

ing, when some of the fluid escapes by the wound. Temp. of room 75°; resp. 22; pulse, 80. Wound is decreasing in size, healthy granulations are apparent, mucus comes away. 7.40 p.m.—Drinks a good deal, with same results. Temp. of room 80½°. 10.55 p.m.—Pulse, 84; resp. 30; temp. of room 77°; is sleeping, but restless, a gurgling sound is heard on each inspiration. 12 midnight, breathing quick, rapid and noisy.

Monday, Dec. 31st, 1.40. p.m.—Gurgling sound is produced when he takes a short and rapid breath, not when he respire quietly. Pulse, 82; resp. 24;

Monday, Dec. 31st, 2 a.m.—Child sleeping quietly. Less difficulty in breathing, pulse, 82; resps. 24. temp. of room 80°. 3 a.m.—Respirations rather more regular, and less labored. Tried to cough up some mucus, but was unable to do so. Temp. of room 77°. 9 a.m.—After 3 he slept quietly and well. Whenever he drinks spasm and coughing are produced. He is up and playing about. Pulse, 75; resps. 21; temp. of body, 98.7°; temp. of room 79°. The wound is closing rapidly, and healing from below upwards; depth of wound was three-quarters of an inch when instrument was removed. He is still unable to get up mucus. There is a slight discharge of pus from the wound. Silk handkerchief is still retained; slight whistling sound through wound at times. Child nearly well. 2 p.m.—Commenced using the tinct. nux-vomica again. 2.10 p.m.—As the case was progressing very favorably, regular watching ceased, by skilled assistants. My brother ceased taking notes. 6 p.m.—Edge of wound in apposition. 9.30 p.m.—As before.

Tuesday, Jany. 1st, 1878,—New-Years-Day,—2.30 p.m. Child breathes slightly through wound at times, markedly when he cries. Has slept all night. Pulse 80. 9.30 p.m.—Some mucus escaping from wound; child up and playing; temp. of room 75°. As soon as moisture is absent he becomes agitated; chokes less on swallowing; free discharge of mucus.

Wednesday, Jany. 2nd.—Child had a restless night; bowels have moved.

Thursday, Jany. 3rd.—Child passed an excellent night. He is bright and cheerful. Takes solid food. When he cries air rushes in through wound. Pulse, 80.

Friday, Jany. 4th.—Child very well, wound remains closed, except when he cries; choking and noise produced on swallowing have nearly disappeared; bowels have moved; partakes of solid food

with ease; temp. of room 70°. Child was removed to a bedroom in upper part of the house.

Saturday, Jany. 5th.—Continuing well.

Sunday, Jany. 6th.— do. do.

Monday, Jany. 7th.— do. do.

Tuesday, Jany. 8th.—Harsh breathing has set in.

Wednesday, Jany. 9th.—Breathing with great difficulty and noise; sub-sternal depression marked. Case looks grave. Had patient removed to basement, and got up steam. He passed a bad night before coming down. Gave him doses of mij. tinct. digit. and pot. iodid. gr. i. every three hours touching throat with liq. pot. every three hours. At noon he was better.

Thursday, Jany. 10th.—Had a fair night, child's head has to be kept nearly level with body; if elevated too much breathing is interfered with. Pulse rapid and weak; opening closed. Patient was better during the evening.

Friday, Jany. 11th.—Child a great deal better; Not much difficulty in breathing; bowels regular; child up and playing again; continuing treatment and steam. Temp. of room 76°.

Saturday, Jany. 12th.—Child nearly well, no more bad symptoms. Steam acted as well as usual. Bowels regular. Tongue clean. Child was again removed to upper part of house, water was evaporated in hall in but small quantity, when the hoarseness again returned. Gave medicine as before. Stridulous breathing at night, substernal depression, etc., this continued for some nights. At times it seemed very alarming indeed. Its rythm was altered in certain positions, this continued off and on until Feb. 9th, when it nearly ceased. It has returned slightly at times, but is not followed by any cyanotic symptoms. Child's health is excellent. The scar measures three-quarters of an inch in length and a quarter of an inch across in its central part. Ceased paying any visits after this date. Put the little fellow on a tonic.

The instrument used was a tracheotomy tube and set by Walton of Lambeth street, London, near St. Thomas Hospital, the most perfect instrument that I have yet seen, its working is admirable.

Dr. Reddy attended throughout as consulting surgeon. I am deeply indebted to him for many valuable hints, culled from many years of very active professional life.

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