

He was confined to his berth, feeling feverish, and coughing, with a sharp pain in left side of chest until he reached this port on the 10th November. The cough persisting, with feverishness, medical aid was summoned a week later. At this time the temperature was found high, the cough dry and hacking, and there were physical signs of rapidly extending consolidation of upper lobe of left lung. Cough attended by scanty, rather rusty, expectoration—fever—occasional attacks of delirium, and the physical signs of solidification of left lung continued until another week (the third of his illness) had nearly passed, when patient was brought to the Hospital. On admission, November 25th, he was able to give a tolerably clear account of the onset and course of his illness, but soon became wildly delirious, starting out of bed, and talking very loudly and excitedly. The temperature in the evening reached $103\ 2.5^{\circ}$ F.; little cough and slight rusty expectoration; pulse 140 and respirations 42 per minute; face deeply suffused; pupils dilated, conjunctivæ has a sub-icteroid look; skin and lips dry; teeth covered with sordes; tongue hard, dry, and covered with a dirty-brown coat—was protruded, on the demand being made, with much tremulousness; and there was marked general tremor of the muscles. Breath offensive. On examination, evidence was obtained of consolidation of the whole of upper lobe of left lung. The percussion note was markedly high-pitched; numerous harsh and coarse moist râles were heard both in expiration and inspiration, and there was no appreciable expansion of affected side. Throughout the right lung the respiratory sounds were perfectly normal. Abdomen flaccid; no localized tenderness. Urine highly colored, spec. grav. 1020; acid in reaction; contained no albumen; chlorides present to average degree in health. At night a draught of chloral hydrate and tincture of valerian was administered, after which some sleep was obtained. Poultices and occasional hot fomentations of turpentine were applied to the chest. For the next three days there was noted continuous wild delirium, with an evening temperature of 104° F.; morning, 102.3° F. Pulse 130; respirations 45, and irregular. Face flushed and pupils dilated. Tongue dry, cracked and bleeding. Physical