PREFACE.

This book endeavors to present an account of the diagnostic methods and processes needed by competent practitioners of the present date. It differs from other books on the subject in that it makes no attempt to describe technical processes with which the writer has no personal familiarity and gives no space to the description of tests which he believes to be useless.

To gain genuine familiarity with all the technical processes described in most books on physical diagnosis—such familiarity as makes one competent to use them with due regard for the sources and limits of error inherent in them—needs more than the life-time of one man. But unless one has one's self used a technical process long enough to gain this sort of mastery over it, one cannot properly describe it, far less recommend it to others. Because of my lack of personal acquaintance with such methods as cystoscopy, ophthalmoscopy, and laryngoscopy I have attempted no description of them, although I believe they should sooner or later be mastered by every internist. All that I have described I know by prolonged use.

A book constructed on this basis should make obvious what its writer considers important and what unimportant, and reveal therein not only his opinions but his personal limitations. But I believe there is no longer a demand for books that attempt impartially to present all that has been or is now thought of value by some one. The personal equation cannot and should not be ignored. In diagnosis as in therapeutics "What do you find valuable?" is the question that our contemporaries ask of any one of us, not "What has been recommended?"

In the endeavor further to break down the false distinction be-

tween clinical diagnosis and laboratory diagnosis I have described all the methods of getting at an organ—e.g., the kidney—in a single section. Palpation, thermometry, urinalysis are different processes by which we may gather information about the kidney. The student should be accustomed to think of them and practise them in close sequence.

For the same reason the most important methods of investigating the stomach have been grouped together without any distinction of "elinical" and "laboratory" procedure.

For the illustrations I owe many thanks to many persons, especially to Drs. Frank Billings, A. E. Boycott, E. G. Bradford, E. R. Carson, J. Everett Dutton, R. T. Edes, Joel E. Goldthwaite, J. S. Haldane, Frederick T. Lord, R. W. Lovett, H. C. Masland, S. J. Meltzer, Percy Musgrave, R. F. O'Neil, J. E. Schadle, William H. Smith, W. S. Thayer, and G. L. Walton; also to the editors of the Boston Medical and Surgical Journal, the St. Paul Medical Journal, American Medicine, The Journal of Experimental Medicine, and The Lancet.

My assistant, Dr. Mary W. Rowley, has helped me very much with the index as well as with other parts of the book.

190 Marlboro St., Boston. June, 1905.

TABLE OF CONTENTS.

CHAPTER I.

DATA	RELATING	TO	THE	BODY	AS	A	WHOLE.

									P	AUL
	Wеібнт,				•				1	1
	(a) Causes of Gain in Weight,									1
	(b) Causes of Loss in Weight,			•			•	•		2
r	TEMPERATURE—TECHNIQUE AND	Sou	RCES	OF	ERRO	OR,				2
	(a) Causes of Fever,									2
	(b) Types of Fever,									2
	(c) Subnormal Temperature,						all			2
	(d) Chills and Their Causes,								2	2, 3
	(a) Chills that Their educes,									,
	CHAI	PTE	R. I	Τ.						
	DISEASES OF THE HI	EAT). F	'AC	E. /	AND	N	ECK		
			, -				115			
	I. The Cranial Vault,									5
	1. Size, Shape,									5
	2. Fontanels,									6
	3. Hair,									7
]	I. The Forehead,			76)71						8
II	I. The Face as a Whole,									9
	V. Movements of the Head and F									13
	V. The Eyes,									13
	(a) Ocular Motion, .									16
	(b) The Retina,									16
V	I. The Nose,							V		17
VI	I. The Lips,									18
	I. The Teeth,									20
	Y The Breath									