The drama begins to unfold with the arrival of the corpse at the mortuary. Alas, poor Yorick! How surprised he would be to see how his counterpart of today is whisked off to a funeral parlor and is in short order sprayed, sliced, pierced, pickled, trussed, trimmed, creamed, waxed, painted, rouged, and neatly dressed-transformed from a common corpse into a Beautiful Memory Picture. This process is known in the trade as embalming and restorative art, and is so universally employed in the United States and Canada that the funeral director does it routinely, without consulting corpse or kin. He regards as eccentric those few who are hardy enough to suggest that it might be dispensed with. Yet no law requires embalming, no religious doctrine commends it, nor is it dictated by considerations of health, sanitation, or even of personal daintiness. In no part of the world but in Northern America is it widely used. The purpose of embalming is to make the corpse presentable for viewing in a suitably costly container; and here too the funeral director routinely, without first consulting the family, prepares the body for public display.

Is all this legal? The processes to which a dead body may be subjected are after all to some extent circumscribed by law. In most states, for instance, the signature of next of kin must be obtained before an autopsy may be performed, before the deceased may be cremated, before the body may be turned over to a medical school for research purposes; or such provision must be made in the decedent's will. In the case of embalming, no such permission is required nor is it ever sought. A textbook, *The Principles and Practices of Embalming*, comments on this: "There is some question regarding the legality of much that is done within the preparation room." The author points out that it would be most unusual for a responsible member of a bereaved family to instruct the mortician, in so many words, to "embalm" the body of a deceased relative. The very term "embalming" is so seldom used that the mortician must reply upon custom in the matter. The author concludes that unless the family specifies otherwise, the act of entrusting the body to the care of a funeral establishment carries with it an implied permission to go ahead and embalm.

Embalming is indeed a most extraordinary procedure, and one must wonder at the docility of Americans who each year pay hundreds of millions of dollars for its perpetuation, blissfully ignorant of what it is all about, what is done, how it is done. Not one in ten thousand has any idea of what actually takes place. Books on the subject are extremely hard to come by. They are not found in most libraries or bookshops.

In an era when huge television audiences watch surgical operations in the comfort of their living rooms, when, thanks to the animated cartoon, the geography of the digestive system has become familiar territory even to the nursery school set, in a land where the satisfaction of curiosity about almost all matters is a national pastime, the secrecy surrounding embalming can, surely, hardly be attributed to the inherent gruesomeness of the subject. Custom in this regard has within this century suffered a complete reversal. In the early days of American embalming, when it was performed in the home of the deceased, it was almost mandatory for some relative to stay by the embalmer's side and witness the procedure. Today, family members who might wish to be in attendance would certainly be dissuaded by the funeral director. All others, except apprentices, are excluded by law from the preparation room.

A close look at what does actually take place may explain a large measure of the undertaker's intractable reticence concerning a procedure that has become his major *raison d'être*. Is it possible he fears that public information about embalming might lead patrons to wonder if they really want this service? If the funeral men are loath to discuss the subject outside the trade, the reader may, understandably, be equally loath to go on reading at this point. For those who have the stomach for it, let us part the formaldehyde curtain. . . .

The body is first laid out in the undertaker's morgue—or rather, Mr. Jones is reposing in the preparation room—to be readied to bid the world farewell.
The preparation room in any of the better funeral establishments has the tiled and sterile look of a surgery, and indeed the embalmer-restorative artist who does his chores there is beginning to adopt the term "dermasurgeon" (appropriately corrupted by some mortician-writers as "demi-surgeon") to describe his calling. His equipment, consisting of scalpels, scissors, augers, forceps, clamps, needles, pumps, tubes, bowls and basins, is crudely imitative of the surgeon's, as is his technique, acquired in a nine- or twelve-month post-high-school course in an embalming school. He is supplied by an advanced chemical industry with a bewildering array of fluids, sprays, pastes, oils, powders, creams, to fix or soften tissue, shrink or distend it as needed, dry it here, restore the moisture there. There are cosmetics, waxes and paints to fill and cover features, even plaster of Paris to replace entire limbs. There are ingenious aids to prop and stabilize the cadaver: a Vari-Pose Head Rest, the Edwards Arm and Hand Positioner, the Repose Block (to support the shoulders during embalming), and the Throop Foot Positioner, which resembles old-fashioned socks.

Mr. John H. Eckels, president of the Eckels College of Mortuary Science, thus describes the first part of the embalming procedure: "In the hands of a skilled practitioner, this work may be done in a comparatively short time and without mutilating the body other than by slight incision-so slight that it scarcely would cause serious inconvenience if made upon a living person. It is necessary to remove the blood, and doing this not only helps in the disinfecting, but removes the principal cause of disfigurements due to discoloration."

Another textbook discusses the all-important time element: "The earlier this is done, the better, for every hour that elapses between death and embalming will add to the problems and complications encountered. . . ." Just how soon should one get to embalming? The author tells us, "On the basis of such scanty information made available to this profession through its rudimentary and haphazard system of technical research, we must conclude the best results are to be obtained if the subject is embalmed before life is completely extinct-that is, before cellular death has occurred. In the average case, this would mean within an hour after somatic death." For those who feel there is something a little rudimentary, not to say haphazard, about this advice, a comforting thought is offered by another writer. Speaking of fears entertained in early days of premature burial, he points out, "One of the effects of embalming by chemical injection, however, has been to dispel fears of live burial." How true; once the blood is removed, the chances of live burial are indeed remote.

To return to Mr. Jones, the blood is drained out through the veins and replaced with embalming fluid pumped through the arteries. As noted in The Principles and Practices of Embalming, "every operator has a favorite injection and drainage point-a fact which becomes a handicap only if he fails or refuses to forsake his favorites when conditions demand it." Typical favorites are the carotid artery, femoral artery, jugular vein, subclavian vein. There are various choices of embalming fluids. If Flextone is used, it will produce a "mild, flexible rigidity. The skin retains a velvety softeness, the tissues are rubbery and pliable. Ideal for women and children." It may be blended with B. and G. Products Company's Lyf-Lyk tint, which is guaranteed to reproduce "nature's own skin texture . . . the velvety appearance of living tissue." Suntone comes in three separate tints: Suntan; Special Cosmetic Tint, a pink shade "especially indicated for young female subjects"; and Regular Cosmetic Tint, moderately pink.

About three to six gallons of dyed and perfumed solution of formaldehyde, glycerin, borax, phenol, alcohol and water is soon circulating through Mr. Jones, whose mouth has been sewn together with a "needle directed upward between the upper lip and gum and brought out through the left nostril," with the corners raised slightly "for a more pleasant expression. If he should be bucktoothed, his teeth are cleaned with Bon Ami and coated with colorless nail polish. His eyes, meanwhile, are closed with flesh-tinted eye caps and eye cement.

The next step is to have at Mr. Jones with a thing called a trocar. This is a long, hollow needle attached to a tube. It is jabbed into the abdomen, poked around the entrails and chest cavity, the contents of which are pumped out and replaced with "cavity fluid." This done, and the hole in the abdomen sewn up, Mr. Jones's face is heavily creamed (to protect the skin from burns which may be caused by leakage of the chemicals), and he is
covered with a sheet and left unmolested for a while. But not for long—there is more, much more, in store for
him. He has been embalmed, but not yet restored, and the best time to start the restorative work is eight to ten
hours after embalming, when the tissues have become firm and dry.

The object of all this attention to the corpse, it must be remembered, is to make it presentable for viewing in an
attitude of healthy repose. "Our customs require the presentation of our dead in semblance of normality . . .
unmarred by the ravages of illness, disease or mutilation," says Mr. J. Sheridan Mayer in his Restorative Art.
This is rather a large order since few people die in full bloom of health, unravaged by illness and unmarked by
some disfigurement. The funeral industry is equal to the challenge: "In some cases the gruesome appearance of
a mutilated or disease-ridden subject may be quite discouraging. The task of restoration may seem impossible
and shake the confidence of the embalmer. This is the time for intestinal fortitude and determination. Once the
formative work is begun and affected tissues are cleaned or removed, all doubts of success vanish. It is
surprising and gratifying to discover the results which may be obtained."

The embalmer, having allowed an appropriate interval of elapse, returns to the attack, but now he brings into
play the skill and equipment of sculptor and cosmetician. Is a hand missing? Casting one in plaster of Paris is a
simple matter. "For replacement purposes, only a cast of the back of the hand is necessary; this is within the
ability of the average operator and is quite adequate." If a lip or two, a nose or an ear should be missing, the
embalmer has at hand a variety of restorative waxes with which to model replacements. Pores and skin texture
are simulated by stippling with a little brush, and over this cosmetics are laid on. Head off? Decapitation cases
are rather routinely handled. Ragged edges are trimmed, and head joined to torso with a series of splints, wires
and sutures. It is a good idea to have a little something at the neck—a scarf or high collar—when time for viewing
comes. Swollen mouth? Cut out tissue as needed from inside the lips. If too much is removed, the surface
contour can easily be restored by padding with cotton. Swollen necks and cheeks are reduced by removing
tissue through vertical incisions made down each side of the neck. "When the deceased is casketed, the pillow
will hide the suture incisions . . . as an extra precaution against leakage, the suture may be painted with liquid
sealer."

The opposite condition is more likely to present itself—that of emaciation. His hypodermic syringe now loaded
with massage cream, the embalmer seeks out and fills the hollowed and sunken areas by injection. In this
procedure the backs of the hands and fingers and the under-chin area should not be neglected.

Positioning the lips is a problem that recurrently challenges the ingenuity of the embalmer. Closed too tightly,
they tend to give a stern, even disapproving expression. Ideally, embalmers feel, the lips should give the
impression of being ever so slightly parted, the upper lip protruding slightly for a more youthful appearance.
This takes some engineering, however, as the lips tend to drift apart. Lip drift can sometimes be remedied by
pushing one or two straight pins through the inner margin of the lower lip and then inserting them between the
two upper teeth. If Mr. Jones happens to have no teeth, the pins can just as easily be anchored in his Armstrong
Face Former and Denture Replacer. Another method to maintain lip closure is to dislocate the lower jaw, which
is then held in its new position by a wire run through holes which have been drilled through the upper and lower
jaws at the midline. As the French are fond of saying, il faut souffrir pour etre belle.

If Mr. Jones has died of jaundice, the embalming fluid will very likely turn him green. Does this deter the
embalmer? Not if he has intestinal fortitude. Masking pastes and cosmetics are heavily laid on, burial garments
and casket interiors color-correlated with particular care, and Jones is displayed beneath rose-colored lights.
Friends will say "How well he looks." Death by carbon monoxide, on the other hand, can be rather a good thing
from the embalmer's viewpoint: "One advantage is the fact that this type of discoloration is an exaggerated form
of a natural pink coloration." This is nice because the healthy glow is already present and needs little attention.

The patching and filling completed, Mr. Jones is now shaved, washed and dressed. Cream-based cosmetic,
available in pink, flesh, suntan, brunette, and blond, is applied to his hands and face, his hair is shampooed and
combed (and, in the case of Mrs. Jones, set), his hands manicured. For the horny-handed son of toil and special care must be taken; cream should be applied to remove ingrained grime, and the nails cleaned. "If he were not in the habit of having them manicured in life, trimming and shaping is advised for better appearance—never questioned by kin."

Jones is now ready for casketing (this is the present participle verb of "to casket"). In this operation his right shoulder should be depressed slightly "to turn the body a bit to the right and soften the appearance of lying flat on the back." Positioning the hands is a matter of importance, and special rubber positioning blocks may be used. The hands should be cupped slightly for a more lifelike, relaxed appearance. Proper placement of the body requires a delicate sense of balance. It should lie as high as possible in the casket, yet not so high that the lid, when lowered, will hit the nose. On the other hand, we are cautioned, placing the body too low "creates the impression that the body is in a box."

Jones is next wheeled into the appointed slumber room where a few last touches may be added—his favorite pipe placed in his hand or, if he was a great reader, a book propped into position. (In the case of little Master Jones a Teddy bear may be clutched.) Here he will hold open house for a few days, visiting hours 10 A.M. to 9 P.M.

All now being in readiness, the funeral director calls a staff conference to make sure that each assistant knows his precise duties. Mr. Wilber Kriege writes: "This makes your staff feel that they are part of the team, with a definite assignment that must be properly carried out if the whole plan is to succeed. You never heard of a football coach who failed to talk to his entire team before they go on the field. They have drilled on the plays they are to execute for hours and days, and yet the successful coach knows the importance of making even the bench-warming third-string substitute feel that he is important if the game is to be won." The winning of this game is predicated upon glass-smooth handling of the logistics. The funeral director has notified the pallbearers whose names were furnished by the family, has arranged for the presence of clergyman, organist, and soloist, has provided transportation for everybody, has organized and listed the flowers sent by friends. In Psychology of Funeral Service Mr. Edward A. Martin points out: "He may not always do as much as the family thinks he is doing, but it is his helpful guidance that they appreciate in knowing they are proceeding as they should . . . . The important thing is how well his services can be used to make the family believe they are giving unlimited expression to their own sentiment."

The religious service may be held in a church or in the chapel of the funeral home; the funeral director vastly prefers the latter arrangement, for not only is it more convenient for him but it affords him the opportunity to show off his beautiful facilities to the gathered mourners. After the clergyman has had his say, the mourners queue up to file past the casket for a last look at the deceased. The family is never asked whether they want an open-casket ceremony; in the absence of their instruction to the contrary, this is taken for granted. Consequently well over 90 per cent of all American funerals feature the open casket—a custom unknown in other parts of the world. Foreigners are astonished by it. An English woman living in San Francisco described her reaction in a letter to the writer:

I myself have attended only one funeral here—that of an elderly fellow worker of mine. After the service I could not understand why everyone was walking towards the coffin (sorry, I mean casket), but thought I had better follow the crowd. It shook me rigid to get there and find the casket open and poor old Oscar lying there in his brown tweed suit, wearing a suntan makeup and just the wrong shade of lipstick. If I had not been extremely fond of the old boy, I have a horrible feeling that I might have giggled. Then and there I decided that I could never face another American funeral—even dead.

The casket (which has been resting throughout the service on a Classic Beauty Ultra Metal Casket Bier) is now transferred by a hydraulically operated device called Porto-Lift to a balloon-tired, Glide Easy casket carriage which will wheel it to yet another conveyance, the Cadillac Funeral Coach. This may be lavender, cream, light
green—anything but black. Interiors, of course, are color-correlated, "for the man who cannot stop short of perfection."

At graveside, the casket is lowered into the earth. This office, once the prerogative of friends of the deceased, is now performed by a patented mechanical lowering device. A "Lifetime Green" artificial grass mat is at the ready to conceal the sere earth, and overhead, to conceal the sky, is a portable Steril Chapel Tent ("resists the intense heat and humidity of summer and terrific storms of winter . . . available in Silver Grey, Rose or Evergreen"). Now is the time for the ritual scattering of earth over the coffin, as the solemn words, "earth to earth, ashes to ashes, dust to dust" are pronounced by the officiating cleric. This can boldly be accomplished "with a mere flick of the wrist with the Gordon Leak-Proof Earth Dispenser. No grasping of a handful of dirt, no soiled fingers. Simple, dignified, beautiful, reverent! The modern way!" The Gordon Earth Dispenser (at $5) is of nickel-plated brass construction. It is not only "attractive to the eye and long wearing"; it is also "one of the 'tools' for building better public relations" if presented as "an appropriate non-commercial gift" to the clergyman. It is shaped something like a saltshaker.

Untouched by human hand, the coffin and the earth are now united. It is in the function of directing the participants through this maze of gadgetry that the funeral director has assigned to himself his relatively new role of "grief therapist." He has relieved the family of every detail, he has revamped the corpse to look like a living doll, he has arranged for it to nap for a few days in a slumber room, he has put on a well-oiled performance in which the concept of death played no part whatsoever—unless it was inconsiderately mentioned by the clergyman who conducted the religious service. He has done everything in his power to make the funeral a real pleasure for everybody concerned. He and his team have given their all to score an upset victory over death.