

Consideration of the local condition must not blind one to the many other factors which tend to make a case favorable or the reverse, and which are of such importance that in a majority of instances the prognosis is influenced by them rather than by the local condition. These are so numerous and varied that they can only be ascertained by careful enquiry and thorough examination. So many points must be considered that they cannot be didactically summarized to indicate what is favorable or unfavorable and at the same time allow the summary to be sufficiently elastic to include all variations of cases. However, some factors which may tend to make prognosis doubtful or unfavorable may be ascertained by the physician in taking the history, or on examination, as follows:

*Family History.*—Delicate parentage, which may or may not be the result of tuberculosis, especially maternal tuberculosis at birth.

*Previous History.*—Occupations which are confined and dusty, or which help to produce a dissipated life; dissipation, alcoholism, tendency to excesses of all kinds; delicate constitution, poor development, late maturity, frequent illnesses.

*Present Condition.*—Extremes of age—under 15 and over 50; the menopause; temperament—neurotic, emotional, melancholic; morale—carelessness, either wilful or ignorant; build—delicate, slender, very tall; nutrition—habitually underweight; chest formation—flat, pigeon chested, rachitic, etc.; Hippocratic fingers marked; poor peripheral circulation; marked cachexia.

*Mode of Onset.*—Development during menopause, pregnancy or lactation; imperfect recovery from unresolved lobar (?) or broncho-pneumonia (?), typhoid (?) or typho-pneumonia (?) or typho-malaria (?); following acute infectious diseases—measles, pneumonia, typhoid, chronic bronchitis, asthma, chronic dyspepsia, pronounced anemia.

*Symptoms.*—Severe cough—upwards of six months; large amount of expectoration—upwards of oz. 2; repeated severe hemoptysis; hoarseness; abdominal breathing due to lack of chest movement; marked dyspnea; persistently rapid pulse; swollen feet; slight cyanosis and hectic flush; long period of fever with or without chills and sweats; fever above 100.5°; night sweats; marked or rapid loss of weight; marked anemia; marked dyspepsia or diarrhea; prolonged or marked debility; marked nervousness, restlessness or sleeplessness; symptoms of complications.

*Complications.*—Non-tuberculous—chronic gastritis or enterocolitis; pronounced cardiac disease, valvular or muscular; marked arterio-sclerosis; nephritis; chronic cystitis; diabetes; old or