be used as an arm splint. The side members in the Ord modification are steel tubes with telescoping rods, so that the splint can be lengthened as required. The Ord splint weighs 3 pounds and when collapsed measures 23 inches in length with a 6½ inch ring.

Having regard to these advantages the Medical Directorate, A.H.Q., India, on the look-out for a more portable splint for frontier warfare than the standard Thomas's, got into touch with the makers of the lighter and shorter article with a view to trying it out.

It was then found that Lieutenant-Colonel H. Horan Brown, M.B., I.M.S., had devised a modification of Ord’s splint, which seems to overcome most of our difficulties.

Horan Brown has hinged the adjustable ring. On the outer surface he has fitted a wing-nut which firmly secures or releases the hinge. The ring can be adjusted to any useful circumference and, further, can now be hinged to any comfortable shape to fit leg or arm. And, when folded flat, the splint can be packed absolutely flat.

This device then means that we are no longer compelled to tie our Thomas’s splints on to a mule, camel or roof of an ambulance car as best we can, but can pack a dozen or more in a fracture box.

With Lieutenant-Colonel Brown’s permission, I have taken some photographs of his modified design, and the usefulness of the apparatus is at once apparent.

I think this design solves all our transport difficulties, and will prove of the greatest value on account of economy in load and space if adopted for field medical units.

And not only has this folding, adaptable Thomas’s a use for field medical units, but every V.A.D. and ambulance unit will doubtless be glad to have one for training purposes. Then inspecting officers on the occasion of the annual visit need no longer be moved to mirth by the sight of five inches of leg of a small boy “fixed” in a ring about eighteen inches in diameter.

**IMPROVISED APPLIANCE FOR USE WITH STEINMAN PIN APPARATUS.**

**BY CAPTAIN D. R. NICOL,**

*Indian Medical Service.*

The following suggestion is submitted as the result of experience in the treatment of fractures at the Combined Indian Military Hospital, Bannu, during the Khaisora operations, 1936-37.

During the first few days of the operations in November and early December, 1936, a number of gunshot wounds of the legs were admitted with fractures of the femur or tibia and fibula. These were treated either by Kirschner wire and calipers with Balkan beam or by Steinman pin and calipers.
Unfortunately the supply of Kirschner wire appliances and Steinman pin calipers at the time was inadequate to treat all the cases. To obviate the delay in treatment which would have resulted, the writer suggested the following improvisation to the surgical specialists of the Rawalpindi and Waziristan districts, and with their approval it was carried out.

An ordinary cavalry spur, which has studs for the straps, was used in place of the standard calipers. The studs were knocked out of the spur by a centre punch and the spur was then sterilized. The pin was driven through the bone in the required position, and the spur, sprung open by the operator, was clipped in place. The stud holes were clipped on the pin and adhesive tape was fastened around the spur shank and over the protruding ends of the pin. The patient was then set up in the usual Thomas splint and a rope was attached to the spur and passed through a pulley on the Balkan beam. Weights were attached to the rope and the desired traction was obtained. The spur remained in position until the patient's convalescence and was found to work as well as the more elaborate calipers specially designed for the purpose. This emergency method appears to have the following points to its advantage:—

1. A spur is easily obtainable from any mounted unit, and only a few minutes are required to prepare it for use. Should the holes be too small for the pin, they can be quickly enlarged by a drill to the required size.
2. Pins can be made quickly in any repair shop possessing tool steel.
3. The spur is easily sterilized and requires no adjusting. It can be sprung sufficiently to slip on the pin by anyone with ordinary strength.
4. An unlimited number of cases can thus be rapidly treated, and delay, due to lack of sufficient conventional apparatus, is eliminated.

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Echoes of the Past.

WAR EXPERIENCES OF A TERRITORIAL MEDICAL OFFICER.

By Major-General Sir Richard Luce, K.C.M.G., C.B., M.B., F.R.C.S.

(Continued from page 277).

CHAPTER XXIX.—TOUR OF INSPECTION TO BEIRUT AND DAMASCUS.

After two days at G.H.Q. to deal with the arrears of office work, the D.A.G., Major-General Western, and I, started off to make a tour of the forward area. We took two touring cars and a good supply of provisions. The first day brought us to Haifa. On the road we visited the various field ambulance posts which we passed. A considerable number of the sick was still coming down from Haifa by road, as the two hospital ships available could not cope with the admissions to the hospitals there. A chain of