

Operative Management of Compound Fractures.

Dr. B. F. Barnes (*Ohio State Medical Journal*) concludes:

1. Operative methods should be used only on cases that cannot be successfully treated by other means.
2. Never operate on recent fractures, except those of the skull, or in an already infected field.
3. Keep wound open during interval and use wet dressings.
4. The intermedullary bone splint gives best results whenever practical.

A Greeting to the New Graduate.

When Dr. Clark, who was professor of the principles and practice of medicine in the College of Physicians and Surgeons, was in his prime, so the story goes, a member of the graduating class called on him at his house one morning for the purpose of having his chest examined, for he feared that he had incipient pulmonary disease. Having undergone the examination and received the welcome assurance that his lungs were sound, the young man asked the doctor what his fee was, "Oh, nothing, sir, nothing at all." "Why, how is that?" "Well, you know, dog doesn't eat dog." "What do you mean, sir?" "Simply that one doctor doesn't charge another doctor for professional services." "But, you know, Professor Clark, I'm not a doctor; I'm only a student." "Very well, dog doesn't eat pup." And there was nothing for the young man to pay.—*N. Y. Med. Journ.*