Description of the Plate.

Fig. 1. A piece of broad silk webbing, hollowed out to fit exactly the nates, and underneath the arms, bound with silk ferret.

2. A plate of iron or steel.

3. Springs for stopping the inguinal and subclavian arteries.

4. A cap for the opposite shoulder, to which the spring is applied; with holes to fasten on the studs, and lined with chamois leather.

5. The tourniquet for increasing the pressure.

6. The form of the pads:—*a*, the femoral; *b*, the subclavian.

7. A turnscrew.

a a a a. Four studs for applying and fixing the shoulder-cap.

b b. Two sockets for receiving the springs.

c. The position of springs behind; to be downwards for the inguinal, and upwards for the subclavian.

d. Screw-holes for altering the length of springs.

e. Straps and buckles to fasten round the body.

Fig. 3, No. 2.

Fig. 5, No. 2. } The form of the springs, tourniquets, and pads,
Fig. 6, No. 2. } when applied.

Length of the back-plate, $8\frac{1}{4}$ inches; width, $4\frac{1}{2}$ inches; thickness, $\frac{1}{8}$ th inch.

Length of spring for inguinal, 22 inches; length of subclavian ditto, $19\frac{1}{2}$ inches.

Diameter of inguinal, from the end of the spring to the knee of ditto, $4\frac{1}{8}$ inches.

Diameter of subclavian, from ditto to ditto, $3\frac{1}{2}$ inches.

Length of the tourniquet, $3\frac{1}{2}$ inches.

Size of oval pad for the inguinal artery, $2\frac{1}{4}$ inches; width of ditto, $1\frac{1}{2}$ inch; height of a cone, $\frac{3}{4}$ th inch.

Size of oval pad for the subclavian artery:—length, 2 inches; width, $1\frac{1}{8}$ inch; and to form the height of a cone, $\frac{3}{4}$ th inch.

Length of large-sized inguinal spring, 26 inches.

Diameter of ditto, from the end of the spring to the knee of ditto, 6 inches.

ART. IX.—*Case of a Fætus, in which the left Foot was separated from the Leg during Utero-gestation.* By — WATKINSON, Esq. Surgeon, &c.

On the 29th of last December, I was called to attend Mrs. —, residing at —, aged twenty, who was in labour, having been married in April preceding. Soon after five o'clock, I made my first examination, and found the membranes entire; there had been some trifling flooding, but not of consequence. Labour went on slowly until seven, when the membranes gave way, the head came down, and the child was expelled, in a natural way, about half-past seven; when I discovered that the left foot had been amputated a little above the ankle, and the part nearly,

but not quite, healed, in consequence, perhaps, of the bones protruding. The child was alive, and gasped for twenty minutes, when it expired. The mother said she had only gone seven months, which perfectly agreed with the appearance of the infant. On examination after the birth, I discovered the foot in the vagina, which I brought away: it also was nearly healed, but here likewise the bones protruded. There did not appear to have been any extravasation of blood from the limb, as far as I was able to judge. This foot (the left) was much smaller than the other, which was rather turned inward: it showed no marks of putrefaction, and, from comparing the two, I am led to suppose that it must have been two months separated from the body. There was not the slightest discoloration of the foot, which was in a state of perfect preservation.

The mother says, she was not frightened, nor did any unpleasant circumstance occur in the family during her pregnancy, to give her the least uneasiness. The husband is a journeyman, and by his industry they live comfortably, without her having to use more exercise than is actually necessary in a well-regulated family.

King-street, Soho; March 1825.

*** We have examined the preparation, and subjoin a rough sketch of the parts.
—EDITORS.