little, his short maps, being restless and disturbed by dreams. There is no cedema nor dropsy of any part; and the expectoration is a scanty mucus.

The following is a summary of the physical signs carefully noted on the 2nd instant, two days after his admission:—

Inspection.—Visible pulsation of right carotid, subclavian, brachial radial, femoral, and posterior tibial, and of left subclavian, femoral, and posterior tibial arteries. Enlarged internal and external jugular and inferior thoracic veins; epigastric veins visible, but not enlarged; varix of right internal saphena of many years standing; no pulsation in veius; inspiration increct posture causes filling and turgescence of right external jugular; expiration has contrary effect. Pulsation of cardiac region below upple and of the epigastrium and adjacent superior abdominal regions. Prominence of the epigastric, and both hypochondriac regions; none of the thoracic walls; some fluttering of left infra-scap., and of both supra-clavic regions.

Palpation.—Pulsation of arteries of right arm and side of neck much stronger than that of their opposites. Right radial pulse full, soft, jerking, regular, vermicular,—90 a minute. Left radial, also jerking, is so weak that it is counted with difficulty,—also 90. Rather forcible pulsation of the epigastrium synchronous with heart's impulse, which latter is strongest at xyphoid cartilage, and about \(\frac{2}{3}\) of an inch to outside of right nipple, and 3 inches lower down, occupying 6th and 7th spaces; rather weak between nipple and sternum, where the sounds are quite audible.

Mensuration.—Circular measurement at nipple, 18; inches on right side, 16; inches on left. Expansive movement, 3 inch on right side, 1 inch on left.

Percussion.—Great clearness of right side of chest as low as 7th cartilage anteriorly, the 8th rib laterally, and the 10th or 11th posteriorly; similar clearness, but not in equal degree, also exists over a larger space than natural of the left side, except in the region of the heart, where the superficial transverse dullness measures 3½ inches, and extends from 1 inch outside nipple to edge of sternum; the deep-dulness reaching we right edge of sternum; vertical dulness commences at upper edge of 4th eft rib, and extends down 4 inches. Hepatic dulness extends considerably below margin of ribs on right side.

Auscultation.—Respiratory murmur heard generally over chest. Inspiration soft, equable, and distinct; expiration longer, louder, and hollower than it, having somewhat of a bronchial character, over the right lung posteriorly; the same characters of inspiration and expiration obtain over left lung, but their intensity is very much less, especially in the lower part of scap, and in the infra-scap regions, where, indeed