

expansion on the right side; dulness on percussion on the same side, with diminished breathing sounds; puerile breathing on left side; two examinations made; no bacilli in either case.

Case 13.—McG., Dispensary patient. Sputa sent by Mr. Foster; phthisis; bacilli were found in large numbers.

Case 14.—G., Dr. Stewart's case. Patient caught cold seven years ago, and has been ill ever since; night sweats; left lung involved; signs of cavity in the left infra clavicular region; bacilli not numerous, but very distinct.

Case 15.—T. W., Ward 10, T. G. II. Cough for six months; left lung involved, with signs of breaking down; bacilli found in very large numbers.

Case 16.—C., T. G. II. Upper part of left lung is diseased; not much breaking down; disease pursuing a chronic course; bacilli found in moderately large numbers.

Case 17.—J. R., advanced phthisis. Patient has since died; bacilli found in large numbers.

Case 18.—Sputa sent by Dr. Burns. A case of advanced phthisis; bacilli found in very large numbers.

Case 19.—F., T. G. II. Phthisis of six months' duration; both lungs are affected; patient died the day after the sputa was obtained; bacilli not very numerous.

Case 20.—Mrs. L., my own patient. Chronic bronchitis, with dilated bronchi; no bacilli were found, although two examinations were made.

Case 21.—Mrs. R., my own patient. She has suffered for years with chronic sub-cutaneous abscesses; suspect tuberculous deposit in the apex of the left lung; no bacilli were found, although three examinations were made.

Case 22.—C., my own patient. Suffering from slowly advancing phthisis; the bacilli were not numerous, but distinct.

Case 23.—B., T. G. II. A case of chronic bronchitis, with dilated bronchi; no bacilli; three different examinations were made.

Case 24.—M. T., a patient suffering from advancing phthisis; lungs breaking down; mother and brother died of the same disease; bacilli found in moderately large numbers.

Case 25.—M. S., my own patient, suffering from acute bronchitis, since recovered; no bacilli.

Case 26.—Mrs. D., also under my care. She has had cough for some years. This winter she has shown signs of phthisis. Bacilli, not numerous and small, but distinct. In this case the finding of bacilli was a material aid in diagnosis.

Case 27.—C., T. G. II. Left apex involved, other parts of the lungs healthy; bacilli not numerous, but distinct.

Case 28.—T. G. II. Patient suffering from emphysema and subsequent development of phthisis; bacilli found in moderately large numbers.

Case 29.—Large part of left lung involved; disease of a year's standing; bacilli not numerous, but distinct.

Case 30.—This and the two following cases were given me by Mr. Foster, who prepared the slides.

Dr. S. since died of phthisis; rapid disease; bacilli numerous.

Case 31.—Patient from House of Providence. Case of phthisis; bacilli numerous.

Case 32.—Also from House of Providence. Diagnosis doubtful; bacilli not distinct, if seen at all.

Case 33.—G. came to me for consultation; rapid tuberculosis, with few physical signs in the lungs; bacilli not numerous but distinct. In this case the discovery of bacteria was of great assistance in the diagnosis.

Case 34.—B., my own patient. An undoubted case of phthisis of two years' standing; bacilli not numerous but distinct.

Case 35.—S., T. G. II. Patient suffering from phthisis; bacilli not numerous.

Case 36.—C., T. G. II. Has had cough for the past two or three years; has lately lost flesh. Examination of the chest re-