

VII. The general examination comprises certain general points which should be investigated and noted.

1. What does the patient consider to be his normal weight? What was the highest known weight? The patient should be weighed for the purpose of comparison. If the clothes fit more loosely than ordinarily, there has probably been loss of flesh.

2. Note the number of hours of sleep required or taken, and whether it is natural, continuous, or disturbed, *e.g.*, by dreams, urination, etc. Also whether difficulty is experienced in getting to sleep, and if the patient is refreshed on waking.

3. The initial observation of the eyes should be supplemented by examination of the palpebral conjunctivæ and the pupils, especially their reaction to light and accommodation to distance.

4. The state of the tongue should be carefully noted. Is the surface natural or coated, and if coated, what is the character of the coating as to distribution, colour, consistency? Are the papillæ visible through the coating? Is the tongue rough, smooth, or glazed? Can lumps, ulcers, or fissures be seen? Is it protruded in the middle line? Is there any evidence of wasting or increase in size? Is there tremour on protrusion?

Note the floor of the mouth, and especially look for calculi in Wharton's ducts, and for protrusion of enlarged submaxillary salivary glands. Is the mouth dry, or is there excess of salivary secretion?

What is the colour of the gums? Are they the normal pink, pale, red, bluish (cyanotic), or pigmented? What is their consistency—normal or spongy? Is there evidence of an eruption, of white patches, of a lump (neoplasm or abscess), or ulceration? Is the free margin of the gums normal, or is there loss or retraction of tissue (pyorrhœa alveolaris)? Does pus escape from beneath the free margin on pressing the gums? Are the gums painful or tender?

Is the buccal mucous membrane natural, or are there eruptions, ulcers, patches, etc.? Note similarly the mucous membrane covering the hard palate, and if there is any evidence of perforation.

The mucous membrane covering the pillars of the fauces, soft palate, pharynx, and the surface of the tonsils should be carefully observed for eruptions, "membrane", growths, ulcers, perforation, etc. The size of the tonsils, the presence of foreign matter in the tonsillar follicles, and any evidence of peritonsillar abscess ("quinsy") should be noted. Also, are the tonsils adherent to the pillars? (Note: the anterior pillars should be retracted for a thorough examination of the tonsils). The pharyngeal and lingual tonsillar tissue are not visible by direct observation.