

a completely closed and sterile setup for flushing, either the cannula or the strain gage, by a proper turn of the stopcock and a flush from the "administration" syringe.

When using a source of solution as illustrated in figure 1, it is necessary that the needle entering the stock solution be *at least a 17 gage* in order not to increase the resistance to flow from the stock solution when fluid is being aspirated into the "administra-

tion" syringe. When using a large syringe on the "source" end, the "administration" syringe can be filled by pressure from the "source" syringe without fear of sending solution to the patient, as long as *the plunger of the "administration" syringe is free.*

Manufacturers of equipment mentioned in this column may be obtained from ANESTHESIOLOGY, J. B. Lippincott Co., East Washington Sq., Philadelphia 5, Pa.

Holder for Epidural Needle

Dr. Osvaldo Bolpe of the Hospital Municipal de Azul in Argentina designed a universal clamp which is applicable to any model of epidural needle. This clamp permits a firm grip with the thumb and index finger of both

hands and makes possible a gradual penetration of the needle through the interspinal and yellow ligaments. In addition, it allows a careful observation of the drop in aspiration which is transmitted from the epidural space to the end of the needle.

The illustration (1) shows the clamp which is a metallic disc with a perforation in the center of the approximate size of the hub of the epidural needle. The thumb and index finger grip the two wings on the disc. One half of one wing is movable and permits the entrance of the hub of the needle (2). The apparatus fixed and enclosing a needle is shown in (3). The advantages of this needle are: it permits the use of any commercial needle for the localization of the epidural space and facilities the use of the hanging-drop method. The needle is low in cost and light in weight.

