tissues. The next procedure, as before, is to rotate the inner tube to the left and push it home. Up to this point the manipulations are the same as those used in dealing with a safety-pin. When, however, the straight pin is housed in the outer tube, the withdrawal of the inner tube does not bring the straight pin with it as it does when dealing with a safety-pin. In order, therefore, to bring out the straight pin both tubes must be removed together.

The tube can be made to grasp a straight pin when it lies in another common position, that is, aslant, across the esophagus and head up. In such a case the point lies below and is embedded, whereas the head is uppermost and free. The tube is introduced in the usual manner and the slit is made to embrace the head of the pin and a bit of the shaft. The tube is carried downward until the head of the pin lies at the top of the slit. Then the outer tube is rotated on the inner one until the shaft of the pin stops its further movement. The head of the pin is now locked in the outer tube. Both tubes are removed together. As the pin comes out, the head lies in the tube and the shaft outside and roughly parallel with the tube. This maneuver is given because, theoretically at least, the tube can be called a "complete" pin-catcher. In practice, however, it is doubtful if this last manipulation would ever be carried out. With the head of the pin once inside the tube the obvious and instinctive procedure is to grasp the head or shaft of the pin with the forceps and to pull the pin out.

It is a little odd that the form of the metal cap of the ordinary safety-pin and the form of the lower end of the outer tube of the pin-catcher should happen to be so much alike. The principle of the two is the same. Two or three appropriate but overworked comparisons such as "set a thief to catch a thief" at once assert themselves. The reader is spared all but this one, and in return for the favor he is expected not to make this comparison apply to more than the tube.

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Tack Lodged in Left Bronchus. G. TAPIA. *Rev. espan. de Laringol., etc.*, Jan., 1911.

The tack was removed by lower bronchoscopy fourteen days after being swallowed by a girl of 4 years.

Ed.