

taken were not taken, the defense will be held insufficient as a matter of law. All that he need do in any case is to produce evidence which equals in evidentiary weight the inference which the doctrine creates in favor of plaintiff.

'Since the question of negligence is one of fact, the conclusion of the jury that a given act or omission did or did not constitute negligence may not be disturbed on appeal, if the evidence upon issue is such as to allow a difference of opinion among reasonable minds. The *res ipsa loquitur* doctrine does not abrogate this familiar rule. It does not relieve plaintiff who charges negligence from the duty of proving it by a preponderance of the evidence.

'In California the doctrine of *res ipsa loquitur* merely establishes a *prima facie* case, and it would seem to follow inevitably that when evidence of due care has been offered by defendants it becomes a jury question as to whether the inference of negligence created by the doctrine has been dispelled.'

"The judgment in favor of defendants was affirmed.

"It will be noted from this case that the doctor must prove by satisfactory evidence that he used due care and was free from negligence in the exercise of his practice.

"It is important that records be kept which are accurate and complete; every accident or incident involving an injury or alleged injury should be investigated promptly; depositions of important witnesses should be taken promptly in case of death or unavailability at time of trial; all instruments, equipment, apparatus or mechanical devices used by the physician should be in good working order and free from defects.

"Reporting immediately to the ACMA or to the attorney every incident involving the physician in a con-

troversy with the patient will be of immeasurable benefit to the physician in saving him time, money, probably loss of practice and possible lawsuits. No incident, however slight, should be overlooked."

D. D. G.

BARKER, LEN: *Museum of Anesthesia Established in Australia*. Brit. J. Anaesth. 20: 132-136 (July) 1947.

The third museum of anesthesia in the world has been established at the University of Melbourne. The Australian Society of Anesthetists hopes that the museum will provide scientific headquarters and a meeting place for the Society; will foster post-graduate education in anesthesia; give basic training in anesthesia to medical and dental students attending the University; and provide a liaison body between anesthetists and manufacturers of drugs and appliances. The museum is a modern school of instruction, not merely a collection of relics.

F. A. M.

BAKER, E. H.: *Intravenous Anesthesia with Pentothal Sodium*. Kentucky M. J. 45: 227-231 (July) 1947.

Since the introduction of pentothal sodium twelve years ago, intravenous anesthesia has been used extensively. With increased use of pentothal sodium it was found that a 2 or 2.5 per cent solution caused less irritation than stronger solutions and the weaker solution increased the margin of safety. When first introduced, pentothal was limited to minor operations of short duration but it has been found that it could be used safely for longer operations if muscular relaxation was not needed. The administration of oxygen or of oxygen, 50 per cent with nitrous oxide, has increased the relaxation and reduced the amount of pentothal required.