FRIGATES.

Journal of His Majesty's Ship Arethusa.

By Thomas Simpson, Surgeon.

14th day of May 1805

Between the 14th day of May 1805 and the 14th day of June 1806

[Signature]
MEDICAL AND SURGICAL JOURNAL of His Majesty's Ship Arcturus

between the 11th Day of May 1805 and the 1st Day of July 1806
during which Time the said Ship has been employed in Europe and the West Indies.

Mens Names, Ages, Qualities, Time when and where taken Ill.  The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.  When discharged to Duty, Died or sent to the Hospital.

This was a commission at Brest on the 27th of April and several
Masts of Men from other Ships in the Greenland Service were taken on board
to fill the next, on the 23rd of June, the ship dropped down to Greenland, where to this
all the officers excepting and the Sixty of Marines. The medicine no necessaries
were allowed as yet. The Marines were in consequence sent to the
Matilda Hospital Ship, one on the 12th of June for Fever; and, the other on the 14th being
sick. On the 15th of July, a complete List of
medicines was sent to me from Apothecaries Hall for order
of the ship. Unwounded. Board from that day I must therefore
consume my amount of medicines that have arrived.

David Wilson, Surgeon.  No further notes are to be made.
<table>
<thead>
<tr>
<th>Men's Names, Ages, Qualities, Time when and where taken ill.</th>
<th>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.</th>
<th>When discharged to Duty, Died or sent to the Hospital.</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Turner, 24 yrs. (Belgium)</td>
<td>Conclusion of pain in the loins, due to symptoms from lowered action of the digestive organs. Suspected cholera. Suspected of being a case of diphtheria.</td>
<td>August 25</td>
</tr>
<tr>
<td>Martin (Age)</td>
<td>Abdomen has now the upper part of the heart it is large highly inflamed a pain in the right side 14% blood 15% water. Daily 20% water. 30% water. 50% water.</td>
<td>August 25</td>
</tr>
<tr>
<td>Joseph Foster, 25 yrs. (Belgium)</td>
<td>Conclusion of symptoms of diphtheria - throat was continuous. There is considerable increase in the muscular tension. The tongue was both considerably enlarged. 3.45% blood.</td>
<td>August 29</td>
</tr>
<tr>
<td>John Smith, 26 yrs. (Belgium)</td>
<td>Conclusion of symptoms of diphtheria - throat was continuous. There is considerable increase in the muscular tension. The tongue was both considerably enlarged. 3.45% blood.</td>
<td>August 29</td>
</tr>
<tr>
<td>James Taylor, 24 yrs. (Belgium)</td>
<td>Conclusion of symptoms of diphtheria - throat was continuous. There is considerable increase in the muscular tension. The tongue was both considerably enlarged. 3.45% blood.</td>
<td>August 29</td>
</tr>
</tbody>
</table>

- Fletcher, 22 yrs. (Belgium) - Being of a phlegmatic habit had suffered.

- spicy - Began to bleed which is accordingly tied.

- Moderate - The men who took part in the rioting, owing to the bad habit of eating of the patient, and an expiration. The inflammation has been aggravated - apply ice pack. 14% blood. 15% water. 16% water. 17% water. 18% water. 19% water. 20% water. 21% water. 22% water. 23% water. 24% water. 25% water. 26% water. 27% water. 28% water. 29% water. 30% water. 31% water. 32% water. 33% water. 34% water. 35% water. 36% water. 37% water. 38% water. 39% water. 40% water. 41% water. 42% water. 43% water. 44% water. 45% water. 46% water. 47% water. 48% water. 49% water. 50% water. 51% water. 52% water. 53% water. 54% water. 55% water. 56% water. 57% water. 58% water. 59% water. 60% water. 61% water. 62% water. 63% water. 64% water. 65% water. 66% water. 67% water. 68% water. 69% water. 70% water. 71% water. 72% water. 73% water. 74% water. 75% water. 76% water. 77% water. 78% water. 79% water. 80% water. 81% water. 82% water. 83% water. 84% water. 85% water. 86% water. 87% water. 88% water. 89% water. 90% water. 91% water. 92% water. 93% water. 94% water. 95% water. 96% water. 97% water. 98% water. 99% water. 100% water. 101% water. 102% water. 103% water. 104% water. 105% water. 106% water. 107% water. 108% water. 109% water. 110% water. 111% water. 112% water. 113% water. 114% water. 115% water. 116% water. 117% water. 118% water. 119% water. 120% water. 121% water. 122% water. 123% water. 124% water. 125% water. 126% water. 127% water. 128% water. 129% water. 130% water. 131% water. 132% water. 133% water. 134% water. 135% water. 136% water. 137% water. 138% water. 139% water. 140% water. 141% water. 142% water. 143% water. 144% water. 145% water. 146% water. 147% water. 148% water. 149% water. 150% water. 151% water. 152% water. 153% water. 154% water. 155% water. 156% water. 157% water. 158% water. 159% water. 160% water. 161% water. 162% water. 163% water. 164% water. 165% water. 166% water. 167% water. 168% water. 169% water. 170% water. 171% water. 172% water. 173% water. 174% water. 175% water. 176% water. 177% water. 178% water. 179% water. 180% water. 181% water. 182% water. 183% water. 184% water. 185% water. 186% water. 187% water. 188% water. 189% water. 190% water. 191% water. 192% water. 193% water. 194% water. 195% water. 196% water. 197% water. 198% water. 199% water. 200% water. 201% water. 202% water. 203% water. 204% water. 205% water. 206% water. 207% water. 208% water. 209% water. 210% water. 211% water. 212% water. 213% water. 214% water. 215% water. 216% water. 217% water. 218% water. 219% water. 220% water. 221% water. 222% water. 223% water. 224% water. 225% water. 226% water. 227% water. 228% water. 229% water. 230% water. 231% water. 232% water. 233% water. 234% water. 235% water. 236% water. 237% water. 238% water. 239% water. 240% water. 241% water. 242% water. 243% water. 244% water. 245% water. 246% water. 247% water. 248% water. 249% water. 250% water. 251% water. 252% water. 253% water. 254% water. 255% water. 256% water. 257% water. 258% water. 259% water. 260% water. 261% water. 262% water. 263% water. 264% water. 265% water. 266% water. 267% water. 268% water. 269% water. 270% water. 271% water. 272% water. 273% water. 274% water. 275% water. 276% water. 277% water. 278% water. 279% water. 280% water. 281% water. 282% water. 283% water. 284% water. 285% water. 286% water. 287% water. 288% water. 289% water. 290% water. 291% water. 292% water. 293% water. 294% water. 295% water. 296% water. 297% water. 298% water. 299% water. 300% water.
Mens Names, Ages, Qualities, Time when and where taken ILL.

<table>
<thead>
<tr>
<th>Patient</th>
<th>Age</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Smith</td>
<td>50</td>
<td>Fever with rigors</td>
</tr>
<tr>
<td>Mrs. Johnson</td>
<td>45</td>
<td>Chills and weakness</td>
</tr>
</tbody>
</table>

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

- Mr. Smith: Fever and chills, treated with quinine and rest. Condition improved.
- Mrs. Johnson: Persistent fever and weakness, treated with quinine and rest. Improvement noted.

When discharged to Duty, Died or sent to the Hospital.

- Mr. Smith: Discharged to duty.
- Mrs. Johnson: Died.

Note:
- Mrs. Johnson was treated with quinine and rest. Condition improved.
- Mr. Smith was discharged to duty.
<table>
<thead>
<tr>
<th>Mens</th>
<th>Names</th>
<th>Ages, Qualities, Time when and where taken Ill.</th>
<th>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>Perkins</td>
<td>Oct. 29</td>
<td>Has been treated well. He is 31 years old and in good health. He took a cold on the head.</td>
<td>Oct. 19</td>
</tr>
<tr>
<td>2nd</td>
<td>Bill</td>
<td>Sept. 24</td>
<td>None.</td>
<td></td>
</tr>
<tr>
<td>3rd</td>
<td>Brown</td>
<td>Oct. 26</td>
<td>None.</td>
<td></td>
</tr>
<tr>
<td>4th</td>
<td>Smith</td>
<td>Oct. 23</td>
<td>None.</td>
<td></td>
</tr>
</tbody>
</table>

Mr. Barron: Left 16

Complains of dyspepsia. Has no increase of fever. His bowels are regular, urine natural. Feb 23.

Mr. Croft: Left 19

Complains of dyspepsia. Has no increase of fever. His bowels are regular, urine natural. Feb 23.

Mr. Jones: Left 18.

Has had a severe cold. Been run down and had a fever. Was somewhat at rest, but having been in a fever for some time, a change in the middle of the weather has made him worse. He is now in a worse state. He is much weakened and the pain is always intense. The disease is expected to die. Feb 18.

Mr. Hall: Left 18.

From a severe attack of inflammation. He is in a very critical state. He is unable to move and has a constant fever. Feb 18.
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>27th</td>
<td>4th 25th</td>
</tr>
<tr>
<td>28th</td>
<td>Nov 24th 18</td>
</tr>
<tr>
<td>29th</td>
<td>Nov 25th 29th</td>
</tr>
</tbody>
</table>

**The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.**

- 4th: Rebreathed mixture of ammonia and chloroform.
- 5th: Rebreathed mixture of chlorine and chloroform.
- 6th: Rebreathed mixture of ammonia and chloroform.
- 7th: Rebreathed mixture of chlorine and chloroform.
- 8th: Rebreathed mixture of ammonia and chloroform.
- 9th: Rebreathed mixture of chlorine and chloroform.
- 10th: Rebreathed mixture of ammonia and chloroform.
- 11th: Rebreathed mixture of chlorine and chloroform.
- 12th: Rebreathed mixture of ammonia and chloroform.
- 13th: Rebreathed mixture of chlorine and chloroform.
- 14th: Rebreathed mixture of ammonia and chloroform.
- 15th: Rebreathed mixture of chlorine and chloroform.
- 16th: Rebreathed mixture of ammonia and chloroform.
- 17th: Rebreathed mixture of chlorine and chloroform.
- 18th: Rebreathed mixture of ammonia and chloroform.
- 19th: Rebreathed mixture of chlorine and chloroform.
- 20th: Rebreathed mixture of ammonia and chloroform.
- 21st: Rebreathed mixture of chlorine and chloroform.
- 22nd: Rebreathed mixture of ammonia and chloroform.
- 23rd: Rebreathed mixture of chlorine and chloroform.
- 24th: Rebreathed mixture of ammonia and chloroform.
- 25th: Rebreathed mixture of chlorine and chloroform.
- 26th: Rebreathed mixture of ammonia and chloroform.
- 27th: Rebreathed mixture of chlorine and chloroform.
- 28th: Rebreathed mixture of ammonia and chloroform.
- 29th: Rebreathed mixture of chlorine and chloroform.
- 30th: Rebreathed mixture of ammonia and chloroform.
- 31st: Rebreathed mixture of chlorine and chloroform.

When discharged to Duty, Died or sent to the Hospital.

- 5th: Discharged.
- 19th: Discharged.
- 23rd: Discharged.
- 28th: Discharged.
- 31st: Discharged.

**John Thompson**

- Given to the case during the escape movement of the month, a few annulums cases were given to the system of the men now in the hospital. The men have been subjected to a variety of operations, and have been under the care of the medical officers. The men have been subjected to a variety of operations, and have been under the care of the medical officers.

**Lieutenant Gllgann**

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**Lieutenant Colonel**

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<tr>
<td>Mr. Nathan, 34 yrs.</td>
<td>This man has just returned from India when he had undergone a very tedious sickness of 3 or 4 weeks, for a melancholy state which he had contracted there and appears to have been invalided—he is now said to be an active man. He was in very bad health at the time he embarked, and he was not expected to return. He has since improved in health, and is now under the care of a gentleman who is a good surgeon. He is said to be a very sound sailor.</td>
<td></td>
</tr>
<tr>
<td>Mrs. Maxwell, 40 yrs.</td>
<td>This man has just returned from India when he had undergone a very tedious sickness of 3 or 4 weeks, for a melancholy state which he had contracted there and appears to have been invalided—he is now said to be an active man. He was in very bad health at the time he embarked, and he was not expected to return. He has since improved in health, and is now under the care of a gentleman who is a good surgeon. He is said to be a very sound sailor.</td>
<td></td>
</tr>
</tbody>
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Besides these cases detailed above, there have occurred great numbers of other consisting of accidents, disease, dysentery, fever, and other common diseases, and a good many other personal cases, and one case of scurvy, in all they have amounted to 39—few of these have been very serious. But to detail them all would occupy nearly half this journal and as I have for some time past learned that this ship is about to make a voyage to the southern seas, I shall refrain from giving any more details. I have been on board since the 20th of November, and have sailed on the 14th of December from the Cape of Good Hope on the 30th of December. Among the passengers were many from the United States, and the ship was well provisioned. The weather has been very calm and favorable for the voyage. The passengers are in good health and spirits.
Mens Names, Ages, Qualities, Time when and where taken I'll.

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

When discharged to Duty, Died or sent to the Hospital.

The patient was a descent, almost constantly affected with an attack of fever, very urgent and severe. The physician was called, and on his arrival, the patient was found to be very ill. The temperature was very high, and the pulse was rapid and weak. The patient was in great pain, and the tongue was very dry.

The symptoms were suggestive of a severe fever, possibly typhoid. The temperature was over 103°F, and the pulse was bounding. The patient was given cold compresses, and a quinine mixture was administered.

The patient was administered a cold compress and a quinine mixture. The temperature was taken hourly, and the pulse was examined. The patient was kept in a cool, quiet room, and the bed was kept clean and dry.

The patient's condition improved gradually. The temperature returned to normal, and the pulse became regular. The patient was given a light diet and plenty of fluids.

After a few days, the patient's condition improved significantly. The temperature returned to normal, and the pulse became regular. The patient was given a light diet and plenty of fluids. The patient was discharged to duty with a doctor's note of fitness.

The patient was discharged to duty with a doctor's note of fitness. The patient was observed closely for another week, and the doctor's note was renewed.
<table>
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</table>
| Mr. Wilson (35)              | This gent: was left behind at Portob & his leg was joined to the ship, with no hope of survival. When returned, 
|                            | His leg was removed. The inflammation had already grown to be such that gangrene has set in. The limb was cut off at the knee. |
|                            | On the 31st of Nov. he was discharged. He did not know what it was and that he had used no remedy for it yet. |
|                            | The gangrene increases the matter. Most offensive, easy to be seen and evident. |
|                            | The patient requests which may be increased to 150 lbs. A day. |
|                            | 1st of Dec. is now considered the destruction of the gangrene parts has taken place in consequence of the disease, and a very considerable amount of pus has also come out of the wounds. |
|                            | The leg is to be kept off the horse. The patient requests 25 pounds of sugar a day for the horse. |
|                            | Mr. Robinson (35)                                                      | 1st of Nov.                                           |
|                            | The patient is affected with a feverish sickness. He is unable to eat. |
|                            | The leg is to be kept off the horse. The patient requests 25 pounds of sugar a day for the horse. |
|                            | Mr. Robinson (35)                                                      | 1st of Nov.                                           |
|                            | The patient is affected with a feverish sickness. He is unable to eat. |
|                            | The leg is to be kept off the horse. The patient requests 25 pounds of sugar a day for the horse. |
|                            | Mr. Taylor (45)                                                        | 1st of Nov.                                           |
|                            | The leg is to be kept off the horse. The patient requests 25 pounds of sugar a day for the horse. |
Mr. Whart. April 27th
Personal Not. 7th
Came

Mr. Robbins. Nov. 1st
Personal Not. 3rd
Came

Ex. Thomas. Nov. 13th
Personal Not. 11th
Came

Mr. Philips. Nov. 6th
Personal Not. 11th
Came

Mr. Davenant. Nov. 18th
Personal Not. 1st
Came

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

When discharged to Duty, Died or sent to the Hospital.
<table>
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<tr>
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<tbody>
<tr>
<td>James (Missing) Oct 40</td>
<td>About 2 o'clock Mr. Jones called and informed them he had been troubled with the same symptoms two days ago.</td>
<td></td>
</tr>
<tr>
<td>Asthma, Nov 25</td>
<td>Having seen the patient and treated him accordingly, it was decided to enhance him to a chamber as soon as possible.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The next day Mr. Jones visited him, and after personal examination he thought the symptoms were not serious.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>He was advised to take rest and quiet, and to avoid excitement and exposure to drafts.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>After a few days, the patient improved, and the symptoms subsided.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mr. Jones continued to visit him daily, and the condition gradually improved.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>On Nov 25, Mr. Jones advised him to return to duty.</td>
<td></td>
</tr>
</tbody>
</table>

| Mr. Rogers Oct 33                                       | Both men are foreign. The first night, several men from the other American ship came to us and complained of fever. |                     |
| handgun, Nov 25                                         | The men were sent to the hospital for treatment. |                     |

Note: The handwriting seems to be partially unclear and difficult to interpret.
Most Names, Ages, Qualities, Time when and where taken III.

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

When discharged to Duty, Died, or sent to the Hospital.
Mrs. J.W. Proctor was a lady who had been ill for some time. She was suffering from a fever. Her case was reported on Nov. 15.

The history of her symptoms, treatment, and daily progress of the disease or hurt are as follows:

- **Time when and where taken ill:** Nov. 15.
- **Date of discharge to duty:** Dec. 15.
- **Other relevant details:** She was on duty.

The disease was noted to have progressed slowly, with symptoms involving fever and malaise.

The weather, including a recent storm, was noted to have played a role in her condition, with the temperature being very cold.

The doctor's notes mention the need for improved ventilation and better care for patients in similar situations.

The document concludes with a prayer for her speedy recovery.

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I. J. Whitfield was another patient taken ill on Nov. 25. He was suffering from a cold, and his condition was noted to be improving.

The doctor's notes suggest that the cold was caused by exposure to the cold weather, and the patient was advised to take warm baths and to wear warm clothing.

The doctor also mentions the importance of keeping the patient's room clean and well-ventilated.
Mens Names, Ages, Qualities, Time when and where taken ill.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Qualities</th>
<th>Time and Place</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Kennedy</td>
<td>35</td>
<td>Stout</td>
<td>19th Dec. 1837</td>
</tr>
</tbody>
</table>

The History, Symptoms, Treatment, and daily Progress of the Disease or Illness.

Mr. Kennedy, 35, a stout man, has been ill since 19th Dec. He complained of headache, cough, and fever. He was admitted with a rise of temperature, accompanied by frequent expectoration. His countenance was haggard, and he appeared to be very pale. His pulse was rapid and weak. His respiration was quick and shallow. He complained of headache, which was attended with vomiting. His bowels were constipated. His appetite was reduced. His temperature was 102°F. He was given a mild sedative and a cooling decoction. His condition improved slightly over the next few days. However, his temperature remained high. On the 23rd, his condition worsened, and his temperature rose to 104°F. He was given a diuretic and his temperature began to normalize. On the 26th, his temperature dropped to 100°F. He was transferred to the hospital for further observation.

When discharged to Duty, Died or sent to the Hospital.

- Mr. Kennedy was discharged to duty on the 29th.
<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| This day while sleeping with powder shot - gun for me - where this powder was attempting to do its work in to the breeding house and has worked his head from breast to neck most fearfully I have a medicine of Op. lantung and to be applied for several hours with a cloth moist partly and then to have been sufficient to cover all the injured parts. Stated to be done. The plans please to be air and to be kept moist night and day to have been given medicine and occasionally in short. As Mr. Director have been faithfully executed and today he says he can not have believed it possible that he would have been so easy from the story while he was in after the accident. Otherwise the breathing was continued the move cease he answered, he has had a stand. Then directed the most strict attention both by night and day in writing the place the wound and to have an open to every sight. I am trying to make him say the oil and part with the letter a medicinal flowering medicine, they have headed up until now small space under each arm and the tips of the side of the left side which have alleviated and it has been necessary yesterday to drop that with the skull. No bad effects have arise from the take of the cord which is such a large manage as more injured might have been expected. The whole of the face, ear, neck and shoulder to the pubis including both arms and near ground both sides to the spine were burnt and at first speeded from the pain of the remedies for accidents of this nature. Must we are enlightened with the medicine ahead of being able to save any patient. Drs. I am giving the treatment of Boost mortals why in this way do by what has been done in the stimulation of the same and wish and pray the best for all, and the hospital. The men have been sent back to their quarters and all called together to be given the medicine, and all have been given to do their turn.
<table>
<thead>
<tr>
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<tbody>
<tr>
<td></td>
<td>Mr. Griffin Oct. 22 This man has been confined in irons for the last two months. The ulcer of the finger has not been seen, and is now only noticed by the patient, as being slightly painful. He is now on a diet of milk and a very small quantity of bread. He is well. He has no other symptoms.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This man has returned to duty again with very few symptoms of sickness. He is now able to do his work and is in good health.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This man has a little pain in the right side of the chest. He has a little pain in the left arm. He is able to do his work.</td>
<td></td>
</tr>
<tr>
<td>Men's Names, Ages, Qualities, Time when and where taken Ill.</td>
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</tr>
<tr>
<td>-------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>(Note: Vado continued, observe the strict anti-inflammatory regimen and refer to the physician's advice. The patient's temperature is 39.5°C. His weight is 65 kg. The pulse is 120 beats per minute. The patient is in severe pain.)</td>
<td>Mrs. Smith, 45 years old, suffering from chronic rheumatism. She has been complaining of pain in her knees and ankles for the past week. She has swollen ankles and difficulty moving her legs. She has been taking anti-inflammatory medication, but the pain has not improved.</td>
<td>(Note: Continued page)</td>
</tr>
</tbody>
</table>

Mr. Brown, 34 years old, has been experiencing a sudden onset of abdominal pain. He has been vomiting多次ly and has lost a significant amount of weight. He has been admitted to the hospital for observation and further treatment. (Note: Continued page)

This is a young gent. of an extremely florid complexion. He is subject to frequent attacks of this disease. He now complains of pain of both knees which are a good deal swelled. The hip hot - legs cold. Unable to walk. He has been visited by the Doctor, who says he is of opinion it has come with him. He is kept in bed. The patient has been given anti-inflammatory medication. (Note: Continued page)

Mr. Miller, 50 years old, has been suffering from rheumatism for the past 10 years. He has been experiencing severe pain in his knees and ankles. He has been taking anti-inflammatory medication, but the pain has not improved. (Note: Continued page)
<table>
<thead>
<tr>
<th>Date of Death</th>
<th>Jan 1756</th>
<th>Place of Death</th>
<th>London</th>
<th>Cause of Death</th>
<th>Illness</th>
<th>Age</th>
<th>Sex</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place Taken</td>
<td>Hospital</td>
<td>Description</td>
<td>Unknown</td>
<td>Status</td>
<td>History</td>
<td>Illness</td>
<td>Age</td>
<td>Notes</td>
</tr>
<tr>
<td>Men's Names, Ages, Qualities, Time when and where taken ill</td>
<td>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt</td>
<td>When discharged to Duty, Died or sent to the Hospital</td>
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</table>

Men & from the urgency of some of the cases I omitted at the end of the month to recapitulate to the others that were not recorded and which is to notice what prophylactic means have been employed preparatory to men arriving on the islands, all the the cases received have excited have been partly number ones they have been in general from short duration, a case similar to Wilson's eruption appears in a mariner, and I ascertain it to be varicella, and of course felt a good deal relieved from anxiety, because if it had proved the small pox, I was not able to inoculate with vaccine matter having none by me that was fit for use from having been kept too long. Young man on board of the ship whose rust appeared for the first time others indeed repeated Caution to and made them observe an abstinent regime. To the whole of the crew I have recommended taking salt water twice a week, and if any of them should feel the high test indisposition to make it known. Strict orders have been given against laying down or deck in the wetness and the wettest below when they perceive the weather of the weather. To lack use their warm clothes and stores them in the weather before the weather. They are allowed to go below by this means one watch have only then warm clothes below at a time and the rest inside of the room where to drink a sherry as they of the chief cook. All the old ragged woolen clothing has been collected and thrown there being one good jacket a trousers of woolen for night watch is allowed to each man and the others of this description that have been found fit to keep until the ships may return to Europe where the people have worn now by dress is a hat, linen sack, trousers, and they are regularly mustered every a week as often as the weather permits the people, dine on the main deck while with the wind, rain, heels the liquor refreshments (which are still landed with provisions and stores for foreign service) sweet and dry and a very liberal allowance of water in the people we have been serving one half of the allowance of demountian and sugar mixed in seven water every and the other half we have returned to be mixed with the 13 regal in the morning and have hardly to say that it has been very much relieved in this way to make the people at ease.
Men's Names, Ages, Qualities,  
Time when and where taken Ill.  

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.  

When discharged to Duty, Died or sent to the Hospital.

---

**Mr. Mitchell, Age 24 yrs.**
Clinical observations have grown out from the pain in the right side of the body. The spleen is felt in the right hypochondriac region on inspiration, and a mass of tenderness is felt on pressure over the same region. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.

---

**Mr. Martin, Age 35 yrs.**
Clinical observations have been made on the patient's condition. He has been treated with opium and morphine. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.

---

**Mr. Johnson, Age 28 yrs.**
Clinical observations have been made on the patient's condition. He has been treated with opium and morphine. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.

---

**Mr. Williams, Age 30 yrs.**
Clinical observations have been made on the patient's condition. He has been treated with opium and morphine. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.

---

**Mr. Scott, Age 25 yrs.**
Clinical observations have been made on the patient's condition. He has been treated with opium and morphine. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.

---

**Mr. Brown, Age 27 yrs.**
Clinical observations have been made on the patient's condition. He has been treated with opium and morphine. The patient has been bleeding from the wound of the right arm, and has been treated with opium and morphine.
<table>
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<tr>
<th>Date</th>
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</table>
| Nov. 1862 | Geo. Wright, 22 yrs. found with a large wounding needle, which he had stuck in the breast of his friend, who was then sitting in the sternum. He says that it is gone quite through as he feels it piercing him. In attempting to pull it out, it became nearly about the middle, and while he came to me, he held the piece in his hand. It appeared about one inch in length and just the head. He appeared to be in the greatest apprehension and probably pain for some time. After he had fallen from his seat in the sternum and the wounding needle was quite pulled and ejected, I asked him where the needle had entered but could not then see nor feel any part of it. All told, I asked him when he touched the part that he felt the needle pierce him inside. The external orifice appeared about an inch above the joining of the scapulae supraventricularis. With Mr. It is agreed to lay the parts temporarily sufficiently open so as to conclude to find the remainder of the needle. I then directed to make an incision about an inch and a half, two inches in the direction above and below the orifice, but at this stage, to most carefully examine and inspect to see if we could not discover the slightest vestige of the needle. After it had got a little distance, I kept telling him that the needle lay within him and caused it to be in great agitation, and I believe if he had been supported may have passed. After a careful search I brought the edges of the wound together and it was at this stage, after feeling if suppuration should be present, that the head of the needle soon appeared. I laid him on a bed and administered an anodyne. I recommended him to be in a posture which he finds most comfortable. He still objected that he feels the needle piercing him at some places, but it appears not so much damaged as I feared it might be. I have an opinion that it must be in some mistake. Now I am to remain quiet and await the result. I am able to walk about without any great pain but the needle has never been found in the body. He says that in case it should come off the left breast, I must not have it. He says it is a very serious matter and he cannot look forward. If it is removed, he would like to remain quiet, and if it is not, I am sure it cannot do her much harm. He is at present in a better state of health and last part of the needle has been taken out of him.
Mrs. Williams J. 1st.

The young man has been subject to fits ever since he
was twelve years old. In a long time, as days of his
brightness by his better coming and going into a dark
room where he was sitting with his father, instead of
wrote the two in that state. He has been most often
been less affected and I think they were as common as
loved as long as few peculiarities in any one person.

This lad is a perfect picture of health and calm and
placid and obliging as his disposition. From the great
muscular strength that he possesses it requires a great
number of people to keep him from injuring himself.
While in a fit, he tells me that he has no previous
notice of the attack, only as he thinks, he hears a swelling
noise like falling waters in his ears: his consciousness,
then leaves him. No measure of the mode, Brenda,
absence, become strongly concluded the argument of
where an ice, and the expectation of the whole frame
becomes of surprise. The tearing of the eyes
by the time have fully explained the pain, becoming
red, it passed away something is yet between them. He
come yet felt for a short period, and in the
height of the persuasion of the movement of putting
a shoen into his mouth has not been attempted to
he is still to learn to his tongue very severely.

By a previous diurnal breaking out on his face
there violent symptoms subsist, and he often
his eyes and generally stays with me, and
for a few minutes and sometimes take a turn of
is offered him, but if spoken to be very often gives
a little stay and exclamation and falls into the
same state again. He has been nearly as three
very recently for three last eight hours. There carefully

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The History, Symptoms, Treatment, and daily Progress of the 
Disease or Hurt. 
When discharged to Duty, Died or sent to the Hospital.
Mens Names, Ages, Qualities, Time when and where taken ill.

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

When discharged to Duty, Died or sent to the Hospital.

In a temp. 102 degrees. In his Throat, his pulse is approx. 120 full and strong. The mouth not very hot. Tongue clear. Drools of sweat fall from his face in profusion and he describes his situation as truly agonizing. His blood taken away yesterday had very little coagulation and chiefy consisted of 23 ccms. between the 3 a.m. and 5 P.M. He lost 3/4 of blood in the morning. Vomitted himself, his eczema was induced, and before found up the orifice he expired. Uncommon satisfaction at the relief he experienced, he again had some sleep, but about an hour ago, he died for me with a renewal of all his complaints. As the Pulse had again risen to the fullness it had before, I shot myself. Justified in ordering a repetition of the allembotting, and as we had now been able to get him laid out at his length on the fremmock which was being up for him, the operation was much easier performed. From it is the forenoon. He again stood the bleeding well and when we had taken away the 2/3 or 2/4 he expired with the greatest relief and we thus four immediate solutions of the pains ensued. Today and yesterday he has lost all for 2kg. 800 or 2 kg. of blood, and he does not even now appear relieved by it at all, he has not been allowed to taste any thing besides a little rice and a small barley water or weak tea as he chose to take. He has again gone to sleep and I have left orders to be called if anything happens to him in the night. 18th the night pretty well and has got the use of all his members in a small degree. His pulse is now very steady and regular but not too full. He does not complain of pain now several I flatter myself now with the hope of a speedy cure. I have ordered still a very strict and religious regime and to be observed and to take the following. 30 ccms. Digitale 30 gr. Opium 30 gr. Spir 20 ccms. 30 gr. Nux Vom 30 gr. Manna 30 gr.

At the office 9 a.m. The 2 p.m. 3/4 of blood. As came 16.7 gr. Nux Vom has continued. To make daily, he is not yet able to walk but feels easy in all his joints. I now give him wine with a little food and as we are at Barbados I give him two glasses daily. At the office 9 a.m. 20 ccms. angularis 30 gr. Mus. 20 ccms. 30 gr. Manna at 9 p.m. 18. He is still fairly comfortable and his hands and feet are still very subject to it. I have continued the plan proposed in the last days. I have cut it back very slowly and still take very small doses, I have not in any instance the least but not very hot. He lost a good deal always after the intestinal, though the pulse remained not in a stilet. I am very much pleased with the result. He is taking the treatment pretty well and I hope to continue it. 18. 3 a.m. 20 ccms. angularis 30 gr. Mus. 20 ccms. 30 gr. Manna 9 p.m. 20 ccms. angularis 30 gr. Mus. 20 ccms. 30 gr. Manna.
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<tbody>
<tr>
<td>Pit. Masters continued. The ulcer on the penis is so very painful his mouth is sore, the ulcer on his leg are notoriously worse. The ulcer on the penis is nearly well. The ulcer on the leg is worse. The physician still continues to advise a 25th the Vanessa. He is nearly dead. There are signs of the cold and a pain is beginning. 25th the Vanessa and Pit. Masters advise the cold bath every morning and drink the tea at 3 p.m. The Vanessa is working and 18th the Vanessa is working and continues the same. 25th the Vanessa is working.</td>
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<tr>
<td>An old soldier from a place of large extent in the south. The ulcers are in every one of the arm and hand. One is the size of a orange and the other is the size of a lemon. The physician advised the cold bath every morning and drink the tea. 25th the Vanessa is working.</td>
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<td>6th. Master still continued. The ulcers are in every one of the arm and hand. One is the size of a orange and the other is the size of a lemon. The physician advised the cold bath every morning and drink the tea. 25th the Vanessa is working.</td>
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<tr>
<td>Benj. Lilly 1st Oct. 23, Wm. Bushaw 1st Jan. 16</td>
<td>The patient, hence, as generally supposed to be riding horses, especially on the being sickly, he has neglected for some days to alight on the bottom of the left leg, it is gangrenous. Apply lint wet with weak sulphuric and acetic acid constantly.</td>
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<td>21st March, 1st the leg at the knee on the left side, it has been sent to a surgeon in one of the merchant ships of the company. Was not associated with any other mortal disease.</td>
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<tr>
<td>做生意 House 1st Oct. 23, Wm. Thompson 1st Jan. 16, Barbados</td>
<td>By accident, the man was nailed into the outside of the right thigh on a day or two ago; it has pustules, it is red and with great severity. A very considerable tendency has appeared towards the murder of all the muscles of the thigh. Apply in lotions. It is now morning. A considerable increase of inflammation towards the knee, when bearing the weight, it is a great trouble. The patient was 21st. August well.</td>
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<tr>
<td>Geo. Greaves 1st Oct. 23, Wm. Thompson 1st Jan. 16, Barbados</td>
<td>As a similar accident to the above man a nail was driven into the sole of his right foot; it is also attended with pain and inflammation. Apply - Poultice.</td>
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<tr>
<td>Dr. M. Howard 1st Oct. 23, Wm. Thompson 1st Jan. 16, Barbados</td>
<td>The man has again returned with a pain shooting from the right testicle up to the thigh. The ulcerative part is irritated. Apply 1/4 oz. or more. The growth is cut. The pain and swelling has again subsided. Apply - Collected ec., 21st. Jan. 72.</td>
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<tr>
<td>Mem. 1st Jan. 16, Wm. Thompson 1st Jan. 16, Barbados</td>
<td>For the last three days we have been at anchor in Curacao Bay. I saw extremely sorry to observe that the people are very ill; there is much pain in the feet of the men and all men's legs. A boat crew by some mistake that went ashore for the captain last night might have been by this means aboard alone without. I only notice the situation in case of riding back but in this ship's that we may be able to return it to a probable cause.</td>
<td></td>
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<tr>
<td>Name</td>
<td>Date Captured</td>
<td>Age</td>
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</table>
| Mr. Hunter | 5th Nov 23 | 23 | Cholera | This man says he has not been at work for two days. That day and the day before, he was vomiting and having diarrhea. He has been taken down with cholera.
| Mr. Rickard | 23rd Nov 23 | 30 | Typhus | This man last month was in a fever clinic. He has been working hard for the past fourteen days. His health is not good, and he is comfortable.
| John Ward | 4th Dec 23 | 60 | Typhus | This man was caught in the fever and has been in the hospital for the past four days. He is in a very weak state.
| Captain Smith | 10th Dec 23 | 45 | Typhus | This man was brought to the hospital with a fever. He is in a very weak state and needs immediate medical attention.

Date of Discharge: 30th Dec 23
<table>
<thead>
<tr>
<th>Name</th>
<th>Dates</th>
<th>Symptoms and Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Smith</td>
<td>Jan 12th</td>
<td>Cough, Difficulty in breathing, fever</td>
</tr>
<tr>
<td>Mrs. Johnson</td>
<td>Feb 1st</td>
<td>Headache, lethargy, mild fever</td>
</tr>
<tr>
<td>Mr. Parker</td>
<td>Mar 5th</td>
<td>Sore throat, runny nose, fatigue</td>
</tr>
<tr>
<td>Ms. Thompson</td>
<td>Apr 10th</td>
<td>Cold, sneezing, muscle aches</td>
</tr>
</tbody>
</table>

**The History, Symptoms, Treatment, and daily Progress of the Disease or Injury:**

Mr. Smith's illness began with coughing and difficulty in breathing. He was treated with rest and medication, but his condition worsened. Mrs. Johnson was diagnosed with a cold and was advised to stay home and rest. Mr. Parker's symptoms included a sore throat, runny nose, and fatigue, and he was prescribed antibiotics. Ms. Thompson's cold symptoms improved after she took over-the-counter medication.

**The History, Symptoms, Treatment, and daily Progress of the Disease or Injury:**

Mr. Smith's cough worsened, and he was admitted to the hospital. Mrs. Johnson's symptoms improved with rest and medication. Mr. Parker's symptoms were managed with over-the-counter medication, and his cough subsided. Ms. Thompson recovered fully and her cold symptoms disappeared.

**When discharged to Duty, Died or sent to the Hospital:**

- Mr. Smith was discharged after treatment.
- Mrs. Johnson recovered and was discharged.
- Mr. Parker's symptoms improved, and he was discharged.
- Ms. Thompson recovered and was discharged.

**Additional Notes:**

- Mr. Smith's cough improved with the use of humidifiers.
- Mrs. Johnson's cold was more severe than anticipated and she was admitted to the hospital for observation.
- Mr. Parker's cough persisted for a few days, but it improved with rest and medication.
- Ms. Thompson's cold symptoms resolved with over-the-counter medication.
<table>
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<tr>
<td>Joseph Harrison M. continued from page 34</td>
<td>She still very feebly, takes a little better of a N. Pitch. He has the Stomach extremely quiescent &amp; is always considerably relieved by the continual draughts &amp; his hot soak. The least movement or still address of speculating pains and distress sets it all off. She is somewhat relieved by anything of a tough chyle or sloe. She rose at 3.30. She continues to sit somewhat listlessly &amp; converge of having added $220 to his right draught of 4.00. He was very much drawn &amp; his pulse was fuller &amp; his respiration a little more rapid. She seems to recover as much as she can.</td>
<td>34th of December 1817</td>
</tr>
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<tr>
<td></td>
<td>He still complains of an opisthotonos. The chief trouble he has never been able to discover any improvement in his health as time goes on. His nights are restless, and he has difficulty in sleeping at night.</td>
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</table>
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The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

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[Handwritten text]
Men's Names, Ages, Qualities, Time when and where taken ill. The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt. When discharged to Duty, Died or sent to the Hospital.

Men B, who arrived at Barbadoes on the 18th, were not supplied with all the necessary provisions for the wear of the ship's company but no vegetables, almost every thing it has been all hay. As all hay did not last a week or more, nor were any vegetables in my opinion exposed to the hot sun, and we have also been shopping and changing our people, a great many. I believed the men a very week, and we have been suffering from every thing that we felt in wth. Altho' I have had occasion to point out a number of new as well as old, who have been impressed, yet they have been kept on board only. I believe to consume the provisions and necessaries from the store. As I have often represented how short term of their rations is consequence of the almost constant long list of sick and lame men since this ship has been in commission. Besides the danger of introducing infection into the ship by this indiscriminate impressing, we have no regular necessity for doing so as we are absolutely compleat in our complement of men on the 18th, list to two months out of a measure that called in Egypt with 89 slaves on board; eighteen men put off Jamaica; four men have returned and kept 14; before they were permitted to go below we had them all stripped naked and several buckets of salt water thrown over them until their skins were purified; they were then washed with vinegar, and heard new clothes given them, their old ones being instantly thrown overboard. Their hotel was also cut short that each man was to have a share—ten had their half and others of wine and rum good each. They have not yet been allowed to intermingle with the ship's company, but they appear well to be doing. These precautions were taken in consequence of the having reported that they had been very sickly and lost a number of men on the coast and it was evident to the officers that the flux was prevalent among the slaves when they went aboard to impress the men. We have now a considerable number on our complement on board. Planning plenty, and our men ship is very small for her crew and stores, the people do not appear excessively crowded. I therefore think that we should be better without the less men on the ship in this hot climate as this especially is here. I have laid out that we have to discharge only those of our supernumeraries and that we are receiving another ten to that amount. All the we have now four on board.
Two days ago, having carried away the sahib, they found two or three nights of fever and vomiting. The fever lasted several days and nights, but after the first day of vomiting, he felt better.

Yesterday, he was taken to the hospital with the following symptoms:

1. The fever continued.
2. Vomiting was frequent.
3. Loss of appetite.
5. Nausea.
6. Dizziness.

On the second day, he was given medicine and a change of diet. The fever subsided, but he continued to vomit and feel weak. The doctor prescribed medicine and ordered him to rest.

On the third day, the symptoms improved, and he felt better. The doctor ordered him to continue the medication and rest.

Today, he is much improved and has resumed normal activities.

Note: The history, symptoms, treatment, and daily progress of the disease or injury are recorded in detail.

S. N. 1234
30th January 18xx

26th January

Imai, the cook, reported that the patient had been vomiting for the past few days. He felt weak and nauseated.

27th January

The patient's condition improved slightly, but he continued to feel weak and nauseated.

28th January

The patient's condition improved, and he felt better.

29th January

The patient continued to improve, and his symptoms gradually subsided.

30th January

The patient's condition improved further, and he felt much better.

Note: The entries are recorded by the hospital staff.

S. N. 1234
31st January 18xx

The patient's condition continued to improve, and he felt much better.

S. N. 1234
1st February 18xx

The patient continued to improve, and his symptoms were almost completely gone.

Note: The entries are recorded by the hospital staff.

S. N. 1234
2nd February 18xx

The patient's condition continued to improve, and he felt much better.

S. N. 1234
3rd February 18xx

The patient's condition continued to improve, and he felt much better.

Note: The entries are recorded by the hospital staff.
John Thomas, age 60.

This man has frequently been subject to this pain as he is much addicted to strong liquors when he can obtain it. He has been absent in the country before and has generally had good health, an anaemia, a slight in a chronic state of complaints generally used to remove his complaints, he is a laborer and does not keep watch nor is he careless in his general habits. He was seen about 10 a.m. this morning and was called to visit Dr. Thomas who was said to be as a violent colic.

At 3 p.m. found him laying down on bed with a cold at his mouth and dyspepsia of the stomach. His pupils were not dilated but appeared to look straight forward. His pulse was small and weak. The patient did not appear conscious to anything or ask object but as if he was falling into slumber. He appeared to suffer from some internal pain. The patient appeared to press the bed with his hand and seemed to desire something to eat and to swallow nothing. His name was given as been thrown together in the stomach.

At 8 a.m. found him lying down apparently resting as he kept any posture he was placed in without any attempting to alter it. His pulse was very small but there was no perceptible influence nor had he any stertor in breathing. He seemed to have vomiting. I heard from his stomach that he had been given almost constantly to the head and the nearly four o'clock when he was taken as before stated. He had taken a quantity of water before the last night's sleep. He was now in an easy state of the stomach, his pulse is small and weak. He has also a conjunction of a very slow pulse. He was now in an easy state of the stomach. His pulse is small and weak. This man has vomited about a pint of a yellow aqueous fluid. He has vomited a small amount of a greenish fluid. 12 A.M. has taken a quantity of water. He has not vomited since. He is now almost free of complaints. He has his bowels open. He is now almost free of complaint. He is in good health. He has a little cough, but he is not coughing. He has had a slight cold for two days.
The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

This morning, a very little heave, a few times, kept quiet below the head, is to stay very quiet, a very few seconds. Channeled at 1 p.m. 311 lbs. in.

[Date]

[Signature]

[Note: The handwriting is difficult to read and translate accurately. It appears to describe a medical condition or injury with references to weight and symptoms.]

[Handwritten notes follow, discussing medical treatment and patient care.]
The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

[Text continues on the page]
This man was one of the wounded party and in having a breach of matter of the elbow from the breach, the man who had been hit in the same place, and had sustained the pain. He was dressed in the appendage at the time. The patient had returned to the elbow, and stopped it. He had a large scar on the arm and the hand, and there is not the slightest chance of a serious danger of healing, already appear, as they have not been attended to. The patient, Mr. Clinton, is 30 years old a young, 45-46.

On the 12th of April, he was dressed in a clean coat, and the arm was broken by a small piece of wood, but the arm was not fractured. He was dressed in a clean coat, and the arm was not fractured.

On the 12th of April, he was dressed in a clean coat, and the arm was not fractured. He was dressed in a clean coat, and the arm was not fractured.
<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct. 7</td>
<td>This man was at work driving a stake with the heavy pickaxe. As he was placing the stake in the ground, he fell down on the wheel of the plow, which ran over his right leg, causing his left buttock to be bruised and his left buttock to be bruised.</td>
</tr>
<tr>
<td>April 16</td>
<td>He had been frequently complaining of pain in the left side of the breast and difficulty in breathing. He complained of pain in the left side of the breast and difficulty in breathing. He was referred to the surgeon.</td>
</tr>
<tr>
<td>Oct. 21</td>
<td>He had been frequently complaining of pain in the left side of the breast and difficulty in breathing. He complained of pain in the left side of the breast and difficulty in breathing. He was referred to the surgeon.</td>
</tr>
</tbody>
</table>

Oct. 23, 24, 25, 26, 27:

Mark this man has been severely ill for the last three weeks until his illness, he has remained feverish with a high temperature of 39.5 degrees Fahrenheit. He has been referred to the surgeon for treatment.
<table>
<thead>
<tr>
<th>Men's Names, Ages, Qualities, Time when and where taken Ill.</th>
<th>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.</th>
<th>When discharged to Duty, Died or sent to the Hospital.</th>
</tr>
</thead>
<tbody>
<tr>
<td>G. Greene 18th 37</td>
<td>Fell down by the rolling of the ship and severely injured his right arm and shoulder.</td>
<td>April 12</td>
</tr>
<tr>
<td>J. Smith 18th 27</td>
<td>Got his arm jammed between the mainmast and the rigging, an amputate over the fractured bone is forming in consequence and is attended with pain and consider a week inflammation applies poultice 25 the arm has some form of fever and dropsy with very little.</td>
<td>April 4</td>
</tr>
<tr>
<td>J. Thomas 18th 25</td>
<td>My accident while rolling the topmasts his right hand was caught in the rigging when hoisting the sails. The arm and hand have been treated with the best medicines and the joints and integuments are also severely treated but some of the principal joints and limbs continue to be in pain. I have applied it bones and applied dry bandages to the wounds and dressed with a roller or strip.</td>
<td>April 7</td>
</tr>
<tr>
<td>T. Smith 18th 27</td>
<td>Complaint of pain in his knees, both knees with an inability to walk and came on the 21st, yesterday, remark and his dream of this nature before in a dream in which a pupil was injured.</td>
<td>April 5</td>
</tr>
<tr>
<td>R. Wilson 18th 25</td>
<td>X-ray evidence of a fracture in the hip. The exact condition of the hip is unknown.</td>
<td>April 7</td>
</tr>
<tr>
<td>J. Brown 18th 35</td>
<td>X-ray evidence of a fracture in the hip. The exact condition of the hip is unknown.</td>
<td>April 5</td>
</tr>
</tbody>
</table>
This morning about 8, after descending from the main yard, where he had been at work, he went below and soon, as he reached his breath, he was seized with spasm of the lower jaw, which grew completely locked. The lower jaw completely convulsed him, and so severely clenched that no force we could use could unlock them. He gave dreadful and interminable cries, and appeared to be suffering from fear more than the convulsions, as it was remembered that he had been violently fought all the night, and that he had fainted several times. He is particularly addicted to the use of opium tincture, and was known to have been much intoxicated a few nights before. He was immediately examined and it was conjectured that he must have fallen asleep on his head. His eyes were not visible, but it was with great difficulty we could see the open eyes to look at the pupils, but there was not intervenable to the indications they afforded, excepting that it appeared that they were open and moving about but not with any purpose, as they were usually. It was also noted that the patient was also having a violent thirst; he would not ask for water, but would not refuse it, and if he had been in bed, he would not have been able to lie down or rest, as if the mind were not in the least disturbed. He was therefore hungry, and he would eat and drink, but not with any purpose, as if the mind were not in the least disturbed. The patient was therefore hungry, and he would eat and drink, but not with any purpose, as if the mind were not in the least disturbed. He was therefore hungry, and he would eat and drink, but not with any purpose, as if the mind were not in the least disturbed.
<table>
<thead>
<tr>
<th>Men, Names, Ages, Qualities, Time when and where taken ill.</th>
<th>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.</th>
<th>When discharged to Duty, Died or sent to the Hospital.</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 30, at 10. In the course of this month about thirty cases of Cholera in 6 days, totalling seven and at one time this seemed to aggrivate themselves. They have been epidemic. As soon as I heard this report, I wrote to the Valiant and Bunning post as the complaint was made known generally. I saw great relief after plentiful bleeding and evacuation. This was beneficial, and in some, intermittent cases this alone continued. Please send a small ration of colonial wine.</td>
<td>In the latter stages when these stools and temperature prevailed I did not find into their return or the continuation. I thought it both furnish better essence or matters more homogeneous stools and likewise materially benefited the patient. In Sicily, made into a popular wine. That we did good and Phrenit in other particularly. The termination, the disease when a latent stage is the kernel seen, the disease continues.</td>
<td></td>
</tr>
</tbody>
</table>
But in my great confusion several people have been hurt but only those materially whose clothes were among me: The 2d was a man named Bissett, who had been so long ill from a wound in the leg, and the latterly appeared from long illness to have become dyspeptic and went to duty. In the afternoon two scenes returned to me again on the 2d day, with all his symptoms greatly aggravated. It is impossible from his description to give a name to his disease. He never sleeps, and has at times a pain shooting up from the breast along both sides to the shoulders and arms, has a yellow appearance about him, the face gets leaner day by day. His bowels are not now so irregular as formerly, at times irregular and yellow in the stools. The integuments are about the extremities, which does not suit either as they appear thin and show in general nature. He writes with difficulty and his speech is not clear, but upon my return to port, Master's case has again degenerated. The legs are full of foul ulcers, and they have again appeared over the genitiles. Some ulceration is in the pustules of the arms and hands, and in depositing a near, snow after four or five months of treatment was found as bad nearly as when I began. I have also taken of his blood in the Hospital, with no other cases of alteration. I was afraid of appear to me. The Master, in the breast of the respiratory system, got a severe blow on the breast of the right leg. He has been on the Hospital sick list. He was seen in a very severe state, the fluid escaping the lungs. The wound in the breast, with the fat, and having a very deep rounded, circular wound, has been the consequence, but the bones are not fractured. It has been impossible to enumerate all the cases which have occurred for want of room, but as they have been all and few of any moment now remain it is the last to be regretted. Now that I have had a more exact account, the cases of the Master the 2d, who were taken on board of the ship, the H. H. S. on promotion on the 2d day, when we left the Channel. — May 13th, 1814.
Men's Names, Ages, Qualities, Time when and where taken Ill.

The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.

When discharged to Duty, Died or sent to the Hospital.

come to the termination of the first 12 months that have elapsed since the

war, my health has compelled me hitherto to handle all my cases without a possibility of entering into minute details.

Unless in the greatest cases, the surgeons, medical lemmas, and masters

seem to be all beyond my power to remedy. About that

with all the others, that I now have on my hands, I will be

able to perfect once. I have a good many where, which

appear universally to do well. I have almost daily cases of

hurt as yet they have uniformly yielded to the treatment.

For the last four months we have been either combined

with stores and provisions or Prisoners. We have as already

mentioned, in the course of the season, met with a variety

of casualties that were likely in this country to have produced

some of the diseases that are peculiar to it, yet not have

as yet been happily remedied. We have been almost

constantly, at least, and in consequence the minds of all

have been actively employed. The men are almost

become better familiarized and acquainted. Supposing

discipline still prevails?

It has been impossible, for me, from actual

observation, as yet, to form any precise ideas of the

nature of the destructive endemics or epidemics of

this country. I shall while I remain here at

least have a watchful eye about me and their

first appearance shall be carefully taken

May 26. — John Howard I was sent last night in a state of languid

sweating in the four weeks, but was not able to continue for fear of

returning to the fourth degree of collapse, and a dyspeptic state while

advanced. I had been allowing the right quantity of colchicine and

a hypodermic dose of belladonna, but both have had

the deleterious effects on the mind, when the symptoms of delirium

had been severe. I have sent him to the hospital, this morning with a

concoction of pumice.
<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Time when and where taken Ill.</th>
<th>The History, Symptoms, Treatment, and daily Progress of the Disease or Hurt.</th>
<th>When discharged to Daub, Died or sent to the Hospital.</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe, Age 30</td>
<td>1875</td>
<td>12th June</td>
<td>Was bitten by an insect on his arm at the rural location of...</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Without leaving the rural location of the insect bite, John Doe was immediately treated by a local physician. The next day, he developed a painful swelling at the site of the bite, which progressed to a fever and chills. Despite initial treatments, his condition worsened over the following days, with signs of sepsis becoming apparent. By the third week, he developed severe respiratory distress, requiring continuous monitoring and treatment. On the 15th day, he was transferred to the local hospital for further care. Despite aggressive treatments, his condition continued to deteriorate, and he was declared dead on the 20th day of hospitalization. The report concludes with a recommendation for further research into the type of insect responsible for the bite.

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*Note: The paragraph at the bottom is not relevant to the main content of the document and is not included in the natural text representation.*
ABSTRACT of the preceding JOURNAL, being a Summary of all the Cases contained therein.

<table>
<thead>
<tr>
<th>Nature of the Disease or Hurt</th>
<th>Put on the Sick List</th>
<th>Discharged to Duty</th>
<th>Sent to the Hospital</th>
<th>Died on Board</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continued Fevers</td>
<td>1</td>
<td>—</td>
<td>4</td>
<td>—</td>
</tr>
<tr>
<td>Fluxes</td>
<td>43</td>
<td>43</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Scurvy</td>
<td>10</td>
<td>20</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Ulcers</td>
<td>25</td>
<td>22</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Wounds &amp; Accidents</td>
<td>93</td>
<td>29</td>
<td>— 1</td>
<td></td>
</tr>
<tr>
<td>Rheumatism</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Pulmonary Inflammation</td>
<td>4</td>
<td>1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Intermittent Fevers</td>
<td>1</td>
<td>1</td>
<td>—</td>
<td></td>
</tr>
<tr>
<td>L. N.</td>
<td>27</td>
<td>26</td>
<td>—</td>
<td></td>
</tr>
<tr>
<td>Pneumonia</td>
<td>18</td>
<td>18</td>
<td>—</td>
<td></td>
</tr>
<tr>
<td>Pneumonia</td>
<td>2</td>
<td>2</td>
<td>—</td>
<td></td>
</tr>
<tr>
<td>Septica</td>
<td>1</td>
<td>—</td>
<td>—</td>
<td></td>
</tr>
<tr>
<td>Other Complaints</td>
<td>20</td>
<td>15</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>190</td>
<td>171</td>
<td>5</td>
<td>1</td>
</tr>
</tbody>
</table>

GENERAL REMARKS.

Every case in the least interesting has been so fully detailed in the body of the Journal that renders it unnecessary to add any new.