

**A HANDBOOK OF HOSPITAL  
PRACTICE; OR, AN  
INTRODUCTION TO THE  
PRACTICAL STUDY OF MEDICINE  
AT THE BEDSIDE**

Published @ 2017 Trieste Publishing Pty Ltd

ISBN 9780649041046

A Handbook of Hospital Practice; Or, an Introduction to the Practical Study of Medicine at the Bedside by Robert D. Lyons

Except for use in any review, the reproduction or utilisation of this work in whole or in part in any form by any electronic, mechanical or other means, now known or hereafter invented, including xerography, photocopying and recording, or in any information storage or retrieval system, is forbidden without the permission of the publisher, Trieste Publishing Pty Ltd, PO Box 1576 Collingwood, Victoria 3066 Australia.

All rights reserved.

Edited by Trieste Publishing Pty Ltd.  
Cover @ 2017

This book is sold subject to the condition that it shall not, by way of trade or otherwise, be lent, re-sold, hired out, or otherwise circulated without the publisher's prior consent in any form or binding or cover other than that in which it is published and without a similar condition including this condition being imposed on the subsequent purchaser.

[www.triestepublishing.com](http://www.triestepublishing.com)

**ROBERT D. LYONS**

**A HANDBOOK OF HOSPITAL  
PRACTICE; OR, AN  
INTRODUCTION TO THE  
PRACTICAL STUDY OF MEDICINE  
AT THE BEDSIDE**



---

A  
HANDBOOK  
OF  
HOSPITAL PRACTICE.

A  
HANDBOOK  
OF  
HOSPITAL PRACTICE  
OR  
AN INTRODUCTION  
TO THE  
PRACTICAL STUDY OF MEDICINE AT THE BEDSIDE.

BY  
ROBERT D. LYONS  
K.C.C. M.B.T.C.D. L.R.C.S.I. M.R.I.A. ETC.  
PHYSICIAN TO JERVIS-STREET HOSPITAL, DUBLIN :  
PROFESSOR OF THE PRACTICE OF MEDICINE AND PATHOLOGY IN THE  
CATHOLIC UNIVERSITY OF IRELAND :  
PROFESSOR TO THE ROYAL DUBLIN SOCIETY :  
FOREIGN SECRETARY OF THE PATHOLOGICAL SOCIETY OF DUBLIN :  
MEMBER OF THE ROYAL MEDICAL SOCIETY OF LISBON :  
LATE PATHOLOGIST-IN-CHIEF TO THE BRITISH ARMY IN THE CRIMEA :  
*do. do. do.*

LONDON  
LONGMAN, BROWN, GREEN, LONGMANS, & ROBERTS.

1859

*151. c. 172.*

## CONTENTS.

---

	Page
INTRODUCTION . . . . .	1
SECTION I	
DIRECTIONS FOR CLINICAL EXAMINATIONS OF PATIENTS :	
Diseases in Classes and Orders . . . . .	4
Tabular View of the Classes, Orders, and Special Nomenclature of Diseases . . . . .	5
Preliminary Examination of Patient . . . . .	11
Instructions for making a Clinical Examination in a Case of Disease not being Wound or Injury . . . . .	19
Percussion . . . . .	33
Auscultation . . . . .	35
Expectoration . . . . .	38
Hæmorrhages . . . . .	39
Appreciation of Vital State of Patient . . . . .	40
Cases presenting Signs or Symptoms referrible to the Lungs . . . . .	41
Cases presenting Signs or Symptoms referrible to the Heart . . . . .	46
Urine.—Clinical Examination of this Fluid . . . . .	71
Special Tests for Urinary Elements Abnormal in Quantity or Kind . . . . .	75
SECTION II	
POST MORTEM EXAMINATIONS :	
General Directions . . . . .	86
External Appearances . . . . .	87
APPENDIX.—Directions for Writing Prescriptions . . . . .	125
GLOSSARY . . . . .	129
FORMS FOR REPORTING CASES . . . . .	139

HANDBOOK  
OF  
HOSPITAL PRACTICE.

---

INTRODUCTION.

Few persons, if any, have ever become skilful, self-reliant, and successful Practitioners in Medicine and Surgery who have not closely watched and recorded the phenomena of disease at the bedside during their student days in Hospital. Amongst the ablest physicians and surgeons, and with men of almost unlimited experience, it is common to hear reference to cases noted by them in hospital in the days of their own pupilage, and which have in a manner become the centre and the very keystone of their subsequent knowledge and skill. None would be found willing to part with this long-cherished experience, so vividly and indelibly impressed upon the mind; and no one that could anticipate and understand fully its value to him in after-life would neglect the opportunity which he possesses, in the few years of his hospital studentship, of laying by a store of it, in the only way in which it can be acquired, viz., by the personal superintendence, observation, and recording of some few select examples of the most important injuries and diseases.

All medical experience and authority are unanimous that Clinical or Bedside Study in an Hospital is indispensable to the formation of a sound and safe Practitioner; yet this truth, though now trite and commonplace in all mouths, is still barren of at least half which it practically imports. For clinical or bedside study implies something more than the half-curious,



half-listless manner of *reconnoitring à la distance* a striking injury or unusual disease too often witnessed on the part of some students. To profit fully by hospital attendance requires much on the part of the student, and much on the part of his clinical teacher, the physician or surgeon on duty.

I am persuaded that in the majority of instances this is fully felt by students; but from the very nature of bedside observation in hospital, difficulties of no ordinary kind have to be surmounted at the very outset.

The various acquirements which go to make up the practical physician and surgeon embrace a wide range of multifarious knowledge drawn from several sciences; of multifarious facts which can only be picked up one by one as occasion offers; and of technical skill in the use of various instruments and various physical appliances, to be mastered only in fragmentary, and often very unconnected, detail.

Generally speaking, years elapse before the student, however diligent, gets a good intelligible grasp of this apparently heterogeneous and unconnected assemblage of written and unwritten fragments of knowledge; facts with seemingly little or no relation to each other; and the manual and mental acquirements necessary to master and put them into practice.

Now, though experience shows it to be futile to endeavour to reduce the study of medicine to any strictly accurate or scientific *system*, I believe that the want of *some* method in the acquisition of our medical and surgical knowledge greatly enhances the difficulties we have to contend with, and unquestionably impedes our progress. And, indeed, I am confident, that if there be any one cause more than another which leaves so many students lamentably deficient in medical knowledge in the second, third, and even sometimes unfortunately in the last sessions of their hospital attendance, it is precisely the want of some methodised plan upon which to pursue their observations and inquiries at the bedside from the outset. It has therefore occurred to me, that it would be an invaluable acquisition to the student if a simple methodised plan of Clinical Observation could be framed, and combined in some convenient form, with brief, but explicit, instructions as to the best mode of procedure for investigating any given case, arriving at a diagnosis, and recording its history, symptoms, treatment, daily progress, and termination. It seemed to me that a small work of this nature would prove a most useful companion to the student at the bedside. I also conceived, that if at the same time it contained in condensed, yet intelligible and readily

accessible form a compendium of the preliminary knowledge most essential for rightly interpreting and using the information thus acquired and recorded by the student, it would be of infinite service by preparing him to profit by the more advanced teachings of the clinical physicians and surgeons, much of which is now lost, to the junior students especially, by reason of their not having the necessary preliminary information. Few clinical teachers are not sensible of the loss of time to themselves and the class entailed by the want of the requisite elementary knowledge on the part of many students to enable them to profit by what they see and hear at the bedside.

It is with a view to endeavour to supply these wants that the present "INTRODUCTION TO HOSPITAL PRACTICE" has been written. Without farther preface I shall introduce the student to the practical consideration of disease.

In a work of this kind, comprising multitudinous details, necessarily much condensed to admit of their being brought within a narrow compass, it is almost impossible that errors and omissions, and perhaps important ones, should not exist in a first edition. I am sensible of many such imperfections in these pages, for which I crave the kind indulgence of my readers.

MERRION SQUARE, DUBLIN,  
December, 1858.

## SECTION I.

## DIRECTIONS FOR CLINICAL EXAMINATIONS OF PATIENTS.

§ 1. THE "ills which flesh is heir to," and which fall within the domain of the physician and the surgeon, are very numerous and of great variety. It will be well at the outset to place before the student a tabular view of the diseases the human frame is liable to. It will serve, as it were, for a skeleton map of the countries he is about to explore. I have adopted the system of nosology or classification of disease proposed by Dr. William Farre, and employed in the registration of deaths in England under his able superintendence. I conceive it to be at once simple, comprehensive, and, with but little exception, satisfactory in detail. It is now in general use in England, has been approved of in France and Belgium, and has been accepted, with slight modifications, by a congress of scientific men assembled at Vienna; and it is highly probable that a nomenclature substantially the same will ere long be adopted in many of the chief states of Europe. As I have reason to believe that its speedy adoption by the medical department of the British army is contemplated, it is of great consequence that students designing themselves for the public service in these countries, should take the earliest opportunities of becoming familiar with its use.\*

*Diseases in Classes and Orders.*

## CLASS I.

ZYMOTIC DISEASES.—*Zymotici* (ζύμη, leaven). Diseases that are either epidemic, endemic or contagious; induced by some specific body, or by the want of food, or by its quality. In this class there are four orders of diseases, namely:—

- ORDER 1.—MIASMATIC DISEASES . *Miasmatici* (μίσμα, stain, defilement).  
 " 2.—ENTHETIC DISEASES . *Enthetici* (ἐθετός, put in, implanted).  
 " 3.—DIETETIC DISEASES . *Dietetici* (δίαιτα, way of life, diet).  
 " 4.—PARASITIC DISEASES . *Parasitici* (παράσιτος, parasite).

\* The tables here given are partly taken from the able "HANDBOOK OF THE SCIENCE AND PRACTICE OF MEDICINE," by my friend and former colleague in the East, Dr. Wm. Aitken; they have been compared with forms kindly furnished to me by Dr. Farre for other purposes.