101°—102°	69 cases
100°—101°	42 cases
99°—100°	6 cases

The general rule in a hospital chart is that the admission fever is the maximum, and it gradually descends with morning remissions until the normal is reached. With this, however, we are not yet finished with the thermometer, for 78 cases showed a subsequent noteworthy fever. This was attributed 14 times to the ears, 13 times to the glands, 7 times to albuminuria, 4 times to exacerbation of the inflammation of the throat, thrice to the joints, and 10 times to evident inflammation elsewhere, but 27 times, or in more than one-third of all the cases, no adequate cause could be found. I feel sure that there is an inflammation somewhere to account for these, but one is often unable to find it. These figures do not take into consideration at all the cases in which the fever of the attack does not subside, but remains on account of the persistence of some complication after the rise of temperature due to scarlet fever might reasonably be supposed to be past. It is to be remarked here that one becomes accustomed to finding a very inconsiderable glandular swelling, apparently the only cause for a considerable rise of temperature; on the one hand the fever of children is easily excited, and on the other, it may be that the palpable gland is the only outward manifestation of a much greater lymphoid reaction than we expect.

Complicating Diseases.

Favouring the belief in a personal devil, one child of three and a half years came in with diphtheria, caught scarlet fever, had chicken-pox, got œdema of the glottis, was intubated a number of times, coughed up the tube one night, it rolled under the bed and could not be found; it was supposed she had swallowed it, tracheotomy saved her life; she developed bilateral otitis and mastoiditis, had her mastoids trephined, and finally departed on the 116th day cured, but disconsolately wailing. The hospital staff bore the separation well.

Diphtheria.—Nineteen cases had diphtheria with scarlet fever, of whom four died; of the nineteen I can be certain only with regard to two that they contracted the disease in the hospital, and for our peace of mind these recovered.

Measles.—Measles complicated the disease but twice in the series, breaking out on the eighth and twelfth days, when the scarlet fever rash had disappeared.

Erysipelas.—Occurred thrice in the series, but there was no suspicion in any case that it was a hospital cross-infection.