COLLEGE

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*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.*

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## Editorial.

Almost every medical college has a clerk whose painful duty it is to attend to the doings and misdoings of the students. It is our fortune to have serving us in this capacity Rev. W. D. Patton. Mr. Patton, upon request, has written an article on "The Doctor From a Clergyman's Standpoint," and in it dwells particularly upon a good, thorough foundation for the medical man as an essential for success. Another phase explicitly brought forward is the tendency to slight the present for a future spurt, but as we all know, it is rather hard to make up for lost time with quite enough ahead of us in the gallery of mysteries to take our time each succeeding day.

Over confidence coupled with dire neglect has lost many a battle. At the present time the qualified medical practitioners seem just about to be thrust on a par with men not fit to rank

as competitors. Our legislators are about to pass their opinion either pro or con on the legalization of Osteopathy and Christian Science. That they will be successfully piloted to a goal of safety and triumph seems quite probable. Dr. Jonas in his talk given a few days since places the blame at the regular medical practitioner's door and so it would seem when only five or ten of them out of 700 or 800 practicing physicians in Nebraska would attempt to use their influence against these bills. To protect the medical profession and maintain it at its present position of respect every physician should exert himself to stop legislation legalizing the wrong thing and placing four years of hard study on a level with six to eighteen months study of two or three branches of medicine.

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Dr. V. L. Treynor has favored us with an article on small-pox. As a great many cases have been treated by the Doctor of late he has surely had ample time and a splendid opportunity to study the disease in all its different stages, so that his opinion on obscure points of the disease can well be relied upon as quite correct.

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Dr. A. O. Hunt, Dean of Omaha Dental College, and whose likeness graces one of the first pages of our February issue, has added to our reading matter a very interesting paper on "The Care of the Mouths and Teeth of Children." The Doctor, realizing that our circulation is confined almost entirely to the medical profession, has taken pains to present the subject from a medico-dental standpoint, a feature which will be much appreciated.

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Our Freshman editor, Mr. E. A. Merritt, came very nearly being one of the unlucky sufferers from appendicitis. The operation was performed by Dr. Davis just in time, as already pus was quite in abundance within the appendix. This again teaches the great necessity of being able to know just when to operate in an emergency case. Mr. Merritt has made a splendid recovery and will soon be back at his old doings.

---

We should all remember that it is our duty to stick to our word. It is a very hard proposition for a committee to explain why out of fifty to seventy orders for college pins only a third were taken and it is not very fair for them to be compelled to stand the loss.



## Alumni Department.

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GEORGE H. BICKNELL, M. D.

Dr. Harry Burdick, '98, has just returned from a post graduate course in Chicago.

Dr. A. B. Lindquest, 1900, has been appointed house surgeon for one year in the New York Polyclinic Hospital.

Dr. F. M. Muller, '94, who was for a number of years professor of chemistry in the O. M. C., passed through Omaha recently on his way to England. He intends taking a degree in Guy's Hospital, after which he will locate permanently in England.

Dr. Chan, the genial young Chinaman who graduated from the O. M. C. in the class of '97, writes that he is assistant surgeon in the General Hospital in Canton. His many friends in this country will be glad to hear that he is rejoicing in the possession of his head through the present turbulent times in his native land.

Alumni changing their locations should always notify the secretary of the association. The writer has frequent requests for a correct list of addresses of Alumni. A member of the Faculty who is prominent in insurance circles recently informed the writer that he frequently had a chance to appoint examiners in various parts of the northwest and that he preferred to appoint "our boys" when he knew their addresses but that many of them were unknown to him and that he could not locate them "by intuition." That is about the way we have to locate a good many of them, we send out a circular letter to each Alumnus and only about one out of five has enough common business courtesy to acknowledge its receipt. If inside of a few months the letters are not returned to us we conclude that the members must be at the addresses given in our last list and so mark them.

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Mr. Orr has kindly furnished the Freshman notes in the absence of Mr. Merritt. His remarks about college spirit are quite in unison with a great many others, and we hope to see a change for the better.

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Alumni subscriptions are as yet quite in the minority. Our financial affairs need your subscription.

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## Class Notes.

### SENIOR NOTES.

A. G. EMERSON, EDITOR.

R. A. Hawthorne is our solid salvation on the geometry tests given daily by the Juniors—presumably not “society” men.

S. B. Hall has deserted the Linton Block and is happily located southeast of the college—not too far away to attend the “meetings” however.

B. L. Perlee has the gratitude of his friends for a clinical exhibit obtained from Dr. Somers. 'Tis the proper spirit. If you've anything instructive pass it on.

B. W. Hall marketed Villisca cattle to the value of a few thousand about February 15th, and consequently was not compelled to accept the reduced rates on tie passes.

Miss Freda Dummer was missed by many members of the class during her valentine vacation and even a Junior was heard to say: “'Tis sadder than life in the Philippines.”

J. F. Jones has contracted a severe attack of Koettergoat-algia. Max advises congenital applications as a specific preventive measure. Says its been very successful in his case.

C. T. Gritzka is the most amiable man in the class unless a Junior attempts to jolly him about the letter that never came. Perhaps a PULSE would make her more prompt in replying.

R. A. Dodge defended his cause nobly in a recent class affair and would have won had not his followers been posing for a picture at the photographers for whom Roy was working.

W. H. Loechner is not so leisurely when a little emergency pull is required in class politics, and he too, is capable of carrying his college ways into county and state affairs in the future.

S. V. Fitzsimmons is pretty good authority on yellow fever and the discoverer of its etiological factor. His knowledge was obtained from practical observation during the Cuban campaign.

W. L. Wilmoth, the competent clinical editor, has petitioned the Faculty for protection against Sophomores and others reporting cases concerning billy goats in the columns of THE PULSE.

J. S. Wainwright recently remarked that he dreaded to see commencement approaching because it will seem so slow to live in a small town after spending one's life in such cities as Omaha and Gretna.

A. M. Tower successfully treated his brother during a severe

sick spell. When those who know us as a brother should enlist our services it is evidence that four years of study have accomplished something.

J. R. Nilsson is extremely good natured, for in the midst of a class scrap his smile exists and he is the only man in the class who didn't threaten the scribe with violence because of the January "hospital report."

T. M. Gilmore was sitting for a picture while the scrap went on. He also bears the honor of being the most honest man in the class for he admits having a location spotted while the rest fight shy on personal subjects.

W. F. Herron is as strong as ever and each of his classmates rejoice to see his smiling face, for the sun of hopefulness was over-shadowed early in January when it was feared we'd miss him for the balance of the year.

For Sale: A very desirable and extensive practice among the most popular people of the city. Considerable major surgery in sight. Great gynecological graft. Will sell cheap. Reasons for selling, Omaha Medical Society.—A. Few Freshmen, M. D.

E. H. Smith is acknowledged to be the best man in the class and yet there is room for argument on the ground of partiality. For instance, in answer to a question in electro therapeutics he simply said: "A Watt?" and received a round hundred for his effort.

A. A. Robertson acquitted himself nobly as a committee of one or arrangements for the reception extended to the Seniors by Dr. Treynor. Council Bluffs and her eminent physician will be gratefully cherished by the class of '01 full many a future season.

The following is a "Fact (?) Smile" reproduction of a notice which appeared on the college bulletin board recently: "All Juniors are hereby requested to desist from administering medicine on their own responsibility and are advised to solicit the supervision of a Senior."

S. G. Allen has perfected a chained lightning system of get-there-diagnose-and-get-away process in student-o-midwifery which his assistant operator greatly appreciates. 'Twas born thirty minutes after the president's departure and he is suffering no untoward effects whatever.

L. M. Leisenring lately demonstrated his eloquent legal qualities by drafting a class resolution that would do honor to the most brilliant barrister. Some day when the state legislature is in a deadlock it is not improbable that the doctor's cunning hand will control a heavy corner of the slate.

F. A. Wells was in the midst of a very grave surgical operation "just as we went to press" last month. He succeeded in removing a large tumor which was only separated from the brain by the thin plate of the parietal bone. The patient made a complete recovery which bears great credit to the doctor's skill for ninety-nine out of a hundred of these cases die. "wen"

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### JUNIOR NOTES.

B. W. CHRISTIE, EDITOR.

The paying up of our tuition, fly cops, brick-bats and Washington's birthday all crowded us last week.

What is the purpose of further study? When a man has attained the acme of his ambition he might as well cease to try.

The "Doctor" was a former member of our class when we were Freshmen. I suppose that we have all missed a year of school.

W. Y. Jones has at last mastered the art of auscultation. He has at last listened to the melodious rales and rapid heartbeats through the medium of a maiden's breast.

"Dr. Charles Yoder, well known at this place, and who is now attending the medical college at Lincoln, has decided to locate and practice his profession at Kimball, in the western part of the state."—Calloway Courier.

The class on bandaging and minor surgery gives many a chance to reveal their Sandow physique. Quite a number have availed themselves of the opportunity. We dare not say more for fear we get called down during the next hour.

We welcome a new member to our class. At least if attendance counts for anything he is a new member, his regularity in this respect being better than many who were with us from the first. We suppose that in the class that he began in lectures became too slow, in short that he became too advanced for the course presented and promoted himself. We again welcome the new member.

Stokes claims to have discovered the innocent look of Rathbun. But since he spoke of it two or three have laid claim to the first mention of it. It is interesting though, as it settles once for all any lingering belief in phrenology or allied sciences; for if we can't judge a man by his countenance, especially when not affected by whiskerphobia, we certainly cannot by feeling the bumps on his head.

At the earnest request of three members of our class we have sorrowfully given up our idea of bringing fellow classmen



in closer touch. We realized after the last edition of *THE PULSE* that even this praiseworthy idea could be overdone. We will not demand the right to the few locks of hair we lost nor payment for the incisors swallowed for we did not limit the closeness of our intimacy. Thus, we are compelled to bury all hopes of making the Junior notes interesting.

We thank the Senior editor for his kind hint that we don't "practice what we preach." We meant our sermon to awaken ourselves as well as the rest. If the old axiom would be carried out literally there would have to be a long and trying search to secure enough ministers of the gospel to fill our pulpits. Still, we take this gentle hint to heart and will try and do better in the future, as we hope all the members of the O. M. C. will. Let us give a good long pull and all together for the advantage of the school.

Apropos of the giving out of the "Code of Ethics of the American Medical Association," one of the upper classmen made a remark which I think contains the kernel of the nut. He said: "If a man is a gentleman, he will practice medicine in the correct manner; if he is not, all the ——— Codes of Ethics in the universe will not stop him from practicing in an illegitimate manner. But the "Code" contains a great deal of information which it would be well for all of us to read.

### SOPHOMORE NOTES.

MAX KOETTER, EDITOR.

What is a foreign leucocyte? Ask Ransom.

The anterior belly of the digastric arises from the symphysis pubis.—Gage.

It is almost time for us to get our ponies in readiness for the spring races.

Stucky sold his to a mattress factory and now his face would stop a clock in diastole.

We would suggest that Agee investigate the pathogenic bacteria of the oral cavity as his work in original research.

Chambers was very successful in his soap experiment and says he will go into the soap business permanently this summer.

Jungbluth and Harrison are at work on a new book entitled "How to live on one cent per day." Their diet consists of rye bread, bologna sausage and distilled water.

"Peace hath its victories as well as war," and a game of pitch hath its victories as well as foot ball. If you don't believe it ask Moike Platt, Adipose Wherry, or Dink Iverson.

Wherry never intended to quit school, neither was he called out of town on business, his sudden disappearance was simply due to grs. vij of hydrargyrum chloridum almighty.

Mrs. Rice recommends the following prescription to those who are in danger of having their shoes removed in the lecture room: R Formalin 100. Aquae dest. q. s. ad. 1000. M. S.—Apply externally before putting on your sox.

To the Editor of Sophomore Notes: Please answer this question in the next issue of THE PULSE. What is the proper thing to do if your face comes in contact with a cold snowball?—Bright Junior. Ans.: Perforate a window with a piece of furniture and let in some cold air.

### FRESHMAN NOTES.

J. F. ORR, EDITOR.

For the latest in automobiles see Underwood.

Benning says that his college days have been "the happiest of his life."

Little Dick and Uncle Ebe are getting to be great "sports." Ask them about their latest.

Perhaps Dr. Ramsey has forgotten that he is to lecture twice a week and thinks it is twice a month.

With the assistance of Dr. Yeakel, Overstreet and Harrison contemplate the revision of Stohr's Histology.

President Petersen and Gates each say that it gives one that "All Gone" feeling to appear before Dr. Van Camp for the first time.

When the Freshmen give their banquet in the spring, Merkel declares that "White Line" must not be put on the list of liquid refreshments.

Dr. Draper, president of the University of Illinois, in answer to the question "Why do we go to College?" replied: "To the end that young men may be safely aggressive among educated people and become fitted for leadership in affairs." Are we doing so here?

Since the Sophomore's have not accepted our challenge to a three point wrestling match we must content ourselves with the belt, but to show that we have not forgotten you we publish the following lines as a reminder of St. Valentine's day:

To the Sophomores:

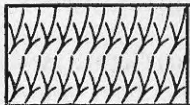
When you receive this valentine,

Think of the virtues that are not thine.

We have not a single debating or literary club in college and

yet there is no one thing by which we can sway public opinion so easily as by means of a ready speaker. We have no social or fraternal organization which have a standing in Omaha. We have good material for several glee clubs, but we do not encourage it. In fact we loose the best part of our college training and it is solely our own fault. We have a faculty who have the best interests of the students at heart, but we do not organize and become a power because we lack college spirit.

To prove to the scientific world that it is not necessary to be a Senior in order to suffer with fortitude the pain of an operation our classmate, E. A. Merritt, consented to have an appendectomy performed. The operation, under the skilfull handling of Dr. Davis, was a complete success and owing to the temperate habits and good hours of Mr. Merritt his recovery to date has been very rapid. The class extend congratulations to him and hope that after a few weeks' visit at his home he will be with us again, with his ever ready story and that fatherly smile that has won him friends wherever he has been.



## Dental Department.

### SENIOR NOTES.

W. E. PROPST, EDITOR.

Dr. Hunt returned the 4th.

Clyde Metzler took a few days lay off as the result of an attack of grippe.

Dr. Hatfield, Jr., has returned and we hope his stay will be longer than before.

The plating apparatus is no longer a dream—it was put in operation the 13th.

Gard thought it was "just his size" but Dr. Metzler concluded he had the first try.

Howley is not longer a permanent fixture of the Junior class. He packed his grip and quit college the 15th.

S. W. Tole, a former student of the O. D. C., made us a pleasant call the 14th. He is now located at Seward.

Gard said he didn't do it, Bellamy was not there and Propst was only a witness. They paid for a new fuse just the same.

The "grand march" of the Juniors February 1 has not developed anything of a serious nature as yet. "We won't do a thing," as they put it, was quite correct.

Dr. Hatfield was with us January 18th and gave his first lecture on porcelain art. The boys with the full solder aren't the only ones who have troubles. "There are others."

Wilson returned the 11th. We expected all kinds of reports but the president must have "layed off" for he looks much improved as the result of his eight weeks' vacation.

We are glad to know that the Juniors were so liberal toward the library fund, nearly everyone contributed and became a member. It is hoped the Freshmen class will get into line.

Driver held the lucky number and is now the proud possessor of one of Dr. Metzler's saliva ejectors. Bellamy says there was some satisfaction in the cigar if it did cost him \$2.85.

Theo. Kroeger went home the 2nd to spend Sunday with his family, while there he was taken down with grippe and was confined to his bed for several days. He answered roll call Monday the 11th.

There are times when Seniors will clean teeth and it isn't for a tip either. We wonder what detained Meradith and Morgan so late Saturday afternoon of the 9th. Boys, the infirmary is supposed to close at 4 o'clock.

The Seniors took their final "exam." in dental histology the 4th and have now taken up regional anatomy. The boys are all high in their praise of Dr. Kelly as to knowing how to present this subject. All were especially pleased in the laboratory work.

The library is now open and we hope that some of the Juniors who were kicking so hard will improve the opportunity. Books may be had by applying to the assistant librarian, whose name will be posted in the library. We would suggest that all read the library rules.

Yes Roy, the dance was a success both socially and financially. We all know you "did it" and made special mention of the fact (the punch too), so why not let it rest. It isn't hard to guess why the other classes haven't the courage to "give a dance." It's the nerve that's missing.

Owing to the snow storm the 3rd the O. D. C. was not very well represented at church, but those who did face the storm were well paid for the effort. The song service was excellent, especially the solo by Mrs. White. The Juniors had the largest delegation, Seniors and Freshmen being sadly in the minority.

The S. S. White Mfg. Co. have placed in the infirmary one of their late model Wilkerson chairs. As in everything else the White people do not propose to follow, and in this chair the den-



tist certainly has his ideal. It is not only a swell looker, but its mechanism lower than any other chair, a point looked after closely by all practitioners.

During the snow storm the first of the month for an hour or so during the afternoon, there was a lull in the clinic and a number of boys were telling their experiences and the slaughter they had made upon the rabbit. Dr. Metzler joined the group and when it finally came his turn the boys heard his story and then adjourned. If you have a rabbit story don't fail to exchange with the Doctor. At present he has the medal.

A certain Junior who does not room over two blocks from the college was noticed leaving the college one morning about 8 o'clock with his instrument case and we also noticed he did not answer roll call at the 8:30 lecture either. We think there is a "special" lecture due the Juniors, and while we do not like to "knock" on a schoolmate, there is somebody going to be upon the carpet if they can't take a hint. This might also apply to a certain Senior.

"Famous" (Call) is once more in our midst and his smiles are quite frequent in the infirmary. Our advice to Schultz is to keep an eye on him as "Famous" is quite a drawing card.

We are pleased to note that Dr. Sherraden is now giving us clinical instruction each Friday afternoon in the infirmary. We appreciate the sacrifice you make in giving us these hours Doctor, and sincerely hope that others of the Faculty may have enough interest in our welfare to give us an extra hour occasionally.

In a visit to the office of one of the Faculty while talking to the lady attendant asked her how she liked Mr. Morrison. Her reply was that she liked him very much and was glad when he came up to work, as he was very good company. She also said that he called at her home quite often. Now Morrison, don't tell us that Dr. S. wishes to see you every time 'phone 2018 calls up. Better bring around the cigars or we will see that a copy of THE PULSE goes to Red Cloud.

From what we have heard we are of the opinion that the Juniors will occupy their entire column this month in a "special roast" of the Seniors. To what this special effort on their part is due, we cannot say, but they are evidently "sore" about something, for Dr. Morris was heard giving instructions that each member of the class would be expected to hand in a "roast." Please be as easy as possible boys, but we aren't like the fellows who can't take a joke, and we won't get sore either.

## JUNIOR NOTES.

R. D. MORRIS, EDITOR.

Did you get your work in?

Don't get swelled up Seniors. You were Juniors not very long ago.

Why is Sample like Mrs. Nation? Because he has his little "(hat)chet."

Irvins paid the editor a very pleasant call last week. We hope he will come again.

Why should you never go into the water after a full meal? Because you won't find it there!

Akin is a pessimist and believes not in what he is told, consequently he pulled the wrong tooth.

Hawley is a frequent visitor in the laboratory and occasionally he says "Heah" at lecture roll call.

If a woman carries a fat pocketbook you may depend upon it she has her pocket handkerchief in it.

Granger has such a large clinic that he has to cut some of the lectures out to accommodate the fair ones.

The Doxology of the O. D. C.: "There'll be no brass plate there." Haller is heavenly choir master.

Everybody goes to "quiz class" now every evening. Lent itself could not do what the impending end of the term is doing.

An anatomy quiz class has been organized with Downar as quiz master. They go to the Trocadero and get practical demonstrations.

Haller cleaning little girl's teeth. Little girl fidgeting around in chair: "What's the matter, little girl, does it hurt?" "No, but you have your finger in my eye!"

Turley was trying to pump some hot air into "a lady student's ear" a few days ago, but she thought he was an ear specialist and said "Wat 'er you giving me!"

Kindergarten in Bacteria: In Germany they call them "germs;" in Paris they are called "parasites;" in Ireland they're dubbed "Mikeroberes," but I would call them "bugs."

Dr. Hunt is formulating plans for the extensive improvement of THE PULSE. Subscribe now and get in the pult in time to be a charter member of the new subscription list.

Shearer has been doing good work in bacteriology lately. His specialty has been the "hanging drop." He is proud of the application. Did you ever notice how pleased he looks when the name is spoken?

Morris paid a flying visit to Red Oak lately. On returning

with a larger grip in his hand he was asked "what had he red?" He said, "I have Red Oak, its a cinch." But on reaching home he found he only had three red bricks.

Lemar is going to found a "public library" with the proceeds of the magnificent "tips" his unusually good work always demands. The only stipulation is that the school raises enough to maintain the royalty of it in its usual splendor.

### FRESHMEN NOTES.

K. C. PORTER, Editor.

The Anti-Smokers League is growing in strength, if not in number.

When you want to see the class register you will have to look up.

The anatomy lectures are a very prominent feature of our course, "nit."

Dr. Barbour is so very busy now that his visits to the class are very rare.

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The boys are doing a rushing business getting ready for the final quiz on dissection.

All the Freshmen that can't climb will profit by taking instruction from the President.

The Freshmen will fill up the vacant side of the show case in the near future and show what they have accomplished this season.

The boys are greatly pleased with the chemistry quiz as conducted by Professor Lemar, who handles the subject in a masterly style.

We noticed the Junior work placed in the show case and wondered what class did it. Was there ever anything like it before? No, couldn't have been.

Those receiving honorary mention in Christmas examination in anatomy were Irvines, Scarr and Spicer. What's the matter with the Freshman Dents?

We wonder why so many Juniors take their instruments home at night. Are you afraid somebody will swipe them during the night, or is it a case on the side?

Dr. S. B. Towle of Seward spent a couple of days in the city with George Gallagher, and while here visited the school. Dr. Towle took two years of his course in this College.

Junior Doyle promised us some time ago a demonstration in the art of mixing plaster. We are still waiting and hope he will soon come for the year is fast drawing to a close.

We understand Dr. Metzler is quite a story teller. Can't you come over Doctor, next time it snows; for we have some hunters in the class who would like to swap stories with you.



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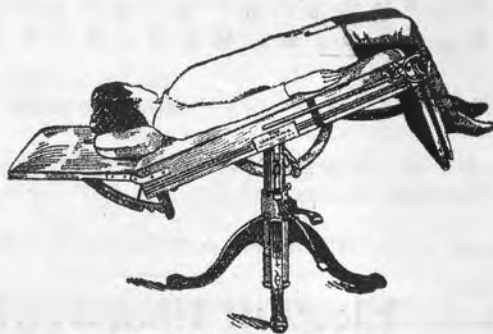


Tim Todd has a fine assortment of valentines that he will dispose of at reasonable terms. Tim says they are as good as gold for he can send them to his friends next year, or else use them to advertise his business.

Dale Woods is making an enviable newspaper record. He recently distinguished himself by stopping a runaway team on one of the principle streets of the city. It was a brave and courageous act, cleverly done and is worthy of recognition. We are proud of Dale.

R. W. Bliss, who graduated in a course at the State University the first of February, spent a few days here with his brother of the Freshman class. Mr. Bliss intends taking a medical course and was greatly pleased with the arrangements and the work as carried on at the Omaha Medical College.

We very much regret that a certain member of the class considers it a humiliation to make amends for ungentlemanly conduct to one of our professors. The Doctor has spared no efforts to advance the class and make it proficient and all that he has said and done has been for the best interests of the students.



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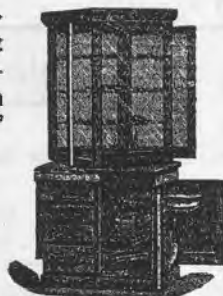
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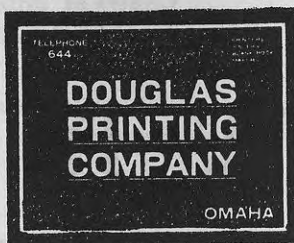
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Senior students who have not yet decided upon a location would do well to consult us with regard to it, as we can furnish a list of good towns with reference for further information.

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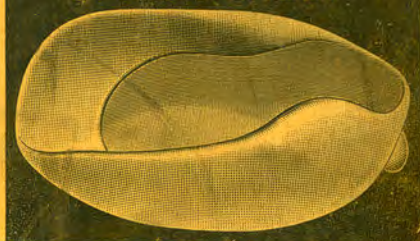
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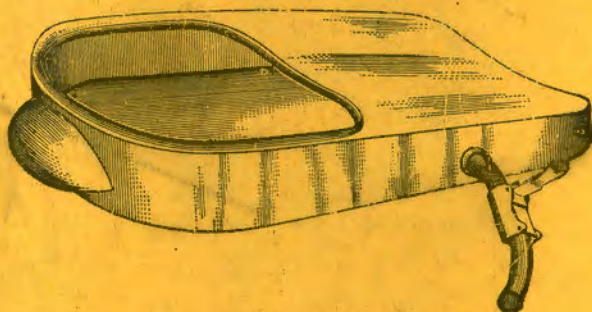


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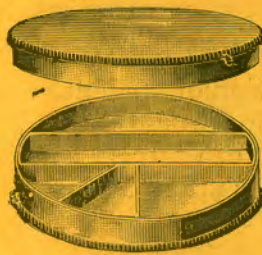
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