

pain in the side, short hacking cough, temperature 104°F., pulse 120, full and bounding. Percussion revealed wooden dullness from apex to base of left lung; normal note over right. I at once suspected pneumonia. Auscultation revealed no crepitation, no friction, no blowing-breathing, but a peculiar sound louder than normal vesicular murmur, but not so loud as bronchial breathing. Puerile breathing over right lung. There was no bulging of the intercostal spaces. I did not examine the two sides by comparative measurement with the tape-line. Apex beat of the heart was a little to the right of the sternum, and on this I rested my diagnosis of fluid in the left pleural cavity. I introduced a hypodermic needle in order to confirm my diagnosis and ascertain the character of the fluid, which I found to be serous. Not having an aspirator with me I returned home, secured one next day, and on the 25th returned, aspirated and drew off three quarts of serous fluid, which was streaked in some places with opalescent matter. She felt much relieved, respiration became more tranquil, the temperature fell, and the pulse became slower and not so full nor bounding, all of which we might expect after the removal of such a quantity of fluid. I then put on a fly-blister, painted the chest with a mixture of iodine and belladonna, and gave internally alterative and tonic treatment, and ordered poultices to be applied after the blister had risen.

During my subsequent visits, I found that the fluid was again accumulating; that the heart, which had assumed its normal position, was again being pushed over to the right; that the temperature had risen; that the pulse was again accelerated, full and bounding; that respiration was becoming more and more labored, and that she was restless and very irritable.

*April 3rd (eight days after I had aspirated).*—I called my friend and preceptor, Dr. Church, in consultation, when we decided to aspirate, which we did under chloroform, and removed over two quarts of opalescent matter. But let me note here that when I introduced the needle of the aspirator (using the largest) no fluid escaped, so I withdrew it, ran the stilet through it, and discovered that the first matter that entered the needle was a