

SURGERY.

JUNIOR CLASS.

1. Name the form, and describe the leading symptoms of that sympathetic febrile disturbance which usually supervenes in patients who have suffered from long-continued and profuse suppuration after severe injuries, or from any considerable chronic local affection with which the constitution sympathizes.
2. What are the physical characters of inflammation seated in the skin and subcutaneous cellular membrane?
3. How do you account for the swelling of the inflamed part, from the commencement of the tumefaction to its disappearance, supposing the inflammation to end in resolution?
4. How do you account for the suddenly increased redness of an inflamed part, at the very commencement of inflammation?
5. What is the appearance of blood drawn by venesection from patients labouring under acute inflammation and inflammatory fever?
6. How do you account for the appearance of such blood?
7. What are the several different terminations of inflammation?
8. Are some structures more subject to one termination of inflammation than to other terminations? If so, give some examples.
9. Of which termination of inflammation do we usually endeavour to avail ourselves in the treatment of wounds?
10. How does this termination of inflammation save a patient's life after penetrating wounds of the abdomen, complicated with perforation of the stomach or intestines?
11. When acute inflammation of the skin is about to terminate in mortification, what is the appearance of the skin?
12. Are the terms gangrene and sphacelus used as synonyms by some authors on Surgery, and by others applied to designate different conditions of a part; and, if so, what are those different conditions?
13. What first indicates the cessation of the spreading of mortification; and by what natural process are dead parts separated from the contiguous living parts?
14. How would you treat, both locally and constitutionally, incipient mortification, resulting from acute inflammation, in a robust subject?
15. What are the most marked differences between dry and humid gangrene?