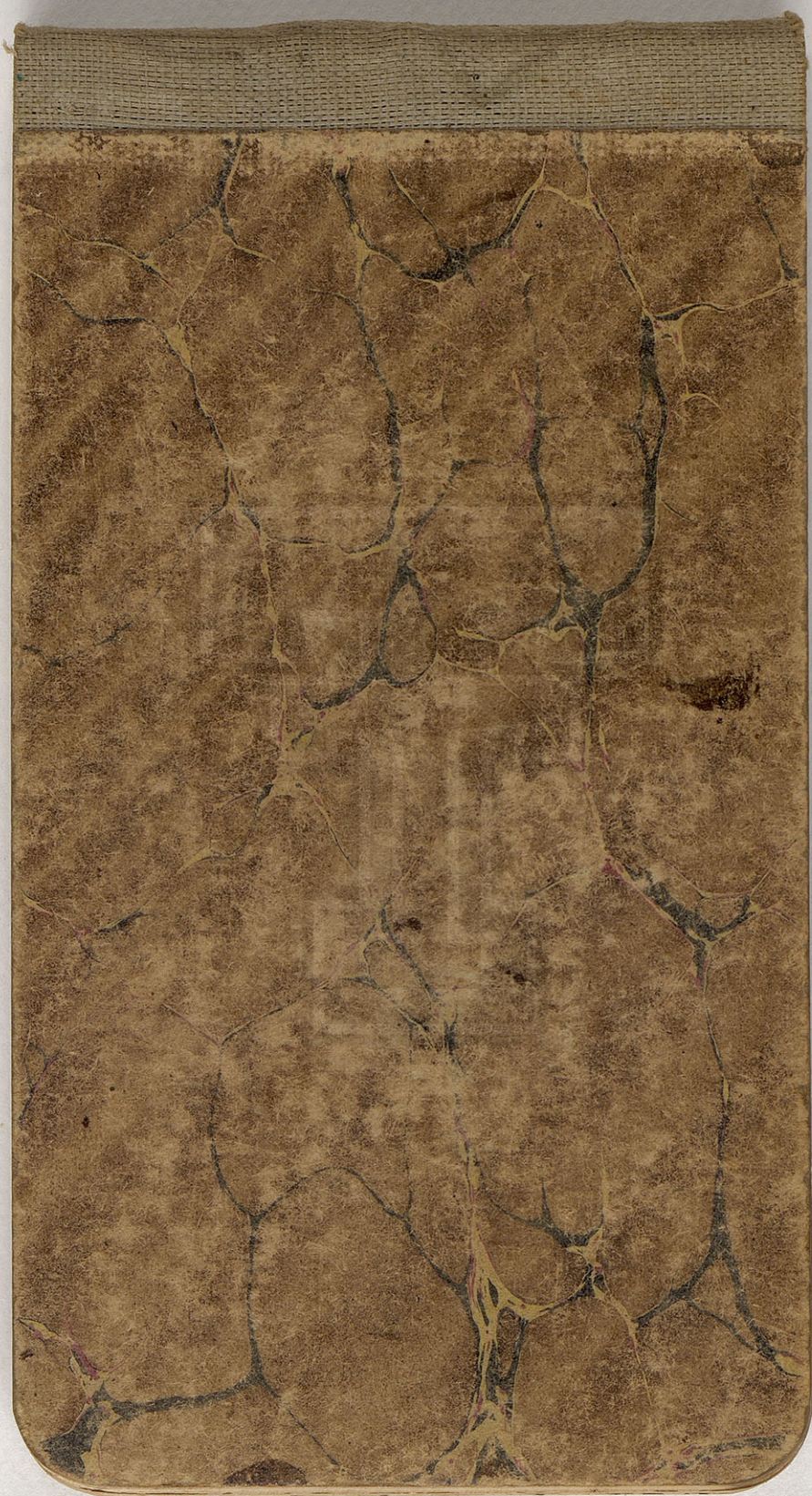




Lecture Oct. 21st 08,
Anatomy of eye.

Coming down from v ciliary
bodies we have the
supporting ligaments
of the lens, normally
then the iris in front.
Dr. Morris follows
Morris.

v ^{orbit} ~~region~~ is pyramidal in
shape and is composed

of 9 bones. V sphenoid
ethmoid and pterigo
enter into formation
of both of them.
Anterior portion
of V orbit is V trochlear
fossae, at the upper
and outer side is
V lacrimal gland.
V orbit is about
 $1\frac{3}{4}$ in deep. The pterigo
is attached to bone
the eyes is left in

A foramina enter V orbit
1 optic foramen, the
sphenoidal foramen,
V supraorbital and
the sphenoidal foramina

Transmits V 2, 3, & 4th
nerves.

the ethmoidal foramen

supra-orbital foramen.

It transmits V supra-
orbital vessels & nerve.

V infra-orbital ~~foramen~~
transmits V inferior
dental nerve and V infra-
orbital nerve.

V orbit contains V
eyeball, muscles, & nerves
& ganglia. V pers. →

derived from ✓
lens. and divides
into two portion
one is ✓ capsule of
lens.

It covers the post $4/5$ th
with ✓ exception of a
diam. of about 1 cm
where it inserts

✓ optic nerve it
divides into two layers,
✓ orbital mus. ✓

2 recti, ✓ sup oblique &
levator.

With ✓ exception of ✓
sup oblique which is
supplied by ✓ 4th
nerve and the external
rectus which is ^{supplied} supplied
by ✓ 6th nerve and

all the rest are
supplied by the 3rd
nerve.

Int Rect. 95.5 cm.

Sup. oblique about 16 cm
Int " " " 17 "

then insertion of
recti - mus. small
prolongations from
oblique capsules
are attached. the
check ligaments are
intended to check
excessive movement
on eye ball.
3rd nerve enters

then a splanchnic
nerve divides
into two branches,
a sup. branch of
ophthalmic receives
filaments from
ciliary muscles
and from iris,
Ciliary ganglion. It
sends about 6 short
ciliary nerves from
ciliary ganglion
ophthalmic nerve
divides into

frontal nerves pass
forward in front of
levator.

nasal nerve passes
obliquely across orbit

Anterior & retrobulbar
nerve.

Sympathetic nerve,
there are a few
sympathetic fibers
which reach & eye along
V to the nerve.
V cervicobulbar

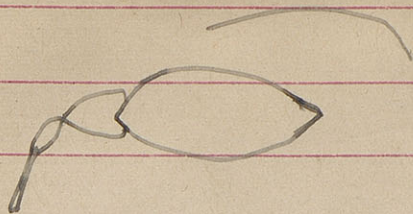
Anterior supply
is derived principally
from V infraorbital
It gives off the post.
ciliary V sympathetic
V longus and the
V short ciliary arteries
divide into several
branches before ^{they} enter
the eye ball.

V. ins. of v. orbit.
A set. the entire + aperture
-ing.

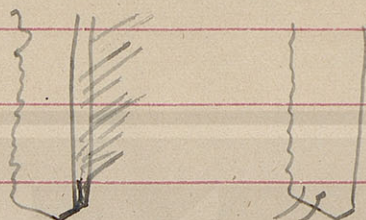
Lochynmol gland.
about 1/2 mm long
almost compound
necrosis. Its secre-
tion implies near
v. upper and inner
border of the plate
accessory Lochynmol
to glands of
Puncta.

there is 2 one above and
one below.

Lochynmol sac.
about 1/2 mm long
and about 1/2 mm wide



Eye-lids:



✓ lids are closely applied
to the eye ball.

Cornaeae.

Conjunctiva.

Is repeated

Externally ✓ skin of
✓ lids is coarse and
thick

The tarsal cartilage
gives strength to the
upper lid.

Chalazion is a little
tumor either in
upper or lower lid
and is a cyst of
meibomian glands.
Glands of Moll and
some modified sweat
glands the average
length of time for
eyelashes to regrow
is 4 months.

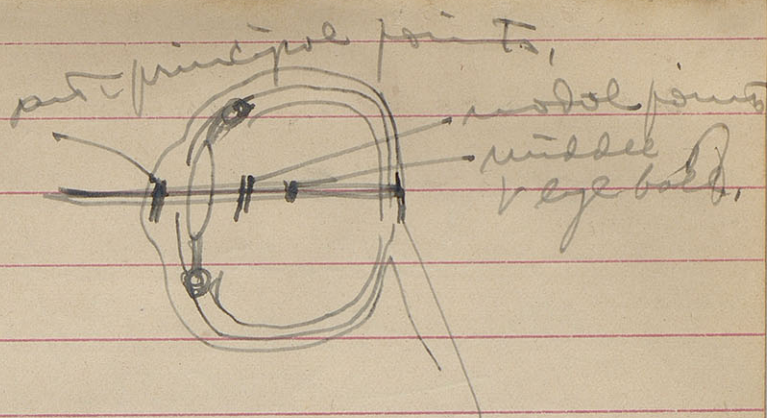
The conjunctiva is
attached very tightly
to eye lid and
loosely to eyeball
Physiology of the vision
~~the refraction~~
is covered by the optic
nerve. The image
is inverted and

for object.
stream down
water in and
down over
objects.

the lower formix
are coming from in
upper formix they
are not coming
from st. formix
circumize v eye.
formix circumize
v eye and with a
rule. with probe
with cotton wrap
up tightly about
it you keep v probe
about under it.

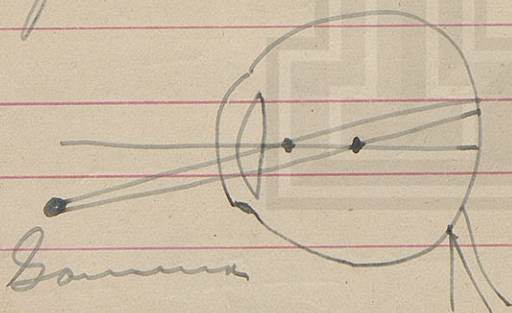
Some Cores
foreign body may
remain & a mass
of gran. tis. is found
for which the cause
is cancer v gran.
tis may & search

See below for more details



retina is $24 \frac{3}{8}$ mm.
back of v

the nodal point is
about 7 mm. back
of the cornea.



Under normal conditions
the angle of Gamma
is about 5°.
Emmetropic = normal

common in flom.
Is always chronic in gon.
Conjunctivitis may
follow this. It has
been seen
in glaucoma &
cystitis of iris.
Ochritis. It may
be associated with enter.
It may follow &
may give rise to
R.D. etc.

It is an infiltration
of leucocytes & serum.
If very severe and
chronic, it is threatened
you should puncture
the

foreign bodies
in conjunct.

eye.

Emmetropia = normal

eye.

Lecture Oct 28th 08.

Emmetropia = normal condition of eye.

Ray of light coming from a distance not focused exactly upon eye coming from a distance.

Ametropia. 3 Kinds.

1. Hypermetropia (Hyperopia).

2. Myopia.

3. Astigmatism.

Presbyopia.

In Hypermetropia eye. fitter ✓

Penmanship into
Conjunctive

It has some color
through out. It occurs
in children
ply. due to coughing
As they seem to
suddenly they
become alarmed.

In direct weakness
of the l.d. vs. well
hypothesized well in
few weeks, to treat

Chemo-[®]

In which conjunct
is lifted up by a
transduction. It
runs under breath
It is inflamed.

Refractive Power
Concave Lens

refractive power
of eye is too little
or eye ball is
too short.

Where the rays of
light strike, there
will be cone

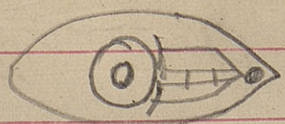
Suppose parallel
rays come from a distance
& the eye is too long
& rays cross and
= Myopia.

In myopia rays
are focused in front
of retina.

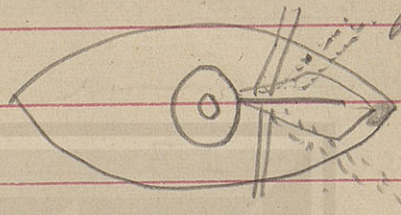
Astigmatism

In this r.f. of v
cornea is curved
a little more in

one morning
the doctor

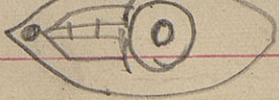


Transposition operation
consists in directing
it up



Commonly known & per
ygin off

~~Supply~~
supply the conjunct
membrane as vessels.
muscles & chon
res. Hard to doing
necess direct supply
necess pot. blood
showing elsewhere



one meridian than
in the other. The
bundle of rays
are focused in front
of or behind the
retina.

By converging
hyperopic astigmatism
rays are focused behind
the retina. but some
are further behind
than others.

Comp. Myopic astig.
wherever

Accommodation
necessary for is explain
ed in this way.



Portia Bull

It is a
support of the
inches. It involves
Bourne's work.
When removed
may return.

Treat

1. Incision
2. Translocation
3. Cauterization

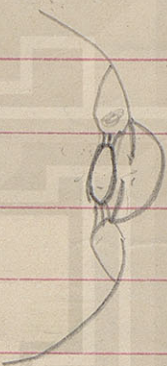
Closing

Closing & opening after -
in pterygium has been
removed

225

V eye lens alone in
it self. focuses the
rays. that act is
known as accommoda-
tion.

Helmholtz's theory is followed.



Valve is elastic & swells when compression on its capsule is relaxed.

the furthest distance
off each, a pot.
can see an object
distinctly, is called

muscles on both
eyes.

Strabismus of the
eyes. Common con-
dition & impair
vision. In some
movements leaves
a scar & impair
vision if over
pupillary line.
The pterygium is in-
teresting even when
small. Common
more common in adults
& rarely seen in
children. Is seen
more frequently than
in children & more
than those who live
indoors.

propeller

Remotum Remo-
tum = R.

In a hyperopic eye
rays do not pass
out of eye in
same direction
but they pass out
in different directions
No rays come from
an object in nature

Emetropism & R.
& beyond infinity.
In myopic eye & eyeball
is too long.

& accommodation of
an individual is
measured in dioptres.
A lens is said to have
a strength of one

In flesh. It usually
on inner side
or on outer side
or from below or above.
It extends to com-
mon and it grows
upon common &
it is some growing
when it extends
on common.

Mr. J. H. J. is
not sufficient it
is growing and
it appears thin
when it is longer
below or in it it
is trophic. It may
grow.

Some, some, some
may grow ^{they} ~~they~~

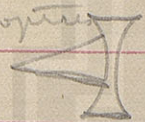
Dioptric when $\checkmark$
rays are focused at
a distance of 1 meter.
2 Dioptric lens = $\frac{1}{2}$ meter.
etc.

3. Dioptric lens $\frac{1}{3}$ m.

4 Dioptric " $\frac{1}{4}$ m.

Converging lenses
are called $+$ lenses.

Diverging lenses are
called $-$ lenses.

dioptric
- 20 

they bring rays to a
focus behind eye.
Measuring accommodation the point
at which the eye can see
clearly is the point at which
the eye can see clearly until

long
small
small

Pinguicula

Small yellowish
growth on ^{com} ~~some~~
fruct at v inner
containing v eye.

Isotrichum p. com
this. but is not
in ~~the~~ ^{the} ~~same~~ ^{same}
are exposed to
but

Is generally non prog
-ressive. may
develop into of

Plugging but more
useful. should
be treated by exposing
of ~~the~~ ^{the} ~~the~~ ^{the}

Plugging

Is slightly ~~the~~ ^{the} ~~the~~ ^{the}
work on grow.

print becomes blurred
this point determines
the proximum

proximum = P .

$R - P$ Both expressed
accommodation

I am an myopic eye
is $R - P$.

~~Presbyopia~~

Amount of accommo-
dation varies with

age, & gets less as
we grow old.

Presbyopia:

The person
does not see so well
at night, and the
object or book is held
further off.

where there is an
abrasion of the
epith. of eyes use
Holocain. for long
times use Holocain
where Holocain is
used in skin
it is poisonous,
where it gets in
u eye you may
use oil.
after u do so you
dilly give well you
should keep up the
oil.

You may use
Hg Cl. but do not
put it in eye but just
where u put it -
taking K.I.

When the near point
moves to 22 cm,
a person is said to
be presbyopic.

Presbyopia is remedied
by a convergent eye.

At age of 40 yrs
near point is 10 cm. for
eye = 14 dioptres.
at 60 yrs. it is 22
cm.

Persons who are myopic
for 2 or 3 or 4 cm.
never have to use
glasses at all.

If a person has
a myopia of 4
dioptres & focal point
is 25 cm from
eye.

Proz: Improves
but a few cases will
drop on pericard,
the heart should
be directed to build
up organ
health, use. Myer
h. Dwyer.

Small doses of sodium
salicylate relieve
it.

Use aspirin 1-
2 grs 2 or 3 times
when there is irritation.
Salicain. Does not
affect the epithel.
Common to the
it like cocaine. It
is to a certain extent
antiseptic.

Prost. Sphero-
spherical

Iris, Function,
It acts as a sph-
erical to cut off
an excess of light
& also acts to cut
off spherical
aberration.

In spherical aber-
ration the rays
are not brought
to a distinct focus
and you have a
blurring.


Dilating Pupil
is affected by light
at the same time
iris serves for a
support for
ciliary muscle,

relopes are especially
- ingly an. It an
- like advances
over of. Spec
- nes

Fraxinus Keratinis
In this phlycten
- per keratinis there
is considerable
cos but no much.
Another condition
resembles it and
that is herpes IV
comes the vessels
out transparent &
appear in clusters.
In venous congeal
vessels are more
numerous and
do not ulcerate

roots & ciliary

Ciliary muscles —
iris & ciliary are
supplied by V
ciliary nerves,
they carry sensory
motor & sympathetic
fibers. Sympa-
thetic carries dilating
fibers. As a general
thing in child
hood the pupil is
large. In old
people the pupil
gets smaller.
In hyperopic eyes
pupil tends to
be larger.
there are number
of nervous dis.
that influence V pupil

Child may bury the
head in pillow.
You can move
child back and
forcibly open
lids or you can
use a hair pin
or lid elevator.
You should not
stroke person's eye
ball or touch of
lid ball. You may
stroke child's
back head under
nose & child may
open eye.

You may drop a
drop of Holocain in
eye. After a
while a polystyrene
lac dropper

Check with the
first in the

You may test this
by directing a
person to look out
window &

The cuneiform
in this prod. contra-
ction. & sympathetic
fibers come from
cervical region
in cord and have
their origin in
aqueous of Sympathetic
the fibers are con-
nected

short along nerves
only constricting
fibers. the long
dilatory nerves only
the dilating fibers.

more in the
of the

minutes of age.
~~disturbance~~ disturbance
on children being
under such general
conditions bad food,
dirty etc.

there is a small
level of bodies, bad
ing up to and sur-
rounding the eye
near. The whole
conjunction is not
affected -
however

in 5-15 yr child
young.

Photophobia
pain, running
eyes, acute, with
pharyngospor.

just as, maybe

In exam. of eye
of opt. it is better
to make use of
anatomic eye
1st get a history
of opt. onto injuries
whether any of family
wears glasses, whether
myph. or there are
present. don't for-
get to exam eye
holes as a position
whether covered
by crusts.
Wld hairs should
be looked for. You
should exam
with a magnifying
glass.
Note any info.

Ammonia. Very very
1 from ammonia

Dissect. by one
or more red blood
cells. Called ~~phly~~
phlyctenule + or
corner or on corner
of corner - keratin
they are masses of
lymphoid cells in
a conjunctival tissue
breaks down in a
few days & breaks down
from greyish white.
Is phly. associated with
lagophthalmos. It is in ear.
Is also associated with
the glands of eye and
also with thickening of
veins. Also such pt.
is afflicted with the
bonions form of

Dearest. Love

Smelling under
fingers, hypodermis
fingers over eye.
Smelling of
Mebourion Keld =
a Chalazion.

If the Cochlear
Nerve is inflamed
there will be an ac-
cumulation of se-
cretions in the ear
which can be pressed
out. To prevent this
the ear should be
washed with warm water.

Lecture Nov 4th 1880

Condition

Ulceration or infil. of
vagina etc, or can
It usually affects
children. It is
primary or associated
with gonorrhea & syphilis.
Treat.

Use Antiseptics.
Antiseptic washes are
indicated with use
of mild antisept.
Solutions in much
conject. Use v in
solution of saline
under v lids.

Phlyctenular or serof
ulcers conjct, or
strumous.

Lecture Nov. 4th 08.

In upper nerve course
fold trochlear bodies
are more often
seen. If there is a
localized area of reddening
on $\vee$ if usually
means there is an
episcleritis. If there
is a ring around
 $\vee$ cornea it means
an iritis or

any deep seated
infl of $\vee$ conjunctival
tiss. Mucous and
if it can be proved
that it is in $\vee$
conjunct. tiss. If in
 $\vee$ upper part of $\vee$
pinnix it means

the young

Conjunct. is covered
with a greyish or buff
colored membrane. If
leaves a whitish
bed when the membrane
is removed there
is a strong tendency
towards a whitish
& infl. of the cornea
& secretions from
the eye are abundant
& may cause
Diphtheria in the attendant
In later second stage
the conjunct. becomes
now & succulent &
there is a purulent discharge
this may last for
weeks and finally
passes into cicatricial

~~Left & right & dorsal~~
Conjunct. system

Conjunct. infl.

3 systems

1. Post. conjunctival
sys. & v. These
are the ones which
supply & furnish
hyperemia of face
is marked with
a bright red
velvety appear. & a
marked conjunct.
discharge.

2. Ant. conjunctival vessels
this is a system of
minute bld. v. & v.
margin of & cover
some of v. ph. periorbital
& some do not.

the v. that supply
deeper tissues supply

for cramps if you
find a Klubb Löffler
and Bullous shield
this is another glass
held on by strips of
rubber plates of
brush of Cognac
ply with 205 Poin
not on 15000 Hgcl
don't or don't use
Aglyd or Gubdy
or any of them
to things Aglyd
we used in the
store.

Diphtheritic Cough
Bore - this cough
Lids hard boardlike
swollen painful
flouts from 6-11 da.

For comparison of
the two conditions

1. in the etc. 1
2. in the you get
a pinkish & granular
v comes

3. Ant. connect.
+ Cilary vessels.
these vessels penetrate
into v comes and
come into v sclera
when you see con-
gestion of v comes
or you have a begin-
ning keratitis.
Sclerotic.

Is whitish
a yellowish white or
brownish white.
the sclerotic may
be in place

~~Transcription of the above~~
H. e. L. & C.

v Pa cocius, gon. c.

step. c.

Tumors also occur
when ever a cyst is
injured in healing
a fibrous cyst
forms. & lids are soft
& puffed but swollen
& soft puffed & red.
& a mass of pus which
can be removed &
leaves some bleeding
st. st. & dis is very
nearly & conceal
all. result & pro-
tion st.

this mass is con-
fined to the tumor.

diag. use v micro-
scope. treat as

v la cornea, gon. c.

It is due to a
tumor on the ^(staphylococcus) lining
of v coat. It is
due to

Staphylococcus is due
to a thinning of the
structure of the ^{slight irregular} portion
light will not get thru
Exam. v comes cone-
-fully. It should
normally be perfectly
transparent. Following
methods are used
You may see a reflec-
tion on a corner of
v window & if cornea
is unbroken any
where v image will
not be interrupted

Placental disk in a. and
the uterine
muscle

From little
chem. or mechan-
ical con. prod. this
dis.

these is swelling
of the a. and
heart disk. and
in a few days a
pink mass.

In v. p. and
tossit but only
in v. when
stripped off leaves a
greyish thin area

Lecture Jan. 13th 09.
Crompans Conject.
comes. Me. then a
mech. or due to this.
V this one v. Kleb. Lippa

Placid's disk ^{used} ~~me. and~~
^{reflected} the rings will
be seen on v cornea



if normal If irregularities
v rings will not be
even. to remove
object on cornea
you may use a
convex lens and look
at v cornea. Binocular
te magnifies me, and
to to

To Louisian vol. me.
used v ch. will stain
green v ob ^{altered epith a where removed} and
then use 4% cocaine
and remove v object.
may have to apply
more flourish.

the ventral chamber
completely obliterated

ventral chamber
is deeper in
youth than in
old age. If
it is in relation to
vent. of of vent

vent. chamber
completely obliterated
in Blauconia & thus
rel. prod intraocular
pre. Normally
lenses never ^{come} in
contact with aqueous
humor. In juvenile
stages this opening
of lens comes on
the vent. chamber
and the deeper
adhesion between

pttlini bulbi, come
nee.

Always dangerous.
v younger not the
better & out look.

If v comes in cloudy
in beginning v
out look is bad,
you should protect
v other eye. Use
ice compresses.
Use milk does
you can pour
use acetic pits.

You can't keep v
open use a
catheter.

this relieves v blood

Position of the object, common

is in common.
In some cases
you may have a
deepening of the
channel. It may
also be deep, or
and the object may
change its position
or not change
but these objects
cannot be seen
by oblique illumin-
ation. This is a very
valuable way of exam-
ining eyes. If a foreign object
like a bit of steel or
wood the foreign object
appears as a light
object on a black
background.

In course of 3 or 4
days it becomes fur-
nished. this pushing
expend in large quantities
from which
flow down over
check this costs
for 2 or 3 hrs. or
the condition may
go on and, go into
a chip. 1 hr.
for 4-6 hrs.
the. cornmeal etc.
sund. etc. may
from around
the top corner.
1 corner may be
some cloudy. ^{Prayer} there
may be other.

Inds.

A look of color
& sluggish movement
of iris will suggest
thrombosis & cystitis,
etc. It has been found
in ves. iris, there
are an iris and
tears in v. iris,
have & put suddenly
throw & eyes up and
then down. Notice
inequality in v
pupils. In health it
is rarely seen
unless lumps have
been drilled.
In dis. of teeth &
minute tears of v
iris you may have

Next the secretion
is squeezed out under
a glass at a lower
temperature. After clearing
up again. An intro
duce a 20% argyrol
sol. You may use
a 10% or a 10% sol.
Hection of the cor
nea is

Control sec. in adults.
Duration of action 3
days. the pot. first
notifies a
the legs are swollen &
hard & blister like
elevation.
& discharge is at first
watery or bloody

Now the question

inequalities.
Shifting in size of
v pupils is a very
important phenomenon
one pupil of a large eye
may be larger than
another of a smaller eye
for example

various distances may
cause it, an
equality of pupils.
Ciliary body.

To examine by inspection
if a pupil is
dilated. If a patient is
told to close eye and
look down

Tension of Eye.
Is usually equal to
about 27 mm. Hg.
more or less

quested: we just
look & look down

these sol must be
kept up day and
night as soon as
involvement of the
cornea takes place
& cold applications
may be stopped.
Cleansing.

It is during
changing of corn
presses & of drops
should be wiped
with sterile cotton
then creamed
then reposition &
tidy gently and
apply medicine.
Dr. M. thinks the
curved eyed medi-
cine droppers are

the eye must be

Method: The patient is told to look down, and under normal compression the eye ball can be dimpled. Tension normal = T.M. If increased $IT = T.M. + 10$ or $T.M. + 2$ or $T.M. + 7 =$ hard eye. An I. = tension is one of the earliest signs of glaucoma. It is also a sign of intra-ocular tumours. It is also a sign of intra-ocular detachment of retina & tension is I.

Testing & visual accuracy of pupils

Johnson to 5000

about 80% of people
and in blindness.
Cred's vol. is used
when a child is born
it = 2 1/2 vol. of

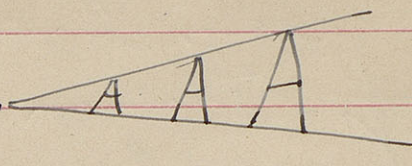
Ag. No. 3. Isobutylene
in some countries.
Working child's eyes
with 4 B.

applying Bullous hill
over the eye. It is
opaque glass with
is protected by strips
of sticking plaster.

Is very often applied
in children. You
you should use

the injection
1-5000 HgCl₂ or
KMMO₄ sol. etc.

Snellen test types
are used.

Eye. 

200 A

100 B

80 C

20 P

20 A

10 A

If you can only see
top big letter you
express his visual
acuity = $\frac{d}{8} = \frac{20}{80}$
He can read at 20 ft.
& letters he should read
at 80 ft.

If you can't read
use test cards like
this. M E E

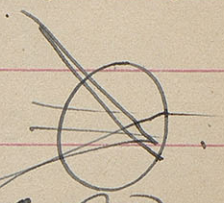
You have to have

corner and many
be bound down of
the square humul
may return and
forget less back
then maybe a
little as lymph-
collect and lead
be on opening.
there can be
come soon left
rock - leucocata

Diag. Any redness
or drich. plus to
eyes in the first
hole. & prog. is no-
really good. If
come is cloudy
& presents a bad

✓ test cards in
different languages.
Geog. test types
are so small. It
is very fine print
hard to read.

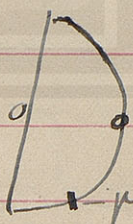
Field of vision
✓ part of Perimetry
✓ field of vision
means that area
in which rays of light
reach & retina.
10° from macula
acuity of the vision
is only $\frac{1}{13}$


temporal side 90°
nasal 60°

when eye is open
ed. the yellow pus
is secreted in large
amounts. this pro-
minent discharge,
may last weeks,
there is great danger
to cornea. I do
notally a yellowish
or cloudy patch on
cornea near the
center and disturbs
down in form of
an ulcer and
may perforate.
If it does there is
an escape of
aqueous humor.
The lens is thrown
up against the

When the ...

down lower 60°
~~and into~~
Above 70°
You hold your
finger and tell
your to say whether
he sees your finger
when you hold to
one side. You
measure you
on vision field
if it is normal.
Perimeter.

eye  point.

you should take at
least 3 ~~perimeters~~
in V quadrant of
meridian.

Post. Cervic.
of neck

Even in hands of the
ply. is serious,
the serious in
adult.

1-3 days after birth,
Eyes red swollen
and the lids are
hard. the lids
become soft and
can usually be
everted and the
conjunct covered
with thick creamy
yellow pus the pus
may be purulent.
V eye appears to be
intensely swollen
V secretion has been
thrown into V
eyeliner eye

Green in center
light in center

Part 1. There are a
number of notations
in field of vision
they are of all
shapes. There is in
every eye what you
call the blind
spot, and is in
sensitive to light,
that is a physiological blind
spot or notation.
These notations may
not be known for
not at all.
These notations are
various shapes,
they are angular.

Lecture Nov 11th 1908.

Is due to mis,
mostly gon.

In children =
ophthalmia neonata
form.

Is an ac. inf. of
conjunct. occurring
in infants after birth.
& bacillus coli has been

given as a cause
It usually & gon.
In children it is
severe. It may
occur from another
eye similarly affected
Every inf. causes
about 1/2 cores of
blindness.

& parents do not notice
a core soon enough

Order & June
Lecture Nov 11th 1908.

✓ field of vision

temporal 90°

Below 70°

Above 60°

Nasal side 60°

the field of vision
was contracted. as

in glaucoma first notic-
ed on nasal side

after which ✓ got. use.

or if looking thru
a tube, Retinitis may

cause, there was

irregular defect in
✓ visual field =

Scotomata, plural =

scotomata

~~scotoma~~, Retinal

les. may cause it.

When seen by ✓

Course not known.

✓ conjunct of the
tarsus is bluish white
pommus and some
ulcers on nose.
After cure no traces
are left.

Treat:

Unsatisfactory.
Alloy irritant.
Such remedies as
Agly & irritant.

Mercurial oint.
maybe used.

Working ✓ eye with
may help.

it -

Recurrent conjunct

Course of / brown

fat = positive
When not seen by
v. pot = negative
H. v. scotoma no central
and is much more
various than v
Peripheral form
Nicotine, & wood
alcohol poisoning
prod. retinobulbar
retinitis, the cen-
tral vision nei-
gherly completely
lost = central
scotoma. Peripheral
field much brighter.
Field of vision is
greater for blue
next for red and
next for green

By an exudation into
the skin of the common,
there are also some
specificities.

The conjunct. appears
as if colored by milk.
Syring. as
conjunct. Mucus
disch. itching etc.
W. ulcers are the

It begins in warm
weather and lasts
during summer,
may last thru
winter.

More common in child-
ren 5-15. rare,
in adults,
all classes.

by an eye doctor

Intending you
may test with blue
I retro bebor
retinitis, a central
scotoma may
appear for red
You have the job
to look fixedly at
red and can not
tell its color

Use of Mydriatics
Atropine & pupal.
must also paralyze
& ciliary muscle.
Cycloplegics. Dine &
pupils & paralyze ciliary mus.
they are used in
cases of pain, atropine
is used.

~~... ..~~
~~... ..~~

Separate

The used in
the eye. You treat as
an ordinary conjunct
st. v impl. Get beyond
your control.

A handle attached to the
negative pole is used.
v Throgs in v hands of
some brewers look
proud & good & valuable.
You turn v lids and
theot. as elsewhere.
V used conjunct.
- Spring conjunct.
Soch. Exortional
impl. Or conj. Choact
by lappert of v spirit.
Of the conjunct.
Both are popular
in Choact. Probl

atropine, neopline
- amine, ichthol
mine, hyoscyamine
+ hyoscyamine. There
are cycloplegics and
mydriatics.

Use: They are,
used in drops,
or they are used
in geturine discs.
They are hygroscopic
are a little more
irritating or not
= to perfectly prep. sol.
of these drugs.
The pot. should be
instructed to tilt
eye rather fld.
with flow away from
punctum.

be flushed out with
20% sol of Boric acid
then affd after this
I get better results
the AgNO₃ sol. on
Cu SO₄.

Grottoze:

Here you see
- if v lids are gently
dipped in a sol. of
1/5000

Pannus:

Treat:

Peristomy. Same as troch-
oma. I put perist
you may detect a
portion of the bel-
vessels. this = peristomy

Never use them
in an eye the
Tension of which is
elevated. Never use
in a eye over 40 yrs
unless you can
be where you can
see them. The
lids are prevented
from getting out
of the eye & the
glaucomatous con-
dition is aggravated.
You may destroy a
glaucomatous persons
eye. Mydriatics are
dangerous remedies
in children and
in older persons.
They are more

Little to be done

2nd popliteal &
groin types properly
applied phage serums
will shorten & dis.

- 1 Expression & rolling
2. Brothage.

1 Expression.

Gen. anaesthet,
get access to upper
fornix and squeeze

after rolling use bone
and roll to work eye
out with. Have the
eye constantly covered
with ice water or ice.
at end of 24 hrs. a
little swelling may
occur. Very little
reaction. After
24 hrs. if eye should

highest my only
a needed and

liable to cause glaucoma
hence more dangerous

Atropine is used
in strength of 2 or
3 or 4 gr. to 4 gr.
aqueous sol. will
last for 1 day or
2 days. stronger
may last for 1 wk.

You should use
atropine 2 or 3 times
a day for two or 3 days
when exam. for
defects of vision
atropine is a cyclo-
plegic.

Scopolamine: Used,
0.1 to 0.2 gr. sol. is
stronger than atropine

of Cuscuta.
110-20% sol. of Jellat.
- of sol. on ref. of
Ju & Boric acid
sol. or protogel
5-10% sol. Jell.
sol. is v. best
When discharge
sint. of Citrate of
Cu. is good 1-3
of Cu citrate in base
lime. or in rose
water. Instructo
pat. put some in v.
upper, pour, pour
all. for kernel
scraped from flower
lid margin.
Use Citrate sint.
10% first.

1/10-20 of box of Bitter
Homotrigine

Homotrigine is
soluble in
8-10 g of water
1-2 g of oil, and
used 1 g to 4 g, water
pre-mixed with,
Eucaine &
Homotrigine to get
aqueous
sol.

Is better absorbed if
a patient is told to look
down it is not
useful for therapeutic
agents. It may produce
poisoning. Better to
not use in person
over 40.

Use of Bonic
Use of Bonic

Once daily use AgNO_3
 AgNO_3 . You may
use antiseptic
disinfectant & pupil.

You may get ery-
thema after long

use of AgNO_3 .
You may use CuSO_4
applied to the lids
not forcibly. Be care-
ful to get it up

under a upper lid.

For much irritation
you may use Bonic
and salt water
& CuSO_4 . Don't

use CuSO_4
where there is dis-
charge.

Crystal of alum
is often used instead

Once being used
for myopia

Cocaine: Dries
up the cornea & dries
epithelium of cornea
up to about 1/2 inch
& cornea dries
more rapidly.

Used in eye
ophthalmic of
Duboisine 1/4 grs

3. Effect of cocaine
on the

eye. Cocaine best not
to use.

Mydrine - a mixture
of ephedrine 1 gr & atropine 1/100
gr. It is used.

Effects of
reverse the
Ephedrine & atropine

~~transcript~~
persistently. but it
is well.

1909.

Jan. 6th 1909.

Prog:

Is good if
test. is persistent.
H. pumilus clears
up to an astonishing
extent.

Treat.

1st prophylactic.

Is most imppt.

Moved out more soap
towers or even a row
with another. Those
in contact with pot.
showed work bonds
occasionally.

Remissionally. with it

Myosin

~~Exerine~~

Exerine, Pilocarpine

~~Exerine~~ is used 1/8 gr
to $\frac{1}{2}$ water to 1/3
water.

Exerine may produce
convulsions and
depression
these things have
a property of producing
convulsions. When
you get it you may
change to some other
remedy.

Optical microscope
Invented by H. L. L. L.

no more on
J. May

Finner was
simply a plate of
glass
the ophthalmoscope
has a set of lenses
Loring for one
used in this coun-
try. In England
& America.

Electric ophthal-
moscope is operated
by a small lamp
operated by a little
battery st.

With a mirror you
can get a effect of
diverging & converg-
ing rays. With an
electric one you
do not have to be

in such cases
the eye is not
a good light

In poorly stages a good
deal of leukoplakia
& fractures of enamel
reddened & and
you have to appear
of ac. conjunct.
the case will not
respond to treat-
ment possibly it
makes it a little
worse. These cases
may get well or
it may change
into a granular ph-
thia or a very
severe mixed ph-
thia. Papillae & gran.
are present.
Ding.
Unusually presents

done by looking
into the light

in a dark room,
with a gas light or
candle you have
to be in a dark room.
Some Optic. have
suggested,

Use of Optic. ^{monocular}
Hole & put at a
distance of about
15 in. and note
the effect upon the
normal reflex.
The eye reddish
or greyish. It varies
with the illumination
light used, with
the complexion etc.
Optic. acts as
seen as a dark

Looky who's the
back of the

conject. is con-
verted into a
white bentish free
membr. and the
funicles are obtuse
triant &

Populeous type
Is where populeous
scales always
enclosed in al.
conject. and they
proph. morphology
appear. beneath
provenance
are torn off of
upper lid, then
on a funicles the
the torn ones reser-
bles a piece of road
paper

Control of the
body of the
eye

body upon the
black ground.
The optic is
in front of the iris
it moves in op-
posite ~~the~~ direction
to the way the
pot moves his
head. Behind
retina it moves
in & same

At a distance of
about 15 in. from
eye & eye is an-
tropic. If the vs. move
in & same way
you move you
ad. & pot & hyper-
opia & optic &
pot & tropic

The ~~other~~ ~~method~~
The ~~other~~ ~~method~~

Methods of Exam

1. Direct
2. Indirect

In direct method
v of object is mag.
12-15 times.

Use of v optthalmoscope
for refractive purposes,
Dr. M. does not advise
it for small eye.

Indirect Method

Place your self about
18 in from the
pat. and use
a Biconvex lens,
and place in front
of the eye.

The image is much
smaller than the
one you get in

line method.

like rope grain,
are often arranged
in parallel rows,
the deeper sets
are confluent.
moss in ^{upper} ~~upper~~
portion than in
lower. These mosses
~~convert~~ ^{convert} ~~the~~ ^{the} ~~rows~~ ^{rows} ~~into~~ ^{into}
solid into a hard mass.
I made a sleepy look
& conjectured the hyper
~~may~~ ^{may} ~~be~~ ^{be} ~~the~~ ^{the} ~~repetition~~ ^{repetition} ~~well~~ ^{well}
~~that~~ ^{that} ~~a~~ ^a ~~may~~ ^{may} ~~not~~ ^{not}
be ~~limited~~ ^{limited} ~~present~~ ^{present}
rich they continue
for some miles and
finally there is an
break of continuity
this is at the bottom

the very good
one of many

direct method.

You must
look for some
thing after you
get ~~into~~ looking.
You look for
optic nerve, &
brachia.

You look for the
disc it is round
If eye is anisometropic
you will be
oval. the ^{stippling} ~~at~~
is called the
lamina cribrosa.
the nerves come
out and are
distended then
retina, just
outside of this.

reverse side

more in some
countries
than in others.
In ^{Egypt} ~~the~~ ~~area~~
the river in Helwan.
Holmwood ~~in~~ ~~the~~ ~~area~~
mountain
districts. Just
as in Negres,
V. is. appears in
Egypt.

1. Known as Grom.
2. Popillary form.
3. Mixed.
1. Grom. form.

Appear as a variety
which the people
large from both

recluse ring is
pale, another ring
color of f. sub.
varies with v color
of pot. It varies
in place.

11 - 1.8 - 08.

2 recluse rarely even
paleates.
v veins may generate

one 1 20 1 4-egs 1
cross w/ps. cur 1

lids.

from lids to the
trachoma

Trachoma

Trachoma

by

trachoma

ashes & incrustation
arises by imp.
min. not yet set-
tled. As for is
chronic. by dis-
charge & to the
contag. ch. for
is not contag.
May last along
time.

Dis is usually
painless. Is com-
in bours & angles
& in annies. Is

v. v. cross
 v. at. v. v. at. v. v. v.
 but rarely a v. a
 v. v. v. v. v. v.
 v. foveal reflex
 v. v. edge of v. v.
 there is a reflex -
 macular reflex.
 Anat. v. macula is
 round v. light for
 v. opt. thoe. minor
 foveas through v.
 In v. dark
 dim v. v. fundus
 of opt. to be darker.
 in negs. me.
 grey. You may see
 choroid. you may
 see the v. v. v.
 ring in every direct

atropine & cocaine
when introduced into
eye may cause a
conjunct. this is
thought to be due to
irritation growing from
a solution. Medicine
dropper should be
kept clean. may
use it in
treat.

Discontinue
drugs & treat as in
other conjunct.
you may resume
other drugs.

trachoma = gran.
conjunct. = Proliferating
ophtalm. Egyptian
ophtalm. & gran.

~~Atropine & Cocaine~~
~~Atropine & Cocaine~~

In some persons
the intermenstrual spaces
are lighter or darker
Discoloration of the
Cervix & Vagina.
Common venereal
wounds etc.

It is as a general
rule that the dis-
tinguished from ex-
amples.
that

cooling lotion
much as water &
Ca & Zn
Pot. Utricularia.

Explan

thus to phenomenon
in 5- 5- 5- 5- 5-

is apt to do
O- of notebook
baseline 120 is
good to see place
but it is
in a few miles.
I can be. I
strength 8-29
Upon my touch
the pillars with
~~a stick of light~~
a electric battery.
the expression with
of me. employed
I care with a
- at number of pillars
may clear up
amount or more,
being conjectured.
I will of Examine

W. H. D. C.
W. H. D. C.

In adults it is
usually of an eryth-
ematous type & prod,
itching & scratching
treat

Do not use
irritating lotions
you should use
soothing lotion, the
rash ~~should~~ be
removed. Do not
~~scratch~~ for tonic
you may give white
of iron.
Oh for me, see

Annals me,
see on vid,
you may get
it. then please

just as if you

no and even
in in a very pr-
mises. In a better

stages of trochona
no difference in size
the it does the, could
by a good some say
me. very rebellious
to heat.

to the heat.

the subject
what ever do it treat
the part.

Where there follicles
are enlarged the
application of light
will make
these follicles to dis-
appear. If the eye is
discharging CH_2O_4

~~with 1 or 2~~
~~muscle~~

used on aint
of rectal air
1/2 - 1/3 gr to 1/2 gr
Decision after
necessity of
deep white powder
to muscle
fibers.

Tonics:

cont. tonic of
KD. clear

liness & v use of
kg. aint. one is
v yellow oxide.
pale green stronger
than 1 gr to 1/2 gr
v yellow oxide of

very & fine day

etc.

Differentials
In pollinators com-
pared pollen
are faintly yellow
color, the power
of pollen than
much. And are
arranged in rows
and are more
in the lower part
than in the upper
they tend to be in
distinct. When
examined under
magnifying glass
they are for Trachusa
~~very like the~~
they resemble bees
bodies and to
get them & are progre

~~the~~
by ointment & less
efficient unless
ground up and
mixed thoroughly with
a base, may use
vasoline and
lanoline. Polka
Doris oint. is the
best usually.

Chagas, Gout.
affects & eyelids
there can be seen
ly & pucker person.
They spread in by
actual, fever, etc.
is followed by
venereal, while the
pits & scars. It affects
concomitant
above, was on it

It is a form of single
cultural design.
More energy, and
a young people all
very active with
enlarged courses
to demands for
it consists of
the enlarged
manner of the by-
product to. In this
case to Crochona
in appearance and you
may not be able
to tell at first.
A core of the when
when well devel-
oped resembles a
mild core of grain
no longer to hold to

commonly
the & most of

summits in blind
ness
treat.

Something
to relieve & pain,
& then give tonics
& relieve local symptoms.
Crocin Hydrochlor. 1/2 gr

Hordolun. = sty.
It. spoken of as but
is then a ring.
of micrometers
fld. Hyperemic
lids are more injer
to these sty. eye.
strain may produce
Hyperophic limit
any prod. in
Infer. so by a

from
Hess's Prescriptions

Treat

Wash & eyes.
Apply Azo 3 ml
1-2 drops twice daily.
2 drops last.

Azuro & Protag.
are used. Quilby
& cocaine Rx are
used.

On account of
associated blephar-
itis the Hygie-
nic to prevent
returning of lids.
On old peria-
myelitis should
be seen & cure.

Trichomonas Conjunctivae
= Simple gon.
conjunctivae.

who is very
gentle

rebound of crops
test

They are cold
compresses. but
when you
make an incision
they are simple
washes.

Chymosis

Here you
have a confusion
of ideas
in circuits after
a series of attempts
or a series of info.
after question.
It is not much
after trying to probe
the depths. Depth
+ Academic poison

was to be
marked.

ing. the conjunctiva
is hot swollen and
at times it may
swollen enough
to prevent the
normal function
of the eye. It may
be hot, red & eyes
get it may
get in & cause
a pt. leprosy
It may cause a
morning reaction
& eyes itch and
the film of mucus
over & the corner
may make appear
of redness. morning
reaction

you may find
it on the

ing. In yponine
comes it soon.
In ring - it is
tense red and
just fine.
that

that come
to a pressure of
large more necessary
cold application.
punch. if necessary
suppl. of v. h. d.
the primary today
or turning.
When picking it
looks as a single
piece. It is in doubt
to wait for some
longer. The
punditology of the

... of the ...
... of the ...

~~Conjunct~~
Conjunct of those
aged ...
to ... and
daily and there
... through
discharge & ...
... ..
... ..
1
is ...

Ch. - ~~Cotton~~ ^{Cotton} Conjunct.
Conjunct

alcohol ...
... & ...
... & ...
... ..

the

~~Very ()~~
~~under~~

swollen H. & V. max-
gld.

90 men prod. by
dirty fingers. dirty
instruments & tick-
ing & eye ball with
stingers.
throat!

Yellow wash
into it

Gumma

Is rotten
or diff. swelling
at first then it
put in ulcer.
Itched & punched out
& floor is covered
with a dirty
debris. Must be

the. more. more. more.
the. more. more. more.

Just 4x lead acetate
which should not
be stronger than
1 gr to 1 oz of water.
Acetate of lead may
cause a deposit of
lead carbonate on
the corner where glasses
were kept. You
may discard lead
acetate. When there
is much chlorine
you may use
lead acetate.
You put lead acetate
in bottles & bottles
put. not to use
to be used & other ex-
cesses. that they
may not.

Office of the
County Clerk
of the County of
Alameda, California

distinguished from
the ulcer, rodent

ulcer,

treat

treat & dis, &

ulcer,

Molluscum Contagiosum

more an infection

as contagious usually

is. Auto infect.

treat

Excision

pulse electrolysis

you may touch

with a acid solution

of Hg & remove in

that way.

with mounting and
a proper discharge
(quicker) when eyes
are opened in the
morning you may
see threads of mucus
like salt. Many
times see you the
- that. It is a sign of
pus to both eyes,
Prog. good.
Treat.

Wash some
or cotton wool conjunct.
Use hot water & salt
You should use a
of red liquid, painted
on eyes you may
be annoyed &
how you need

with a little at
a time of the

Epithelium

usually appears
at edge of lids,
It appears as a sort
pink or pink of
sees sooner or
later it will change
into an ulcer, then
lymph gets on
it & that may
prevent from it
slight or severe.
more common in men
than women it
occurs after 40 yrs.
Diff. from chancre
by the, & what
never.

It is slow in growth
edges hard, recedes

1883
Koch

It doesn't get well
went 1.5 to 2
point with a 1 or 1/2
of AgNO₃ sol.
Roth eye. - Epidemic
in conjunct.

It occurs in
spring & more
early.

It occurs at all ages
In 1883 Koch discov-
ered a bacillus which
was afterwards dis-
covered by Weeks. &
his succed Koch
Week. The pro-
the diplococcus may
be more similar
Agar, come
to about 3 hrs

~~2000~~ 2000

bloody & moist
& is single.
Summits are often
multiple.

You don't say
 H. & K. I. I. I. I.
 remembrance of anything
 & dis. to father.
 treat best of all is
 incision. I
 only stoges to the
 thinks & pray to &
 best. I you incise
 at 2 very first
 sign of apper.
 you incise some
 more & more
 & say of France
 fight.
 Robert P.

2000 - 2000

may 18 - 15 gr.
Boric acid to 1 gr.
note

Prx

gr to

Cocaine ~~to~~ hydro.

Boric acid,

adrenalin

3 1/2

Severe drops - filled

in eye severe

then daily

ingest & put eye

sol me med.

the - sometimes

sleep & eyes get

they will usually

get well - out

to this when after

well correct.

reproductive system

111 - 2 - 2000
111 - 2 - 2000

Is slow in growth
detritus an en-
vironment ant. of
the progress being
slowly through
for 15 to 20 yrs,
is only enabled by
gray or fine
light. It does not
involve lymphatics,
it begins as a small
reddish brown mass
hard slow in growth.
Gray aspects are common
to the the exposure
should not be longer
than 4-10 min.
at 6 in. distance,
at first not pain

go on some
house of her 9-10

Tom

Ac. Catantoloe Conj-
unctivitis.

Comes much as
microles & erysipelas
non, runs on
and much as
pterygiococcus, the pro
coc, & pneumococcus
symp.

to mucus
red & burning, itching,
more or less look-
ing at point of
the point of nose
Treat

ply. wash & eyes
with warm water, sever-
al times daily. You

Co. Cadet's Com.
Tom

at 6 day possibly
you will see a red
darning of the web.
is due to a first
exposure. The two
may be destroyed
as soon as you get
a syphon you
stop. ~~after~~ ^{you} have
~~made~~ to make

a dozen exposures
before you get any
reaction.

Wacom M. G. S.
Occurs rarely. It
may be from a hair
millium

Immuneg
some retention
eyes a red above

most of the eye and

enlarged
too. some as
hyperemia, relieve
the eye strain &
use mild solutions

Conjunctivitis.
Forma purulenta, ch, and
Catarrhal (oe & ch)
In charact. by hy-
peremia & discharge.
Most forms are
produced by
a contag.
agent when introduced
into another eye
the results are ^{always} ~~not~~ the
same. The only all
round cure
except purulent & traumatic

~~coronary fat~~
~~subcutaneous~~

and gld. It occurs
in a localized
usually tract,
by stretching.

Cholozion:

Is said
to be a tubercle. Has
a tendency to undergo
necrosis & forms
abscess. It is a local
abscess, and presents
itself as a small
hard round tumor
usually in upper
lid about mid.
tarsal margin.
Is a dislocation
of meibomian gld.

~~may not be the~~

~~symptoms~~
Sandy feeling in
lids, eyes felt tired.
no photophobia.
no other symptoms.
are absent in some
cases.

treat

Search for cause
then ~~use~~ ^{use} a mild
Boric acid sol
10-15 gr. to $\frac{1}{2}$ oz. a $\frac{1}{2}$ oz
 $\frac{1}{4}$ gr. Gub. to 1 oz
water. Rub eyes
fry with hot water.
& are unimpaired
by contact to lids.
Passive hyperemia
true. Seen in gonorr
jaundice. Venous lobes
stomach & papillae

[illegible]

any progress towards
advent of the towards
the conjunct.
When the lid is everted
it shows a local-
ized conjunctivitis
It is usually
painless. It may
work dropping of
upper lid. When
all these are local-
ized pain & swelling
It may terminate
by absorption.

Of Mrs. Jones' case
when her appli-
cation of Hygie-
nic will help
come they ~~to~~

~~syn~~ neoblasts
syn

2 conjunct = 2 v
vessels can be ruptured by force & they
refill immediately
likewise I suspect
you could flush v
blood out & the
vessels are smaller

Lecture Dec. 9th 08.
Duplex of v conjunct.
Hypervemia.
men a e r ch.

Active a passive.

Courses:

foreign bodies
eye, vision, smoke
, chemicals, strong winds
, or dust dis. of the
eyes & lids

which is necessary
to be made

disappears with
massage.

Treat & general
health of patient.
When you incise
you inject a little
cocaine into eye
fornix & conj.
Dorsal nerves
Retinaculus Pulvis,
Tendon + eye
lobes. Soften
onset with
conjunctivitis.
Treat.

You may
use mercurial
ointment rubbed
in.

~~unmounting~~
~~common~~

more or less perforated
-bia. Ciliary segment
+ conjunct. segment
conjunct. segment
segment rounded
in a pinnice.
ciliary segment round
& convex.
conjunct. is a bright
red or brick red super-
ficial area velvety
color.

In ciliary segment the
color is pink or flesh.
In conjunct. segment
you may have just
or much secreted
In ciliary segment
there is a bristly line.

My dear friend

Blepharitis
marginalis

Affects the edges of
lids. Dis predisposed
to by eye work & strain
those who have to
work in bad light.
much more common
in bad light.

When you have
marginalis you
have Blepharitis
marginalis.

If yellow crusts
form on the lid
you have
you have
you have
Blepharitis & some
revere. There is
nothing in it.

the same as such

Quarantines, they
are not usually
virulent but they
may become pathogen-
ic. Pathogenic virus
can get into eyes
in numerous ways.
From dust & from flies
from boiling in
~~the~~ public pools.
~~they are dangerous.~~ If
contact - as a con-
sequence of redness
& by direct secretion
involves from
contamination to a
bacterial type.
There is not a trace
but it is not a direct
transmission.

Choroid plexus
loss, and loss of

eyes are sensitive
to light &
eyes are more
on. On removing
v. curvatures & eye lobes
come out. Where
v. do not touch for
long time. There
is no eye lobes,
there are three

across the lids
it becomes smooth
evented & weeping.
= Lipetudo.

When all eye
lobes are destroyed
it = Modorons.

Requellor!

Ch. conjunctivitis: + trichiasis

If more & throat
may appear in
to the of & showing

unpleasant
condition

v hypert. of v lid
margin. & ectropion
& entropion, then
to prod. an erosion
of punctum, then
to prod. a gap
& photobia.
Dumoreau
in children, &
depressed nutrition
is more common
blondes, and is
ply caused by
hyposecretion of
v. follic. & scalp &
very often associated
with morose ds.,
D. noz. D. v.
is good, likewise

W. Gordon Craft

Echymosis.

The Eniscerotion of
the eye ball.

Incise about 5 cm.
back from the corneal
retro junction.
The sclera is left
behind and the
lens left removed.
You then remove the
sclera  in two
directions. The entire
removed about 7th
day if you are sick.

Phacolytic Operation.

There an artificial
eye is introduced into
the sclera. two sets of
sutures are placed.

~~March 2003~~

from magnetite
treat.

connect
any reproductive error
+ treat + more.
At first must
remove + recover.
Rub in a yellow
oxide of Fe. +
bits. 2 + neocortical
from total rock
these little pieces,
with + nitrate
of silver.

Blaphespon
Isopam or orbi-
cular. Is very
common in chert
+ is associated with

ability to change
by going & bridge
should be changed
every day. Surgical
technique should
be rigid.

Cases of misshapen
eye. The good ^{eye} ~~eye~~
may be removed
if it is bent to make
a bad eye.

I have learned from
him in breeders.
Meningitis may
occur. I should
try to occur in
regeneration. If
eye is in this con-
dition none do it
at all.

Living in
the
house

concern near
& phlyctenous
keratitis. It may
occur without
any known cause
or there may
be a slight twitch-
ing around the
eye. It is a
old person, the
at the eye
It is a
permeable.

Treat.

search for
cause, demia, +
fume at vision
+ other conditions
etc. If you find

all the way round
and look & report
hole of eye ball.

the eye ball is caught
between 2 fingers
and 1 sup & inf.
oblique muscles are
cut. At the eye ball
is perforated by 2
scissors. In this case
you either pour a
hook back and
~~crack~~ ^{crack} it. You
may use a stone
with light. A pure
staring nature is the
pared than the of
object of directing
close to 1 eyeball
is to give free mo-

✓ From center
The very
~~best~~ of
social and
those upon
is very - Olive
and you may
plunge & hold
work.

Trichionis &
Dystrichionis. The
eye lids incl v lds.
In Dystrichionis
there are very few
two rows. In Trichionis
v lobectum —
young: There
imitation of v lds.

These are the
various kinds of

of the eye. =

Ectopia means a pro-
trusion of the eye ball
due to thinning of the

Proptophora (to the)

Malignant melanoma

tumor. Pain and in-

operable glaucoma.

pan ophthalmitis.

Bonnet's operation for
removal of eye.

Aggressive overgrowth
of the eye.

Speculum is introduced.

you begin over the cornea

of the eye, but

to make into a con-

junct with the iris

then an incision is

made then the conjunct

Leber's disease =
Leber's disease =

There may be a
vascular keratitis
from + ectropion
also.

Lecture Nov. 25th 08.

Pteris

A drooping of upper
lid congenit. or acquired
complete or incomplete
vision interfered with
by upper lid.

In true pteris & elevation
no congenit. defect.

In spurious pteris this
is caused by a tumor
etc. Pteris may be seen
after birth & is usually
unilateral. It is mostly
due to instrumental

Whiffy. I have
observed in some cases
46

= v eye and does not
destroy vision.
or infection to.

or when eye is blind
in suffering from a
dis. that would be
likely to influence
a v other eye & a
sympathetic trouble
result.

Ach. ~~inidocyclitis~~
~~inidocyclitis~~

with pain on pre.

Tromamuch. affects
v ciliary body. Phthisis
bulbi with pain on pre.
most phthisical eyes
are not pain free
pre.

Degenerative altera-
tion following infl.

— 2 yrs of absence
from home

4+6 nerves are paralyzed
with it
delivering. Hyatt
the hypothesis is thought
be a cause.

Med. Treat.

Give Policy
- Jotes & Ag.
Op. referred to & of
look some cases
can't be relieved.

Ectropion

Reversion

Op. lid. more com.
to & lower. the me-
mber of trauma
& cicatrized here
& films of & orbicularis
and not horizontally.
to lower lid & the

Due to position

Immature &
fetus and a foetus
elevation is made
then with a blunt
scissors & cone is
removed and all
& relative contents
are removed. 1

Treat

sterile gauze
control be by hot
water.

Evacuation of eye ball
Indication

Recent or
remote wds. of eyeball
or any injury which
destroy vision or when
a foreign body is

Due to plephritis
& conjunctivitis.

Blepharitis & conjunctive
ulcers may come.

Styria is usually connected
with spots & piphora. =

See Lacrimation
this aggravates trouble
in lower lid. & conjunct
it thickened &

corneal vessels may
penetrate in boluses.
treat.

this is styria
- in old persons. It
is common even in
the lid. In these cases
keep eye & lid & keep
in place by pressure.

Washed & dried
+ Mice to be seen

2 - since you
open & conditions
to tell & put to wipe
tears upward. The
vol. Ag. H. 3 vol. to show
it up
Treat

you make a
V shaped piece out
of it. The one near
inner or outer
canthi.

Hotz operat. is about
where you are from
of ectropion. The in-
cision starts a cou-
ple of M.M. below
& canthi. You hold
it in a ligature of

from the
bottom of the
no more of the

may give R.D.

ligation of the

could manage

ligation of the Ovary

of the ovary & have one

for incise & skin

& dissect - L to back

& push - eyeball from

side to side & up and

down - then the

can be exposed. If

the ovary is on the

inner side

then you may dis-

sect down to the first

rectus for a lig.

then it - then you

proceed to the

then & eyeball

then & the con

Intakes for about 2
days. Then you may
let it drop for
days.

Entropion

May often
distress & for some time
entropion. & usually
you are found from
the tight eyelids - all
persons. In response
you are found in all
cases. In conjunction
+ degeneration of the
more common trachoma
is essential thinking
of conjunct. it may
become a severe

pre-bondage

of imitation of
inflamed larynx
— of course occurs
as it is thick & cloudy
come.

If I'd I re-
placed and painted
with yellowing this
will ripen & I'd
in children as it
will not & then
in. You may find
down by a piece of
thick plaster!
Smellens of nodes
& hook.

For ectopic Smellens
nature, are very
valuable

~~throughout the course of~~
~~the course of the~~

Progn.

Depends on
~~extent & location~~
~~lesion~~
trunk

Decision at
earliest time. It
may be good even tho
no post found.
Anterior dissection
Tenon's

Dr. J. H.
of Tenon corp. is a
rare condition.

Preserving Exoph-
thalmos. In a
surgical T. 2. Complex
a blunt pencil

with the
cell wall

met attention
from adjacent
corneal tissue
erythrocytes to periphery
of eye.

Bois welling
of the choroid
& formation of
exudate there.
Spurred & ruptured
vein much more
rare.

Optic Neuritis &
thrombosis of vein
forming to cover
on inner margin
when treated. It may
be reported & ruptured
pouches under
condition.

~~prophylaxis~~
~~prophylaxis~~

ice ~~cold~~ ^{cold} water
& withaloe. If
hematoma there
it. you may paint
with lid with flesh
colored paint.

Burns & Scolds.
Burns & usually
heal when of 1st &
2nd degree. If
severe it may
result in symblepharon
If & when involves
eyeball it is almost
impossible to prevent
symblepharon

treat. first wash
eye. then thoroughly
with hot water & Borax
sol (weak). then

don't think
that's a good
idea

to limit, & ~~only~~
Polycystic
In only treatment
to hot applications
etc. Anson can
be drag, make an
in case because
of relative trust,
chronic cases.

Orbita cellulitis
a periglans.
usually on one eye
palch, ne.
field or reverse.
come.

From a. up
some to cold. then
Point of, common
sinus. Me. - v. re.

~~the line of~~ ~~the line of~~ ~~the line of~~

dress, ~~with~~ gauge
looked in comb
out.

Emphysema of
lids

muscle to air
being forced thru &
portals times & into
lids on blowing,
& more. Contain & for
about blowing & some
for a pres. & bodge
on & part.

Dis. of & Lochymus
gl. = tachycardis.
It may get well
promptly or may become
chronic. May occur in
& epidemics. From

affected eyes. It
may affect optic
nerve & cause blind
ness. It may go to
br. etc. etc.
Diagnosis.

Diff. from
cellulitis & chorioid-
itis.
treat.

consists in
arriving at a correct
type & then pt.
protocol. for each
single result in
suckling. this may
result in foreign
of eye muscle.
treat

Hz & KD pushed.

2/10/1911
offshore from
St. John's Nfld.

More common in women
& children. It com-
pares as a swelling
in upper & lower lid.
It resembles cellul-
itis except more
confined to area
of lid.

Diagnosis - more in lower
lid
treat

to at first ice
application. Then
if more is going to
show you need hot
application. I believe
in case of
necrosis
Chrom. Frey's

✓ swelling —
conjunct. - chemosis
Conj.

Syphilis is a
con. form. Rheum.
+ inflammation etc.
acute syph.

Pain +
on pre-or movement
of eyeballs you get
this. If not deep
rooted you may
see redness.

If it may result
if in abscess. or it
may come ch. and
cause result - fistula
or rather ulcers
may occur. May

Abroggy full, then
treat me. Hg + K2
+

Doryops.

In case of
a cochlear gland in
the stomach, it forms a
tumor in the region
of the cochlear gland,
when it is lifted
or evicted a portion
of this tumor, me,
seen when a year
passes & tumor gets
larger. Pre-may
come in & collapse
is treated by
resection.

Dissection of eye
to see what

Heat.

consequent
eccentration of
contents of eyeball

to Epithel. tumor
one next with
like papillomata
etc.

they originate at
inner end. just
+ it is a lachrymal
gld. + it. - eye-
ball. it. is cld.

Heat. remove.

Periorbita.

It prob. melting &
may go into cor.
& conjunctiva

2000-10-20
Diseases of drainage
of eye system.
Epiphora is associated
with it.

Operation

W. me. congenit.
obstruct. me. closed
or obliterated for
or adhesive infl.

Inspect & examine
each eye. You inject
a drop or two of es-
caine in eye. There
comes an about 1/2
size of a writing need-
le. You introduce a
probe or have it
there for a few mi-
nutes. You may
have to repeat for two

in this & 4 days
continued

or destroy optic
nerve.
treat.

removal in
mass when possible
Quot electrolysis
me. used. Coag.
injection should
not be used. because
vessels can't be ligated
blebdomata &
lymphangiomata.
choroidomata.

St. J. enormous
eye & projects out on
face. don't operate.
don't involve
th. of eye bds have
tendency to spread
to adjacent cornea.

1

2 two or 3 days.

Carilli

they are
occluded pieces of
thread & eyelashes
we found there.

leaves of caterpillars
we found them

~~12~~ 10. 10. 1919

function of a com-
aliveness of it if not
absolutely necessary
when you find
that there is
not -

and coarse and h

Doelingscytus

me. anchor

caterpillar supper

June

rupt. eye ball
placed to the side
blindness was removed
treat remove ✓
tumor coming to
Ligament.

to cage.
After manipulation
& early removal
Angerhovia.

3 kinds.

~~case~~ 1. Common
2. capillary, 3.

Angerhovia br. del.

— Size by longhizing
hanging. they are
usually benign.
may be changed.

By pressure, it may
become necrotic.

what you have
heard & the like

Cause:

most an.
mellings in more
this travelling may ex-
tend into more
part. Is an idea
breeding peace for
min. they use of
every instance for
they are very violent
about it - part.
scratch & eye a mp.
punitive process may
occur.

Other causes. Pre-
gon & nasal duct
like periorbitis &
more than
& maskful holding

Wray assists in
diag. tube placed
just about 12 cm
above c. t. d. ^{origin} & malum.
Benign tumors grow
slowly. are usually
movable. do not
infiltrate and
affect glands. the
right one. interfere
with. they do not
affect life. the wolff
tumors grow slowly.
eye. glands. grow by
retrogression etc.
Myxoma. one from
pericardial displacement
of eye ball.
Diplopia.
Drooping.

Know corner
long. like horse

of a probe.
Lachrymose obstructed
- a new born &
very common. It is
usually only in
one eye. As due in
most cases to a
delayed absorption
of material in the
lacrimal duct. I there-
fore use eye & not
red & not swallow
the thing to do it
to pre- or immer
caution & try to
press the obstruct
out.

Treat.

Force &

may pass and hot
wind into it & very
one. We Agl W
etc.

Lecture Dec. 2nd 08.

Dis. of V orbit. (tumors)
those orig. in V orbit
progen & rare, but
those in V sinus
& ext are not.

Exophthalmos is a
symptom.

V tumors are pulsating
they are reduced
in size by pres but
not entirely oblate
roted. Anterior
can be open.

gypsum and then

Distill into 1/2 g
Bottle and add 10%
vol. aq. vol. keep
this up for 3
to months & if
this don't improve
you may have to
probe & treat. This
~~does~~ does not always
cure. It stands
& doesn't form a
mass near the
cavity in the
bone. In acromioclavicular
joint it is usually
only necessary to
treat & not
use chemical vol.
& Schell's vol.

I don't think

too much for
when a patient has done
for under a week you
leave it there for a few
minutes.

Electrolysis is not used
some cases are said
to be cured by it we
do not use you have
little page on it
you may use wires
used by electricians.

About resort if
these methods fail to
relieve spine & gl
if necessary. Exercise
for neck & posture
formidable operation
to irritate for neck.
probably try to close

too much for
John & Helen & I

Apply more &
then use an oil
proof complexion
oil & menthol.
Keep this up for two
or three days and
if it does not there
you may have
it if you.

You may have a
good deal of pain &
some of the
may be - don't
what you are deal-
ing with. In a few
days & you will
ride. It may
be that the skin
will heal up.

no more good

is melting & strict
combined.

Treat

we must
probert for daily
If you can pass
probe you may slit
& combine. You
do this with a small
probe pointed knife.
Piercing of probes. They are
various sizes & are
usually done. }
You pass the probe
are going to cut & combine.
It requires a
certain out. of me. to
pass a probe if every
thing is permeable
to you should not use

is much better
than it was
before
the
treatment

use ice
application than
hot - use application
to lower & keep
may have to give
morphine or codeine.
then if it needs
giving you that
give a pot. a general
anesthetic, and tri-
gite & soc. therapy.
you then manage
& soc. with English
vol. or Hydr. vol.
then you should

probe v duct nature v
condition to cure
if you can.
ch. for.

Treat.

~~to~~ as v ac. for.
Obstruct v nature of
v duct. obstruct. m.
the ringy & a well
-ing. of v m. - the
ringy - more obstruct.
from one corner.

Exposure may be
can you should divide
v duct v try to force
some sign into
more. If ph. pores into
more v duct to join

It may be due to
the ~~ringy~~ or obstruct.

If ph. ducts as swelling
of m. - obstructing
will ply. relieve v
condition. May not
do it where there

