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

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Omaha Medical College, Medical Department University of Omaha.

The Eighteenth Annual Course of Lectures will begin Oct. 1st, 1898, and continue seven months. Instruction will be given in the following branches: Anatomy, Physiology, Chemistry, Histology, Biology and Embryology, Materia Medica and Therapeutics, Practice, Obstetrics, Surgery, Diseases of Children, Medical Jurisprudence, Neurology, Ophthalmology and Otology, Gynecology, Dermatology, Venereal Diseases, Pathology and Bacteriology.

Laboratory Courses at this College in Urinary Analysis, Chemistry, Histology, Pathology and Bacteriology, and Practical Work in Physical Diagnosis, Surgery, Practical Surgery and Practical Anatomy, and Demonstrative Obstetrics, are now included in the curriculum.

The instruction is given by scholastic and clinical lectures, by recitations, and by practical manipulations by the student. The clinical advantages are in many respects unsurpassed.

Four years' course is now required.

For further particulars, address the Secretary,

WILLSON O. BRIDGES, M.D., 1623 Douglas St., OMAHA.
MODERN MEDICINE.

THE MODERN PHYSICIAN when brought face to face with the most obscure and uncommon manifestations of disease is able to determine and treat these symptoms with much more intelligence than did his predecessors of twenty or thirty years ago. Diagnosis is in many instances an absolute certainty now, where once it was mere guesswork. Credit for much of this must be given to the sciences of Chemistry and Bacteriology. So in the treatment of disease many new and valuable Chemicals and Pharmaceuticals are at the command of the practitioner, and it is only fair to him that when a remedy is in his opinion, indicated, that remedy should at all cost be provided. Our stock in the line of

Rare Drugs and Chemicals

is so complete that we rarely have a requisition for anything not in stock. Parties having prescriptions which they cannot get compounded, should send them to us, as we are uniformly successful in giving satisfaction. We append a few of the more uncommon articles.

For the Relief and Support of Varicose Veins, Weak Swollen or Ulcerated Limbs, Corpulency, Abdominal Weakness and Tumors.

Heavy-weight Silk Elastic Goods sent unless otherwise specified on Order.

SHERMAN & McCONNELL DRUG CO., 1513 Dodge Street, OMAHA.

Directions for Measurement—Which should be taken in the morning before rising. The Measurement of Length is Essential. Give the exact measurement. We allow for Expansion. For a Thigh Stocking, (to reach from A to I)—Circumference at A, B, C, D, E, F, G, H, I. Length from floor to F, and F to I. For a Thigh Piece, (to reach from G to I)—Circumference at G, H, I. Length from F to I. For a Knee Stocking, (to reach from A to G)—Circumference at A, B, C, D, E, F, G. Length from floor to F, and from F to G. For a Knee Legging, (to reach from C to G)—Circumference at C, D, E, F, G. Length from C to F and from F to G. For a Knee-Cap, (to reach from E to G)—Circumference at E, F, G. Length from E to F, and from F to G. For a Garter Stocking, (to reach from A to E)—Circumference at A, B, C, D, E. Length from floor to E. For a Garter Legging, (to reach from C to E)—Circumference at C, D, E. Length from C to E. For an Ankle, (to reach from A to C)—Circumference at A, B, C. Length from floor to C. For a Wristlet, (to reach from N to P)—Circumference at N, O, P. Length from N to P. For an Umbilical Belt—Circumference at K, L, M. Depth at front and back. For an Abdominal Belt—Circumference at the navel. These Stockings can be washed as often as required with Castile soap and Water, as warm as you can hold your hand in. Dry in the house. Do not put Flat Iron on them. Do not hang in the sun. Grease will spoil rubber.
AUGUST F. JONAS, M. D.

Professor of Clinical and Orthopedic Surgery, Omaha Medical College.
Surgeon in Chief Union Pacific Railway System.
Surgeon in Chief Fremont, Elkhorn and Missouri Valley Railway.
Surgeon to Douglas County and Methodist Hospitals.
CHIEF SURGEON UNION PACIFIC RAILWAY.

It is with mingled feelings of pride and satisfaction that The Pulse notes the appointment of Dr. A. F. Jonas to the chief surgeonship of the reorganized Union Pacific Railway system. In his selection for this important position President Burt has manifested that same foresight and knowledge of human nature which has characterized his official railway life. The selection stands out all the more prominently, when it is remembered that the average railroad surgeon, even of the larger systems, is far below his competitors in point of education, ability, operative skill and professional standing. That the appointment was made unsolicited, is all the more creditable both to President Burt and Professor Jonas. The Pulse bespeaks for the reorganized Medical Department of the Union Pacific system that same degree of efficiency in professional and executive management, which in other departments is rapidly transforming a bankrupt railroad into a splendid property. It also extends to Professor Jonas hearty congratulations, knowing full well that success in his newly added field of work is assured. The alumni and friends of the Omaha Medical College have just reason to be pleased with the new relation. With a professor in its faculty at the head of the medical department of one great railroad system, and an alumnus as chief surgeon of another, the Omaha Medical can still hold its pennant where it may be seen, guiding its progress upward and onward.

Professor A. F. Jonas is in his fortieth year and was born at Arlington, Wis. His early education was acquired at Madison, and he graduated in medicine and surgery from the Ludwig-Maximilian University at Munich, having studied one year in Halle and one and one-half years in Vienna, Paris and Munich. He then returned to Madison, Wis., where he practiced until his removal to Omaha in June, 1887. In April, 1892 he was elected Professor of Clinical Surgery in the Omaha Medical College, succeeding Dr. Joseph Neville both in the faculty and upon the Board of Trustees. Dr. Jonas has been a frequent contributor to
medical journals, is an active member of the Omaha Medical Society, The Missouri Valley Medical Society, both of which he has served as president; The Nebraska State Medical Society, The American Medical Association and The Western Association of Surgeons and Gynecologists. As a surgeon he is profound, as an operator skillful, as a teacher methodical and painstaking, and both in his professional and private life, upright and honorable always.

PERITONEAL TUBERCULOSIS.

By CHARLES C. ALLISON, M. D.
Surgeon Presbyterian Hospital, etc.

With our increased knowledge of the clinical features of tubercular peritonitis, we are better able to account for many cases of "disappearing tumors."

The utility of the operative treatment had a purely accidental origin, but the reason for improvement in so large a per cent of cases is not yet definitely determined, and contributions upon this subject based upon clinical experience are worthy of record. The pathological and the clinical features of this trouble have led Aldibert (these de Paris '92) to name the following varieties: the ascitic, the fibrous, and the ulcerative or caseating.

The ascitic form includes that class of cases in which there is a general or encysted accumulation of fluid, usually straw colored, in the peritoneal cavity, and in which the peritoneum is thickly studded with gray, tubercular granulations. The ascitic development is usually comparatively rapid, while in the second or fibrous type the process is less in evidence, subjectively, the visceral organs being more or less extensively matted together by a fibrinoplastic exudate, presenting nodular masses, accompanied, as a rule, by a small quantity of blood-stained peritoneal exudate. This form may run a very chronic course without noteworthy emaciation, unaccompanied, it may be, by personal or hereditary tubercular tendencies, and is difficult of differentiation. Microscopically the nodular deposits may strongly resemble malignant disease. Many such cases are reported where our best physicians have been in error, and what was apparently a hopeless case of malignant abdominal growth has disappeared after an exploratory examination (Annals of Surgery, volume 30, No. 5, page 750).

The third or ulcerative form really represents a late stage of the other types of this disease, especially of the fibrino-plastic variety in which, instead of nature's attempt toward fibrillation and spontaneous recovery, a caseation occurs and tubercular ab-
scesses develop. In the obscure cases great difficulty is encountered in eliminating malignant disease and leuetic deposits. In tubercular changes the family and personal history are to be considered, the clinical history may run a longer course than that of malignant disease; enlargement of the lymphatic glands is apt to present, and the temperature is apt to be subnormal in the morning, with an evening exacerbation, as is the rule in most tubercular expressions. In syphilitic disease the glandular system, the skin and the bones will show evidences of trouble, and the blood examination will reveal a characteristic lymphocytosis and eosinophilia. In malignant disease the flexures are most liable to involvement, and the infiltration will probably be annular.

TREATMENT.

Experienced observers are in accord in ascribing that operative treatment is the only rational measure to be employed in the management of tubercular peritonitis; hygiene and medicinal agents are of value only as supplementary measures. Abbe, Aldibert and Gregg Smith place the mortality from the operation in unselected cases at 3 per cent, and the recoveries at 72 per cent, one-half of which may be expected to survive to the usual expectancy of life, while the other half may develop tuberculosis in some other part of the body. The most conservative writers will place the per cent of recovery above 65, by which they mean that their “traced cases” do not show evidences of peritoneal tuberculosis after the reasonable period of three years.

Some contention exists as to the wisdom of drainage, but the inclination of most recent observers is against this measure. Parker Syms, W. W. Keene and Carl Beck support this line of treatment, and the best tabulated and authentic records sustain their views. On the other hand, however, Robert Abbe, Charles McBurney and Gregg Smith favor drainage, offering as evidence good results, supported by very considerable experience.

In view of the fact that we have to deal with three distinct types or stages of this disease, it would seem that we may soon reach an analytical position in the solution of this problem, and vary the technique with the clinical and pathological conditions as revealed at the operation. In an ascitic case, with rapid accumulation, we would favor saline irrigation and drainage, while in a fibrino-plastic tubercular inflammation of a sub-acute or chronic type, we would not feel justified by adding any impediment to the
future integrity of the abdominal wall, as is the case where drain-
age is employed. Should we find on exploration, however, that
ulcerative processes and caseation had developed, we would favor evacuation, careful cleansing and provide for good drainage. No
absolute rule, therefore, can be given which will act as a safe guide
to the operator, the intra-abdominal conditions alone will suggest the course to be followed. The theories advanced in accounting
for the unexpected recoveries by the earlier operators were that sunlight, or air, or chemical disinfectants, were the agents which led to improvement; but at the present time these reasons are not seriously considered. Circulatory improvement and better nutrition following the relief of tension, increased phagocytosis re-
sulting from the operation, or a tox albumen following bacterial invasion are more reasonable theories, while cases of accidental in-
fection (Smith, page 1165) seem to recover in a surprising manner.
This latter argument, it might be mentioned, has an analogy in the undoubted disappearance of some cases of malignant disease after sharp septic infection (Wyeth Medical Record, '97). "No case," says Abbe, "need be regarded as hopeless." (Annals of Surgery, volume 30, No. 5.) And this with the probable fact that in our own time, and very likely by our younger men, additional data will be added to our present information and exact rules laid down for the more complete conquest of this serious disease.

THE UNITED STATES MARINE-HOSPITAL SERVICE.

GEORGE R. GILBERT, M. D., '96.

Under the control of the United States government there are three organized corps of surgeons or medical officers, viz.: The Marine-Hospital Service, the Medical Department of the Army, and the Bureau of Medicine and Surgery of the Navy. The first mentioned, as distinguished from the others, instead of being a department of a service is a service of itself.

The Marine-Hospital Service is maintained by an annual ap-
propriation by the treasury department from tonnage dues collected from foreign vessels entering our ports. The service as primarily intended when established, in 1798, attends to the needs of all sick and disabled seamen serving on all merchant vessels carrying the American flag. This includes not only employees of United States
The service conducts physical examinations, including vision and color sense of applicants for positions of pilots, masters and seamen of the revenue cutters, and of pilots of all merchant vessels. The surfmen of the life-saving crews are examined frequently for entrance and re-enlistment owing to the hardships they undergo. Yacht owners desiring to pilot their own vessels are examined for vision and color sense. For all this work the service has established hospitals, dispensaries and quarantine stations in the most important lake, river and sea ports. The largest and busiest station is in New York, where about 5,000 patients are received and treated each year. The other largest hospitals are at Boston, Chicago, San Francisco, New Orleans and Baltimore. The hospitals and quarantine stations extend all the way from Portland, Me.; Key West and Mobile, to Port Townsend, Wash., and up the rivers and on the lakes, as Louisville, Evansville, Ind., St. Louis, Buffalo, Detroit, Cincinnati, etc. These hospitals and dispensaries are provided with the best medical and surgical appliances obtainable, and are in charge of competent and able physicians and surgeons.

The patients present all the diseases in the nomenclature, and all varieties of each, coming as they do, not only from local ports, but from Cuba, South America, India, New Zealand, Europe, etc. Quarantine stations are at or near the largest shipping centers and inspect all vessels, detaining and disinfecting those from infected ports. For this work the service owns several steam vessels as disinfecting and boarding boats. The old United States steamship Omaha, formerly in the United States navy, is now used for that purpose at San Francisco quarantine.

The Marine-Hospital Service is proud of its hygienic laboratory in Washington. Here special examinations of various pathological specimens sent in by officers are carried on. Original investigations are in progress all the time, and yellow fever germs, monkeys and Guinea pigs are quite numerous. Their centrifugal machines are run by electricity, and the laboratory is quite a busy place. Officers of the service are detailed here for instruction. During any epidemic the Marine-Hospital Service details various medical officers to the in-
fected districts to erect and maintain detention and quarantine camps and hospitals for refugees, suspects and patients. They also inspect railways and vessels arriving and departing. To briefly present an idea of the pleasures of such a detail, we hope the following will suffice:

One surgeon ordered to report at a town in Alabama reached his destination to find all of the suspicious inhabitants armed to the teeth, who politely requested everybody to remain on the train. Our hero thought discretion better than valor, and traversed the state before he could leave the train to return to his starting point to report for further orders. Needless to say, he was subjected to no court martial. Another officer for similar “prophylactic” reasons spent a few days and nights living in a box car in a swamp in Mississippi before he could pass neighboring towns. Another duty of the Marine-Hospital surgeons is the medical inspection of immigrants at such large ports as New York, Philadelphia, New Orleans and San Francisco. All immigrants suffering from serious deformities, old age, favus, trachoma, pregnancy and anything else detected are either returned to their own country or treated at the port of entry at the steamship company’s expense until recovery, and then allowed to land to become United States citizens. As several hundred immigrants arrive each day at any one port, many are detained on account of physical or mental defects, observed by the quick and well trained eyes of the inspectors, who can size up several people at one quick glance, as they come single file, loaded down with baggage and children. The age, stature, gait, teeth, eyes, hair, hands and feet are noticed at one hurried glance, the children’s heads and necks are uncovered for an instant and at the same time an eye is kept on those coming immediately after. The inspections are very thorough, brief and efficient.

The Marine-Hospital Service is commanded by a Supervising Surgeon General, assisted by several other Surgeons at the bureau in Washington. A Surgeon is the commanding officer of nearly all stations. Next in command are Passed Assistant Surgeons, Assistant Surgeons and Internes. There are also Acting Assistant Surgeons temporarily appointed at stations. The usual staff of a hospital consists of a surgeon, a passed assistant surgeon, one or two assistant surgeons, one to three internes, besides two hospital stewards. The various hospital attendants are classed as clerks, messengers, nurses, ambulance drivers, engineers, cooks, etc.
Frequent inspections and fire drills, etc., maintain a standard of efficiency.

The work of the Marine-Hospital Service comes so little in contact with the majority of people, especially those in the interior, that it is but little known about. The officers are always detailed to attend and report large medical organization meetings here and abroad, and as the duties are varied, the pay large and the uniforms comfortable, the service is desirable to those disliking private practice.

THE OMAHA MEDICAL AHEAD.

OMAHA, Neb., March 19, 1898.

To the editor of the Western Medical Review: In your issue of March 15 you state that a Chinaman now studying in Rush Medical College will be the first of his race to graduate in regular medicine in this country. This is an error which I hope you will correct. Even if the aforesaid Chinaman will graduate the present session, he will be one year late to claim priority, for Chung Chi Chan of Canton, China, graduated from the Omaha Medical College in April, 1897, after attendance upon three courses of lectures, with a preliminary education acquired in the University of Omaha. He attained markings in his medical examinations which rated him above the average of his class, and passed the following summer in post graduate work in San Francisco. He has recently departed for Canton, China, where he expects to (as he stated to the writer) "Practice his profession and assist in educating his people toward a higher civilization."

W. O. BRIDGES, M. D.

[The above was taken from the April number of the Western Medical Review.]

A TRIP TO THE WEST

is not complete unless it embraces a journey over the Colorado Midland railway, which begins at Denver and carries the tourist through Colorado Springs, past Pike's Peak, through the famous Ute Pass, the most prominent spot in the history of Colorado, into the Cripple Creek District, through the beautiful Buena Vista meadows, past Mounts Harvard, Princeton and Yale, through Leadville, the most famous mining camp in the world, over Hagerman Pass, the highest mountain defile used by a railroad, 11,528 feet, and also affords tourists an opportunity to visit Glenwood Springs, a very noted health resort. Write to W. F. Bailey, general passenger agent, Colorado Midland railway, Denver, for descriptive matter of this wonderful mountain road.
Trans-Mississippi and International Exposition.
Omaha, June to November, 1898.

ARCH OF THE STATES.

The Arch of the States forms the grand entrance to the Exposition. It is flanked upon either side by exedras which advance in semi-circles partially embracing the plaza before the Arch. In these exedras are the main ticket offices. The Arch itself is fifty feet wide, twenty-five feet deep, and sixty-eight feet to the top of its parapet. It is in the form of a triumphal arch, the opening being twenty feet wide and thirty-five feet high to the keystone.

Strong, simple abutments are upon either side, assisting the arch to carry an extremely rich and broad frieze consisting of a double arcade of twenty-four arches containing shields decorated in color with the coat of arms of the Trans-Mississippi States. This frieze will be repeated upon the other side of the arch, while upon the ends the coat of arms of the remaining states of the Union will be displayed. Above the broad frieze will be a band containing a panel with the inscription “Arch of the States” and a richly decorated cornice, with dentils and acroteria.

The whole is surmounted by a high parapet, at the center of which upon either side will be a large shield of the arms of the United States surmounted by a golden eagle and youths as supporters, each holding a mast for the national colors. The Arch will be of stone, to commemorate the Exposition and to form the future entrance to Kountze Park. It was designed by Messrs. Walker and Kimball, Supervising Architects.
With this issue the publication of The Pulse will cease, as formerly announced, until the beginning of the fall session, and we take this opportunity of thanking the faculty, alumni and students for the loyal support they have given these first two issues. The Pulse has succeeded far beyond our anticipations, and we have now the names of nearly 90 per cent of the students on our subscription books, an accomplishment of which, we believe, no other college journal can boast. Our readers may be assured that The Pulse is a permanent publication, and that no pains will be spared in keeping it up to the standard of the best journals.

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Another school year, perhaps the most successful in the history of the Omaha Medical, is now ended.

The work of faculty and students has been harmonious during the entire course, and will compare very favorably, we are sure, with that of the more pretentious Eastern schools.

The Pulse predicts for the recent graduates success, and extends to the new students of next year a most hearty welcome.
We have received the announcement of the University of Omaha's first annual year book, which will be named Purple and Gold, and will be edited and published at Bellevue, Neb. The editorial staff is as follows: May W. Nicholl, editor-in-chief; Elizabeth Waugh, associate editor; Alice M. Stoddard, literary editor; W. H. Kerr, business manager; Charles H. Adams, assistant business manager.

The book will contain about one hundred and fifty pages, profusely illustrated with "half tones," sketches and drawings. A full history of the growth and development of the university will be given; also many articles of student wit and humor and many other valuable features, which we have not space to mention. It will be sold at the low price of 75 cents, which will about cover cost of publication.

Purple and Gold desires the support of the student body, alumni and friends of Omaha's university. The Pulse gives to the enterprise its most hearty support and co-operation.

***

Prof. A. C. Stokes, whose work as professor of chemistry has given such eminent satisfaction to all concerned, left for Chicago last week. He will attend the spring course of lectures at the College of Physicians and Surgeons.

Prof. Stokes has been elected permanently to the chair of chemistry in the Omaha Medical College, and has promised for us, next year, a paper on some interesting subject of chemical research.

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Two "half tones" grace our pages this month. One of Dr. A. F. Jonas, recently appointed surgeon-in-chief of the Union Pacific, and one of the faculty and graduating class of '98.

Extra copies of class pictures will be mailed to those, desiring them, at 5 cents per copy.

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As The Pulse was not represented at the Commencement exercises and alumni banquet, our readers will appreciate the necessity of our giving, second hand, the write-up of a more favored reporter. We quote, on another page, from the Omaha Bee of April 23.

***

Dr. J. B. Summers, Jr., has been appointed a member of the board of medical examiners for state troops, by Gov. Holcomb.
Alumni Department.

Dr. George Bicknell, Editor.

Dr. Harry Cunningham, '97, is practicing at Salem, Ill.

Dr. Alfred Hakanson, class of '90, is located in in South Chicago, Ill.

Dr. H. G. Wiese, class of '86, has recently been appointed county physician for Douglas county.

Dr. Armstrong, class of '94, has removed from Mineola, la. to Papillion, Neb., succeeding Dr. Beale.

Dr. C. C. Crawl, class of '96, of Randolph, Neb., has been severely ill the past month, but is now convalescing.

Dr. Edson L. Bridges, class of '96, is located in Wausa, Neb., where he is enjoying the advantages of a country practice.

Dr. Joseph LePard, class of '95, is now located at Murray, Idaho, where he is practicing medicine and running a drug store.

Dr. Miller, class of '88, of Gering, Neb., is now in the city awaiting the recovery of his child after an operation for empyema.

Dr. Frederick Beale, class of '94, has removed from Papillion to Springfield, Neb., where he is associated in practice with Dr. Hamilton.

Dr. T. P. Livingston, class of '85, is among our new subscribers. The Doctor is Chief Surgeon of the B. & M. Railway in Nebraska, and a prominent general practitioner in this part of the country.

Dr. Mary L. Tinley, of Council Bluffs, who carried away the honors of the graduating class in '95 asks to be put upon the subscription list of The Pulse, and tenders her services as an active supporter of the new organ of the O. M. C.

In another column appears an interesting account of the Marine Hospital service written by Dr. George Gilbert, class of '96. The Doctor has just returned from the Marine Hospital in New York where he has been doing clinical work for over a year and a half.
Dr. Ella P. Sumner, class of '95, who is located at Bloomington, Neb., was in the city recently with a case for operation.

The Doctor’s husband is one of the best practitioners in that part of Nebraska, and from all reports they are about the whole thing in a medical way out there.

Dr. Leonard R. McIntyre, class of '97, is located in Del Rey, Illinois. This town is about 90 miles south of Chicago and in a very rich agricultural district. The Doctor has no competition in his own town, and as he has had extensive hospital practice, we predict for him a large measure of success.

Dr. G. V. Ellis, of Akron, Ia., subscribes for THE PULSE and says he is a graduate of the first class sent out by the O. M. C. which was in 1882. We extend a hearty welcome to the older graduates and are glad to learn that they have the same pride in the College and its wonderful progress that we of a younger generation have.

Dr. C. C. Dietz, class of '97, is located in Carson, Ia. He reports the case of a child four days old which was given only one drop of Tinct. opii (according to the mother’s story) and died shortly with all signs of opium poisoning. He says collections are poor and competition sharp notwithstanding which, he is making a living and is happy.

The O. M. C. Alumni are fast becoming like Great Britain’s possessions upon which the sun never sets. We have one in Germany; one in Canton, China; and one in Equador. If the Spanish-American unpleasantness assumes the proportions which it seems liable to do, we shall no doubt have a few representatives in Cuba and the U. S. Navy soon.

Dr. Schuyler C. Borom writes in from Chapman, Neb., giving an account in picturesque and masterly English of his trials and successes. He congratulated himself upon being the possessor of a whole dollar which he sent us at once after seeing the first issue of THE PULSE. We believe that this heroic example of self-denial is worthy of emulation by all Alumni who are so fortunate as to have a dollar.

Dr. S. E. Leard writes in from Livingston, Mont. He is well pleased with his present location and thinks Montana the best state in the Union for a physician. It may be of interest to those
who are thinking of locating in that state to know that in October, 1898, the last State Board examination for three year men will occur. Those graduating later than '98 must give evidence of having had four years of lectures.

The Alumni Association of the Omaha Medical College met in the college building April 22nd. The number of Alumni present was not large, but unusual interest was shown by the graduating class, all but one member being present for initiation into the association. Dr. Harry B. Lemere, who took first honors in the class of '98, was elected president for the ensuing year. Dr. R. E. Wright, '98, was elected first vice president. Dr. Geo. Ireland was elected second vice president. No changes were made in the offices of treasurer and secretary held respectively by Dr. Mary L. Tinley of Council Bluffs and Dr. Geo. Mogridge of Glenwood, Ia. We are proud of the class of '98 and hope that many of them may locate close enough to Omaha to meet with us once a year. All members of this class are urgently requested to advise the Secretary of their whereabouts when they become permanently located.

Those who have responded have located as follows: Dr. R. E. Wright, Bern, Kas.; Dr. J. S. Livingston, Plattsmouth, Neb.; Dr. L. S. Fitch, Omaha; Drs. W. W. Frank and D. J. Smith, Rising City, Neb.; Dr. S. H. Smith, 10th and Pacific Sts., Omaha; Dr. E. R. Porter, Omaha; Dr. R. B. Mullins, Oconto, Neb.; Dr. E. A. Weymuller, Interne, Methodist Hospital, City; Dr. R. C. Knobe, Interne, Presbyterian Hospital, City; Dr. S. A. Campbell, Assistant Surgeon Trans-Mississippi Exposition; Dr. W. J. Pinkerton, North Platte, Neb.; Dr. N. L. Clark, Omaha; Dr. H. A. Fulton, Omaha.

MEDICAL EXCURSION IN JUNE.

DENVER TO SALT LAKE CITY.

The medical excursion in June will leave Denver for Salt Lake City—the Zion of the new world—on the last day of the meeting and the two successive days via the Rio Grande Western railway in connection with the Denver & Rio Grande and Colorado Midland lines. The rate will be but $18 for the round trip, offering a trip of 1,500 miles through the Rocky and Wasatch Mountains. No European trip of equal length can compare with it in grandeur or wealth of novel interest. Salt Lake City and vicinity is one grand sanitarium. The great Salt Lake or Dead Sea of America, with its magnificent bathing resort, the hot and warm springs, drives, parks, canons and reserves are all located in or about the city. Send 2 cents to F. A. Wadleigh, Salt Lake City, for copy of pamphlet.
COMMENCEMENT.

Probably the most successful, certainly the most enjoyable commencement given by the Omaha Medical College was that of last evening, when twenty-seven members of the class of '98 were duly graduated. The commencement was the auspicious success that it was because it was conducted along lines entirely different from those heretofore followed. The occasion was not the stereotyped delivery of numerous addresses in a stuffy auditorium, but was a banquet given to the graduates by the faculty and the alumni of the college at the Omaha club.

The exercises were held in the banquet room of the club, which was appropriately decorated. The colors of the college, purple and yellow, were seen in the flowers, in the ribbons, on the menu cards and in the ices. Over seventy banqueters were seated about two long tables, while in the adjoining library an orchestra discoursed music.

The graduation exercises were brief. Harold Gifford, M. D., dean of the faculty, made the introductory address. In the course of his remarks he told the new doctors to endeavor to give their sympathetic attention to the cases of their patients, to endeavor to enter into full sympathy with their condition, to avoid condemnation of being hardened and to omit the discussion of all extraneous subjects in the sick room or operating room. The degrees were conferred by J. E. Summers, Jr., M. D., president of the board of trustees, after which the diplomas were passed to the graduates. In the presentation of prizes Harry B. Lemere received an operating case of surgical instruments for having obtained the highest standing in the final examination. Honorary mention was given to W. J. Pinkerton, Ernest A. Weymeuller and Byron L. Pampel. The undergraduate prize was a pocket case, given to Francis J. Gish for the best anatomical work.

POST PRANDIAL.

After the discussion of a dinner of ten courses, Dr. Gifford, as toastmaster, rapped for order and introduced H. B. Lowry, M. D., of Lincoln, who responded to the toast, "The Doctor." He related many amusing incidents of the profession, hit off the judges, the lawyers and the newspaper men in good fashion, and left for Lincoln, without waiting to hear the replies.
Harry B. Lemere, M. D., responded to the toast, "The Graduates of 1898." He said he was proud of the class because it was the last of the classes that had taken the three-year course in the college, and because its members had maintained a high average throughout their period of instruction. He said that pride in one's class was justifiable, coming immediately after love of alma mater and love of country. Alluding to the latter he read a timely letter from Governor Holcomb. It was in response to an offer on the part of the graduates to enter the medical department of the army and navy, if their services were needed in the impending war. The Governor acknowledged the offer of volunteers, and warmly congratulated the graduates on their patriotic spirit.

George H. Bicknell, M. D., spoke on "Our Alumni—Present and absent." He considered the alumni as children of the alma mater and disciples of the faculty. He said the work of the graduates had proved that the Omaha Medical College was a practical institution, and called attention to the high rank some of its alumni had taken. As the oldest graduate has seen but sixteen years of experience, and more than half of the graduates had practiced less than half that number of years, he thought the showing the alumni were making was good.

Prof. F. M. Currie of Broken Bow, Neb., made a most felicitous reply to the toast, "Classic," which was termed "a book which people praise and don't read." He declared that any study that tended to make a man broad minded, to develop a man of culture and refinement was good for a doctor—was good for any man.

JUDGE KEYSOR'S ADDRESS.

The most eloquent response to any toast of the evening was that of Judge W. W. Keysor on "Truth." He said that it had been intimated that the toast had been given him because the bar was supposed to be most familiar with truth, and he would reply by suggesting that the physicians needed the truth about as much as any class. The speaker emphasized the need of truth in the professions and deprecated its lack among the people of today. He urged the doctors, mingling so much with the public that their power for good is great, to help upbuild a spirit of truth for truth's sake amongst all people. In conclusion he warmly congratulated the faculty, the graduates and the college upon the auspicious beginning of a new order of commencements.

—Omaha Bee.
Clinical Department.


DOUGLAS COUNTY HOSPITAL.

Dr. Milroy presented to the class an interesting case with the following history. Mr. J. American, aged 43, painter by trade, was admitted to the hospital March 15th, 1898, for treatment. The only symptoms suggesting any abnormal condition were a partial paralysis of the lower part of the face on the right side and marked dullness of the mind. The tongue protruded somewhat to the right and there was motor-aphasia. Physical examination added nothing except a few superficial scratches upon the face. He complained of no pain or discomfort. On March 16th, the day following his admission, he was seized with convulsions, involving the muscles of the entire face. These were repeated on the following day, and on the 18th convulsions occurred involving the face and both extremities on the right side. No convulsions were observed after the 18th. From the date of admission of the patient, at times there was partial loss of power in both extremities of the right side. The pulse ranged from 50 to 65, temperature from 97 6-10 to 100 4-10. No clear history could be secured as to the past health of the patient or the immediate cause of his present trouble. On one occasion, when his mental condition appeared somewhat improved, he stated that his trouble was caused while painting, by a fall from a ladder.

An operation was advised and the patient was seen by Doctor Summers, who made the diagnosis of either sub-dural or extra-dural hemorrhage, but as extra-dural hemorrhage is accompanied by more marked symptoms of compression and progress in the paralysis, Dr. S. excluded extra-dural hemorrhage and a diagnosis of sub-dural hemorrhage over the lower and posterior border of the fissure of Rolando was made. On Saturday, April 9th, the patient was anaesthetised and Dr. Summers fixed the position of the Rolandiic fissure after the method of Chiene and opened the skull with a 1 \( \frac{3}{4} \) inch trephine, over the junction of the middle and lower thirds of the fissure. On removal of the bone there was a marked bulging of the dura. On incising the dura about two ounces of a brownish fluid escaped. A clot was discovered directly under the trephine opening, extending over the area of exposed brain as well as
anteriorly and posteriorly. After removing the clot, it was observed that there was a thrombosis of a large vein running parallel with the fissure. The brain also gave the appearance of commencing softening. The wound was irrigated with hot salt solution, the dura closed in part, drainage established, and the scalp sutured and an antiseptic dressing applied. The patient was seen a few days after operation. There was marked improvement in intelligence and the power of speech was rapidly returning.

IMMANUEL HOSPITAL.

Dr. Davis presented to the class one of the most interesting cases of the term. The history is as follows: Patient, female, foreigner, age 30 years. Had two children and two miscarriages. Last menstruation early in January. Entered hospital the 17th, complaining of nausea and vomiting, with pain in the right inguinal region. On the 19th, patient had an attack of very severe abdominal pain with great distress and coldness of extremities. Pulse 80, at one time 60, soft but not accelerated. Temperature in attack 97.4-5. A hypodermic of morphine was administered which gave some relief. Not until after this attack did the doctor learn that the patient had had two previous attacks, the first one a week ago, and the second about five days ago. Saturday, the 19th, the temperature was 99.1-5, pulse normal, patient was too tender for a satisfactory examination, all that could be found was a tender mass in the vicinity of the right broad ligament. The following diagnoses were suggested, ectopic pregnancy, tearing of adhesions due to an old inflammation, a leaking pus tube. The patient was anaesthetised and an examination revealed a mass in the vicinity of the right broad ligament, boggy and semi-solid, which was so thoroughly suggestive of extra uterine pregnancy that an immediate laparotomy was performed. The instant the abdominal cavity was opened active hemorrhage was seen to be going on, the abdomen being filled with old and fresh blood clots. The hand was at once carried down to the right fallopian tube, which was raised and clamped, next the blood clots were cleared away when it was found that a terrific hemorrhage was going on from below the place clamped. More careful examination revealed that a rupture of the uterus had taken place, running from the fallopian tube downward, and the fingers inserted into the cavity found a mass of decidual tissue and could feel the strong jets of blood from the vessels. This made a hysterectomy necessary. Clamps and ligatures were applied to stop the hemorrhage and the operation at once performed. The normal salt solution was used by inter-vascular injection.

At the close of the operation the diagnosis was judged to be either one of interstitial pregnancy or an angioma involving the uterine wall and broad ligament.
DISLOCATION BACKWARDS OF LEFT HIP.

By M. B. Croll, M. D., Herman, Neb.

Mrs. S. J., aged 53 years, while hastening to catch the early train at McCook, Neb., March 10, 1898, fell over a defective sidewalk, severely injuring her left hip. She picked herself up, hobbled to the depot and on to the train. She suffered severely throughout the day. At Omaha she was assisted to walk to a cab, and from the B. & M. to the St. Paul depot, where she was again assisted to the train. When she arrived at her destination she was in such misery that she had to be carried out of the car, and from the depot to the hotel.

When I first saw her she was lying across the bed, with the very picture of misery on her countenance. She was too sore to allow any manipulation of parts, so an anesthetic was suggested. Before administering it her outer clothes were removed, and she was given one-half grain morphine and one-half ounce whisky, in water. When she was under full anesthesia the following was found: A shortening of about three-fourths of an inch, an undue prominence and soreness of the hip, the left knee resting just above the right knee, and the left foot resting on the ball of right toe; but no crepitation. By exclusion of a sprain, and of a fracture of neck of femur, a dislocation of left hip backwards, dorsal below the tendon, was arrived at.

After taking her knee over my left elbow, flexion of thigh upon abdomen, abduction, and rotation outwards, brought the head of the femur into place with a snap heard by the others in the room.

She rested fairly well all night, lifted herself over side of the bed next morning, so she could urinate, and went home that evening. I had heard favorably from her; but saw her last week, at her home, when she was able to walk without any limp.

THE AMERICAN MEDICAL ASSOCIATION

meets in Denver June 7 to 10, 1898, and the Omaha Medical College Pulse has perfected arrangements for a personally conducted excursion from Omaha to Denver and return.

This excursion will leave Omaha Monday, June 6th, via the Union Pacific on the "Overland Limited," leaving at 8:50 a.m.,
and on the "Colorado Special," leaving at 11:55 p. m. These are the fastest and finest equipped trains in the West, and consist of Pullman double drawing-room sleepers, free reclining chair cars, dining cars (meals a la carte).

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*THE AMŒBA.*

Out of the sight, of unaided eyes,  
With different shapes and varying size,  
Propelled by its pseudopodia,  
Is the matchless little Amœba.  
One-fifth of the body is ecosarc.  
Of protoplasm, not quite so dark  
As the granular endosarc, inside,
Where the granules float on the slimy tide,
An oval nucleus may appear,
And frequently several are plain and clear.
While the contractile vacuole,
In the endosarc like a changing scroll,
Spreads and opens to close again,
Like summer flowers in autumn rain,
Such is the lowest type of life.
Small as the point of the smallest knife,
Taking in and digesting food,
With organs densely obscure and crude;
In fact it has no organs at all.
It moves, but can neither swim nor crawl;
It breathes and eats, and to my surprise,
At the end of life, the Amoeba dies.

* The above poem we secured through the kindness of Prof. Peterson, and we thought it worthy of space in *The Pulse*. It was written by Mr. Emmerson, a student of the Freshman class in biology, and was handed in as an examination paper.

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**College Locals.**

**SENIOR ITEMS.**

During the last ten days Dr. Bridges has entertained the senior class in a series of dinners. You may be sure, with the genial doctor as host we had a right royal good time during and after dinner.

We hardly knew how good looking we were till Mr. Heyn got after us.

First Soph.—What did you get on your paper?
Second Soph.—I've got an awful headache.

Some of our freshies are already arranging to study under, and groom the horses, of our illustrious knights of '98.

Last Tuesday evening, the 19th, Mr. and Mrs. Wright of the County Hospital entertained a large number of their friends from the O. M. C. To say that we had a glorious evening with Mr. and Mrs. Wright as host and hostess would be superfluous, and one more item is added to our numerous pleasant recollections of the County.

What's the matter with Dr. Gritzka? He's all right. In this con-
nection the editor of this department, at the request of his friends, states that he managed to get them all home without mishap.

Thanks to the Omaha Brewing Association—several of the Senior class were heard to remark: "Shay, old man—hic—izh my tie—hic—on straight.

Dr. Summers recently entertained the Senior class with an exhibition of the working of an X-ray machine which he has recently placed in his office. The machine is one of the best manufactured, and as an aid to diagnosis is invaluable.

MEMORIES.
Now I take a moment's leisure,
Thinking over for my pleasure,
Of the class of '98.
Livvy's laugh.
Pampel's chaff.
And the times I've had with Mac.
And of Gillie's s'norous basses,
And how Mullins puffs tobac.

You all know of Wright, "The nigger;"
That Seymour Smith cuts no small figure;
That we'd be short without Van Camp—Wylie's glasses.
Pinkie's mashies,
Then the high kicks made by Frank.
Mrs. Fitzhe's smiles and cyclones.
Just tell Judge Joyce what you drank.

Fulton tells you how to rub 'em;
Murdock answers, "Sure I'd turn 'em."
There's a small book of two volumes—Knod knows.
Ross's pose,
Shows he claims more hair than Betts.
Miss Neal smiles and lo, two dimples.
Dusting powders Peugh regrets.

Porter's smile and laugh you know them;
Campbell's whiskers! Would I had them.
But I know you all agree
Miss Clark is all there,
And also the pair.
Andy and Smith from the Iowa City;
Miss Phillips' last—sure it's the least.
Thus did my mem'ries run in silly ditty.

—H. B. LEMERE.
If any proof was wanting of the affection the Juniors and under graduate classes bear to the departed Seniors it was supplied at the reception given by them to the Senior class at Morand's Hall, Wednesday evening, the 20th. The farewell address was given by J. R. Beattie with the eloquence of Demosthenes. The reply by H. S. Gillespie, M. D., assured our entertainers of our appreciation of their kindly feeling, and his humorous bequests on behalf of the Senior class put his audience in the best of humor for the remainder of the evening. Dr. McClanahan's address held his hearers spell-bound and the closing speech by Dr. Macrae, Jr., in his staunch support of the proper kind of class spirit, touched every student. The music was exceptionally good and Master Henry Johnson fairly won the hearts of all the ladies by his skill as a pianist and his manly bearing. After refreshments the remainder of the evening was spent in the merry whirl, to the music of Dimmick's orchestra.

JUNIOR NOTES.

James, Mercer, Beatty, Strader and Updegraff will remain in the city this vacation and attend clinics, etc.

Finney has resigned his position at the Presbyterian hospital and has gone to Saratoga, Wyo., were he will take the practice of Dr. Abbott, an O. M. C. Alumnus, for the summer. Dr. Abbott will come east on vacation.

The school year has ended, and it is with a feeling of pride that we take possession of those front seats that we have gazed upon with longing and covetous eyes for three long years. The Sophomores and Freshmen share with the Juniors in that they also have advanced a notch toward the coveted prize.

Every member of the Senior class is now an M. D. In departing they have left us many things, said to be necessary to a Senior's exsistance—front seats, dignity, etc. They also leave us the results of their special researches and discoveries, of which we will mention one of the more recent ones along the line of physical diagnosis, viz., amorphous breathing heard in the advanced stage of pulmonary tuberculosis.
Recently the Junior class was entertained at the home of their classmate, R. V. Witter, in the city of Council Bluffs. The Juniors not being favored by having upon their class roll any members of the gentler sex, our friend had invited a number of fair young ladies to assist in entertaining us. The evening was spent in amusements of various kinds until the hour of 11 had struck when lunch was served. The party broke up at 12. To say that the evening was a most enjoyable one is putting it very mildly. The class is deeply indebted to Mr. Witter, his parents and sister, and to the young ladies. It is the unanimous opinion of all the Juniors that no more charming and entertaining young ladies can be found anywhere than in the city of Council Bluffs.

REFLEXES OF '00.

Overgard captured the plum in the "practical" pathology examination.

To the Seniors, now, M. D.'s, our parting pledge is that of good will and high esteem.

The only anatomical specimen, mounted in competition for the prize, was prepared by Gish. It is a creditable specimen, considered by many, to be of more value than the prize itself.

In Hygiene: Doctor—"How much air, per pupil, should be provided in the school room?" Shockey (with a? as usual)—"Fresh air, Doctor?" Doctor—"They could furnish their own supply of foul air, I suppose."

Every man of the Sophomore class came up for final examination in anatomy, and every man passed. A record to be proud of, and one for which no little credit is due to the improved methods in the dissecting room this year.

Glancing over the other class columns, of the April number, we note that the Junior space gives attention to the shortcomings of about all the rest of us. Having all we can do, to do justice to our own affairs, we are grateful for the assistance so gratuitously afforded.
Farewell for the summer, classmates, all. Take a good rest, see and do all the practical work you can, make no impossible promises to do great reading. When the time comes, and you feel like it, look up the matters that come to your mind, and thus cultivate a good habit and your own interest at the same time.

Report has reached us that Miss Lena Klingerman, a member of our class of last year, is about to be married, at Ewing, Neb. Were we acquainted with the gentleman of her choice, the class would take pleasure in extending our sincere congratulations, as it is, Miss Klingerman has the best wishes of her one-time classmates.

Preston's idea of glycosuria—"The sugar of the blood runs over into the urine." This should have "a fruity apple odor," if Lindquest is to be relied upon. Authorities authenticated by Preston prescribe the amount to be excreted under these circumstances to be "seventy gallons per day." Douglass advances the prognosis as unfavorable in such cases, except for the fire department. Diagnosis by Rohlf—"A hot time, etc., the night before that quiz."

FRESHMAN FLASHES.

But this is no time for other than a feeling of brotherly love, and in that spirit we calmly submit "the other cheek," and bid our brother, "go in peace."

We rather wanted to resent that little speel of the sophomore scribe regarding the fight of last fall, and its result, which in no way effected the second year men, and hence was out of his line of literature.

'Tis said to be official: Osteology, one hundred; physiology, one hundred; histology, ninety-eight; materia medica, ninety-six; embryology, ninety-five, and chemistry a complete success. Who would be worthy of such a record? We might miss w-o-u-l-d we attempt to tell.

They who missed the banquet lost the best half of the last week of school. From a freshman standpoint the occasion was a
grand success, the only possible objection being that so many of
the boys preferred home to a "high time," in the true sense of
that expression, as used by the freshmen.

One of our classmates, M. A. Tinley, of Council Bluffs, lately
received the appointment of 2nd Lieutenant, Company L, Iowa
State Guards, and left Tuesday with the Company for Des Moines.
We are proud of the fact that Lieutenant Tinley is a member of
our class, and we know that he will serve his country with honor.

The majority of the class go to their homes with a feeling of
satisfaction, and the assurance of good class records and high grades
on examination. The minor element, who stand in fear of being
"failed" have no one to blame but ourselves. The course has been
thorough, the faculty perfectly fair, and the time was ours. Did
we improve it?

ADIEU.

"'Fare thee well! And if forever,
Then, forever, fare thee well!'
Tho' as freshman we may never,
Hear the sounding of the bell,
Yet the withered autumn flowers,
And the opened college doors,
Join with long and weary hours,
Welcoming the sophomores.

"'We shall sleep, but not forever,
There will be a glorious dawn!'
In the mild October weather,
When the class go marching on,
Through the winding way to knowledge,
In the autumn atmosphere,
Through the hallways of the college,
Where each object seems so dear.

"'God be with you!' cherished freshmen,
Guide you, "Till we meet again!"
O, the sweet reverberation,
Of the voices' unison,
When the classes met together
As they sang the parting knell;
"'Fare thee well, and if forever,
Then, forever, fare thee well!'"
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