

15th. Temperature,  $104\frac{3}{4}$ . Pulse, 100. Respiration, 26. Her illness commenced the previous evening with chilly feelings, but no definite rigor, or no severe pain. She complained of a sense of heaviness in the chest, was very restless, face flushed, nostrils dilating.

Examination of the chest revealed no change in pulmonary resonance, no pleural friction, no crepitant rales but well marked bronchial breathing for a small area on either side of sternum.

A constrained cough brought up small quantities of a blood streaked sputum which upon microscopic examination showed the presence of the pneumococcus in fairly large numbers.

She was transferred to Strange ward, General Hospital, where the case ran the typical course of pneumonia. Recovery by crisis on the sixth day.

This case illustrated that form known as Central Pneumonia, where the lesion is deeply seated, radiating from the roots of the lung. This constitutes a rare form, and when present is difficult to recognize by ordinary physical signs, a microscopic examination of the sputum being usually necessary for its diagnosis.

Case III.—Child, *æt.* 17 months. Illness commenced Dec. 17th. Saw it first two days later. Found temperature  $104^{\circ}$ . Pulse running. Respirations very rapid. Considerable cyanosis. Bronchial breathing over the greater part of both lungs. No cough, but simply a condition of extreme air hunger. With plenteous use of stimulants the child survived the crisis, which occurred on the fifth day. Recovery uninterrupted.

I mention this instance only on account of the infrequency of such cases, Pneumonic Fever being rare in children as compared with Broncho-Pneumonic Fevers.

Case IV.—Male, *æt.* 23. Case of secondary Pneumonia following La Grippe. After a few days' illness with gripe patient was left with troublesome cough. I was called. Found temperature  $101\frac{3}{4}$ . Pulse 80. Chilly feelings. No rigor. No pain, but a dry, hacking cough. Physical examination revealed impaired dullness of lower portion of right lung, crepitant rales and bronchial breathing. Pneumococcus found in the sputum. The case ran the usual course of Pneumonia, except that the temperature never rose higher than  $103^{\circ}$ . Crisis occurred on sixth