

## CENTRAL DISPENSARY AND EMERGENCY HOSPITAL

## HISTORY

History No. 136900

Name ~~John~~ <sup>John's</sup> Donald Age 45 Sex M Occupation lawyer M.S.W.D.

C.H.P.I: Copied from 5/5/51 Progress Note

This 45 yr old man was seen this noon at home where he was found to be in deep coma. Has been under a severe emotional strain for 2 yrs. Post 2 weeks has been working under great pressure - little sleep - Has had a respiratory infection for a week & while in N.Y.C. has had very severe cough & sleep. Saw an MD in NYC. yesterday given penicillin and chloromyacin & probably a barbiturate for sleep. On return from NYC last evening still had severe cough. He is known to have taken a codeine containing cough syrup - & not more than a possible total of 2 grains of codeine. He was given 1 1/2 gr phenobarbital by wife & there are suspicion of having consumed some other barbiturate for sleep and probably 4-5 } of whiskey. He retired & was asleep by 10 PM. This am his family was unable to arouse the pt.

P.H: Gastric ulcer followed by myself (Myer) since 1935. Essential resection in Balto in 1940. Has had mild depression always assoc. to excess fatigue & insomnia.

Copied from 5-5-51 Progress Note

58 NOV 2 1951

ENCLOSURE

74-1333-4767

Kisseloff-21356

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME Hiss Jess, Donald ROOM 539 HIST. NO. 136900

AGE 45 SEX Male OCCUPATION lawyer MS.W.D.

copied from 5-5-51 Progress note

W. d. W. n. man - moderately cyanosed.

Resp rate 30 & fairly deep T 98.4 ax.

P. 100 BP 112/70 - Pupils small do not react

Fundi cannot be seen. mouth dry -

Heart normal size shape - Sounds well heard

Chest anteriorly clear - abd - well flaccid

long upper rt rectus scar - small mac Burn

scar. no masses or visum palp - Genitalia

normal - Rectal defered - Ext. flaccid muscles

no reflexes obtained except weak perosteal

radial. ? negative Babinski - no stiff neck

Imp - acute Barbiturate poisoning

Myer

( HISTORY & PHYSICAL copied  
5-24-51 from Progress note by Dr.  
Myer of 5-5-51 - Boggs )

Kisseloff-21357

copied

DATE 5-24-51 EXAMINER C. Boggs M.D.

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL

Name Miss Jones, Donald Room 589 Hist. No. 136900

Date and Hour A.M. or P.M.	Treatments and Remarks	Urine	Def.	Medications
5/5/51 1:10	Admitted to room from X-ray via stretcher. (To bed). 1000cc. 5% Glucose in D/W started by Dr. Hobart. Stat blood work done. Dr. Myers here. Temp. by rectum - 98°. Pulse 90 - full & reg. R - 20.			
2 P.M.	O <sub>2</sub> started - nasal Catheter.			
2:30 P.M.				Picrotoxin - 5cc. given I.V. by Dr. Hobart.
3:00 P.M.				Picrotoxin - 5cc. (I.V.)
4:00 P.M.	Pt. put on clinical list by Dr. Myers.			
5:00 P.M.	Med. I.V.			Picrotoxin 5cc. given I.V. by Dr. Hobart.
5:30 P.M.	1000cc. of 5%			
6:00 P.M.	Glucose, in distilled NaO I.V. by Dr. Hobart.			Kisseloff-21358
7:00 P.M.	Position of pt. changed.			

*James* *Hess* *Donald* *539* *136980*  
Patient's Last Name First Name Room No. History No.

Hemoglobin (12-16) *15.5* gm *93* % Leucocytes *11,000* per cmm  
Erythrocytes *5,470,000* per cmm Lymph *25* Segmented  
Vol. of packed cells mm Mono *10* Band  
M.C.H. (27-31) *28* micromicrograms Eos. Juvenile  
Red cell morphology—anisocytosis Baso. Myelocyte  
Poikilocytosis Total neutrophils *65* *NE 49*  
Achromia *F 16*

Date *5-5-51* *Frank W. Kesselmann, M.D.*  
Blood Count Examined by *MG*

*James* *Hess* *Donald* *539* *136980*  
Patient's Last Name First Name Room No. History No.

NORMALS

80-120 Whole Blood Sugar *126.5* Mg. per 100cc.  
5-23 Whole Blood Urea N. Mg. per 100cc.  
1-2 Whole Blood Creatinine Mg. per 100cc.  
25-35 Whole Blood N. P. N. *43* Mg. per 100cc.  
8.5-11.5 Serum Calcium Mg. per 100cc.  
3-4.5, Adult Serum Phos. (inorganic) Mg. per 100cc.  
4-6, Child Serum Phos. (inorganic) Mg. per 100cc.  
570-620 S. Chlorides (as Na Cl) Mg. per 100cc.

NORMALS

140-250 S. Cholesterol (Total) Mg. per 100cc.  
60-80% S. Cholesterol Esters % of Total  
6-8 Serum Total Protein Grams per 100cc.  
3.5-5.6 Serum Albumin Grams per 100cc.  
1.3-3.2 Serum Globulin Grams per 100cc.  
1.4-2.0 A G ratio  
55-80 Plasma CO<sub>2</sub> Volumes per cent  
Thiocyanate Mg. per 100cc. plasma

Date *5-5-51* *Frank W. Kesselmann, M.D.*  
Chemistry Examined by *ESS*

*Hess* *Donald* *539* *136900*  
Patient's Last Name First Name Room No. History No.

Hemoglobin (12-16) gm % Leucocytes *19,100* per cmm  
Erythrocytes per cmm Lymph *13* Segmented *NE 69*  
Vol. of packed cells mm Mono *4* Band *14*  
M.C.H. (27-31) micromicrograms Eos. Juvenile  
Red cell morphology—anisocytosis Baso. Myelocyte *1*  
Poikilocytosis *Normal* Total neutrophils *83*  
Achromia

Date *5-6-51* *Frank W. Kesselmann, M.D.*  
Blood Count Kisseloff-21350 Examined by *FG*

*J.M.*

# Central Dispensary and Emergency Hospital

## REQUISITION FOR ROENTGEN EXAMINATION

N. B.—This form must be filled out carefully and legibly, and signed by the person ordering the examination. It should be filed at the Roentgen Laboratory immediately. It will be returned in due course with a report of the Roentgen findings. No patients from the Emergency or Dispensary Departments will be examined free of charge unless they present a certificate from the Board of Charities authorizing same. Gastro-intestinal or kidney examinations will be made only by special appointment.

Name of Patient Mr Donald His

Address 3030 J St. N.W. Ward 539 Private room No. 136900

Emergency Department \_\_\_\_\_ Dispensary Department \_\_\_\_\_ Service \_\_\_\_\_

Free \_\_\_\_\_ Pay  Attending Physician Dr. Myers

Information desired X-Ray of Chest (By Wheel Chair)

Clinical diagnosis Pneumonia

Date May 11, 1951 Ordered by Dr Myers

### REPORT OF ROENTGENOLOGIST

Plates \_\_\_\_\_ 5x7 \_\_\_\_\_ 8x10 \_\_\_\_\_ 10x12 2 14x17 \_\_\_\_\_ Laboratory No. 200738

Roentgen findings

5-11-51

Examination of the chest shows definite improvement since the last examination. There is no evidence of a pneumonic consolidation at this time. jew/vlr

J.G. Wil  
Kisseloff-21360

Roentgenologist.

N.B.—The Roentgenologist will be pleased to confer with the Attending Physician with respect to all cases referred to his department.

CENTRAL DISPENSARY AND EMERGENCY HOSPITAL

Form 40

Pay

History No. 136900

Room 559 Dr. W. C. Myers *Charge of Fee*  
*R. Smith*

Name Mr. Donald ~~Jones~~ Miss Age 45 M. W. S.

Address 3030 Q St. N.W. Nationality Am. Religion Epis.

Occupation Lawyer

Place of Birth Baltimore, Maryland Date of Birth Dec. 15, 1906

Name of Father Charles Jones Birth Place Baltimore, Md.

Maiden Name of Mother Mary Birth Place Baltimore, Md.

Name of Nearest Relative (or Friend) Catherine (wife)

Address, Nearest Relative (or Friend) Senie Phone No. M: 4733

Family Physician \_\_\_\_\_ Duration of Residence in D. C. \_\_\_\_\_

Admitted 5-5-51 Discharged 5/15/51 Days 10

SUMMARY

WORKING DIAGNOSIS Cerna - Stology

FINAL DIAGNOSIS Pneumonia Pneumococcal

OPERATIONS none

CONDITION ON DISCHARGE Well OPERATOR: \_\_\_\_\_

REMARKS \_\_\_\_\_

Disease and Operation Code Numbers

ATTENDING PHYSICIAN'S SIGNATURE W. C. Myers

Kisseloff 21361

ME 5520

*m*

# Central Dispensary and Emergency Hospital

## REQUISITION FOR ROENTGEN EXAMINATION

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Name of Patient Mr Donald <sup>Stiles</sup> 44 M W

Address 3030 Q St N.W. 2-Ward Private room No. 5390

Emergency Department \_\_\_\_\_ Dispensary Department \_\_\_\_\_ Service \_\_\_\_\_

Free \_\_\_\_\_ Pay \_\_\_\_\_ Attending Physician Dr. \_\_\_\_\_

Information desired Chest

Clinical diagnosis pat. unconscious

Date 5/5/51 Ordered by Dr. Myers

### REPORT OF ROENTGENOLOGIST

Plates 5x7 8x10 10x12 14x17 Laboratory No. 200495

Roentgen findings

5-5-51  
Portable examination of the chest shows slight infiltration at the base of the left lung, which could represent a pneumonia. jew/vlr

J. E. Wiles  
Kisseloff-21362 Roentgenologist.



THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME Donald James Bliss ROOM 539 HIST. NO. 136900

DATE AND TIME	TO:
	FROM:
	REGARDING: <u>Neurological Consult</u>
<u>4 PM</u>	<u>This 45 yr old man who was known to have a severe cough went to bed about 10 PM - fell soundly asleep &amp; stopped coughing &amp; it was found at noon today that he could not be aroused. Since admission to Hospital he has had nasal O<sub>2</sub>, picrotoxin &amp; V. speciosa - On arrival here he was areflexic.</u>
	<u>R.P. Pt coughing, corneal &amp; gag reflex present. No response to pain stimuli apparently state of unconsciousness improving. Pupils small but react to light &amp; sound. Could not be reactivated. Reflexes KJ &amp; A J could be obtained. No spontaneous movements. Chaperon &amp; very red &amp; dry large gland left side of face. No response to subcutaneous or intravenous <u>Barbiturate</u> or <u>Subcutaneous</u></u>
	<u>Recommend L.P. Continue nasal O<sub>2</sub> Picrotoxin, turn frequently -</u>
	<u>Wm. H. King</u>
	Kisseloff-21363

(use both sides)

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME Donald James Kiss ROOM \_\_\_\_\_ HIST. NO. \_\_\_\_\_

DATE AND TIME	TO:	M. 4733
5-5-57	FROM:	M. C. Myers
9:30 P.M.	REGARDING:	
<p>History of heavy cold - onset of some sore throat during night (wife unable to awake pt. at 11 P.M.) - this evening fever rapid respirations &amp; pulse sweating and pallor of nail &amp; bed developed.</p> <p>Neurologic - pupils small - react - are equal - Fundi normal. No reaction any place to heavy painful stimuli - Arm reflexes absent - K.D. active - left little more than rt. - A.V. on right absent - left active - No plantar response.</p> <p>Respirations: 34 Pulse: 130 B.P. 120/80 -</p> <p>Question of barbitol intoxication - wife has not found any evidences around the home - Diagnosis seems to lie between meningitis toxemia (pneumonia??) or cerebral-vascular accident. Intracranial pressure not present as measured by spinal tap (200 mmHg O). Xray skull to be sure of no fracture or pineal shift. Q - supportive medical management with antibiotics Prognosis - guarded. Kisseloff 21364</p> <p><i>Robert H. Kisseloff</i> (use both sides)</p>		

CLINICAL LABORATORY  
CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

History No. \_\_\_\_\_  
Name James Donald Date 5-5 19\_\_\_\_  
Location 539 (Hins)  
Nature of specimen type & match  
Nature of examination required \_\_\_\_\_

History of patient and clinical diagnosis type A-RH pos  
ARC 1-9539 type A-RH pos L u K

*Frank W. Kanzelmann, M.D.*

Request of myers  
Report received by ws

NOTE—A brief statement of the presumptive clinical diagnosis is desirable, as it makes for a more exact laboratory diagnosis.

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME Miss Jones, Donald ROOM 539 HIST. NO. 1316900

DATE AND TIME

5/8/51

This 45 year old man was seen this noon at home where he was found to be in deep coma. Has been under a severe emotional strain for two years. Past 2 yrs. has been working under great pressure - little sleep. Has had a respiratory infection for a week and while in N. Y. C. had had very severe cough & sleep. Saw an MD in N.Y.C. Spectator given pericillin and chloromycetin and probably a barbiturate for sleep. On return from N.Y.C. last evening still had severe cough. He is known to have taken a codium containing cough syrup - and not more than a possible total of 2 grains of Codium. He was given 1/2 gr of phenergan by wife & then an suspicion of having consumed some other barbiturate for sleep. He retired & <sup>and probably 4-5 3/4 minutes</sup> was asleep by 10 PM. His own his family were unable to arouse the patient.

P.H. Gastric ulcer followed by myself some 1935 - with eventual resection in Baltimore in 1940. Has had mild depression always associated with excessive fatigue and insomnia.

P.H. W.d. W.N. man - moderately injured, Respirate 30 and fairly deep - T 98.4 ax.

Kisseloff 21366

(use both sides)

Hiss

Donald

A

Patient's Last Name

First Name

539 Room No.

136900 History No.

Type of Examination:

Sputum - Smear & Culture  
Smear: g+ diplococci (predominant) g+ cocci in groups, pairs, chain  
few g+ rods

Culture: Pneumococci  
Staph. albu  
Pept. strept.  
Gamma strept.  
diphtheroids  
M. catarrhalis

Date: 5-5-51

Bacteriology Examined by RB

Type of Examination:

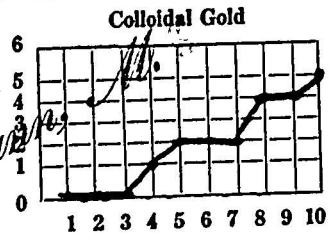
Sputum - Sensitivity  
Pneumococci - high sens. to aureomycin,  
penicillin, chloromycetin,  
Streptomycin  
Staph. albu } not sens. to penicillin  
alpha strep } high sens. to aureo,  
gamma strep } chloro, terra  
diphtheroids  
M. catarrhalis

Date: Special

Examined by RB

Patient's Last Name

Appearance..... Cell Count..... 7..... P. cu mu  
Polys..... % Lymphs..... %  
Proteins (0-45)..... 1.5..... mg/100cc  
Sugar (50-75)..... 139..... mg/100cc  
Chlorides (720-750)..... 627..... mg/100cc  
Bacterial smears.....



Kahn.....  
Kolmer..... negative RB

Date: 5-8-51

Spinal Fluid

Examined by.....

Hiss Patient's Last Name

Donald First Name

539 Room No.

136900 History No.

Cath..... Vd.....  
Character: yellow-clear  
Reaction: 7.0  
Specific gravity: 1.007  
Albumin: neg Mg. %  
Sugar: neg  
Acetone.....  
Diabetic acid.....  
Bile: neg  
Occult Blood.....  
Date: 5-7-51

Leucocytes: cc..... per/hpf  
Erythrocytes..... per/hpf  
Epithelium.....  
Casts..... per/lpf  
Crystals.....  
Other examinations.....

Frank D. Konzelmann

Urinalysis

Examined by Kisseloff-21367

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME \_\_\_\_\_ ROOM \_\_\_\_\_ HIST. NO. \_\_\_\_\_

DATE AND TIME	
<p>4/5/51 Continued</p>	<p>P. 100 - BP. 114/70 - Pupils small do not react Fundi can not be seen - mouth dry - Heart normal size shape - lungs well heard. Chest anteriorly clear - Abd - walls flaccid, long upper st rectus scar - Small umbilical scars. No masses or masses palp - Sternum normal - Rectal defered - Ext. flaccid muscles - No reflexes obtained except weak periorbital radials - ? negative Babinski - No stiff neck - Imp - Acute Bacterial Poisoning Myers</p>
<p>5/5/51 3 PM</p>	<p>Reports from laboratory reveal normal B. Sugar - sl elevated NPN, blood counts consistent with hemocentration - Arsen Picric acid 5 cc i-v at 2:15 PM - effect except for sl degree respiration and improvement in color of skin. Same dose repeated at 3:45 PM - same effects as e.g. dilatation of pupils + return of pupillary reflex - Periorbital radial reflexes more active Babinski reflexes definitely negative - Abd muscle tone + eyelid tone improved distinctly - Myers</p>
<p>5 Ph.</p>	<p>b.p. done, pressure 200 - fluid clear Specimen sent to lab for routine studies HLP</p>

Kisseloff-21368

(use both sides)

# Central Dispensary and Emergency Hospital

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Name of Patient Donald Jones

Address \_\_\_\_\_ Ward 539 Private room No. \_\_\_\_\_

Emergency Department \_\_\_\_\_ Dispensary Department \_\_\_\_\_ Service \_\_\_\_\_

Free \_\_\_\_\_ Pay  Attending Physician Dr. W K Myers

Information desired Portable Skull Film

Clinical diagnosis ? Possible frontal shift

Date May 5, 1951 Ordered by W K Myers

### REPORT OF ROENTGENOLOGIST

Plates \_\_\_\_\_ 5x7 \_\_\_\_\_ 2 8x10 3 10x12 \_\_\_\_\_ 14x17 \_\_\_\_\_ Laboratory No. 200 495

Roentgen findings

5-5-51

Portable examination of the skull shows no definite abnormality. jew/vlr

Kisseloff-21369

Roentgenologist.

N.B.—The Roentgenologist will be pleased to confer with the Attending Physician with respect to all cases referred to his department.

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME \_\_\_\_\_

ROOM \_\_\_\_\_

HIST. NO. \_\_\_\_\_

DATE AND TIME	
5-5-51 9PM	<p>Remains comatose - Has had return of bradycardia reflexes - <del>but</del> T 103 rectally. Skin hot - moist - No definite rash except flush of skin - Quanta again based on diagnosis - No evidence of bacillary proctitis in clothes or effects T 78.5 BP 120/70 -</p> <p>Quanta is raised concerning 1) overinfection infection 2) intracranial vascular lesion 3) mycoplasma - seen by Dr. Groh - Myxus</p>
5-6-51 9AM	<p>Course continues hectic coma persists temperature up to 104 rectally - Considerable pharyngeal &amp; laryngeal mucus requiring aspiration. T: E: P: 100 BP 116/64 - Skin pale - much sweating. Pupils small but react. Fundi not seen. Pharynx &amp; cleanness large lymph node. Chest moves very little P N flat over left chest anteriorly to 2nd rib &amp; posteriorly to spine of scapula. ? impaction over at base posteriorly. BS tubular over left chest posteriorly &amp; anteriorly - ? caudal fracture rib on shoulder in left axillary line - Abd soft no masses or masses - Ext. normal - Reflexes Babinski negative. Tendon reflexes weak but present.</p> <p>Note elevation of white count and shift to left <small>(use both sides)</small></p>

Kisseloff-21370

PROGRESS SHEET



THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL  
WASHINGTON, D. C.

NAME Wes Donald ROOM 539 HIST. NO. 136900

DATE AND TIME	
5-6-51 9 AM Cont'd.	Signs in chest quite definite. Blood culture
	remained negative. Sputum or sath
	pharyngeal mucus shows on smears
	predominately gram positive cocci
	in long chains -
	Has had penicillin, Terramycin (i.v.) - 4 begun
	2.5 gm Sulfathiazole i.v. - Myers -
5-6-51	Pt seems improved. Respirations are less
	abundant. There is a response to reproach'd
	pressure, Achilles pinching, objects to
	awake -
	P. 100 ↓ 3 P. 122/78 skin flushed. There is a
	blister on the left ear. On the rt heel is a
	large red ring - pale center - Reflexes are
	present & definitely more vigorous -
	Spec urine to be sent for chemical & toxicological
	studies Myers -
5/7/51	Definitely improved - This evening recognizes
	friends, doctor - admits headache, general
	malaise. Denies having taken any "sleeping
	capsules" since onset. Explains state -
	Color good. All elevations of T, lbs P.M., P.E
	as noted yesterday Myers

Kisseloff-21371

(use both sides)

PROGRESS SHEET

THE CENTRAL DISPENSARY AND EMERGENCY HOSPITAL

Name Hiss, Mr. Donald Room 539 Hist. No. 136900

Date and Hour A.M. or P.M.	Treatments and Remarks	Urine	Def.	Medications
5/5/51 8 <sup>00</sup> p.m.	Condition remains the same. Temp. 103-120-34.			crystallin 3 cc, 100
10 p.m.	T. 102-122-36.			
10 p.m.	med. D.O. Clysis still running @ 10 <sup>30</sup> p.m. Condition of pt. unchanged. <i>Cham</i>			Tetracycline 5 mgm. given D.O. by J. Hobart <i>Cham</i>
11 <sup>30</sup>	D.V. completely absorbed.			500cc Whole Blood R. Hobart
11 <sup>50</sup>	102 <sup>8</sup> -116-32 Sunday May 6 <sup>th</sup> , 1951	inval.		
1 <sup>30</sup>	Coughing - trying to swallow tongue. Body surface warm & flushed.			
2 <sup>00</sup>	103 <sup>4</sup> -112-36	inval.		
3 <sup>00</sup>	No ill effects from blood. Pulse strong, rapid.			500cc - 5% glucose in H <sub>2</sub> O
4 <sup>15</sup>	101-102-28			100cc - 5% glucose in H <sub>2</sub> O
4 <sup>40</sup>	6 <sup>15</sup> dx. retractor loafers ant. muscles - (Erick) Aspirator used continuously.		Kisseloff-21372	