

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
97	Fred ^l Tisner packer.	20	Feb. 4 th	Mar. 25 th	D. Dickinson	49 hrs.

MORBID APPEARANCES

Gen. Condition.	Well nourished. No oedema.	5' 9" high: fair hair.
Lungs.	Pneumonia	Congested. Red hepaticization of of grey hepatic lobular patches. weight.
Heart.	Hypertrophy.	16 oz: L. ventricle. V. auricle.
Liver.	5 lb.	natural.
Spleen.	7 oz.	natural.
Kidneys	16 oz. "Large white" Kidney, with atrophied cortex.	presenting in all respects the appearance known as "large white", except that the capsules are very slightly adherent, and the cortex much wasted. The enclosed sketch, traced from a median section of the R. kidney, shows accurately the relative amount of cortical and medullary tissue. No cardaceous reaction of kidneys, liver, or spleen.
Brain	3 1/2 oz.	congested, externally and internally. No increase of ventricular fluid. Otherwise natural.



Drawn and colored.

No. in Reg^d
1880

NATURE OF DISEASE

146

Large white kidneys, with atrophy of cortex. - Hypertrophy of heart.
Pneumonia.

CASE

History

He was uncertain as to whether he had ever had measles or scarlatina.

5-6 yrs. ago he had "bronchitis", being laid up for 3 mo. No other illnesses.

For the last 5-6 years he had been subject to frequent colds in the head (running at the nose & deafness). At these times he noticed that the urine was passed very dark, like blood, the last occasion was 3 mo. ago.

For years he had been subject to headaches, lasting perhaps for 5-8 hours, not very frequent of late. Longth from pains in the chest after meals: bowels regular, no diarrhoea.

Skin always dry: no palpitations: no dyspnoea. Sworn cramps in the legs at night for 1-2 yrs.

Swelling of ankles was noticed on Feb. 1st only, for the first time.

About the beginning of January, 1900 he noticed one morning on getting up that the sight of the R. eye was dim, everything appeared as though enveloped in a fog; previously to this he had enjoyed good sight & had gone to bed the night before, seeing as perfectly as usual. The difference was very marked, on his rising that morning: one week later the L. eye was similarly affected. He applied to the Anglo-Siam Ophthalmic Hosp. for advice as to his eyes, not complaining of anything else & thinking himself in his usual good health.

In the last 2-4 mo he had passed much water, esp^d night: nocturia at night: colour not noticed: esp^d (no oedema): great thirst has accompanied this.

On Admission Feb. 4th he complained of general weakness: pain in the R. hypochondrium, of dryness of the throat & slight frontal headache, of ^{partial} blindness. Skin pale, smooth, warm, natural to the touch.

Slight oedema of legs & some puffiness of the lower part of the face. Eyesight dim esp^d of R.

I. dry, lower center, white & moist at edges. R. open, esp^d morning (the 1st time for 3 days).

P. 80 hard. R. 100. No cough, no sickness.

Lungs: Wheezing esp^d & coarse esp^d rhonchi over both lungs esp^d R.

Heart: strong impulse. Apex beat in 5th L. space under nipple. The 2nd sound an of equal intensity at apex; 2nd sound accentuated at base, this sound was plainly audible in the R. axilla.

Liver: dullness from 6th rib to 1/2" below thoracic edge.

Abdomen: distended: fluctuation in dependent positions: dullness in the flanks.

There was a double inguinal hernia.

Urine: acid, clear, sp. gr. 1.004: albuminous: of a very pale yellow colour.

Feb. 6th

The eyes were examined: numerous white patches intersecting the blood vessels were seen, and

(continued on folio 96.)

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97	Fred ^d Tisner packer.	20	Feb. 4 th	Mar. 25 th	D ^r Dickinson	49 hrs.

MORBID APPEARANCES

Gen. Condition. Well nourished. 5' 9" high: fair hair. No oedema.

Lungs. Congested.
Pneumonia. Red hepatization of both lower lobes; with small (lobular?) patches of grey hepatization interspersed. 4 1/2 lb. weight.

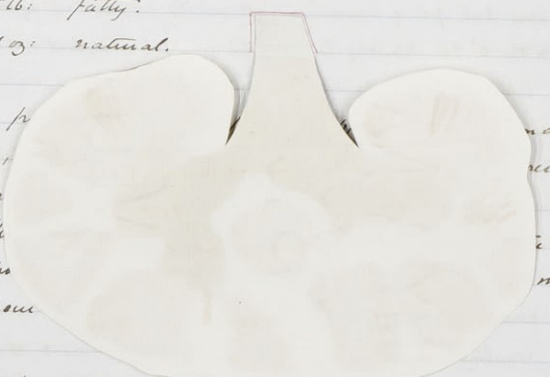
Heart. 16 oz: semi-contracted: a little decolorized clot in left ventricle.
Hypertrophy. L. ventricle hypertrophied.
Valves + muscular tissue natural.

Liver. 5 1/2 lb: fatty.

Spleen. 7 oz: natural.

Kidneys. 16 oz. fr. as "large" cut, and R. kidney, medullary tissue.

Brain. 3 1/2 oz: congested, externally and internally. No incision of ventricular fluid. Otherwise natural.



Grand and small

No. in Reg ^d	NATURE OF DISEASE
146	Large white Kidneys, with atrophy of cortex. - Hypertrophy of heart. Pneumonia.

CASE

History. He was uncertain as to whether he had ever had measles or scarlatina. 5-6 yrs. ago he had 'bronchitis', being laid up for 3 mo. No other illnesses. For the last 5-6 years he had been subject to frequent colds in the head (running at the nose + deafness). At these times he noticed that the urine was passed very dark, like blood, the last occasion was 3 mo. ago. For years he had been subject to headaches, lasting perhaps for 6-8 hours, not very frequent of late. Ting^g from pains in the chest after meals: bowels regular no diarrhoea. Skin always dry: no palpitations: no dyspnoea. Drowsy cramps in the legs at night for 1-2 yrs. Swelling of ankle was noticed on Feb 1st only, for the first time. About the beginning of January, 1900 he noticed one morning on getting up that the sight of the R. eye was dim, everything appeared as though enveloped in a fog: previously to this he had enjoyed good sight + had gone to bed the night before seeing as perfectly as usual. The difference was very marked, on his rising that morning: one week later the L. eye was similarly affected. He applied to the St. Joseph's Ophthalmic Hosp. for advice as to his eyes, not complaining of anything else + thinking himself in his usual good health. For the last 3-4 mo he had passed much water, esp^y post-micturition at night: colour not noticed esp^y (no aim): great thirst: has accompanied this. On Admission Feb. 4th he complained of general weakness: pain in the R. hypochondrium, of dryness of the throat + slight frontal headache, of ^{partial} blindness. Skin pale, smooth, warm, natural to the touch. Slight oedema of legs + some puffiness of the lower part of the face. Expect^d dim esp^y of R. I. dry, lower center, white + moist at edges. R. open, eyes^d morning (the 1st time for 2 days) P. 80 hard. R. 100. No cough: no sickness. **Lungs.** Wheezing esp^y + coarse esp^y rhonchi over both lungs esp^y R. **Heart.** strong impulse. Apex beat in 5th L. space under nipple. The 2nd sound an of equal intensity at apex: 2nd sound accentuated at base, this sound was plainly audible in the R. axilla. **Liver.** dullness from 6th rib to 1/2" below thoracic edge. **Abdomen.** distended: fluctuation in dependent positions: dullness in the flanks. There was a double inguinal hernia. **Urine.** acid: clear sp. g. 1.004: albuminous: of a very pale yellow colour. The eyes were examined: numerous white patches intersecting the blood vessels were seen, and

Feb. 6th

(continued on folio 96.)