

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
293	Mary L. Ken	29	July 25	Aug 15	St. Caraffa	19 hrs.

MORBID APPEARANCES.

Ht. 5 ft 3 in. Wt. 64 2 lbs. Body thin.

Larynx & Trachea - natural.

Lungs 3 lbs. Some fibrous adhesions at back of left apex - as effusion - At left apex is a cup-shaped depression corresponding to a multilocular cavity of 1/2 of 1/2 in. int. of lung, the outer wall of which is formed solely by thickened pleura. There are one or two smaller cavities in upper lobe containing softened caseous material. There is a large mass of caseating tubercle in lower part of lower lobe, & throughout white being there are numerous caseating patches. The greater part of left lung sinks in water, from broncho-pneumonic consolidation. Right - lower lobe obstructed, crepitant. Upper lobe contains much scattered caseating tubercle, & a small cavity near apex.

Heart 3 1/2 in. natural.

Liver 4 1/2 lb. Enlarged, congested & fatty.

Spleen (3 1/2) Kidneys & Pancreas - natural.

Intestines - natural.

Uterus Enlarged healthy. Bladder natural.

Spinal Cord - No changes are visible to naked eye in cord, or peripheral nerves. No cardaceous changes detected in viscera.

Wm. Dainton

No. in Reg ^t	NATURE OF DISEASE.
1185	Phtisis -

Case

CASE.

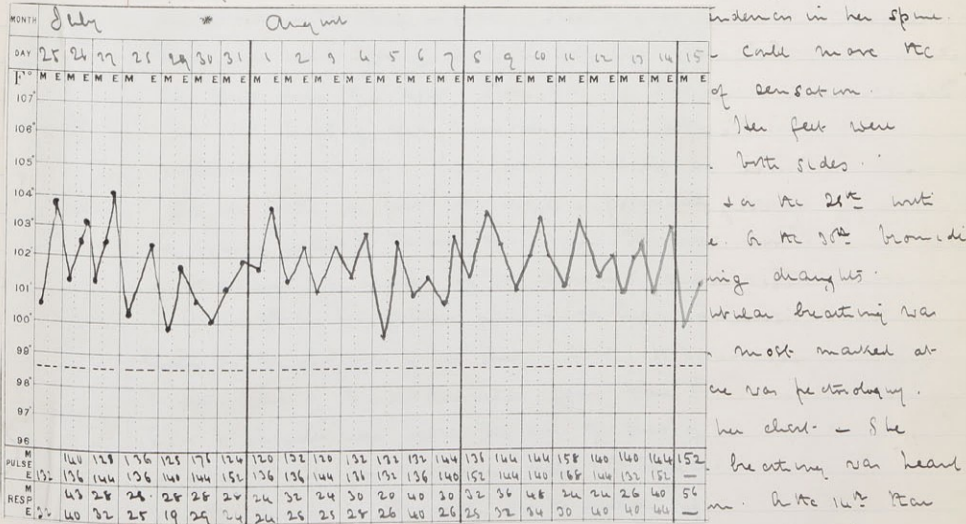
History.

The patient was 29 years of age and was married at the age of 20. She had had 3 children, one of whom was living. One died of bronchitis and one of some unknown disease. She had never had scarletina or Rheumatic fever. But she had occasional slight articular pains.

Three weeks before her admission she had a chill. The course was normal. After the 10th day she got up, but she found that she was very weak, and from that time she got weaker, and four days before she came to the Hospital she was unable to stand.

Admission.

She was a fairly well nourished woman. She complained of loss of power in her legs, and of sensations like "pins and needles". Her appetite was bad, her tongue was clean, or the edge. Her bowels were open. No cardiac murmur was heard. Nothing abnormal

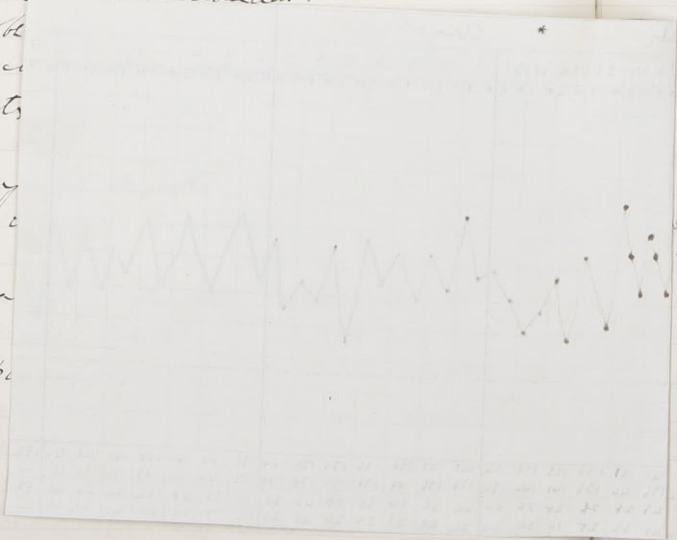


Indications in her spine - could move etc of sensation. Her feet were - both sides. In the 24th inst. a 6th the 30th bronchitic wheezing was most marked at the base of the lungs. She died - She breathing was heard in the 14th year. She had been in some time.

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
293	Mary L. Cox	29	July 25	Aug 15	St. Caspary	19 hrs.

MORBID APPEARANCES.

Ht. 5 ft. 3 in. Wt. 6 st 2 lbs. Body thin.
 Larynx & trachea - natural.
 Lungs 3 lbs. Some fibrous adhesions at back of left apex - as effusion - At left apex is a cup-shaped depression corresponding to a multilocular cavity of lung here's eff. in int. pleura, the outer wall of which is formed solely by thickened pleura. There are one or two smaller ones in upper lobe, containing softened caseous material. There is a large mass of caseating tubercle in lower part of lower lobe, & throughout whole lung there are numerous caseating patches. The greater part of left lung sinks in water, from broncho pneumonia - consolidation.
 Right - lower lobe contains much a small cavity.
 Heart 3 1/2 oz. natural.
 Liver 4 1/2 oz. Enlarged, congested.
 Spleen (3 1/2 oz.) Kidneys - Pale.
 Intestines - natural.
 Uterus Enlarged but no changes.
 Spinal Cord - no changes.
 Low Cardiacous



No. in Reg ^t	NATURE OF DISEASE.
1185	Phthisis -

Case " "

History. The patient was 29 years of age and was married at the age of 20. She had had 3 children, one of whom was living. One died of bronchitis and one of some unknown disease. She had never had scarletina or Rheumatic fever. But she had occasional slight articular pains.

Three weeks before her admission she had a child. The labor was normal. After the 10th day she got up, but she found that she was very weak, and from that time she got weaker, and four days before she came to the Hospital she was unable to stand.

Admission. She was a fairly well nourished woman. She complained of loss of power in her legs, and of sensations like "pins and needles". Her appetite was bad, her tongue was clean, or the edges. Her bowels were open. No cardiac murmur was heard. Nothing abnormal was found in her lungs in front. There was no tenderness in her spine. There was much loss of power in both legs. She could move the left leg more than the right. There was no loss of sensation. She had "tingling" and numbness in her feet. Her feet were extended on her legs. Knee-jerk was absent on both sides.

She was treated at first with Iodide of Potassium & on the 24th with Dig. hydrag. perles 3i. Pot. iodid. ʒi. Stann. Cinchid. ʒi. On the 30th Bromide of Potassium was added. She had occasional sleeping draughts. On August 9th she had granular pain in both legs. Tubular breathing was heard on the right side of her chest in front. It was most marked at the outer part of the subclavicular region where there was no tenderness. Rales & rhales were heard all over the front of her chest. - She continued to suffer from sleeplessness. On the 11th tubular breathing was heard from the clavicle & the nipple in the axillary region. On the 14th there was expectoration on the chest. She became weaker & died on the 15th.

Diagnosis The cause of the paraplegia was not evident. Tuberculosis was diagnosed when she had been in some time.