United States Patent Office

2,886,316

Patented May 12, 1959

1

2,886,316

NOVELTY

Carl Ayala, Chicago, Ill., assignor to Marvin I. Glass, Chicago, Ill.

Application January 20, 1958, Serial No. 710,133

5 Claims. (Cl. 272—8)

The invention relates to improvements in novelties, and particularly to an amusement device simulating a hypodermic or medical syringe.

The principal object of the invention is to provide an amusement device of the class described which may be used to create the illusion that a quantity of blood is withdrawn from a human being, without injury to the person or other bad effect.

A further object of the invention is to provide a device of the class described which can be used to simulate the discharge of colored fluid into the body of a human being without injury to the person, or other ill effect.

Another object of the invention is to provide a toy of the class described which can be so manipulated so as to create the illusion that there is no illusion involved in the operation of the device. Further objects of the invention will be apparent as the description proceeds.

In the drawings accompanying this application and describing a preferred embodiment of the invention,

Figure 1 is a side elevation of the toy;

Figure 2 is a section taken on the line 2—2 of Figure 1;

Figure 3 is an end view of the toy looking in the direction of the arrows in Figure 1;

Figure 4 is a section taken on the line 4—4 of Figure 2;

Figure 5 is a section taken on the line 5—5 of Figure 2; and

Figure 6 is a section similar to Figure 2, but showing the nozzle of the device applied to the exterior of a supposed patient, and with the plunger partly withdrawn to expose a column of simulated blood.

Referring to the drawings, it will be understood that the principal parts of the device are constructed of a suitable plastic material. The syringe 10 as a whole is intended to simulate a syringe of the aspiration type in withdrawing the simulated blood and also to represent an injection syringe when the supply of simulated blood is returned to the supposed patient from which it was withdrawn, or into the bloodstream of another person.

Said syringe 10 is made with an outer translucent or transparent barrel comprising a cylindrical shell 11 at the nozzle end of which there is a closure disc 12. To promote the illusion that the device is a conventional hypodermic syringe, the closure 12 is extended outwardly in the form of a cone shaped nose 13 on which is seated a collar in the form of a hexagonal nut 14, the end of which is beveled and reduced in diameter as shown at 15. The nose 13 is bored out to form a cylindrical cavity 16 which slidably receives the head 17 of a rod 18 slidably mounted in a suitable aperture in the end of the closure 12.

The head 17 of the plunger rod 18 and the tip 15 of the nozzle 14 are each bored out to receive a slender needle-like rod 19, which slides freely in the nozzle 15 and is fixed in the head 17 of the plunger 18. The plunger 18 is normally urged outwardly by means of a delicate compression spring 20 located in the nose cavity 16 and surrounding the plunger rod 18. It will be

2

understood that when the nozzle 14 of the device is pressed against the skin of a supposed patient, the needle 19 will not be subjected to sufficient outward pressure by the spring 20 so that it will enter the skin or be felt appreciably by the person, so that when the nozzle is pressed upon the person, as shown in Figure 6, the needle will seem to disappear, creating the illusion that it has entered the body of the patient.

At the handle end of the device, the outer end of the barrel 11 may have a pair of oppositely disposed finger pieces 21 which aid in causing the device to have the appearance of an ordinary syringe. The barrel 11 is bored out to form a cylindrical channel within which there slides a simulated plunger element in the form of a sleeve 22, which is preferably made of a white opaque material. The lower end of this opaque sleeve 22 is seated against the closure 12 at the other end of the barrel and the outer end of the sleeve 22 extends beyond the finger pieces and is itself equipped with a pair of finger pieces 23 somewhat similar to the finger pieces 21.

The opaque sleeve or plunger element 22 is bored out to provide a cylindrical channel adapted to slidably receive a liner in the form of a sleeve 24 colored red to simulate the color of blood. This inner sleeve or lining 22 is normally seated against the inner face of the closure 12 and the outer end of it is fitted with a conical or tapered extension 25, the outer end of which is slotted as shown at 26, so that there is a certain amount of flexibility or spring effect between the forked ends or prongs 27 of the tapered extension 25. The red lining 24 and the opaque plunger sleeve 22 are normally locked together by the driving fit between the outer end of the cone 25 and a tapering bore formed in the center of the head 28 of the plunger. However, when by means of the fingers the tapered extension 25 is pushed inwardly so as to release the driving fit between the head 28 and said extension 25, the plunger 22 tends to be forced outwardly on the red lining 24 by means of a coil compression spring 29. Said spring 29 is contained in the cavity 30 surrounding the cone 25 and extends between the head 28 of the plunger 22 and the circular shoulder 31 of the red lining 24.

With the syringe in its normal condition, as shown in Figures 1 and 2, the needle 19 protrudes from the nose 15 as in the case of an ordinary working syringe, since it is forced outwardly by the spring 20. Also, the opaque sleeve or plunger 22 is locked to the interior red lining 24 by reason of the fact that the nose of the conical extension 25 of the red lining 24 is locked to the head 28 of the plunger because of its tight fit therein. In this condition, when the handle 23 is pulled back and forth so as to reciprocate the plunger 22 within the barrel, the red lining 24 will partake of the same movement, and hence, the red lining will not be observed because it will be completely concealed by the opaque plunger sleeve 22. So, to the eye of the unsophisticated, there will be created the illusion that there is nothing unusual about the syringe and further that at that time, there is in the syringe no blood or any simulation thereof.

Having demonstrated that there is nothing tricky about the syringe, the operator, holding the outer barrel in one hand will move the device towards the supposed patient so that the end of the needle 19 will rest upon the skin and then on further forward movement, the needle will be pushed back into the syringe as shown in Figure 6. Still holding the nozzle 14 in contact with the skin, the protruding ends of the prongs 27 can then be pressed inwardly to release the lock. Then the opaque sleeve 22 is pulled outwardly by means of the finger piece 23 on the outer end thereof. During this outer movement of the plunger sleeve 22 with the prongs 27 released, the