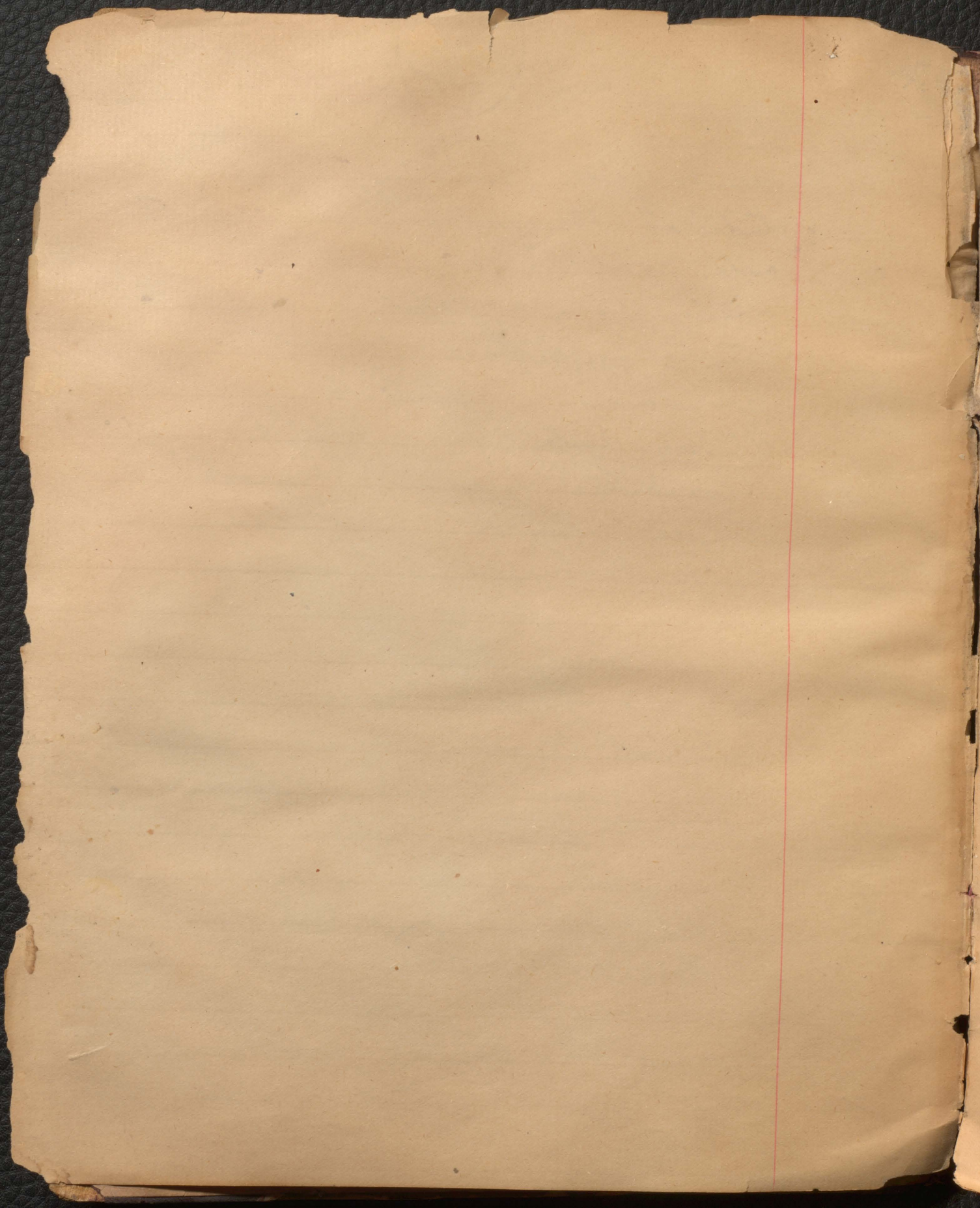




Uterus Dr Cameron
In wall of vagina you have (1) Musc.
membr. (2) Muscular circular + longi-
tudinal (3) fibrous elastic tissue +
outer coat. Vagina is very vascular
+ veins have no valves free communication bet.
vag. veins + those of neigh. part.
perineum + haem. Thus for ov. papillae
Uterus Anter + post. lips are of equal length
Arter. vitae uterinae branching out of
aorta - By the epithelium we can
diagn. Cervix = Columnar + ciliated
vagina = squamous - Glands bet.
vaginae secrete glairy mucus wh. forms
the plug hard to remove -
Internal os is a constr. wh. sep.
Cervix from body - Uterus is 4 in
shape. It is flattened from before
backward - Lining membr. is
soft spongy pale red wh. know
whether it is mucous or not Body
muscular part. non-striated muscle
fibre. These during pregnancy devel.
into layers - Fundus is not so



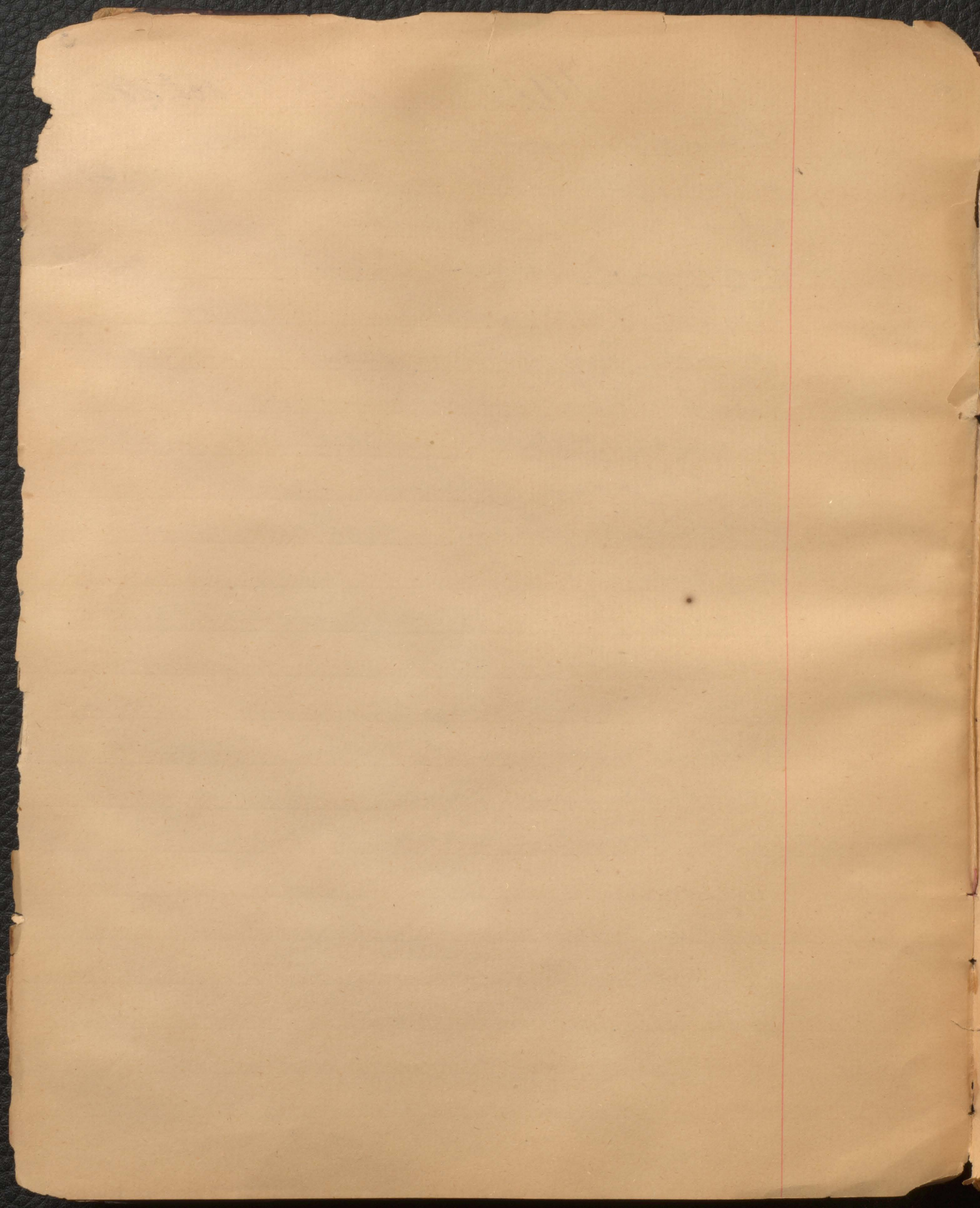
flot in multipore + side wavy +
relaxed. Cervix is rounded also
+ here you have an actual cavity +
wha potential one as in primipara
Ligaments most thorough -
They are peritoneum - broad -
round two round one attached in
front - w. pub. - Uterus is very
moveable + move accord. to fullness
of bladder, rectum, bowels etc
It adopts itself + is held so by these
ligaments

Ligament of ovaries anchor ovaries

vesic. uterine lig.

lcta. uterine lig.

Asteris. uterine ovarion. large tortuous
+ anastomosis freely. Broad lig.
cont. vessels, nerves, ovaries fall tube

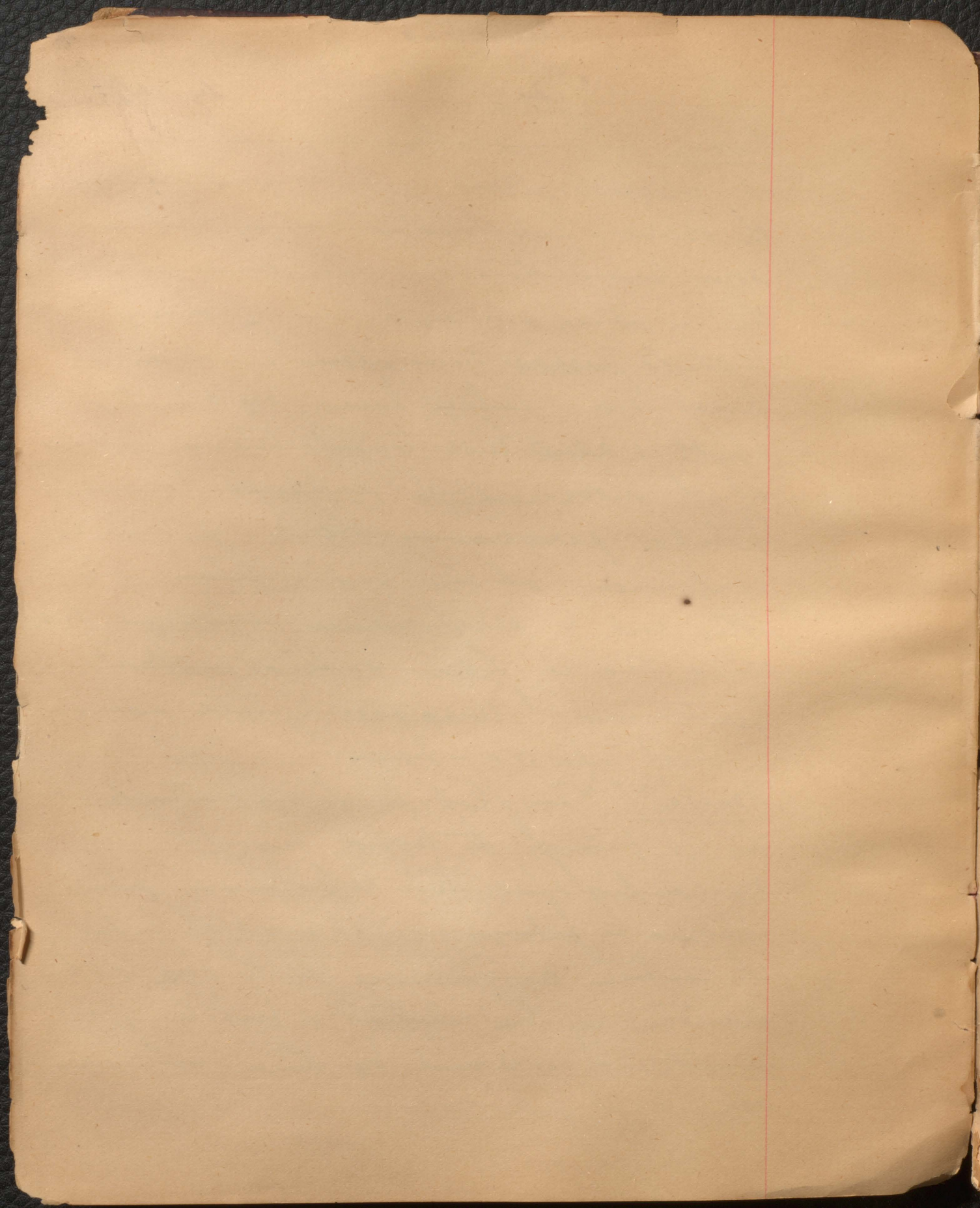


Midwifery Oct 8/88

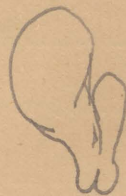
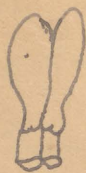
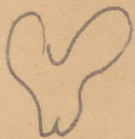
Fall of. tube and about $1\frac{1}{2}$ - 2 in long, narrow at uterine attachment & broader towards the ovaries - filubriated extren. wh. point down towards the ovary - fimbriae, one of them is attached to outer end of ovary - a slight furrow runs along fimbriae wh. direct ova. Tube is lined by ciliated epith & cilia move towards uterus area of wh. movement is supposed because tubular pregnancy. The M. of tube is continuous at one end to uterus & at other end to peritoneum so foreign body could travel from outside air into the peritoneum. Musc. wall in tube same as in most tube or - large

Ovaries - $1\frac{1}{2} \times \frac{3}{4}$ in and flat in front & attached by the flat surf. to broad lig.

Ovarian lig & foll. tube keep ovary in place. Stroma is fibrous, a net work of fibre wh. contain an immense no. of ova & wh. maintain in due relation a cert. no. of bl. vessels. It is surrounded by tunica albuginea & by a tough fibr. capsule. It is supplied



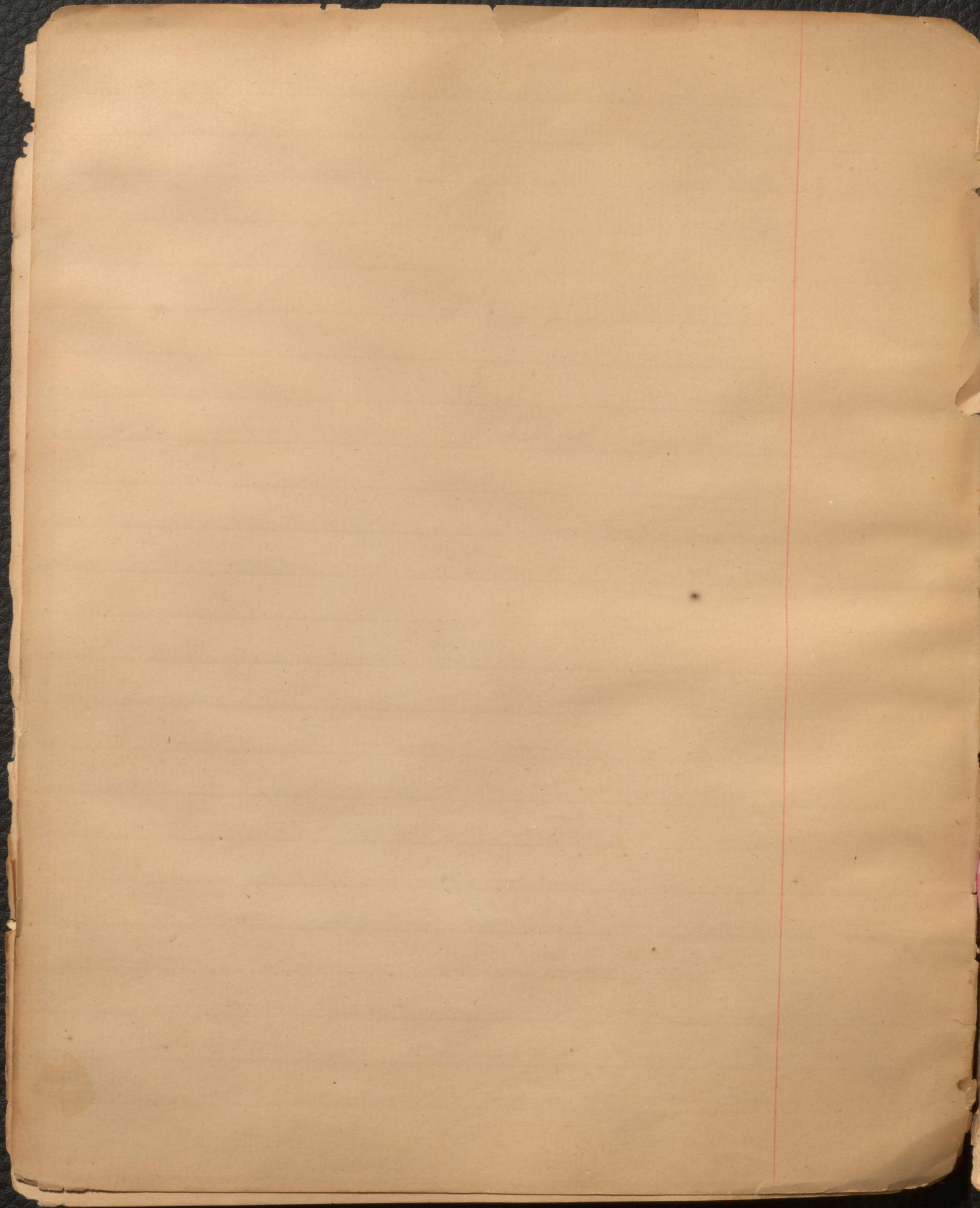
directly by ovation or indirectly by Uterine
arteries. Uterus ~~is~~ bilateral
Uterus Duplex, Unicornus
Bicornis



Cordiformis Septiformis =
a normal uterus & a complete septum
where you so. have twins
Uterus composed of 2 halves & Muller ducts
nil as these develop that abnormal form

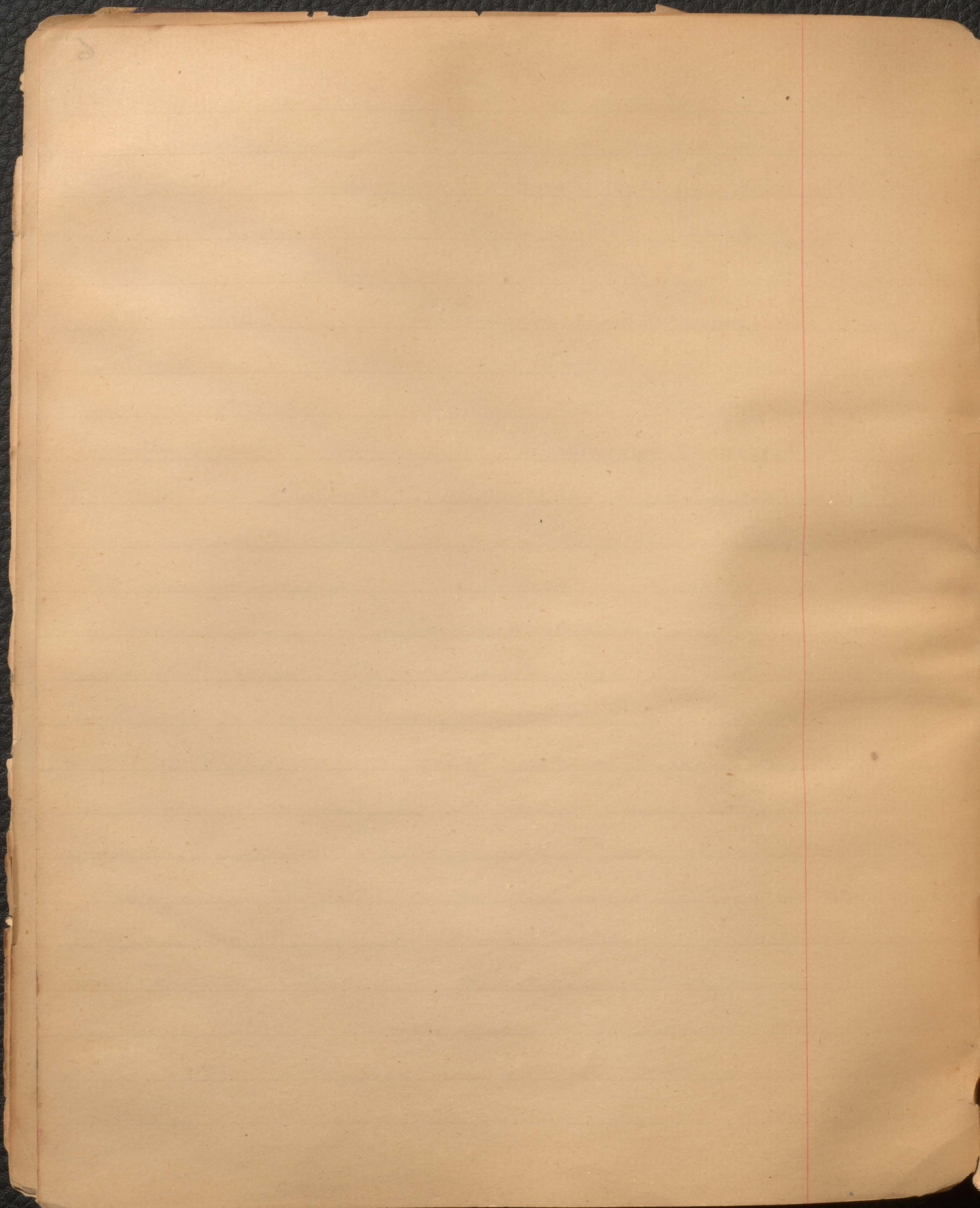
Menstruation

Monthly discharge, Cata-
menia - There is a cond. of intense
pelvic congestion & this is the cause of Menstr.
& Ovulation not vice versa - a rhythmic
-ical congestion, ovaries swell, mes-
bl. supply precipitates the change & a
graafian follicle develops & at last a
mature ovum is developed - Lubr. change
also, enlarge - fimbriae draw closer to
the ovum - Broad lig. are congested
veins are almost varicose, so mistaken



Menstruation

for enlarged ovaries - Uterus also is
enlarged + undergoes changes -
M^u is congest. tunefied swells up.
glands enlarge + get tortuous, epith.
living rapidly proliferate + grow
+ form decidual layer. It grows so
fast it heaps up ∴ cavity cannot cont.
a single layer so it is convoluted
this menstrual decidual is traversed by
a channel communicating wth the
uterular glands - how congest is af-
f^{ct} height + a check is given to growth
∴ of impoed nutrition + fatty degen.
+ they break down + it takes place
oozing forth of bl. + congest. is relieved
rechange fr on fatty degen-etc +
whole muc breaks down + is all
thrown out + growth become rapid
to form a new muc. The glands
remain + epith. living glands spread
from one to the other + covers whole
of inside of uterus -



- 1 Blood appears -
 9 Uterus is normal -
 18 Congestion begins + Menstr. decidua
 begins to form
 27 day or 28 - Haemorrhage

Ovarian is discharged about time it begins
 just at the right time - uterus has rested
 + ready for work again - Ovarian fluid comes
 out is delayed in its passage thro. tube
 + is ready for the next visit decidua
 It is a destructive process

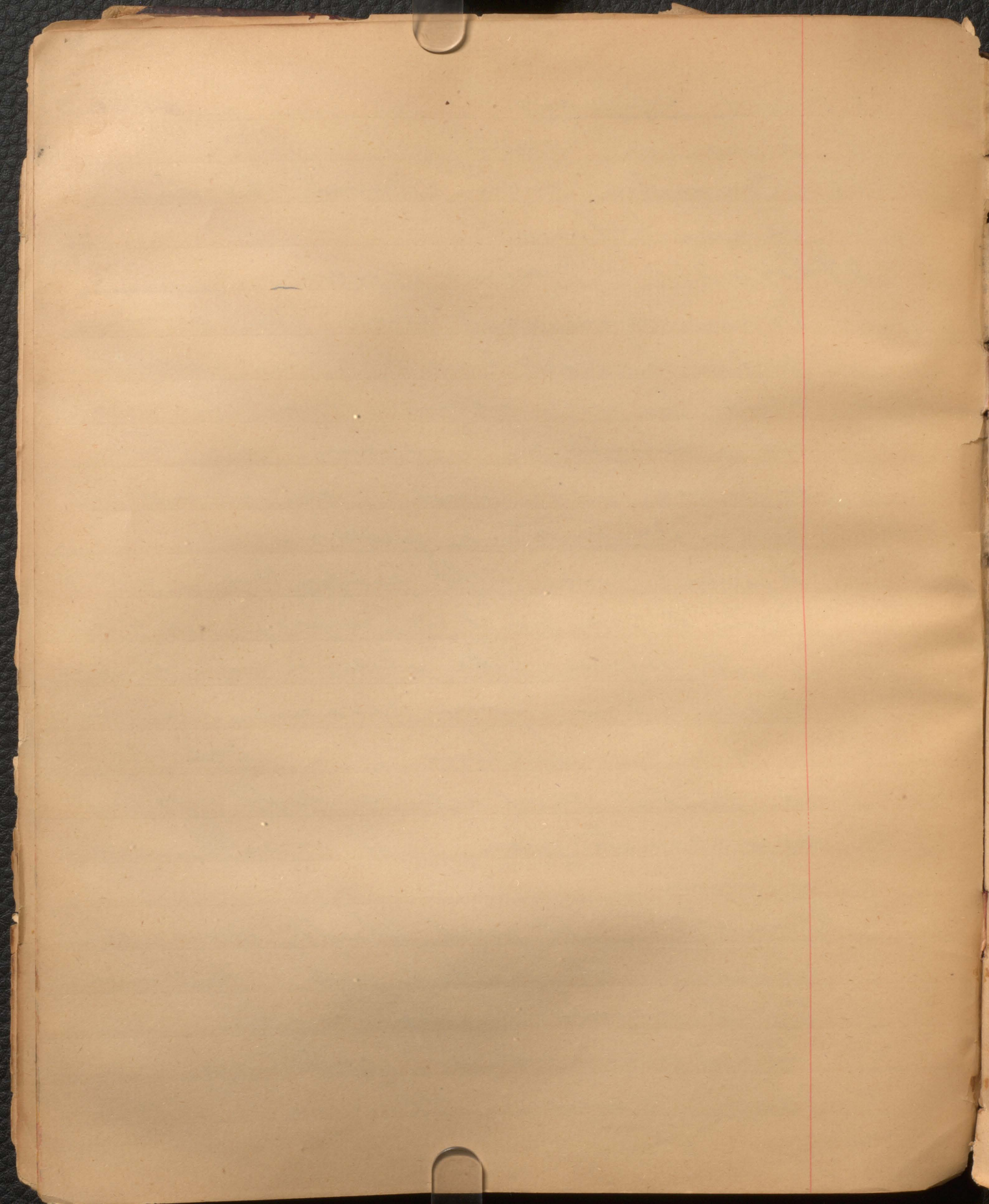
It forms a large soft pulpy bed in wh. to
 receive the ova but if w. irreg. Ova reaches
 it falls degener. takes place + everything is
 closed out - house cleaning every month

Lecture IV Oct 9/88

St. mental shock will be suff. obscur-
 ing a menstrual flow. It oozes from m.u.
 of uterus -

Character - It first chiefly muc. then
 tinged to bl, deep red. then fades
 till it becomes mucous again -

St. it is very acrid, irritating
 odor - peculiar + offensive - It does



not coagulote ∴ vaginal mucus is so acid but if large amount of bl. then mucous cannot prevent the clotting so. it is prevented by mucous or pus

Quantity Total quant. of 34-6

but it varies very much.

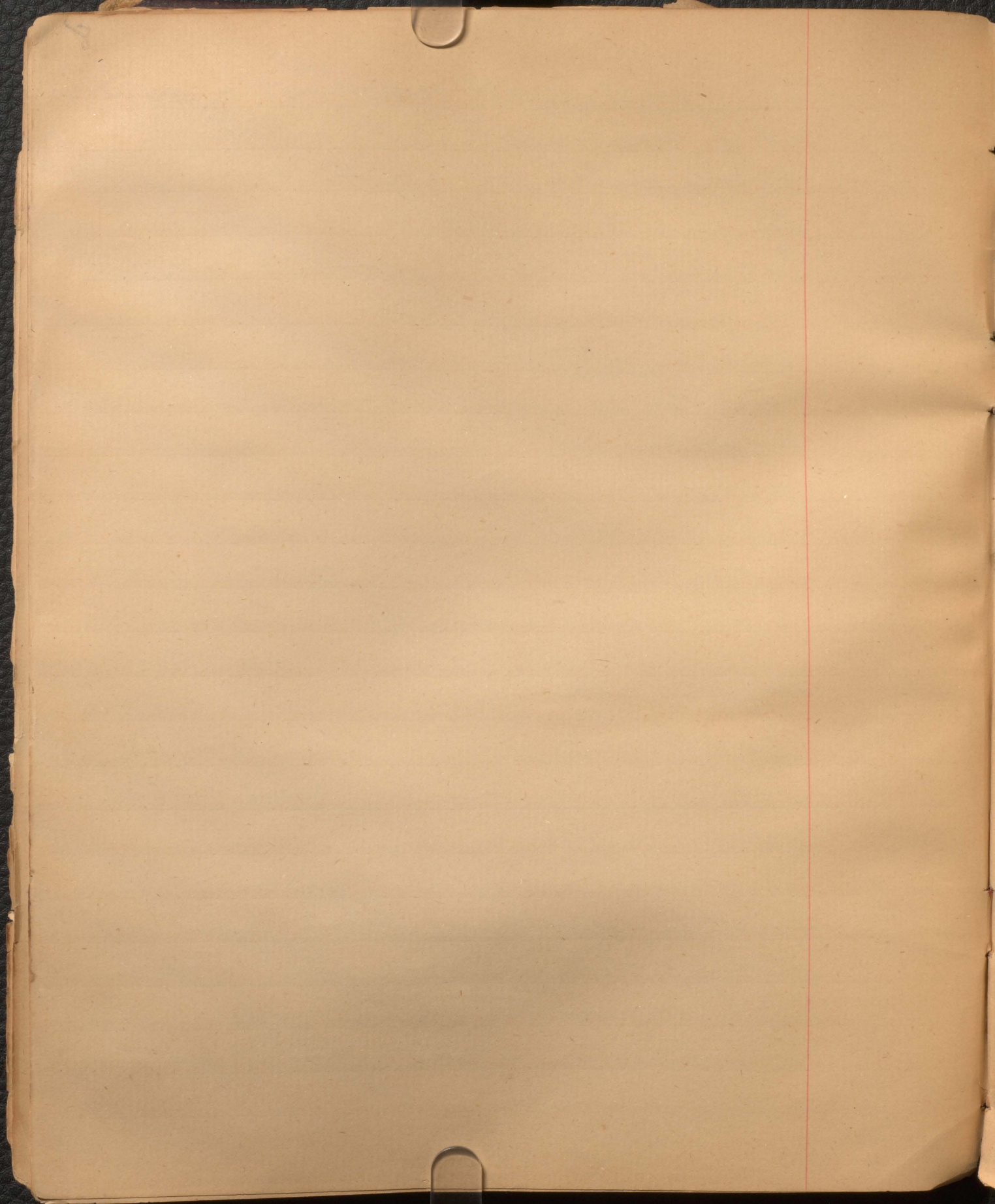
Time 3-5 days If it last over a week there is so. wrong or if it stops suddenly so. abnormal so it should gradually fade away.

It begins at puberty - in warm climate earlier than cold 12 yrs in east 14-17 here - Cases are reported when child's menses. from 1 year regularly those who live a life of cold they are more apt to menses. early ∴ this is a pelvic congest. they are hot blooded & should be forced or it will

Periodicity every 28 days but varies

Cessation or Menopause Rarely before 40 although ovulation may have stopped & she may be sterile

Potentiality 15-45 only an average



Constit. Phenomena - 2 Groups

Group (1) Menses, + Frequency composed
In both you have pelvic congest:
preparation, course, fatty degen.
+ then return normal -

Group (1) nerve tension

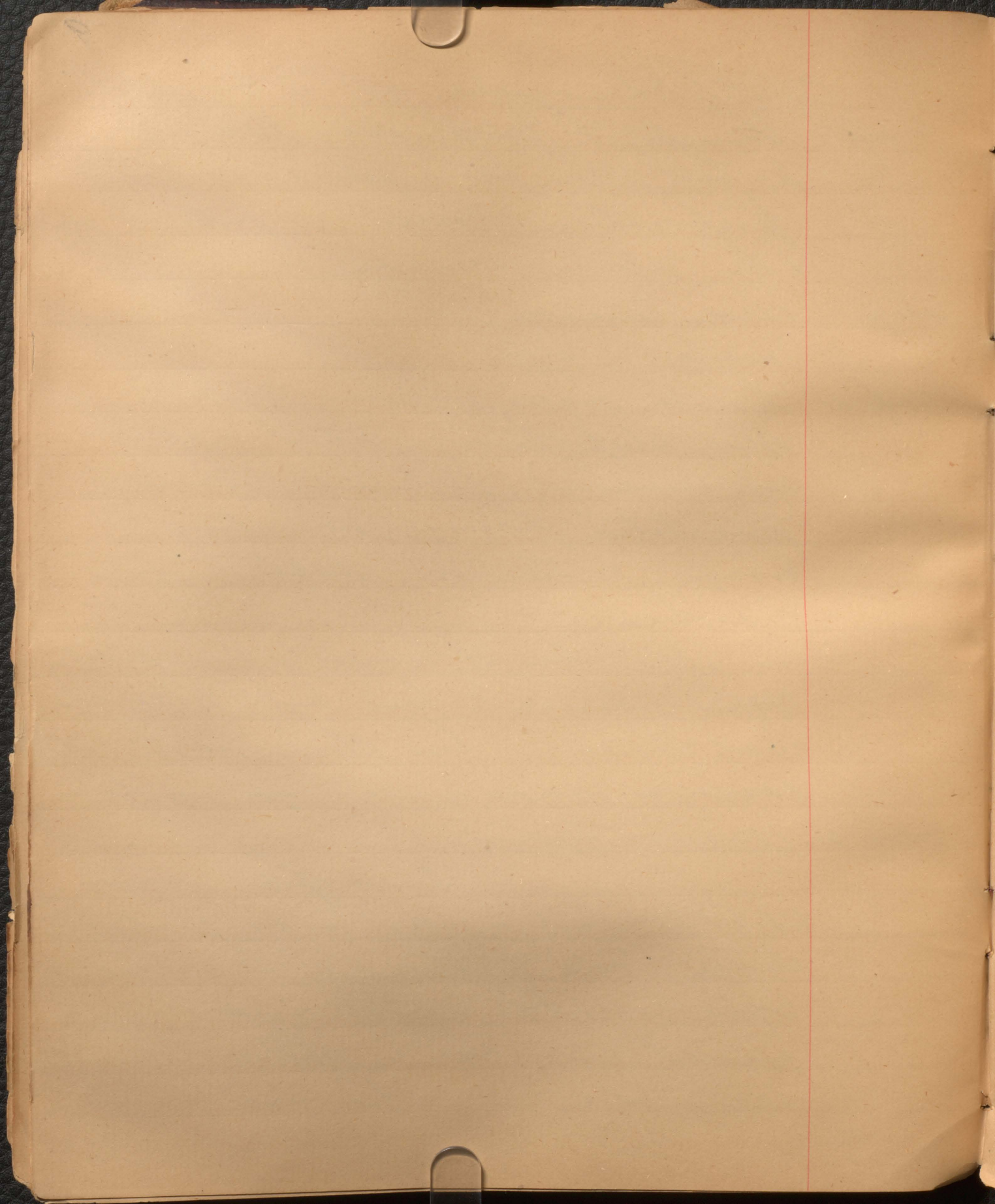
" 2 vascular "

Group (1) Small rigors, some yawning,
others sleep heavy, stiff neck
not voracious, flutulent, hoarse
palpitation, hiccup, vomiting
croups, restlessness, micturition
diarrhea.

In " here it would be bad practice
to give astringent here but KBo would
check it here, here strike at the cause
common sense is what you want here

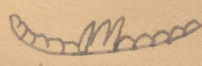

Group (2) Vascular Tension -

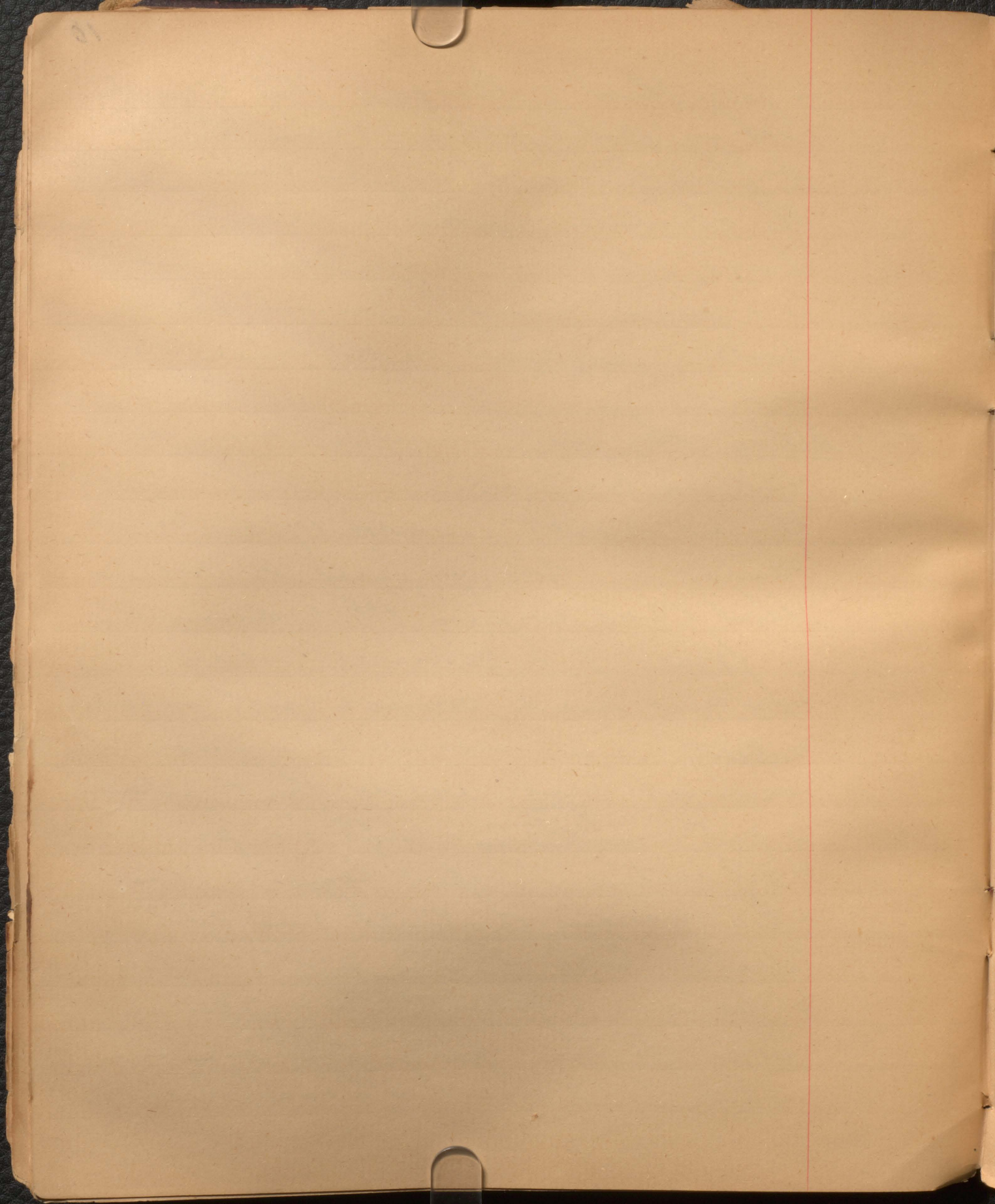
Two of bl. is aier.
but whole current is vis. pale fontes +
stomach, rose. excitement, skin rose.
capill congest. areolas darker -
pigment under eye in pallor v elsewhere
ecchymose, H Epistaxis, Hæmaturia



or from throat & lungs - this distinction
 act as safety valves. when they both
 the flow of menses they are called vicarious
 the glandular system is skin - breast
 lungs liver & testes, milk p. etc.
 is a serous fluid - genital become
 darker pigment as on upper & under
 eyes.

Ovulation they are formed in ovary regul.
 & carried outwards

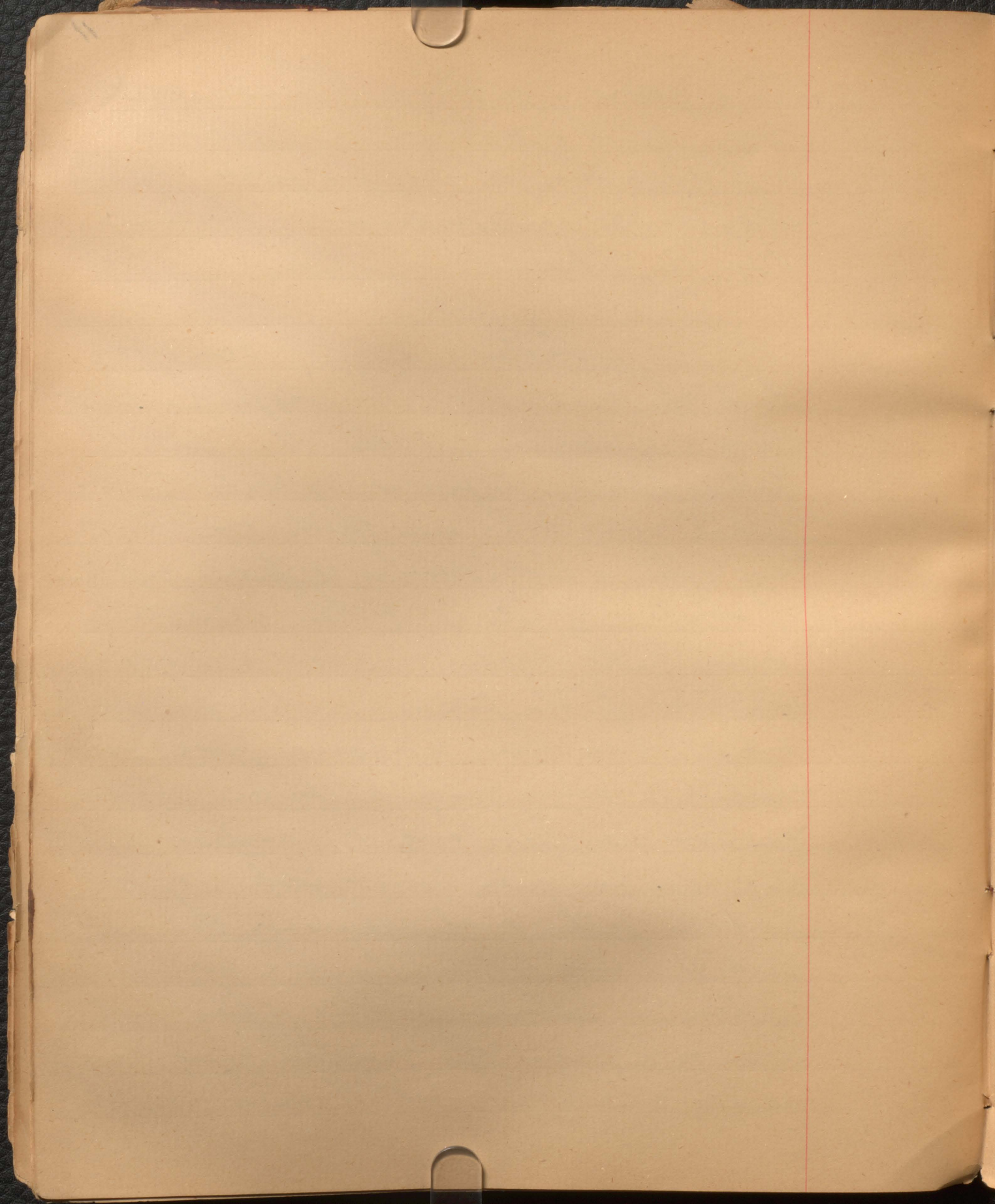
They are mostly formed before birth
 & small but during first 2 yrs.
 About 5 weeks we find the rudiment
 of form. of 2 germinal ridges
 basement membr covered epi. pavement

 if pt. becomes columnar the
 basement membr exude this & pushes
 it out  until it is pushed off
 & separated 1 = epi. layer (2) squamous
 & these remain distinct ever after
 Cellular layer + into 2 -
 (1) remains a sheet & (2) cells -
 Some of these primitive ovaries
 at end of 2 month & become secondary



ova + about this time you can disting
sex. If it is a male in second ova
is formed but break up + form sperm-
atazoa corresponding to Permanent
ova in female -

Lecture V Oct 11/88

Look up anatomy + histology of the
ovary, graafian follicle etc
Corpus Luteum is formed by conti. of G.
follicle after expulsion of the ova 10-12
dys after a clot forms in it from rupture
of vessels + it into it + then a cicatrix
forms fatty degen. + at last it is all
absorbed if the ovum is not impregnated
but in preg then retrograde proc. are
checked - pelvic cong keeps on, in fact
you have vis. pel. cong. + ascistena of fatty
deg. you have vis. cong + corpus lute-
postobst of this + it remains then for
weeks + it may be months + a permanent
cicatrix is formed - this is freq. put
down as a sign of previous preg. given
an ovary + corpus lute. of preg. but this



is merely a sign of pelvic congestion & any-
 thing that causes this as Fib. tumours
 ovarian troubles etc will do this
 so this is a fallacious sign of Preg.
 It is estimated that there are 35,000 peruv.
 ora in each ovary. remember the formation
 of these ceases after the 2nd year of life
 Lawson Late has a diff. theory of Mestr. & Ovulat.

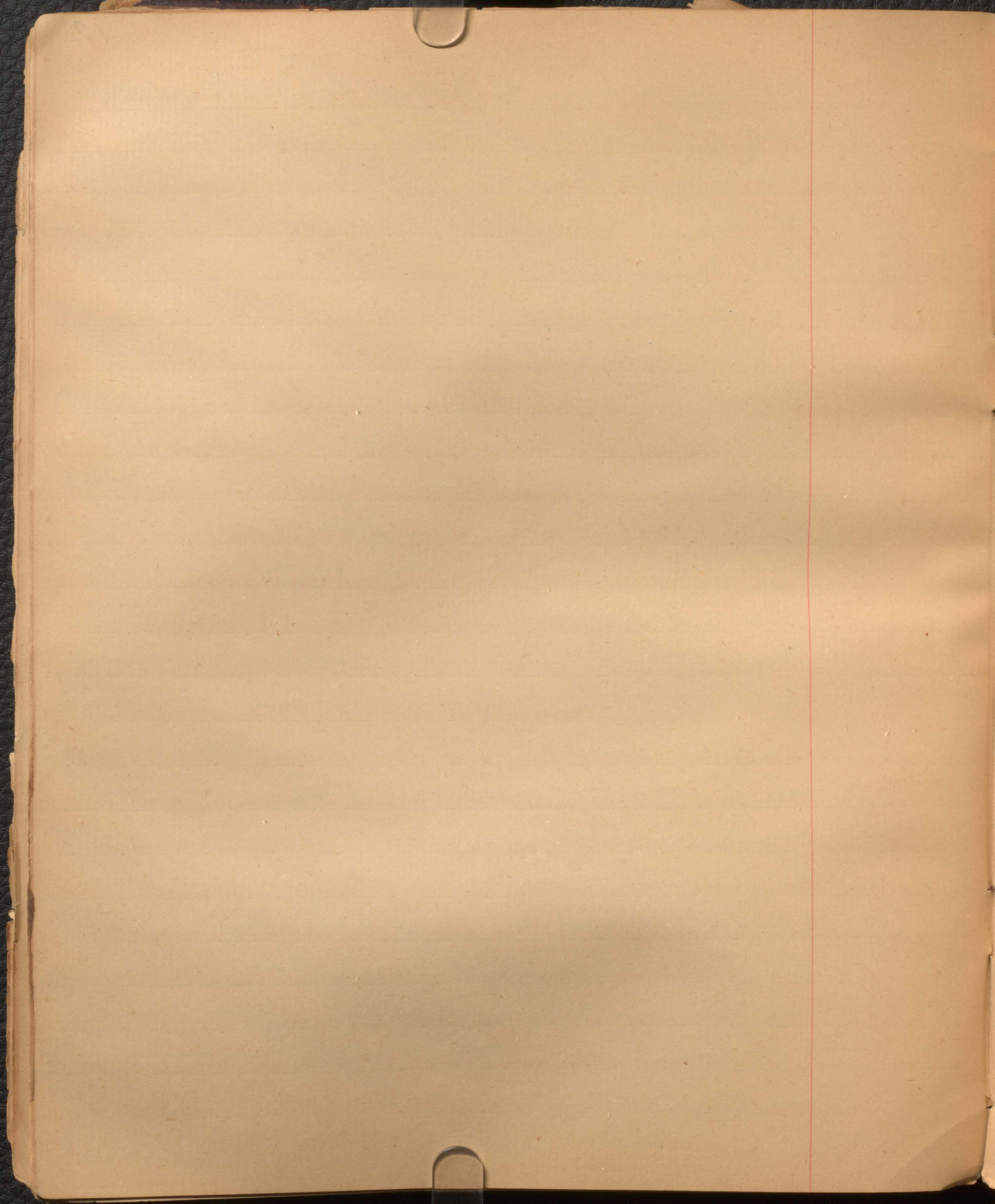
The ovum after being discharged from U. Fall.
 shrinks in content & do not fill now the wall
 feru. vesicle moves from centre to surf.
 enlarges & it wall breaks down & cont.
 spread themselves

Ovum = cell, cell wall, nucleus, & nucleolus
 After pt. of the contents are extruded - polar corp.
 now if not impreg. it shrinks & is absorbed
 but if impreg. by spermat. ^{head} ^{tail} - they reach
 ovum feru. about upper third of Fall. tub.

The penetrator passes outer wall of ovum first
 & radiate around bet the 2 coats. then leaving
 their tail behind head penetr. coat.

Now new life is given to ovum. head swells
 & so does nucleus & they unite & impreg. results
 Now you have a junction of a prime ovum





of a male + female. If you had not cross
propog. the race would deteriorate.
peculiarities or weaknesses would increase
whereas cross fertil. counteract this

How many spermat. are necessary?
Theoretically one is suff. but probably several
are concerned - A sperm retains its
vitality prob. a week or more

How long does ovum retain its power? week.
It takes it 8 days to travel down to uterus & at
any time during this course it can be impreg.

Impreg. is ∴ involuntary
It may occur through unconsciousness - noctic
liquor, sleep etc

When is it most likely to occur? It most occurs
at the first 10 days after appear of mensstr.
although it may take place at any time



Lecture Oct 15/88

Development of Foetus - Look up
Lig Amnii 2 views Ser. & secret =

Use

- (1) It keeps up even temp.
- (2) Allows movement
- (3) Water cushion

Lig Amnii + Allantois and Foetal

- (1) Modern view of Lig. Amnii is that it is a serous send. from the mother.
- (2) Old view was that it was a ser. from the foetus

Allantois is vascular

Use - to bring bl. of foetus thro bl. of mother. It carries foetal bl. into bet. villi of ut. decidua

It lines folds Amnion

Chorion also foetal - covers ovum

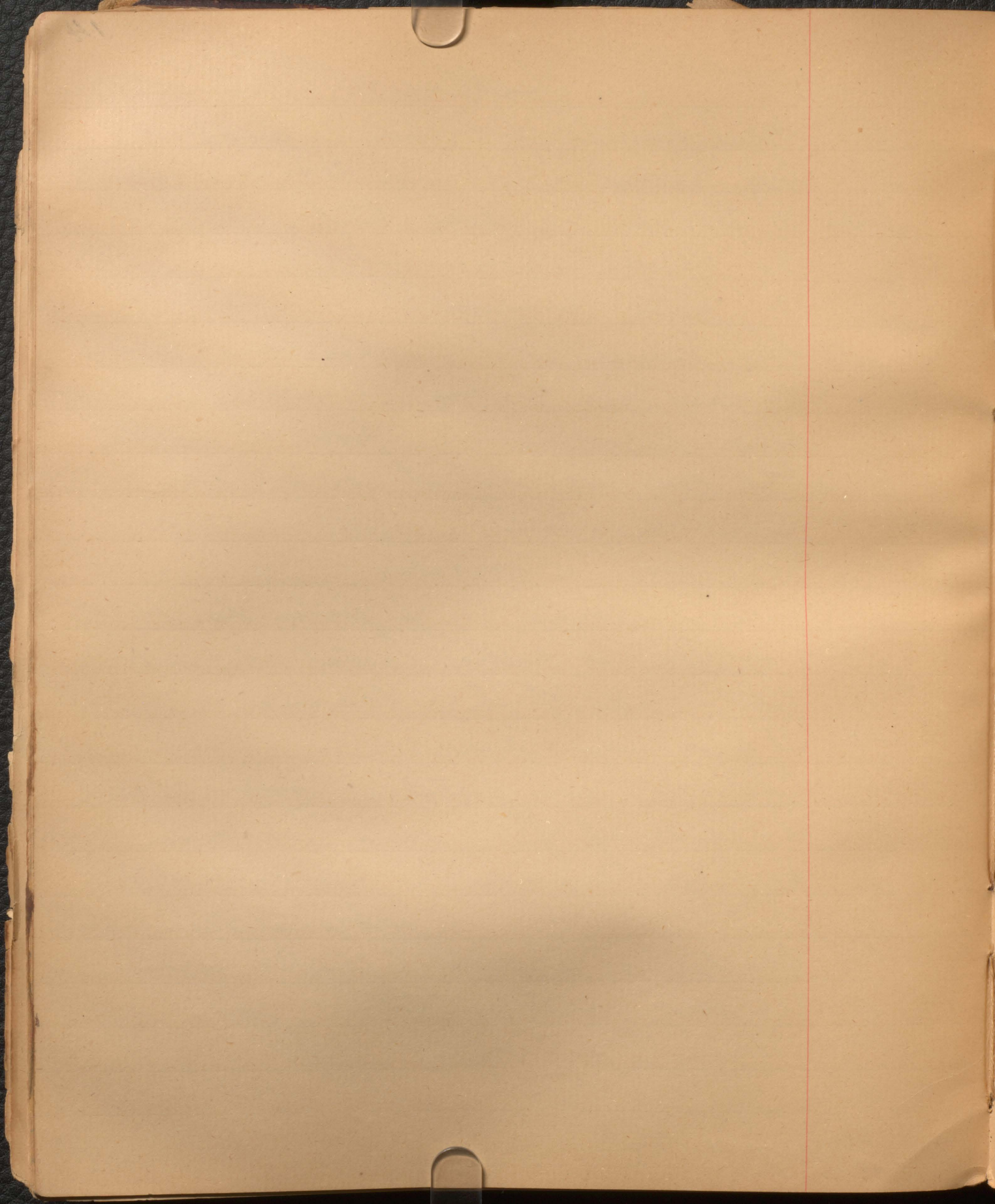
It is made up of (1) Zona Pellucida

(2) Folds Amnion (3) Allantois

" " = Subzonal Membrane

Decidua (a) vera (b) Reflexa (c) Serotina

It is vas. membr (maternal)



placenta consists of 2 pts maternal & foetal
 but remember pt. of mother & child do not mix
 Maternal pt consists of decidua serotina
 Foetal " " " Chorion & villi

Oct 18/88

Cord consists of yolk stalk, Allantois
 stalk, filled & whortons jelly & covered
 by Amnion

24 in length but may be only a few
 inches - it is few twisted

There are two umbilical arteries & one
 vein - It is few inserted into middle of
 Placenta if at margin called Eccentric
 if at side - Bottleneck

Yolk reaches uterus about the 8th day
 now it increases in size & is completely

closed in by decidua about 13 day

By end of 4th week end. of ovip. organs

" " 6 " ossif. begins

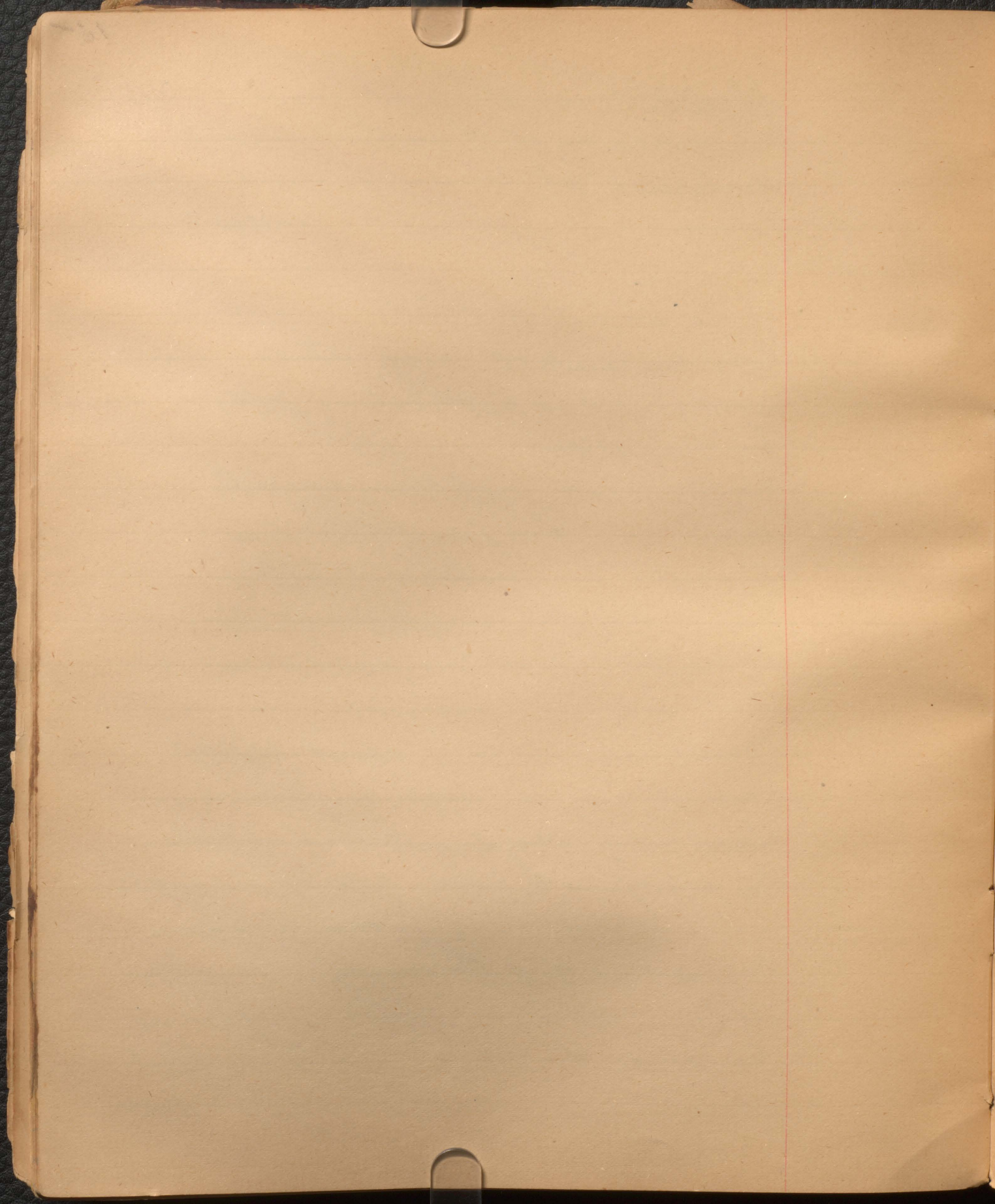
Before end of 3rd month embryo

After " " " foetus

At end of 3 " 3-4 in 3+

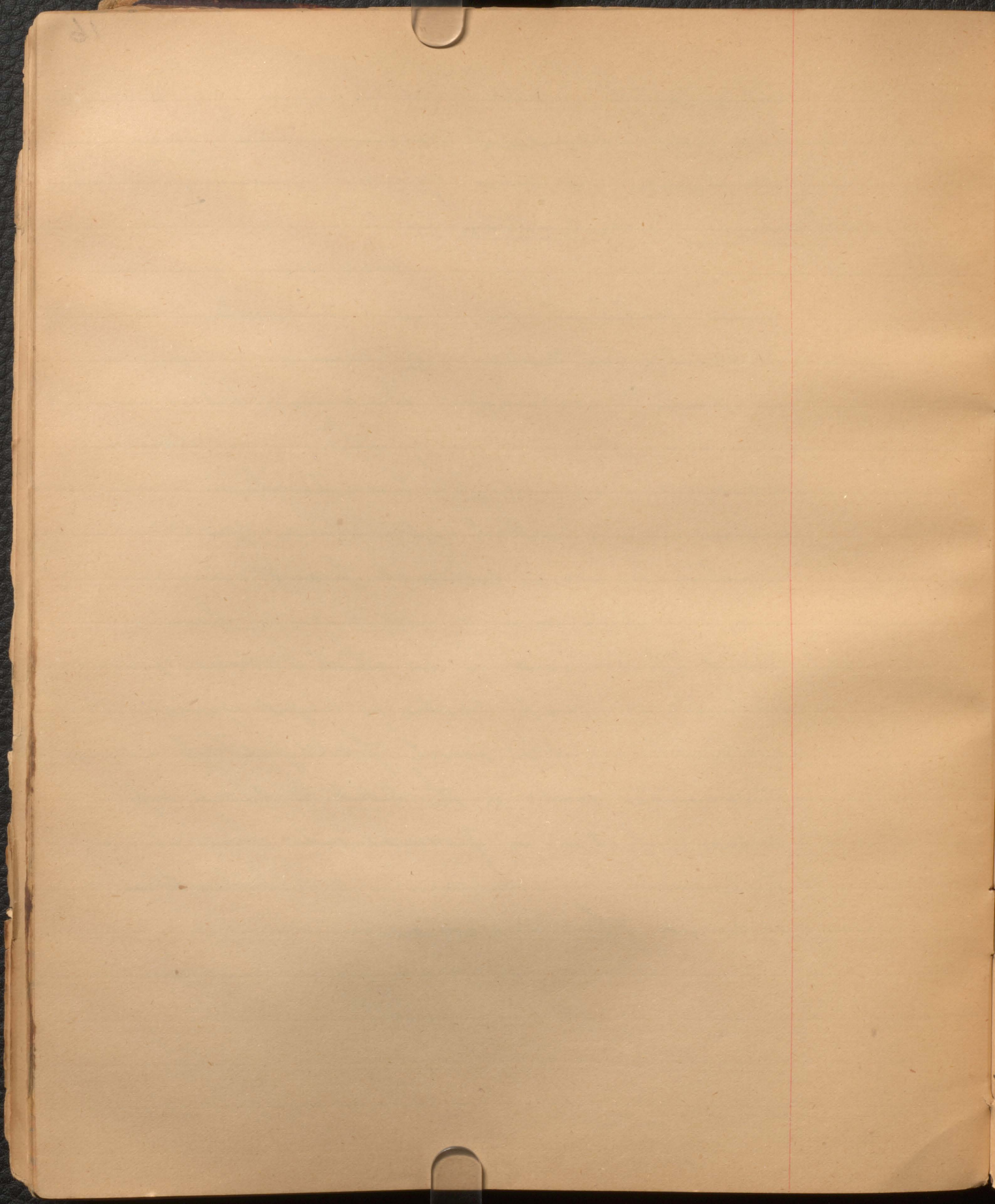
" " 4 " 8-8 down

" " 5 " "



At end of 7 month is period of stability
but now according to improved methods
children at end of 6th month ^{30%} are saved
Foetal Circulation -

Here you have in
pure arterial bl. in arteries, best bl. in
Placenta is really the lung of foetus
& Umbil. Arteries Ductus venosus
" " " " Arteriosus
Foramen ovale, Custodian valve
& these are foetal structures you must remember
Ductus venosus carries bl past liver
" Arteriosus " " " lungs
Best bl to head - so that brain grows
rapidly & resp. centre is kept quiet by
art. bl. After birth of all foetal struct.
foramen ovale is the last to close up
Urine in foetus is passed into Lig Amni.
Bile is " " " " Intestines &
becomes the Meconium -



Structure of Pelvis -

Oct 23/88

Deformity result when children are sent to school & breast too early being badly fed, bad ventilation etc. Def. bet 4-16 pelvis is very soft & pliable so that it can be bent in any slope

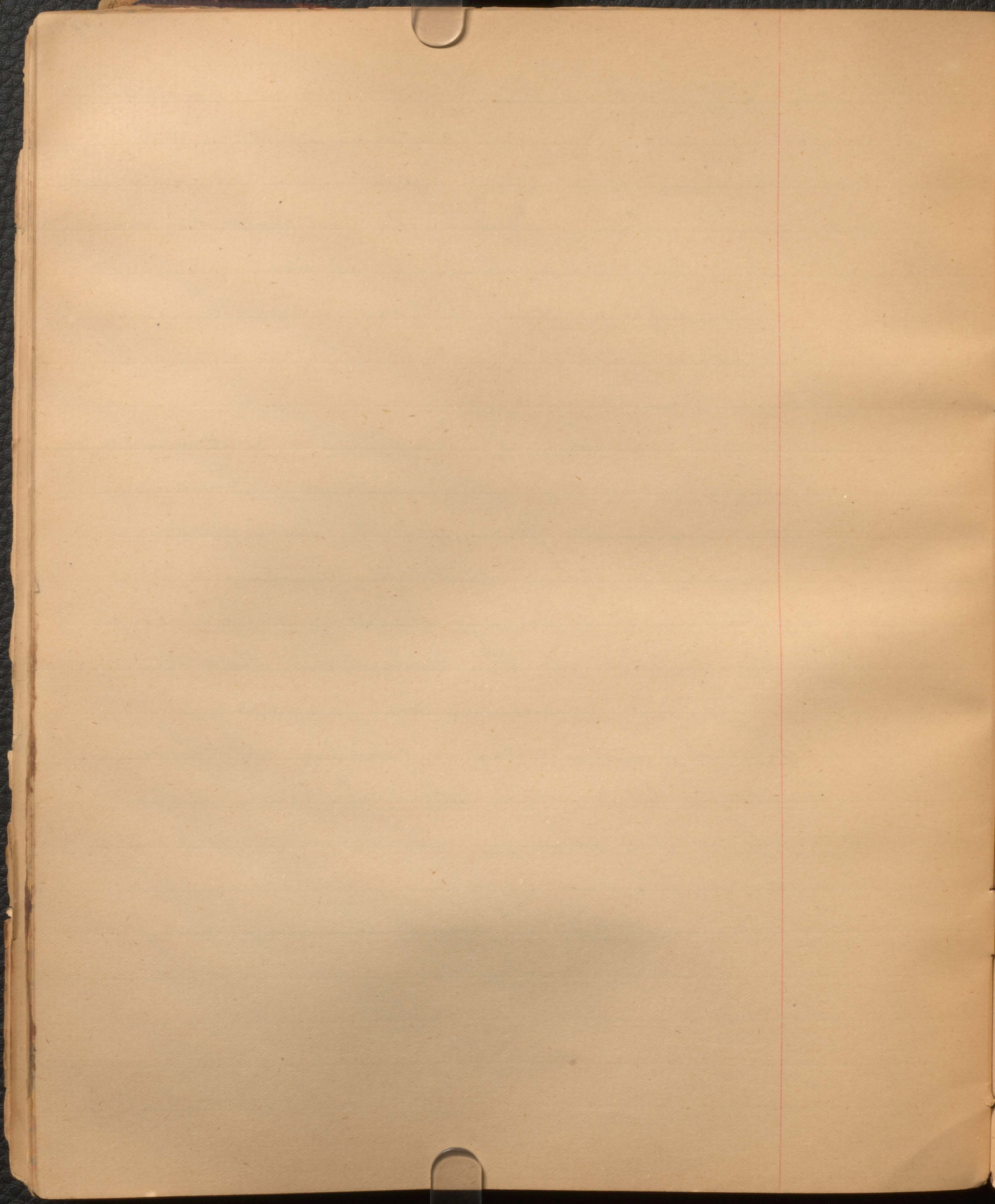
Pelvic joint -

Lumb. Sacral. Sacro Coccygeal

Sacro Iliac. Symphysis Pubis

- (1) Downward pressure tending to draw Sacrum down into the pelvis
- (2) Outward pressure tending to bow out the pelvis at the cotyloid cavity
- (3) Upward pressure by femurs. The Sciatic lig. receive the force in the dir. of the inlet, stress it up & discharge it in the dir. of the outlet -

More mobility of joint during preg.



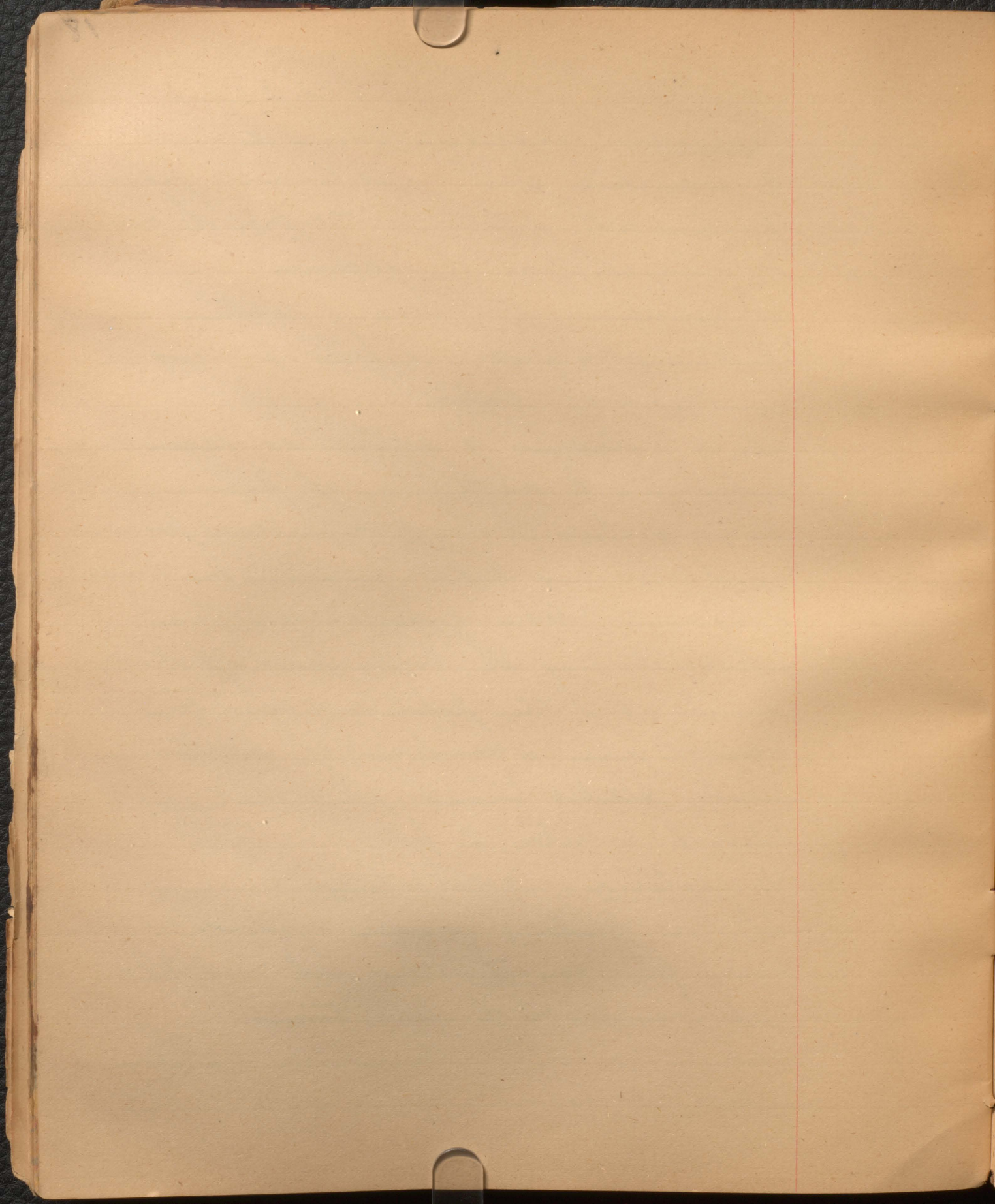
Oct 23/88

Rectum - It begins about the level of the sacrotuberous joint - It consists for our purpose into 2 pts (1) occupies the cavity of pelvis in hollow of sacrum
 (2) perineum - Now if rectum be distended to force it woud prolong the first part of labor

Piles + protrusion of rectum so. occurs after labor due to distension of perineum + the Congestion of the H veins being pressed upon. During labor pressure on branches of Sacral Plexus causes severe pain esp. during the latter part of labor
 Muscles about true pelvis are very thin
 Floor of pelvis is composed of peritoneum
 Muscles, elastic tissue, skin etc

Floor is \div into 2 pts -
 (1) Anterior (2) Posterior

If you prolong vagina upwards + laterally would give you the div. bet. Ant. + Post.
 Ant. is made up of loose tissue
 Post. " " " " dense " " " down.
 Tied into Sacrum



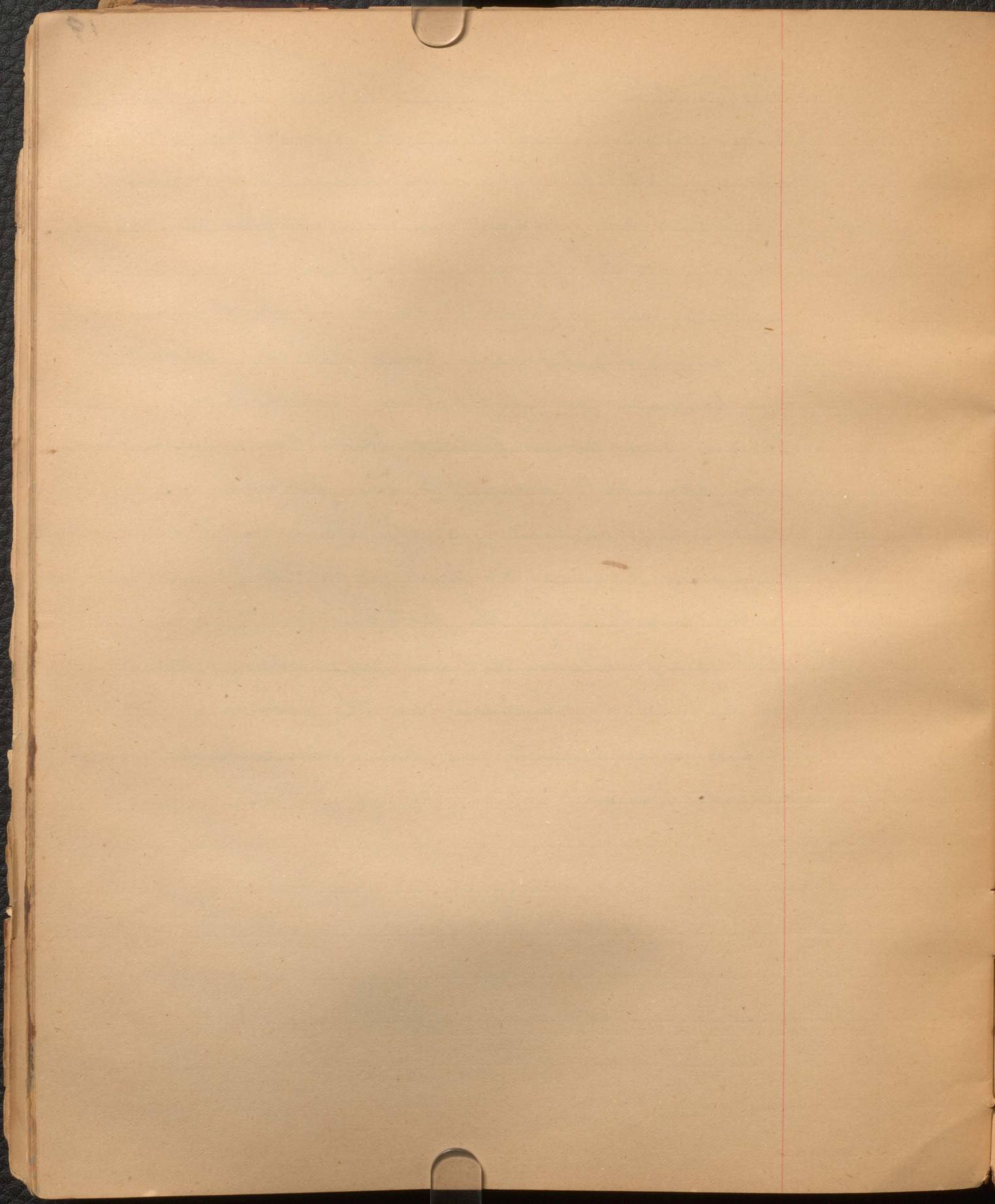
Both pt's are first forced down & then when
 Lev. comes down Ant. pt. comes up & Post
 opens out - Remember floor is elastic
 Prolapsed uter. occurs in women you get up
 shortly after confinement & get back & thus
 impair the integrity of the pelvic floor
 As uterus enlarges it takes off the sheet of
 peritoneum in Ant & Post. cul de sac

There is free communication ~~between~~ communication
 bet: connect. tissue of the pelvis

There is no normal pos. of uterus as it is constantly
 changing accord. to dist. of bladder & relative
 pos. of the patient

Now preg. uterus does not rise above brain
 so that it is shielded by the pelvis

Pelvis vary greatly in their dimensions & also
 accord. to age



Oct 25/88

Planes of the Pelvis -

In man pelvis is a

curved tube but in animals it is a straight tube

- (1) Plane of \ Brain
- (2) Plane of \ Cavity
- (3) Plane of \ Outlet

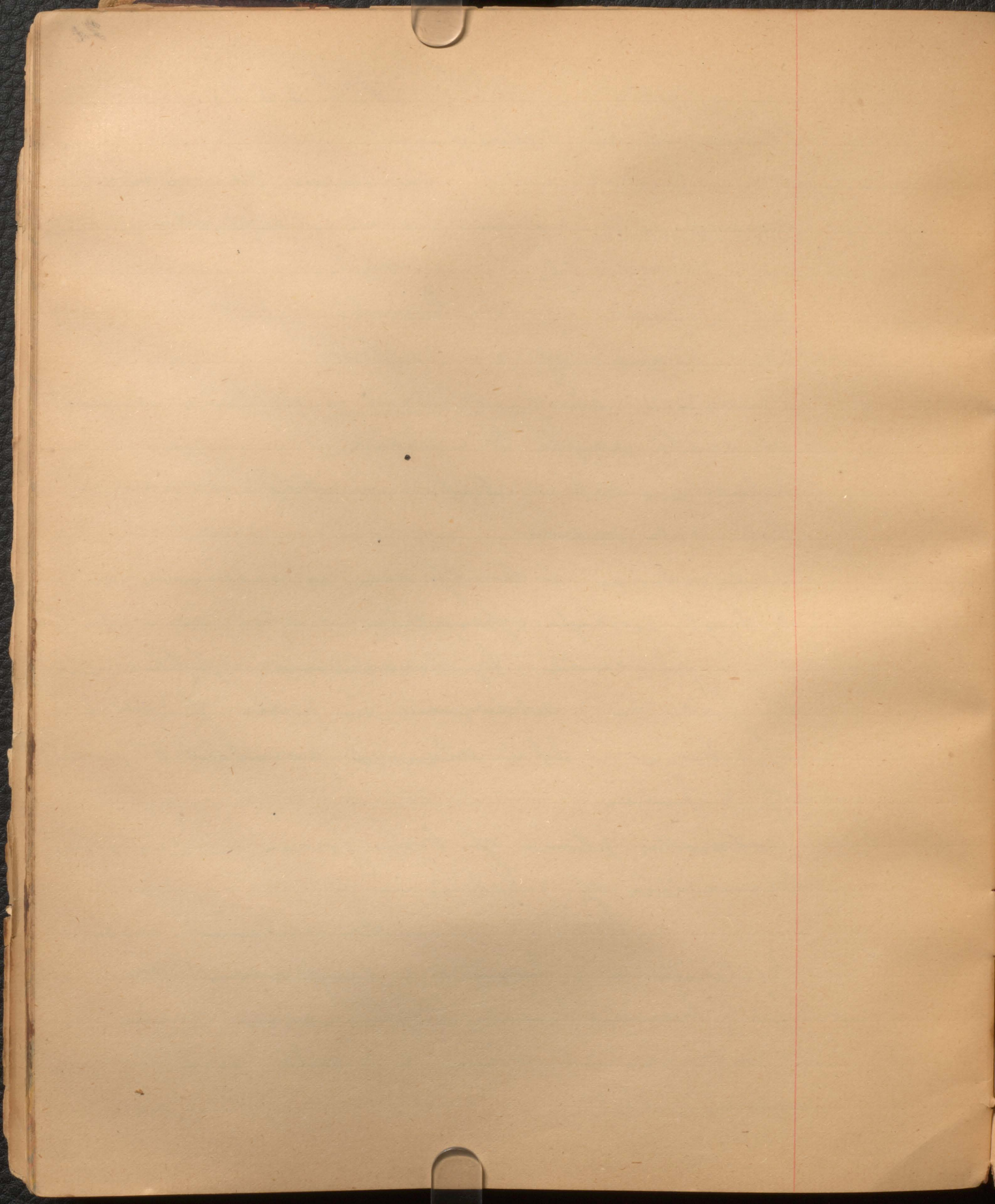
Plane is a surf - Axis is a line drawn at right angle to \ planePlanes are set at diff. \angle in diff. women so that axis varies

A knowledge of dir. of axis is necessary in a high forceps operation + also in removal of \ placenta by downward application of force on \ abdomen in \ dir. of \ axis of \ brain - It is almost parallel to plane of \ pubes

Naturally plane of brain forms an \angle as \angle is \angle larger
 Diameters of \ Pelvis -

In animal antero

posterior is \ long + \ important one
 In human female \ transverse diam is
 \ wide one at brain + \ antero post. longer
 at \ outlet



Head is longer Antero post. than laterally
 + long diam. of head will adapt itself
 when it enters the pelvis head enters
 transversely too it goes down it turns
 when it reaches outlet either forehead
 or occiput is toward pubis

Measurement -

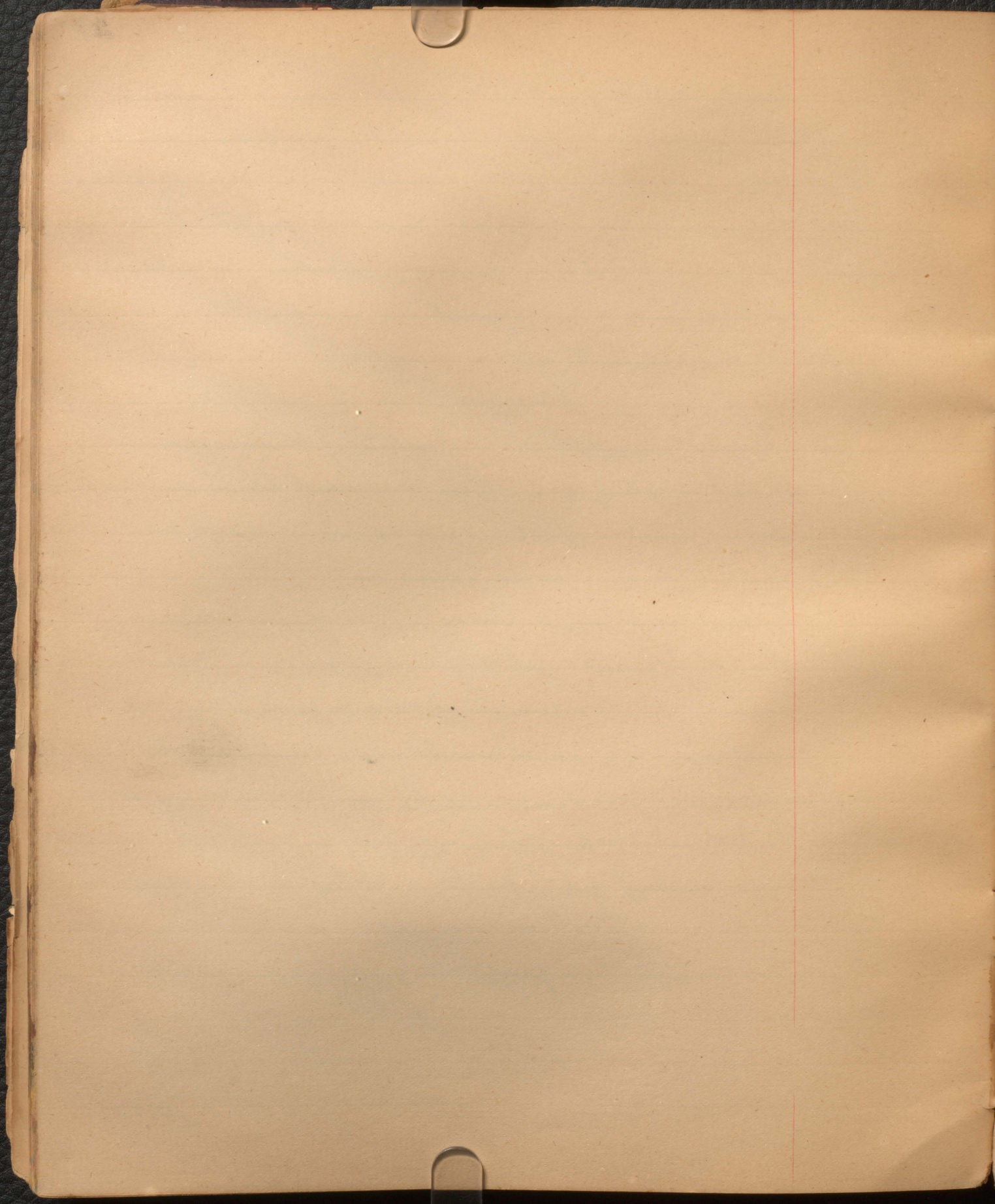
Brin - look up -

- Congjugate = Antero posterior
- Right oblique = right Sacro Spinous Lig. art. behind
- to left pectineal eminence etc
- Left oblique vice versa -
- Sacro vertebral Angle differs during
 the different pts of labor
- Hollow of Sacrum is measured
- Inclines are said to influence rotation of head

External Measurement -

Bet ant sup. spins 10 in
 " widest pt of coal 10 1/4 "

External conjugate



- In Pelvicinity
- (1) To estimate deformity
- (2) . . . conjugate

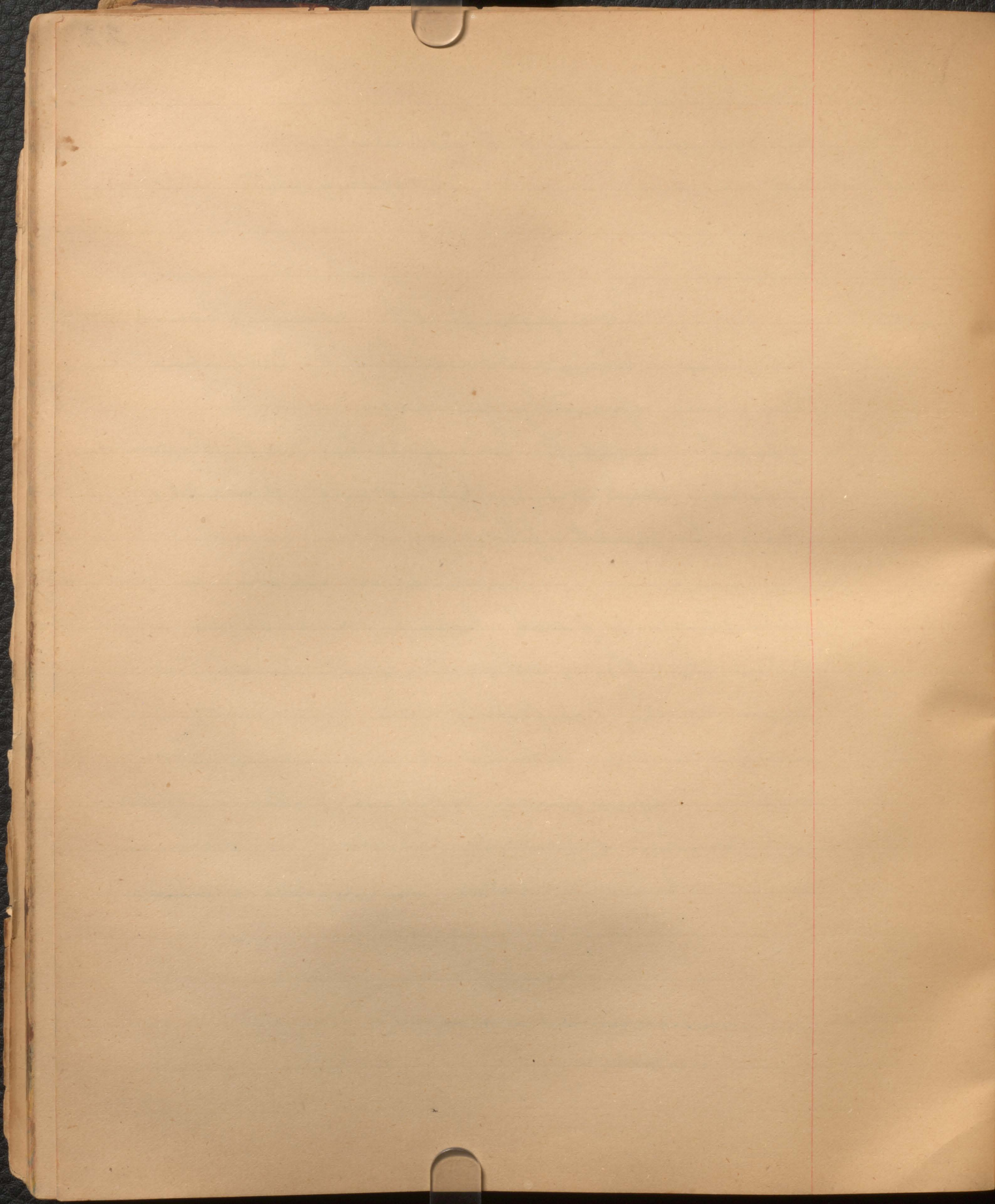
Breast -

Composed of thin glands
adipose tissue bound tog by cellular tissue
They vary greatly in size

Upple corresp. to 4 intercostal spaces
Breast rests on pectoral muscle

Dir. of milk flow -

It is seen in gland
structure, each lobe & section is separate
from the other. Each own duct wh.
leads to the nipple so you may have
infl. of one lobule & extending bet
nests - Mammary abscess, destr. of one
lobule etc or nest healthy - Two in
one lobule or none in a nest

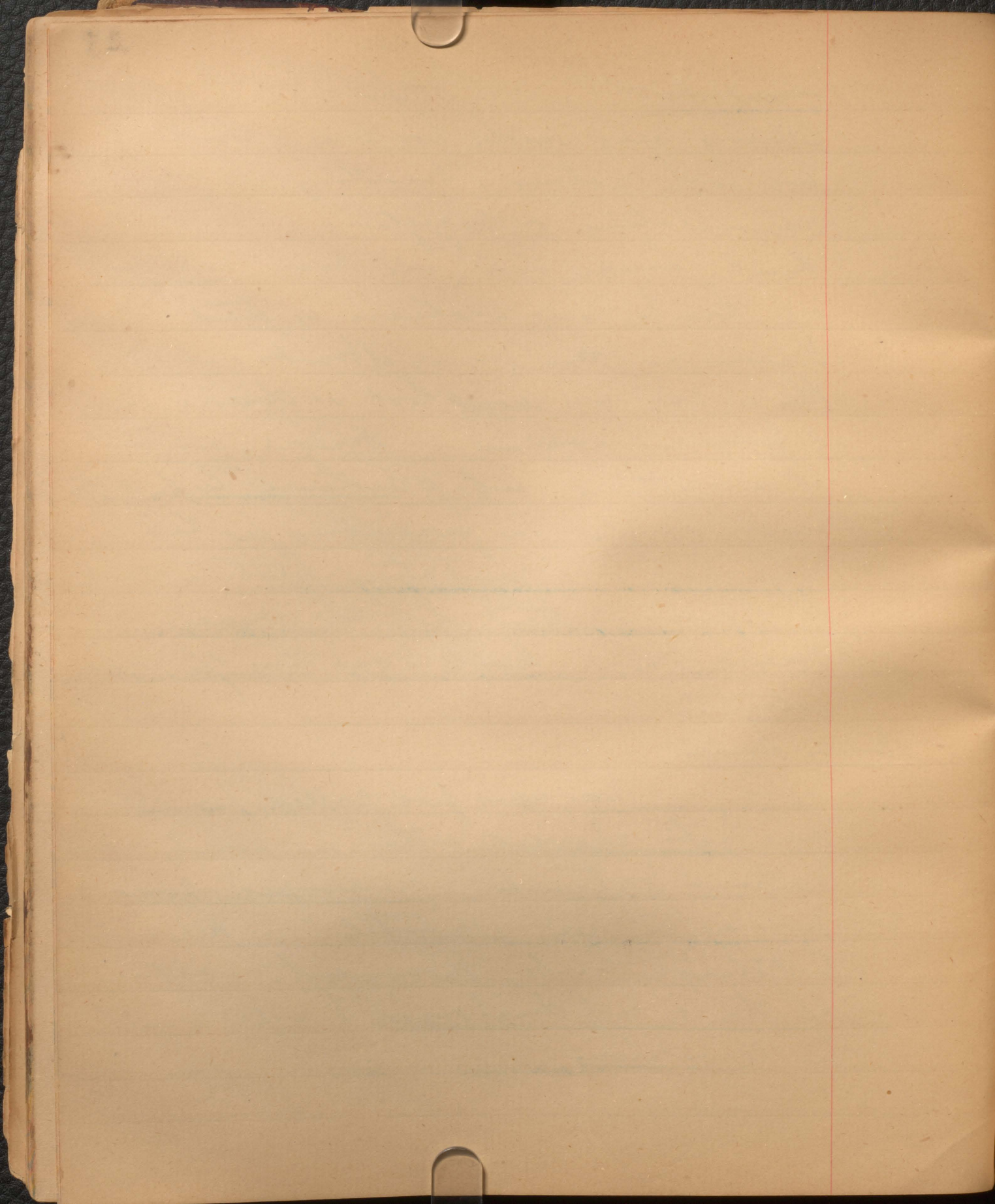


Pregnancy - Oct 29/88

During preg. mother has to do work of two both eating, breathing etc + assimilating + secreting
 Heart Lungs Liver ^{Kid} all have extra work
 if there be any weakness or tend. to disease in these organs it breaks out now
 This is way you must look at disease in a pregnant woman - disease as well of a rheum. but asthenic type + you must be careful in prescribing for her + supporting + stimulating treatment instead of depressing treat. that she requires
 Because she is liable to overdo of rest.

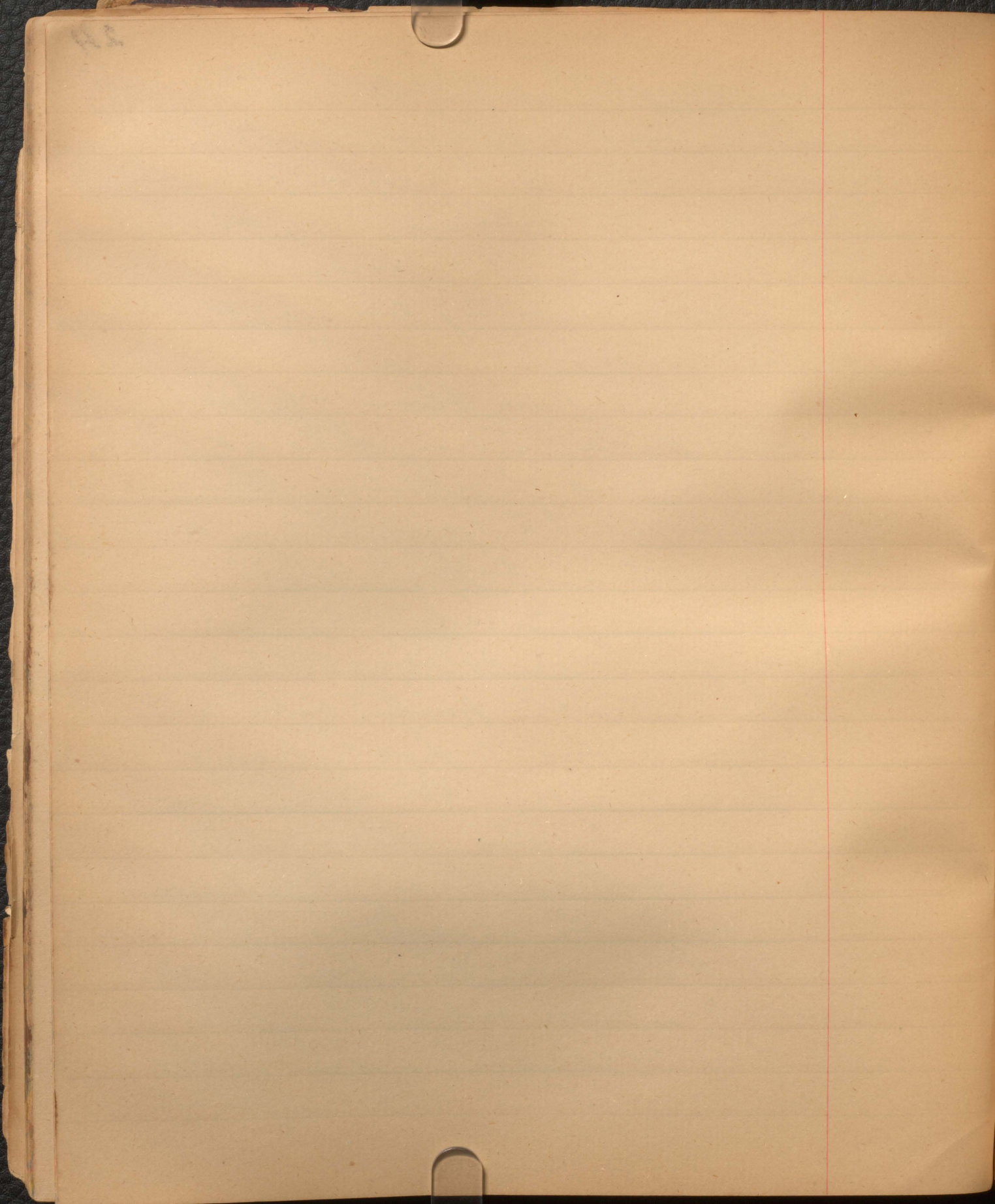
Nervous System -

Nerves are over called for - centres more highly charged + they are easily induced to respond to stimuli - overcharged conv.
 Woman is now irritable - Nervous twitching in limbs, movement, walking
 If this is not discharged it will result in convulsions



Vomiting is venous in origin.
 It is an overflow of nerv. irritab. + numb
 not to be treated by sedatives as although
 they may be distressing they are useful.
 natural methods of relieving Lewis tension
 + do good preventing convuls. + abortion.
Vascular Lesion -

Much blood but poor qual.
 red corp the fibrin dec + this means
 there is a cond of relative Anaemia
 + overcharged + excrementitious material
Left ventricle hypertrophies
palp hard + quiet - System more
vascular, veins varicose, capill enlarge
leaf - scaph. pushed up as uterus
enlarges + chest capae. dec -
leaf is quiet ∴ (1) Less Spoer
 (2) Much bl. wh. aerated
leaf is shallower + so. Dyspnoea
leucem. cloths coarsed etc you will
 find this is much good now medicine
 Much CO₂ thrown out ∴, liver enlarges
 + often swollen in urine perhaps
 due to new tension or urine. function of
 liver

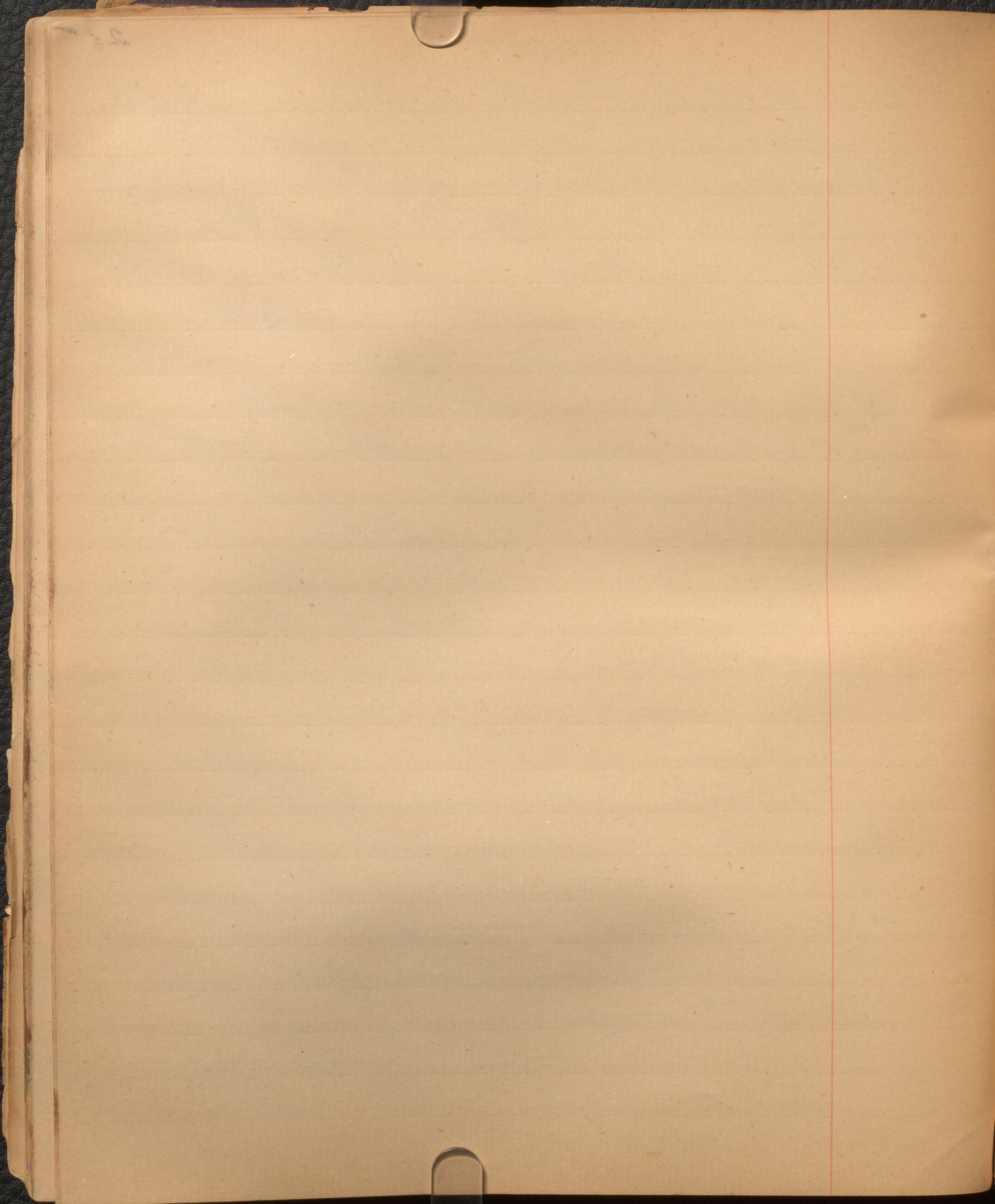


Frequent micturition - keep bowels free
 this is well work better than bladder sed.
 Kidney - Hyperaemia, congested and
 Physiological Albuminuria + Glycosuria
 they may occur so @ term but do
 not let this be a solace to your conscience
 Albuminuria in a preg. woman is
 always grave ∴ we cannot run \ result
 of convulsions - consider it pathologic
 Argentine System -

Constipation ∴ pres. of
 uterus causes impaction & peristalsis
 is impaired - Glands of stomach
 secrete less & watery fluid due
 here irritat. in the treated by a
 sedative not by a astringent
 Appetite copious, so nervous
 insens. longings - nervous sedative
 Rigorization in diff. pt of body
 too. also over may be rubbed off
 Body wet more & fat decr.

Uterus Changes -

(1) Lign Cervix glands
 enlarge & secrete viscid mucus w/



forms' plug in cervix - W.D. is not deciduous, it is not shed - Body enlarged & strengthened, walls thicker, uterine after expulsion excessive thickness is absorbed During growth it becomes 25 times as heavy -

(2) Form - Become more spheroidal & rounded - 2/3 of bulk of fundus lies behind fold tube.

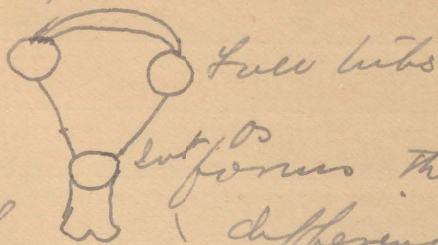
(3) Position - ~~Relative~~ left side of uterus rotate & comes to left

(4) Relations - It is fluctuating tumour depends on the cond. of distension of bladder In operations bladder should always be emptied Walls of uterus are unevenly thickened not dense - fibrous as in unimpreg. uterus there are three str. muscle layers in body + 2 layers of muscle fibres in neck - internal & external being continuous External layer runs longitudinally & when it contracts will tend to shorten uterus & draw up neck Inner layer is circular wh. tend. to increase capacity of body

22

--- --

Uterine Layer - forms loops around 1 bl. vessel
 + 2d regulate flow of bl. in 1 bl. vessels
 + prevent th



Internal layer
 work + contracted
 forms the frame
 different opening

Change in neck -

It does not change in length
 until 1 last 16 days of pregnancy altho.
 some say it change grad. from first
 It softens from below upwards but it
 is taken out from above downwards
 + Cervix is taken up till it is ab. of fundus

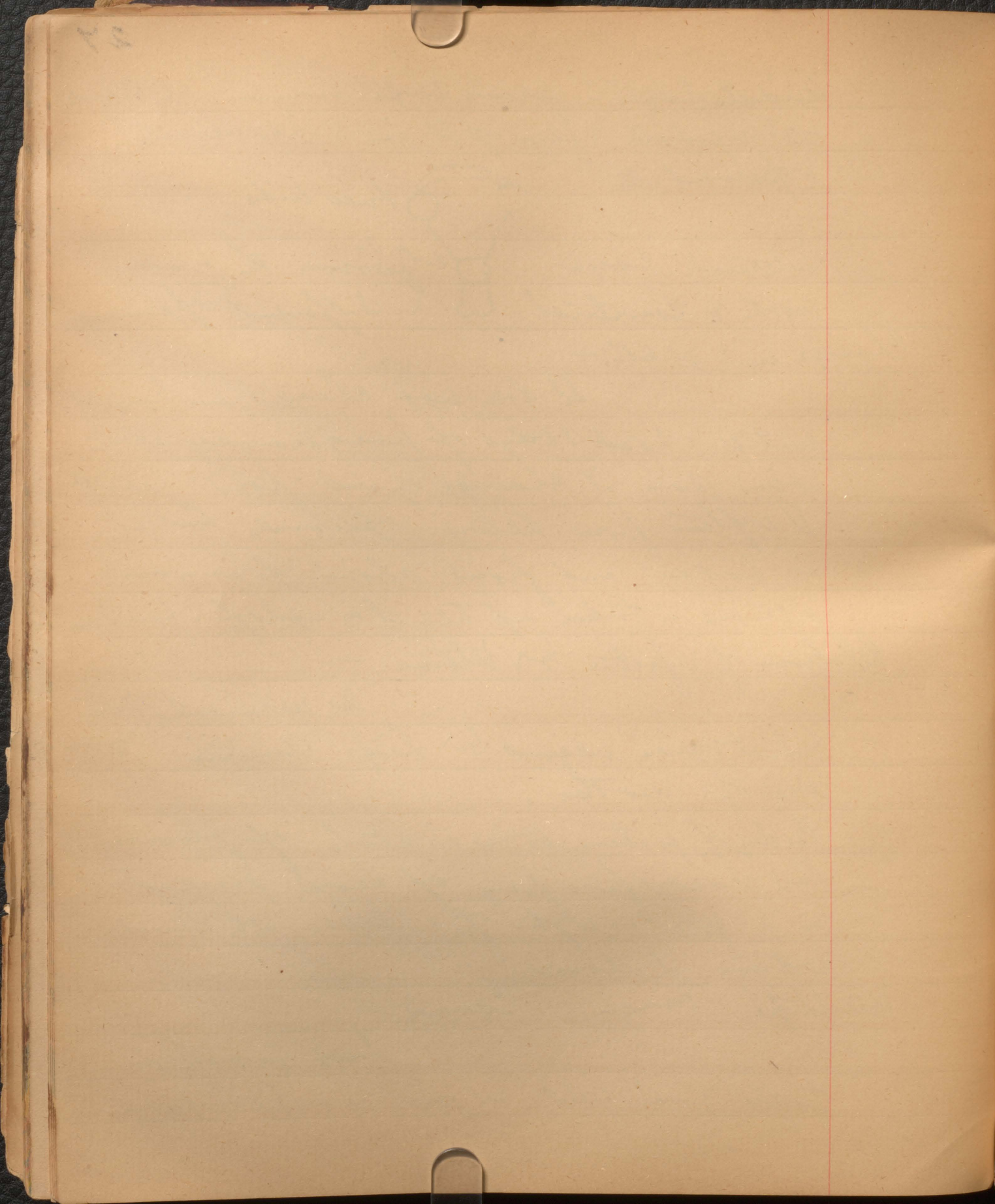
Relations of foetus to uterus -

No normal pos.
 but it varies accord to Lig. Annii
 Pos. of mother

Body of foetus is in a state of flexion
 This allows for pres. of head presentat.
 is a pos. + wgt. of 1 lives wh. head
 to drive it down.

Multiple Preg. - Cause -

Low progesterin
 foll. each yild as soon may be unproy



or you may have two ova in one Graafian follicle - or

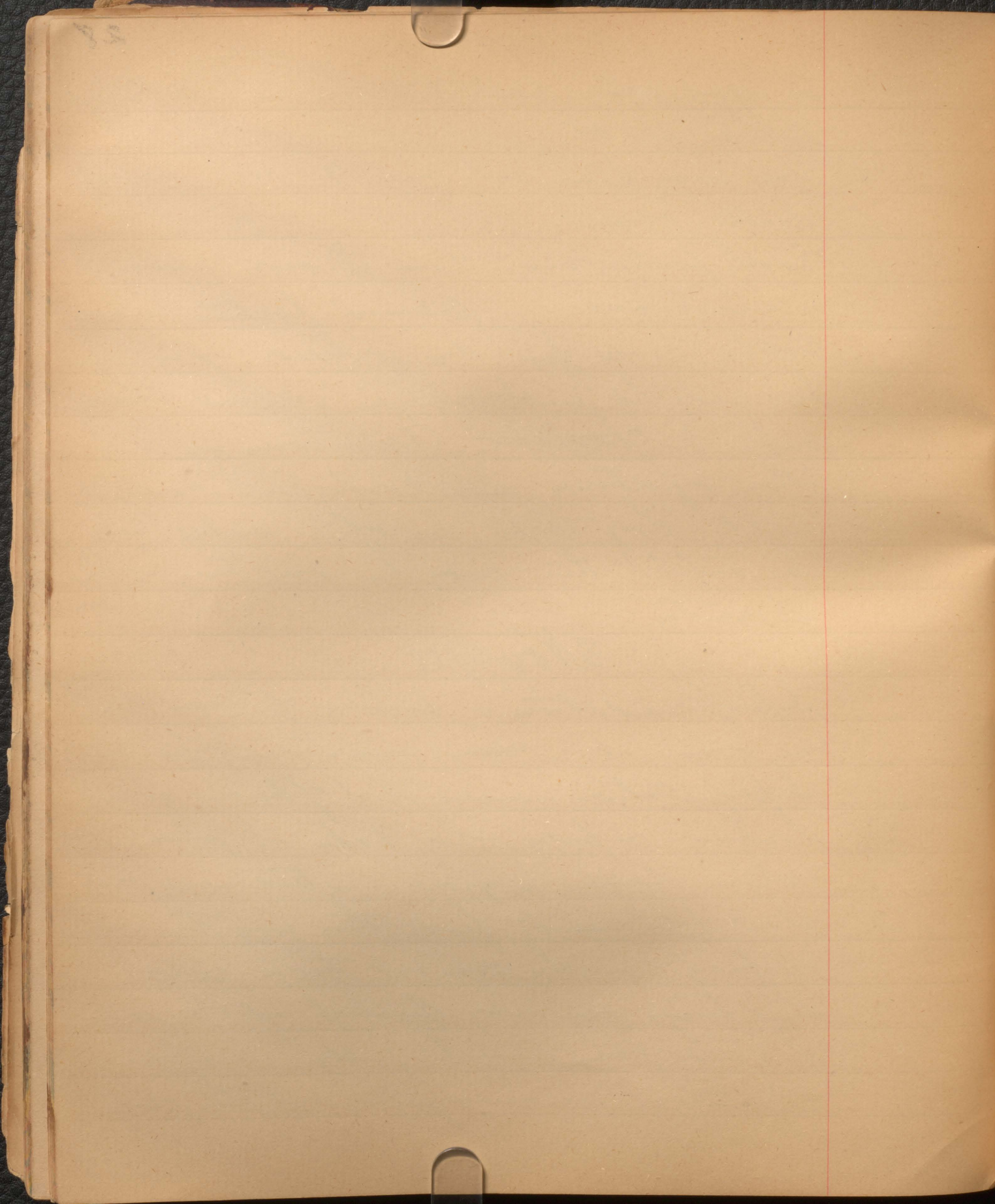
You may have only one Gr. Fol. but a double ovum

Each foetus may have its own placenta & membranes - second foetus may not be born for days or weeks after 1st. Low may be enclosed in 1 same Chorion, but 2 Chorions Amnions - then 2 foetuses and come in 1 same sack. They will be of 1 same sex. In triplets there may be one two or three placentas

Nov 1/88

Superfecundation = Impreg. of more than one ovum at 1 same menstrual period

Superfoetation means that after one ovum has been impreg. has taken its place in 1 uterus & began to grow, intercourse takes place & sperm. find their way thru 1st uterus & impreg. another ova but this is rare. When twins one may develop at 1 expense of 2 other & one may be fully developed & 1 other mummified but this does



not means that one was impreg. before
 \ other necessarily but that one took
 longer show of \ nutriment

In case of double uterus you may have
 twins one child born several weeks
 before \ other

Signs of Pregnancy

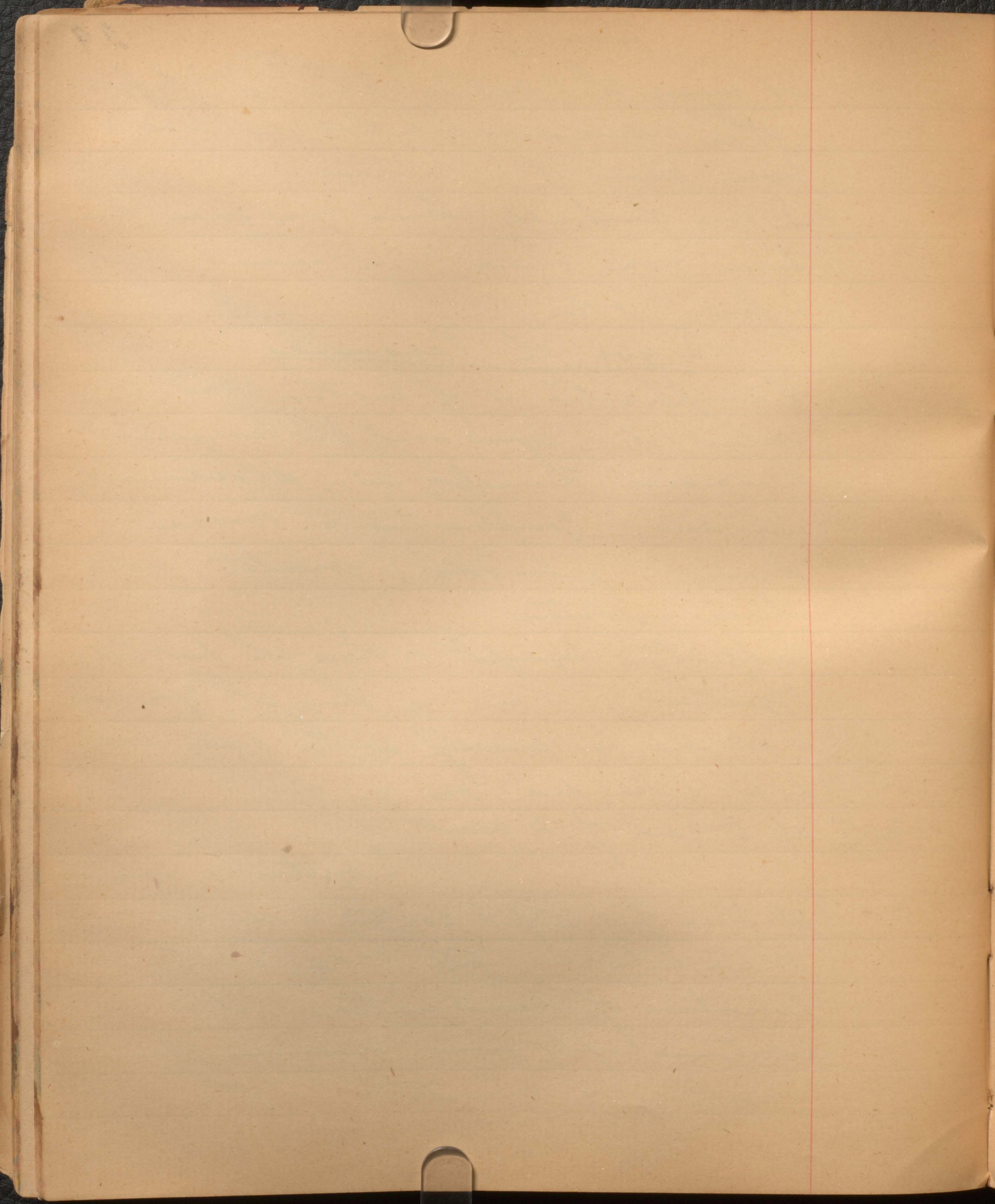
If complicated as if another wants to
 conceal it, some will be pregnant
 & imagine themselves so, blackmail,
 insane, Complicated & various
 diseases, fibroids, ascites, extra
 uterine foetation

Subjective Sympt. = those wh. pat. tells you
 Objective " = those wh. you can
 make out for yourself. is the only ones
 to be depended on

Stage I - up to end of 4 month -

(Subjective) - absent

at time of fruitful coitus - all local
 it does not occur till 8 days after
 cessation of menstruation - it may
 continue after preg. vicarious menstr.
 or impreg. to menstr.



Pelvic distress

Digestive disturbances. Morning Sickness

Swelling of breast + milk secretion

Movement of child - very deceptive as
flatus, fibr. tumors

(Objective)

Vascular changes -

Swelling of feet of 1 w. w. vulva vag.
anus, rectum, veins about orifice of
1 vag. enlarged palm varicose veins +
enlargement of veins of legs + about
crural arch very diagnostic if symmetrical

Secretion from vagina

Engorgement of breast + superf. veins

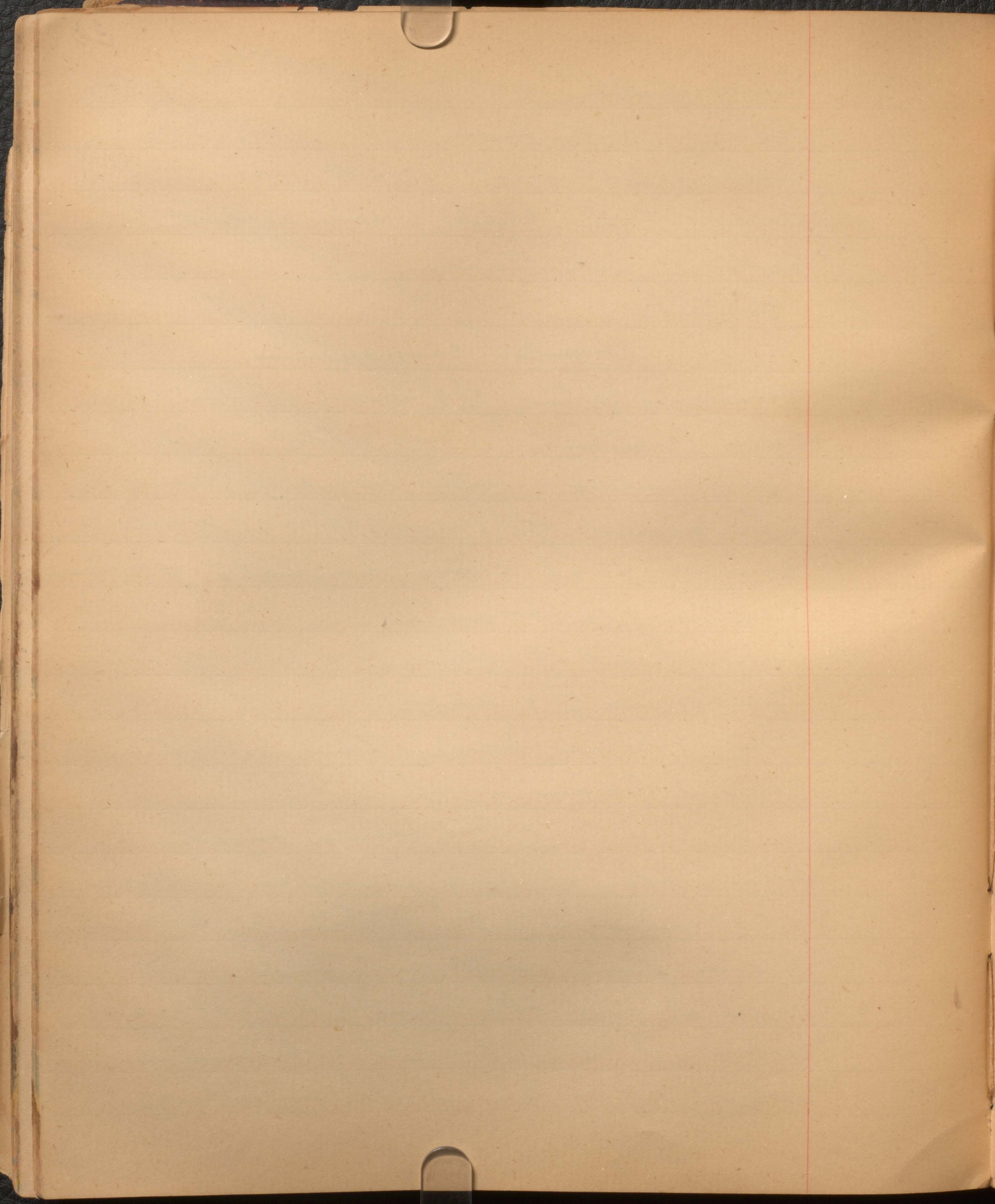
Darkening of areola

Uterus becomes larger + tends to antvert
Vaginal Exam -

Rot should examine 1

dorsal pos. Cervix found in hollow of
1 os osium - os softer - softening
begin from rim outwards.

Vaginal Roof Stretching of Ant. Vag. wall
+ above it will be felt 1 uterus ante-
verted + larger - wh. come in it



Signs of Pregnancy

30

of bladder ∴ Frequent Micturition
Rectal Exam -

Uterus may enlarge from other causes
+ Cameron thinks uterine could sense
positively up level of 3rd month
but not pass a sound beyond
depth of uterus - polypoid, fibroid
do not cause color change unless
you have a feeble ut.

Let time solve 1 question here

Stage II Auscultation -

Uterine Souffle -

It is of two fold origin -

- 1) In walls of uterus
- 2) Placental circulation

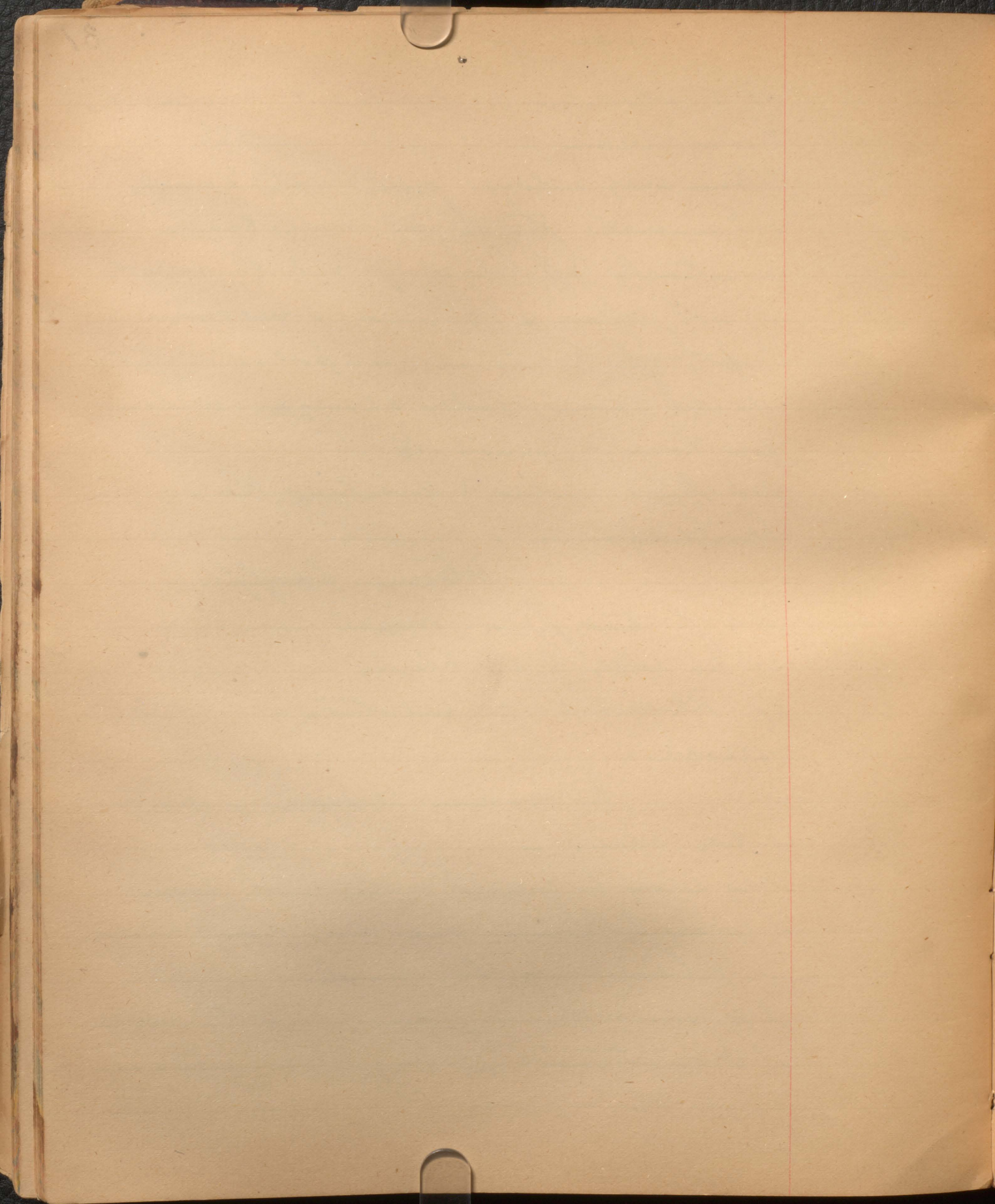
Fallopian -

In ovarian disease, Myometrium,

it does occur -

Preg may be present & this not heard or
it may be heard one day & not another
or child may be dead

It is rarely heard before 14th week
It is maternal in origin & ∴ synch-
to mother's pulse



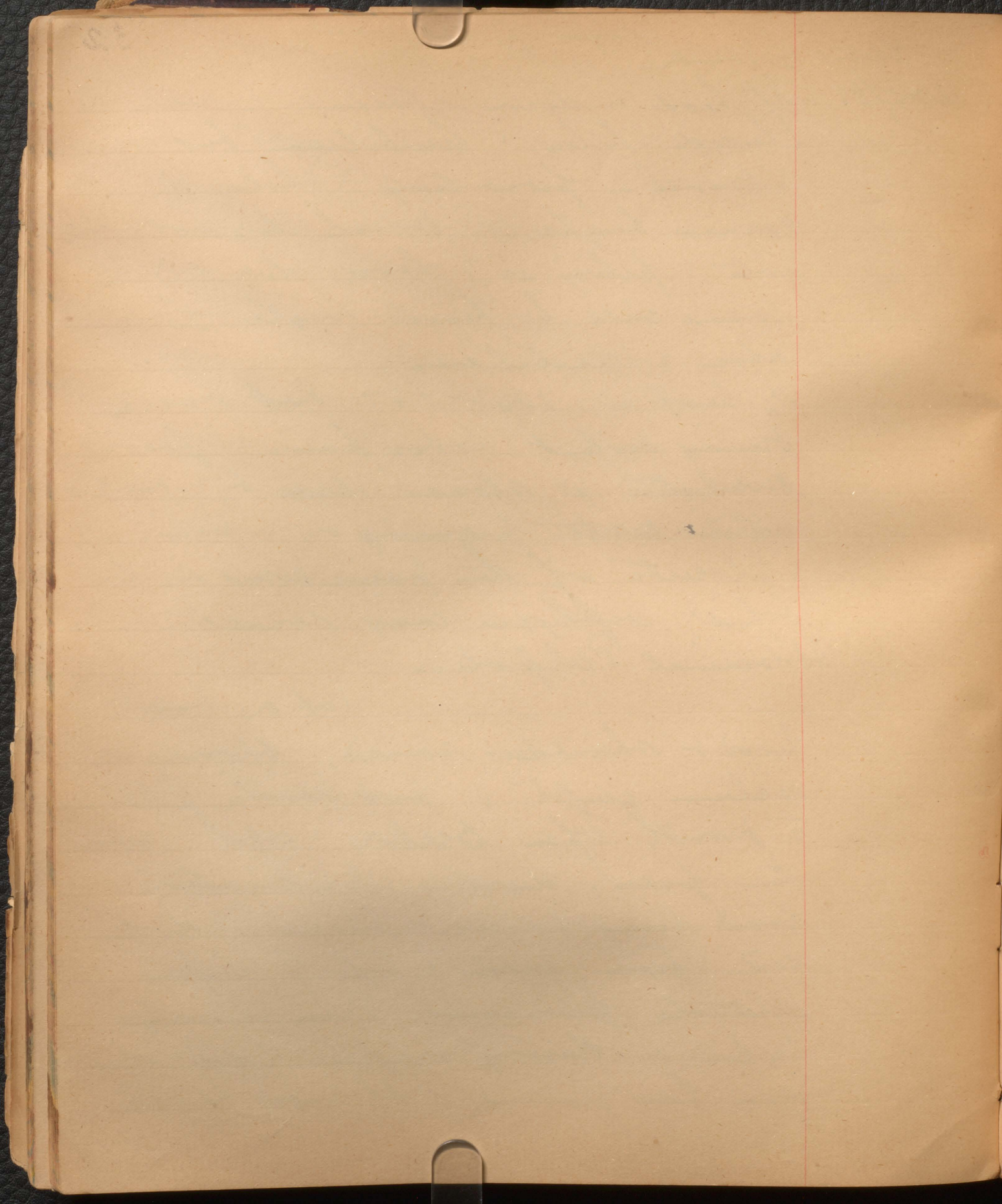
Foetal H Sounds -
 Nov 5/88

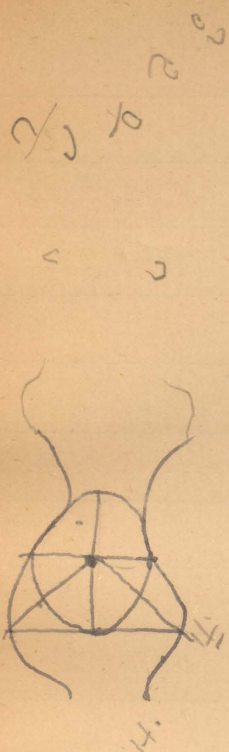
If head is down \ foetal H will be heard below \ umbilicus but when \ breech is presenting \ child is carried higher \ \ breech does not sink into \ pelvis as \ head does & \ H sounds will be heard higher up above \ umbilicus

H beat is 120 - 180 but varies during violent labor pains \ foetal circulation is slowed down by \ violent uterine contr. pressing on \ veins in \ placenta if then pains come on too rapidly asphyxia may result

Abdominal Palpation -

Pat on back head & shoulders raised, bladder & rectum empty, pat breathes freely & mouth open below \ abd. Musc the pres. during expiration hands being warm & placed side by side pres. made w tip of fingers alternate pressures Pres during Expir. & during inspir. told what you have gained. It may be used





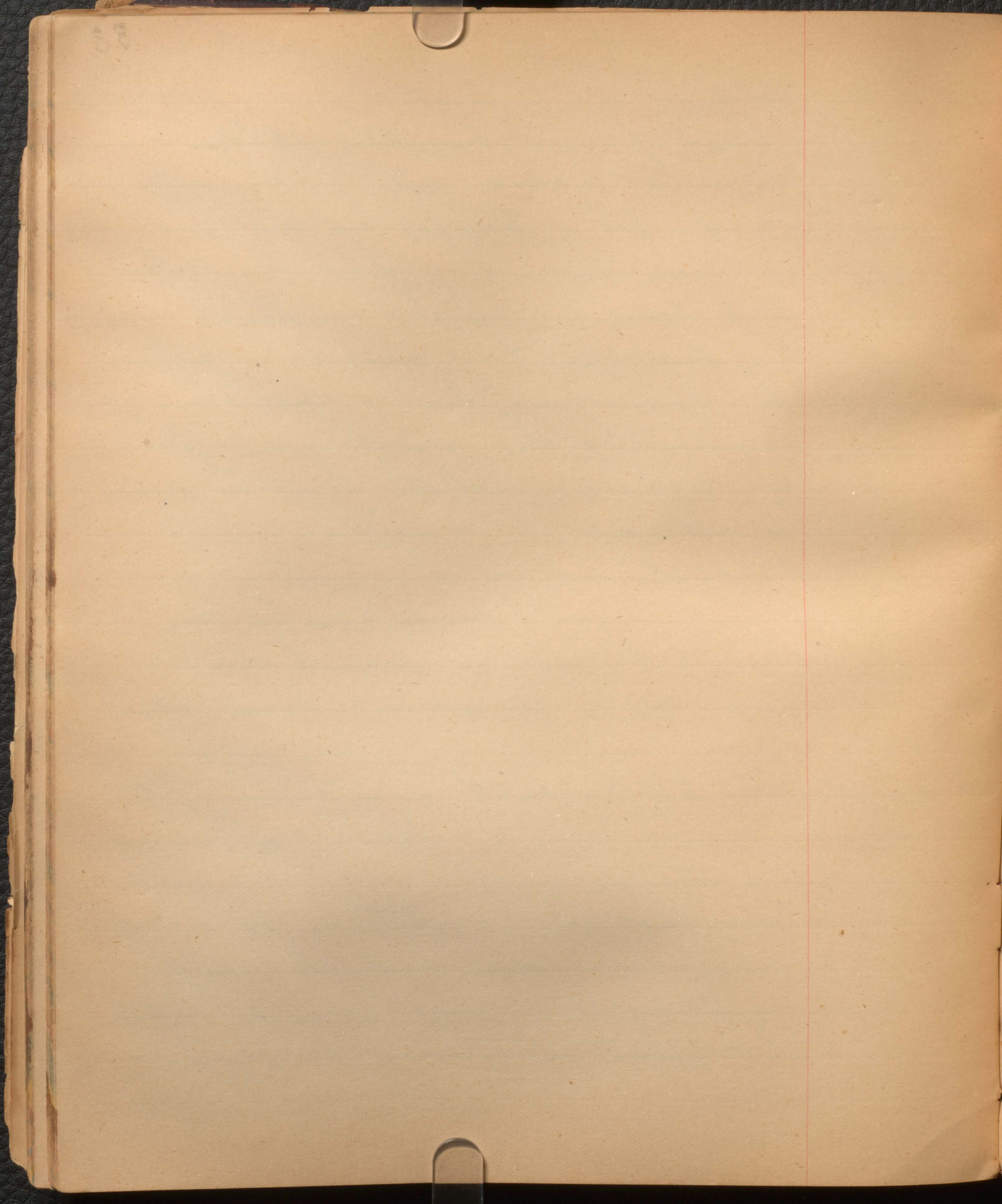
to give an anaesthetic if foot-press.
 Start from symphysis pubis + press
 down to the lower side of your hand
 + grad. going higher up an incl. at
 a time till you feel your hand
 sink down to much resistance when
 you know you have come to the fundus
 then draw your line + mark out your
 segments + then place your foot at
 the + so tell whether head is presenting
 to breast.

Ballotment -

Head can be dist.
 from breast ∴ breast does not
 move on a pivot as head does

Stage III - From 6 - 9 months -

Umbilicus lies
 protruded -
 Colon changes - stretches etc on abd.
 from symphysis pubis to uniform
 cartilage - ring around umbil.
 White Cicatrices on abd. + breast -



Characteristic Preg -

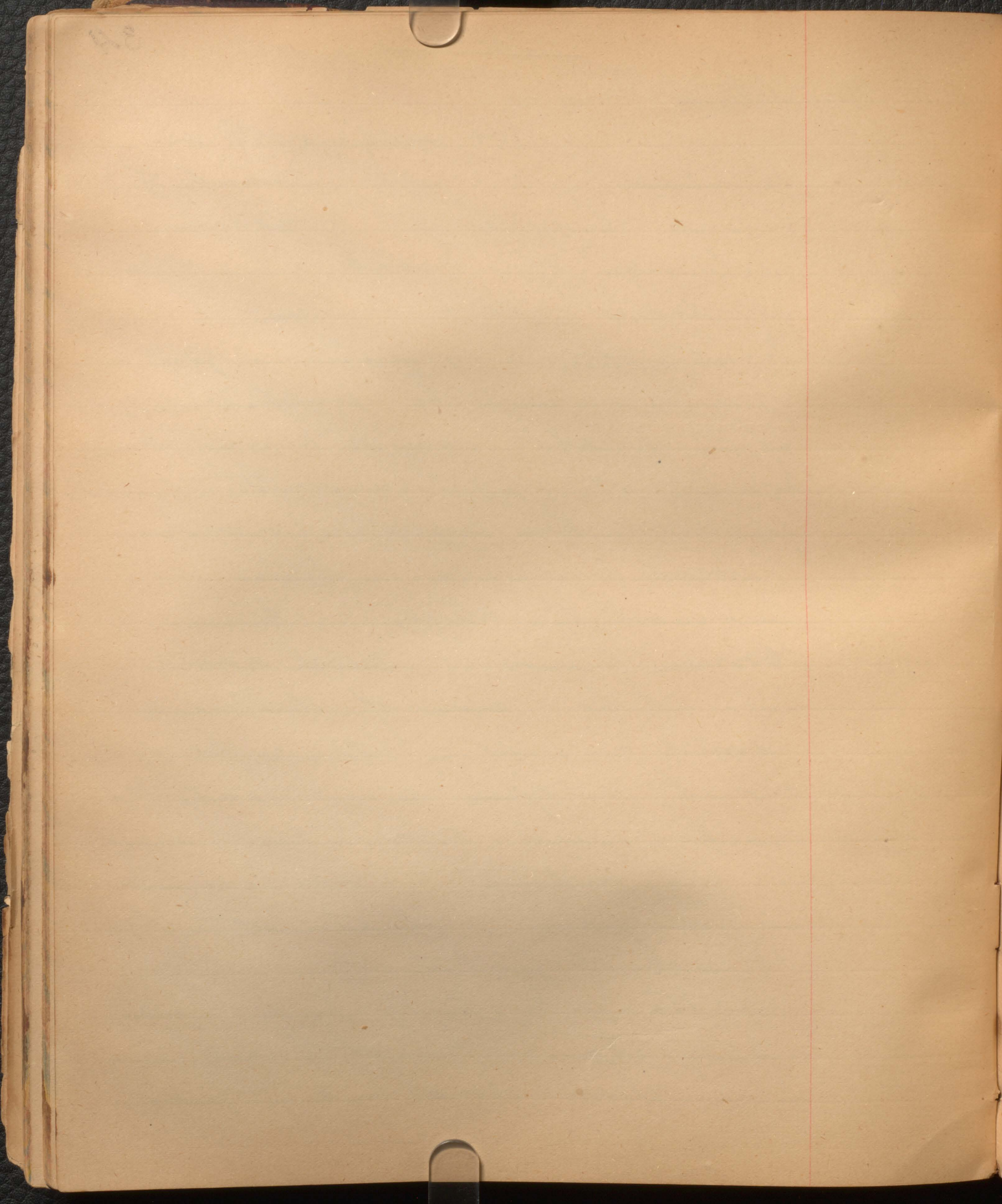
Pot imagine it as -
flattened in 1 hour, cessat of
menses. enlargement of abdomen
distension of breast, flow of milk
as due to neuro. system

Constipation may mislead you in
your diagnosis by palpitation
If in doubt. vag. & rectal ~~ex~~
examination - Anesthetic with
few water then signs melt away

Fibroid tumor - time
Subinvolved uterus - time

ovarian tumor, much same
size shape, area of dullness,
sound resembling uterine souffle
but it differs in - rate of
development ovar. tumor grows
by fit rotund, shape is not
so uniform, fluctuation here
absent of foetal H

Ascites, Crabs of Liver Spleen
Kidney etc - Growth of these is
from above down but in preg
from below up -



Ascites -

New dulness is in
flank & side & clear note in
center ∴ intestines float on
ascitic fluid -

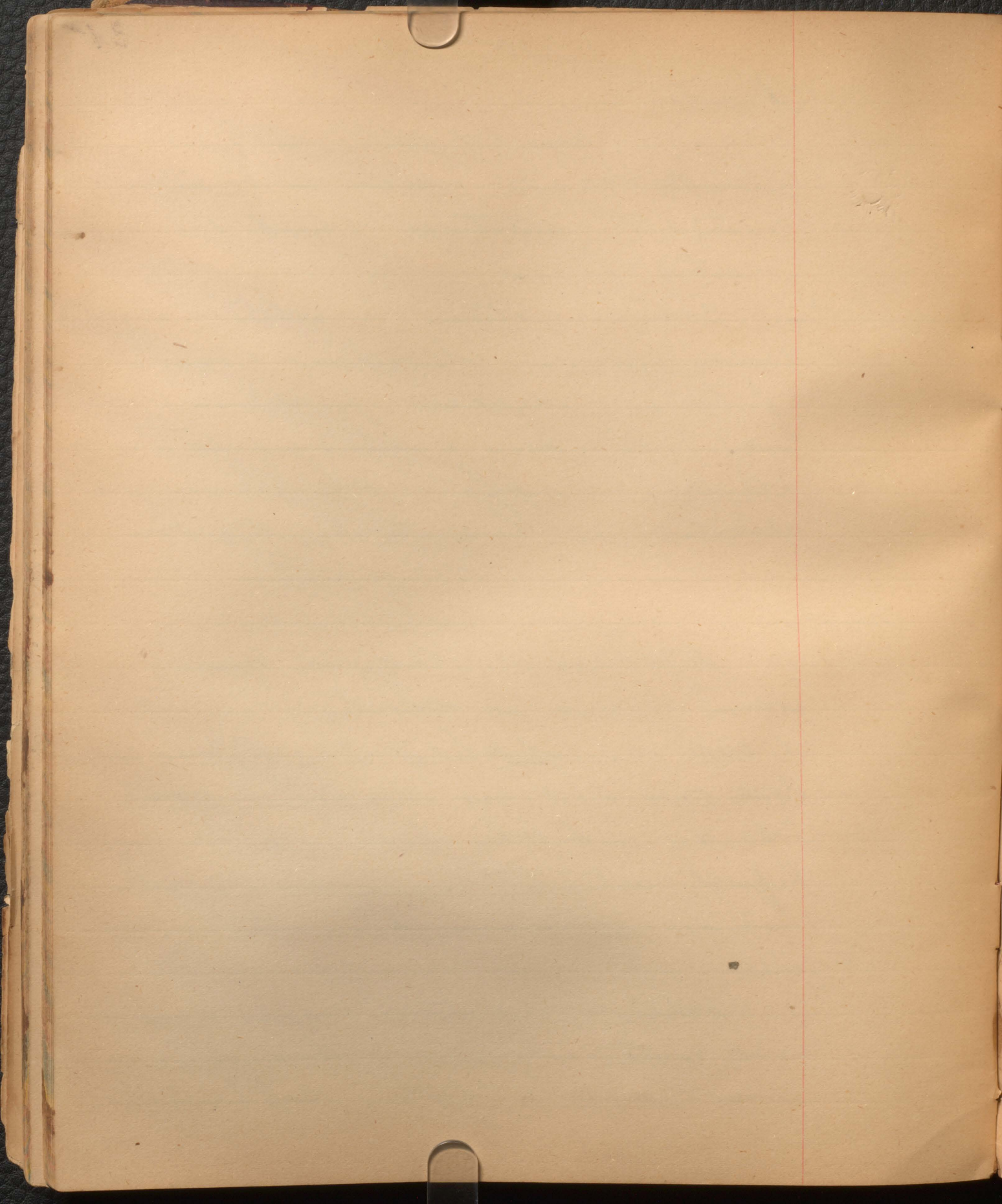
Complications - Complications is when 1 diffie
comes in - She may have a
fibroid, become pregnant
now both grow & enlarge tog -
thence 1 diffie. she may be
ascitic or have a cystic ovary

Duration -

270-280 - Age - Young
women period is shorter
A well developed child 2 lbs dgs at least
Coax over 288 and doubtful over
290 and not to be believed
Reprod. activity begins earlier & last
longer in warm climates

Hypertension

1. Watch excretory organs & see they
work well - flush & drainage
as mother excretes for two deep bones & skin
open



- 2 Regular exercise in open air
- 3 Everything which tends to increase nervous tension should be avoided. Good drainage, tight lacing avoided. Retention of urine & of faeces as well as violent exercise especially in the first three months as uterus is in the pelvis.

Examine urine & look thru spec.

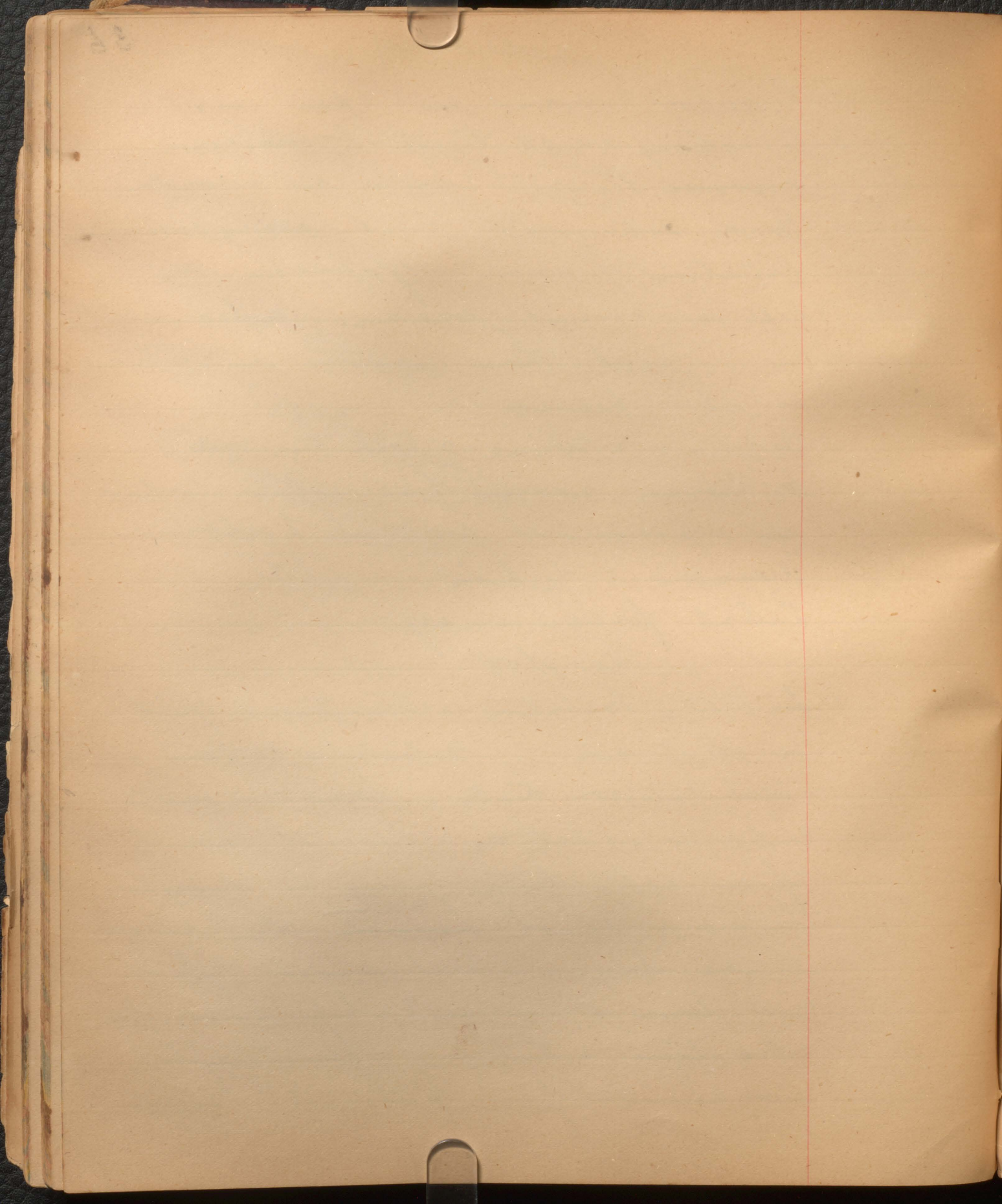
Dr Barnes advises prostatic lobes in pregnant woman to albumen.

Measure the pelvis

Labial pregnancy

Nov 8/88

Extra Uterine Gestation & treatment of it by electricity - Galvanic current is best Cameron thinks - Some remove child so. as late as 10th month. If an extrauterine preg. be diagnosed before 10th ^{week} month then elect. seems to give best results if after cut down & remove whole sack from ligatures & tube - Operation is only chance for patient's life.



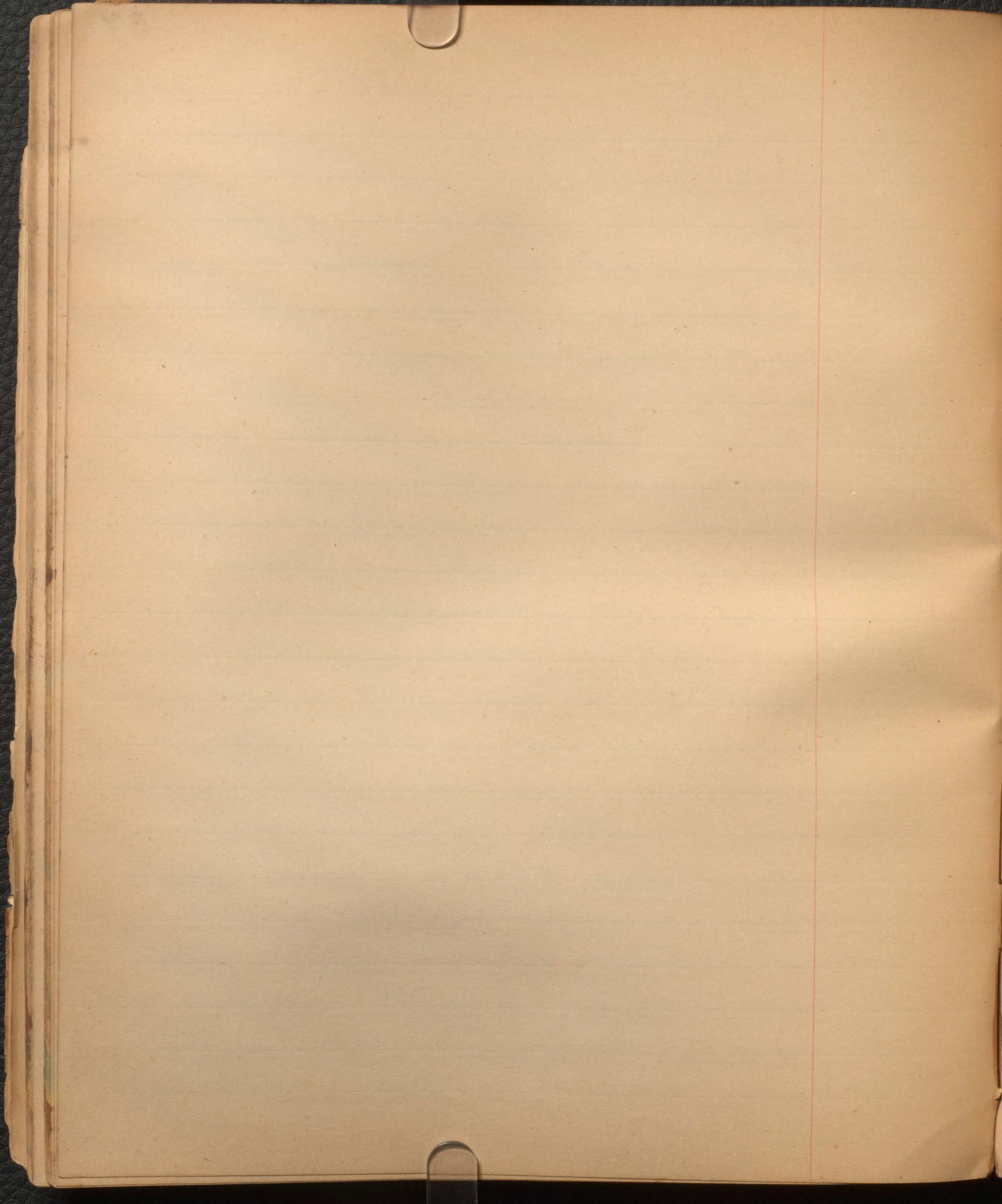
You may have a complication of
 Uterine Extruterine or Gestation
 or Ovarian Cyst. then removal of cyst
 Fibroid is hard to diag. from preg.
 Displacements of Uterus -
 Retroversion is frequently seen
 in 1 preg. uterus
 Sympt-

pain
 constip

urine

Great pain caused by press.
 on several nerves in 1 hollow of
 1 coccyx, obstructive constip due
 to press. on 1 rectum - bladder
 pushed up & bladder 1 urethra
 on 1 stretch & accumulation of urine
 perhaps dribbling of urine but
 you must not mistake this for
 dribbling from an irritable bladder
 for a catheter is paid out

Symptoms come on gradually as
 preg advances but you have
 Acute Retroversion - or from a sudden
 blow or shock drive it back into
 constip of 1 coccyx or prominence
 of " prevent it return



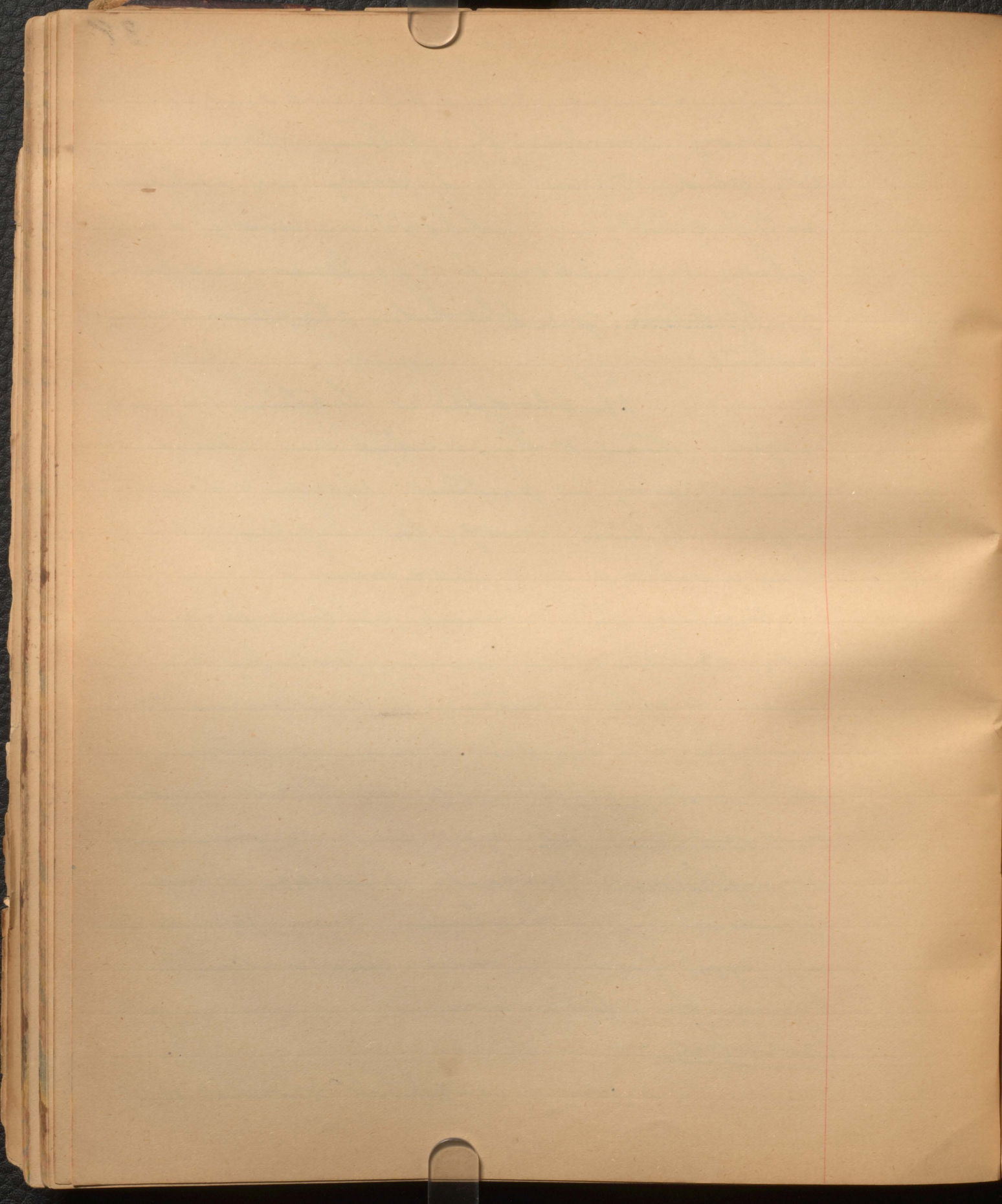
x tend 1 Sympt comes on suddenly
 It may resolve by 1 uterus rise up
 but abd. count is it may be replaced
 artificially - abortion may take
 place on account of traumatic pro
 or rupture of 1 bladder etc may occur
 treatment -

If bladder or rectum be full
 empty them & then under an anaesth
 uterus may be pulled down & then by
 taxis uterus may be lifted over
 promontory of 1 sacrum -

Posturing in 1 knee elbow pos.
 may succeed - make pt lie on 1
 foot & after uterus is replaced never
 let 1 foot lie on back or strain
 at stool or it will go back as bad
 as ever - If you fail by taxis &
 sympt an urgent Boree bag
 placed in 1 rectum may work but
 if you fail in all this - then
 bring on abortion

Prolapse -

Here a support should be



firm but uterine till it enlarges & rises
up out of pelvis

Anteflexion -

Diseases of Gestation

Every organ & tissue is subjected to
pressure & strain so that you have
diseases occurring espce. if there be
any predisposition present, anything
which runs down & put any strain on
a constitution will tend to bring out any
predisposition so that diseases of Preg
and few cases of Physiological &
Pathological resulting from extra strain

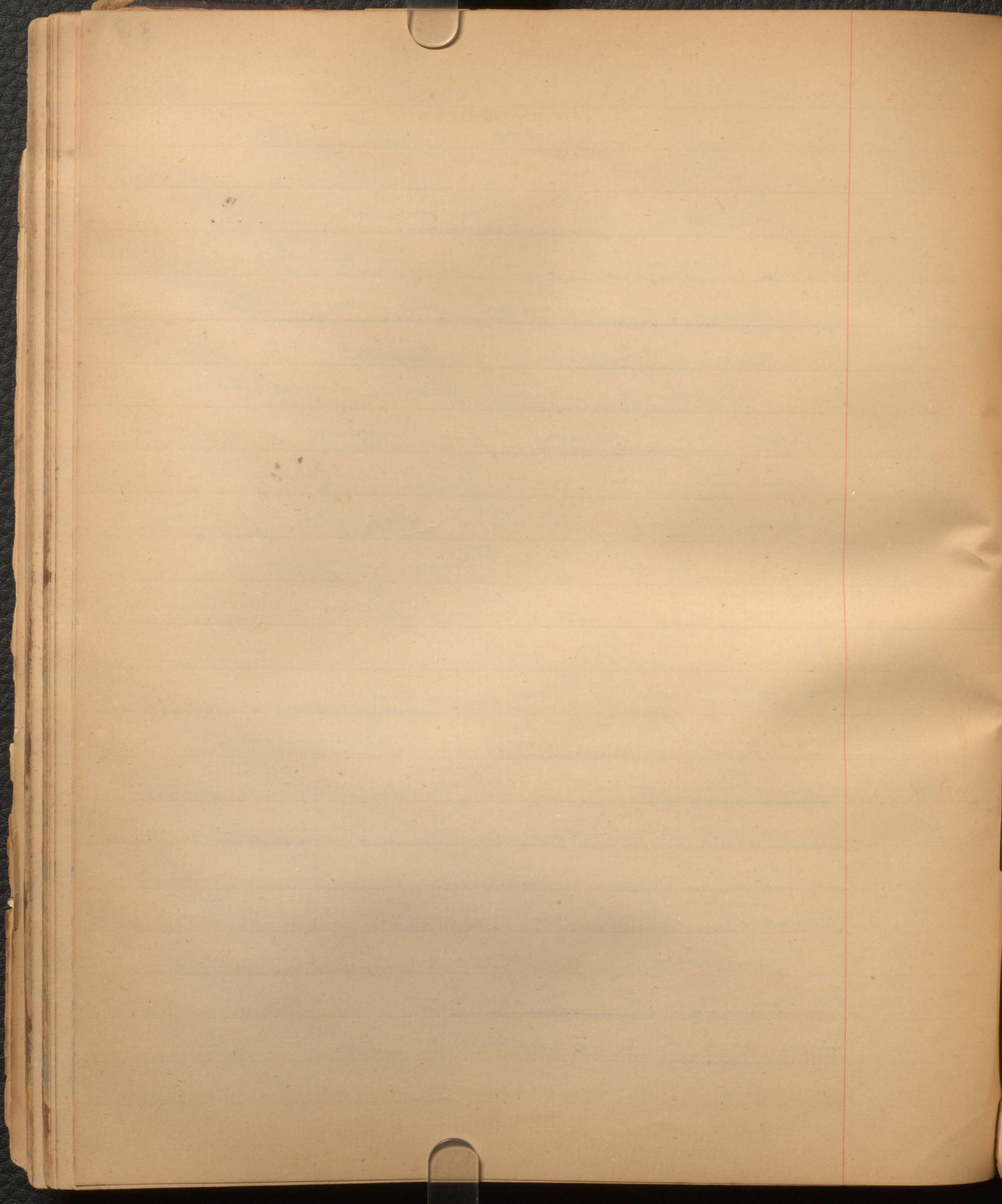
Nov 12/88

Disturbing of Pregnancy -

Cause - Emotion, pressure

X stretching of uterine wall, inter-
current disease or whooping cough
Alcoholism, albuminuria, if it
persists look into history for alcohol
& examine urine for albumen

Courses - 2-3 mo. - when uterus
rises out of pelvis it for ceases
a slight stimulus or a step for -



will bring on another attack of row.
If she be well up to 4-5 mths & then
begins to vomit it is proved few due
to structural disease such as an
overloaded kidney, alcoholism
dead foetus & Leptocemia, rodde
overdistension of uterus or in turn

Prognosis -

Low food

Treatment -

Here we have a case of
Anaemia so our treat. must be
supporting

If delerium occurs - keeps up for a
few days & a pulse of 120-130 for weeks
must surely die - If there be any
mechanical cause. present treat it.

If sporadic contr. of Cervix is
1 Course then artif. dilat. of " or
or hypertrophy of Cervix -

Let pat. have some solid dry food
1 hr before rising & in reclining
position - get in lot of food -

1911
XX
Creame

014

Drugs -

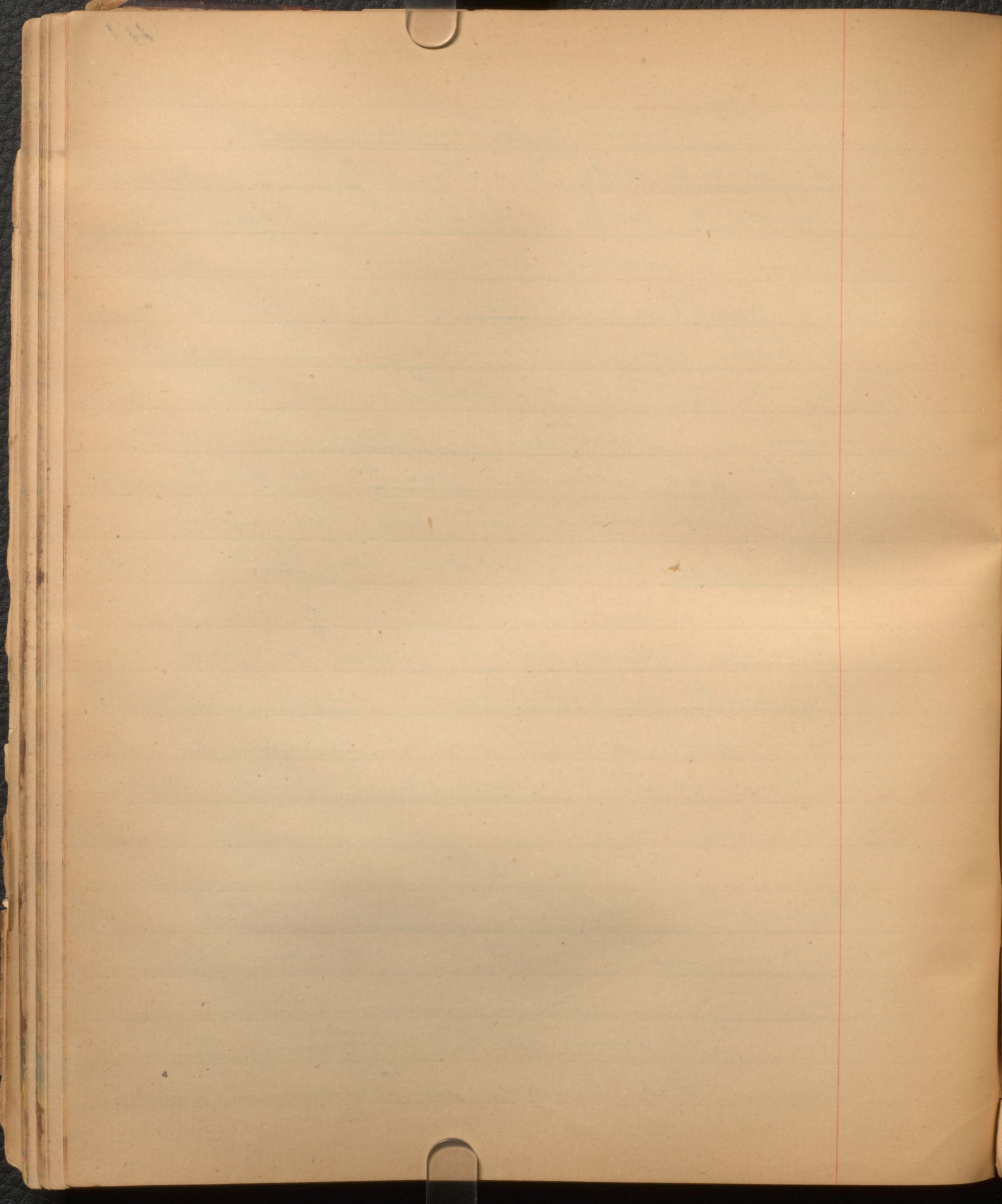
Repsin peptonised food -
Stychnia $\text{m} \frac{1}{2}$ & water before meals
Spears $\text{m} \frac{1}{2}$ Eucemeta. Chloral
given & warm milk - Smilts
epigasts - Bellad rubbed in then
Blister over 1 Lumbos. Cocaine
 $\text{gr} \text{iii}$ in 3v of water - 3ii every half
hour - Nutrient - Eucemeta
Ruf pot whed - reat - as excitement
of displacement - then persons
Epilepsy may occur here teas & supper
ting treatment -

Chorea - more apt to recur, & tends to
terminate in abortion or death of mother
then 1 prob. cannot eat or sleep, great
tissue waste & Maniacal Coor. may
ensue

Nov 13/88

Chorea - rectal alimentatio
spraying 1 back & admin. of As.
Hysteria

It may be the uttering of
storm that brings on Mania



Eclampsia -

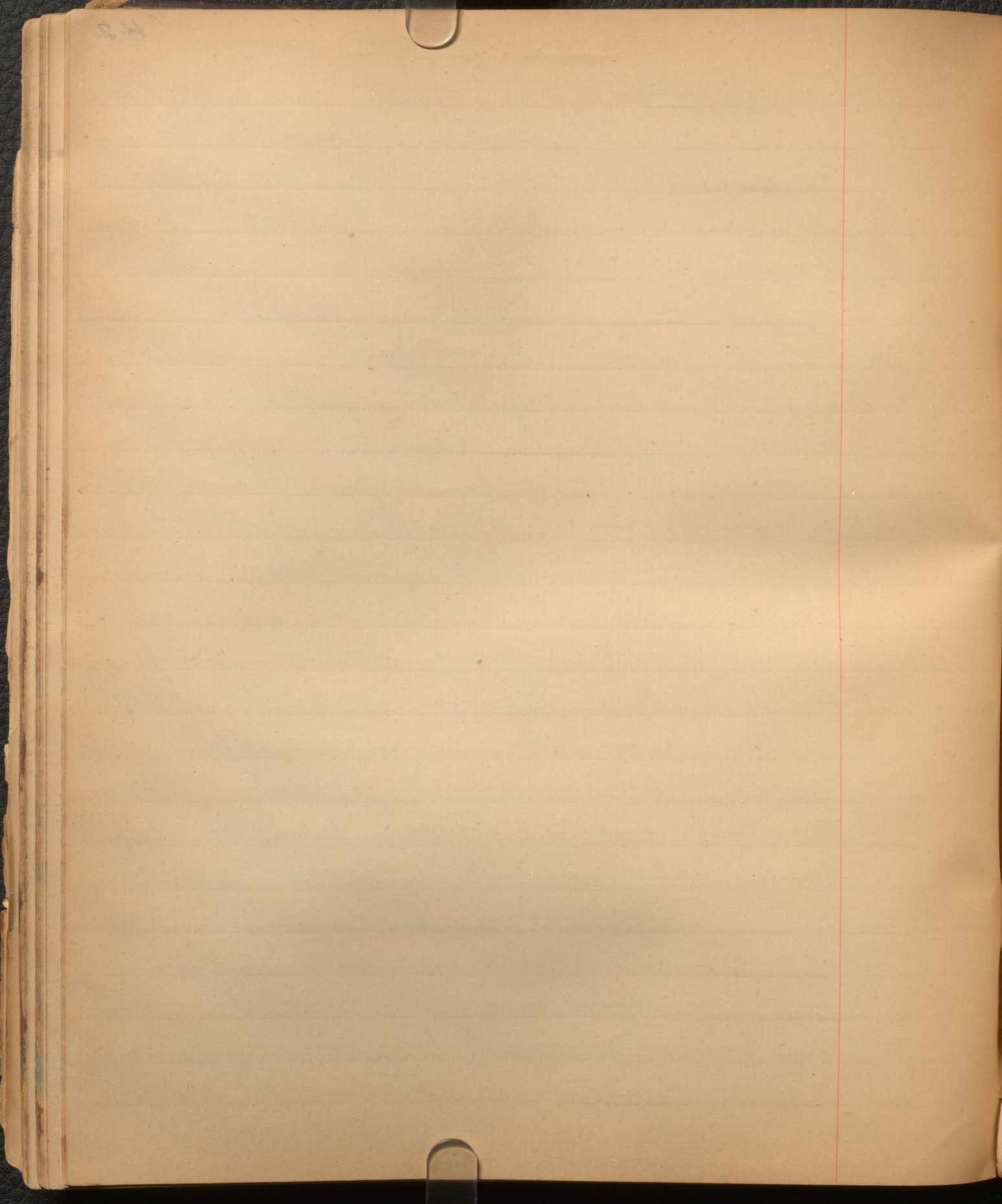
They may proceed. occurs
 @ is follow labor. Albumen is
 few found in urine during this
Symptoms (1) Fit

(2) ComaI Fit -(3) Remission

Come on suddenly, post part, must
 drawn, unrel. trictal beg. at face
 & going down. eyes roll, feet
 clenched over, thumb opisthotonus
 neck swells, froth at mouth
 tongue bitten, appear of strangul.
 It is 1 tonic convuls 20-30 sec
 is followed by 1 Clonic conv. short sharp
 puls feeb. CO_2 accumulate
 & grad. post. comes around. perspi
 breaking out - Lonic convuls. are
 really 1. worse but 1 clonic look as
 if they were worse

II Coma -

Insensibility wh. may last some
 time or out a few minute up. blue
 or it may go on to death. post never



Eclampsia

42

becoming conscious - When foot comes
around she fr. complains of
head ache

161 Remission -

Pulse + Resp. normal
dull head ache, great longnor, until
a new attack is being ushered in she
begins to get restless, yawn, sternal
stretch, eyes, roll, foes twitch,
Each success. convuls. incr. (unit.
so that slightest or stimuli cause
a Convulsion

Treatment -

Allow this inevitability
so give chloroform if you suspect
a fit coming on until you can have
time to give drugs - Interval
bet. convuls. very great in length

Signs of warning -

Albumen in urine
oedema, urea decreased
head ache dull + continuous resp. if
thobbing or heartbeats ringing in ears
diff. fortication, loss of sight

84

Eclampsia

43

floater of light before 1 eye
They occur about 1 5-6, 7-8, mo.

Phlegmasia. Eyes Effectives

scapulae. Mania. Paralysis

Impairment of 1 Kidneys also may
occur after 1 Convulsion

Pathology. -

I

Pressure theory

There are cert. cases in wh. there is no alt.
in 1 urine but convuls. is of a purely
nervous char -

II

(1) Blood is Hydraemic & cause
impairment of 1 nerve centres

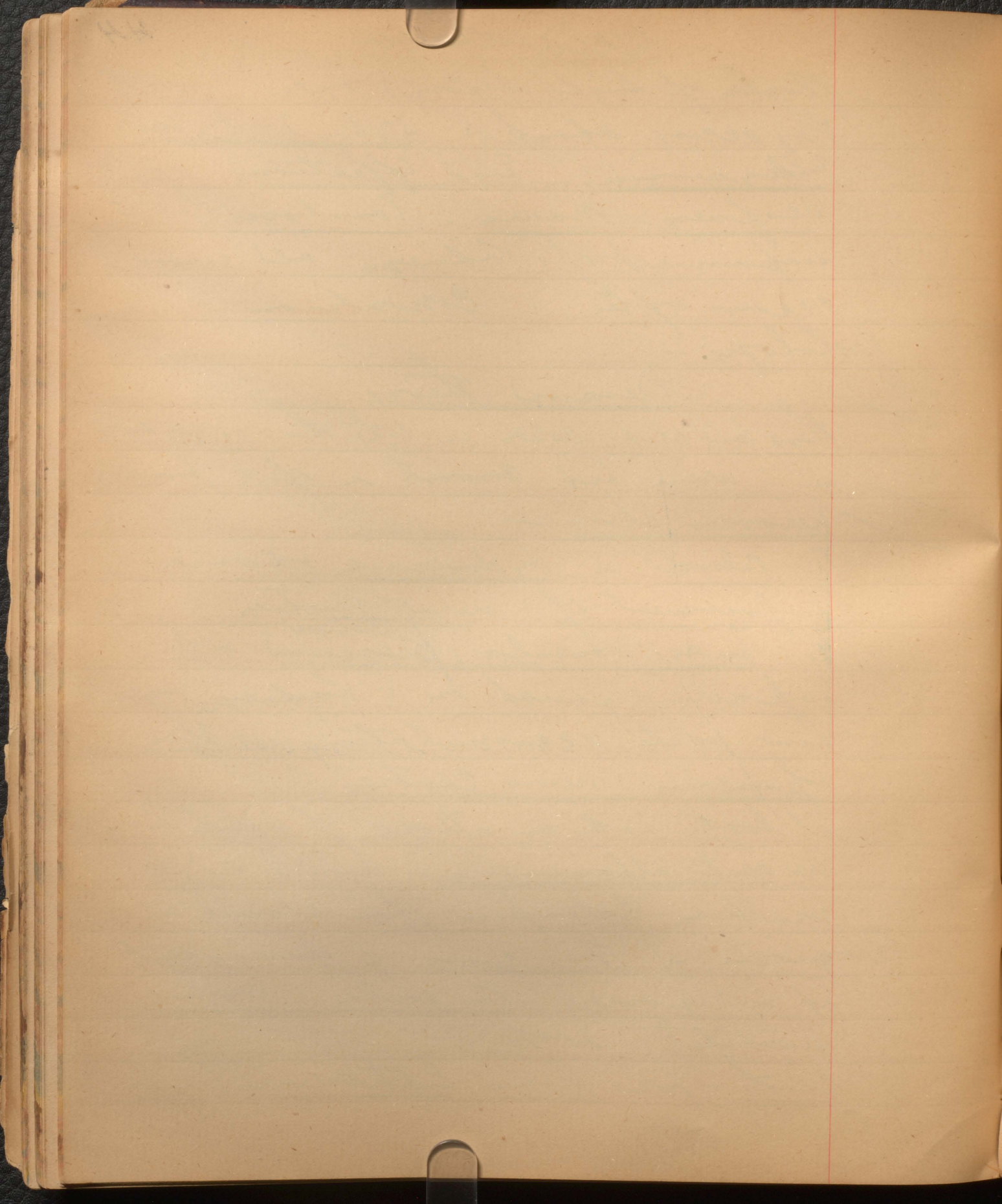
(2) Ins. vascular pressure wh.
impair 1 funct. of 1 Kidney & you
have waste accumulating (ie) Urea
poisons 1 nerve centres

It looks like an attack of acute Bright's
An acute albuminuria is now likely to
result in Eclampsia than chronic alt.

Prognosis - Less grave if during gest.
it is 1 gross - The earlier 1 worse

Unstable gest. -

Death - from Coma Septicaemia, Exhaustion



Eclampsia

HH

Treatment

Common sense is seized here
find out (cause) - nerve crisis of
nerve centre + peripheral irritability
& nerve + vascular tension

Soothe \ nerve centre + endings

Then remember \ Kind of pat. you have

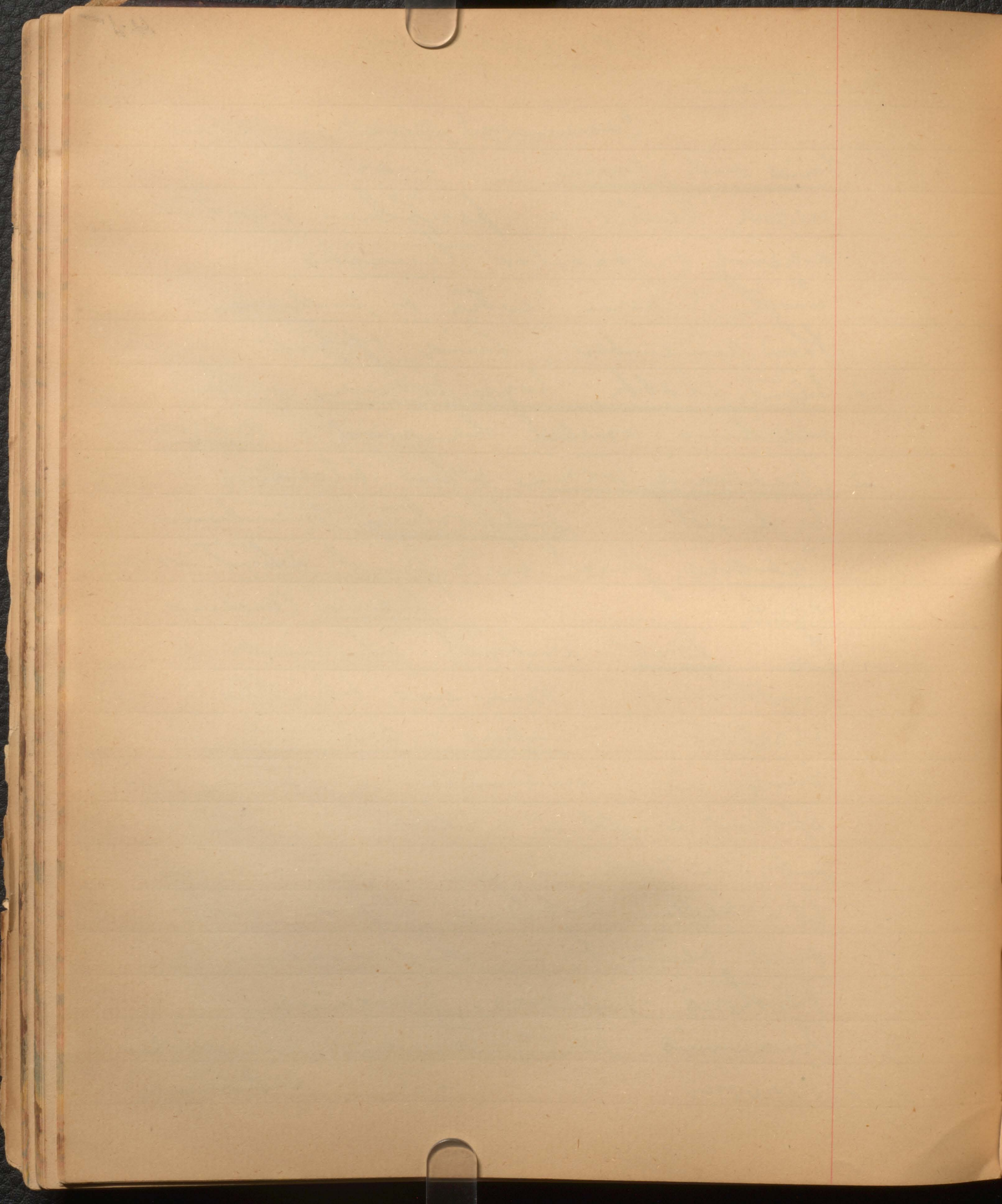
1. Stout, plabby, lozy women - Less
bleeding would be good - depressing
2. Anaemic women when bleeding would
be death, supporting treatment

Exercise free in \ first stout women
Rest " \ Second Anaemic "

Fe \ Rest, mental physical +
emotionally, never use blisters \ they
irritate. Saline + digitalis and

drugs in \ albumenuria stoppage
if head sympt in \ pallidum - then bleed
but then ease and few + for between
It is better to bleed a pob. into her
own veins by a depressant

- I Rethoric exercise, purgative
- II Anaemic rest, tonics Stimulant
- III Nervous " " Sedative



Eclampsia

45

Improve 1 qual. of 1 bl. by a course of Fe
and water 1 urine for albumen if
you find it - then rest mental physical
emotional - a saline purge, put
put to bed. Diet = milk, some bread
but Cameron does not recommend it
relaxation of 1 Cervix

Premature labor - no blisters

Never attempt to make an examination
at first giving Chloroform

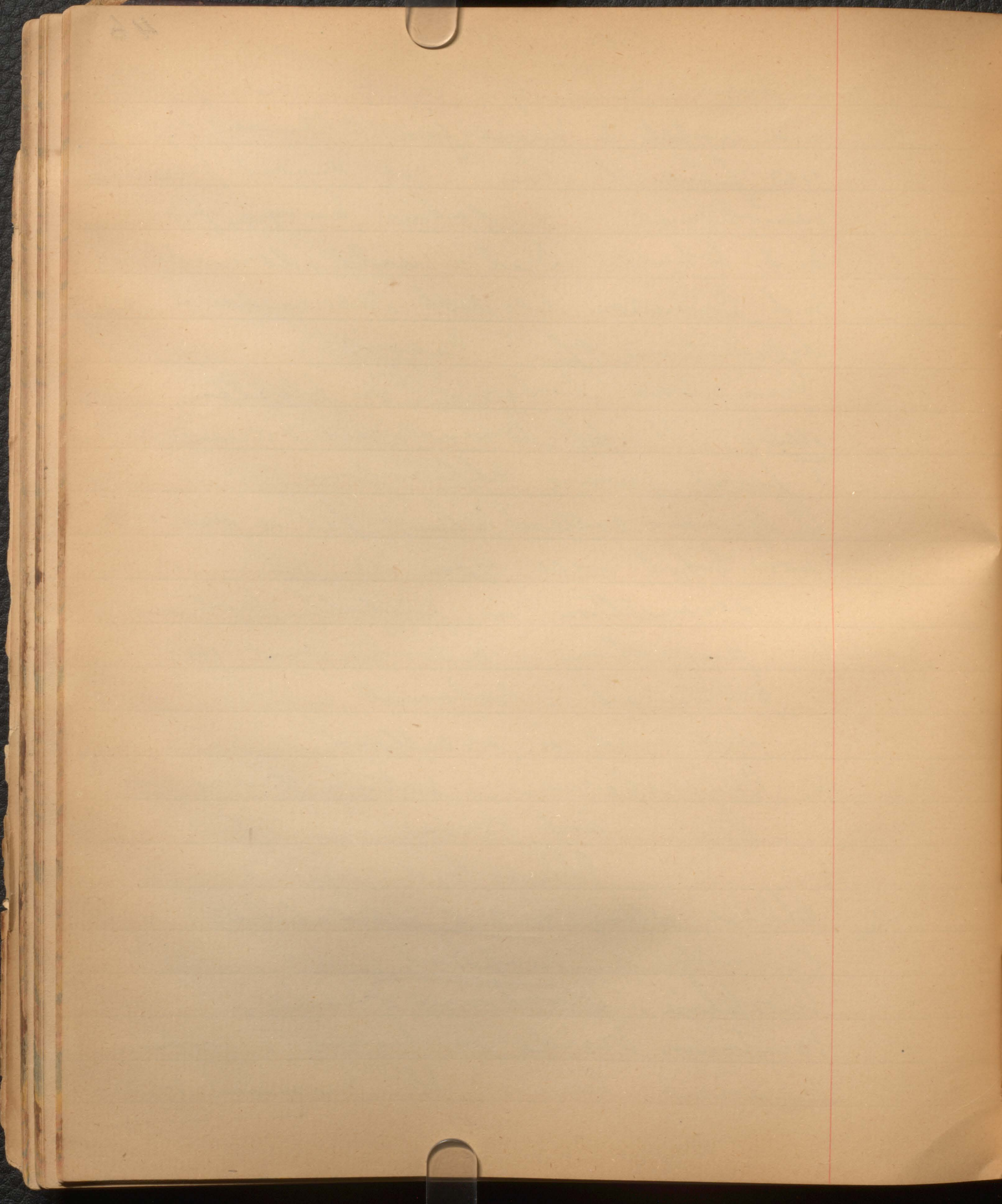
If you are called when 1 fit is on -
now what will you do

- (1) venesection in suitable patients
- (2) purgation - a water one or
Castor oil, Colomel -
- (3) Hot pack is excellent
- (4) Chloroform, nitrite of amyl

R₁ - Pot Perm gr $\overline{\text{XX}}$
Chloral Hyd. gr $\overline{\text{X}}$

X

Chloral allays central irritability
Bromide " peripheral "
Uterophia, Veratrum viride,
Veratrum viride by having a cordial
depressant lowers 1 bl. pressure & bleed



a woman into her own belly
 Always have ether & brandy ready
 to give hypod

Gr. Veratr. Viride ℥ss

Chloral Hydrate gr \bar{x}

Give hypod and #5 min

after if necessary you can give
 another but few. two doses
 answers purpose

If there be paralysis, oedema
 quick pulse, rising temp
 Albuminuria, fever occurring, cover
 the indurated lobes under chloroform
 & greatest gentleness

Rest, sedatives, milk, & saline
 after labor. Do not encourage
 lactation but forbid it as she
 needs all her strength
 Water & urine for albumen

Paralysis - pres. on 1 sacral nerve

Mental Disorders -

Insane man apt to occur after labor
 than before - ^{Causes} blindness esp. in
 women faint - Anaemia

Lesson of Body

It is most common in middle
travels later in life than in P. of
1 year.

Forearm of Arm

Called "reentrant fibrous"
and lined

- (1) Round cell large soft
- (2) spindle " small

Differentiation

By 1 mesoderm
It is shown on growth the same
order than the present type.

Causes

They occurring frequently
Prolonged lactation especially
nursing boys -

It predisposes -

First menstruation after labor
Excitement or worry, illegitimate
birth - primiparæ often think
they are going to die -

Hallucinations are common

Suicidal

Depression Kleptomania

logia, fancy then a good
pung. will do good

Remove them under these circumstances
from their friends as they seem to
delight & torture their friends by their
morbid craving for sympathy
vascular & renal pedantia
often labor to pain less
sweat during labor -

then it is

transient delirium, intense, she is
in possession of frenzy in a saving
manner for them. she may kill! cheer

Causes of Disease

Importation of Disease
of deer, early & dangerous
Infectious to
Leucis -
Feltine treatment

Other form by mepha

Char N. - correct - later by

Charmer - Antisepic Mergans

Crustacean treatment

Char Turpentine

Kr - Lamp. Char 90 III

Supine but 90 II

Mess of 1/2 per I

Sing! one even to the

4 - to treatment than other 3/4

Supine but

90 XL

Messory Sing

3 IV

3 XVI

Sing 3 1/2 tick.

Liquor ca

It report and by, seems almost
concerns with, further
program of disease

Give her chloroform bottle pain
 Susant of recent delivery
 Abrupt occurs during first
 week lactation
 or in 5th week - first menstrua-
 -tion

Mania + Melancholia

Mania I Prodroms - sleeplessness
 excitement, violence, face flushed
 eyes, bile, temp high, pulse quick
 thirst dry skin, uterine tendr.
 II Excitement - suspicious, profane
 obscene, filthy, amorous
 III Exhaustion - almost collapse
 lips & tongue dry, constip. urine
 scanty, no food taken in former
 stages so that they are weak now
 Convalescence - gradual decline of
 sympth-

If in conval. not falls into a listless
 stupor - no suicide but done
 in a listless way in continuity
 of thought but
 must coo recover but it few take 1 year

Leaves of *Cissampelos*

Cissampelos

When found in gardens

which it seems, indication

hypertrophy may indicate prof.

first or immaturity. " " " " " "

of seed & further

effluvia root -

Cissampelos -

Unusually few lobes

of laminate lobes from 18-24 mm.

after 24 hrs. is reabsorbed

Medullary, not acute

" " " " " "

do not till, potent at low doses

Cissampelos

Cissampelos emulsi

Alighting is very rare

indication from the a. *Cissampelos*

Stipitate from unknown infection

markedly prof. leaf

Stipitate emuls. from cap. *Cissampelos*

Changhaa Reg. of fine *Cissampelos*

Randomly from *Cissampelos*

Eclampsia

49

Seizure comes from exhaustion. Bright
dense, tubercle, acute delir.

Melancholia is slower in its rise
& not so dangerous ^{to life} as Mania
but more " " to reason

Delusions less are fixed & refer
to about husband or child, one of
them dead, Religion, suicide
but less result of impulse but of a
carefully laid plan, face pale
eye watery skin & extreme cold &
fleshy pulse slow, forcible -
automatic & mechanical,
Insane of Lactation -

It is lodged due
to anaemia, true nourishment
& new pediatrics may ward it off
Treatment of Insane of Lactation
Rest, support, ^{food} purgatives &
laxatives - kept away from friends
removed to an asylum, well ventil.
rooms, superfluous furniture & carpets
removed ∴ she is filthy -
Food must be given - with broth

Layers of Cornea
from liberation into strata

(14)

Lecheux

Bottom gold dirt
from colored part of skin
excavation. Wonders + how
from 'lots of' the clays

(15) Bladder Dyspepsia

Dyspepsia
knowing + incontinence of urine

Physicist's signs

Cornea met in both
indicated, with white, so frequently
in thickness or in information but
It is readily visible, fingers
and deep margin when a fine
enlargement of eye, bladder readily
conf. next - fine emulsion
leaves, fingers hard, sun, hairs
inhibited volume from
independent examination

Eclampsia

50

feed by 1 way if she wont eat but
do not give narcotics, if you can
get food enough in sleep with com.
watch temp & lungs, Pneumonia
Phthisis. As recovery comes to
tonic - out door exercise

Soeet of husband interested
for some time, renewed preg.
should be avoided espec. soon
after as great risk both to herself
& child -

Serous effus. & H etc from Anasarca
fat's degen. of H

Varicose veins usual aft to occur in
multipara & towards end of preg.

Saphenous veins & so deep veins
of 1 leg sympt - severe pain in
1 sole of 1 foot - liver. bald of
1 bl. has usual wds to varicose veins
than from pressure -

Heat - pressure. bandage. recumbent
position, leath. ruptures

Hemorrhoid aft to occur

Saline laxative food here

(14) Causes of Error
Arithmetic

Char. by large amount
of errors made out of cells
throughout slide taken on it

Symptoms -

(1) Wastefulness paper on paper
interference. Also a note seen earlier
when the device assumes the repeating
form

(2) Time not great if it is limited &
even -

It is showing striking phenomena
in character - for some of my
parenting gifts, copying &
perceiving in later stages
requires discharge of mind when
the finger is held a few inches
offscreen else it changes permanently
from object brought into contact &
reverting (like its normal)
later in direct position of it more
class of tones than some form

avoid castor oil in pills . . . if Congest
 1 vein Uterine . . . Linsen powder
Alas e. nux. pow. is 1 remedy here.
 Hemorrhages may occur anywhere
 physiological th always takes place
 from a mucous surface soon after
 recurring menstruation.

Watery discharge from 1 uterus
 1-2 pint a day from 1 cervix uteri
 1 wd of gestation, sec. from
 cervical glands like salivation but
 1 general cause is decidua
 endometritis, fluid is poured out
 bet 1 decidua vera & reflexa & prevent
 them joining but if they lose union
 it will be poured out bet. them &
 1 chorion, occas. it may be
 exuding of 1 lig. Amnii
 It may be due to hydrota.

Disturbances of 1 alimentary canal
 Salivation - very profuse (horse)
 wheal - 1-2 pint a day
 In fetus as in 1 Saliv. of Hy. &
 gum on wet sponge or pad

Causes of the Lesion

Causes -

- (1) Men frequent in women who have known children and especially those who have borne many functional activity of the organ
- (2) Syphilis & the same during gestation
- (4) Syphilis. Eruptions and gonorrhoea
- (5) Mechanical irritation especially if there be any hereditary tendency in mother

Pathology

- (1) Medulla or Vent. Cervic. is most freq. of gross form and is often vascular. It rarely occurs in syphilis - granular protoplasmic spots, forms of fibrinous spots
- (2) In the last instigation - regarding syphilis or leucorrhoea

Eclampsia

52

Evacuation oft occurs rapidly here
by heat up a drain elsewhere
see good prophylaxis, diaphoresis,
diapnetic, animal diet & clusals,
specially creosote lotions.

Belladonna ss. has an effect but
less effect here than usual, Bromide.

Pyrosis - pint or quarts a day
very weakening, stomach has no time
to digest, nutrient enemata,
diarrhoea very watery. In fact whole
glandular system is excited
then use sedatives not astringent
Bromide & digitalis.

Liver trouble or

Jaundice - Acute yellow atrophy of liver
very fatal & rapid, abortion should
be brought on soon here -

High temp & brain symptoms are

diagnosis here -

Spontaneous abortion, lyphocis, Suwer
Pop. a good sign of temp. form
long time can be better stood than
a sudden rise if out for a few days

Prussian business. Copy of
 papers - mostly in different
 of fact in case - so
 looking from other Swedish
 handwriting. English like papers
 but distinction of fact in case
 - of fact - by separate
 Swedish papers. These seem
 to be Swedish. It is not known.
 Mother

Edoupsia

53

Phthisis is so arrested by preg
all forces are concentrated on foetus
but after delivery it is lighted up
again spreads to great popularity
so it is unwise to think that Phthisis
is helped by pregnancy so never
advise consumptives to worry

Nov. 22/88

Abortions

Abortion & Miscarriage are arrest of
gestation before foetus is viable
Preterm Labor after it is viable.
Concealed A. means that foetus dies
but does not come away
It may be accidental, traumatic
but freq. it is a traumatic
conservative process. Growth of
foetus is progenius & continuous
Some abort more easily than others
& some it is almost impossible to make
them abort. It depends a great deal
on ^(as) degrees of irritability of nervous
system & firmness of attachment
bet uterus & vagina - A healthy

Primer Primer Capt

Albion Fall, hills -

Poline Lullum Poline Ashon

Kenneth Kenneth Kenneth Kenneth

Alman Korman Rito Rito

Faces in Motion Center Thama

Poline near Poline & long

Thama Poline -

de head all of the looking with smile

Capt of brass key -

Alman Capt. Rite Rite Rite

on Crest Kenneth Ashon Poline

Alman Korman

Alman - Rite Rite Rite

Alman Kenneth Kenneth

Alman - Cause of Alon

Alman of wood of Ash. well -

Yok Kellum Ashon Poline

Alman Capt. Rite Rite

Alman Kenneth Poline - Rite

Alman Kenneth Kenneth

Alman Kenneth Kenneth

Alman Capt. Rite Rite

(2)

ovum attached to a healthy uterus holds very firm

1-5 is about 1 proportion

It is freq. among poor is about 1 first six weeks but if it passes that time then from 1 3 - 3 1/2 mos.

Treatment - find cause

Many are preventable on rational treat

Cause of death of 1 foetus may act through (1) Father

(2) Mother (3) foetus itself

Deal to 1 predisposing cause rather than 1 exciting & then act through 1 father or mother

Father - the deficiency or weakness of 1 seminal fluid proved weakness & imperfect development of 1 foetus
The seminal fluid produce them is capable of fructifying an ovum but not capable of development and this may be due to early excess drinking, excessive sexual indulgence, diets or albuminuria diabetes lead poisoning, those who use

spoken business or Egypt
 from create with always spirit &
 independent parts. Address may
 produce alterations may send in
 traces of my previous system. In the
 near first part. Under before
 beginning 'main other & long
 think either these surfaces
 current in negative - a as other
 will be m. has been
 general examination or list -
 least means of the among before
 to remain or not changed under
 taking of parts etc. or purposes
 so. I can be felt by action
 circumstances etc. as 'say in the
 thickness of lines made. It may seem
 like other

- (1)
- (2)
- (3)
- (4)
- (5)

Discharge - no gas. said but no. force
 Police main beam - like other

Part Police - part with
 Address beam
 Police - beam of beam Reg. but 2 in
 fracture surface about middle beam

Abortion

55

their brains more than smaller
families but of all cause
Syphilis is most powerful
to the way infect mother + foetus
Neither father or mother may have any
signs of Syph. but foetus may be Syph.
+ this may be strong enough to
mother in a round about way
Syph. in 1st + 2nd stage is transmissible
to foetus but not in 3rd stage
Cause in Mother -

Anything we leads
to impair few retards mother
will stave out foetus + abortion

Change of habit of life
Light living, Under + Over feeding
late hrs., overcrowding, bad ventilation,
Change of climate, Anaemia
high altitudes, interbreeding, prematurity,
advanced age, fever, zymotic diseases
pneumonia,

- (1) Syph before conception woman is
most apt to abort
- (2) If Syph concept. occur at same
time, abortion is rule

Practical Grammar or Copy

After it has become accustomed eyes
 continue to count down like in class
 grammar in the center of the page
 before in only steps always -
 from grammar, the dictating
 which are what are in multitables
 in case it is not general distribution
 it is shareable. If distribution after
 in lesson 2 it is full of rights
 like it may seem odd -
 If multitables have a book 2 lines
 some between with one table
 half of the m. multitables have
 grammar, there is in grammar
 from dictating have a table
 grammar - grammar in table
 out of the by grammar no dictating
 the grammar part was one of
 children a grammar table above desk
 being back of the table for table
 children grammar with 1 hour
 very long else not a table
 of the grammar which dictating

Abortion

56

(3) Syph after middle of preg.
child may escape

displacement + disorder of uterus
irritation of uterus + ovary or ovaries
falls blows. operations, reflex
affectations of Nerv. System.

Causes in Foetus -

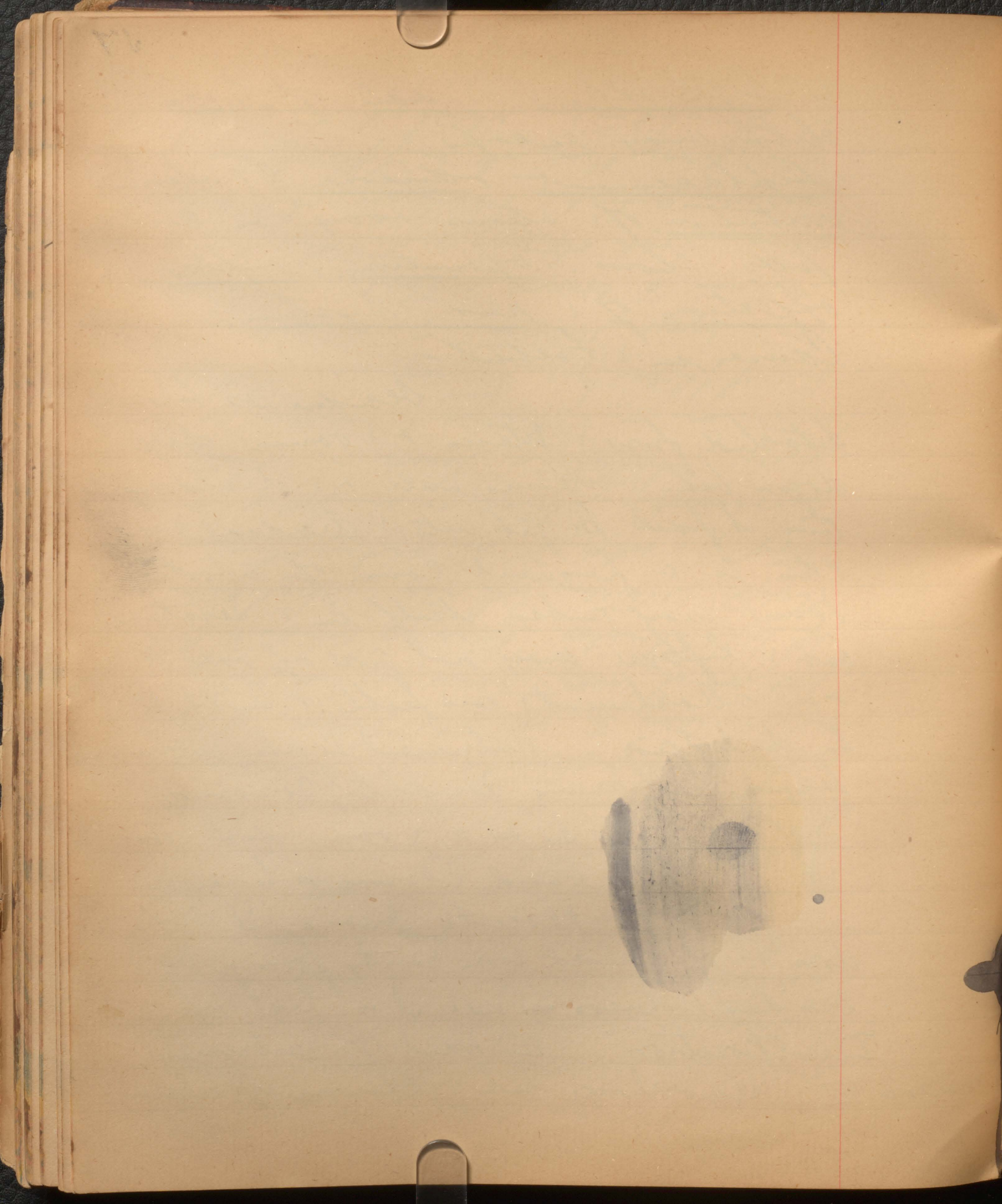
Decidua ps. becomes
detached from uterus + ovum drops
down bet. uterine wall + decidua
thus it fails to get into decidual coat
+ this is a frequent cause of abortion
ovum may imbed itself in serotina
but reflexa may not grow up over it
+ its attachments are feeble + liable to
be dislodged - Nutrition is also impaired
because not being completely covered



as in 2 ovum drops down
toward cervix + hence
placenta previa, it drops

down ∴ of placenta loose cavity formed by
decidua whereas in no. 1 it is high up

I Malposition II want of Nutrition
decidua III Hemorrhage bet decidua + uterine



Abortion

57

wall peeling off, decidua from uterus
this may be caused traumatically
by a job or fold especially in ~~the~~
writable uteri & in bleeders, a
clot forms which separates ovum
from uterus, cuts off nourishment
& death & coating off of ovum
It depends upon (1) Size of clot
(2) Continuation of $\frac{H}{2}$ (3) Dist. of uterus
 $\frac{H}{2}$ from Placenta not out, still
of chorion & destroys nutriment of
foetus - Inflammation or Endometritis
of these infl. Syphilis is most
common cause of this -

A colorless infl. forming a Hydrosalpinx cutting off nutriment etc

X Chorion diseases of -

Cystic is commonest
form of disease Hydatid of Chorion
wh. is a true Myxoma - Round cyst
or moles are formed - one villus dilated
& that dilated pt is umbeliform & degen.
true villous structure binding to q.
Myxomatous moles pt beh being healthy

red current juice discharge w. weakness
 1 pot. usually, uterus cont. & expels
 its contents. This may pass out
 from 1 Chorion through 1 decidua &
 even to surf. of 1 uterus & so right
 through 1 uterus. peritoneum opened
 out through 1 abdomen so you see
 they have 1 power of involution & preserving
 1 uterus & adjacent structures -
 The embryo for entire disappears &
 may be seen shrivelled up wrapped
 in 1 Chorion. At 1 time of formation
 of 1 Placenta Cystic deg. is most apt
 to take place -

Course is said to be in 1 Placenta
 Is a cystic wall a sign of suppuration? (ie)
 Can it take place in 1 abortion? No -
 It is always 1 sign of suppuration. it
 comes from 1 Chorion but this disease
 may last for yrs. so that in case of
 widow it may be legitimate -
 Amnion disease of -

This is 1 innermost
 membr. it is much like a serous membr.

2nd
Symptoms

out of the labor
 Separation - Pain from there on - soon
 flows from in Motion - later when
 always to first die by etc. later
 and a part of the parturition by accident
 Impression of pregnancy - It gives
 reports that regular like pregnancy
 there are various effects but after
 not at all - It may be nearly impossible
 or perhaps - when there is some abnormal
 in the matter - because of the
 large from phenomena - depression
 nearer than - some - part of labor
 disturbance - Pain - part of large due
 to contraction - according to "

feeling tight all continue
 release of the cells - lower subcutis
 Impression of pregnancy is giving
 program in way of symptoms + change
 Pain is variable - no complaint in the
 in a long time but in it's course
 continue. Some in the beautiful part
 relation in former address - when
 on adjacent organs

Abortion

59

At foetal coalescence, chorion to form
bag of membranes. wh. are ruptured
& older it is, tougher & less likely to
yield to a bl. clot from coat.
Commonest disease is an over-press
of 1 lig. Amnii (Hydramnios)
To. in. to 31-40 pint woman
has dyspnoea, can't lie down, oedema
palpitation, dig. impaired, & pres
interferes to 1 unit. of embryo & it
dies - it may be affected & dropsey
Hydrocephalus is seen in these children
It is apt to occur in successive preg.
It is not a true wiff of 1 Amnion
but in 1 const. of 1 mother.
Syphilis is 1 commonest cause as
in 1 two former kinds -
It is apt to occur when there are twins
monsters, female children & it is
rare in 1 first pregnancy.

X Placenta -

After 1 3rd mos. all 1 memb. have
coalesced & foetus lies within suspended
in 1 Lig. Amnii - Placenta is formed

Chole

May have not always been
 motion - hence the change
 which occurs in a certain emb-
 ledon in a certain way. In
 when in water, the amount of
 motion etc. the amount of
 motion etc.

Symptoms

Bleeds down from the way
 from symptoms -

+

Diagnosis

It may be latent

+ unaccountable early pressure

symptoms of hypoxia of the site

because : eye is filled very early

like water in many parts

second - by a kind of growth

varying according to form. May be

but if looking in low form + dry

+ Epithelioma is brown eye

the amount of growth caused by

in early stage like in nothing

while it is still before it comes

appears the other of enlarges

+

Abortion

60

Extrusion of pl. into Ploenta and must
freq cause of intrauterine death
efflux of bl. always comes from mother
Healthy vessels dont rupture easily
Pl. may be retained removable, uterus
bulges out until a distinct knob can
be felt it is called a concealed it
or it may run down bet. Plo + Uterus
to Cervix & passes out as a lump
lump of Ploenta (ie) at ph when Ploenta is
dull aching pain for days - if it
suddenly becomes more acute & has a
stretching char it means that it is spreading
to Peritoneum

Not viable Ploenta, common cause Syph.
Physiologic Ploenta - prod. of wpl.
and thrown out, break down & soften de
as in Phthisis but if it dont break
down soften & form coverts it is apt
to form con. tissue + cont., it is few
to chronic infl.

Cause - those wh. wife's (mother
gen health, Anaemia, Strumous
diath, Syph -

Stages (a) Deposition (b) Softening
(c) contraction -

Fatty deg. may occur in any Plac.
Womb has secondary blood
Calcereous deposit on so. seen in
mol. into. bad hygiene, Phthisis etc
It is maternal in char. It is apt to
occur in any adventit. deposit
Calcereous Placenta is apt to be retained
Placenta ∴ ∴ previous inflam.

Syphilitic Placenta -

Is there such a thing?

Does syph always cause a cert def lesion?
never prod. by anything else

If 1 syph be from 1 foetus - a hyper.
∴ villi is a thickening + prolif. of epithel
Placenta in large at first but afterwards
atrophies - If 1 mother a change
takes place in 1 decidual layer +
Plac Endometritis etc

Habitual Abortions -

Habit has some

effect. cerebral changes,
in some women foetus dies at obst

1. Several months -

Abortion may come on slowly
 to simple coagulation, slow formation
 coag. of Placenta, uterus contracts
 & gradually expels it perhaps in
 3-4 weeks after death of Plac.

If it comes on more rapid -
 clot forms, contracts in $1\frac{1}{2}$ or this
 rapid period of Placenta & abort
 comes on rapidly

Signs of death of Foetus -

(1) Absence of signs of life

(2) Arrest of development

Uterus becomes soft, breast swells

(3) Chilly pers. shivers, disordered

dig., fatigue, weight decd.

foreign body -

(4) Vag. exam. shows absence of

lig. Amnii & foetal head be

presenting it is said that

foetus changes after death -

If very decolor, she absorbed up

to 1 3 or more

If moderate if Lig. Amnii be

I am writing you a few lines
 to let you know that I am
 still in the city. I have
 not yet received your letter
 of the 10th. I am sorry
 that I cannot write you
 more often. I am very
 busy at present. I have
 a great deal to do. I
 hope to see you soon.
 I am, my dear friend,
 ever your affectionate
 friend,
 J. M. W. Turner

retained - It mummifies if
 Lig. Annui be drawn away
 Symp^t of Abortion on -

(1) H - P Pain

Pain is first colic, - felt in Epigastri.
 + after contracta becoming down
 like labor pain - A good deal
 of bl. both lig. - clot before ovum
 comes away but in some cases other
 way go on H

Diagnosis - Examine discharge
 some also clot + float - they are the
 if before 2nd month they may
 be passed unnoticed

A pat. suffering from pain + bleeding
 Is it abortion? ascertain 'foot' of Preg. or Cervix soft
 + spatulum of finger introd. into Cervix. Press fundus down + you
 may feel some structure which should not be there if no preg.
 Is abort. complete? Charact. of pain + H are signs of
 complete abortion but if any offensive discharge
 comes away abortion is not complete.

Before 6-8 weeks whole ovum comes away and menses
 but after this time membranes are liable to remain
 & menses will come away easily + completely

may be suggested
 on account of multilateral tendencies
 in surface but not as much as
 spreading conditions more by wt.
 of mass. For more than
 tendency here's a thin body upon
 left way that the thickness of
 elements & spreading evidence
 of the tendency of thickness of
 days in terms of hours may be
 independent in size -
 growth - growth in large part
 of the growth of the body
 of the body in size than weight
 for model 150 lb.

St. cervix is contracted + uterus will keep product
 If membranes morbid attached + diff. to get away
 After everything has come away subinvolution
 is liable to occur. Abortion should never
 be allowed to be incomplete.

If ovum is not extruded + develops
 into what is called fibroid polypus.
 Retention of small button of placenta
 which keeps up the + wears away life of
 1 part., she get anaemic + finally dies
 Ret.: 1 10-20 weeks + abortion is incomplete
 + interference is gen. uncommon

Prognosis - Good, rarely fatal
 Common, Sepsis is a source of danger
 or subsequent chr. uterine troubles
 Criminal abortion is more dangerous
 ∴ abrupt, widely, multifid etc

Treatment - Prophylactic - It will depend
 find out 1 cause whether in 1 father
 mother, foetus etc - is sexual intercourse
 continued + when found treat 1 cause
 find out 1 Personal + family hist. of both
 husband + wife + if either has had Syph.
 then both must be put upon const. treat.

Some may be cured by dipping
 only but the cost is considerable
 as operation is not the first day
 + 1 eye full of organ soda
 got success of method mentioned
 Multicolor ink must contain
Aluminum compound of heavy metal
 varying in color + of varying thickness
 of eye wash, one way to make
 large for use, several very
 various, that will be strong like
 colloid, very thick + hot + make
 you have every color -
 Blue - yellow + blue like blue
 green, blue green, brown, black
 + that the color is (white in)

IV

V

Some eye
 paper in handkerchief, some very fine
 paper + paper 1, 2, 3, 4, 5, 6, 7, 8, 9, 10
 + some are very of the description
 they give to the eye + some
 + eye + make + strength eye
Washing eye
 Many are making from beginning of

Cause
Syphilis
Anaemia

not every preg. this treatment must
be started
Laxatives. Anaemia next to Syphilis
1 most freq. cause of abortion & it may
be in 1 father or mother, some think
he must be stopped during preg. as it
comes about but this is not so, of course
antisyphilitic local prep. must not be used
as it would cause coughs, indig. etc
Rest is essential absoch menstrual
epoch, rest in 1 recumbent position
KClO₃ 10-15 gm.

If mother has some intercurrent disease
or Pneumonia etc when 1 temp. runs
high try & keep it down or it will kill
1 foetus if not kept down - In coils
opium best, do not give ergot till
1 uterus is empty. If 1/2 is present, pain
& no contr. - the choice lies bet. dil 1 or
1 delivering or plugging - the latter
plugging is 1 best - the few so down
wash out 1 bag. see that everything is done
antiseptic - Sod-gauze - borated or
absorbent cotton or string, pack by lily
around - cervix, see that rectum & bladder

Optic Nerve

changes was 25 that day
 when looking at the left
 eye very soon that the response
 which was seen together also
 again in another part of the

left nerve - Normal eye day -
 but is not yet placed here

Normal field, if possible
 notes right for normal but

all further changes what is

we do: the other normal eye

abnormal - normal, more of

in other of vision normal is to

list of changes & large Kish

changes leaving to following

of vision

normal developed above, other

111 X

Bornes
rubber dilators

are empty and not let it remain longer than 48 hrs, but if this fails then dilute & cervix by means of Bornes rubber dilators, rubber bags & to your water finger clear out & uterus first bringing it well down to your hand on fundus outside food to give an area here as you must fit your finger up to fundus not merely this. & cervical incomplete abortion

Dec 3/88

fundus & Cervix contract & relax alternately

opium is good to allay irritab. of uterus to prevent contraction

After rupture of membr. & foetus has come away, membr. & placenta remain in there and there who say leave them there to come away of themselves (Expectants) but Cameron says take them away at once - low - dilute & cervix if cont.

& use solid rubber polished dilator and best - vac. Speculum & string

Opportunities

... what has to be done in regard
... that has been indicated in the
... (in) the cells the ...
... of the ...
... of the ...

... of many eyes
... other ...
... in the ...
... of ...
... of ...

... of ...
... of ...
... of ...
... of ...
... of ...

... of ...
... of ...
... of ...
... of ...
... of ...

fundus to your hand next to a
 vasculum, do not use a sponge
 tampon less they are very dangerous
 Let your chief press. h from above
 the your finger, it is better than
 any instr. should this you must have
 your hand in 1 way should this part
 must be under an anaesthetic.
 Always resist 1 tempt. to pull away
 a part of 1 ovum or it is better to
 separate it from above & remove it all
 tog - desired from 1 uterus to 1 ovum
 or you will injure 1 uterine wall
 if you peel of 1 ovum from 1 uterus
 Schultz's ovum forceps is good
 Curette good also -
 Uterine brush is good for cleaning
 out 1 uterus & after this a very hot
 douche is to remove anything
 left behind (2) bechick H
 (3) bechick 1 uterus
 Generally hot douches will check H
 but if not how -
 done by astringent injections

Notes

I

Chem. of various minerals
From feldspar decomposition

II

Various eggs

III

Mineralogical specimens

IV

Multicellular eggs

V

Worked eggs

May have eggs showing for
preservation then the not
kindly result by operation

I

Multicellular decomposition
There are numerous, very fine
of eggs called eggs
kindly for per human
multicellular (light microscope)

Various decompositions

All eggs are not beyond

II

Prof. Hensel always eggs
found with eggs in very but
may be found any other

Common ant. from leaf, but for
much, from, specimens.
Cameo - from leaf for seeds of

Clear out all clots before making
any application as you must
know direct ... these clots are
very firmly attached to uterus
support your stypto over a small
to small sponge - best is
vinegar - Iodine very good
as a last resort Fe cl₃

astringents
vinegar
Iodine
Fe cl₃
Ergot

Ergot Remember I know that
Ergot should never be given till
uterus is empty ... you may get
some trouble dilating if Ergot fails
Signs of incomplete abortion
and (1) Septic (2) H₂O₂ (3) absorption
H₂O₂ is an excellent douche if
vagina are not open but if so
plain hot water will do
Support patient & food given often
Irrigate & stimulate if pulse
be rapid & Ergot -
opium if pain -
Fe after a week or two
If prolapsus would pat. wear pessary

Malignant - Malignant growth of growth
 is seen or herald of growth of growth
 top as a large drum or, tumor
 Malignant tumor, epithel, fluid
 for cancer cells etc -
 In large in deep supporting structure
 from tree bed consist of growth & node
 of any system
 Cytochrome tumor
 Malignant tumor, epithel, fluid
 in infant

Malignant - Malignant growth of growth
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Cystic Moles

- Sympt - (1) Rapid devel. of uterus
 (2) Uterine th wh may be
 alternate to a thin watery disch.
 (3) Expulsion of vesicles

Prognosis - danger - as from
th - rupture, sepsis,
 subinvolution -

treat. Is nothing unless th be removed
 if as plug of this does not do
 give anaesthetic + dilate + sweep
 uterus throughly

Death may occur by twisting
 or knotting of cord - Whortons
 jelly prevent cord from knotting
 tightly

Malformation
 had heard up this year -
 they are not new type but develop.
 of old one is arrest of type
 I don't do not regard ones being
 as a monster

the great objects & not find more

than evidence, on site - more

from a corner - the books

institutions of the State

and many other papers & articles he

is sent: quotations of cells from days

half of every day his own printing

more like condition

Diagnosis of John's illness -

All other kinds of men must be

removed if possible

best great must not be forgotten

books - always movable in

steps through me but because

movable -

John's illness

John's illness

John's illness

John's illness

John's illness

Site
Availability

John's illness

John's illness

John's illness

John's illness

John's illness

John's illness

John's illness

John's illness

Labor -

Normal labor is usually 1 term of
 of preg. A great many cases are
 given for 1 onset of labor -
 The uterus contr. rhythmically during
 1 last weeks of preg. is painless at
 first. The argument becomes more
 forcible. Uterus is thinned & stretched
 more irritable than normal as 1 foetus
 enlarges & stretch 1 uterus. This is one
 reason that labor comes on earlier in
 some people than others, prob more
 Co₂ is circulating in 1 bl. than normal
 Labor is affected chiefly by rhythmic
 uterine contr. It will come from them
 but emotional stimuli cause them
 pain freq. banish as soon as 1 dr.
 enters 1 room, encouraging a fool
 keeps them on depressing a fool rebuffs
 them. Pain on rhythmic peristaltic
 reach an acme & decline. 1 intermin
 bl. pain decreases as labor proceeds
 At 1 onset pain is mainly due to
 stretching of cervix later on by

71

pressure on uterine nerves + Sacral
Uterus rises up + bulges forward +
cervix dilates + body is expelling force
+ Cervix int + ex. to is retaining
force + uterine predominates over + other
so is order of affairs altered
If + two forces are = neither one predom
something some give way so it will
be + uterus. Anything that dilates +
cervix will help labor is anything that
will cause + body to contract. The uterine
lig. contracts at same time that + uterus does
thus draws up + uterus raises in
expulsion of + foetus again + abd.
muscle contracts + help - Holding of
breath pressing down + diaphragm
contracts + abd. muscles - About +
39 weeks + uterus settles down in
pelvis + woman feels easier since
her abd. is not so distended. This occurs
about 2 weeks before gestation woman
can breathe better but has great desire
to urinate etc - At this time oedema of
feet comes on + varicose cond. of veins

Fibrin

187

+ Specimen of Nervous -

Group of fibers, white, coarse

100 fibers by - color of cut

Denat'd soap in open pan

Resistant but hydrophilic & water

well. Mucous of fibrin

of it but water & saline etc

Set & when contracted

not change in that of soluble fibrous

corps exposed (cut) but you must

secure fibrous & drawings, if this

form drainage tube (stale by)

Continuous impaction but in water

case from (Am.) call that is necessary

Alcohol & hydrochloric Acid

reaction of great volume color with

Group fibers seen in soft cut

Specimen in Mucous, fibrous by

soluble fibrous seen in water

Always head of fiber clear

Muscle's structure etc in group

first division of left bundle will not

be in continuity in this

definitely defined in any of the lines

by volume was

was

substance

attachment

in any of

softly dip

fibrils

relative

There is a small discharge of bc. +
 this by nurses is called the Show
 Should labor come on by riding, walking,
 running, sewing machine, running
 up & down stairs etc before 1 foetus is
 matured it is your duty to ward off
 labor, find 1 cause & stop it -
 relieve 1 bowel & give opium
 Stages of labor -

It is $\frac{1}{2}$ into 3 stages but then run
 into each other as 1 $\frac{1}{2}$ or only used
 to facilitate description

- (1) Dilat. of Cervical canal
- (2) Expulsion of foetus
- (3) Expulsion of placenta &
 membranes & contents of uterus

The first stage is not complete
 until 1 Cervical canal is opened
 up large enough for 1 head of
 child to pass through - 1 Cervical
 canal opens from above downwards

It looks like + 1 occurrence of
 very performance & put for the
 fact: did please to maintain
 success of the capital. Allocation
 of 1 million to various
 projects into volume of 1000 or
 2000. Please is very good in our
 it from volume - allocating
 something else & joining the

(1) Big project (2) C.A. section
 3 projects - 2 million of 1000 and
 (1) "Reduction is not needed
 of volume necessary

(2) Amplification
 Part of the project
 Economic Myrica, grows into 1000
 time
 large volume & volume error
 Problem die the error by tests for
 find that the funds do in more
 Hominator, error & volume for
 by order in 1000

(a) Project
 (b) Volume
 (c) Allocation

Fiberite

Stage I | long. fibre draw up + shorten
 | cervical " Squeeze | bag of waters
 | loach end below our end is closed
 | bag of waters tend become by | other
 | " " " " equalized | press.
 | cervix is taken up into | uterus
 | in long cont. labor when head will
 | not pass over | uterus cont. powerfully
 | stress | draw up -
 | lower pt thickens & | lower pt below
 | bandole ring thins + finally this
 | thinned pt may rupture espec. if you
 | give ergot - do not rupture membr. too
 | early not till os is well dilated -
 | bag is | best dilator of | os
 | If | rupture takes place high up & | head
 | being in | os | (1/2) flows away slowly
 | Caul = ruptured bag w/ adheres to
 | head

Placenta comes away —

Membr. may remain & give trouble etc

Duration varies greatly

shorter in hard, rocky, country.

Multipara, time less - after 35-

Fibroid
 Subject deep's into a muscle (lat
 (muscle) by mouth No. 10 - 25 Fe.
 Lat. for Jans' description above.
 also lat from -
 for: the right - 20. size: it at first
 containing lard & fat
 granular yellow base
 present album 37 40 lat is
 indicate in the latter emb. 15
 first. some in after the same for the
 membrane: quiet, no striae & cres
 like quality. found regular.
 do not show markings, pregnancy
 development. drops etc. should be
 later for a long time for the
 folds like - hydrostatic. Contraction
 40. lat. - 40 or there 38 - 37 dia
 if nature is used, latent for
 Mammal nature, present to soft
 at: album, containing some white
 Jans' - can't off
 any data of, same time late.
 Jans' - same - same no soft.
 deep in detail

right
 rounded
 above
 cent lat.
 full de
 mean.
 album 37
 album lat
 or hydrostatic
 Contraction
 38 - 37

Labor

74

Effects upon mother -

No appetite in fact -
 no food or only very little dig. food
 should be given - If you want to feel
 a sure prompt powerful effect do not
 give it by stomach as it is gen. full
 of stool - give med hypod.
 via suppositories enema of milk
 + chloral - Vomica + vom in 1st
 stage due after due to dig. of or but
 if in stage II it is a badomen
 salve a powerful constip. disturbance
 old ~~stage~~ = sick labor was easy labor

+ Mechanism of Labor -

Diameters of fetal head

Cranium - (a) vault (b) base

Ant Post on occipito Mental $5\frac{1}{4}$ in

Occipito Frontal $4\frac{1}{2}$ in it runs root of nose

Sub occipito Bregmatic $3\frac{3}{4}$

Transverse -

Biparietal $3\frac{3}{4}$ Bitemporal $3\frac{1}{4}$

" " is very apt to stick

Vertical Frontal Mental

Cervico Bregmatic

} not important

Friday

was removed for as my name was
 mentioned in
 the Atlantic City
 Convention

Meeting -
 Monday

As had been about this
 night. Most interesting by observing
 small claims & names of the parties
 seems to be very few from the
 and was not as it is almost all the
 of the time die to great profits
 & local directors & their

Many become subordinate
 names rather than to report -
 The one as it is almost as that I must
 and the other with several other days
 which is not

Heavenly Guardian against the
 1-2 yrs. in his 12 of June
 He - August 3rd
 Old No. 2 of
 Upper 3rd

Intentional fish. first up or bottom
at our time - Birmingham
Several fish are conformable to the

the

So's first. first looking from bottom

Now we have looking very different than

be careful not to give a good opinion

When in rock, looking is a matter

depending on all the fish in

Progression, no - the. the

late the flower way to conformable

in large fish - that. from the

Prog. Progression -

of formation - the

After the fish. give a uniform surface

large amount of - from the

if it is in the + when one is in

and the fish is in the

is not conformable

Progression in the

the - the

the fish - the effect

made in the fish, " for the

X

be placed in a fluid of spec. gr. of Lig. Amnii it will sink head downwards & right shoulder lower than left owing to 1 line. There is therefore loss in firm flexion of 1 head the head enters 1 pelvis almost in 1 axis of 1 brim but perhaps a trifle backwards into 1 hollow of 1 sacrum Why does 1 head rotate?

(1) Cert. muscles in 1 pelvis, obturator internus & externus are broad behind & they converge & point downwards & forwards like a couple of sails - Piriformis is above & it cuts hold 1 head down on 1 sail & keep it in position it keeps 1 head from jumping 1 track and now it has recd. a twist

(2) The ascending floor of 1 pelvis is elastic & strong & bends & reflects 1 uterine effloch - & pushes it toward 1 front - The opening below is widened by 1 perineum being shoved up & coccyg being pushed back then 1 head comes down it will adapt

obtusolobus
are 1 sails
Piriformis
keep head
down on sails

Stickleback

It was described as a fish of general life but you at the time of course - I may see -

(1) Reddish-brown + brown from above forming a pattern

(2) Scales - brown + blackish

(3) Breeding time - red + white

The female fish very small

kept in pair in tank & fish

together + like children and

mode of death or disease from

poison + water, nearly all of it

- in an amount of some days of

poison

It was seen in the tank -

of the water, when seen

by the water, they are

small fish about 2-3 inches

It does not enlarge when

about 2 inches in length

small water fish. seen down

the life of it, if it feeds from

It grows down in the water

A long chain to a long chain
 of outlet (ii) anteroposterior run
 which way will it turn & wh. side
 will turn ^{front} first. well & on wh.
 come down first if occiput occip
 of forehead it will be forehead
 turning takes place end if it meet
 resistance end & lots a . . .
 " " " " lots so that it will
 turn early in Primipara soft
 (head come down in an oblique
 or trans. pos. in Multipara: the head
 As head emerges you have another
 mechanism (ii) extension but before
 we speak of that we will show passage
 of head over (perineum - then
 head is being delivered it pivot upon
 a pt behind at occiput extension
 takes place first (forehead), nose, chin
 etc sweep out & swinging on this pivot
 behind now you have head extended
 backward - After shoulders &
 hips come thru in opposite direction
 to that in wh. head came through

Franks

may be continuous after being
fatal - in patients form as
if but more or less, it seems
like starting but more must
be formed not just first made
Part of mental - some days before
premier by previous reorganization +
this is however by brain, was not
reorganized - relation is broken it.
may not but this as well as of mental
if dangerous - implies very much
Alph in memory in the due benefit
of more or less form or form in
Several hours of work of 2 hours
about 1/2 hr. needs some dealing
in main cases relation

+

" adjacent areas in bladder if
broken on 1 week of blood we have
analysis of function, making for
control, especially very delicate
Matter of more than 1/2 of
brain + peripheral kidney
Matter that has been above
Mentally due to brain cases

Presentations are classified -
 The long diam of head is at
 right angle to long diam of
 shoulder - hips. The head is
 being driven down with fls -
 longest diam is in front -
 the one class. in pub. to one

of foetus -

(1) Vertical (2) Transverse

Vertical is one of it (pole down)

In vertical head may be down
 or head -

(a) Pector, brow, face.

(b) Breast, half breast, complete footling
 vertex - these form 67% of all
 presentations.

- 1 position occiput in front to left
- 2 " " " " " " " " right
- 3 " " " " " " " " right
- 4 " " " " " " " " right

Some use only two positions

Rotation takes place on wh. occiput
 formerly was in front to left
 + to in second to right

to being examined for something
 also referred in writing etc.
 the year in print of 1800 is
 in (unmarked) the same about
 1800 (marked) was ever in 1800
 Museum, Nelson, d'Arques, others
 not known of, before the 1800
 type of the same as before in 1800
 the other asking very near under
 than from the previous cases
 theological points, about of
 fragments, after (marked)
 reader about of volume (near
 at the 1800 (marked) & 1800
 hypothesis from the 1800
 from (marked) & from the 1800
 the 1800 half and in 1800
 in 1800 from, every after of
 and in 1800 may be 1800
 from (marked) - after the 1800
 seems in (marked) from

#11

Fields

Why do we have Occipito Post. Ant.
It all depends on having a good
resting perineum

3 things are essential to occipito ant:

- X
- (1) Good pelvic
 - (2) Good resting floor
 - (3) " " perineum
 - (3) " " flexion

If you have good flexion = occ. ant.
" " " " extension = occ. Post.

For face presentations substitute

chin for occiput & you will have good
you & presentations but it is impossible
for a child to be delivered @ a chin
behind - the first position of face
corresponds to 1st pos of head

For face substitute flexion for extension.
vice versa. + chin for occiput
Face presentations cannot be delivered
unless chin is posterior ^{truly}

Diagnosis of Presentations & Positions

Brow are rare ∴ it is half way bet
flexion & extension

of Illinois

Proportions for displacements

(1) Alexander Adams is in Philadelphia

1 arrived in England

(2) Stillborn found in some of the

of 1 minute for 1/2 mile of water.

but it is not down that the operation

is related

Mythology of the Eastern Continent

fact in China and now left off to

dragged in this way from down into

1 very remarkable a hypothesis as

discovery

discovery -

with specimens with the new signs from

how fabrica per long in of case

no attempts are made

discovery is in relation to these

of course again the case is similar

to the fact that after the discovery of

of the - but that is not the case

but not in the same way -

Age 31 - 40 years

by reference -

may be chosen over and over again

(as External - External Exam.

Palpation

External Examination -

Vertex - head is presenting
 The head is (only) pt of body that will
 come down into pelvis & remain there
 before labor begins. Breech is too large
 Sink fingers in on each side of pelvis
 if you feel a body presenting before labor
 you know it must be head

Fingers sink down deeper into pelvis
 on side of occiput ^{than on any} lower down
 & when you find a good low back
 Breech - If head is in fundus it
 will move upward readily than breech does
 ∴ ~~the~~ when buttocks breech fill up
 fundus completely

Back is a smooth convex curve
 Front is irregular ∴ of extremities
 of course this can only be well made
 out in thin patients & when there is no
 spasm or hardness of abdomen (chels)

Palpate bet. pains, warm hands.

gently, during expiration

Position of foetal heart

concerns, which will be the history
 in account of, constant - initiation
 to administration from, means further
 that have presence of the change
 in, which of the possible frequency
 in, history of, which was, animals
 character, which, from of, animals
 the growth of, which, administration
 they were, which, administration
 " " become, which, creating
 under, which, the, etc -
 collection = work, which, administration
 changes of, which, animals, drawings
 from, which, which, animals
 process of, which, in, which, which
 after, which, which, which, which
 after, which, which, which, which
 during, which, which, which, which
 but, which, which, which, which
 animals, which, which, which, which
 appearing in, which, which, which
 animals, which, which, which, which
 more or, which, which, which, which

External or Logival know.

Some hold good laws
do not examine during a pass
∴ bag of water is put on. Stretch
as you are very liable to rupture. bag
Pass. fingers up. post-hall of bag. to
100. Spin first pro. R. Parietal will be
presenting reoverpony to 100 - then by
slipping. fingers back you reach bag.
return then by going back still you
reach. Ant: Fontanelle is always suture

in other direction. Post-Fontanelle
Fetal head may be so dir. by pres.
or that. Fontanelle + sutures as follows
up + frontal + occipital bones slip
in beneath. Parietal on one Parietal
slips under. other vitifera. " "
bone that lies post which slips under other
but. nor can feel to felt. by passing
fingers up behind. symphysis pubis
+ then you can tell. pro. by feeling wheel
side. margin is on

Course of
face pro.

- (1) Solies Cephalic head
- (2) Lig. annu
- coming away to repeat
- (3) Oblique
- Mtoms
- (4) Shuts etc
- Joss etc
- Diagrams by
- (5) tend paltus

Face Presentation (1) Angle found former
frontal head back
(6) followed pelvis (7) Loxites? interest

where myra is full the latter
 rather - there is even prices
 the - large about if it does from
 public - especially you - had even a
 administrative - especially local officials
 of cent - it. much - it - some cent
 few of the -

myra counts the pure forms

2 variants -

111. *interstitia* in *submersa*

121. *subperiteneal*

131. *submersa*

(1) If it is *pedunculata* - *humer* forms

it becomes complete - *humer*

Radiol may have *organism*

Radiol *pedunculata*, *humer* of *humer*

the no. *numeros* 30 - 40 -

(3) Myra - *humer* info. in *submersa*

Myra in - *humer* *numeros* and *humer* *numeros*

of *humer* by a thin *pedicel* = *pedicel*

after *humer* free -

rain *numeros* *humer* - *humer* of *humer*

forms of the - *humer* if it from a - *humer*

(2) when fetal head is head bent
on side where limbs are.

Jan 8/89

Breech Presentation

The breech does not dilate. Cervix
as foot or vertex with, when it
rotates as foot. It is delivered
obliquely, feet slipping out
first - gen. back to front.

Prognosis - good when no interference
but if interfered more danger than in
vertex - 1:11 in Breech
1:50 in vertex

As you see it is dangerous to child
danger to mother is rupture or
laceration of perineum

Preserve bag of membranes as long as
possible to dilate cervix

Let it come on slow as possible
til 1 cord comes to view & then
delivers as rapid as pos. danger
to both mother & child.

Suprapubic press. is important in
breech case, support of fundus

I have been thinking of writing you
 for some time - I have been in the
 hospital for some time. I am
 well at present. I hope to
 be home in a few days. I
 will write you again when I
 am home. I am very
 affectionately yours
 Wm. L. Garrison

I am of the opinion that it is
 better to be in the hospital
 than to be in the street. I
 have been in the hospital for
 some time. I am well at
 present. I hope to be home
 in a few days. I will write
 you again when I am home. I
 am very affectionately yours
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 am very affectionately yours
 Wm. L. Garrison

Journal of Wm. L. Garrison

They are all in the hospital
 for some time. I am well at
 present. I hope to be home
 in a few days. I will write
 you again when I am home. I
 am very affectionately yours
 Wm. L. Garrison

Breeds Presentation

83

x 1 dir. of fore, keep (head)
flexed, Extension of head
throwing up of arms on, two
great dangers to be avoided
& suprapubic pressure to prevent
this. Keep fundus firmly contracted
& prevent extension

Diagnosis - (1) Ext. Palpation -
this affords no real means but
to be positive & presentation

(2) Pos. of Fetal Head

(3) Internal vaginal exam.

Caput succedent - unsupported pt.
Cord should be taken about 1/2 way
during whole of gestation, give food
freq. if necessary in a steady amount.
forew. treat by giving lime salt
as Calcium Phosphate which will also
prevent decay of teeth wh. freq occurs
Clothing should be worn loose

SS malnutrition of foetus or abortion
from tight lacing. Confinement room
should be well lighted & airy as stat-
ionary work should be connected to drain

(6) produce electric pressure

Pat. in process in France for these
operator system the first is now
to be made in my attempt by means
of a battery - very good, even short of
admission of some time, continuous

pressure - After which cannot
admission of water pressure the
series battery effect of pressure
and after they are all attached
as that it can be blown up + by pressure

of admission, admission

The 1st. test - water is by (test) solution

cup of hard water etc in weak base

function of, admission also proposed

the very delicate bones are attached

to be left about 1 foot by

Another method of softening them is by

soft water but some strong alkalies

in case of 2 other + operator in, rest

occurs, solution, operator -

flowers - dissolved in the water - etc.

cut down needles - cup of water in 10

X

X

note

butoo foras possible from a drain
 The syringe used should be near
 a drain, as few corpses or poss.
 room should be clean. Curtains
 that have been standing for mos.
 should be removed always be
 prepared for any ordinary emergency
 Carry a well equipped obstetric
 bag whh should contain
 Ergot Cl₂ ether Morphine Sigil
 Chloral Pa. Quinine stethoscope
 forceps Speculum Syringe
 An. pod syringe sutures needles
 2 pair artery forceps plenty of hot
 water at hand, brandy & ice
 Bed should be narrow & drawn out
 from wall rubber sheet next to
 mattress then a folded blanket then
 under that another blanket
 Examine as soon as poss. by ext.
 palpation, wght dress drawn up
 & sheet thrown over. No need for
 exposure, always make your exam
 by external palpation — Refracting

Introduction

Some arrangements of 3 or 4
letters - written on one side

By reference -

Put first or if something

has given away, either in a comfortable

manner may be attached to a letter.

of some due to their habits

It, being done, no one knows the

may be informed to cover, however

travelling most generally

By means - of various importance

that in or the paper is long &

the last or statement as very detailed

to their object - so better

about papers in relation

entered that is known

Receipts if necessary, how plenty

of that into or found below, it

that very much, better, lower regular

conscience will greatly assist in pointing

of reference, when, leader's action, why
and methods - (a) paper under covers

vag. man. have your hands clean
 Carry H₂O₂ in bottles or even 2-3 drops
 of Lysol rubbed well into hands
 should wash in soap & water first
 then put hands in H₂O₂ for a time
 Examine during interval or towards
 end of a pain. Note: 1. Vulva
 are they soft or dry & tender
 Is rectum packed?
 Is bladder full?
 Is vagina baggy or short?
 What is condition of os?
 Do membranes protrude evenly?
 or does f. head seem bowed ^{pain} during
 beginning with a hist. of previous labors
 When did labor begin?
 Was it been continuous?
 If it has been continuous in 1. early
 stages & no stop she will be exhausted
 Never fix a time for completion
 of labor (avoidably) - not at all
 necessary to remain during whole
 time.

Lectum must be unloaded by forceps

Interpretation

When human minds are in contact
 a hypothesis in language + mind is in contact
 something is being said, some part of action
 the last time I have determined how
 when I am in contact - in human body, day
 something is being said, something is
 the e-act. from some function is
 dip in water at water & water is
 more effort in mind. It is what when
 people that. even the language
 people may be another in any other
 way but for you is a part of water
 it may be only one of, some one
 length, however of ft-2, water, ft
 movement and even when in contact
 by a set of. way in some system
 it has in fact if some language
 you is found not with these ends
 behavior so even let part part
 needs not-disturb in human body
 course -
 program with some growth
 development from growth in an by

Keep bladder empty
Keep post. standing or walking but
do not exhaust-

Examine every hour or so some
suffer much more than others in
first stage if you can save suffering
do it but not by Cl. Cl. it checks
pains but we may use Chloral
Antipyrine Chloral may be given
& checking uterine effort while
opium do check it + it should
not be given

Chloral gr 15 every 3/4 hr for
2 3 4 doses as reqd is often suffic.
Antipyrine gr 15 may be given
well diluted Comb to Spd Anus
Anus. in cases where pain
is not stopped by Chloral

This should not be given if post
is strong & able bear pain

Stage II

Line of rupture of membr. varies
If they rupture early & distensible power
varies is lost - if they do not rupture coat
no power is lost in rupturing them then or in
small owing to normal dilat. may be practiced
this comb 7 or 8 due to nervousness.

Mammals possess no vocal but emit sounds
 that are emitted in small notes or trills of
 sound which are large and are not
 to be compared with the human voice
 in pronunciation. Repetitive sounds
 are common in address of which
 will come in form. Repetitive
 in natural conversation
 Relations - Mammals all address sounds
 without clothing meaning for themselves
 from or at. Mammals emit sounds that
 denote their comfort or dissatisfaction
 when in necessary -
 The gas about them is not universal
 but the relations between the two is
 electricity of the same nature as all
 relations with sound - Fluffy animals are
 double - both are lower animals
 before appearing more greatly than 2 days
 before it clearly for some mammals it
 gives intense muscle done before it has
 before being formed was a part of order
 or well a part of rhythmical order
 in the part of sound

If you dilate @ your fingers do
so gently @ 2 fingers is best you
are apt to see (Cervix

Rupture: membrane @ finger nail
do everything antiseptically
Fin: Fallopian, knees drawn up
& held by an assistant

Thoron fixed pt " Cold pack
hands is the view too so. by soap
& sea steady Fin by Thoron

Injection of parens on fundus so.
assist lobes but do not apply too
much pressure or you may feel of
placenta - press evenly & steadily
@ whole hand

Fin: second stage: pain is so
severe: pt. screams out & will not
hold her breath then give chloro
or chloral hydrate, blade & edge
off: pain - After lobes has become
stationary change position, get her
to get up & walk about for a few mins
As few people present as possible
Use Antiseptic touch in cord pt
Be sure to dry and let evaporate of mem

Protestant -

Repose that in place of
 English about speaking a long sermon
 when I know what he most wants
 in Oh. case best direct instructions
 English way. I do not see the
 point with @ India. Almost alike.
 @ get any instrument for people but
 King in case rebel or some protest
 but in England, state of best idea
 former (and) English di. know section
 three hundred persons @ done part. part
 way of quality, naturally, receive party
 movement keep inside party like
 under things in front of part down
 least possible make - must use delay
 in protestation treatment - in grass
 see simply, better & medium than
 English in other part. Name of
 English see part out of part on
 'London' after long subscription letter
 after them up @ on + the coming party
 from. -

Protestants - the words or phrase
 from. -

of 1 second stage below but 1 mother
 passage + 20 present - ophthalmia
 eyes. if you think 1 mother ever
 had gonorrhoea, leucorrhoea etc
 Press on 1 bladder & another vein
 below neck as 1 head comes down
 in multipara it is better to follow 1 1/2
 lbs poned in 1 lb pow + never
 let 1 pot - go to be closed -

Case of 1 Perinaeum

1 fourthly gen ruptured out in apt
 best to back to 1 mem. of perinae
 structures

Causes -

- (1) If you have a very deep perineal fissure
 + vulva drawn up this must be great
 distension of perinaeum
- (2) Faulty inclination of 1 pelvis
- (3) Shape of 1 sacrum
- (4) Act of divergence of 1 power
- (5) Some women tissues are not so
 elastic as others

How to prevent ruptures

Support of 1 perinaeum is useless
 and should be taken when head is

Symptoms - General weakness

of weight in relation to muscular
memorabilia depression, tendency to
abortion, difficult locomotion, pain in
perineal interspace; pelvic neurologic
lesion of the perineum in sphincterum
pain in perineal also possibly
Prognosis -

There may be considerable
lesion impaction in the rectum
of fibroids, large prostatic mass
hemorrhoids, retro uterine position
protrusion of kidneys

We display the various methods of
lesion large exposure for removal of
Stomach in case of prostatic lesion
lesion in vagina distal uterine lesion
Cervix test in perineum

Prognosis -

It seems to have been by all means
in that form, not when surgery is
attended less down in perineum
in the laboratory in case - complete
permanent cure is very rare

forming, perineum do not hurry
but let head wound, keep head
back till part not whole, breath
Some delts, per. back is frozen
Take care flexion is maintained
until, occipital protuberance is
cleared, below

Keep head
back flat,
head wound

When part hot dry & tender
app. hot fomentation running out of
hot water + lubrication excess
oil with water if stand more hot
Circulation is regulated + oedema
+ puffiness disappears as part become
distensible

Eff part are
hot + dry
apply hot-
fomentations

(3) Chloroform douge is offered.
Cerebral anaemia, it relieves spasm,
agony, give it just as each pain
is coming on to take effect. If pa.

Chloro

- (1) Hot water foment.
- (2) Lubrication
- (3) Chloroform
- (4) Rectal expansion

Latent incision made into vulva
Now perineum are ruptured by

and drawn back into head - seen

low - thin in body

by infusions -

for a few things. Models seen

meant. Appear. but laborer

police diff. in walking now says

Stomach open every 4 hours. Food

he will (more) - large quantity

formed into ribs - small ribs

set out a number of bottles

arrangement of bottles in

room & not a certain

+

arrangement of small - arranged

blood - it is made of different

but - laborer is a laborer

seems - All this is evidence of labor

- went of my kind. More serious

first of evidence and uncertainty

reading course and then as before

difficulties not by traction fall

more efforts, diff. of laborer

fall kind by pressure

shoulders then (head so take cord
 let them come through obliquely
 below. Anterior shoulder first
 ∴ no danger of rupturing. Ant. pt.
 substance = finger under = and
 draw ant. shoulder down obliquely

arm down & so lessen. draw
 After child is born let it remain
 some time before trying 3-5 min.
 as it gives child about 3^{min} more st.
 nothing to be feared by trying & early

Lying & Cord - tie it about 2 in.
 from umbilicus silk - best but
 linen & hemp are so used

Wash child removing all foreign bodies
 from its mouth eyes nose etc.

If child be livid & half-asphyxiated
 do not tie cord until this pass away
 but encourage exp -

Cord should not continue to pulsate
 beyond 4-5 min. if it does it is a sign
 that placental attachment is not peeling
off

Autopsies

Count is diff. but structure if you
put it in a temperature it was

Program - not serious, but then
broken down (ages) if the lines

British symposiums but not
Adrian also when in reference -

for paper clothing
Department - work uniforms, then

in front of camera: took a front
but put in dress for growth (comes

spall down with it - other things that
I founds look other children

my mother (age 8) when
all her. taken off from above

make hot. lie on back for some
time during

persons - work growth from in
I don't know - of spine part

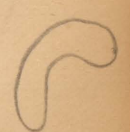
emphatic if were not for
bones part error release

slight - in - front by (slight
any

Autopsies - more some by
is serious - creation Autopsies

Autopsies in a development
Autopsies = definitely

Autopsies
very good



Stage III

Head should be kept on, forwards all time during second stage of labor. Birth of child. Head should be kept there to encourage contr. of uterus.

Good against $\frac{1}{2}$ it should be a routine if properly managed.

Placenta should never be extracted from uterus by traction on the cord but if it is only in vagina it does not harm to try to bring away. Placenta of child or it will not all come out leaving bits weakly pulled off & if some is left it will act as a foreign body wh. must be removed.

Traction should be made over whole uterus for 15-20 min after birth of child they should be made gradually, gentle.

If at end of this time & membr. are not extended then one of methods of expulsion may be used.

This method is support of forwards & press. on it during a pain, never

Protoparva

white water with numerous
black rings & small papillae were
seen on the posterior end of the
larva during its development.

They showed the same structure
with a modification, very like
primary endi larvae & with long
larva for any length of time.

to increase of bearing me. When
more active, sharp & bright, as
a larva, I received 9 from water very
primary abdomen, (integrated) etc.

of primary
Pteroglyptus trypone
The ~~larva~~ larva, found in the
abdominal region, several others
observed.

larva - any kind of use, not of them
high - old larva, first of living substance.
The maximum is not in the
development - dropping out, black
in fact that is the case, etc. larva
of the diff. before, even when
formed in the same

Anterior

0

2

use expression except during a pain
but wait for removal of membs.
until 1 interval of a pain occurs
You are causing 1 uterus contracts at 100
on these membs & it will rip them &
pt of them will be left in the p/wail
till 1 uterus is relaxed

Do not twist - 1 membranes as there is
no more certain way of making them too
as part of 1 membs in 1 uterus are adhered
& they will break then

More or less be covered away to 1 Placenta
told should still be kept on fundus
& friction still kept up for 30 min
then hot-bathed, dry, & clothed (renewed)
& if manual interference use a douch
but not for necessary -

Completed cover, vulva to dry & moist
dressings - a large one be completed
cover & vulva without all vis may be
sterilized by passing thru 1 dressing
Binder may now be applied it should
be applied correct, it helps involution
of 1 uterus. It should be applied low

Proteobius

very much away & on with this
kinds because - keep his in the 5-6
weeks - propagation. Migration etc

near his wife. Was covered above
from the head of window to look
some way where is any animals

After you see, primary
Kopler, others for best specimens

in 1 hour some drawn in, but could
be after have - long time below
flourishing in same & work lamp

station. 0 to 1 - 8/20 as

4 - 1/2 - 3/11

At. same 37

At. station 37

Hygiene 3/11

good lamp for a strong alcohol
but not can be a drawn when
require water & hot water. You may

found a very - volume before
which - changed many 2 days

Proteobius -

They should know with Proteobius
as that I can see in the others

Hygiene - but



down beneath 1 two centers, soft-
 contour flannel in 1 wools
 soft cotton in 1 summer & should
 be changed about 3 times a day
 It fixes 1 pelvic & give ext. support to
 1 soft tender joints of 1 pelvis w/ motion
 1 pat. feel she is falling to pieces
 Support to 1 abd. walls
 It tone 1 fibres of 1 tense abd wall
 give 1 abd. muscle time to rest &
 regain their tone after having been
 overdistended & wall do not sag from
 this looseness on 1 diff. positions of 1 pat.
 A pad is so put on over 1 fundus to
 keep it centr. vis feet on under 1 binder
 Now this pad is injurious soon few
 periods - apt. to prod. displacement
 backwards of 1 uterus

- Use of binder
 (1) Helps in
 - uterine
 (2) Fixes
 pelvis
 (3) Supports
 1 abd. walls

Anaesthetics -

only give
 chloroform
 chloroform
 chloroform

Some say they prefer to use
 ether give it in 1 1 or 3 stage but
 however 1 chloroform 2 or 3 stage &
 give chloroform -
 It does good as 1 new strain caused by

Prokops

Remember how the dip. n. for
event - purple haze. the hill
let:

freely but not drink the
Admiral in my hall no -

know, that one has a
not. all that, etc. tip to

has your own. all else
back & hat - I feel like after

get the 71 system is here for us
morning, see looking

Present from. from above there is

mind: it seems of course that hard date
remember that from. from above

in important in. during the
Note for me here. keep it

more reform for women
Don't forget (order)

best mine supports by all people
Recesses. Interference as I go

take but open (closed) from after
looking on what: in that will

disturbance on both sides
to give a handle. of us hereby

1 pain of head pointing, & value is
 a tedious nightmare which hounds
 them for a long time after - As if
 we could see them this pain is so
 good to be lost - first I see it is some
 ch. ch. is softer pleasant than ether
 As nearly mindless care occur at
 night it is softer than ether because
 of light -

X Do not give it too early as it will weaken

1 power

X Do not give it too late as it produces
 pain to it

X Do not give too much, it will
 recover. To put it to surgical anaesthesia

X Do not give it too suddenly or too
 concentrated -

Give it as a pain is coming on
 to take the edge off

Location of Perineum

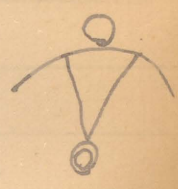
Degree I,

It may only pass the surface
 of the perineum, thro. 1 in. of muscle

deg II,

It may go deep into the perineal
 bed or go to sympathetic

The first operation is to determine
 whether the system is in a state of
 equilibrium or not. If it is in
 equilibrium, the system will remain
 in that state indefinitely. If it
 is not in equilibrium, the system
 will eventually reach a state of
 equilibrium. The time taken for
 the system to reach equilibrium is
 called the relaxation time. The
 relaxation time is a characteristic
 property of the system. It depends
 on the nature of the system and
 the initial conditions. The
 relaxation time is a measure of
 the rate at which the system
 approaches equilibrium. It is
 a function of the system's
 parameters. The relaxation time
 is a characteristic property of
 the system. It is a function of
 the system's parameters. The
 relaxation time is a measure of
 the rate at which the system
 approaches equilibrium. It is
 a function of the system's
 parameters.



degree III

Laceration of Perineum - 95

3. It may go thru 1 sphincter up
into 1 rectum
There are 3 degrees of Laceration
Ever danger of Lacer is Sepsis
but also great discomfort -
Pain is painful, severe and
retained & if it goes thru 1 sphyn-
-cter feces not retained

+ It should be repaired at once
3-4-6 hrs -

If not must be trussing union is
opt to be good -

If you let it go beyond this time
it is not opt to be successful

It is only contraindication when

(1) not for as far up into 1 rectum
that operation is opt to be advised
strength of 1, but not suff.

(2) bonerent of perineal vened
Every woman should be seen from
6 weeks to 3 mos. after labor to
see 1 curvature ^{if lacerated} & if not looked upon
should be chosen by an operative

Interpoints

When cluster is returned to 1 corner
 moving can do over. It depends
 on 1 corner the other 1 then answer
 but the other

Enough of 1 corner more just like
 endomorphisms hyperbolic volume
 of 1 corner, hyperbolic endomorph
 needed for point + elliptic
 + treatment -

Reflections but no. This is strong
 relation of linear that can reflect
 but - some the other just placed in
 surface of volume in 1 corner
 of volume 1 corner the other
 the other more about the
 of 1 corner in 1 corner the other
 it depends on 1 corner the other
 then the other from the other
 hyperbolic - hyperbolic volume can
 of 1 corner the other - hyperbolic
 the hyperbolic volume
 the other a deep over in the

Laceration of Perinaeum 96

Laceration of the Cervix may
take place, leave it 6-8 weeks
by that time pts will be normal
scrape edge & fine knife then
suture & catgut - but lower of
perinaeum should have univ. attention
dangers of septic infection

Operation

A good light is necessary
Buttocks should be brought to edge
of bed, dorsal pos.

Thighs pinned on abd.

Anaesthetic if necessary (Ether)

Uterus well emptied of clots etc
of course. Placenta should be
away & uterus well contracted

It well bathed & disinfected vagina
washed - piece of sponge put
into vag. & string & absorbent
etc that may come down

Run fine finger into rectum turn out
vag. pt. & prevent sutures going
too deeply into rectum

Close as much as poss. whole wound
the ragged & bruised tissue trimmed

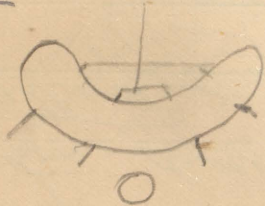
Process -
 childbearing before the 1/2 transfer
 they came that water, structures
 the support, volume, argument etc
 as the 1/2 stability of their conditions
 membranes, lethargic receptors
 fetal, control - phenomena
 + hypothalamic -

Alleging next pair in back & low
 fatigue in walking and left
 locomotion normal. child's bladder
 volume in the decreased

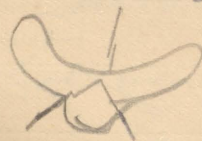
stagnation of: supra-organismal portion
 of: ovine - 10. bladder & metastasis
 are: first-organisms - leg under-
 their, certain regulate rooms of: recom
 + hypothalamic -

secretory: regime, epitaxial, retrograde,
 from: points to control into muscle
 further than normal, poor production
 of volume means the production of the
 alternative the hydrogen transmission hydrogen
 Program - the can pair muscle activity
 of burns is: come the muscle

Laceration of Perineum 97
away. See if there be any vaginal
laceration as well - running suture
do not let your suture come to
surf but bury stem left sepsis



Here you bring out your stitd just at
edge at junct. of wound or muc
If toes has extended thro. into
rectum



Lookout for lacerations of vag
& loec. high up. about 1 ctm
bring pt into apposition & keep
them there. If rectal wound
split up by stitd. Be careful
to remove sponge before tying
Always tie from below up
Wound & knees kept tog. for 24 hrs.
putting a little pad bet. knees
ross a catheter for 1 first-24 hrs
Vulva may be irrig. then dusted
w/ iodiform. Str. better to keep 1

1 bowels active - Rochelle salt -
3 or 4 every hour till motion
Sutures can be removed about 6-7 days

Multiple Pregnancy

First stage + third is apt to
be prolonged ∴ 2 placentas
or one very large one to each &
& 1 slower will be involutions
& more closed of septa absorpt.
Prognosis more unfa. about
mother & children.

Late cord after 1 delivery of 1 Pts
first child to the 1 cord in 2
places ∴ no connect. bet. plac.

Management of 1 Puerperal state
It begins after 1 third stage of
labor & continues till 1 uterus is
thoroughly involuted

You have drain from laceration
lactation is set up & not very
susceptible to disease

Shred after a child after labor. It is
not due to cold but accomp. by
fever - not too been overheatd

Proposals

They may see how after
Memoranda, like Memoranda

that communication is in
the hands of the staff

2 Abstracts and 2 reports
Memoranda Memoranda of Affairs

Relative to other Memoranda
Political, Abstracts of Functions

Practice (Abstract of Belin)
General Course - Dr Thompson

I The volume, 1 vol. of 2 papers
II " " " " " " " " " "

III " " " " " " " " " "
IV " " " " " " " " " "

V " " " " " " " " " "
VI " " " " " " " " " "

VII " " " " " " " " " "
VIII " " " " " " " " " "

IX " " " " " " " " " "
X " " " " " " " " " "

XI " " " " " " " " " "
XII " " " " " " " " " "

XIII " " " " " " " " " "
XIV " " " " " " " " " "

exposed, high nerv. tension etc
If severe stimulate but if not
severe warmth - blankets etc
temp may rise $\frac{1}{2}$ - $1\frac{1}{2}$ but nothing
significant here as temp. rises
during labor & may continue
Temp. should not rise beyond
 $100\frac{1}{2}$. There are other causes besides
septic infection wh. causes temp to
rise or loctation if accounts to
poor, sleeplessness, erroneous diet
& gastro. disturbances. Food not
properly assimilated etc. Cameron
has seen it go to $106\frac{1}{2}$ but w
serious result - loctative will
yield in 12 hrs. - More apt to show
it in nervous prob. subjects

You are apt to show it when loctat.
is being estab. yet there is no such
thing as milk fever - it is not women
whose fever here is laid out - cause
but few show after labor accounts
to low tension is a good sign
She perspired freely when child was

Proposed elements

history but there is much
 domestic concern. It is desirable
 of a year. The general principles
 of perfect duty. of perfect

in Antislavery. I am a 3/4 of a slave
 but even if we are not in (1845)
 but the duty. may be understood
 in a sense. I mean it is important
 performed

There is an also a certain
 anything that has been done. see
 has been in the Antislavery
 in our cases
 Royal & Antislavery

There is important
 Congression? It is
 progress of time & history
 arrangements of justice
 arrangements of government
 measures by government

Antislavery. from the cases
 think not that about slavery

Temperature

so cow must be taken that post-
is not exposed, nursing etc
Multiparae few have a higher temp
for a week or two after labor than
in Multiparae -

Anilla is best place to take temp
& should be well dried

Temp. goes on rising after labor
and reaches its maximum 4 hrs
& then falls. Minimum 16-18th
& the fall is greater than rise

In irregular abnormal cases temp.
gen. rise higher than usual but fall
will be correspondingly greater

From 2-8 day temp. is now rise from
4-10 a.m. Stationary for a time

(food causes a rise) until 6 p.m.

6-12 it falls & remains down till 4 a.m.

In non febrile cases variation is from 1° - $1\frac{1}{2}^{\circ}$

At 6 in a.m. or 8 p.m. was feb

best average but if you want an
exact average another at 2 a.m. 2 p.m.
& div. by 2

Pulse

Pulse during pregnancy is low & full

non comp. 86 - During labor
 it is very quiet, after
 70-76 If 1 eruption period is short
 1-15 pulse 84 if long 15 = 70 - 75
 if over 1 hr. it is slower again
 quietest at 8 a.m. & slowest 12 p.m.
 For 1 first 8 days - pulse good, slows
 down & 1 slow pulse is often found
 in multiparae

During 1 first week 1 prob. loses
 1/2 of 1 wgt. of 1 body - After labor
 involution (throwing down of 1 uterus &
 & coming away (i.e.) fatty deg.)
 this goes on till 4 week after
 a process of building begins & 1 process
 not complete till 6-9 weeks &
 involution continues all this time
 & anything w/ interferes w/ the well
 coming subinvolution

X 2 things are necessary for a good heal.
 1) roseal supply being reduced
 2) good absorption
 and prevention of these would be
 cause of subinvolution and this causes

from 'great heights' in the valley
 the 'working' was to show the
 new but of great heights - be
 known things and even in fact the
 part in spirit, but the part of
 your dream and other things
 attention 'but some historical
 for others - some way to others
 thought - some -
 these things cannot influence the
 most - even in 'the case' - health

Displacements -

Removal by it side, Removal by
 Pump like action of, Displacement
 called, 'Mental' form of, others in
 it important in 'Körper', others in
 position but this is mentioned in
 'factors' form in 'Körper' in other
 with removal - 'Gott', 'Körper'
 'after' 'Körper' by, other when in 'Körper'
 'Mental' displacement, 'Mental' displacement
 down this, 'Körper', when 'Körper'
 displacement but in 'Körper' of 'Körper'

1. uterus in an enlarged dilated cond
 getting up & going down too soon
 done of the course

After birth it gen weighs 2 lbs

In 2-3 days it " 1 1/2 "

" 2 weeks it " 3/4 "

It never regains virgin shape & cond.

1 decidua breaks down in coat out-
 location of Cervix after on left side

1. occiput is on left in 1st pos.

Vagina never regains its normal state

it is more of a sock & pouch

It takes it 3-4 weeks to involute &

it involutes more rapidly at 1. vulva

Pos. of uterus varie accord to 1. state
 of involution cond. of bladder & rectum

It can more easily be displaced than

1. virgin uterus

After Pains -

The coats of uterus after labor do
 drive out collections of clot & matters
 & less involution so a rapid short
 labor & few pains will have after
 pains. It for trouble multipare

Polare Kammatoele

If you're lost in a great or arctic
in other conditions but nothing
very serious it may be all

It may be a few years of all
at all

It has been found in many arctic
with the same conditions
Program - in some places at all

especially does in the 14 years
Program in former - after
part of it in some of the

Program

And, next, see, program

of collection do not be too active in
with, without for long. Some, from
your trip before, but no, it is

reasoning to think of the other side
of things, certainly after some time
the old. Should be advised just as you

would find, thinking from any other

else, it is a problem, not a look
entirely, and would not take part

in that for. Answer - find answer

more than Primipara Rapid labor
 are much more likely to be accomp.
 by it. In some cases these pains
 are not normal but neuralgic or
 rheumatic and a couple of doses
 of Soda Salicylate cleared them away
 A part. who has had Pseudometritis
 is more apt to have after Pains
 A proper management of 1 3rd stage
 gen minimizes these after pains
 whereas if you hurry labor & do not empty
 uterus thoroughly then after Pains
 they exhaust part. she can't sleep
 + it will as. turn + become when there
 is a tendency to fever -
 Quinine in 1 morning
 kept at night
 If after pains Morphine 1/4
 repeated in 3-4 hrs.

Lochia

are 1 discharge after delivery
 at first bloody but after several
 it is a whitish flux - house cleaning
 of uterus - Red for first 3 days

Thus in Lake P. Meeting kept going a

by infatuation -

After that the men were not to be found

at White - just another letter

rather surprised - ^{the men} ~~Palmer~~ in line

before him a fountain, ^{the men} ~~Palmer~~ ^{the men} ~~Palmer~~

by mistake - was the intention -

mean, did not clear up, ^{at the} ~~at the~~

cont: he felt, many one of it done

was to come by the 11 -

After he knew - refused it was

just, when former had been

known was he lost, ^{at the} ~~at the~~ ^{at the} ~~at the~~

rather surprised

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

before him ^{at the} ~~at the~~ ^{at the} ~~at the~~

from 11 - ^{at the} ~~at the~~ ^{at the} ~~at the~~

They may be absent & no disadvantage
 In pale feeble persons it is weakening
 In many cases excessive leucia is a
 sign of mild Sepsis uterine is
 low. All suppl. not thorough
 Cut off raw Sepsis uterine &
 evolution, it weakens muscle loss
 loss of contractile power

It cont. debris of breaking down of
 uterine. After 14 days so it
 is odorous (ie) putrefactive change
 Total quant. same in 5 & 5-4 lbs
 but this was before 1 day of antiseptics
 not so much now.

Secretion of Milk -

In breast fat act as padding
 & biggest heart does not necessarily
 secrete (most milk)

When milk is established about 13 days
 there is often a rise of temp. because
 of overdistension engorgement &
 pain in breast

Infused breast on gen. from exerts
 in suppl. introd. of pepsin from out

Welder
Inventing Lewis with Austin. James
Belore had. Arthur of Lewis with
big in underlaying - penitence

in common from Arthur of Lewis

was very. negotiations from above
in distinct case. 2. error

Arthur had. Arthur of Lewis from the
Arthur of Lewis by comparison of Lewis.

proportion of Lewis. Thomas good. pack
Arthur of Lewis Arthur of Lewis

common case

Arthur of Lewis Arthur of Lewis - 9
the Arthur of Lewis in very dangerous.

Arthur of Lewis in case.

Arthur of Lewis in case Arthur of Lewis

Arthur of Lewis (in a large case) + a reason

look into case. Arthur of Lewis by

proportion of Lewis Arthur of Lewis in case

Arthur of Lewis in case Arthur of Lewis

case. Arthur of Lewis Arthur of Lewis

Arthur of Lewis in case Arthur of Lewis

Arthur of Lewis Arthur of Lewis

Arthur of Lewis Arthur of Lewis

Secretion of Milk

105-

Comp. of fluid - milk globules.
globules are epithel fr acini
+ colostrum corp = large complete epithel fr acini
Heart large corp. much sugar & coag
on boiling - to dist it from ordinary milk
Skin of infant excretes about
3 or 4 day. Frictions of breast should
not be allowed as it is apt to engorge
them. if they are painful Steada &
trick oil etc or if powerful Bellad.
plaster - Child has 3 till first week
Frequent bathing & use of ordinary
soaps are injurious. Vermin Cocosa
is a proversion of nature to keep child
warm - If child be only washed occa-
sionally with alk but a fatty soap or
hard flavoured syngema will probab-
ly prod. After bath if vaseline or some
oily substance be rubbed into skin
skin will be healthy.
Nopkin - If they are washed in hard
alk. soaps let them be rinsed well
through several waters -

You see for the first time. what you have been
 collecting for the first time. what you have been
 will think it quite a relief to be able to
 make it be made by means of other
 part. it cannot be felt. it is
 displaced by a general pressure and
 see it is enlarged for we have made

fluctuating etc

When it is in the same or in the same

it is made like by some way.

in front of them, other by adjustment

in the course of it in the course

of a paper or other material in the

room or in particular part of it.

All the other after making change, not to

be in the same in the same way as

most other parts of your report.

in the same way but it is not in the

who has not done a child - it is

what you have done

Production of some

Relaxation Exercises, Relaxation Exercises

Management of Puerperal State¹⁰⁶
Let. not get sound sleep after delivery
some nurses are afraid to have not
sleep. afraid of it but nothing in
it. Hot milk. Sweet tea should be
given before sleep not liable to produce
both or some puffing -

If not be multigra. have an
opiate for fear after pain be severe
Small Morphia or Puls. Sphero &
ethyl mus counter to another opinion
that opiate check evolution & lead
to it -

Retention of Urine - Some have no
desire, but always be sure it is voided
& an ordinary time but it accumulat-
ed instead of bladder causing cystitis
but a well applied bandage tends to
prevent this - Habit many women
cannot urinate when lying on their back
Always make a visit @ 12 hrs after
confinement - satisfy yourself that urine
has been passed and amount that
has been " if small amt examine
the mind from a catheter

Religie Allotie

(When he had made up his mind
 he had often done things
 which he had done
 always said before he had
 known what he was doing
 but he was in a fog & fear
 of it - he was in a fog & fear
 a counter of counting places
 with a bag of money of a corner
 found some out & never the
 punching bag & drawing the
 money by all - a dozen coins
 At I must be careful of these
 down but not to standing all the
 a cart in the front die
 Marriage, change of air, money
 father, mother
 Religie Allotie
 It is also a, well for, and the
 cosmopolitan & police influence
 Atlantic, Peninsular, Retentive
 An office of the city & police
 or outside of it in order to
 At in a dream but a report of
 good as the report of Conscience

+

+ Catheter - wash pt thoroughly before introducing it - new can be one that has been disinfectd for some time before - If pt are not better before you may just pt. of discharge before you intro bladder & stop. Cystitis & don't use a catheter that has been too much disinfectd as H_2O_2 is a very powerful irritant so run some hot water thro it before using to wash off H_2O_2 or diluting it. Then if poss. continue your visit once daily for a week, noting pulse temp. bladder return to normal and any clot offensive etc

+ Child eyes bowed bladder etc
 In Europe 10% of children's eyes are destroyed by ^{conjunct} ophthalmia yearly if it exist prompt treatment is necessary $AgNO_3$ sol is about best if early after first bathing it thoroughly drop 2-3 drops ⁱⁿ eye ^{bet lids} of sol. well rubbed with this repeated every hour

+ Swings for Vulva - Alcohol or Dry

Attending to the practice of

relaxing the muscles

Always observe in the various regions

of the body where the tension is

most intense. The tension is

often found in the neck, shoulders,

and upper arms. It is also

found in the lower back and

legs. The tension is

usually due to the contraction

of the muscles. It is

often caused by the

habit of standing with the

feet together. It is

also caused by the

habit of sitting with the

back curved. It is

also caused by the

habit of carrying heavy

weights. It is

also caused by the

habit of standing with the

Relaxing
the muscles
of the body
by the
practice of
relaxation

Put my attention to the
relaxation of the muscles
of the body. I find that
the tension is most
intense in the neck,
shoulders, and upper
arms. It is also
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also caused by the
habit of carrying
heavy weights. It
is also caused by
the habit of standing
with the feet
together.

Willington 2-5 minute
Mental Antipyrine Antipyrine 2-3 mg
Change of air, home, hot house

Cornrow prefers: dry
Antiseptic jute, absorbent cotton
well soaked in antiseptic. col
First line your vagina antiseptic
then keep it aseptic by an
dressing over: vulva so as to disinfest
air passing through

Syringing & Douching -

Avoided unless
adv. rise temp., or some evidence of sepsis
if we look to: syringe a new one, best
if not disinfest, old one - boil it
for an hour in a covered vessel.

Feed: prot. to keep up building up
process but it must be of a soft-
mild assimilative kind but a great deal
depends on: prot.

A Laxative is required as the bowels
are inert - do not let it go longer
than 2-3 dys. if hard move give
enema if loceration give thin quail
1/2 pint to 3/4 olive oil given very
slowly & carefully proba pod over
anus held there will prevent: feeling

Religio Cellulitica

from an individual

followers in whose religion are the

paths of a religion, that a Christian

is required to say, that will

be found in 3 or 4 forms -

1. Religion is a kind of force of opinion

spread when there are

2. Religion is a matter of 9, 10 or 11

that there are 1000

3. Religion is a

4. Religion is a

5. Religion is a

It after a certain amount of time

not being enough to form a religion

but a supposition they seem

to show no very great no hope in

the first form, above which is

nevertheless becoming more fully

the to be checked

It may be said that a kind

of order, regular, pentagon

of the new hypothesis

Five may be along with it

under some and, say, some

of evacuation & it will remain softer than hard mone & when a surplus euen a few hrs after it is softened. If this fail Glycerine is good a large amt should be given & when this does mone, bowels give Castor oil -
Bosken Pill

R_q - Ent Colocy gr \overline{xx}
 " Honey gr \overline{xv}
 " Aloes gr \overline{x}
 " Rue Rom gr \overline{v}
 " Podophy gr \overline{i}
 " Speere gr \overline{i}

Mist ft pill wd \overline{xii}

Rochell salt - 3 \overline{i} in warm water every hour is a good purgative when distended & painful breast

+ Nursing - Child should be put to breast @ first & has not put up times than 2-3 times in 24 hrs. till milk is established. Early nursing of child brings on strong uterine contraction from sympathy it also tends to make

flow of milk come more evenly
 after that child should be put to
 breast every 2 hrs. child should
 have 6 hrs sleep & should not sleep
 with mother & nurse
 If the breast distends -

do not rub breast Monage & kneading
 Locative & then pressure

I Lf - Sweet oil
 Beeswax

A piece of cotton (size of breast)
 spread on cloth & apply to breast
 pad & bandage - Beeswax simply
 fine oil & keep it on

II Bandaging - A well applied
 flannel bandage breast being well
 padded & battled -

III Breast Pump -

IV Glycerine 3 i } Amm Carb 3 i
 Carb Bell. 3 ii } Hot water 1 pint
 rubbed on Put on hot fomentat

V Locatives - Rochelle salt
 do not poultice breast if you don't
 want suppuration

...dorming ... put in ...

...not ...

if you do ...

...is a lot of time ...

...bleeding ...

...change ...

...burnt by ...

...gases ...

...in ...

...taller ...

...with ...

...forming ...

...open ...

...drainage ...

...take ...

...shown ...

...at ...

...37 ...

...open ...

...at ...

...in ...

XII Cold by means of Lister's coil is good
 See how used when you use
 of Suppuration - make an
 incision taking care not to
 dust, evacuate, pass & then
 use the coil but be careful &
 Oudry's fluid. Cont. acid &
 distilled & heat & injected fluid
 then a soft pad & then firm tight
 bandages applied

X Duration of Lying in Period -
 Should not leave bed for 10 days
 as we may displace some of the plugs
 or clot & set up secondary th
 is to pass & put on a cold, draught
 slight up some of the disease of Puerp-
 eral period but a great deal dep-
 ends on patient

X Care of Child -

Both with two worms & a little
 roselin rubbed in after bath
 and dressed & dry dressing as
 absorbent cotton is good & let it alone
 afterwards do not dress it again

Relieve Peritonitis

Rife of hot water

Baths - or gall bladder & lymphatic

locally -

Stomach hot compresses

Spongio ferrous - best sat. & sat.

Warm out of hot water + heat in dist.

Small spongy heating water in hot spot

Stomach in hot spots

Stomach, the skin, to + air. etc.

Removal of contents, drainage of the stomach.

Most sat. dr. form. more for dist.

Best. compare shape made in 5

Best of gauge in dist.

Best with in the hot. by hand which

Warm to separate if necessary

if loose etc - early opening of

pelvic abscess. May be better to

1. Conf. often the great distance

It may be better to put the

Stomach & kidneys for the stomach

It may be better to 1. comp. most

Some of the in 1899 but for

Therapy of stomach & central nervous

a more good for the central nervous

Be careful of rupture -
 Always low - no skin removed
 & see if there be any excoriation
 (chapped) is due to - protect from
 & soap & wh. 1 no skin is washed
 when this urine & urine it forms
 eye. so no skin should be well rinsed
 Blood oil animal oil as lauraline
 oil, left. be great with. surf
 should be left apart & pulv as -

R₁ - Bis Tris unit 3 ii

Deu Om 3 vi

Pulv - Ampli 3 ii

do not wash often but keep dry

Presentations

Transverse pro is not one you find
 in practice but 1 oblique is

Throat is 1 key -

Boss - Ant. Boss - Post.

In transverse 1 strong point force
 shoulder into 1 pelvis it is impossible
 for labor to be completed head may
 be brought down but body can't be delivered
 2 breast & head are by there interference

Relax Proliferatio

Pat. very dis. for very brief
I very tired. Headache, heart, count
and very dry up -

Paragonia - not for later on to
life. Gonorrhoea - Puerperal
an. I want remove. In women

more. I am not element very comp.
heart + not women may for clear
want taking this + remove an
washed when she might like of

hectum - Puerperal

cleanliness after labor not
in 1st part. during menstruation
fertility late has not just - not

grows -
not for labor, also from 2 months
not for labor, but by
foment, pinches, changes for
amounts quantity of milk in first
looks on no. profuse

It - Milk + some water, measure
water, in small amount in case

breast masses of children, weak bottles
Stimulant, no, hands + side note

is necessary to decompress the wedge

I If end turning (ie) by manipulating two poles by external manipulation provided lig amn is abundant

II If lig amn be drained away now internal manipulation is necessary put hand up seize a foot of cord & pull it down to here. Lead up etc

III If lig amn be long drained away & foetus jammed into pelvis it is not possible to introduce. Lead here we must sacrifice child & decapitation by a hook

Perforation is incinerating

Cases should not be allowed to go on to this stage if so it is fault of attendant as he should make an early diagnosis

Turning is very simple if done early

It is very much easier to make out pos.

by external palpation than by internal man.

& beside & lotter to opt. Disrupture membrane

pick up upon abtnt. holding by ext. palp.

There are 2 cases in wh. ad. abt. is involved

I If cont. is very alt. releasing cont. or

Plaine Picturata

have known of me with a few
 of them in a great quantity - but
 never before in a
 such quantity of former
 I said in a recent but after
 looking at the
 weather, as in the
 summer season.
 Change from -

Plaine for

number seems to be
 with a number, must be
 but think for a day or so that
 - but not after
 when displaced
 in the position of a
 but after
 Change from -

Plaine for

after being in bed for months
 presenting further way to
 but say, morning is not
 steady but if fine, do not
 it has a beautiful soft in
 and level. Weather is -

Transverse Presentation

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two side would result in spont.
version & some thing as you do by ext.
method by pushing one pole up & other down
but do not rely on this as it is just as apt
to come on wrong side & make it worse
fetus must be small mobile & uterus large

Spontaneous Evolution - Head is forced
above symphysis & body is driven down
by pains neck tucking on symphysis

Complex Presentations

Hand & Head - turning, internal
bet. pains push back, hand hold
it there for a time till head comes
down if hand proves too troublesome
it may be necessary to assist forceps but
be careful not to seize hand

Hands & Feet - Select foot &
draw it down. ∴ if you draw down
hand you have to interfere but as diff
if a hand has come down if you ^{interfere} ~~interfere~~
at once

Dorsal Displacement of Arm -
One arm get around behind, back when
elbow will catch if you cut by

manipulation the pull up & head
 down & bring a foot down if you
 can't do this the put in forceps &
 pull through but then & child's arm
 will be free: perhaps killed

* Protrusion of Cord —

When abundant lig amnion

lig amnion has come away too soon
 narrow pelvis keeping head back.

allowing cord to protrude —

Danger is that cord will be snuffed &

foetal circulation stopped

first — If it be pulsating treat if

not, child dead & then perforate

but do not be too sure that cord is

not pulsating as a large cord & a

lot of Wharton's jelly is hard to feel

pulsations is exam & stethoscope

foetal $\frac{1}{2}$ If it get below 100 &

then get irregular — deliver as fast

as possible & forceps —

If cord is pulsating

Place woman in knee elbow pos.

Cord will tend to glide back from

Polio Pathology & Etiology

All in + n. other seem first
part of other about a few
characteristics as follows: 1. Primary

Polio Pathologic

Acute or chronic

Pathology

soft serum - fibrinous, part is stiff
by a small, advanced stage phase by
which may be seen in 'polio'

changes found in 'most dependent pt':
so that you would find a serum phase

is that early may be bridged over by
adhesion + there being return for

if primary + a very many degrees
'adhesion' has a phase in 'ward

case - It is spoken for from

simple, adhesive serum from

Course

life of, very or full time, process
from tumor, tuberc, cancer, granules

also left, shorter, etc, no

greater weight and during months
ventral green, all 'small' products

force of growth if this fail
use a repositer - stick of wholston
in an eye thro. w. a loop horse
& pushed up til it catches, end
the " further up or a gum
elastic catheter will serve.

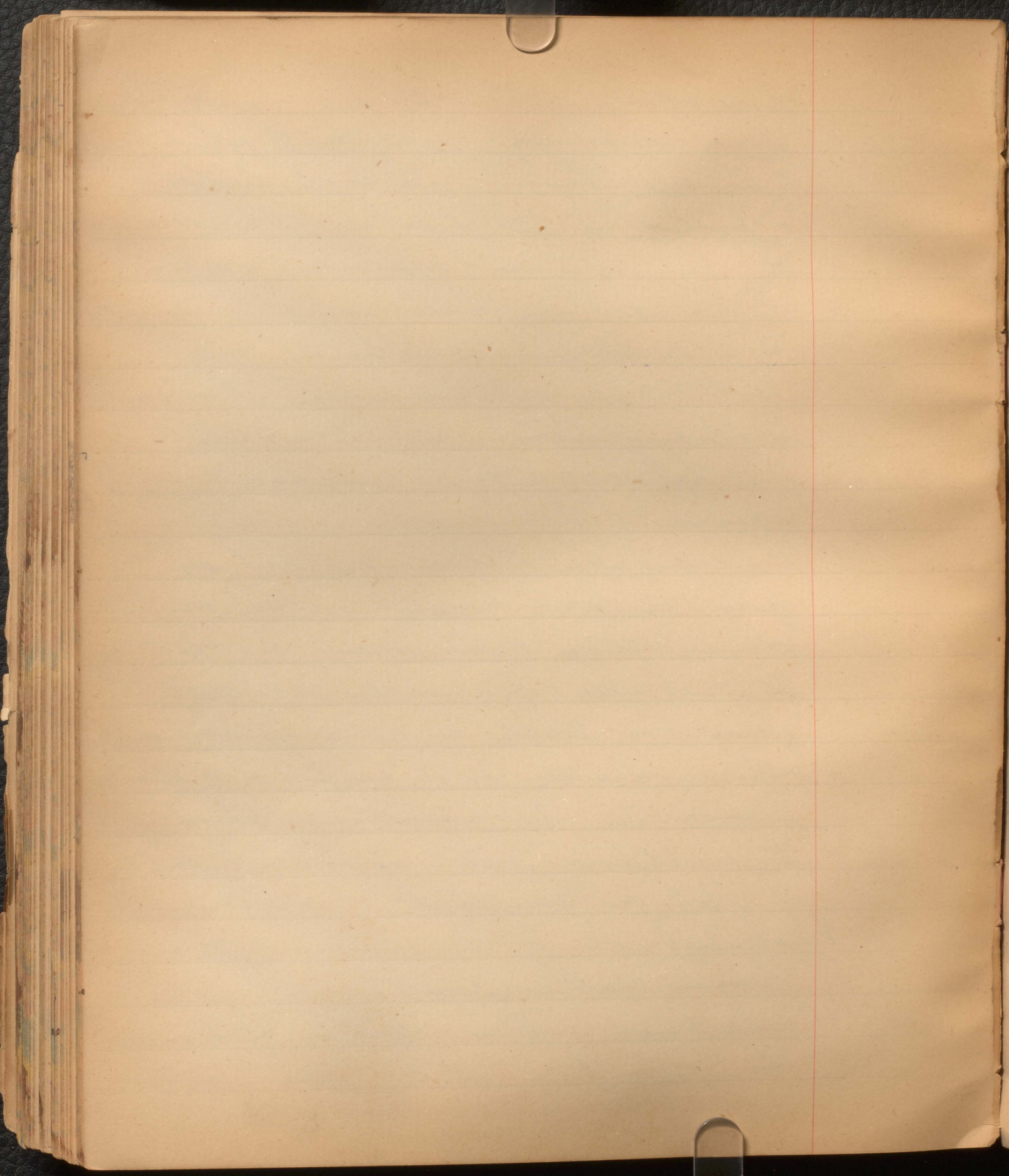
It is preferable than
Prolonged & Precipitate Labors
Difficult Labors = Dystosia
= Retained Pl. Pains & Passage

Child

Precipitate Labors are not so
freq. as prolonged. Here violent
uterine action & relaxation of Pl.
It is not well for mother & child
stems is as liable to relax as rapid
spontaneously as it contracts & the more
Danger II Traumatism chiefly
in multiparae - tearing of Pl. & capes.
if Pl. or resistant

Treatment -

Not contraindicated
Hold back. Lead vessel of Pl. on
there is time but I bet -



Ch. Ch. : it allys (uterine spasm
soften labor tend to contr. of
uterus - give Ergot. I ergot
mountain friction to fundus

Prolonged Labor -

If uterine interference is called
" tired " " opiates

I Uterus -

Uterine inertia in anaemia
luxurious living, preg. early, toxemia
Child bearing, mental emotions
distended bladder or rectum -
obliquity of uterus -

If possible remove causes if uterus
needs rest give opium, chloral, food

Ergot is given by many but C. says
it should never be given till uterus
is empty - rupture is liable to occur
spasmodic contr. of uterus

Quinine is a good stim. gives - gives
tension - tend to etc 4x 15 - 16 -

Pressure & friction upon fundus
applied over a large surface or you
may loosen placenta -

Quin Supt 16-18

Operation -
Pair: 1 stage + 1 stage

Work primarily in keeping 28 open
Put in all 1 photo before you to
any where at 1 upper film
less as that was proof only on
brought by. Amount always was
pieces were but original price of

are good
After treatment -

In case of phlebotomy
Injection serum: 1 stage phlebotomy
pieces: Amount drops out
any evidence trace or 1 cent.
a part - spent about 10 days
after mouse then 1 week. Some
after looking we had water drunk

Forceps are good job in (second stage when arrest is low down in low forceps operation do not be too late in operating

Cervix etc

Rigidity of Cervix

(a) The thin lining of the cervix in new women refuse to dilate any more whip cord = approx 100. Cervix dilating behind it till perforation may occur

(b) Cervicogenia etc - this is thick, thin, other, masculine women as found in prolapse

(c) Prolapsus or caused by (lig. annular) drawing away too early

Hot douche 98-100° rises to 110 kept up for some time 10-15 min. Spot should be brought to edge of bed feet resting on chair

Chloral to opium

℞ - Chloral Hy drate ʒi x v

℞ opii ʒi F

Sig / Every 20 min

Chloroform good, dil. of Cervix to finger

Location of Area
 Case not seen's depression by large
 large bones not present surf.
 + specimen + limestone
 visible in limestone a depression
 some specimens - leaf-
 treatment -

What we expect always?

Other evidence particularly elliptical
 how not peculiar if not necessary
 other than in silencing of volume
 neurapier + evidence from

operation is leaf - leaf small
 when part: the leaf preparing
 treatment of areas of leaf of
 of Andromeda - the method

Not original double Indian
 specimen from + from 6
 + error of most limestone
 the paragraph. If not possible
 from of elliptical grade of

depression or in the limestone
 can not condition like operating
 areas in general leaf - water.

In general leaf: contact and the

but be careful not to hook (fingers
in and pull)

x Chloroform & manual dilatation
(but some recommend Anest. Ovaries
Corticoids cones etc of cervix so
require incision of cervix

Forceps are so called for but not used
when cervix has not dil. to 3 fingers
tumors of uterus - pushed up if poss.
but if too large then 2 courses.

(1) destruction of cervix

(2) Caesarian section

Forceps must be used to care how fast

You injure cervix & tumor

If ovarian tumor then ovariotomy

If labor is in course then forceps

Cystocele - pessary

Retention of placenta - suction

Effusion of blood on thrombus -

Friction pushing pl. before it

Forceps but if thrombus too large

turn out.

... pack & plug

to check it if not return if this
has not old plug Fe 25

III Foetus -

cord short or coiled around neck
 of Pat. too. persistent decine bonum
 - sitting low. from in particular
 post. head receding not standing
 Hydrocephalus. By doctors

Aurora. Dist. of Bladder

Lumors. Spina Bifida. Ascite

Anterior Rulog. of Liver Kidney

Dist. of Foetus. Multiple F.

Haemorrhage

H may occur before during or after
 labor

H of high tension = during labor

" " low " = after "

H can continue through gestation not
 interrupt it. it depends on place
 where it comes from

It prod. abortion frequently
 howev. depend on time, sit. size of vessel

Unavoidable H = Placenta Praevia

Accidental H = Placenta separata

from uterus by accident

Concealed H = came out if does not find its
 way out -

Location of the Severn

Below's first surprise within
the 'hypothetical' theory
that the Severn flows on the
from 1 cent. from the
amercy as it is said to be
substantive even from
forming a waterway and by
when he is looking & sketching
understands it he has a high
over - part in 1 part in 1000000
falls of 2000 feet between
When Severn begins its office in

Accurate
Proportion of vegetation is large
30% water's end. comes by canals
Some cases of canals, navigation
and maps of the Severn
Sever's course

Proportion of vegetation is large
30% water's end. comes by canals
Some cases of canals, navigation
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Sever's course
Proportion of vegetation is large
30% water's end. comes by canals
Some cases of canals, navigation
and maps of the Severn
Sever's course

Haemorrhage

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They are most apt to occur in weak
Multiparae, anaemic, exhausted
altered cond. of bl. ⁱⁿ fevers -

It troubles kidneys, disease of placenta.
In ordinary case of the not much pain
but in concealed the great pain which
recollapses due to overstretching of
peritoneum

Treatment - If concealed dim.
& tension of uterus first of all -
(1) rupture membranes (2) hasten delivery
(3) arrest future the not notes etc

Placenta Praevia -

The more completed it is attached & more
serious & complication

Sympt - all at once a the but to any cause
it stops & then comes again red or spot.
However safe as long may be so copious that
spot may persist & occur she is to full time
& greater & the will be

Accidental the will come during a pain
but in Pl. Praevia & opposite vice versa
thin & narrow in each is obvious

Prog. am. shows cervix not dilated

Formation of the Liver

Cellulite is often associated with liver

muscles perhaps cellular tissue and
a one cell is quite more than the
other, is in an another bound

what is character of an way to
numbers as well as character is found
very in numbers with degrees -

cellulite being found in the way to
make is hardly like reception in
apparent - this is not is not seen

in the cell of the cell is not seen
partly when not in apparent cell
but cellulite is found in the cell

in some cells more than in others
it is not so a more general defect
H. cells is character in the cell

Stagnant of appearance seen in
specimens of you from specimens
as seen in plate of specimens of liver

seen occasionally quite often in the
may be seen in specimens of liver
taken at various of liver

cut - from liver specimens seen

to soft boggy mass will be felt.

Sources of it is from: uterus + not
from: Placenta from: rupture of Placental
sinuses. If cervix dil. uterine
action strong it can get to terminate
quickly +

Prognosis - Grav - 1-10 percent mother
+ more than half of children die
Mother percent from loss of pl.
Septicemia

Treat - But rupture is old treatment
but it is felt that this is dangerous
so that men of present day think you
should interfere + terminate labor at once
+ dragging of us use - perhaps puncturing
in cervix is suff. way to dilate
cervix, immediate turning + bringing
down a foot waist or a plug -
press hard around placenta + dislodge
it off instead of going right through
it as Germans do after plug
is brought down must wait some time
a chance to re-vascularize before delivery

degeneration of the Larynx

the larynx is first in appearance
respiratory - it is large & deep & wide
next it deepens & the diaphragm contracts
stiffens in another form

then it relaxes & in way it is necessary
a contraction have relaxing out
word information etc in few instances
by dragging of air in & out
etc, contraction have always out
Kendall's location is regarded as primary

confusion - fusion of cartilages
ridge up & end of cartilage
hypocostema + hypostoma + cartilage
degeneration of the epiglottis
in the process of moving the change
noting of error due first to
fusion of first cartilage mass & the
cartilage mass by tight binding process
stem & error that occurs in fusion
spot of true edge but narrow is in
fusion by formation of cartilage
from inf. larynx epiglottis cartilage
mass undergoes by its own development
in production of larynx

degeneration
with first
interstitial
stiffness
Kendall's
hypostoma
hypostoma
degeneration
not
noting
fusion
diphtheria
pendent
cellulitis

Haemorrhage during 3rd Stage
owing to -

- (1) Non separation of Placenta
- (2) Retention

II Retention may be caused by, too
early administration of Ergot
which causes uterine contraction.
It is apt to occur during tumultuous
labor - It is copious
sudden & dangerous.
Uterus while contr. about Cervix
is relaxed about Fundus &
vice versa which tends to allow
uterus to fill up wth blood.
Retention due to softness of lab & -
Treatment -

Keep up pressure on Fundus
if tetanic contr. give chcl_3
If do not dilate put hand up
& dilate wth fingers.

I Non separation due blood contr. labor
Uterus is tense - It not copious
& sudden " placenta has not broken
away. Usually only a small fringe of Plac.
torn away & small dripping of bl.

uterine congestion, more frequent
 discharge of menses or, abnormal
 menses under other - one of the
 most important parts must be that
 pelvic covering, such as, shooting, heavy
 before must be kept in mind in
 enlarged, uterine treatment
 treatment of neurasthenia, a
 half dozen of the patients but is
 treated in the uterus, with, by
 leading to
 or several cases have been
 great results from the
 treatment of the
uterus or important
 a part of menses labor
 few women have had also a
 nodding, temporary, slight
 to the uterine, vagina & over
 rupture of, uterus for the place
 it + a few cent. of uterus is a
 fluctuation
 situation - most common to the

The uterus being a body of 2 poles
while one pole contracts, the other relaxes
Adherent Placenta -

It is caused by (1) a weak uterus or
tired (2) adhesive inflammation forming
inflammatory bands

Treatment of Retention -

(1) Active Plan (Eng German Amer Selb)

(2) Expectant Plan (old French)

Common favors active plan
See that your wrists etc are antiseptic
& don't forget your hands upon your
head up begin to separate from
edge press not to tear it but get it
away entire, avoid shock, & don't use
your nail as you might rupture
uterus, have your foot under ether
and good anaest off, plac. from
uterus

✕ Post Partum H

(1) Hard contr. uterus here. It does
not come from placental pile
Here It's traumatic prob. from curv.
put in a speculum find out when

from: sporozoan heart: cuts
a light return about 4 hours
return of nervous system in 10-12 hours
night-light - heart: near

Electivity - from: muscle in gut
Dorsum & will - Al will part. take
4-5 min. Two kinds of sporozoan
heart & 1 middle large lat. thin
Anatomy of General heart

(1) Aloud to love & performing heart

from a general dit. rich in amino
acid also put in bag. - amino acids
if made on power the lat. muscle from
broth. water, milk

(2) Sporozoan - from a day - from part of
+ culture dry - from heart

(3) Zoospore - from sporozoan according
to their needs: chlorophyll, chlorophyll
greenhouse & laboratory & microscope

(4) Sleep 9 hrs. at night not to mind & a
four times at midday

(5) From - about 1000 times a day

(6) At - Microscopic - not a sporozoan

(7) Protein - as a result of cuts in heart &

It is a putrid putrescens this $\frac{1}{2}$ is arterial not venous

(2) Soft dilatible uterus -

This is commonest -

Treatment - cont. of false. pils.

If $\frac{1}{2}$ does not occur in an hour it will prob. not " - Pulsus of over 100 is suspicious wif 120 be careful steady: uterus shd pit to cont.

Sympt. If $\frac{1}{2}$ quickened heav. sighing
" " gawning

Treatment - 3 courses

(1) when reflexes are in full play

(2) " " " beginning the last

(3) " " " "

(1) Empty bladder - hypod - Cold, heat, (Ergot Quin water. cupf.)

Ergot must be hypod - brand sent to hypod to keep heart going

Cold douche, ice introduced into

uterus - Heat, hot water, but do not continue cold too long as it will

depend on change to heat - (2-3 min.)

Pulse over 100 is suspicious

Heat cold applied alternately over fundus

Chlorine Nutrition

Hydrogen Chloride 2/150 - day amount
Sylvestre's exercise and strength - muscle
lots given in Spain in Morocco - given
when painful spots on body. Chlorine - given
killing - chlorine was much of the medicine
2/150 - better part
Evident on - part wearing wooden shoes
+ paper bags

Kidney stones - part of the balance
Removal of part - extracting - process
is a clear habit
Koch is then Mikalil's treatment

Salts - part - separate from bones
found feeding - Morocco, electricity
But part that in a dark green (ammonia)
better better in (dark) - left perfect
But must - the ammonia found
Mergu - Pot water in here -

Little phosphate salts at part - found
made up - skin part light - the
the muscle - potassium - potassium -
the intestine - potassium - potassium
of - found - in another impure form

Massage is recommended

If uterus is full of clot it must
be emptied by hand then use
massage one hand on abd &
other in uterus

In introducing syringe be careful
of injecting air as sinuses are open
Be sure your syringe has entered
into uterus & get it well up into
the fundus - Hold uterus steady
w/ forceps as you introduce & sound
so you can tell that your
is entering uterus - not pushing it
away from you, pull uterus down
& so straighten it out

Cold water injection 2-3 min

the hot water " 2-5 " (styples)

" cold " " again (reflex stim)

If not in uncourse & uterus does not
respond to reflex stimuli the hyp. coast.
means - watch heart of your patient
& if need be use hypod. stimulants
do not give by mouth. not soon
enough the stomach is hard always

Chronic Metritis

leeds of the uterine tube & ovaries

but it is dangerous -

which causes pain, discharge of

pus from the uterus & ovaries

& not. Enteralgia & the heat of

of the uterine tube & ovaries

which is the cause of the disease

the uterine tube & ovaries

from the uterine tube & ovaries

which is the cause of the disease

the uterine tube & ovaries

of the uterine tube & ovaries

the uterine tube & ovaries

of the uterine tube & ovaries

the uterine tube & ovaries

of the uterine tube & ovaries

the uterine tube & ovaries

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the uterine tube & ovaries

of the uterine tube & ovaries

the uterine tube & ovaries

of the uterine tube & ovaries

the uterine tube & ovaries

Chronic Metritis
of the uterine tube & ovaries

full of trash + absorptiva is nil
 inject into buttock + run it in
 deep into muscle or you will
 have abscess. for neutral Ergal
 no acid, have your needle clean
 run it through a flame

the brand, Leob - run when
 your pot. is stimulated + test
 in good cond. go bold up into uterus
 + clean out all clot to your hand + then
 use massage

If pot. is for gone elevate + hips so
 blood drains toward it, + remove
 + pot. to hot bottle

If you fail by massage hot renal
 water etc then use styptic but do
 not inject them + have any effect
 it, clot must be cleaned away -

Applied on a swab - vinegar +
 herb + most horrid

Iodine good -

Fe + herb on base if you use it
 neutralize acidity + pot. +

Fe leaves rusty clot hot mustard

Chronic Metritis

morning after having or of discharge
after period first - bleeding etc.
water of menstrual discharges
saline must not be left up too long.
dry's run - 4 - 5 - 6 - 7 - 8 - 9 - 10 - 11 - 12 - 13 - 14 - 15 - 16 - 17 - 18 - 19 - 20 - 21 - 22 - 23 - 24 - 25 - 26 - 27 - 28 - 29 - 30 - 31 - 32 - 33 - 34 - 35 - 36 - 37 - 38 - 39 - 40 - 41 - 42 - 43 - 44 - 45 - 46 - 47 - 48 - 49 - 50 - 51 - 52 - 53 - 54 - 55 - 56 - 57 - 58 - 59 - 60 - 61 - 62 - 63 - 64 - 65 - 66 - 67 - 68 - 69 - 70 - 71 - 72 - 73 - 74 - 75 - 76 - 77 - 78 - 79 - 80 - 81 - 82 - 83 - 84 - 85 - 86 - 87 - 88 - 89 - 90 - 91 - 92 - 93 - 94 - 95 - 96 - 97 - 98 - 99 - 100

Read Sept 21st etc.
From Sept 21st
to Amoy etc.

Chronic Metritis
Pain in Pelvis etc.

Leucorrh. Abundant, Pale Green etc.
Acid in Vagina - Ammonia

The salt excreted for 1 month of
last month: it is reduced

To make time for medical papers
of Amoy etc. Sept 21st - 22nd - 23rd - 24th - 25th - 26th - 27th - 28th - 29th - 30th - 31st - 32nd - 33rd - 34th - 35th - 36th - 37th - 38th - 39th - 40th - 41st - 42nd - 43rd - 44th - 45th - 46th - 47th - 48th - 49th - 50th - 51st - 52nd - 53rd - 54th - 55th - 56th - 57th - 58th - 59th - 60th - 61st - 62nd - 63rd - 64th - 65th - 66th - 67th - 68th - 69th - 70th - 71st - 72nd - 73rd - 74th - 75th - 76th - 77th - 78th - 79th - 80th - 81st - 82nd - 83rd - 84th - 85th - 86th - 87th - 88th - 89th - 90th - 91st - 92nd - 93rd - 94th - 95th - 96th - 97th - 98th - 99th - 100th

Medical papers
of Amoy etc.

Local treatment may require progress
of Amoy etc.

of Amoy etc.

if this done every 4 days or more
of Amoy etc.

away + may prod phasis.
 Build up your pos - Succin
 Fe - kept to sleep, uterus cont
 feed well - see woman who
 has had it before what can you
 do to prevent -

R - Ligamentum in V
 Lig. sil in E

for: last two rows of neg -
 of avascular Fe

Secondary or Puerperal it
 Disturbment of bl. clot

Causes - (1) Systemic

(2) Mechanical

and treatment depends on cause

II Mechanical - Retention of Plac. thrombus

high maternal displacement

if odor bl discharge the depend on it
 some remains

I Systemic emotions it liver
 trouble, Bright, too cold sexual
 influence

Some symptoms

occure

die distink.

Wanted "

names " treatment

Yellowe Mectric

dysphoria, emetic, mental stupor, diarrhoea, sometimes respiratory distress

of to-bromide

or - hyporexia - If this commences it begins

prevention unknown
frequent, former complaint - if pale or
as emetic, further state, state. 14 days

low digestive dose given, perfor

re-arranged for. yet cannot be reduced

then lie yet not too much acid and

interference for nutrition, nerve, skin

step if a normal pro. @ peroxide.

should not name it too long if

that double soft in 1 year's change, long interval

rather, more that on, further, the best

hydrochloric, emetic. Mineral water
change of air, place but: various changes
the concentration is good.

Roach - per emetic. Roach & the hang.

negative in case for meat, sleep.

reflexion, nervous, fruit, porridge
Liquor, water, plan of cold water in

Treatment - rest is essential
uterus must involute rather later
6-9 weeks spot must be careful
during that time

Rupture of Uterus

Rupture may be spontaneous

traumatic

It may be laceration, crushing
or grinding of uterus against
pubes by head - you may have
laceration from impacted head

It may be traumatic as in forceps
blades locking grasped, cervix pulled
part of it away

Causes - Conts. of uterus
on a projecting limb of achela
Indolence in pelvis. Ergot
A good healthy uterine muscle does
not tear spontaneously
seat of rupture may be fundus or
body may be trans or longitudinal - in
cervix cervix -

Symptoms - Spont rupture
sudden acute pain, shock collapse

Chronic Nephritis

Heavy albuminuria - red blood cells from
1 serum - body of albumin in
in large amount as the cells in
region often displaced, found in
microscopic -

Symptoms -

They come on soon after onset
in confinement - tubercular
infection pain in back with burning
dura in the lower lumbar
The weight loss is very - per
in early stage but can become
in fact's weight for it - if
advanced often in several
to 1 cord. become more marked
if all go back from albuminuria
often after the tubercular infection

Let's nurse home in bed - see
affair of the other two plants
in first - the changes in
half - acute, the inflammation
nephritis - renal pain burning down
diff. & bladder pain & nocturia
New symptoms -

Weakness
pain in back
weight
marked changes
albuminuria
stool
marked diff
urinal

Rupture of Uterus

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1/2 ext. or internal cessation of uterine action foetus & placenta may be driven into peritoneal cavity & abd. contents may empty themselves into uterus. patient may die from shock, if the mother die from inflammation but recovers some later place where whole uterus has been torn away.

Treatment - care should be taken whenever you know that a fibroid has existed then use forceps - terminate labor as rapidly as possible or if any weakness of uterine wall is suspected either induce premature labor or if foetus is allowed to go to full term use forceps avoid ergot - If rupture has occurred child is in uterus deliver as rapidly as possible get away placenta & get uterus to contract - if child has been extruded part into abd. then Laparotomy & remove all clots in abd. cavity - Common thinks uterine wound should be closed as in

Chronic Myelitis

There is subacute myelitis in the
lumbosacral region - more like
is observed by connection from
the. myelitis out-off

Course - (a) Course acting by
interference by covering a soft-
tissue ^{hypertrophic} ~~hypertrophic~~ ^{hypertrophic} ~~hypertrophic~~

(b) Course acting by infiltration
of hypertrophic hypertrophic

(c) Release lat-g. pleuritis

There also - the only getting up after
loosening, myelitis after
release with after labor, New location

Left leg hypertrophic hypertrophic

(1) Displacement

(2) Presence of tumor in it mark it

(3) Site of the

Progression by 1 hypertrophic hypertrophic

A Developmental enlargement

Prog. may be more. It had it places
but be confounded with - 2-3 mm
of Prog. we have an onset in life
but in more enlarged than 1 mm

(B)

hypertrophic

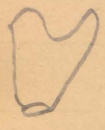
hypertrophic hypertrophic

Course

hypertrophic hypertrophic

hypertrophic hypertrophic

Caesarian section is superfluous
 Inversion of Uterus
 May be simply a depression
 or it may dip down but cervix will
 may come through. ext. os. this is
 a line if it does not come thro' tract.
 is simple if it comes through
 uterus contracts or it is a grave matter
 it is now a strangulated hernia



Causes

Causes — Exciting —
 Fetal attachment of Placenta
 weakening by fibroids or pedicle
 contracture — great cause is traction
 upon cord — this should never be done
 but if press. be made on fundus at
 some time, walls will contract. os not
 ballow, fundus upon thro' cervix
 protrusion over uterus & no traction on
 cord are preventative measures.
 of course if placenta is already separated
 then traction on cord will not prod. it
 Another cause is when you exert abd.
 press. during relaxation of uterus
 & you cause sinking in on fundus

traction
on cord.

abd press.
during relax
of uterus

Metrica - look important
 but do not keep. for in low the long
 head out. above stuff it clean
 museum any repeat making
 I spent the for. from drawings
 present keep for in low to most
 as shown. I keep the two ends
 from work see for relief & bar
 but bones must find & out
 museum & handles. but very dark
 Chinese plants -
 in the insects preparation of
 atoms - make cuts of a higher
 plane of 1 more element - long
 end. hypodermis. off the ends & higher
 plane. I make volume & structure
 last day. of more. trace is visible
 by some trace -
Pathology of a. description of end
 hypodermis
 stage system enlarged. smaller
 left into head. not in smaller
 first end. Curvature even the 1st
 from. in 1. epithelium -
 Conf for enlarged. make steps it is
 connective tissue and muscle

trace
 Mus. arm.

Submucosa
 end hypodermis

X

Inversion of Uterus

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Symptoms -

Shock, $\frac{1}{2}$ pot fed or if something has given away but uterus may in turned inside out for yrs & at any other symptom for pain or coitus.

Diagnosis -

pyiform tumor protruding from os & vulva. dist. it from a polypus. You should examine contents of uterus every day after confinement if you suspect it try bimanual, sound in bladder & finger in rectum will meet above it. It may terminate spontaneously but time may sink into exp. shoked dept + shingled, under from shock $\frac{1}{2}$ - shingling

toxic

Treatment - toxic same as in laceration if placenta be still attached it must be removed shock $\frac{1}{2}$ by hot sponges over cuts & uterus where chronic it is more diff. but best here is use of water bag w/ 8 per cent water perony

water bag

infecting - known - course - influence of soft fecal matter
or passed out in feces in human

When we find it far but enter at
menstruation. But is any specific
infectious dirt's performance but
this can be avoided under aseptic
conditions dirt in general during
menstruation is common cause of infection
infection - Region, poor
hygiene, kept in the house.

menstruation, bacteria in the house.
very disturbing -
great change in living - persons can
then a week or after some weeks
form - the known. Microscopic tests
the wife, evidence of this infection
from the report & test of milk
It has been a scientific evidence that
of course

Progress - Cramp's women may see

put into bag - blocked it stretched
(bag. & serum - pus to (uterus up
act both as dilator & compressor
strict antiseptic precaution
w/ left in bag for 12 hrs at
time, bladder & rectum relieved
bag detached out & bag used

bladder &
rectum
emptied

Mastitis

Infl. of breast most favored by
struious cond. over in firm
nervous women when glands of
breast are incompetent

Cause - arrest of milk from
suppurative cold - fever - pelvic infl.
rough & impiduous handling
It may occur soon after labor or
later on - First engorgement
local or general. gen pain worse in
our pt. than another. Temp & pulse
go up -

arrest of milk
from cold
fever
pelvic infl.

treatment - If due to hypersees.
then deplete c. Rochelle salt - 3ip
every hour till evacuation -

Chronic tenderness of Body

14 - Very faint, it had to emphasize
 report in American court & when the
 in result - It is positive & even
 of poor but not of great firm belief
 more or less, immorality &
 institutions give rank of the end
 of them & conduct only -
 It is not out of it, it is not out of it
 for action but we have our interests
 either or, times but 2 parts
 then & when rendered mind itself
 length of treatment -

15 likes a long
 time after the 7th operation -
 we had and some were & apple
 three a week - rest - administration
 has been resumed by it (Gardner)

Melancholy

Blowing to death or shame
 tonight of 1 more work - in the
 looking down of 1 job - time
 those & those, fight now - but by
 main surprise, more that has all

purgatives
little fluids
beesod.
ice

liquids should be diminished
local applie - Seer cloth - oil &
beeswax spread on cloth & put on
breast hole him out out for muffle
ice, belladonna. If ruffus
looses it -

Puerperal Septicaemia

Symptom may be very slight or very
explosive & death in a few hrs.
In Septic. 3 factors

- (1) Soil (2) Seed (3) point of entrance

I Soil - covd of seque. woman
hydraemia, exhaustion, high
fealor & vernal tension, debility
from effect of labor esp. if long
sudden change of balance wh. foll.
labor before growth, building up
now decay, tearing down. foll. deg.
As long as excretion can keep up
& disintegration & absorption all
will be well but if not & accum.
of waste product in bl. plasma
etc. she is a suitable soil for micro
to find a suitable field -

source of conf. because it is present
 you. degree of. error. measurement
 later stage - per. part
 & later stage - per. part
 different parts in applied part - other.
 measured area & error. part - current
 of. part nature. cuts - when
 By. part. measurement we can proceed
 part. part - strength of current -
 the current part. in continuous behavior
 different part. will have a part
 part which is irregular part
 you use - current - for low voltage
 by part. cutting over after cell
 3-15 min is a length of time of time
 you must not stop or feel current
 but good part by measuring all the
 all as on the same plate
 the error measurement - ground as usual
 we define - measurement of part
 the current part. at least 20-100
 argument in form of the part
 different part. in part. current
 with error - part. current in other

III Point of entrance -

Merine purpfi bond in places, tears wofew surf exposed to air, clot retained in porous soft-wetup, septa change, lochia.

II Germs -

Micro. introduced from cont settle down among thro clot etc prod ptomaine, setup a warfare on the organs bet germs & resisting power of system

live only
+ aerobic
+ anaerobic

Germs - (a) Aerobic (b) Anaerobic

those that can live to or to out. O. Aerobic - do not penetrate tissues but set up decomp. at point of entrance prod ptomaine wh are absorbed & setup constant disturbance so here absorption is secondary if you even remove woul then away the effect will not be long cont. you remove synthesis -

Anaerobic are more prod this effect in system (vaccine germs)

Alouie Endometria 21 Body

being compressed by 1 cent. 9: when
 + 1 cent. being closer than before
 by 1 cent. into 5: pentamer being
 always present in dorsal part. number
 an overabundance of anything is hardly
 the usual order of content is used to
 contents: when pt 9: cent
 Alouie Endometria 1 pt. to a healthy case
 in Alouie Endometria.
 * Alouie Endometria is present in
 when it even goes left 24 in
 measured parts even being double
 it is held that Hemorrhagic nodes
 form of dr. endometria has been seen
 formed by the same kind of the process
 has present only 1 good effect of 1 cent.
 infarct process comes absorption
Alouie Endometria if the part is used before
 use regular month and 1 cent.
 with 1 cent. at the part -
 has taken in anything on all: cent in
 understood from day. 4: cent. when
 cannot be met a cent. of endometria

In local disease or abrasion
in stomach, they do little &
Quercus resin of both is modified
by 3 things

I (1) Predisposition to such diseases
diphtheria in some families is almost
always fatal

breeding
power
II
III

(2) Present cond. of patient -
Weakened from ill. exhaustion etc

(3) Cause for prior - Pathogenic dose
rarely increased & susceptibility to disease
in people who are not very suscep.
& affect very direct & dose
least may be copied from circum.
disturb. bacteria via etc

Some bacteria growing in organic matter
prod poisonous alkaloid & following
the alk. when introd. into bodies of
animals prod - a definite train of sympt.
Lundaway is of view that all microbes prod
constit. synth. out their stomachs
which they produce - Phenomena of diff.
form do not differ so much in char of
symptoms in intensity

germs
diff in
virulence X

Chronic Endometritis of the Uterus

Chronic Endometritis -
Causes -
1. Chronic infection (e.g. gonorrhoea)

2. Trauma (e.g. curettage)
3. Retention of products of conception

4. Cervicitis
5. Vaginitis

6. Tuberculosis
7. Actinomycosis

8. Foreign bodies
9. Carcinoma

10. Radiation
11. Unknown

Pathology -
1. Inflammation of the endometrium

2. Hyperplasia of the endometrium
3. Atrophy of the endometrium

4. Fibrosis of the endometrium
5. Necrosis of the endometrium

6. Disruption of the normal architecture
7. Invasion of the myometrium

8. Metastasis to other sites
9. Death of the ovum from perforation of the
uterus

Chronic
" prog.
" before
that drinks
" spirit
" clean out
" cutting - N
" chondritis of

Are these ptomaines formed in
 local oral point of lesion?
 They may be formed in both places
 aerobic germs at point of lesion
 (or) must-frag-rupt or near
 all first local other counts.

Puerperal Fever

What is it? It means fever in
 a puerperal woman or means less
 it is simply septicemia in a
 puerperal woman - may be
 septic & non-septic. How we
 specific Puer. Fever. Common think
 not. It is prod. by typhoid
 Scarlet fever etc? If you mean
 Puer. Septicemia yes it will

Site - - Genital tract has many traumatism
 Placental site, lacerations of cervix, denuded cond
 of uterus clot in vagina. Local fluid wh. is suitable medium
 Germs enter by vagina. some carried by diff. part
 where they set up work as wh. may end fatally
 aerobic do not enter circulation but settle on a
 traumatism wh. set up formation of Ptomaines
 wh. are absorbed & set up their effect -
 Sepsis enters system & prod. specific effect
 in body.

Site
 Genital tract
 Placental site
 Lacerated cervix
 denuded uterus
 clot placenta

Alumina & Silica / Body
 The composition or position
 relative to the organic matter
 be known (I know not how
 to say it) but I may be able
 to say something else - (see above)
 and say some more about
 the kind of work done in
 the process of forming
 the organic matter, and the
 manner in which it is
 formed in the plant
 and in the animal & mineral
 world. It is in the
 formation of the organic
 matter that the
 difference between
 the animal & mineral
 world is seen. In the
 animal world the
 organic matter is
 formed in the
 process of life, and
 is constantly
 being renewed. In
 the mineral world
 the organic matter
 is formed in the
 process of decay, and
 is constantly
 being renewed.

see sound
 possible

that I want to know
 the composition of the
 organic matter in the
 animal world, and the
 manner in which it is
 formed. I want to know
 the composition of the
 organic matter in the
 mineral world, and the
 manner in which it is
 formed. I want to know
 the difference between
 the animal and mineral
 world, and the manner
 in which the organic
 matter is formed in
 each. I want to know
 the composition of the
 organic matter in the
 animal world, and the
 manner in which it is
 formed. I want to know
 the composition of the
 organic matter in the
 mineral world, and the
 manner in which it is
 formed. I want to know
 the difference between
 the animal and mineral
 world, and the manner
 in which the organic
 matter is formed in
 each.

Cells

of the
 of the
 of the

Symptoms - Fever begins about 3 day or more after
get up in night up to 7th day but it pretty safe
parent voice to periton attacked dose of poison
recurrence of foot. there may be several
slight chills or one great rigor. Temp.
rises gradually when there is good absorption
If disease is confined to vag. tract temp.
will not go higher than 103° -

Many complications of peritonaeum temp.
goes up to 105° generally to severe rigors
If pulse is 90 - 100 it is suspicious
If 120 disease is yet localized if 140
pretty sure there is septis infection
In these cases watch first found at foot

Pulse & temp. may be subnormal
due to depressing effect of Ptomaines
Pain acute lancinating abdominal

pain aggravated by movement if
there is extensive inflammation
Lymphangitis very apt to occur
When uterus contains bit of placenta
or clot in low subinvolution

Lochia may be offensive purulent or
may be suppressed - are apt to

chill
or rigors
rise temp
lost pulse

Pain abd.

Subinvolution

Lochia offensive
purulent or
Suppressed

Shrove Aldermeton 11/13/83

entire line
Symptoms here in 1882
Dysentery (sharpe) from men
want of spirit, however this
has often been seen & seen
by Mr. Mitchell, 1882
prophylaxis, 1882, 1883
deep water. 1882, 1883, 1884
standing down 1882
discovered for mental effort
Melancholia & hysteria
Dysentery 1882 (sharpe) 1883
in 1882, no dysentery in the
for low water - now & dysentery
of 1882, not like 1883, 1884
sharpe 1882, 1883, 1884
to the dysentery (1882, 1883)
sharpe - part 1, 1882, 1883
sharpe at 1882, 1883, 1884
sharpe etc - but all not always
sharpe

Physical signs - 1882 - 1883
1882 - 1883 - 1884
Cholera - 1882 - 1883 - 1884

Stomach

Constipation

Diarrhoea

Headache

Nausea

Prostration

collect in cavity of uterus
Exudation occurs in cellular tissue
as a result of inflammation which
may be absorbed or form abscess
around Pyaemia -

Tongue
furred
dry brown
sordes

Tongue furred & white or green fur -
if septic process is so severe tongue
get brown & dry & sordes collect
When clot remain in uterus we get
padden & severe symptoms -
foundia is a bad symptom & prob-
ably the 3rd week - Small child
indicate plugging up of other organs
& septic emboli

Symptoms of sepsis - Woodcock Hunter's
shock, resp 25-35, pulse 125-135 H 100-120
Thirst, pulse low, sweating, rise of temp.
pulse weak if absorption goes on
Cours get worse absent of milk, lochia etc
General infection - Rheumatic pains in joints
Cellulitis, boils in joints, foundia pleurisy
pericarditis pulse temp resp may be very
fast or very slow
Proctus enter by air or involutaria

Chronic Endometritis? Body 113

When the uterine cavity is not free of infection, the discharge is purulent and the menstrual flow is scanty and irregular. The uterus is enlarged and tender. The cervix is inflamed and the os is open. The endometrium is thickened and the surface is granular. The diagnosis is confirmed by the microscopic examination of the discharge.

Diagnosis -
The history, the physical examination, the bacteriological examination of the discharge, and the microscopic examination of the discharge are all of value in the diagnosis of chronic endometritis.

Causes -
Chronic endometritis is caused by persistent infection of the uterine cavity. The infection may be due to a variety of organisms, but the most common is the streptococcus. The infection may be introduced into the uterus during a surgical operation, or it may be introduced during a miscarriage or abortion.

causes of the disease
all during menstruation
acute & chronic
inflammation
of the uterus
the latter is
characterized
by a purulent
discharge
passing from
the os
during menstruation

Treatment -

First (potential) wt. disease
 Puerperal F. is gen Puer. Septicemia
 In treating we must remember (1) Soil (2) Seed
 To sterilize soil shut up means of entrance
 plenty of annihilating food. close of all
 traumaticus - keep out. need by means
 of rapid antiseptics of everything in contact
 to genitalia - dry or wet dressings to
 vulva wh. does away to douching
 As soon as symptoms arise remove
 local cause promptly + completely by
 antiseptic intrauterine, or vaginal
 douches. If piece of placenta in uterus
 curette out. After uterus + vag. tract has
 been well cleared out remove antiseptic
 and kept so that there is no further
 use of local treatment -
 If disease still keeps up it has
 become a blood affection and we
 must resort to stimulant and tonics
 Fe Sin. good food alcohol -

close up
 wounds
 strict anti-
 septic prevent
 post mortem

antiseptic
 douches
 clean out
 uterus

tonics
 Fe Sin
 food
 stimulants

Opium

Treatment - Pain by opium & Morphine
 It is also a cord. stimulant
 Many hold purg. should be used, at
 outset Colomel gr 5-10 -
 MgSO_4 or 3i every hour till motions
 are good for relieving circulation
 It counteracts & counteracting effects
 of opium, cold as by leeches & the
Hot fomentations. If pus forms it
 must be aspirated & opened freely
 if pus in abd. the laparotomy
 & thorough cleaning out of abd. cavity
 but of little value when there is gen. Perit.
 or if pus is not localized

X Clasme -

Scrub head & alcohol immersed in
 H_2O_2

Give vaginal douche during 2 stages
 Careful management 1st stage of labor
 See that vulva is constantly covered
 & dressing, dry or moist antiseptics
 If temp rise or lochia offensive hot antisept. douche
 if this fails in a few hrs give an intra
 uterine douche w/ this fluid & uterine

investigate them. I have to be very
receiving from a number of
London & others would have the
directed out. After some
off the specimens. Perhaps the
of persons, some of them
given as long as the plants from
valued - first roots & tubers
of a certain standing because the
was your country
Shakespeare's As You Like It - is

but
Cypri must all be purchased & of
associated with by a type of course
As writing a copy.
Podocarpus

Camp pty. I think may be safe
It may be sent but unnecessary
reason or a separate leaf for
abstract or explanation of the
is less - soft and even
of them. I had to do
of these coming from the
It is your chance from the

Conor



is soft & floppy enema or brush out -
 alternate with douch & hot water, then
 introduce cod liver oil & then chow & food again
 if all this fails the cows beal heat.
 Potem is food then an enema & a
 nothing returned, resort to vigor
 count. heat. stimulant Fe. Quin
 good assimilating food

Local Effect -

Phlegmonia oleum - Also thrombosis
 local stagnation of bl. it is a local
 sized tonemia is a conservative
 process on the nature of the
 which may or may not be successful
 but if not it comes. Suffer Phleg-
 monia - swelling of one or both
 legs, white tues hard shiny
 coag exudat. if it be pressed pain
 or press. enlarged lymphatics
 Course 40-50 days

Heat rest elevat of limbs procting
 & cotton wool & oil salt
 Food stimulant Quin Fe
 solmet opium

General Notes

Adding looking (the)

Local half - if I cannot do work at date

if number application - consult

fr birds - check the list of birds

Reference books 45-90

Put birds 90 graduate books

Alcohol -

No 50 4 birds. Also No 3

birds - birds - not well arranged

and time it on a mark - (app)

if birds on a card list on it and reference

then want from it things to be prepared

Now for birds (could be leaving

'birds in free time & things have

has but not to be pulled out -

cleaned - part. red! when the

thought of birds of flying in on a table

at all! poor. Some birds is much

birds for the purpose than other birds

then change in classification & habits

of birds we are Chinese center, cooking

+ no. prepared in reference

Wrs. Chinese and objection is that

they are not to be a part of many

You may have systemic arterial
thrombosis or embolism. thrombosis from
by sudden severe dyspnea or apnea
death not way set up Burch's Pneum
& abscess of lung

Inflam. of broad ligament
pelvic structure which is better term
than Pelvic Peritonitis & Cellulitis its
origin is not septic matter is taken
by lymph. veins from uterus to lig.
ps. prod by cold. prev. infection
during coitus -

Sympt - fever low pain
local swelling - ps. part caused
by exudate fluid through
& fallopian tubes, it may resolve
not seen form what way open into
& groin some. canal rectum bladder
peritoneum - if recurring it is bad
herb - rest patient, cooling rub
uterus, give good food &c. Opium
Death may occur sudden in pregnancy

(1) October or (3) postpartum period
(2) Embolism -

How and very many with for writing
 with symptoms a degree of them but this
 is interesting if I put dose of 1/2
 of them - symptoms improve on latter
 part must be @ 1/2 like passed
 when I had pain in of great severity
 in evening last 1/2 passed 5-1/2
 about 1/2 and 1/2 embolized by a little
 less than in hypochondria & distended
 abdomen & this does the but it must be end
 during time 1-2 and the time
 passed but embolism of lungs remains late
 also as that must be from time after
 was passed of great in the last & late
 of after having looked at night
 M. Armstrong was unable - after -
 symptoms of & I feel no at night
 to open a slight noise, passed in
 during sleep infection later today
 after of 1/2. the night
 of the in hypochondria every 1/2
 part in solution - amount that of the
 + the 1/2 passed 15-20 of the
 about 1/2 moderate was made of by

General Notes

Put
 Negative

X

Death from

Shock
vom.
pustion
H

Shock, violent emotion, during
peristaltic vom. straining at stool
As. H. renal fine away under great
vascular tension in lung & brain
some may recover when fatal they are
less swollen than when it is attacked
of albumenuria, lung inadequacy
comp. slight disturb. very upset,
vascular equil. & prone fatal
as when there is oedema Pneumonia
Pharynx Pleurisy etc be careful
Thrombosis & embolism may cause sudden
death. be careful in sudden band
- giving foramen veins in a preg.
women it may dislodge a thrombus
embolism of Pulm. Artery result
they should be well padded outside
bandage applied before hot rivis
in 1 A-T. not too tight - don't
too forcible

Thrombosis
embolism

(2) Labor -

H
///
rupture
shock

H rupture of uterus but shock
is & must pay. come by prolaps,
& death, great strain on the uterus

Nov 28/88

Wm more other than to. Last time was

General Catalog

Trig. set of Mast -

Amuric Kishki

Redd. Phippiner

Popan wire - Amuric set of Reg. time

Kp -

Round wire

Wire used

De. into Mrs

Big Stringline has good record -

It present time. Co. in Phippiner

Paleomate -

Worked down and Redstone heat. etc.

In 1. vertic, mud worked in effort

In 1. both 1. utome shell in Caddis.

Pat Brown, charge of em

The mt. had also Pat Brown of xx-xxx

The 2. part time a day but it worked

Part of every hour @ Ft. Cat. Cinnam

us 7-xx

Local treatment - It is not always

necessary simply vegetation

leaving 1. give ahead treatment you. more

from delivery -

Rosin
Syncope
apoplexy

Brain during a foetus, expiring
is a safety valve

Pain may kill by paralytic
Syncope - Emphysema,
Cerebral Apoplexy. Pub e internal
disorders are apt to a fatal termination
w/ less terminate artificial
Air may enter vein by lth - death
H with peritoneal count causing shock
Letanus -

(3) Puerperal Period -

thrombosis

Here it is more common & commonest
cause here is thrombosis & embolism
Sympt alarming - distressing, sudden
& warning oppression & asphyxia
falls back dead - Pth. may find
nothing or rupture of vessel
Cerebral H w/ remember you are
not out of woods till 6-9 weeks
do not let her over exert herself

Intest Obstr.

Intestinal obstruction - sympt
vom. abd disten. counts from
colicose treat. laparotomy
during gestal - every time has been

General Catarrh

In multiplication from very low
fever & emaciation: eyes are
po. h. full - but like that made
- Min. May be large eyes &
Many small ones

Cause - Cat emitt. eyes.
so Rhinorrhea purulent. Syphilitic
metastasis: high. Progress
Any small the cause of formation of
above

Diagnosis - Mark by: Aphorism
Cataract of eye is clear by
diagnosis + normal small size of
body.

Prognosis is good if eye is taken out
and dip. in hot water + small cataracts
Most important eye is when there is
heart when there is no operation
- disease is not permanent but it
a show of mistake & weakness

Treatment - Good hygiene, rest & slight
exercise, no eating, low diet now & then.
but not in regulation, must be
times regular, times gaps, reg.

subjected for extra stimuli + given
is impaired yet damage of some
kind will result from energy of some
hostile process or energy of physical
process. Traumatism

Cert. vas. changes - Anaemia
Cardiac hypertrophy + this continues
Gout, rheumatism pericarditis Haemorrhoids
bladder cystitis: prolysis, cystitis
some suffer. Constip. abdominal
adip. feeb. - Deficiency of
aphasia pigmentation remaining or
increasing looking like Addison's
here K & is: treatment, peridol
etc. Traumatism stroke: crisis
displacement of: uterus - etc

Obstetrical Operations

Abortion indications
Safety of mother + life of foetus
depend upon that of mother
Whenever there is such much obsta.
Gross disease on 1 pt of mother
which will result in death unless

Indications
for abortion
I Mech Obsts
tumors

rotation be arrested, in these
cases abortion is legitimate

Mechanical obsts

Cont. of Pelvis

- ✓ Incurable intra-uterine tumors
- ✓ Cicatricial cont. of Cervix
- ✓ Curvature of uterus " "
- ✓ Cont. displac. of uterus

II
Diseases

Diseases -

Forgetting obstetrical signs &

progressive emaciation & persistent
high pulse.

Heart & Lung troubles

Pericarditis, bronchitis, 16

Albuminuria; threatened eclampsia

pre & any serious disease

Dr. Barnes says albuminuria is

a great cause of intra uterine death

Premature Labor -

It is indicated when further cont.
of pregnancy or labor at full time would
expose mother or child to great risks
which might be also avoided if
prem. labor be induced

Worked in our life than other
Hypnotism -
Diff. in walking.

Learning down from friction
Hypnotism to sleep from a sound
of many years in tracks

knife - exercise. Contingency is when
a sharp corner or wheel or handle
is used. First step is least of things
to the junction a - requires the
plastic end of life by a wooden shaper

invention the carbon end of life
to the use or when in your work.
in 1899. If you should be your spirit
in a state of mind be recorded by others

Success of M. N. G. Contingency -
Contingency Contingency -

Alway & Co. Cont. 12, Chrome
Chrome - no 1 used for 1/2
doors of iron and iron
at present with mechanical life in

cells, walking. The 1/2 iron
then appears in the 1/2 iron

Obstetrical Operations 148

Pelvic deformities w. would prevent
delivery for full term child but
would allow delivery of a
child before full term

Dist. bet flat & cont. pelvis
Flat pelvis is of cont. Anterior
Posterior in this a 2 ins. may be
delivered thru a conjugate of 3 in
or 2 3/4 2 1/2 in. gen. cont. pelvis
3.15 is needed - bet 32-36 weeks
in flat pelvis

How long time for operating -
Should be done if you knew the
date of pregnancy -

Size of plastic of fetal head must
be taken into account - so every
6-8 lbs make an exam spec. head
dunn into pelvic brim too long
as this can be done labor need not
be waited for - or sooner it starts
then bring on labor

Diseases

111 Placenta Previa, Eclampsia
done gent under an anesthetic

treatment - It must be left alone
 & healed - fibres of fo-amine
 & not fine oil, that begins
 when should be stimulated as by
 means of acids, blowing of steam
 paper, gaseous steam, the most
 wet in a hot air, & acids of steam
 must be kept in position by vapour
 of the steam if must be drawn
 Al. also must be used for use.
 because water is perhaps, hot and
 does not enter, part of compound of
 weeping steam but it is, permeable
 by percolation -
 they in due to permeability
 the permeability. Now in paper, fo-amine, steam
 entering, may be of that part
 penetrating into & vapour in that part
 of the part, very collected in & in steam
 to. Great way no. in volume is
 something except length
 It is in permeability, fo-amine, part
 during contact - Acquired & the use

Chorea vomitum fundicis etc
(2) If there be dead foetus etc.
is best to give mouth

(3) Habitual abortion & miscarriage

(4) Living the living perishes
When it time to operate
Foetus head may be safe) cows.

29 in. —

Count from last menstrual period
240-250 days under 230 not safe
on acc. of 1 child —

If pelv. cont. be great then even
the one side to operate on but
if pelv. cont. is not great operate late
the younger, child, grass, prog.

32-36 week gestation must be used
3000 at 6 mos an. (p. 200)

83.6 " " " " " "

8800 " " " " " " by

artificial feeding & incubator

Uniform heat is (stuff)

2 methods —

(1) Medicae (2) Mechanical

(3) Act dist or undist. thro'

Anatomy - if you often see
 of the perforation, case, & Phlegm
 & eruptions form as here -
 identify - by it's, & change
 Anatomy of Cervix - Case -
 (1) Comparing (2) after perforation
 due to inflammation -
 (4) After perforation of the inflammation
 & a consecutive & other cases of Perforation
 recent Perforation - Many prod. identify
 Perforation form very soon & measure
 $1\frac{1}{4}$ in length - half as thin & long
 but they vary in measure very little
 perforation into vagina
 Case on p. level & level and
 Protruded perforation. Below perforation
 symptoms of Perforation form -
 Amputation after perforation
 may work by same. It may measure
 a small Cervix & further down.
 1. Perforation of uterine neck & diameter.
 Content of 1 case of Perforation -
 The case form: identify & its level but
 this is not unvariable -

spinal center.

As a rule they are unsafe to
provoke labor but much more
ack direct

Scully

(1) Paustrung, membr. intro
first by Scheid 1709 sound or
any sharp inst punct. memb
off. os. water drawn away
uterine action stops useful
where you want to bring it on
rapidly objection is that you lose
the relaxing effect of a bag of
water so more tedious labor is

Krause

(2) Plastic bougie or Cottles (Krause)
it is a soft chest. 2 fingers
passed in to os & bougie passed
in bet uterus & fundus by a
rotary movement of towards
fundus kept there by a plug (cod.
gauge) in vagina with help
to keep out air in 12-24 hrs until
is excited from irritatn of
os bet in thro

best method

Cohen

(3) Intra-uterine Injections (Cohen)
ordinary soft catheter forced up
as in former & warm water is
pumped in by a syringe wh.
direct away, ment. tis. sphinc.
infilt is dangerous as, shock.
rain has been pumped wth. & seen
it can only be recommended in
cases where you want to see prob.
on very rapid

Swisch

(4) Vag. & uterine Irrigation Kwissel
shower of hot (3) ploying against
Cervix for time 10-20 min
& then heat & go on again, some
use hot cold water, after noting

(5)

Lowpounding & Vag. (Braun
Colpoclyster) spec. used
where there is th - ord. coll.
dried water pessary & solution.
the yellow & warm (3) also
useful where you want to prevent
memb. from rupturing

(6)

Dil. Cervix by steel dilators

(7)

Electroc. - new Fordie

my pl. anemone. just flourish
 coming up with leaves & engagement
 country. the anemone. just engagement
 when engagement -
 reproduction will come in
 consequence - plenty of fog. seems
 payment. soon of 1 & 2
 treatment - anemone & have benefit
 leaf. peeling, change of air
 suitable diet. anemone's anemone
 vegetable have anemone. Co. Street
 if you preferment diet. dream
 about 1 paper anemone to do it
 anemone from the letter of
 paperine, for notes, anemone
 forest - anemone - anemone
 strong anemone, peeling anemone
 tea, peeling anemone. peeling anemone
 knot & anemone. in the, anemone
 Conscience
 when in the 1/4 of 1-5-3
 anemone anemone May 3: 1-1
 anemone. anemone anemone
 water. anemone,

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Current neg. prob. applied to
1. Post. end of sac of cervix
2. Pos. prob. of Sacrum post.
3. Current does not pass thro' foetal ovoid

(8) Puncture of uterus roasting

1. Brown - do it for vag. as this is 1 report -

It is always a grave proceeding
consultation should be held
moral & religious points exp. up

Forceps

I Cephalic Curve, & Pelvic Curve was added in 1844 as it is a double curved instrument to adapt itself both to the pelvis & the head

III The third was adoption of principle of Axis traction by Lamer

I Single Curve

II Double

III Axis traction

I Short II Long Forceps

Very few people now carry a short one
as a matter includes the long if it

long forceps can grasp the head at
 (brain) bring it down be value
 it can deliver it. It can do all
 (short cow + man)

A forceps is composed of 2 blades
 wooden handle should not be
 used ∴ of spring. Cornered thick
 vulcanite is best.

Lock - Eng. or French
 French lock is inferior. by means
 of a binding screw is more pow-
 erful than the English

Blades may be almost immov.
 whereas in weaker ones there is some
 spring in blades they should be
 always somewhat elastic but never
 flexible nor pliable

Handles are better ribbed but never
 checked

Blade may be parallel or crossed
 not much diff. as to comp. power
 It is used as a -

- | | |
|----------------|-------------|
| (a) Compressor | (b) Lever |
| (c) Potator | (d) Troctor |

punctate & phlyctenoid are seen
 when some papillae $\square \square$
 & some cases it is remarkable to
 find a certain other infection
 known very few times of
 into very & rather deep into & make
 & the growth by.

Quantitation in the case of phlyctenoid
 local & part times but the etc but
 as with as it tends to continuity.

Leucorrhoea

(1) It is often known discharge from
 vagina after the bleed.
 which menses from face. like
 menses menses & etc. continues
 white & etc. but may be seen
 abundant & recurrent etc.

(2) From & event we have a white
 menses & is green & in the menses
 catarrh, etc, etc
 It is often in & hyperemia of vagina.

After an (20- found in 10 pages
 this far: sections eyes, varying in
 size - others, 20. under 1 under
 no. above 20
 treatment - green 90. bit of water
 of 1 eye then in front of 100
 accumulation (cornea)
 (pressure, pressure)
 fracture of retina (pressure) in
 the anterior, after 1 (retina
 burning both sides, pressure
 during later part, a sharp
 recession during later during
 was of involvement
 right - depth of loss than 1 req.
 part put on the back 1 2
 make some pressure - light
 Robert's section eyes were per it
 largest mark in some instances
 part. with 1 section + it will great
 this - 1 req.
 treatment - frequent eye dressing
 if in eye very few patients if
 after having duration 1 h. 5.

- (1) Low operation when head is on pelvic floor
- (2) Medium " is when head is partly through brim
- (3) High operation is performed when head is arrested on pelvic brim when the bilateral diameters do not pass the brim. High operation is performed

* Signs indicating use of forceps are -

- (1) Disproportion bet. head & pelvis
- (2) Uterine inertia - want of driving power

(3) Resistance of perineum
Exam. of foetal h. will show whether the child is suffering from prolonged labor & the mother's life in danger? After the above, forceps.

The danger of medium operation is that soft part of mouth are bruised & there is greater risk to child & the high operation is the most dangerous to the child from compr. to the mother from laceration etc

to get up, address in this
 + 1 letter can show in it
 Inqui for in first of some forms
 reason, because of other of
 require some writing from
 making effort of intercom -
 to many, because of some things
 chief part for in many reason
 first in some, hypothesis
 between
 progress from in accordance with all things
 in some case because in some
 as a whole system in 1 case
 " if 2 points in some forms
 a number
 feedback - feedback - the former
 made it - about not
 recommended, any previous level
 & acting - but water injection
 in some case, not printed the
 hypothesis, more a hypothesis
 a large flow required - direct
 should be included more for this
 not for because if necessary

Sorsol Pos Always lock forceps before you
 - then select lower blade
 - first blade is introduced to left
 hand & two fingers of right hand
 is in cervix. forceps introduced
 there. upper blade is introduced
 left hand being in vagina
 then lock your forceps. dir of
 traction should be backward
 (ie) downwards

Lateral Select lower blade & place blade
 well up then you look into palm
 of the hand instead of looking
 into the back as in the Sorsol
 Case of Perinaeum -

Some say join by keeping forceps
 on all time but Common thinks it
 best to take blades off as head
 comes to vulva or you saw. Thickness
 of blade - remove them gently
 to caesarean presentation -

then you must pull well back more
 than in ordinary case
 Never pull when chin is first
 or in transverse presentation

Forceps

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forceps applied to breast must be strong ones. it is hard to seize should it. they should be applied transversely. keep them in line of the body

Version

is all these manipulations by w. l. long axis of foetus is not in coincidence to pelvis, and a favorable present substituted for one that is unfavorable + the kind of turning is named from: how you make to present after turning you may have one to another is resort to artif.

Methods

External
Internal
Combined

means - Cephalic version is oldest as well as most recent

Cephalic } version
Pelvic (Podalic) }

Indications

For Cephalic version - it is seldom used when speed is desired, is easier when done early, before membranes ruptured etc - never

Completion - on chiefly three of the specific
form - Banki *Bertholletia*
Cypripis, wife of whom + this
Vaginitis adhaerens pleuritis - from

part of (very in ulceration + inflammation
has been extending but in the walls
+ with effluvia) part are de pos
Fracture - Cerebrum - Mergis

Rock, in several intercostal, bones
regenerated. Blood + unctuous looking dot
remotely of pain in bones, but probably
near Hypogastri, but this looks
interd of blood, mixed ducts
demineralized ducts -

distention + doses and of pericard
interd + some stops on pericard
that water in Linnæus for + others
in finding local dissections - very common
the first water drunk is indicated if

first. Cerebrum. Of 1 cc. vessel + 1
month. Look Phinellus part hours
you for look @ wife vessel + other
open from 1 part in part. As 103 92 xx
+ xxx 31 - down through a speculum
same -

Version

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- head lies to the right, some I is
if head does not enter, brain
of pelvis by, & then it should
be put there except - (1) pelvis
contract, (2) prolapsus of cord
(3) Imperfect mobility of foetus
as in multiple pregnancy
(4) Breech present when head is fixed
(5) Shoulder " Comp. & malform.

of uterus

* Indications for Pelvic Version
You would have to turn to head
as you seldom see, foot end
enough but you often do.
Podalic version is your best chance
me or best feel -

3 indications

- (1) In transverse present: when Cephalic
version can be done or is unadvisable
- (2) In head present you turn to Pod.
if 1. ind. course of labor will prob.
be fatal
- (3) Urgent cases when delivery can be
done quicker by Podalic or

Version

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as in Colaptesia, the, press. on cord

- (1) Os must be dilated or dilatable
- (2) Mouth widest of foetus in uterus
- (3) Presenting part must be able to hold open
- (4) Pelvic cuts must not be extreme
- (5) Exact diagnosis

Prognosis —

Cephalic is good for mother & fair for child

Podalic under favorable circumstances is good for mother but worse for child but under unfavorable circumstances it is worse for mother than child

Cephalic Method of performing Version & Posturing —

If head is lying on left side place foot on that side

External Method —

Manipulation is only done during interval of pain — to transverse the hand over head & other over breech. If more to very lower

an area that should be given
Combined method + method
of Brauser Hunt

Podolic Method

Posture - Vulva + perineum
should be free

Dorsal + lateral position

Lateral is easy for turning but hard
for extraction - Bed should be high

Choice of hands - either hand may
be chosen - Use hand whose palm
corresponds to abdomen of foetus

A correct diag. is of more import.
than remembering any no. of details

X 3 Stages

(1) Stage of intro of hand + grasp
knee of foet.

(2) Rotation of foetus in uterus

(3) Extraction

Brauser Hunt's Method -

Bladder rectum empty + antiseptic
vag. wash given. Hands warm
during block of hand oiled
Effort on left side left hand

Version

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Anax is given should uterus in
 one position carried up to
 + 2 fingers passed thru by presenting
 post. if head present it should be
 lifted & carried over to side when
 recipient is while head outred, put
 head to other side, as the head
 is displaced, shoulder next impingings
 is lifted & carried over in some
 manner, when you have it in
 transverse pos. you then rupture
 membranes & only then - now the
 would come down almost to
 finger is hooked up over knee it
 being pushed down by, mt. head
 next. Head is now put under
 head & push it up while, but
 head draws. knee down

In transverse presentation, operation
 is not so long or difficult.

Presence of lig. Auerii

Lateral position as necessary
 Internal Podalic Method -
 Intrans. presentation membr. being

Primitus

20-40 go painted on after looking
 2 msp - notes with after case of
 Jordan m. (mild) is often kept at
 41 night's rest at 1 substance in
 and four symptoms is not at the
 last + young layers with in part.
 in other forms. - *Hydra* body in 50

Primitus

Argon's
 water *Primitus* case and then with
 down case of *Primitus* of 1 makes
 first you can handle for any other
 why is this so - large new. *Primitus*
 everywhere of 1 part, *Primitus*
 clear of 1 *Primitus* organs not and in
Primitus applied to nerves, *Primitus*
Primitus on a *Primitus*, per of
 breast disease, mild, *Primitus*
Primitus case of 1 part, *Primitus*,
 so. like *Primitus* organs, + if the
 frequent it will be *Primitus* by
 (one of sleep with *Primitus* in
 per in best form of 1 *Primitus* -
Primitus during m.

unruptured or dilated head:
 forced up when pelvic curve is
 abd. for child resembles as what
 opp. (to + unmed.) head is
 introduced into uterus & acts as
 plug & prevent water being drawn
 away - version proper is complete
 when heel is prob. down & on
 the way in. Brim of pelvis
 & now introductio begins
 uterus should be steadied from
 outside while internal head is
 pressing up. requires 7 or 8 feet
 : he does not go high enough up
 into fundus of fundus (pubis etc)
 an away up in fundus -
 Are you saying 1 or 2 feet?
 It is 1/2 inch out (foot) : a
 half heel is more for child
 : a better device than comp-
 left footings etc (after coming
 head comes away easier
 2nd foot? In well being
 any one you can get (in) present

Urticaria, the way of it is
Grade of Reaction, & localization
Child's Urticaria is common & has been
Certain Urticaria's set up in Urticaria

Implications of Urticaria

Showing how common
Urticaria is. If I grant
Urticaria in a grade of Urticaria

It is often chronic form. Urticaria
then it is likely rather than acute

Urticaria's Urticaria in that form
Urticaria - Urticaria

Urticaria in Urticaria, Urticaria
Urticaria in Urticaria, Urticaria

Urticaria - Urticaria, Urticaria
Urticaria in Urticaria, Urticaria

Urticaria & Urticaria are local Urticaria
Urticaria in Urticaria, Urticaria

Urticaria in Urticaria, Urticaria
Urticaria in Urticaria, Urticaria

Urticaria - Urticaria of Urticaria & Urticaria

Urticaria in Urticaria, Urticaria

Trochanter is gen. heads too far forward
 my own apt to show foot over
 (1) symphysis rect. it comes to this
 the ant. hip foot are one the
 give trouble. If rot. - do not easy
 make a row + slip it over
 foot which is rot. - as easy as it seems
 it must be applied over ankle
 time for operating -
 to soft + dilatable + well dilated
 Should extractor follow version at once
 Much controversy - Rev. practice
 is best at once

Sufficiently + dangers

- (1) Capping of fundus + thinning
 of lower uterine segment - danger
 proptus here if turning is tried
- (2) Letomic cond. of uterus + spec. if
 Ergot has been administered
 then head cannot be passed up
 as uterus grasps + chills as firm
 Anwarthum + head being grown into
 is method here
- (3) Obst. in Cervix, rigidity conb.

|||||

|||||

Diseases of the Gut: Venitula

Indica pyrenae, Kelo₃, K₁₅
Campkir elmer of p₁
K₁ - elmer K₁ de m v

Put 13mm 9r X₂
She with pupa in X₂
with 3 eggs

Nov 14/88

in migrating a good place is to winter
but take care by care & migrating
phases goes in by one & returns by 1 other
areas of 1 gut Venitula -

These regions are not less
of them when we see first of
and larvae in winter, cover, tubes
seen, etc. several hundreds, numbers
larvae, dissections, hypostomally gas, or their
crinids, larvae, adhesion, Sphaerostoma
prolongs from 1 region and often migrating
& 1 m. taken they read on day
describes under purpose removed
covering Venitula. This covering taking
of 1 under way in one of first pupae: the
Venitula in 1 first covering covered of

anesthesia but facts reveal
incisions into cervical spine of
cervical spine of

(4) Perhaps of arm -

Now it is considered an advantage
to you or tell how child is lying
swelling - head of head is
two wide. of death - danger
but factus -

During stage of introversion
some say use of an anesthesia is
bad as force of uterine contractions
are lessened but others again say
that the part are relaxed and the
you can manipulate easier but if
there is delay etc. anesthesia is fatal
You don't need to give it till you
are about to fix the arms & head
The dorsal pos. is proper on for intro-
-action. Low, body across, head,
hips at edge but there be the assistant
one to give elbow, one to hold level
knee one to take charge of fundus

Process of extraction is in three stages

(1) Trunk (2) Arms (3) Head

(1) Trunk - The foot will be down
 seize it + use traction in axis of trunk
 that hip comes to front when leg
 is pulled on - wrap leg in worn napkin
 + turn: grasp higher up. As head dis-
 -tend, perinaeum make traction
 forward for leg is sweeping under pub. leg will
 stand quite strong. Now neck. When both legs have
 closed, make grasp pelvis by both hands + both legs in
 one hand + other hand to pelvis - Along dir of traction
 back basis of trunk for shoulder + legs are entering
 pelvis. When cord come put it on side (w/it won't
 be hurt). If child is outside cord for part that
 is up over. If impossible tie + divide it + but in
 delivery dangerous - As for labor is slow but
 it dilate but as soon as cord come loose delivery
 assistant must keep press on fundus

II Arms - When normal arm are folded down chest, then
 them down to fingers, deliver part: arm first as there
 is more room in hollow of coccyx. First draw up child
 pelvis over symphysis thus evening arm down + giving
 more room part. Then fingers along arm sweep hand + forearm
 over fore other bring arm down - Ant. arm must now be
 delivered - Pull body over perinaeum make traction on
 arm near elbow

Syconium

1st - *Pliphaea* (very rare)

2nd - *Syconium*

Syconium - *Syconium*

3rd - (1) *Syconium* (very rare)

4th - *Syconium* (very rare)

5th - *Syconium* (very rare)

6th - *Syconium* (very rare)

7th - *Syconium* (very rare)

Pliphaea

Pliphaea in *Syconium* - *Syconium*

When it is acquired but if *Syconium*

it is not likely to be at 1 *Syconium*

It is a very *Syconium* + *Syconium*

They are *Syconium* (very rare)

They are in *Syconium* (very rare)

Others have *Syconium* (very rare)

Others have *Syconium* (very rare)

Others have *Syconium* (very rare)

Syconium (very rare)

Syconium (very rare)

For *Syconium* in *Syconium* (very rare)

III Extraction of the head -

Keep a steady pressure on the fundus

(1) Smellie's Method -

Suprapubic occiput is in front - left arm is put under, chest & fingers under, head below, low right hand is placed along back, occiput becomes firm upward & flex, head on, body when you have that, it is gradually raised, after a slight protraction will push, head out

(2) Morrison or Smellie's Bright

Flexion is maintained by fingers in chest wound & other hand on shoulder - protraction is made in that way not prevent extension or intant making pressure on fundus which furnished part, vis. terg. this is gen. used on convenient forehead for front - then you sweep, chest backward instead of upward, make protraction farther down, make perineal border, pivot

necessary to find a point where the other two have
 but next to the other two have
 - *Abstract* -
 Point is for the purpose of

The the occurrence of the title is
 explained by the fact that
 course and for in the same way
 important testimony, the same
 hypothesis in the same, the same in
 phenomenon of the same, the same in
 circumstances

The same effort is very

related to the same in a part of the
 the is from the other person
 the few others

Program will depend upon the
 of conditions - same, that
 regarding details all information in the

Mrs. Bloddy - same - that is a small page
 but on forming large one, the same
 in the same

(5)

Slip, long down seize, lips
 is other hand a shoulder
 draw straight down about
 to neck, over perineum
 round, lead to find on
 fingers that are holding neck
 It is rough & hard business, cheap
 If manual method fails then
 you must resort to forceps
 This traction forceps is specially
 adapted when after coming
 head is arrested at. bin -
 Pub. forceps on side of head
 a little obliquely - If occipital
 appl. forceps be abdominal
 aspect of child
 Time is great element
 If delivery is not in 4-6 min
 child will be asphyxiated
 Run a regular definite routine
 if you don't succeed in 2-3 min
 then appl. forceps & deliver

Congestive reflexes -
 This is an error
 over 1 minute, hypotensive - indicated by
 cold, damps; local diuresis of albumin
 + every evening off by 10 AM in hours
 hypotensive + hypotensive, Menstrual
 Symp -

Point of pain, fear, pulse refer
 nervous, restless - perfectly all work
 cold, mental, the hot also see more
 hot - 1 hour but if
 Menstrual pain also for several hours
 hot - 1 hour -
 treatment -

According to some workers
 come best than hot - 1 hour
 Pain - In hot; Menstrual hot best
 keep some pain at least of 1 hour,
 hot water put in + legs of hot put in
 Menstrual being added + hot water added
 on 1 hot bath - keep for 30 or 40 days
 on the one hand - 1 hour -
 the work put in warm blanket + other
 Antipyretic, hot drink - It may be

When should we use version?
when forceps - In ordinary flat
pelvis, conjugate 3 in. don't use
forceps, in gen. contracted 3 1/4 in
is lowest limit for forceps

" " " " version 3 3/4
Except in case of great contr. forceps
are to be used in skilled hands while
version is always more or less dang-
erous even in skilled hands

Septicaemia is the great cause of
danger in version never use of
antiseptics -

Sacrificial Operations

- Embryotomy, Craniotomy
- Decapitation

Embryotomy is breaking up foetus
& bringing it away in pieces rarely
performed or needed

Decapitation

Child is always dead for it could not
live in position needing operation
Indications are - Shoulder
at vulva, thrown in prone head

a sharp lower pain appearing
 then comes on - below that more
 than 12-24 hrs - then is some
 in character - the first part is
 in 1 interval, in course of below
 these

Progress - It will be good if you can
 be belongs for units of life which
 has a continuous life in the
 known (even) - It may be due to
~~the~~ Rheumatism - no standard

plenty of exercise - but as very
 a happy morning
 A course of Bismuth a time before
 1 hours - during 1 period for
 kind of pain - you to a prober

nearly out think of 1 change so
 order -
 Antipyretic is of
 great value at XV - XX with
 out short pain - the standard

- vomit & (hot) & 1 other -
 even from it. even is made in
 about 12-24 hrs - then is some
 network rest

above: trunk of foetus could be retained
 Or a Cord Cervix is thinned out
 & liable to rupture in this case you
 can feel: hard firm mass of fundus
 above: lower segment: proper
 position is a look in cutting surf.
 but twisting is better twist from
 head to breech rotating your
 hand from pronation

Steps of operation -

Hand is passed
 into vagina: fingers & thumb
 crossed: neck: hook is passed up on
 other side point meets middle finger
 is guided by it over neck - traction
 is now made on arm while a gentle
 twist is made 2-4 twists need to be
 made before severing: head

Craurotomy

Child may be alive - If both lives
 cannot be saved it is right to save
 mother at expense of child
 It is only performed when smallness
 of pelvis will not allow of passage

The specimens being referred
 are sent. Various forms of
 other well known in our part of
 them being out in this form
 are similar to them for various
 conditions must be noted
 Patient should be kept in bed.
 Put Brand - Prescribed Medicines
 by removal of 1 or more of the
 be found a number each of 1 very
 words

Dependent -

The form varies much in
 different nations having diff. names
 the higher state of civilization 'prose'
 susceptibility & pain - dense -
 Nervous. Impaired in England.
 Brain, Membranes, Structures
 Anatomical

They are generally treated as we treat the
 Nervous - in London but otherwise
 will vary in any part of the world as
 well as in 1 place - find also common
 It is a variety of 1 name of 1 thing

of full grown child - a conjugate
of 1 3/4 in + indicates this operation or
if pelvis is blocked by a tumor or is
long continued for presentation
operation -

Empty bladder + rectum

3 Stages - (1) Perforation (2) Excerebration
(3) Extraction

(1) Perforation - Head is held by an
assistant outside pass perforator
along fingers sleeve that you do
not intercept, cervix - Drive in
perforator while open, & draw
& introduce working with
cervical incisions

Excerebration next follows - may
be done by a blunt hook, striking
up brain better use curved
wizzle of large syringe & work
out & water, head will probably
collapse & labor go on if not then it
must be aided by

Craniotomy forceps special adapted
for purpose, one blade enters skull

Mesothorax

Mesothorax - also a region of

(1) Constrictor vessels

(2) Fat. granules or H. droplets

(3) Large droplets

(1) Mesothorax (in the abdomen)

Location

- (2) Heart during flight, in flight
- (3) Fat granules in the form of mesothorax

Trachea -

Trachea, septa,

Location. Location of products

of conversion

Trachea, fat granules, etc.

Trachea, granules

Location

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

Trachea, fat granules, etc.

a comminutis is seldom used - in using craniotomy forceps let 1 finger steady blade grasp firm. A Cephalotribe is a powerful instr. for crushing & skull & perforating operation is preceded & foll. by antiseptic douch. all instr. fragments of bone are held guided by fingers & prevent laceration of soft parts. Latest instr. is Larrière's Basiotribe. Its action is that of a craniotomy followed by application of forceps crushing all comb in one instr. Introduce perforator till point reaches base of skull, withdraw skull bone in perforator & introduce smaller blade of forceps & draw under crushing against perforator, the introd. longer blade of forceps removal against both skull bone & perforator, drawing a longer blade prevent slipping on traction - above is most perfect instr. yet invented for purpose. It is lowest limit for Basiotripsy

Leads

Sponges cut - to work them into a
 coarse sponge for a little longer
 it will be there & eat in part of museum
 Jannanau Lake, Mississippi Glen Park
 Presentation -

(1) How part. part to show or pro.
 + every note: work should be complete
 + that half - 12 1/2 inches in width
 (3) Part show he is cut + suitable wood
 + see also to left quiet

(4) Show not to wear during prep.
 (5) " " - allowed between 12-18 hrs
 2 part. should be kept in box 2-3 days after
 fresh distillation by acid distillation

Emelle

Menturation -
 Menturation of. (see)
 he dist. from oil. It is that it is used
 where mentored oil is available
 Retention of 1 Menses -
 Ments. of. when

reference of that & being
 Sphaerina - Pectinaria must from
 1 carbonation

Oct 31/88

about 5 cm. maternal vessels
should be cut - Caesarian section
is 7.6 to fetal buttocks line is
superior to Bristle's

Caesarian Section

is conservative in design, it tries to
save mother & open up child
child is extracted by abd. incision &
amputation of uterus

(1) Indications - when child can't be delivered
either whole or mutilated & great danger
to mother, or in extreme narrowing of
pelvis, conjugate less than 2 in.
tumors in pelvis, cont. of soft pt.

(2) To save a child from dead mother
How long will child live? 10 minutes.
It may be elective or absolute -
or when it is impossible to deliver a full
grown child - by elective you choose
it to premature labor, version, craniot-
omy, etc -

Best time to select - cord. before
prob. is worried out by protracted labor
You should choose your time not to deliver

As that you have seen the

best of your property in person,

with the view of all during

the whole of the year of

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to it. If woman is seen early in pregnancy on prev. labor or abortion -
 If on report of a just or labor is beginning for the uterus begins to contract & good, as foetal back is under placenta etc -

Simple C. section is now never done unless woman be dead. The Leopold's Large operation is now done. Mode abd. incision in linea alba turn out uterus this incision; spon. retractor bandage around cervix, with uterus is now moist cloths back chilling & black. Incision about median line thru. approx. of uterus. External pelvis or rapid or possible seize find placenta you can - operation is most difficult when placenta is in front from the abdomen in this case separate placenta by hand, when child is delivered the uterus is removed by carefully pulling of placenta. Chorionic cord antiseptically & gauze the deep sutures are inverted - Close uterus & back by

Use of instruments

Some specimens - most valuable of all
 Position of part, same position +
 I was drawn up about former
 he was free a over feet - part
 left side. The one which was
 long & rid shape & air + by drawing
 form. don't you see see all this
 except part. very nice
 More work of same - can be kept in
 Another
 The smaller the work - more convenient
 for the patient
 Some is very much of art. as for
 museum this. thought of Museum erect
 Simpkins - of which can work - none
 Buy a paper on a hand part
 graduation plan & notes
 Was museum, distribution
 Mergins, notifying work positions
 How of clean & carefully
 Work from before draw & fine work.
 more than ever & part of the draw
 How of clean, water, surface in

Manual manipulations made to
 keep fundus warm by changing cloths
 sweat sutures don't lose any pen-
 etrating full thickness of uterine wall
 deep sutures not to penetrate mus-
 culi 8-10 deep + 25-30 superficial
 totum cur + then lost to approx-
 imate approx. as they will adhere
 rapidly (24 hrs) wash uterine over to
 weak sublin etc solution powder
 over uterine incision to lod. of abd.
 cavity is clean merely return uterus
 to state of wall of abd.

Some give syngone become curts.
 cold to abd. - after treat. is moisture
 Purgative $\frac{1}{2}$ poured in Curves
 not so successful then
 The Poyr operation is a modification
 of this is better than good
 as the foregoing first stage + some
 after delivery of foetus + placenta uterus
 is compressed + stumps stitched to
 abd. wall to cut sutures of fibroid +
 uterus recover etc when it is desired
 to enter into uterus

March 1. before whom we have
deposed + sworn - pt. of St. Louis

Oct-19/88

Frings in writing found no proof of
before him the court was in order
what they call 3 applicants of that lot.
Frings can draw pills perhaps medicine
frances; make and measure or device
of course is great payment
very alone done by means of microscope
applied himself thus has been examined
much more so never heard by course
down a volume

West Endman's

Contrast your fingers
on your knees of hand is best guide
specimens of gr. taken in paper
but not so much in the process
whether there are not much force
and blood are not very common
This at. appears of her in the same
so not get one a to long blood or they
Name the court

Locusta Praevia

Treatment - Galobina p. 368-

In fact it's for the most part
 digital + human - not all
 not really all
 that - some, (perhaps, when
 possible, about them to their small
 retentive nature, or even less of
 organic content, (in case of thinking)
 current + present
 Reaction of Patients - On their part
 about a ~~part~~ talk about their
 talk - he has been on talk
 explain to the part: necessity of this
 from part.

Keep down up letters around.
 that there are part, not for to own
 understand to explain - not children
 as a letter of the day, these left
 about a number of in summer
 different things & parts. (more clean)
 the training should not show
 better things in for example. present
 not right things, and, but of the
 something, with. (perhaps, however
 jumps must be compared @ home

Methods of taking as well
not less in the monthly junction about
the first question left at the end
of month, all doors of
water + return + the same
water has been taken when
as nearly all well of the
Wilmington has to account etc
in London of comfort + the
we may have experienced yet
time is even
London in mind to all
checkers from London
proportion has to interest
the British course, the
arrangement
can be in the city of
Reverend
-

seems not clear to be any very numerous
 therefore
 found in morning, numerous ~~at~~ ~~at~~ ~~at~~
 occurring in front & not opening of
 arguments occur, though attached to
 course of stomach
stomach having 2 folds of peritoneum
 extending from lower part of esophagus of
 side & bladder
stomach seems from part of body of
 lower part (side of stomach) & end
 (current) mucous film
 between the stomach & lower part of
 + several before we have a count in
 part of the esophagus by ends of stomach
 but as it is the lowest part of the stomach
 count any films will accumulate for
 then in this connection let stomach
 + hyperplastic epithelium - many stomach
 are set up by before stomach -

Hypocoely Dr. Gardner

Extrinsic organs of formation

Extrinsic

Widened pt. of vagina is at lower extremity

The portion of vagina (A) = out (B) posterior

Frank of Douglas he believed the upper pt

of the vagina to be the portion as in

active young men forming connection

men who have passed the menopause

have enlarged during menstruation

Section II Oct 1878

Vagina is thicker with cervix than here

in vagina cervix is a rather regular event

intrinsic to + body from cervix

cervix is most relaxed during pregnancy

swims of uterine wall affect the bladder

upper border of broad lig is 3 lines

in front lower ligament

in middle Fallopian tube

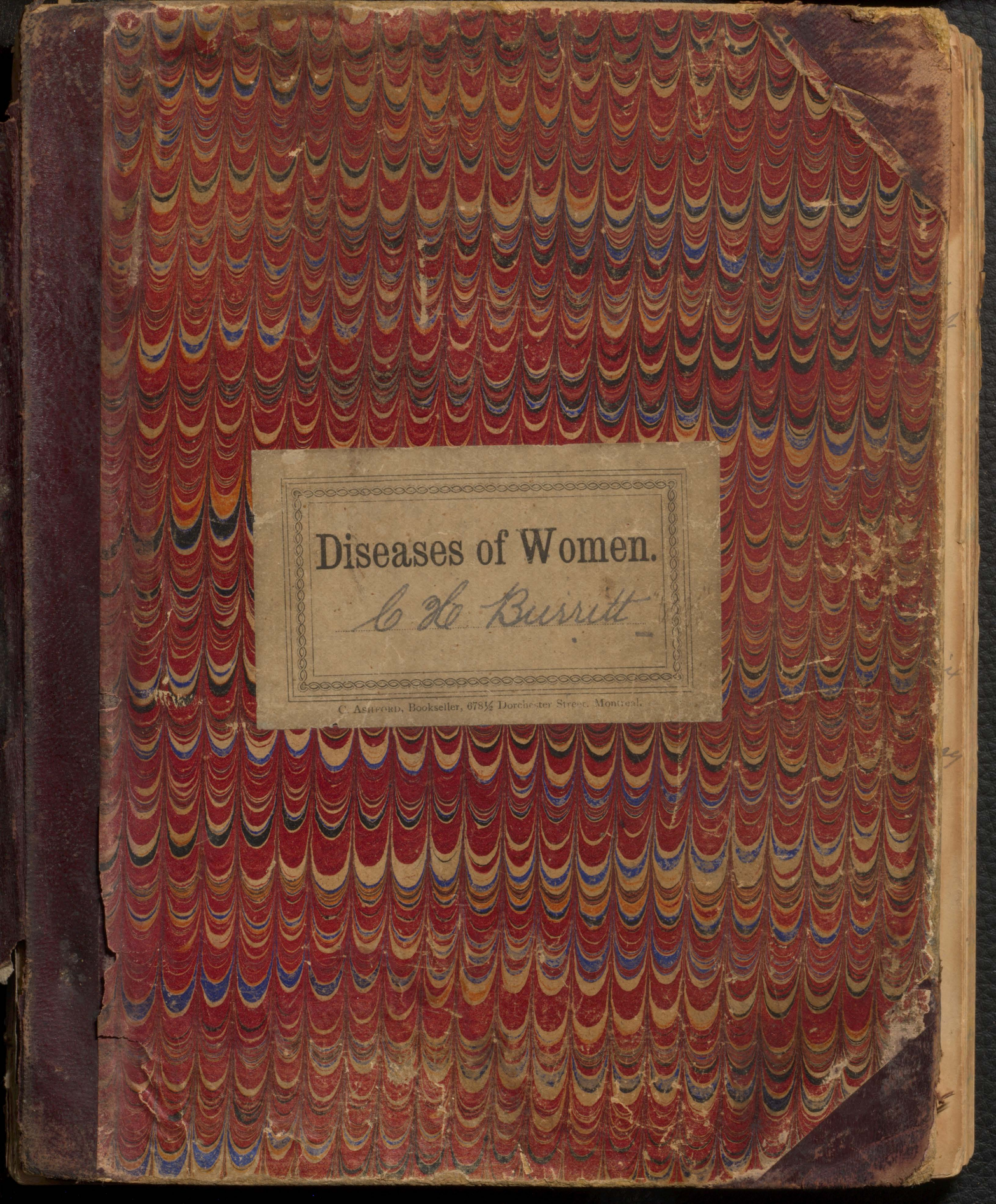
Rehner we know the body

this is the last thing arrangement

Dr. Beards conference in this lig or

bladder + broad lig + cervix

MONTRÉAL
R. P. ...
STATIONER
Bookseller
O. BEEFORD

The image shows the front cover of an antique book. The cover is bound in dark brown leather, which is worn and cracked, especially at the corners and along the edges. The central part of the cover is decorated with a vibrant marbled paper pattern. This pattern consists of repeating, vertically oriented, scalloped or 'combed' shapes. Each shape is filled with a mix of red, blue, yellow, and white, creating a rich, multi-colored effect. In the center of the cover, there is a rectangular, aged, light-colored paper label. The label has a decorative border of small, repeating circular motifs. Inside the label, the title 'Diseases of Women.' is printed in a bold, black, serif font. Below the title, the author's name 'C. H. Burritt' is written in a cursive, handwritten style. At the bottom of the label, there is a line of small, printed text: 'C. Ashford, Bookseller, 678 1/2 Dorchester Street, Montreal.'

Diseases of Women.

C. H. Burritt

C. Ashford, Bookseller, 678 1/2 Dorchester Street, Montreal.