Accordingly, the 4, 5 and 9 mm. bronchosopes, with appropriate lights and suction tubes, are provided. There is room in this drawer for battery boxes and light cords for the bronchoscopes, as well as ampules of procaine and pentothal, sterile water, and syringes for treatment of arrhythmias, convulsions, and so forth.

The cabinet described was designed for both routine and emergency endotracheal procedures. It is kept in the induction room of the anesthesia department, and serves as a readily available unit containing all the necessary equipment for pre-operative intubation and bronchoscopic suction. Its movability renders it extremely valuable for use in emergency operative intubation and resuscitation.

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APPARATUS FOR AGITATING BLOOD BOTTLE

A simple apparatus (fig. 1) which I have devised utilizes the hand-squeezing motion of the blood donor to stir the blood being drawn from his arm. It is useful when little help is available.

The bottle (I employ a Fenwal flask) into which blood is being drawn is placed in an open-topped plywood box with weighted bottom. The base of the box is a square, each side of which is 3/4 inch longer than the diameter of the bottle. Two half-inch holes are drilled exactly opposite each other just above the bottom of the box so that a line joining the two runs eccentrically across the bottom of the box and parallel to one edge. This line should not be too close to the edge of the bottom, to insure that the bottle will always rest on the inflatable latex Penrose tubing which extends between the two holes. On the side toward which the bottle is tilted by inflation of the latex Penrose tubing, a variable center section may be cut out, leaving vertical lateral edges. This permits observation of the blood flow and allows for an increased tilt of the bottle. A hand bulb
from a sphygmomanometer is connected to a suitable length of wide bore intravenous tubing (3/16 inch I.D.), over the far end of which a piece of latex Penrose tubing, size 5/8 inch is fastened by a tightly wound elastic band. The Penrose tubing is just long enough to pass through the two holes in the box and underlie the bottle. The far end of the Penrose tubing is similarly fastened by an elastic band over another much shorter piece of the intravenous tube. When the apparatus is in use, a screw clamp is tightened over the short end piece of intravenous tubing sufficiently to close it, and the valve on the hand bulb is left open. Squeezing the hand bulb rhythmically will rhythmically inflate the Penrose tubing. If the ends of the intravenous tubes nearest the box are fastened down by pieces of wide elastic stretched over them and tacked to the base board on which the box rests, this will prevent pulling through and twisting of the Penrose tubing, and subsequent ballooning.

This simple apparatus will permit the blood drawer to take several donors with little or no help.

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CORRESPONDENCE

Dear Dr. Tavell:

I must apologise for the delay in the writing of this letter, which I promised to send you when I wrote in mid-October, but much has happened since then to prevent me giving adequate time and thought to it. I do not know how full an account of the centenary celebrations over here you have received, but we have heard comparatively little as yet of your own celebrations at Boston, among other places.

In mid-October, Lord Moran opened an exhibition of old anaesthetic apparatus in the Wellecome Museum and Dr. Ashworth Underwood set the fox among the chickens by his announcement of his discovery of a much earlier ether administration than had been suspected, in this country at any rate. Unfortunately, I was unable to be present then as my duties kept me here. However, the Committee was good enough to give a ten-day holiday at the end of October including the time of the celebrations. They opened with the reception by the President, Sir Alfred Webb-Johnson, at the Royal College of Surgeons. We all gathered in the lecture room to await the arrival of the Princess Royal, who was to unveil a memorial tablet in the main hall of the College. Prior to the unveiling, Dr. Marsden, who is the President of the Association of Anaesthetists, gave a short speech outlining the work and careers of the four pioneers commemorated on the tablet, Henry Hickman, John Snow, James Young Simpson and Joseph Thomas Clover. He succeeded in bringing more than the suggestion of a smile to Her Royal Highness's face on several occasions, which is quite an achievement. His speech was all that it ought to have been, a masterpiece of brevity yet containing much information and an admirable introduction to the actual unveiling. It was really a very colourful scene, with all the women in evening gowns and the men wearing academic dress, which for many of them is a brilliant red gown, sometimes edged with mauve and for the Presidents of the Royal Colleges much in the way of gold facings.

After a short interval in which we moved out into the main hall, Her Royal Highness unveiled the tablet following a short speech in which she paid tribute to our work and that of all those who have gone before us. It is a plain tablet bearing the arms of the Royal College of Surgeons and the Association of Anaesthetists at the head and a short paragraph above the names of those commemorated. Following this we all moved up to the Library for refreshments and to study the exhibition of apparatus arranged by the various firms concerned with the manufacture of apparatus and anaesthetic drugs, all of whom had their representatives there to answer questions.

The next morning demonstrations were being given at various of the big teaching