

right side: in some extent due, probably, to the hypostatic congestion of the back of the lung, and to accumulation of mucus in the bronchial tube, from the recumbent position which the patient has been compelled constantly to retain. Sputum not very abundant, but glassy and frothy.

23rd.—Pulse 68. Respiration 32. Temperature 100.4° . Friction sound still heard below the fractures, also a sonorous blowing sound from mucus in the larger bronchi. Bowels regular. Appetite improving. Has an annoying tickling sensation in his throat, for which he is ordered a sedative cough mixture.

24th.—Pulse 65. Respiration 21. Temperature 100.8° . On inspection of the chest, the front part of the right side, which should have been supported by the fractured ribs, is seen to be flatter than the corresponding region of the left, and on percussion is duller.

25th.—Pulse 76. Respiration 22. Temperature 100.7° . Friction sound not so loud and harsh as yesterday, and heard chiefly at end of respiration. Cough greatly relieved. Patient can walk about freely, although some stiffness of the shoulder joint remains. He is ordered still to remain in bed.

As the temperature has maintained the same range for several days, its height being more probably due to incorrectness of the thermometer than to any abnormal state of the patient, its observation is ordered to be discontinued, as no longer necessary.

December 8th.—Patient to have his clothes, and to be allowed to get up.

12th.—To-day were removed the strips of plaster which have kept their hold in a most efficient manner. Whether from the good quality of the plaster, which was spread on thick twilled canvas, or from the very slight play of the ribs, the strips did not "become loosened after a few hours," contrary to the experience of Dr. F. Hamilton in such cases.

Friction sound still heard, over the side, and lower part of front and back of right chest, of a rubbing or creaking character: due most probably to the rubbing and stretching of adhesions which will remain permanently. That at end of inspiration coarser than that at end of expiration. It is only at these periods of respiration that the sound can be heard distinctly. The cough is almost entirely gone.

He can now throw his arm round in a circle, although it is slightly painful to do so. His side was ordered to be painted with tr. iod. co.

13th.—Friction sound continues much the same, but he says the iodine application gave him considerable relief.

20th.—The friction sound can now no longer be heard, and the right side of his chest has resumed its normal fulness. On examining the ribs