

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
379	John Beale	15	7 Nov 28 Nov		J. Dickinson	17 hrs

MORBID APPEARANCES

Gen. Apper 57. 4. Abdomen Tympanitic.

Lungs. Fluid in left pleural cavity.

Pluena Weight of lungs 2 lb. 12 oz. Lower lobe of left lung quite solid from gray hepatization. Right lung congested.

Liver 4 lb. Congested.

Spleen 7 oz. Congested.

Kidneys 12 oz. Congested.

Heart 10 oz. Healthy.

Alimentary tract Slight congestion here and there of the peritoneal coat of the intestine. A little fluid in peritoneal cavity.

Lower third of ileum, and caecum. Contain several small intestinal ulcers, notably far advanced. No haemorrhage or perforation.

Amshel.

No. in Reg. 1884	NATURE OF DISEASE
1884	Typhoid. Pneumonia.

CASE

History. He gave an intelligent history of his symptoms & history. He had not been laid up from the time he was a child until his last illness. He felt in perfectly good health & was hard at work as a wood cutter until Nov. 2 when he 'felt queer' with some cold sweating & aching in the right side of the abdomen; no vomiting or rigor; Bowels open 3 times. He took 'rubark & magnesia' laid in bed next day; slight abdominal pain confined to R iliac fossa; Bowels open 3 times on 5th 6th 7th there was no action of the bowels and his stomach grew much more painful; the pain was more diffused, he was restless & feverish; had taken no solid food since 2nd.

PATIENTS NAME		WARD &	
John Beale at 15		Chiefly in the R iliac fossa.	
PHYSICIAN OR SURGEON		CLINICAL	
J. Dickinson		Chiefly thoracic. S.	
MONTH		CLINICAL	
November		Slight systolic murmur audible at apex.	
DAY	TEMP.	Tender all over; much muscular	
7	102.5	R iliac fossa than elsewhere;	
8	103.5	sisteri spots.	
9	102.5	no abd. rig. 1022.	
10	103.5	Tongue: brown central coat.	
11	102.5	but on the abdomen; a Opia 8 1/4	
12	101.5	:hna ordered, which was continued (except	
13	102.5	was every 6 hours, a on 18th. The belladonna	
14	101.5	The pupils contracted very quickly but	
15	102.5	constantly of great thirst and his lips	
16	101.5	restless at night and tremory during	
17	102.5	sweat was lessened but at times	
18	103.5	restless: his bowels acted freely on 13th	
19	102.5	dark motion. He was fed on strong beef	
20	101.5	When the milk was left off & the	
21	102.5	to Orij.	
22	101.5	inosis, and the breathing which was	
23	102.5	continued on N° 374.	

ed boy; much flushed - he complains chiefly in the R iliac fossa. Chiefly thoracic. S. Slight systolic murmur audible at apex. Tender all over; much muscular R iliac fossa than elsewhere; sisteri spots. no abd. rig. 1022. Tongue: brown central coat. but on the abdomen; a Opia 8 1/4 :hna ordered, which was continued (except was every 6 hours, a on 18th. The belladonna The pupils contracted very quickly but constantly of great thirst and his lips restless at night and tremory during sweat was lessened but at times restless: his bowels acted freely on 13th dark motion. He was fed on strong beef When the milk was left off & the to Orij. inosis, and the breathing which was continued on N° 374.

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Lungs. Fluid in left pleural cavity.

Pleurae Right of lungs. 2 lb. 12 oz. Lower lobe of left lung quite solid from gray hepatization. Right lung congested.

Liver 4 lb. Congested.

Spleen 7 oz. Congested.

Kidneys 12 oz. Congested.

Heart 10 oz. Healthy.

Alimentary tract Slight congestion seen peritoneal coat of the fluid in peritoneal cavity.

Lower third of ileum, & several small intestinal advised. No prominent

Main Reg. 1884

NATURE OF DISEASE

1878. Typhoid pneumonia.

CASE

History.

He gave an intelligent history of his symptoms & history. He had not been laid up from the time he was a child until his last illness. He felt in perfectly good health & was hard at work as a wood cutter until Nov. 2. when he 'felt queer' with some cold sweating & aching in the right side of the abdomen; no vomiting or rigors; bowels open 3 times. He took 'Subart-magnesia' & laid in bed next day; slight abdominal pain confined to R iliac fossa; bowels open 3 times on 5th 6th 7th. There was no action of the bowels and his stomach grew much more painful; the pain was more diffused, he was restless & feverish; had taken no solid food since 2nd. Urine scanty & passed with difficulty.

Admission.

Nov. 7. York 4. A well nourished boy; much flushed. He complained of aching in the abdomen, chiefly in the R iliac fossa. Pulse fairly good. 100. Respiration chiefly thoracic. Heart, widespread impulse; soft systolic murmur audible at apex. Abdomen, moderate distension; tender all over; much muscular resistance but not more in R iliac fossa than elsewhere; no tumour palpable; no intestinal spots.

Urine, clear high coloured, acid, no alb., sp. gr. 1022.

Bowels not open for 3 days; Tongue: brown central coat.

Progress.

A poultice with opium was put on the abdomen; a grain 8/16. Exp. bellad. 2/16 in pil. N^o 88-hrs ordered, which was continued (except that during 12th Nov. it was only given every 6 hours, & on 18th the bellad. was left out) up to Nov. 20. The pupils contracted very quickly but never excessively; he complained constantly of great thirst and his lips were very dry. As a rule he was restless at night and drowsy during the day, and the abdominal pain was lessened but at times considerable. After 11 days constipⁿ: his bowels acted freely on 13th when he passed a copious loose dark motion. He was fed on strong tea (filtered) by milk on 14th when the milk was left off & the filtered strong black tea increased to 6oz. After the 15th: there was some cyanosis, and the breathing which was continued on N^o 374.