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The Pulse

THE CONNECTING LINK BETWEEN
STUDENTS, ALUMNI AND FACULTY
OF THE

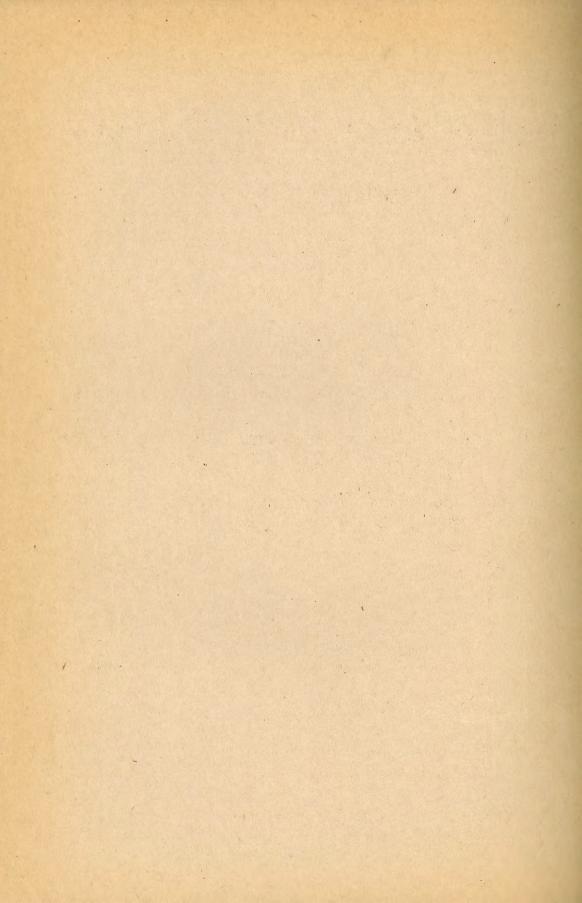
UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE

Vol. XI

JUNE, 1917

No. 9





The University of Nebraska College of Medicine

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PUBLISHED MONTHLY

UNIVERSITY OF NEBRASKA COLLEGE OF MEDICINE 42nd and Dewey Ave., OMAHA, NEBRASKA

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STAFF:

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R. P. Westover, '18

L. Riggert, '17

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ADDRESS ALL CHECKS TO THE BUSINESS MANAGER

THE POSITION OF THE UNDERGRADUATE IN THE PRESENT CRISIS.

War, which has for so long seemed a thing apart from us and familiar only thru the press, has at last called at our door. Even now two of our number are being trained for the service at the front. We as a carefree bunch of boys found ourselves over night transformed into men upon whose decision and the decision of others like us depends the fate of a nation, this nation. To this we at once responded and asked what can we do or where can we serve best.

On April 10 Dr. Cutter received a telegram from Frank Martin of the Council on National Defense stating that all medical students should remain in school and not enlist on line organization. About this time the boys were registering at Ft. Snelling and a number of our fellow students were eligible but heeded the telegram and did not make application. During the period of the next six weeks several letters and numerous telegrams were received stating: "It is the patriotic duty of all college students intending to study medicine to remain under instruction until the country can avail itself of their trained services." "All medical students must in the interest of national safety continue their work until graduation." Then the call of registration for selective draft sounded and we who had obeyed the previous instructions to a man, registered and then wondered if we would be drafted. No instructions had been received from Washington saying that we would not be subject to draft. In answer to a letter from Dr. Cutter, Wm. F. Snow stated: "All medical students were subject to registration between the ages of 21 and 30 but in all probability President Wilson would arrange tribunals by which medical students would be exempt from draft." This was the last communication received and thus the matter stands. All we can say is that we hope that our beloved country will not make the mistake of the Allies and close the only source from which a supply of medical men may be had. We believe we do so much more good as doctors of our beloved profession than as men in line organization but if President Wilson wants us in line organization we stand ready as true Americans and will do his bidding without whimper or a

grumble.

Some might think that this sounds as if we were "slackers." stand to the nation as true patriots as those who crossed the Delaware with the Father of Our Country. We want to serve but we want to serve where we can serve best, and give the best service. Few in the world realize that regardless of war we have chosen for our life's work the position which requires the greatest amount of sacrifice. First we sacrifice our eyes burning the midnight oil. Next we sacrifice our physique by not getting enough rest and getting irregular meals. expose ourselves to deadly diseases. We will go out on any case regardless of whether we are going to get anything for it or not. We neglect our wives because when we are home we must use every spare moment reading to keep ourselves well posted and up with the times. We, and we alone, realize that after all it is love of our fellow men that makes us doctors. We seek to save, not to destroy. Sacrifice, "man dear, we will sacrifice as readily, if not more readily, on a blood swept battle-field than the Gordon Highlanders that turned the hordes of Kaiser Bill in retreat." Death has no sting if they will allow us to practice our profession just long enough to save one poor soul.

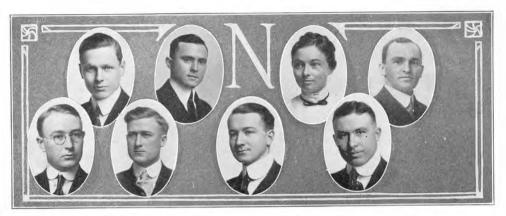
Hence the position of the undergraduate is to stay in school if allowed, do his bit as his nation's chief would have him, be with his Stars and Stripes, right or wrong. In short, give his life in the hands of his nation

to do as they seem fit with it.

SENIORS.

Four years ago you came as Freshmen to the portals of the U. of N. and tremblingly began your life's work. Now trembling you start to practice what you have learned. The happiest years of your lives have passed and yet every undergraduate in the school wishes he were in your place. The gates of opportunity are open to you. Success is becoming to you. Go! and take it. The school, your school, is hoping and praying for you to make good and you must if you are to uphold the dignity and honor of your school. [Look back on us with the favor as we look on you at parting. God speed and good luck is all we can say as we see you pass over the hills, whose summit we have not yet attained. You are Cornhuskers. Bear that well in mind, because before the sun sets on your head for the last time the Cornhusker school will have marked its place in the hall of fame and your name will want to be there. Boost for us as we will boost for you. May God bless you and help you to success.

SENIORS



Arthur James Ross, Jr., Scott Salisbury, Lydia Schawm, Raymond G. Sherwood Andrew Senamark, Vernon V. Talcott, Charles W. Way, William Tell Wildhaber

ARTHUR JAMES ROSS, JR.

Four years of good marks have failed to spoil his disposition or his smile.

SCOTT SALISBURY

The noisiest (?) chap in the school.

LYDIA SCHAWM

A pinch of common sense is worth a university full of learning.

RAYMOND SHERWOOD

And he would talk—ye gods! how he would talk.

ANDREW SENAMARK

Now Andrew remember you're a gentleman.

VERNON V. TALCOTT

Oh girls! if you ever get married.

CHARLES W. WAY

When I speak let no dog bark.

WILLIAM TELL WILDHABER

Ye gods! if thou wouldst teach the canine something thou must know more than the canine.

U. N. C. M. PULSE

NU SIGMA NU



Rusche, Riggert, Salisbury, Burman, Montgomery, Krahulik,

Priest, Wunder, Mulligan, Figi,

Weith, Safarick, Losey, Senamark, McCormick, J. Johnson Sunds, Buntin, Melci Melcher,

Weymuller, ! y, R. Johnson, Ross, Cassidy,

Murphy Davis, Bailey, Wilbaher, Folken. Schembec k

PHI CHI



Rodgers, Graham, Lanphere,

Jones, Minthorn, Misko,

Church, Eyerly, Freidell,

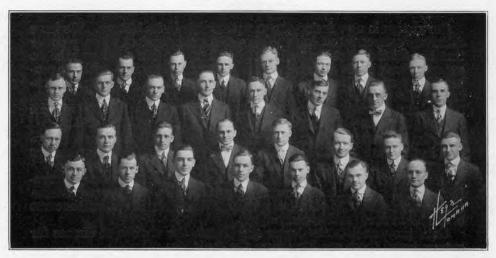
Edmisten, Deal,

Hanisch, Morris,

Keller, Stuart,

Griess Brown Gerrie

PHI RHO SIGMA



Collins, Northrup, Frandsen, Thompson,

Larson, Cultra, Walvoord, Hoffman, D Waters,

a, Dacken, Nielson, Huestis, Nol Sederlin, Surber, Coleman, Davis, Sherwood, Talcott, Way, Updegraff, Weigand, Kirkpatrick,

Nolan, Johnson
Beede, Dow,
Vay, Meyers, Deering
ick, Owen, Newcom

Eusden

NU SIGMA PHI



Ivers,

Churchil Hunt

Gibbs Brant

Sheldon

THE MEDICAL PROFESSION IN OUR PRESENT NATIONAL CRISIS.

Our nation is now facing the greatest crisis in its history. We have definitely entered into a war with Germany, the greatest military power that has existed since the beginning of time. Within a few months we expect to have under arms considerably over a million men, with the probability of an additional million within a short time. Plans are maturing for the sending of an advance force to Europe in the immediate future, and within a year we may have a million men fighting with the Allies against the Germans on the battle fields of the Old World.

With this arming of the nation, with this participation of our countrymen in the fearful strife now being waged in this world's war, a serious

responsibility rests upon the medical profession of the nation.

Our soldiers must be cared for when injured in battle, must be carefully tended when stricken down by disease and must be protected from the wholesale assaults of infections which have heretofore been the curse of armies in camp and in campaign.

Until the war between Japan and Russia the victims of disease far

outnumbered those resulting from the casualties of battle

We are prone to look upon the spectacular side of war, and to think of the clash of squadron with squadron, regiment with regiment, brigade with brigade, division with division, and to imagine the fierce turmoil, swirl and din of battle, while paying scant attention to the more sinister side—DEATH and SUFFERING from disease.

In the Mexican War, 22% of our regular troops died of disease and 14% were invalided home, while only 5% died from the casualties of

battle.

During the Crimean War (1854-1856), of the 310,000 French troops—70,000 died from disease and 65,000 were invalided home, only 7,500 being the victim of battle injuries. In this war the English lost 21,000 out of 111,000 from disease.

During our Civil War for every man who succumbed from battle

injuries, two died from disease.

The toll demanded by the Spanish-American War was $12\frac{1}{2}$ deaths

from disease for every 1 resulting from wounds.

The Russo-Japanese War, in consequence of an enlightened application of the teachings of preventive medicine, introduced a most decided change, the record of this war being about 2 deaths from battle injuries to every one from disease.*

Soon our new levies will be pouring into our new camps of concentration throughout the country, most of them in the South where weather conditions will be more favorable for winter training, but where disease

conditions will be more rife.

Will the terrible results of the Spanish-American War be reproduced, or will our statistics rival those of the Japanese during their terrible war with Russia? This will depend upon the Medical profession of this country.

The officers of the regular medical corps are far too few to do more than train the medical officers of the new levies, perform the technical

^{*}Military Hygiene, Harvard.

duties of the hospital organizations and command, institute and regulate sanitary measures for protecting the camp. The medical and surgical work must of necessity be done by the medical men brought in from civil life.

Few realize how many of the latter will be required. About 5,000 will be necessary at once and 10,000 more before twelve months time.

These physicians and surgeons utterly inexperienced in military life and methods, must be trained and coached by the members of the regular Medical Corps.

It is reported in the press that four training camps for these new

medical officers will be established in the near future.

These facts should show conclusively the great need of medical men in this present time of national emergency and should appeal most forcibly to the patriotism of the profession of our country. There should be a rush of new blooded patriotic American medical men to enter the Medical Officer's Reserve Corps of the army. This corps is a convenient and efficient gateway for their entering the service of their country at this time.

It is unthinkable that the noble and self-sacrificing medical profession of our country, which has ever been ready to come forward in times of public pestilence and disaster, would permit their fellow-countrymen, being organized and under training for the defense of the nation, to

suffer for lack of proper medical and surgical attention.

What a disgrace to the American medical profession, would be the occurence of disaster epidemics of preventable diseases in our camps in consequence of the indifference and lack of patriotism of its members!

These facts should be taken to heart by the graduating class of the College of Medicine, University of Nebraska, as well as by the former graduates of the institution. J. M. BANNISTER, A. B. M. D. Colonel U.S. Army, Retired.

DO YOU?

Believe in national preparedness and then Fail to keep yourself physically fit? Wash your face carefully and then Use a common roller towel?

Go to the drug store to buy a tooth brush and then Handle the entire stock to see if the bristles are right?

Swat the flies and then

Maintain a pile of garbage in the back yard?

U.S. PUBLIC HEALTH SERVICE

DO YOU KNOW THAT

One million two hundred thousand Americans die each year? Heart disease, pneumonia and tuberculosis cause more than 30% of deaths?

Sunlight and sanitation, not silks and sating, make better babies?

A female fly lays on the average of 120 eggs at a time? Marriage and Divorce records are more complete than those of births and deaths?

Mare Island, Calif., June 21, 1917.

Dr. I. S. Cutter, Omaha, Nebr.

Dear Doctor:

I have been just three weeks in writing this letter and I must apologize for not giving it better attention, however I hope you will pardon me as Andrew told you most of the news when he wrote you.

We are having a splendid time out here, and enjoy the change of country very much. Everything seems to be in full bloom, and the

wheat and oats harvests have begun.

The doctors here are mighty fine fellows and all of them seem to be well posted. They give us every possible chance at treating cases. Those assigned to medicine see a great variety of diseases, many of them tropical, which of course are very interesting to us as we have not seen them before. Those of us assigned to surgery get to do the less important operations. The doctor in charge of surgery only operates the more difficult cases; however when we operate he is always the first assistant and instructs us in every procedure. The only objection we have is that there are so many of us here that our turn comes only once in about ten days. When not operating we take turns in giving anesthetics and being second assistants.

We have seen about four hundred cases of measles in the adults and the type we have is very virulent. We have quite a few followed by

broncho pneumonia and empyema.

The mortality is surprisingly low considering the number of cases the hospital is handling. This I suppose is due to the fact that the men

are in good condition before taking sick.

I am enclosing our examination questions, thinking you may be interested in them. We all feel as though they were a little hard except obstetrics. Comparing this examination to one taken two weeks before by men having interneships it was a good deal harder. There were many who had interneships taking this examination.

We are going to be transferrred to San Francisco in about two weeks, to take a course at the Stanford Medical College which was taken over by the navy for the period of the war. This is to take place of the course given at Washington. The faculty is going to be made up of

Army and Navy men.

Well, doctor, I have told you only a part of the news but will have to give up any further attempt this time. With best regards for the Nebraska University Medical College and best wishes to you, I am,

Yours truly,

RUDOLPH E. KRIZ.

GENERAL MEDICINE.

1. Give symptomatology and treatment of lead poisoning.

2. **Tetanus.** (a) Give laboratory methods for demonstration of a tetanus infection in a wound.

(b) How would you differentiate clinically strychnine poisoning and tetany from tetanus?

3. Discuss the diagnosis of adherent pericardium.

- 4. Nephrohithiasis. (a) Briefly describe different types of renal calculi.
 - (b) What are the diagnostic features differentiating renal from hepsatic colic?
- 5. Discuss pathology and symptomatology of rickets (rachitis).

GENERAL SURGERY.

- 1. Discuss headache as a symptom of cerebral lesions.
- 2. Ethiology, diagnosis and treatment of perirenal abscess.
- 3. Diagnosis of a fracture of the middle fossa of the skull. How would you treat such a fracture?
- 4. Discuss the pathology of cerebal concussion and compression.
- 5. Discuss briefly causes and treatment of intestinal obstructions.

OBSTETRICS.

- 1. Give treatment of inevitable abortion.
- 2. Discuss prognosis in puerperal eclampsis.
- 3. Discuss care of the umbiblical cord after delivery.
- 4. Discuss diagnosis of life or death of foetus.
- 5. Describe second stage or normal L. O. A. Labor.

FACULTY CHANGES

Dr. A. A. Johnson goes to Ft. Riley on the sixteenth of June. He will either be back or his work will be taken up by Drs. Mummey, Eggers and Meyers.

Dr. Keegan has accepted a teaching fellowship in the teaching department of Harvard. His place will be filled by McQuiddy who was forced to leave school last year on account of his father's illness.

Dr. G. A. Young will fill the place of Dr. Aiken resigned.

Dr. A. A. Johnson has been promoted to a professor of clinical pathology in charge of the dispensary.

CORNHUSKERS

After coming to Omaha and forcing money out of the school and students those in charge of the Cornhuskers say they cannot supply the books ordered and partly paid for. What kind of a deal are we getting anyhow? A number of the school have expressed the sentiment which is unfavorable to the book as it is, and now to have this added feature will tend only to increase this sentiment. We are part of the school at Lincoln and demand recognition. Merely the fact that we are shunted off n Omaha does not mean that we should be forced to take whatever Lincoln feels disposed to give us. That book is a part of our school. It is the one connecting link we have with Lincoln and now to take that away hurts us a good deal. Some one is to blame and some one must answer.

EUGENICS.

"Pa, if a man whose name was Eugene should marry a girl whose name was Eugenie, would they have eugenic babies?"
"Probably not if they lived in the fashionable part of town."

A CASE OF ADDISON'S DISEASE. R. T. Mauer.

Immanual Hospital Service of Dr. B. B. Davis.

Mr. C—, White, Age 45, Occupation Farmer, Married. Admitted to the hospital, March 10, 1917.

Onset and Present History

On June 25, 1916, the patient fell from a hay rack, being hurled to the ground as if from a catapult, the forceful fall being due to the fact that the horse suddenly ran away. Patient states that he landed squarely on both feet and stood for about a minute in a stunned condition. Upon walking, he felt a tingling sensation in his feet which lasted about fifteen minutes. He then resumed his usual work, feeling no worse for the fall. For the next four days the patient states that he led a normal life, going thru his regular routine of day's work, eating the same food as before and feeling in good tone both physically and mentally. The noon of the fifth day after the accident the patient began to feel "weak in the knees." That same afternoon he vomited a vellowish fluid, which he describes as fire, the vomitus being hot, burning and acid in character. For the next ten days the patient took his own temperature with a fever thermometer and found that it registered between 96 and 97 degrees F. At the same time the patient became very weak, with great loss of both physical and mental energy. Patient states that also from this time he had a complete loss of appetite. "The food did not taste" and patient could not force hinself to eat. At the end of the tenth day the patient felt better and was able to walk about. At times, however, he became dizzy and several times fainted while walking. About August he felt a tenderness in the gall bladder region, which later became very sore and painful, the pain radiating from this point to the lumbar and epigastric regions. From August 1916 to Feb. 1917 the patient became progressively worse, lost 45 lbs., became weaker and had another attack of vomiting. Also shifting neuralgic pains in the epigastric and left lumbar region. Toward the middle of February, the patient observed that the color of the skin over his entire body was turning yellow to bronze. March 10, 1917, when the patient was admitted to the hospital, this color was a deep bronze over most of the body.

Past History

Up to the time of the accident, the patient had always been in the best of health, and with the exception of typhoid fe.er and mumps in childhood, says he has never had a sick day in his life. Does not drink but smokes Union Leader occasionally.

Family History

An absolute negative history of both malignancy and tuberculosis in both his parents, wife and four children, all of whom are living and well.

Physical Examination

Most striking at first glance was the pigmentation. The areola of the nipples, the linea alba, the genitals, perineum and groins, were darkened in tint to a remarkable degree. Parts of the body exposed to

friction or constriction were not darker than other parts. The conjunctiva, but not the sclera were yellow. Bluish spots the size of a pin head were seen in the roof of the mouth. The tongue was clean and moist. The patient's speech was slow, weak and sometimes almost incoherent. The physiognomy expressed fatigue, dejection and great apathy. The fat of the abdominal wall was well as the fat of other parts of the body was well preserved. There was an area of tenderness and rigidity over the gall bladder region. Extreme tenderness was noted upon pressure over the 8th to 11th thoracic vertebra inclusive. The patient did not know of these until the physical examination.

Temperature 97 F. Pulse rate 64

Blood pressure (Faught Mercury Sphgmomanometer)

Systolic 96 mm. Diastolic 36 mm.

Laboratory Findings

Feces: Negative. (Were not clay colored)

Urine: Acid. Sp. Gr. 1009. Otherwise negative.

Hemoglobin. 90 (V. Fleischl)

Blood Count: (Thoma Zeiss)

Erythrocytes 3 488,000

Leukocytes 8,740

Stained specimen norma.

Treatment

Patient was given plenty of strychnine, hot milk and tonics. Patient was made to eat. April 10th, one month later, the patient left the hospital feeling much improved, but the pigmentation was still present.

At this time the temperature was 98 F., the pulse rate 84, the systolic B. P. 112 and the Diastolic B. P. 60. The patient has not been

heard of since.

Diagnosis

This is by no means easy, altho well marked cases may be recognized at once. 80% are due to tuberculosis of the suprarenals. This case is interesting, inasmuch as the sudden onset would seem to indicate that the ethiological factor here is the fall. The areas of tenderness over the 9th to 11th thoracic vertebra are significant and suggests that the condition is due to a tearing of the sympathetic fibres going to the supra renal plexus.

The diagnosis of Addison's disease should always be one of exclusion. Jaundice is excluded, on account of the absence of clay colored stools and absence of bile constituents in the urine. In abdominal malignant tumors, especially melanosarcoma, there may be conpression of the vessels and lymphatics of the organ, which is equivalent to rendering it functionless. No tumor could be felt, and is a possibility

as it cannot be absolutely excluded.

The hypothesis that Addison's disease is due partly to the absence of ephinephrin and partly due to nervous irritation, combines the "Inadequacy" and "Nervous" hypotheses and in our present state of knowledge is difficult to controvert. It would seem, however, that clinically, this case would bear out this theory.

POINTED PARAGRAPHS

Surely it is better to get up and kick circumstances than to lie still and let circumstances kick you.

Practice medicine in faith, hope and charity. Faith in your medical agents, hope in your patient's willingness to pay, and charity in the brother who knocks you.

Why were you born? Answer: To make an effort.

No matter what position in life you hold, make it a fixed rule to have everything that leaves your hand the best that you can do.

Have you noticed three types around our school: Those who are born failures, those who have failure thrust upon them, and those who know it all.

There are about four (thank God that's all) men in our school who pull that high tone stuff. They need this: a friendly disposition is the passport to many new and valuable acquaintances.

To those who are in contact with the Premedic student. The Premedic likes to meet those who see the sunny side of life and insist on telling the Premedic about the thing they are actually doing, not how hard they are working.

The "CRIB," that evil-smelling, dishonest snake partner of the sluffer, has crept into our examinations. Beware—this paper has the right of free speech.

The first time you fancy there is a short cut to success, go out and hire a boy to read to you out of the child's primer.

Common sense combined with initiative passes more star chambers than months of cramming.

Determination is strength of mind, energy of purpose, manliness. If those who failed this semester will grasp that idea the outlook will be brighter.

Do we give our professors our good will which is a deep-down human response to the higher motives in man?

GLEANINGS FROM RECITATIONS OF THE SENIOR EDITOR

Dr. Shrock—"What is the most common tumor found on an infant's head?" (Referring to hematoma.)

S. E.—"Caput Succadaneum."

Dr. Pratt—"What other structures other than the dura, arachnoid and pia are involved in meningitis?"

S. E.—"The meninges."

THE SENIOR PLAY

ACT I.

Time 1917

Place: U. of N.

Scene 1.

Corridor College Building—

Senior and Juniors grouped around the bulletin board.

Enter: Vice-President Bostwick from office closely followed by Bruer. She calls Mister Riggert to the phone and adds "Now be sure and wait for Dr. Waters will be here in half an hour. 'Riggert is stopped by Madge (Alias Deaness) who informs him that students cannot use the phone.

Exit: Riggert in his Tin-lizzy.

Scene 2.

Lake cramming on Goipp.

Enter: Dr. Findley followed by Chief-Clinker, Way, who proceeds to prepare lantern for the movies. Gifford and Montgomery settle down for an affectionate nap. Brix throws down shades and room is darkened so the inexperienced imitators of Gifford can sleep in peace. We refer to Sinamark, Wildhaber and Salisbury. Monty wakes up dreamily and mistakes Sinamark for Gifford. Class breaks up when Monty kisses Sinamark on the cheek. (No wonder Andrew joined the Gifford is awakened when Lake navigates to the door.

Scene 3. (County Hospital)

Neidergard and Brix are scrambling for the front seats.

Enter: Surgeon Sheets with mustache neatly combed, closely followed by 1st assistant Riggert and clean nurse Martin.

"This is a very difficult case, Um-Uhm Hmm-etc., but Dr Sheets:

the best surgeon couldn't do like me."

Enter: Lake Johnson, pushing wheel-cart.

Ether can drops with a crash which so startles Gifford from his usual peaceful slumber that he drops pen, book and nearly tumbles off the bench after them.

After much struggling in which Julius' head is wrapped with blanket, patient is transferred to table. Martin picks up aneurism needle and a few scattered needles and instruments necessary from the floor and places them on sterile stand, ready for operation.

Dr. Sheets, ably assisted by Rabbit Riggert, cuts between ribs into left pleural cavity and inserts drain. No pus is found so incision is deepened until pus flows out. Dressing applied as patient expires.

Very successful operation.

Dr. Johnson at Autopsy finds tube thru diaphragm in spleen.

Applause from students.

ACT II—(Any Wednesday)

Scene 1. (At Dr. Bridges' Clinic)

Blinkers wheels in middle aged lady under forty. Moser is busy outside with the harem.

Dr. Bridges to Julius Johnson who has just finished taking history. "What is your diagnosis, prognosis and treatment of this case?"

Julius: (blushing furiously) Well—(hesitation), well, I—

I think she has malignancy of the pancreas, that she probably won't live for three months and an explanitory incision would be indicated."

Dr. Bridges: "I am afraid you are a little bit off for the young woman

happens to be pregnant."

Loud applause from colleagues on rear benches and Sandy looks cautiously over rims of glasses to see whether it is safe to raise head from his usual sleepy attitude.

Exit: Dr. Bridges in order to hunt for Dr. Moser.

Montgomery becomes noisy, claps hands loudly in Wildhaber's ears, scratches head violently, but effectively, and makes a noise like a large bull-frog, much to the disgust of Riggert who has just received a telegram stating that a Ford answering to the description of his has been located.

ACT III.

Scene 1. (Time: Any Thursday at the Wise.)

Miss Schaum; Salisbury and Martin in the bleachers. Davis, Wildhaber, Ross and Sinmark in the reserved section. Montgomery leaning his head affectionately against Gifford's shoulder.

Enter: Dr. Stokes, with blood in his eye and closely followed by Riggert and a bevy of nurses. Salisbury arises nervously and gives

the history of the case.

Dr. Stokes: "That's the rottenest history I have ever heard."

Swings arms madly and narrowly misses Riggert.

Riggert prepares the field of operation and N. Neidergard writes in note-book the church preference of the patient, that the weather is cloudy and that a storm is expected.

Dr. Stokes makes incision. Riggert, thinking that he is at the

county, scratches left ear as usual.

Dr. Stokes throws instruments to floor and assists Riggert out of the room with his shoe, saying loudly: "Get out of here and don't let me see you again."

Montgomery takes Salisbury on lap so that he won't be so frightened. Exit: every one, Gifford knocking over table and the bottle of iodine

goes on the floor.

Have all the Yankees gone to seed In this their country's time of need?

They must have.

They do not hear the nation's call Have they forgot the ride of Paul?

They must have.

The country wants the men who WILL, Have we forgot old Bunker Hill?

We must have. Our Uncle Sammy needs more men And wants them **now** instead of **then**

And must have!
We'll from the Kaiser tear a hunk
And pretty soon, believe your unkle Gustav!

ODE TO THE SENIOR EDITOR

O, Riggert like a knight so bold, You rendered service to the old, Like pneumococcus, you are rated, The benefactor of the aged.

You tried an intership to fill, Although your duties there were nil. But it has often been inquired, Just why your exit was desired.

Whene'er you played the mandolin
The city echoed with the din.
The dead rose up, the living cried
And loudly prayed for cyanide.

Your hobby runs to jewelry,
It's quite expensive, you'll agree
To buy the ladies diamond rings,
And get no recompense but stings.

A surgeon you aspire to be,
Of fame and notoriety.
But patients die as well as rabbits,
So be discreet and mend your habits.

You are a demon with the women, You sure do have their heads a'swimmin' You send them sweet peas to a formal. Say, do you think that you're just normal?

And judging from your recitations, We fear you have hallucinations. We truly hope your end won't be In Hastings or in Kankakee.

About the army loud you'd roar Until 'twas time to go to war. It's an imperative demand That soldiers sit as well as stand.

Now, Roaring Riggert, don't get sore,
Just think how many verses more
Could be composed from one whose past
Was largely spent with those termed "fast."

Salesbury. I cannot teach this dog anything.

Wilhaber. Well, if you want to teach a dog anything you have to know more than the dog.

JUST AMONG OURSELVES

Brix	-Aga	Who talks with his hands.
Davis	-Cal	Who is very fond of White Rock.
Gifford	-Sandy	. Who sleeps all day long.
Johnson	-Johnny	Who is noted for his recitations.
Kris	-Kritz	The Bo-hunk who cackles.
Lake	-Slough-foot	As thick as he is long.
Martin	-Red	Who has a wonderful capacity.
Montgomery	-Monty	The restless—His type of man.
N. Neidergard	-By himself	The Dean's long arm.
Riggert		Who's a piker?
Ross	-A. J.	Long, lean and lanky.
Salisbury	-Sol Socrates	So guiet and evasive.
Schaum	-Lydia	Who knows her place.
Sherwood	-Old fox, badly	Whose nerve you cannot beat.
Talcott	-Doc Irish	Our family man.
Way	-Chuggs	High arch-clinker.
Wildhaber	-Bill	High arch-clinker. Who laughs like a chip-munk.
Class Flower—A Sponge.		
Motto—"Don't Count on Riggert."		
Class Sponsors—Monty and Sol.		
Class Morals—We have none.		
Class Mascot—Montgomery—noisy boy.		
	Class Sleeper—Sandy	

Weeth. Did the Lord make both of us?

Dr. Povnter. Yes.

Weeth. He is doing better now than he used to, isn't he?

If one's room is small, it manifestly takes less light to make it cheerful. Applied variously, this is one of the compensations of existence.—Curtis Yorke.

Surely, it is better to get up and kick circumstances than lie still and let circumstances kick you.

We apologize for this before we begin but we feel that it is duty to record all facts that transpire which are directly connected with the

welfare of our fellow sufferers.

The morning of the justly celebrated demonstration quiz, Borghoff in quest of knowledge, comes upon one of our lady medics imbiding of the waters in the hall. Without preliminaries, our hero asks the young lady if she has a Cunningham—a deadly silence—and Borghoff is still wondering how he got in bad.

But on the other hand—

Dr. Poynter suggests that an occasional poker game is of much value in the cultivation of the muscles of the face—admitted—but how about the pocket book?

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