

deter others from a procedure that would have the same result, if not teach them to improve on your methods or avoid your blunders and mistakes. At least I am certain if all operations in this comparatively recent field—abdominal and pelvic surgery—or operations involving the opening of these cavities, were more faithfully and truthfully reported, not only the statistical tables would be more reliable than they are at present, but many might be prevented from encouraging the evident, bold, and often reckless tendency of the present day surgery. The case of ovariectomy is reported because of the evident cause of death aside from the operation; and the case of hysterectomy specially on account of the errors in diagnosis, and to condemn it and all similar operations; and because, as far as my observation extends, and that of several well posted surgical statisticians, it is the first laparohysterectomy ever performed in the State of Kentucky; certainly the first reported.

CORONERS AND MEDICAL EXAMINERS IN CONNECTICUT.

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Perhaps nothing has occurred during the past year of more general interest to the medical profession in Connecticut than the enactment of a new law concerning coroners. The desirability of a change in the methods of conducting inquests had long been apparent, when in May, 1879, the subject was brought to the notice of the Fellows of the Connecticut Medical Society. At that time the President, Dr. C. M. Carleton, of Norwich, in his annual address, called the attention of the Fellows to the facts, that the conduct of coroner's inquests had long been a subject of ridicule and contempt, and that Massachusetts had lately made radical changes in the laws governing these proceedings, which had gone far toward the reformation of abuses. He therefore recommended the appointment of a committee to examine the workings of the Massachusetts law, and "to urge upon the legislature of Connecticut the necessity for reform in the same direction." Accordingly, a committee of three was appointed, the members of which were instructed to investigate the adaptability to Connecticut of the Massachusetts system, and to report at the next annual convention. They were also authorized to visit Massachusetts for the purpose of studying the practical working of the system, and to bring the subject before the legislature.

The ancient law, to which Dr. Carleton alluded so irreverently, empowered "any justice of the peace" to cause to be summoned "a jury of twelve judicious men," "to enquire of the cause and manner" of death of any person who shall have come to a sudden or unnatural death, or should have been found dead, the manner of whose death was unknown. The verdict of this jury was required to be presented to some justice of the peace, who in turn was required to return it to the next Superior court in the county. Small fees, none of them exceeding one dollar, were established, which were paid from the town treasury. Slight penalties were prescribed for neglect on the

part of officers in serving warrants, as well as for failure on the part of those summoned as jurors, to appear and serve. Provision was made for enforcing the attendance of witnesses, and for taking testimony, in the same manner as in criminal prosecutions before justices of the peace.

The committee, whose appointment has been mentioned, reported at the annual meeting of the Fellows of the Society in 1880, that they had visited Boston, and had enjoyed every facility for examining the system of medical examiners in successful operation there. They were thoroughly convinced that it was a most excellent one, and very much to be preferred to the present coroner system; and yet, strange to say, they concluded that "it was not at present advisable to attempt the introduction of the system into this State," and that "it would have been ill-advised to have brought any bill pertaining to the subject before the last State legislature." This report was accepted, and the committee discharged. But the agitation was not destined to end here.

Two years later, at the mass meeting of the members of the Connecticut Medical Society, Dr. George L. Porter, of Bridgeport, again introduced the subject. At the conclusion of an essay on the "Recognition of Death," Dr. Porter urged that "the community should recognize that it is an unscientific distribution of political power to elect or appoint any one to the office of coroner who is not a medical man of good standing;" and that "the State should change its present laws, under which the vagaries of 'crownors' quest law' have been possible; a method which has long since been recognized as ill adapted to its purposes, and which in practice is neither economical, wise, nor satisfactory, and in its place enact some ordinance by which the first official duties to the dead shall devolve upon properly constituted medical inspectors."

A resolution was passed unanimously "that a committee of five be appointed by the President, charged with the duty of bringing before the attention of the next legislature of the State the great importance of a change in the laws providing for the detection of crime, and particularly to change the laws respecting the appointment and duties of coroners, and to advocate the appointment of medical examiners."

The subject at length came before the legislature, at the January session, 1883, and the new law was finally approved May 1, 1883.

The provisions of this law are substantially as follows: The judges of the Superior court, every third year at their annual meeting, shall appoint for each county, upon recommendation of the State's attorney for the county, "a coroner, who shall be an attorney at law residing in the county, familiar with criminal practice and medical jurisprudence." He may, for cause shown, be removed by the judges, and the vacancy filled by them as in the first instance. He is required to furnish a bond of \$3,000 for the faithful performance of the duties of his office.

"The Coroner shall appoint for each town of the county an able and discreet person, learned in medical science, to be Medical Examiner." Each Examiner is required to give a bond of \$1,000 to the

Coroner for the faithful discharge of the duties of his office, and holds his office at the pleasure of the Coroner.

"When any person shall come to a sudden or untimely death, and when any person shall be found dead, the manner of whose death is not known, any one who shall become aware of such death shall forthwith report the same to the Medical Examiner of the town in which the dead body lies," who shall immediately proceed to view and take charge of the dead body.

If, upon examination and inquiry, the Medical Examiner is satisfied "that the death was not caused by the criminal act, omission, or carelessness of another or others, and that there are no suspicious circumstances attending the same," he shall give a certificate of death in the usual form to the Registrar of Vital Statistics. He shall also mail or deliver to the Coroner of the county a certificate that an inquest is unnecessary.

If, on the other hand, the Medical Examiner is suspicious that any one is criminally responsible for the death, "he shall as speedily as possible, by telegraph, telephone, or otherwise, notify the Coroner for the county of such death, and of the place where the dead body is lying. Whenever the Coroner has such notice, he shall at once, and on other notice may, proceed to view and take charge of the dead body, and make all proper inquiry respecting the cause and manner of the death." If he concludes that no one is criminally responsible, he shall return a certificate of death to the Registrar of Vital Statistics. If, on the contrary, he has reason to suspect such responsibility on the part of any one, "he may cause an examination or autopsy to be made of the body by the Medical Examiner, or by some other competent surgeon or physician," who shall render a written account of everything which is likely to throw any light upon the identity of the body, or upon the time, manner, and cause of death. "Should the Coroner deem it necessary, he may by warrant cause a jury of six judicious men of his county to be summoned before him, to assist him in his investigation." These men the Coroner shall instruct in their duties, and as to all points of law that may arise at the inquest. He also "may order any inquest or any part thereof to be held in private, in which case only the persons by him designated shall be allowed to remain in the room or place where such inquest is being held." If the verdict in any inquest charges any one with having caused the death which is the subject of the inquest, the Coroner shall at once communicate the import of the verdict to the prosecuting officer of the town or city in which the death occurred. He shall within ten days return to the clerk of the Superior court the testimony of the witnesses, his own report, and the certificates sent him by the Medical Examiners. He shall, in addition, keep a complete record of all certificates made by the examiners, of all investigations made by himself, and of all testimony given before, and verdicts rendered by, juries or inquest.

Extensive powers are granted to the Coroner in regard to the summoning of witnesses and causing ar-

rests in order that no means may be neglected of detecting those who are criminally responsible for unnatural deaths. In cases where wounds and injuries are received for which others are responsible, if death threatens, the Coroner shall take the statement of the person concerning the manner in which and the person by whom the injuries were inflicted. If, in any case, it appears necessary to the Coroner to have a chemical or microscopical analysis, or other scientific investigation, for the purpose of ascertaining the cause of the death of the person on whose body he is holding an inquest, he shall so report to the State's attorney of his county, who may order such analysis or investigation to be made.

The medical examiners receive ten cents a mile for travel, five dollars for an external examination and twenty dollars for an autopsy. The Coroner receives fifteen dollars a day when necessarily employed, and forty cents a page for making the necessary records and copies. These fees are paid from the State Treasury, the bills therefor having first received the endorsement of the State's attorney.

The most striking feature of the new system is the marked tendency toward centralization. This is made apparent in the first place by the withdrawal of the authority of holding inquests from the numerous local officers elected by the voters of each town, and the placing of it in the hands of a few (eight) men who are appointed by the judges of the State. The fact that the appointments are made upon the recommendation of the State's attorneys, thus making the whole system, directly subordinate to the prosecuting office of the county, points in the same direction. Another striking feature of the system is the exceedingly insignificant position occupied by the Medical Examiner as contrasted with the unusual range of action granted to the Coroner. While the latter officer can be removed by the judge "for cause shown," the Examiners, on the other hand, hold office "at the pleasure of the Coroner,"—a strangely uncertain tenure of office. Even where an Examiner has undertaken an investigation the Coroner may at any moment interrupt the inquiry and take entire charge of it himself. If the Examiner finds reason to suspect criminality the Coroner still has the privilege, if he sees fit, of returning a certificate of death from natural causes, as if he were more competent than a physician to determine the cause of death in a doubtful case. Not even is the making of an autopsy ensured, as a definite prerogative, to the lawfully appointed Medical Examiner, but here again the Coroner may supersede him by calling upon some one else to do it.

The law went into practical operation about the first of July. Time will undoubtedly show its defects, and, if it has any, its advantages.

THE COSTATOME IN EXCISION OF THE RIB.

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Being called upon recently to excise a portion of a rib, in a critical case of chronic empyema in which closure of the pus cavity, which I had previously freely opened, was prevented by inability of the chest