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EWING BROWN, M. D., Secretary,
1026 Park Avenue Omaha.
THERAPEUTICAL HINTS ON LAGRIPPE.

W. H. CHRISTIE, M. D.

Lagrippe has been quite prevalent during the past winter. The complications are of every character.

Rheumatic complications have been quite frequent and the symptoms favor those of variold so markedly that care should be made in making diagnosis, and again that the patient should not be dismissed from observation too soon.

The treatment for one will be applicable for the other. Salol with phenacetine from grains three to five of each every three or four hours; salicylate of soda from grs. viii to grs. xv; dissolved in charged boro-lithated apollinaris; or even citrate of lithia grs. iii to grs. v in one-half of a glass of water every three or four hours, not only is good treatment in the rheumatic type of lagrippe, but where there is a tendency toward pulmonary complications, particularly pleuritic. After the stage of pain has passed in chest complications, Carbonate of Creosote will be found of good service—particularly if pneumonia is present. The ammonia suits are always good to aid expectoration when the mucous is tenacious and difficult to raise.

The habit of prescribing anodynes in every dose of an expectorant mixture should be avoided in the complications of the pulmonary tract in lagrippe as when present from another cause, Heroing gr. 1-24 to $\frac{1}{2}$, Codea 1-16 to $\frac{1}{2}$, and Old Dovers grs. 2$\frac{1}{2}$ to 3, may be administered to control a painful conyn only as need. When the object sought has been obtained they should cease.

In the aged and the enfeebled the early use of strychnine in 1-60 to 1-30 gr. dose every three or four hours may be of
great service. It will be found of good use in alcoholics suffering from lagrippe.

The patient suffering from any depressed condition of the nervous system, as well as alcoholism, as hysteria, neurves thenea anaemia, supplicative and inflammatory diseases, then should strychnine become quite an agent in the management and control of what was originally lagrippe.

Alcohol should be given with care in all cases of portal sluggishness. This should always be corrected when a complication. For this the mercurials are the best of all agents, for they not only excite secretions along the course of elementary canal, excite peristalsis, but excite the secretions generally—skin, kidneys, mucous membranes of the air passages.

Many of these cases have icterus from the duodercal catarrh and resulting acclusion of the common biliduct. The mercurials to commence, followed by the sodium phosphate, is good treatment, or again when the catarrh of the air passages demand the use of the chloride of ammonium, it will also be good treatment to correct the condition of duodenum and gall duct. Eight to ten grains every four hours. The only objection is the taste. F. E. liquorice in equal doses with a syrup of tolu or prun. berg make it more palatable.

Nephritis already present when a patient is attacked with lagrippe becomes of paramount importance to consider. Irritable decoctions must be avoided. Hot baths, lithia cit. 5 gr. in one-half of distilled water every two or three hours with dry cupping of the kidneys and soft and phenaceline in guarded doses may be admissible, but if cardiac weakness some other anodyne would be preferable.

The therapy for lagrippe is always for what is the matter with the patient and not for the so-called disease. There being no organs whose function may not be changed by this trouble, hence the complications may be many, and as indicated call for rational treatment to meet such. Otherwise the disease is self-limited, calling for rest, quiet and diet, as nature may require.
Clinical Department.

P. E. JAMES, '02, Editor.

Case I.—Boy, 8 years of age. Gives history of being run over by large coaster, or traveler. The right leg had been somewhat bruised. On outer side of leg in middl third were four lacerations of skin. These were now somewhat infected, so that intervening surface was also inflamed; hence, indications were for wet antiseptic dressing, which was applied.

Case II.—Boy, about 12 years of age. This boy also had history of injury from coasting. He had sustained a fracture of left tibia at junction of middle and upper third. The injury had occurred about two weeks ago, and had failed to unite. Hence, an incision was made down to bone over point of fracture, anteriorly about five inches long, and the periosteum pushed back. The upper fragment was drawn backwards, due to muscular action and obliquity of fracture, and even now it was found impossible to bring ends of bone into proper position by any reasonable amount of pressure and traction. Hence, a small portion was chiseled from lower end of upper fragment, after which opposition was easily perfected, and by wiring this was maintained. The periosteum and skin wounds were sutured, and the leg put up on posterior splint reaching to above knee. A plaster of Paris cast should have been employed, but on account of unhealed skin wounds which were infected this could not be availed of.

Case III.—Young man giving history of having hurt hand in falling about five weeks previous, but had been able to use hand for light work. There was slight swelling over entire dorsum of hand, and on examination of metacarpal bones, a marked prominence is found at proximal end of third metacarpal bone, and severe pain is elicited on motion of this bone. Diagnosis: Sub-laxation of proximal end of third metacarpal bone. Treatment—Pressure pad over prominence on dorsum of hand with counter pressure in palm.

Case IV.—Man about 35 years of age. Swelling of dorsal and ulnar surface of hand, pitting on pressure; also involving
lower part of forearm in which there is greenish-yellow discoloration. Gives history of fall on hand about three weeks ago, with severe swelling and pain. There is no local rise of temperature. Diagnosis—Severe strain of hand and wrist, causing great exudation of serum and blood into tissues. Discoloration is due to degeneration of blood-corpuscles, setting free the pigment granules. Treatment—As there is no inflammatory process, and absorption is slow, massage of part is indicated.

Case V.—Symblepharon of left eye. About five months ago a piece of lime in eye. This was removed, but caused quite severe irritation, which, however, soon subsided, and vision was pretty good for two or three months, when it gradually began to fail; at present almost all sight in this eye is gone, and both upper and lower lid are adherent to eye ball. This, however, is not the cause of the blindness, but in the burns from the lime the superficial epithelium of the cornea is destroyed. As the destroyed epithelium sloughs away the sight becomes poorer, and when process is complete, loss of sight is more or less complete, depending on area of cornea involved. Hence, great care in making a prognosis after burns from lime. Treatment—This is very unsatisfactory, as sight cannot be improved. May separate adhesions to eye ball and cover denuded surfaces with Thiersch flaps. This would simply be for cosmetic effects, as the symblepharon of itself causes no discomfort.

Case VI.—Young man having suffered from eye trouble more or less for three years. The entire conjunctiva is very much inflamed, producing a very free discharge, and that covering the lids shows extensive masses of translucent smeary granulations. Examination of edges of lids shows entropion of outer half of each lower lid. This greatly increases the irritation to the eye, as the eye lashes are thus rubbing on the eye ball. The cornea is encroached upon by blood-vessels extending from the conjunctiva. Especially is this true of upper half of cornea, exhibiting a characteristic pannus. This case will illustrate the long course which trachoma may run, and the serious effects it may have on both cornea and lids. Treatment—Squeeze out granulations, and follow with the usual application of copper sulphate and hot water daily.
Case VII.—Young man with wound of limbus from spike, puncture extending even to vitreous. There was no infection of this wound, and this case was shown to us to demonstrate how to prevent later infection. The conjunctiva had been stripped from sclera for about an eighth of an inch around the wound, and drawn over the wound to such an extent as to cover about half of cornea. This, of course, interfered somewhat with sight, but was rapidly retracting, and had thoroughly prevented any infection of the wound.

Case VIII.—Girl about 11 years old. Complains of discomfort and swelling of entire abdomen. Digestion is poor, and patient rather pale and anemic. On examination of abdomen liver dullness increased. On percussion there is flatness along sides, and this flatness is found to vary by changing position of patient. Diagnosis—Hypertrophic cirrhosis of liver with obstruction to portal circulation. Treatment—Although child could give no specific history, Kali Iodid was given in gr. iv., doses t. i. d., together with general tonic.

Miss Henderson gives following account of patient in her care: Mrs. W., age 40, appeared at our clinics on February 5, and gives history of having sustained an injury over the region of the left temple by striking head against a door, in July, 1899. All signs of this injury disappeared in a few days. Four months later she was seized with severe pain in left temple which was accompanied in less than twelve hours by a swelling and discoloration. In October, 1900, had typhoid fever, and while convalescing she discovered some loose fragments of bone at outer half of supra-orbital ridge. Some months later a cancer-paste was applied, and pieces of bone came away and surface partially healed. About the same time another plaster was applied to a swelling half the size of an egg on the top of the head. This sloughed away, leaving a partially healed surface adhering to underlying bone. From this a slight amount of pus continues to discharge. This lump had existed about seven months, not increasing in size, no discoloration, and no pain until it had been lanced, when it was found to contain cheesy mass and plaster was applied.
Five weeks ago an arsenic plaster was applied to a dark discoloration over upper part of right scapula, with the result that an undermined ulcer is now found in its place. There is slight area of redness and induration around it; some yellow discharge; odor not bad, but shows no tendency towards healing.

At times cervical, as well as axillary glands are enlarged, but will again recede. Temperature does not rise above 99.10 F.; pulse is normal; urinary analysis is negative. A small section from the border of the ulcer on scapula was examined microscopically and found to contain in great numbers epithelial pearls. This establishes without a doubt the lesion of shoulder to be an epithelioma. But now the question arises, "May the other lesions have any relation to this, or are they entirely distinct?" Syphilis may practically be ruled out as anti-syphilitic treatment was of no avail. Hence, diagnosis seems to hinge between tuberculosis and cancer of scalp and temple. This differentiation must be made by microscope, but each may think for himself which is the more probable until such examination is made.

Drs. Jefferson, 1900, of Talmage, and Gritzka, 1901, of Lorton, Neb., were in Omaha recently.

Dr. Case, '95, of Stockville, was in the city with a surgical case for operation.

Dr. A. B. Lindquest, 1900, who has been doing post-graduate work in New York during the past two years, is now an associate in the chair of Obstetrics.
The O. M. C. Pulse.

VOLUME V. NUMBER 5.

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

Entered at Omaha Postoffice as Second Class Matter.

EDITORIAL.

The short notes by Dr. W. H. Christie on lagrippe will be appreciated by most of us, especially at this time. We have had a severe attack of influenza and feel, therefore, that these notes are especially opportune. At the same time several promised contributors disappointed us for this month, but we still hope that The Pulse is newsy enough to be read.

We notice a criticism in one of our exchanges on the fact that The Pulse contains more notes than it does medical articles. When we started the year we were told by our predecessor in the editorial chair that we had better try to have The Pulse contain more news and not a great amount of medical literature.
At first our idea widely differed from that statement, but we now admit its force.

The abundance of good medical literature is evident to every practitioner of medicine. The Doctor, as a rule, takes more medical journals than he has time to peruse. In such a full field as this what can a medical college journal expect to do? Its greatest importance is to awaken some interest in its alma mater. And this must be by means of notes which tell of our progress and improvements. Our main articles have their force and are read as a rule—as there is but one, and it is, as a rule, brief and to the point. Articles of scientific value written by students are all well enough for the writer, as it gives him experience, but not of much value to the actual practitioner, as it gives nothing further than what has been collected from various text books. The only time when medical articles are of value to the reading physician is when they are written by a mind matured by study and by practice.

We are too humble to expect to do anything much in moulding the medical knowledge of our time, and we feel that if we contain items of interest to the students, faculty and alumni of the O. M. C., that we have done our duty.

We are glad to welcome an addition to the teaching force of our college. Dr. A. B. Lindquest of 1900, O. M. C., who has had two years of experience in hospital practice in New York, is no stranger to us. He takes up the work of Dr. Lyman as assistant and quiz-master for Dr. McClennahan and Dr. Somers, with the addition that he quizzes the Seniors on diseases of children. Dr. Lindquest will be remembered by many as a former editor of THE O. M. C. PULSE. We hope that the Doctor will find his work as agreeable and pleasant as the news of his affiliation is to us.

DR. A. C. STOKES, Professor of Genito-Urinary Surgery and of Chemistry, has been appointed a surgeon in the regular army. It is a position that Dr. Stokes will fill with credit to himself and the profession, but we regret that we are to lose him. The Doctor has our best wishes in his new field of work.
Dr. Kruse, at present attending the O. M. C., and who has obtained part of his medical education in Germany, has taken a class in massage. Dr. Kruse studied massage under Dr. Kronbeck of Bonn, an eminent man in the medical profession in this line of work. Massage, as a therapeutic measure, must not be despised by members of our profession, because it has been so greatly abused and overestimated by the osteopath. Every therapeutic measure that is of practical value should be at our command, and as there is no doubt that rational massage is of great benefit in many cases it should be a part of our armamentarium. The course will consist of both theory and practice and should be of great value to the student.

Through a mistake on the editor's part, no notice was made in our last issue of the treat given the Senior class by Dr. Yeakel, our Pathologist. The Doctor entertained us one evening with a review on the histology and pathology of the liver and kidney. His lecture was illustrated by means of the new lantern, which displayed liver and kidney sections before us magnified to a very large size. The new microscopical lantern is a great aid in a preparatory lecture, but will never replace the student's patient study by means of the microscope alone. It is, of course, only intended to serve as an illustration for the lectures. It helps to pave the way. The student must gain and fix his knowledge himself. But as such it will be of great value and help, and should be present in the laboratory of every well-appointed medical college. The Omaha Medical and Dr. Yeakel are to be congratulated upon their early acquisition of such a valuable aid to the study of the science of histology and pathology.

The present epidemic of small pox only emphasizes the advance made in our science and the practical good that our profession renders the public. Public legislation for the quarantine of contagious diseases has always been instituted or at least advanced by the medical world. By means of vaccination the virulence of Variola has been greatly lessened. We should be
careful to present such facts as this before the public. The fault of the followers of medicine is that they are, as a rule, too modest in their support of their profession. We should inform ourselves of the statistics of the lessened mortality in Cuba under sanitary rule, of the decreased number of deaths in New York and other large cities, due to proper infant feeding and hygiene, of the immense number of lives that anti-toxin has saved, of the countless coffins saved by antiseptics, and other kindred facts, so that we may be able to press them home when the occasion demands. It is not infrequently that our profession is assailed, not always by the ignorant and ill-informed, but sometimes by people who have been mistreated in some way. And by a proper presenting of these logical facts we may oftentimes be the means of bringing skeptics to look upon our beloved science as we do.

Senior Notes.

JOHN A. PETERS, '09, Editor.

BIG PANIC IN DRUG MARKET ON WALL STREET.

Thousands of men Thrown Out of Employment.

Crude Drugs Advanced 50 Per cent.

NEW YORK CITY, Jan. 27.—By the burning of an immense drug emporium at Crab Orchard, Neb., belonging to Dr. W. A. Fitzsimmons, the drug market was almost wholly depleted of crude drugs, which caused an immense panic in the drug exchange on Wall Street. Crude drugs advanced from 50 to 75 per cent , which will eventually cause a similar advance in all pharmaceutical and proprietary remedies. The shock received by the drug market through this immense catastrophe is one from which it cannot recover until the next crop is harvested. The large number of men which he employed are thrown out of employment, and as this has been a severe winter in Nebraska there will be untold suffering among the employees and their families. The loss is a complete one, as no insurance was carried,
but the Doctor is well fixed financially, so the loss to him is but trifling.

Query—Would the following irrational answers to rational questions be in any way characteristic of a mental retrograde metamorphosis, and if so, what is the prognosis?:

Dr. S.—How many ways are there of performing External Urethrotomy?

Henniger.—Two. Internal and external.

Dr. S.—What different forms of treatment are there for Vesical Calculus?

Poynter.—There are two different methods—operative and instrumental.

It seems probable that the O. M. C. may, in the distant future, have the honor of graduating a few men of the Oliver Wendell Holmes variety. Compliment intended.

A HISTORY OF THE SENIOR CLASS.
(In Four Chapters.)

CHAPTER III.

On our return to the O. M. C. for our Junior year we lost Messrs. Hoopes and Montgomery, and most of all, Mrs. Davies. Anxiety to finish their medical course sooner than they could here, took the aforementioned stars to P. and S. in Chicago. The real cause of Mrs. Davies’ failure to return has never been explained, though I presume “Mac,” Charley, or the tall Northerner could elucidate now that they have had a year’s respite to recover from the shock of their wounded feelings. Further evidence of the class’ recompense for any loss was present this year. Messrs. Heffelfinger, the silent man; Jenkins, the funny joker; Kennedy, the political intriguer, and last but not least, John E. Hansen, the ladies’ man from Keokuk, joined us. At the annual class election the efforts of Tammany were successful, as is evidenced by the fact that Tinley was elected president, Grover Rathburn was given the office of vice-president, both for his personal popularity and for his unique position in the laboratory; Cooper succeeded Miss Henderson as the exchequer of the class’
funds, and Christie was delegated to advertise us in a legitimate way in *The Pulse*.

Foot ball proved to be the all important subject during the first two months, and, as was the case the preceding year, the class of '02 proved to be the Vertebral Column of the Pigskin Maulers. The manager endeavored to convince every man on the faculty that foot ball was as essential to the curriculum as anatomy, with this much success that the team practiced every night from 4 to 6, instead of thickening gluteal and cossy gral bursa listening to Practice of Medicine.

Dad Moore's efforts were spent in endeavoring to convince under classmen that it was important to their future success in the O. M. C. that they get out and play foot ball. Mac succeeded in getting a second team out quite often that was such a stiff proposition that he was convinced on several occasion that he could train them to wallop the first team.

The class as a whole was the most liberal, not only in that easily given moral support, but in the financial support needed by the team. In the greatest part as a result of the last year Juniors, the O. M. C. defeated Bellevue, Hastings, their old rival, Creighton, and drew the largest crowd that has turned out in years to see the Thanksgiving game with Rush Medics, with Van Doozen of North Western at their head. One thing more in the line of foot ball—the class game of the Juniors that had not played on the first team and the Sophomores. It would be unjust to pass over this notable occasion without recalling the singularly remarkable place kick from the middle of the field, at a moment of most intense interest and vital importance to the result, engineered by "Huzzah" Christie and Cooper of "Many Told Tales." The score was 5 to 0 in favor of the Sophs, and the half was nearly over when Capt. Christie called for a place kick. The ball was deftly passed and placed by Christie and Cooper caught it squarely on his No. 8, and the ball landed between the posts—no, between the shoulder blades of the opposing half back. Christie carried his hand in a sling and Cooper limped for a week after, but the Juniors voted it was a put up job to lose their money.
The Christmas Holidays came and passed with little more than the usual exam. excitement. In January an accident occurred which created considerable heat, redness, etc., in the class body. McDowell, fearing lest a vaccination might cause an ugly eschar on his soft, shapely arm, insisted on being vaccinated on the leg, with the result that he developed a beautiful case of "calf" pox, and was confined to his room. The incident caused great anxiety to the class, and though all, including Miss Henderson, volunteered to nurse and care for him, he refused to be comforted for several days, because "Polly" was not there to nurse him.

February produced no more uneasiness than a threatened war by the Seniors against the Juniors, if they did not see to it that their president discontinue his efforts to monopolize the attentions of the only representative of the fair sex in their class.

March saw the appearance of the much talked of Fraternity in the O. M. C., and several Juniors were discovered to be charter members.

April brought around the year finale with the undergraduates' banquet, at which J. Dick Reed gave our class greetings to the graduates of '01.

End of the Gossip.

The following clipping from the New York Journal may be of interest to some of the readers of The Pulse:

**Junior Notes.**

S. TRUELSEN, Jr., '08, Editor.

The dose can be increased slowly by slowly—

DR. KOERBER.

On account of a mistake which occurred in one of last month's notes, Agee carried another man's burden for a whole month and now wishes to be relieved. The nickname Cradle Robber has been imposed upon Chambers and not upon Agee, as we wrongly stated in last month's issue.

Our own Royal Scott Stuckey, of Gastro hysterectomy fame, who has upon several occasions rescued a quiz-hour from the category, Glad It's Over, again demonstrated his ability
when, upon being questioned by Dr. Lindquist to name the glands of the uterus, he said, the Meibomian glands were found there.

Max Koetter and Mr. Rathbun have invented a practical ureameter, a description of which has been promised us for next month’s issue.

We were very sorry to learn, that Dr. Lyman is obliged to give up his school work for the rest of the term on account of ill health. He has our sympathy and best wishes for a speedy and complete recovery. Dr. Lindquist, class ’99, has been chosen to take his place at school. We wish him success.

Only thirteen Juniors attended Dr. Koerberg’s quiz on therapeutics last week. Thirteen others were engaged in a little friendly game of poker, while the number that attended Innes’ concert was also thirteen. That accounts for thirty-nine. No one could account for Gage and Platt.

Smith is again in trouble. It appears that he is under obligations to all the boys in the building where he is rooming, being obliged to do everything they demand of him. The initiated in return seem to be under oath-bound obligation to Smith not to divulge the secret, since no one could be induced to reveal Smith’s trouble.

Needed for next year: An eight months’ term and cushioned seats. Should it be impossible to gratify our wishes in both particulars, the Board will, please, oblige us to everlasting gratitude by having our hard seats upholstered.

Little Frank is certainly most unfortunate in guessing answers to Dr. Ludington’s questions in surgery, and has upon several occasions excited the Doctor’s wrath, manifested by such trite remarks (some say insulting) as, Oh, wake up, and, ‘Oh, what a waste of gray matter!

We would like to impress upon Graham that, however it may have been in Keokuk Med. College, the gonococcus cannot be considered a common pus, producing bacterium in O. M. C., as he recently answered in quiz.

One of Miss Nelson’s sisters finished her course at the University of Nebraska last week. She graduates with honors.

Several of our boys were remembered by their friends on
St. Valentine’s day. Mr. Demar received two very appropriate pictures. Mr. Black was most fortunate. He received a box of fine candy (“sweets for the sweet”) and one of the prettiest valentines we’ve seen for some time. It was a large double heart which had two small hearts attached at the base and one at the apex. On the inside the following affectionate verses were found:

You can make me happy,
    With one gentle tone;
Never more to wander,
    True to love alone.

Oh, my dear, do not linger,
    Make me quickly thine;
Evermore I’ll happy be,
    For you’ll be only mine.

Black says the gifts are from his little cousin. All that believe him will please say aye. The ayes have it. Now, all that would like to have just such a “cousin” will, please, say aye. The ayes have it again.

Mr. Jungbluth received a fancy pillow. Our attempt to describe the colors was a flat failure. One of our ladies was kind enough to come to our assistance and described it by saying that it had all the colors of the rainbow combined with those of the sky at sunset, intermingled in such a manner as to cause one to doubt that the days of fairies are passed.

On Monday last, Dr. Yeakel, instead of lecturing, presented to us a clinical case. The following history was elicited by the class:

Age, 38; occupation, farming; past history, had had diseases of childhood; since then had been well until October, 1898; at this time contracted malaria while soldering in Manila. Was in hospital there for four months, but did not fully recover; has had diarrhoea ever since; had icterus in fall of ’01. Present history—Pain in epigastric region radiating to left iliac region and to left shoulder; has no appetite and some foods disagree; tongue coated and furrowed; frequently has nausea and some-
times vomits, but no blood; stools contain mucus and sometimes blood; is anaemic, cachetic, and very weak; has not been able to work since fall, '98.

Dr. Yeakel now asked for a diagnosis, but none seemed indicated. A blood examination was suggested. It was made by Dr. Yeakel before the class. Result:

Hemoglobin, 47 per cent.
Reds, 1,600,000.
Corpuscle, per cent 32.
Corpuscle index, 1.25.
Leucocytes, 3,000.

When it was seen that the corpuscle index was more than one, everybody at once knew that the diagnosis was Pernicious Anemia, because this is the only disease in which the corpuscle index is more than one.

The case was very instructive and emphasized the statement made by Dr. Gibbs a few days before, that Pernicious Anemia is sometimes impossible to diagnose absolutely (he should have added, without a microscope.)

It has been Dr. Yeakel's good fortune to get for examination quite a number of cases of Pernicious Anemia. He has devoted a good deal of study to the subject, and an article by him on the same will appear shortly in the Western Medical Review.

If a beard you'd like to grow,
Though the trick you do not know,
Don't despair, don't worry so—

Ask Smith.

Though you've tried it oft before,
Only failure to deplore—
Now take heart and try once more—

With Smith.

No, a Lombard he is not,
But his beard is pretty hot;
How he got it I wist not—

Ask Smith.
Though not a sage and not a bard,
He is going at it hard,
And if beard will help him out,
He has won the race, no doubt—

That's Smith.

Ein Sommer-Ereignis.

Ich möchte heut' es wagen
Euch eine Geschicht' zu sagen.
Eine Moral werde ich dann knüpfen b'ran
Damit ein Jeder lernen kann,
Was zu thun und was zu lassen
Will er nicht den Zug verpassen.—

Ueber die schöne Burlington Route
Kam eine seelevergnügte crowd,
Darunter ein Doktor mit zwei Damen,
Die von Seward nach Omaha kamen.

Heiß war der Tag und auch schmutz;
Der Doktor bekam ein trockenes Gefühl;
Bei Gelegenheit stieg er aus
Und eilt schnell in ein Bierhaus.

Und wie es mitunter ja so geht,
Der Herr Doktor kam zurück zu spät,
Die Damen führten weiter
Auch ohne den Begleiter.

Doch führen sie nicht lange;
(Sie waren viel zu bange)
Sie stiegen aus, fuhren zurück,
Fanden den Doktor und sprachen von Glück.

Nun die Moral von dieser Geschicht'
Merke Dir, vergiß sie nicht:
Wenn Du mit Damen thuft 'ne Reise,
So bleibe schön bei ihrer Weise;
Und, sei die Kleide noch so trocken,
Lass' Dich nicht in's Bierhaus laden.

—sen, Jr.
Sophomore Notes.

Hector McArthur, '04, Editor.

1. Why does Riley go home so often? Ask somebody at home.

2. It is rumored that Shaw has joined the "I Tappa Keg" fraternity.

3. We are now "up against the real thing" diagnosing tumors in Dr. Yeakel's practical exam.

4. Any one looking for trouble can secure a bountiful supply at any time by applying to "Farmer Dickey."

5. Mr. B.—"Did you hear of the smallpox cases?"
   Mr. P.—"Why, no. Where?"
   Mr. B.—"Down at the Union Depot. They vaccinated the depot from 4 until 7 o'clock."

6. Dr. Stokes has saddled our prize biologist, Pap M., with the difficult task of determining "where they all go to." If anyone can find out, Pap is the man to do so.

7. Keckler, since his hold-up, has a bodyguard in attendance to prevent any future attempts to injure his royal person or lighten his purse.

8. Trostler attended a meeting of the Nebraska Ornithological Union at Lincoln. He returned looking—well, he was out two days and a night.

9. We extend our hearty congratulations to Dr. Stokes in the recent honor which was bestowed upon him in his appointment as surgeon in the U. S. Army.

10. Campbell and Bellinger have recently completed a special course in embryology. Dickenson requires a little more time, as he is making a close study of the heart.

11. The Linton Serenaders will be out as usual next Saturday night.

12. Some time ago, under the supervision of Drs. Gifford and Milroy, our students were divided into squads to prevent any possible spreading of smallpox, if it should gain entrance to our college. All students who had previously neglected it were vaccinated. Then a member in each squad was appointed to keep a daily record showing the temperature of each individual in his
group. Our sincere thanks is due the above gentlemen and other members of the faculty for their kindly effort in our behalf, which probably has saved us serious trouble.

13. A troup of cavalry has been organized in South Omaha which will shortly be mustered in as Troop A, of the Nebraska National Guards. Dr. Tische, our genial Professor of Anatomy, has been appointed surgeon, while our classmate, Dickinson, will fill the bill as sergeant.

14. Scene: Doctor's office.
Four students up for quiz.

Doctor: "Where is the Vermiform Appendix?"

Student: "In the—er—on the— Well, I know where to find it. It is midway on a line drawn from the umbilicus to the ilium. I think it is on the sigmoid flexure."

Doctor. (the Dr. snorts): "Next man. What is that line called? What's it's name?"

Student: "I never heard that there was such a line. I don't believe Gray gives it."

Doctor (very short): "Well, you fellows are bad. Next man, Haven't they told you about that point at the college?"

Student: "Yes, sir; half a dozen times. It is McBurney's point."

Doctor: "Well, I thought so. Next man, Where do you find the spleen?"

Student (studies hard): "In the posterior mediastinum space. Just below the stomach."

Doctor: "Well, what in thunder! You sound like the corrustificated exegesis emanating antispasmodically from the source of the animal refrigerator producing a proliferation of phylogosis in the pericranium, thus obfuscating the mental profundity. The next bunch that comes up like you's, I'll throw 'em all out the window." The Doctor hands their cards over his right shoulder and the students file out into the hall to take an invoice of their stock of anatomy.

15. The following telegram was handed to me January 25, 1923:

"Collect mail damaged by wreck of No. 3 and send it to its
destination. File letters having seal broken and await further orders of mail department.

(Signed.)

OUR. GEN SUPT.”

I found the mail badly damaged, put the following five important letters on file and am still waiting for orders:

“SIOUX FALLS, S. D.

Sir:

I am in receipt of your valued favor of Jan. 2, in which you agree to a “catch-as-catch-can” wrestling match to be held under the auspices of the O. M. C. Athletic Club, for a purse of five thousand ($5,000) dollars a side and gate money.

(Signed.)

DR. NOSNIKCID.”

“SUTTON, Neb.,

Dear Sir:

Since my wife has left my bed and board and $50,000 of my bank account, I wish you would insert in your paper an advertisement for a good-looking woman not over 40 years of age, good, strong temper, and 200 pounds weight. Run this until it brings results and send the bill to

DR. GNINEB.”

YORK, Neb.

Dear Sir:

In my opinion the causes of insanity are mental. Emotions normally arise from ideas. Ideas are excited by outward stimuli. If this stimulus is of such a nature that harmful emotions are excited, the most disastrous results to the nervous system are sure to supervene. Disordered nerves cause physical havoc. The physical reacts on the brain, which manifests symptoms of dis-

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order, and insanity frequently results. Cigarettes will also cause it. Yours sincerely,

Dr. Tserp.

Bellevue, Neb.

Dear Friend:

After eighteen years spent in the practice of medicine, I find myself without money and ambition, with my trousers down at the heel and my hat run up to a peak. Still my early training in holding a good poker hand will help me, I know, and I start in a few days for Omaha, where I hope to work men as they have caused me to work. Hoping to meet you at Mauer's and have a social glass for old times' sake, I remain yours,

Dr. Nottap.

Denver, Colo.

My Dear Mabel:

 Perhaps you think because I have not written for some time that I have forgotten you, but I have not. I have been so busy that I did not have time to eat more than a few cans of beans, as I did not have time to go to the hydrant for a drink. I have been drinking beer since you left. I have to lecture on a new subject now every day, and the following are some of them: "Bilateral Recovery from Cerebral Spinal Meningitis of the Glental Region," "The Money Value of a Man's and a Woman's Life," "Presbyopia, or Deterioration of Vaso-motor Areas," "Apioine Morrhual and What It Causes." Of course,
as I get used to it, the work will lighten. Get a new baby carriages and get home as soon as convenient. Your loving husband,

Dr. Elpmas, M. D."

FRESHMAN NOTES.
W. H. ANDERSON, EDITOR.

The close of the dissecting season was gladly welcomed by the "gang."

Potter is seen at church quite regularly now. We'll get cards when it happens.

Kennedy is looking for some one who can instruct him in the art of falling gracefully.

Mr. Baker will attend the annual ball at University of Nebraska Friday.

Mr. Runnery is convalescing rapidly and will probably be out in a few days.

Just give me a few more days of grace—so says Lane.

We regret to learn that Dr. Stokes will probably leave us in the near future to don the army blue, but wish him all success, nevertheless.

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