

Surgeon's Journal of Her Majesty's Female Convict Ship Maria  
 Mr Edward Nolloth , Surgeon Superintendent  
 Between the 5<sup>th</sup> March 1849 and 28<sup>th</sup> July 1849  
 Adm101-049-03  
 Received 24<sup>th</sup> May 1850

**Copy of the sick list of the "Maria" Female Convict Ship**

When Put On Sick List	Name	Age	Quality	Disease or Hurt	When Put Off Sick List	How Disposed Of
PA301067 1849						
13 <sup>th</sup> April	Mary Murphy	40	Convict	Dyspepsia	28 <sup>th</sup> July	Discharged cured
"	Honora Hegaty	40	"	Pleuritis	21 <sup>st</sup> May	DC.
14 <sup>th</sup> "	Mary Donnelly	38	"	Menorrhagia	1 <sup>st</sup> May	DC.
"	Mary Ann Porter	20	"	Dyspepsia	16 <sup>th</sup> July	DC.
15 <sup>th</sup> "	Anne Bains	40	"	Dyspepsia	30 <sup>th</sup> April	DC.
"	Ellen McCarthy	22	"	Pleuritis	29 <sup>th</sup> "	DC.
16 <sup>th</sup> "	Catherine King	36	"	Dyspepsia	30 <sup>th</sup> "	DC.
"	Maria or Mary Holmes	36	"	Dyspepsia	28 <sup>th</sup> July	DC.
21 <sup>st</sup> "	Anne Little	25	"	Prolapsus Uteri	1 <sup>st</sup> May	DC.
26 <sup>th</sup> "	Mary Webster	22	"	Pleurodynia	5 <sup>th</sup> "	DC.
28 <sup>th</sup> "	Mary Burke	20	"	Diarrhoea	6 <sup>th</sup> "	DC.
2 <sup>nd</sup> May	Johanna Lyhane	22	"	Pleurodynia	11 <sup>th</sup> "	DC.
" "	Margaret Foley	26	"	Phthisis Pulmonalis	23 <sup>rd</sup> "	Died
10 <sup>th</sup> May	Bridget Newell	20	"	Dysentery	" "	DC.
" "	Mary Connolly	27	"	Colica	18 <sup>th</sup> "	DC.
" "	Alicia Daley	30	"	Debilitas	16 <sup>th</sup> June	DC.
11 <sup>th</sup> "	Catherine Kennedy	34	"	Febricula	21 <sup>st</sup> May	DC.
" "	Bridget Cullen	24	"	Dysentery	18 <sup>th</sup> July	DC.
12 <sup>th</sup> "	Ellen McTigue	40	"	Dysentery	16 <sup>th</sup> June	DC.
" "	Jane Goodwin	21	"	Cephalalgia	21 <sup>st</sup> May	DC.
15 <sup>th</sup> "	Mary Mulhern	23	"	Pleuritis	" "	DC.
16 <sup>th</sup> "	Johanna Lyhane	22	"	Pleurodynia	6 <sup>th</sup> June	DC.
" "	Catherine Reilly	20	"	Palpitatio Cordis	" "	DC.
17 <sup>th</sup> "	Eliza Cashin	30	"	Tussis	26 <sup>th</sup> May	DC.
" "	Bridget Walsh	35	"	Debilitas	" "	DC.
" "	Bridget Flynn	26	"	Dyspepsia	2 <sup>nd</sup> June	DC.
PA301068						
17 <sup>th</sup> May	Margaret Reardon	18	"	Febricula	22 <sup>nd</sup> May	DC.
19 <sup>th</sup> "	Mary Donnelly	38	"	Dysentery	24 <sup>th</sup> July	Colonial Hospital
20 <sup>th</sup> "	Mary Campbell	21	"	Tussis	2 <sup>nd</sup> June	DC.
" "	Catherine McCook	40	"	Dysentery	7 <sup>th</sup> July	DC.
" "	Catherine McDonald	40	"	Fistula in Ano	2 <sup>nd</sup> "	DC.
23 <sup>rd</sup> "	Bridget Hughes	23	"	Diarrhoea	2 <sup>nd</sup> June	DC.
24 <sup>th</sup> "	Mary Kielly	24	"	Febricula	7 <sup>th</sup> "	DC.
25 <sup>th</sup> "	Mary McCarthy	20	"	Pleurodynia	21 <sup>st</sup> "	DC.
" "	Johanna Walsh	19	"	Febricula	2 <sup>nd</sup> "	DC.
26 <sup>th</sup> "	Anne Clifford	17	"	Febricula	3 <sup>rd</sup> "	DC.
" "	Catherine Sweeney	18	"	Diarrhoea	15 <sup>th</sup> "	DC.
30 <sup>th</sup> "	Catherine King	36	"	Debilitas	16 <sup>th</sup> July	DC.
" "	Jane Goodwin	21	"	Cephalalgia	7 <sup>th</sup> June	DC.

“ “	Mary Farrell	19	“	Ulcus	7 <sup>th</sup> June	DC.
30 <sup>th</sup> May	Catherine Murphy	20	“	Cephalalgia	18 <sup>th</sup> July	DC.
3 <sup>rd</sup> June	Margaret Collins	20	“	Diarrhoea	7 <sup>th</sup> June	DC.
5 <sup>th</sup> “	Catherine Fletcher	28	“	Diarrhoea	11 <sup>th</sup> “	DC.
“ “	Anne Ranahan	24	“	Diarrhoea	“ “	DC.
6 <sup>th</sup> “	Ellen Gallavan	24	“	Dysentaria	24 <sup>th</sup> July	Colonial Hospital
“ “	Mary Walsh	30	“	Diarrhoea	15 <sup>th</sup> June	DC.
7 <sup>th</sup> “	Mary Dwyer	30	“	Palpitatio Cordis	9 <sup>th</sup> July	DC.
8 <sup>th</sup> “	Mary King	36	“	Obstipatio	16 <sup>th</sup> June	DC.
10 <sup>th</sup> “	Mary Hughes	19	“	Vulnus	“ “	DC.
13 <sup>th</sup> “	Jane Glass	19	“	Febricula	“ “	DC.
“ “	Johanna Walsh	19	“	Colica	30 <sup>th</sup> “	DC.
<b>PA301069</b>						
13 <sup>th</sup> June	Catherine Kennedy	34	“	Diarrhoea	30 <sup>th</sup> June	DC.
14 <sup>th</sup> “	Anastasia McCarthy	56	“	Dysentaria	7 <sup>th</sup> July	DC.
“ “	Catherine Reilly	20	“	Palpitatio Cordis	22 <sup>nd</sup> “	DC.
15 <sup>th</sup> “	Ellen Fitzgerald	22	“	Diarrhoea	7 <sup>th</sup> “	DC.
“ “	Margaret Hickey	15	“	Diarrhoea	21 <sup>st</sup> June	DC.
“ “	Mary Burke	20	“	Dyspepsia	16 <sup>th</sup> July	DC.
20 <sup>th</sup> “	Margaret Armstrong	32	“	Leucorrhoea	22 <sup>nd</sup> “	DC.
21 <sup>st</sup> “	Ellen McTigue	40	“	Dysentaria	20 <sup>th</sup> “	DC.
25 <sup>th</sup> “	Margaret Foley	30	“	Cephalalgia	9 <sup>th</sup> “	DC.
“ “	Mary Farrell	19	“	Ulcus	28 <sup>th</sup> “	DC.
29 <sup>th</sup> “	Ellen Roche	35	“	Cephalalgia	7 <sup>th</sup> “	DC.
“ “	Bridget Newell	20	“	Diarrhoea	“ “	DC.
1 <sup>st</sup> July	Mary Higgins	38	“	Diarrhoea	16 <sup>th</sup> “	DC.
“ “	Mary McCabe	40	“	Febricula	12 <sup>th</sup> “	DC.
2 <sup>nd</sup> “	Peggy Greally	36	“	Dyspepsia	27 <sup>th</sup> “	DC.
“ “	Honora Hegarty	40	“	Febricula	17 <sup>th</sup> “	DC.
3 <sup>rd</sup> “	Mary Windgrove	36	“	Obstipatio	12 <sup>th</sup> “	DC.
“ “	Mary Webster	22	“	Phlogosis	“ “	DC.
4 <sup>th</sup> “	Maria Rutledge	36	“	Dysentaria	24 <sup>th</sup> “	Colonial Hospital
7 <sup>th</sup> “	Margaret Regan	30	“	Cephalalgia	15 <sup>th</sup> “	DC.
“ “	Mary Hughes	19	“	Vulnus	22 <sup>nd</sup> “	DC.
“ “	Margaret Wilson	23	“	Dyspepsia	17 <sup>th</sup> “	DC.
9 <sup>th</sup> “	Bridget Hughes	23	“	Dysentaria	22 <sup>nd</sup> “	DC.
10 <sup>th</sup> “	Jane Burke	40	“	Diarrhoea	27 <sup>th</sup> “	DC.
11 <sup>th</sup> “	Bridget Mahoney	28	“	Synochus	22 <sup>nd</sup> “	DC.
<b>PA301070</b>						
11 <sup>th</sup> July	Caroline Mahoney	40	“	Diarrhoea	26 <sup>th</sup> July	DC.
“ “	Johanna Lyhane	22	“	Pleurodynia	18 <sup>th</sup> “	DC.
12 <sup>th</sup> “	Nancy Ward	40	“	Diarrhoea	23 <sup>rd</sup> “	DC.
13 <sup>th</sup> “	Bridget Harty	30	“	Diarrhoea	22 <sup>nd</sup> “	DC.
14 <sup>th</sup> “	Mary Mulhern	23	“	Diarrhoea	20 <sup>th</sup> “	DC.
“ “	Anne Little	25	“	Diarrhoea	24 <sup>th</sup> “	DC.

### Summary of the above 82 Convicts

Put on Sick list	DC.	Sent to Colonial Hospital	Died
82	77	4	1

### Sick List of Convicts' Children, Free Settlers and their Children

When Put On Sick List	Name	Age	Quality	Disease or Hurt	When Put Off Sick List	How Disposed Of
PA301071 1849						
14 <sup>th</sup> April	Johanna Kelleher	14	Child of Convict	Phthisis Pulmonalis	13 <sup>th</sup> June	Died
20 <sup>th</sup> June	Elizabeth McGlynn	36	Free Settler	Dysentery	10 <sup>th</sup> July	DC.
12 <sup>th</sup> July	Isabella Winchester	8	Child of Convict	Diarrhoea	25 <sup>th</sup> “	DC.
“ “	James Mulhall	9	Child of Free Settler	Diarrhoea	24 <sup>th</sup> “	DC.
20 <sup>th</sup> “	Ellen Cane	9	Child of Convict	Diarrhoea	27 <sup>th</sup> “	DC.
“ “	Elizabeth Lacey	5m.	Child of Convict	Debilitas	24 <sup>th</sup> “	Colonial Hospital with mother Anna Little
Born						
8 <sup>th</sup> July	William Rutley	10d	Child of Convict	“	18 <sup>th</sup> “	Died

PA301072

### Medical and Surgical Journal of Her Majesty's Convict Ship "Maria" between the 5<sup>th</sup> March 1849 and the 28<sup>th</sup> July 1849 during which time the said ship has been employed in a voyage from Dublin to Hobart Town, Van Diemen's Land

Nature of Disease	No. of Case	Men's Names, Ages, Qualities, Time when and where taken ill, and how disposed of.	The History, Symptoms, Treatment, and Daily Progress of the Disease or Hurt.
Dyspepsia	1	<p>Mary Murphy 40. Convict 13<sup>th</sup> April 1849 On disembarkation from the "Maria" her health pretty well re-established</p> <p>14<sup>th</sup> April</p> <p>Discharged to "Anson" 28<sup>th</sup> July 1849</p> <p>15<sup>th</sup> April“</p> <p>16<sup>th</sup> April</p>	<p>This woman has suffered severely from Sea-Sickness during the last fortnight &amp; now that she has recovered from this affliction her stomach remains in a very debilitated condition. Has at present occasional vomiting after meals, particularly after breakfast. Countenance pale, great debility and lowness of spirits. Bowels inclined to be constipated.</p> <p><i>Rx. Pulv. Rhei</i> <math>\square</math> <i>Tinct. " Z ii</i> <i>Aquae Menthe Pip f zij M ft Haust st. Sumend.</i></p> <p>The above draught operated well &amp; she has less nausea &amp; disposition to vomit, great languor with acid eructations, debility extreme. Pulse small &amp; frequent tongue pallid. No desire for food.</p> <p><i>Rx Pilulæ Hydrargyri gr ij</i> <i>Pulv. Rhei gr ij</i> <i>Pulv. Ipecacuan gr fs M ft. Pil. omni nocte sumenda</i></p> <p>Feels pretty well today, but is always affected by the ships motion in rough weather. Bowels natural, and some desire for food. Skin dry. Pulse small &amp; frequent. Skin sallow.</p> <p><i>Cont. Pil Hydrarg etc omni nocte</i></p> <p>Not so well today – Great debility &amp; dejection of Spirits, nausea, tongue white, thirst, skin dry. Pulse small 86. She has had rice for dinner the last 2 days &amp; sometimes she eats very well.</p> <p><i>Cont. Pil Hydrarg. Etc</i></p>

PA301073

PA301074	17 <sup>th</sup> April	Much the same as yesterday – Bowels not moved for 2 days <i>Rept' Haust Rhei</i>
	20 <sup>th</sup> “	Has felt herself better during the last 3 days. Bowels regular, tongue clean, skin natural, still great debility & depression of spirits. <i>Cap'. Infus Gentianæ Comp Z ifs bis in die</i> Arrow Root for Breakfast Rice for Dinner
	30 <sup>th</sup> “	A small quantity of Port Wine Has continued to take the Infusion of Gentian twice a day for the last 10 days & has derived great benefit from its employment. Today there is some nausea & bowels constipated. <i>Cap'. Haust Rhei ut supra.</i> Continues to enjoy tolerably good health, but always suffers severely from Sea-Sickness in anything like bad weather. <i>Cap'. Pil Hydrarg gr ii</i> <i>Pulv. Rhei gr ii</i> <i>Pulv Ipecac gr fs h.s.</i>
	May 1 <sup>st</sup>	Less depression of animal spirits, debility much the same. Skin moist, occasional thirst, Bowels regular Pulse very weak. 88. <i>Cont' Pil Hydrarg</i> <i>Preserved Soup</i> <i>Port Wine</i>
	May 16 <sup>th</sup>	Has continued in an improved state of health for the last fortnight. Debility still continues. <i>Cap'. Pil Quinæ gr i in singulus bis in die</i> Preserved Soup Port Wine
	June 1 <sup>st</sup>	Health pretty good, occasional nausea Continue the same Diet <i>Omitt' Pil Quinæ</i>
	“ 12 <sup>th</sup>	Not so well today, having vomited several times during the night, great debility great anxiety of countenance, tongue furred, thirst. Pulse small & weak Arrow Root
	13 <sup>th</sup> June	Great debility & depression of spirits. nausea, tongue furred, thirst, Bowels loose, acid eructations. Pulse small & frequent. No desire for food. <i>Cap'. Mist Cretæ C. Z i p.r.n.</i> Diet Rice, Tea etc
	14 <sup>th</sup> June	Feels better today. Bowels regular, less debility, some desire for food. Tongue cleaner. <i>Cap'. Pil Hydrarg etc omni nocte</i>
	17 <sup>th</sup> “	Stomach quiet & appetite for food good. Tongue clean, no thirst. Bowels regular. Preserved Soup Port Wine
	30 <sup>th</sup> June	Continued to take the <i>Pil Hydrargyri</i> for 4 successive nights & it was then omitted. Has remained in pretty good health since that period but has occasional vomiting, & the debility of body & languor of mind continues nearly to the same extent as ever. <i>Omitt' Medicinæ</i> Her appetite for food is [quiet/great?] & she prefers Salt Meat to preserved Meat & as it seems to agree with the stomach she is allowed to eat it.

			This woman at the present moment, 20 <sup>th</sup> July, is in pretty good health & was discharged to day to the "Anson" Convict Hulk. She is still weak & emaciated but has greatly improved since our arrival in harbour.
Pleuritis	2	<p>Honora Hegarty 40. Convict 13<sup>th</sup> April 11849 At Sea Discharged from Sick List quite well 21<sup>st</sup> May 1849 14<sup>th</sup> April</p> <p>15<sup>th</sup> April</p> <p>16<sup>th</sup> April</p> <p>17<sup>th</sup> April 19<sup>th</sup> “</p> <p>28<sup>th</sup> “</p> <p>April 29<sup>th</sup></p> <p>April 30<sup>th</sup></p> <p>May 15<sup>th</sup></p> <p>May 21<sup>st</sup></p>	<p>At 6.30 P.M. this woman was attacked with acute pain in the left side of the Thorax, accompanied with dyspnoea Breathing extremely anxious &amp; short. Pain much increased on taking a deep inspiration Cough. Pulse frequent &amp; hard, skin hot &amp; flushed. Bowels constipated <i>Venæsectio ad deliquium animi</i> <i>Rx Antim.Potassio Tart<sup>r</sup> gr ¼</i> <i>Aquæ Z j M—Ft Haust 3<sup>dis</sup> horis sumendus</i></p> <p>Is much better this morning. No pain except on taking a deep inspiration. Less cough. Pulse less frequent &amp; hard. Continued to take nauseating doses of Tartarized Antimony till midnight, when she vomited. <i>Cont<sup>r</sup>. Solutio Antim Potasio Tartratis gr ⅛ ad Aquæ Z i 2<sup>dis</sup> horis et Hydrargri Chloridi gr ij 4tis horis</i> Diet Low PM. <i>Cap<sup>t</sup> Pil Colocynth. C. no ii</i> Slight return of pain this evening, cough slightly increasing, some anxiety of countenance. Face flushed. Pulse frequent but not hard.</p> <p>Much better, no pain, less cough, bowels moved twice, skin moist &amp; soft. Pulse 80 &amp; soft. <i>Cap<sup>t</sup>. Sol Magnes Sulphatis ft Z ii. Omit<sup>t</sup> Sol Antim Potass Tart<sup>r</sup> and Hydrarg Chloridum.</i> Continue Low Diet</p> <p>No complaint, except debility, slight cough – Bowels moved twice during the night. Pulse natural, skin soft &amp; moist, tongue clean. No medicine Continue Low Diet</p> <p>No complaint except that of debility. Bowels constipated <i>Cap<sup>t</sup> Pil Colocynth C. no ij</i> Low Diet</p> <p>Has continued free from pain but has had cough with mucus expectoration for the last few days. <i>Applicatur Emplast Lyttæ pectori.</i> <i>Cap<sup>t</sup>. Mistura Pectoralis Z i pro re nata</i> She looks much debilitated. Preserved Meat, Wine and Water</p> <p>Better very little cough &amp; slight expectoration of mucus, no pain, Pulse rather small. Bowels inclined to be constipated. Skin dry. <i>Cap<sup>t</sup>. Sol Antim Potass Tart<sup>r</sup> gr ⅛ ad Aquæ Z i 4<sup>dis</sup> horis</i> <i>Omit<sup>t</sup> Mistura Pectoralis</i></p> <p>Much better, little or no cough, less debility <i>Cont<sup>r</sup>. Mist Pectoralis</i> <i>Omit<sup>t</sup> Sol Antim Potass Tart</i> Bowels moved once last night</p> <p>Has had no complaint for the last fortnight, except slight debility &amp; cough. <i>Infricitur Ung. Antim Potass Tart pectori.</i></p> <p>During the last 4 days has had not the slightest cough &amp; is quite well &amp; was therefore discharged from the Sick List.</p>

			This morning was again put on the Sick List on the 2 <sup>nd</sup> of July with Catarrh. And discharged on the 17 <sup>th</sup> July, quite well. Cough was at one time troublesome but soon yielded to the use of Ung Antim Potass Tart
PA301075 Phthisis Pulmonalis	3	Johanna Kelleher 15 daughter of Convict 14 <sup>th</sup> April 1849 At Sea Died 13 <sup>th</sup> June 1849 At Sea  16 <sup>th</sup> April  17 <sup>th</sup> April  22 <sup>nd</sup> April  April 24 <sup>th</sup>  April 26 <sup>th</sup>  April 28 <sup>th</sup>  May 2 <sup>nd</sup>  May 4 <sup>th</sup>  May 5 <sup>th</sup>	This girl is exceedingly delicate & has not menstruated, is very chlorotic in appearance, appetite for food very good Bowels constipated. <i>Cap<sup>t</sup> Ol Ricini z vj ex cyanth Aquæ Menth Pip.</i> 15 <sup>th</sup> April Ol Ricini operated well, & is much the same as yesterday. Skin cool, pulse small & quick, tongue pale. Full diet with one glass of Port Wine at Dinner. Bowels inclined to be loose & feels much debilitated. <i>Cap<sup>t</sup> Pil Opii gr i</i> Diet to be continued. Feels herself much better, Bowels regular. Says that she had a slight cough last night, no pain of chest. Bowels regular <i>Rx Tinct Ferri Sesquicl. m x</i> <i>Infus. Quassia Z i ft Haustus ter in die</i> Continued to improve until today & has taken daily a draught composed of <i>Tinct Ferri Sesquichlorid m x Infus Quassia Z i</i> . To day has no desire for food & looks very pale & debilitated, no cough or pain of the Chest. Arrow root with a glass of Port Wine for dinner. <i>Dis-continuat<sup>r</sup> Haust. Ferri Sesquichloridi.</i> Is much better to day – appetite very good. An egg for breakfast. Preserved meat & glass of Port Wine for Dinner. Bowels constipated <i>Cap<sup>t</sup> Ol Ricini z vj ex cyanth Aquæ Menth Pip.</i> Diet the same as before Continued to take <i>Haust Ferri Sesquichl</i> yesterday, has slight nausea, <i>omitt<sup>r</sup> Haust et capiat Pil Quinnae</i> Bowels regular Greatly improved during the last few days. <i>Cont<sup>r</sup>. Pil Quinnae gr i in singulus bis in die</i> Complains of slight cough, no pain of chest. Pulse quick & small. Bowels regular. Tongue pale. <i>Omitt<sup>r</sup> Pil Quinnae.</i> At 2AM called to see this girl having great pain in right side of Thorax with short cough no expectoration, countenance very anxious, Pulse small & quick. <i>Cap<sup>t</sup>. Sol Antim Potass Tart gr 1/8 ad aquæ Z j 3<sup>tis</sup> horis ant. que ad nauseam</i> <i>Applicandum Emplast Lyttæ lateri dextro thoracis</i> Same Diet Vespere. Pain was entirely removed by the Blister. Occasional cough with slight muco-purulent expectoration. On percussing the chest, the sound elicited was duller on the right than on the left side of thorax. This girl although always exceedingly delicate in appearance did not till within the last few days give me reason to suppose she was consumptive; but a most marked change for the worse has taken place since the 4 <sup>th</sup> inst. She thinks that she took cold s few days since when she remained a longer time than usual on deck. Much better to day & slept pretty well, having occasional
PA301076		May 6 <sup>th</sup>	

PA301077		<p>May 7<sup>th</sup></p> <p>“ 8<sup>th</sup></p> <p>May 9<sup>th</sup></p> <p>May 14<sup>th</sup></p> <p>May 16<sup>th</sup></p> <p>May 17<sup>th</sup></p> <p>“ 20<sup>th</sup></p> <p>May 26<sup>th</sup></p> <p>May 31<sup>st</sup></p>	<p>cough with slight muco-purulent expectoration, slight pain in right side of chest &amp; shoulder, some pain of abdomen – bowels regular. Tongue clean but pale. Pulse 88 &amp; short – Blister continues to discharge. Dressed simply. Diet consists of Arrow Root etc Appetite very good &amp; wishes to have meat &amp; wine for Dinner. <i>Continuatur Haust Antim Potass Tart – 4<sup>th</sup> horis</i></p> <p>Much better, having very little pain or cough – but is much debilitated &amp; is exceedingly emaciated. Pulse 90 &amp; weak, tongue clean, Bowels regular. No Medicine Blister dressed</p> <p>Gruel broth</p> <p>At 3AM called to see this girl, complaining of most severe lancinating pain in right side of thorax, greatly increased during inspiration &amp; on the slightest motion of the body. Pulse 94. very feeble, thirst, tongue clean, Bowels regular. <i>Vesicatorium. p.d.</i></p> <p>8AM. Much easier. <i>Cap<sup>l</sup> Haust Antim Potass Tart gr 1/8 ad aquæ Zj 4<sup>th</sup> horis</i> Debility excessive</p> <p>Vespere. Has remained free from pain since 8 AM. Cough now troublesome expectoration greater &amp; more purulent in appearance. Had some soup &amp; small quantity of wine this afternoon, debility very excessive. <i>Cap<sup>l</sup>. Mist Pectoralis tussi urgente.</i> Blister dressed.</p> <p>Has soreness rather than pain of Thorax, less cough. Pulse 86. thirst great, appetite good &amp; craves for food. Allowed Soup &amp; small quantity of wine &amp; an egg for breakfast. There is cavernous respiration at the upper part of the right lung with puerile respiration on the left side. <i>Cap<sup>l</sup>. Mist Pectoral p.r.n.</i></p> <p>Has remained in much the same condition since the 9<sup>th</sup> having occasional return of pain, cough troublesome at night &amp; expectoration now quite purulent. is much debilitated &amp; emaciated Pulse 90 &amp; very small, thirst, Continue the <i>Mist Pectoral</i>. Blister healed. Bowels regular. Cavity of the right lung seems to get daily larger. Cough troublesome, copious purulent expectoration, Bowels rather relaxed, thirst great. Pulse small &amp; frequent. <i>Mist Pectoralis. Cap<sup>l</sup> Mist Cretæ C. p.r.n.</i></p> <p>Eats an egg every morning for breakfast &amp; a piece of Fowl for dinner with a quantity of Porter or Wine.</p> <p>Acute pain on left side of chest, breathing much hurried, cough troublesome, countenance anxious. Arrow Root. <i>Omitt<sup>r</sup> Wine</i></p> <p>Has been pretty free from pain since the 17<sup>th</sup> but is very much debilitated &amp; does not sleep well at night. Bowels regular. <i>Capt. Haust Anodyne h.s.</i> Allowed an egg for breakfast, generally has something from the cabin table for dinner, as she cannot be persuaded to eat arrow root or any of the medical comforts.</p> <p>Remains in much the same condition, occasional severe pain, cough troublesome particularly at night with copious purulent expectoration. Bowels occasionally loose, but the <i>Mist Cretæ C.</i> immediately checks them. Allowed to eat what she fancies – Porter or Port Wine at dinner. <i>Cont<sup>r</sup> Mist. Pectoralis</i></p> <p>Has somewhat improved since the 26<sup>th</sup> having less cough &amp; expectoration, but becomes daily more emaciated &amp; debilitated. Diet as before. <i>Cont<sup>r</sup>. Mist Pectoralis</i> &amp; occasionally an opiate draught at bed time.</p>
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		<p>June 3<sup>rd</sup></p> <p>June 7<sup>th</sup></p> <p>June 9<sup>th</sup></p> <p>June 12<sup>th</sup></p> <p>June 13<sup>th</sup></p>	<p>Return of pain last night. Blister applied. Cough &amp; [pain?] very troublesome &amp; expectoration most profuse – has night perspirations - &amp; bowels relaxed 3 times last night. <i>Cap<sup>t</sup> Mist Cretæ C. post singul dejections liquidus.</i></p> <p>Daily becoming worse &amp; cannot hold out much longer, eats healthily - &amp; has very little pain, but cough is very disturbing at times &amp; expectoration continues to be profuse – there is extensive cavernous respiration in both lungs. <i>Cont<sup>r</sup>. Mist Pectoralis &amp; Diet as before – requires an opiate draught at bed time.</i></p> <p>Called to see her at midnight, appeared to be moribund, but rallied after drinking a small quantity of Port Wine. Diarrhoea is now with difficulty checked: in other respects is the same.</p> <p>Has remained in much the same condition since the 9<sup>th</sup> &amp; is evidently sinking – diarrhoea continues in spite of the <i>Mist. Cretæ.</i> Intellect quite clear &amp; has been aware for the last fortnight of her approaching end.</p> <p>She died at 5:30 AM.</p>
Menorrhagia	4	<p>Mary Donnelly 38 Convict 14 April 1849 At Sea Discharged 1<sup>st</sup> may 1849 Again Placed on Sick List 19<sup>th</sup> May 1849 At Sea Discharged to Colonial Hospital Van Diemen's Land 24<sup>th</sup> July 1849</p> <p>May 21<sup>st</sup> “ 24<sup>th</sup></p> <p>“ 25<sup>th</sup></p> <p>May 27<sup>th</sup></p> <p>“ 28<sup>th</sup></p> <p>“ 31<sup>st</sup> June 3<sup>rd</sup></p> <p>June 6<sup>th</sup></p> <p>June 12<sup>th</sup></p>	<p>This woman had the appearance of a woman of 50 years of age &amp; is of an exceedingly delicate habit of body. She has been subject to Menorrhagia for the last 3 years, but is occasionally free from the disease for months together, She speedily got well under the administration of Quinine with a generous diet &amp; cold applications to the Vulva. She has also had two previous attacks of Dysentery &amp; was put on the Sick List with this disease on the 19<sup>th</sup> of May when she complained of frequent desire to go to stool &amp; passed mucus mixed with blood, tenesmus. <i>Cap<sup>t</sup>. Ol. Ricini z j ex cyath Aquæ Ment Pip.</i></p> <p>May 20<sup>th</sup> Was much relieved by the Castor Oil which brought away a large quantity of hardened fæces, slight return of tenesmus, <i>Cap<sup>t</sup>. Pil Opii gr i ter in die Fomentatur abdomini</i></p> <p>Bowels quiet, no tenesmus. <i>Omit<sup>r</sup> Medicinæ</i></p> <p>Uneasy sensation in bowels which have not been moved since yesterday morning.</p> <p><i>Rx Pil Hydrarg gr ii</i> <i>Pulv Rhei gr ii</i> <i>Pulv Ipecac gr i M ft Pil bis in die sumenda</i></p> <p>Had two motions last night of natural consistence, slightly tinged with blood. <i>Omit<sup>r</sup> Pil Hydrarg etc.</i></p> <p>Bowels constipated <i>Rx Pulv. Rhei—i Tinct Rhei zij Aquæ Ment Pip Zifs M ft Haust.</i></p> <p>Diet consists of Arrow Root</p> <p>Bowels moved twice by the Rhubarb draught.</p> <p>Diet as yesterday</p> <p>Bowels constipated since the 28<sup>th</sup> inst. <i>Rept<sup>r</sup> Haust Rhei.</i></p> <p>Bowels have been quite regular since taking the Rhubarb draught, Allowed Preserved Soup &amp; Rice. Is very pale &amp; looks debilitated.</p> <p>Remains free from all symptoms of Dysentery. Requires an occasional rhubarb draught as bowels are inclined to become constipated</p> <p>Bowels constipated Rhubarb draught</p>
PA301078			



		<p>June 19<sup>th</sup></p> <p>“ 20<sup>th</sup></p> <p>“ 21<sup>st</sup></p> <p>“ 22<sup>nd</sup></p> <p>“ 28<sup>th</sup></p> <p>July 7<sup>th</sup></p> <p>July 10<sup>th</sup></p> <p>July 11<sup>th</sup></p> <p>July 14<sup>th</sup></p> <p>July 18<sup>th</sup></p> <p>July 20<sup>th</sup></p> <p>July 21<sup>st</sup></p> <p>July 22<sup>nd</sup></p> <p>July 23<sup>rd</sup></p> <p>“ 29<sup>th</sup></p>	<p>Return of griping &amp; tenesmus, 3 stools during last 12 hours – mixed with blood. Pulse small &amp; quick, tongue furred, thirst. <i>Cap<sup>l</sup>. Ol Ricini z vj ex cyath Aquæ Menth Pip. Hot fomentations to Abdomen.</i></p> <p>Had 2 motions after taking the Ol Ricini which entirely removed the griping &amp; tenesmus. <i>Cap<sup>l</sup> Pil Opii gr i bis in die. Suppositor Opii.</i> Diet Arrow Root.</p> <p>3 motions during the night without pain or tenesmus. <i>Cont<sup>r</sup> Pil Opii gr i mane nocteque.</i> Diet as before</p> <p>Feels quite easy to day – no motion during the last 18 hours. Diet as before</p> <p>Has remained free from all symptoms of Dysentery since the 22<sup>nd</sup> inst. – Requires an occasional dose of <i>Ol Ricini or Haust Rhei.</i></p> <p>Had remained quite free from Dysentery until last night when she was seized with vomiting &amp; purging which caused extreme prostration of the vital powers. She soon recovered on the application of a mustard poultice to the region of stomach &amp; an opiate pill taken.</p> <p>Remained free from purging &amp; vomiting till this morning when these symptoms returned with greater violence than ever. <i>Cap<sup>l</sup>. Haust Efferves. p.r.n. Sinaprisma regioni stomachi applicandum suppositor Opii.</i> Extreme prostration of muscular power.</p> <p>Much better to day vomiting now ceased after application of Cetaphlas Sinapism &amp; she remained well until this morning the 15<sup>th</sup> July having had 2 stools mixed with blood, occasional tormina &amp; tenesmus. <i>Injections of Arrow Root &amp; Tinct Opii ter in die.</i> Diet Rice &amp; Arrow Root.</p> <p>Has had frequent hiccough but bowels are quiet &amp; no vomiting since 10<sup>th</sup> inst. Great debility</p> <p>Has remained free from all symptoms of Dysentery since the 14<sup>th</sup> but remains extremely debilitated &amp; emaciated, has occasional hiccoughs. Has been allowed Preserved meat &amp; glass of Port Wine for the last 3 days.</p> <p>Bowels inclined to be loose &amp; has occasional tenesmus &amp; singultus. <i>Pil Opii bis in die.</i> Diet as before.</p> <p>Had 4 dysenteric stools, a small quantity of purulent matter &amp; blood mixed with the stools. <i>Repetatur Pil Hydr c Pulv Rhei &amp; Pulv Ipecac bis in die</i></p> <p>Diet Arrow Root &amp; Rice</p> <p>Bowels loose – <i>omit<sup>r</sup> Pil Hydr etc Injections of Arrow Root &amp; Tinct Opii ter in die – Cap<sup>l</sup> Pil Opii ter in die</i></p> <p>Bowels quiet, occasional tenesmus &amp; singultus – this woman is very much emaciated &amp; debilitated – appetite for food quite lost, thirst great, Pulse 86 &amp; very weak.</p> <p>This woman was sent to the Colonial Hospital at Hobart Town, Van Diemen’s Land.</p>
PA301079 Dyspepsia	5	<p>Mary A. Porter 20 Convict 14<sup>th</sup> April 1849 At Sea Discharged 16<sup>th</sup> July 1849</p>	<p>This patient is exceedingly delicate in appearance &amp; has suffered most severely from Sea-sickness. She has at present constant pain in the epigastrium with occasional vomiting, bowels very irregular, generally constipated. Pulse small &amp; quick, Tongue clean &amp; pale. Appetite for food very capricious, sometimes very good. <i>Cataplasma Sinapis regioni stomachi, Haust Efferves p.r.n.</i></p>

		<p>17<sup>th</sup> April</p> <p>“ 18<sup>th</sup></p> <p>19<sup>th</sup> April</p> <p>23<sup>rd</sup> April</p> <p>May 10<sup>th</sup></p> <p>May 11<sup>th</sup></p> <p>May 12<sup>th</sup></p> <p>“ 13<sup>th</sup></p> <p>May 28<sup>th</sup></p> <p>May 29<sup>th</sup></p> <p>“ 30<sup>th</sup></p> <p>June 12<sup>th</sup></p> <p>“ 20<sup>th</sup></p> <p>“ 21<sup>st</sup></p> <p>“ 24<sup>th</sup></p> <p>July 1<sup>st</sup></p> <p>July 16<sup>th</sup></p>	<p>Slept badly last night &amp; vomited twice, bowels constipated, more pain in epigastrium. <i>Cap<sup>l</sup>. Ol. Ricini Zi ex cyath Aquæ Menth Pip.</i> Diet Arrow Root.</p> <p>Complains of extreme debility, pain of left side, occasional cough, no pain of epigastrium, no vomiting. Bowels moved twice. Arrow Root</p> <p>Much better to day, no pain, bowels quiet – <i>Cap<sup>l</sup>. Pil Quinnæ gr i in singulis, nocte maneque.</i></p> <p>Rice, Arrow Root, a glass of Port Wine</p> <p>Has continued to improve since the 19<sup>th</sup> &amp; to take <i>Pil Quinnæ gr i bis in die.</i> Bowels regular &amp; no vomiting – appetite for food increased. Rice etc Port Wine</p> <p><i>Omitt<sup>r</sup> Pil Quinnæ</i></p> <p>Has remained pretty well till last night when she had severe pain in the stomach which was very irritable &amp; unable to retain either solids or fluids. <i>Cataplasm Sinapis regioni stomachi</i> – Bowels inclined to be constipated</p> <p><i>Cap<sup>l</sup>. Op. Ricini Zi. Haust Efferves. pro re nata.</i></p> <p>Improved, some pain in region of stomach, no desire for food, great emaciation &amp; debility, thirst. Bowels moved gently by the <i>Ol Ricini.</i> Rice</p> <p>Vomited twice during the night, no pain, bowels regular, Contin<sup>r</sup> Haust Effervese</p> <p>Diet consists of Arrow Root &amp; Rice</p> <p>Stomach &amp; bowels quiet, no pain. Appetite pretty good. <i>Cap<sup>l</sup>. Pil Quinnæ gr i bis in die.</i> Rice Arrow Root, Port Wine</p> <p>Has remained comparatively well since the 13<sup>th</sup> inst. But to day, has nausea, anorexia Bowels relaxed, looks emaciated &amp; much debilitated. Pulse small &amp; quick. <i>Cap<sup>l</sup>. Mist Cretæ post singulus dejectionis liquidas.</i></p> <p>Arrow Root &amp; Rice</p> <p>Bowels quiet, in other respects the same. <i>Cap<sup>l</sup> Haust Effervese pro re nata</i></p> <p>Rice &amp; Arrow Root</p> <p>Much improved, appetite good. Preserved Soup &amp; glass of Port Wine</p> <p>Has been daily improving since the 30<sup>th</sup> ulto. Requires occasional laxative</p> <p>Loss of appetite, bowels constipated, tongue foul, nausea. Pulse small &amp; quick, pain of left side. <i>Cap<sup>l</sup>. Haust Rhei.</i></p> <p>Bowels greatly moved, in other respects improved no nausea.</p> <p>Improved, no appetite, tongue clean, bowels regular</p> <p><i>Cap<sup>l</sup>. Infus. Gentianæ Comp Z j bis in die</i></p> <p>Has continued to take the Infusion of Gentian &amp; her health appears to be now well re-established. <i>Omitt<sup>r</sup> Medicinæ</i></p> <p>Preserved Meat &amp; Port Wine</p> <p>Discharged from Sick List quite well.</p>
PA301080 Pleuritis	6	<p>Ellen McCarthy</p> <p>22 Convict</p> <p>15<sup>th</sup> April 1849</p> <p>At Sea</p> <p>Discharged</p> <p>29<sup>th</sup> April 1849</p>	<p>At 6 PM was suddenly seized with severe pain of right side of Thorax, greatly increased on inspiration, short, dry cough, great anxiety of countenance. Pulse small &amp; quick, face flushed, skin hot &amp; dry – Bowels constipated. <i>Venæsectio ad lb j</i></p> <p><i>Rx Antim Potass Tart gr 1/8 Aquæ Z j M. ft Haust 2<sup>ndis</sup> horis sumendus</i></p>

		<p>16<sup>th</sup> April</p> <p>17<sup>th</sup> April</p> <p>19<sup>th</sup> April</p> <p>Vespere</p> <p>20<sup>th</sup> April</p> <p>21<sup>st</sup> April</p> <p>29<sup>th</sup> April</p>	<p>Is free from pain, has slight cough. Pulse soft and quick Cap<sup>t</sup>. Ol. Ricini Zj</p> <p>Has slight cough, no pain. Bowels moved by the Ol Ricini. Low diet continued. No Medicine</p> <p>Return of pain, greatly increased on taking a deep inspiration, cough troublesome, thirst, Pulse quick &amp; hard. <i>Venæsectio ad lb j</i> <i>Sol Antim Potassio Tart. 2<sup>ndis</sup> horis</i></p> <p>Some pain but much relieved has been kept under the influence of Tartarized Antimony. Bowels regular. <i>Cont<sup>r</sup>. Sol Antim Potass Tart.</i></p> <p>No pain &amp; very slight cough, Pulse natural, skin moist, Bowels open. <i>Cont<sup>r</sup>. Sol Antim Potass Tart<sup>r</sup>. 3<sup>is</sup> horis</i> Arrow Root</p> <p>No pain or cough feels weak. Pulse &amp; skin natural <i>Cont<sup>r</sup> Sol Antim Potass Tart. 4<sup>is</sup> horis</i></p> <p>Low diet</p> <p>Has remained quite well since the 21<sup>st</sup> &amp; was discharged to day from the Sick List.</p>
Dyspepsia	7	<p>Maria Dunn Or Mary Holmes 36 Convict 16<sup>th</sup> April 1849 At Sea Discharged 28<sup>th</sup> July 1849</p> <p>30<sup>th</sup> April</p> <p>May 1<sup>st</sup></p> <p>May 2<sup>nd</sup></p> <p>May 20<sup>th</sup></p>	<p>This woman has suffered severely from Sea Sickness during the last 10 days &amp; is now exceedingly debilitated &amp; emaciated, cephalalgia, Pulse small &amp; quick- tongue pale, skin dry, anorexia. Bowels constipated. <i>Cap<sup>t</sup> Haust Rhei. Comp.</i> Rice &amp; Arrow Root</p> <p>29<sup>th</sup> April. Was much better after the operation of the Ol Ricini &amp; remains comparatively well until to day the 29<sup>th</sup> April - &amp; now complains of severe headach, increased on the slightest movement of the head, occasional pain in the region of the stomach, countenance pale &amp; anxious. Pulse 90 &amp; very weak, tongue clean &amp; pale, Bowels inclined to be constipated. <i>Cap<sup>t</sup>. Haust Rhei. Comp.</i> Cold applications to the head.</p> <p>Headach with nausea, in other respects the same – Rhubarb draught did not operate. <i>Cap<sup>t</sup>. Haust Effervese</i> <i>Cap<sup>t</sup>. Ol Ricini zj ex cyath Aquæ Menth Pip.</i> Eats scarcely anything</p> <p>Less nausea &amp; headach, some pain over region of the stomach, <i>Rx. Pil Hydrarg. gr ij Pulv Rhei gr ij Pulv. Ipecac gr i ℞ ft Pil mane nocteque sumenda. Vesicatorium regioni stomachi applicandum</i> Diet consists of Arrow Root or Rice</p> <p>Much better little or no headach, no nausea. Bowels regular, looks more cheerful. Ate an egg for breakfast. Preserved Soup for Dinner &amp; glass of Port Wine.</p> <p>Has remained in much the same state since last report, but to day has a return in an aggravated degree all the symptoms of her disease – viz headach, pain in epigastrium, bowels constipated, tongue furred, thirst, vomited twice last night, great depression of spirits. She omitted the <i>Pil Hydrarg. C.</i> On the 4<sup>th</sup> inst. Since when she has taken no medicine beyond an occasional laxative. <i>Cap<sup>t</sup>. Haust Effervese pro re nata</i> <i>Cataplasma Sinapis regioni stomachi</i> Vespere. <i>Rx Pil Rhei ℞i Tinct Rhei zij Aquæ Menth Pip Z ifs ℞ ft Haust st. s.</i></p>
PA301081			

		<p>May 21<sup>st</sup></p> <p>May 22<sup>nd</sup></p> <p>May 23<sup>rd</sup></p> <p>May 30<sup>th</sup></p> <p>May 31<sup>st</sup> June 4<sup>th</sup></p>	<p>Eats nothing, thirst urgent All symptoms relieved. <i>Cap<sup>f</sup> Pil Hydr ċ Pulv Rhei et Opii mane nocteque</i></p> <p>Improving. <i>Cont<sup>f</sup> Pil Hydr etc</i> Eats an egg for breakfast &amp; a little Arrow Root with Port Wine for dinner.</p> <p>Much improved, no headach, or nausea, looks cheerful, tongue clean, bowels regular, appetite for food pretty good, no thirst.</p> <p>Preserved Meat &amp; glass of Port Wine for dinner. Has remained well until to day &amp; has headach, pain in epigastrium, vomited several times yesterday. Bowels regular.</p> <p><i>Haust Effervese – et Cataplasma Sinapis regioni stomachi</i></p> <p>Symptoms relieved. <i>Rep<sup>f</sup> Pil Hydr etc</i> Continue to take Pil Hyd etc till the 3<sup>rd</sup> inst. &amp; is now pretty well.</p> <p>From 20<sup>th</sup> has remained well until to day &amp; has nausea &amp; headach. Bowels constipated. <i>Haust Rhei.</i></p> <p>This woman remains quite well for a few days &amp; then has a return of the symptoms of Dyspepsia &amp; in this state she continued until the time of her disembarkation on the 28<sup>th</sup> of July when she was in a delicate state of health.</p>
Prolapsus Uteri	8	<p>Anne Little 25 Convict 21<sup>st</sup> April 1849 At Sea Discharged 1<sup>st</sup> May</p> <p>2<sup>nd</sup> May</p> <p>3<sup>rd</sup> May</p> <p>5<sup>th</sup> May</p>	<p>This woman was confined a fortnight before embarkation on the 2<sup>nd</sup> April &amp; has been subject to prolapsus uteri since. Last night she complained of severe pain in the hypogastrium, resembling labour pains – on examination the uterus was found prolapsed &amp; making its appearance externally - the pains immediately ceased on the womb being returned to its natural position.</p> <p>Very little pain remaining. A Pessary introduced.</p> <p>No pain or inconvenience from Pessary. Horizontal position enjoined</p> <p>Uterus again prolapsed, having removed the Pessary yesterday morning – Uterus again placed in situ &amp; Pessary introduced – Horizontal position enjoined.</p> <p>This woman on her disembarkation on the 28<sup>th</sup> July was quite well as regards the Prolapsus Uteri.</p>
PA301082 Pleurodynia	9	<p>Johanna Lyhane 22 Convict 2<sup>nd</sup> May 1849 At Sea Discharged 11<sup>th</sup> May 1849 again Put on Sick List 16<sup>th</sup> May 1849 Discharged 6<sup>th</sup> July 1849 Put on Sick List a third time 12<sup>th</sup> July 1849 Discharged 18<sup>th</sup> July 1849</p>	<p>This woman enjoyed excellent health before embarkation, suffered much from sea-sickness during the first fortnight &amp; has now occasional acute pain in left side of Thorax, greatly increased on taking a deep inspiration, Pulse natural, skin cool &amp; moist, no thirst or symptoms of Pyrexia. The pain is aggravated on motion. Bowles inclined to be constipated, menstruates irregularly. <i>Cap<sup>f</sup>. Haust Rhei Comp. st.</i> Has occasional cough without expectoration.</p> <p>May 3<sup>rd</sup> Much the same, bowels moved several times - cough rather troublesome last night. Pain of side continues. <i>Cap<sup>f</sup>. Mist Pectoral tussi urgente.</i></p> <p>May 4<sup>th</sup> Pain very severe increased on making pressure &amp; on taking a deep inspiration, but still all symptoms of Pyrexia are absent. <i>Cap<sup>f</sup>. Mist Pectoral et Emplast Lyttæ lateri sinister applicandum.</i></p>

		<p>May 5<sup>th</sup></p> <p>May 6<sup>th</sup></p> <p>May 8<sup>th</sup></p> <p>May 11<sup>th</sup> “ 16<sup>th</sup></p> <p>May 17<sup>th</sup></p> <p>May 18<sup>th</sup></p> <p>May 19<sup>th</sup></p> <p>May 20<sup>th</sup></p> <p>May 21<sup>st</sup></p> <p>May 23<sup>rd</sup> June 1<sup>st</sup></p> <p>June 6<sup>th</sup></p> <p>July 18<sup>th</sup></p>	<p>Pain much relieved by the Blister, cough not very troublesome, has not menstruated for the last three months. <i>Rx. Mist Ferri Sesquichl. m x Aquæ Menth Pip Z ifs ℥fi Haust mane nocteque sumendus</i></p> <p>Improving, very little pain on taking a deep inspiration, slight cough – <i>Cont'. Haust Mist Ferri Sesquichl.</i> Bowels constipated. <i>Pil Colocynth. C. no ij.</i> Blistered surface continues to discharge.</p> <p>Health much improved – <i>Cont' Haust Tinct Ferri Sesquichl. bis in die</i></p> <p>Discharged from Sick List</p> <p>This woman again complaining of pain in left side of thorax, cough troublesome – no symptoms of Pyrexia. Bowels confined. <i>Cap' Ol Ricini Zj Mist. Pectoralis tussi urgente.</i></p> <p>Pain continues &amp; occasionally extends to the abdominal muscles. <i>Fomentatur lateri sinister thoracis et abdomini. Cont' Mist Pectoral.</i></p> <p>Much the same does not menstruate – <i>Cap' Haust Tinct Ferri Sesquichl. mane nocteque</i></p> <p>Pain of abdomen has disappeared, but that of left side continues &amp; is very severe on coughing &amp; making the slightest movement of the body – <i>Emplast Lyttæ parti dolente. Cont' Mist Pectoralis pro re nata.</i></p> <p>Pain much relieved by the Blister – <i>Contr. Haust Tinct. Ferri Sesquichl. Mist Pectoral p.r.n.</i> Her appetite is very capricious – Allowed when appetite is good Preserved meat &amp; glass of Port Wine.</p> <p>Scarcely any pain or cough – <i>Cont'. Haust Tinct Ferri Sesquichl. bis in die.</i></p> <p>Continues the above draught &amp; is daily improving.</p> <p>Has had occasional slight pain &amp; cough since the 23<sup>rd</sup> ulto. But is now quite free from any complaint – amenorrhœa continues.</p> <p>Discharged from the Sick List.</p> <p>This woman was placed for the third time on the Sick List to day the 12<sup>th</sup> July – having slight return of the Pleurodynia which speedily yielded to fomentations. Her general health has much improved during the last month Quite well Discharged from the Sick List.</p>
<p><b>PA301083</b> Phthisis Pulmonalis</p>	<p>10</p>	<p>Margaret Foley Age 26 2<sup>nd</sup> May 1849 At Sea Died At Sea 23<sup>rd</sup> of May 1849</p> <p>May 3<sup>rd</sup></p> <p>May 4<sup>th</sup></p>	<p>This woman when placed on the Sick List was exceedingly emaciated &amp; at night much troubled with cough, of which however she did not complain until to day – Says that she has been subject to cough for the last 3 years. Very little pain of chest, expectorates freely, sputa muco-purulent. Appetite for food very capricious. <i>Cap' Mist Pectoral tussi urgente. Vesicatorium pectori applicandum.</i></p> <p>Arrow Root with a glass of Port Wine for dinner</p> <p>Slept badly last night, cough having been very troublesome, some pain on taking a deep inspiration, Pulse small &amp; quick, Bowels constipated. Respiratory murmur scarcely audible in the left lung. Blistered surface discharging. <i>Cont'. Mist Pectoral tussi urgent. Cap'. Ol Ricini zvj Aquæ Zifs. Rx Tinct Opii m xx Aquæ Zj ℥fi Haust. h.s.s.</i></p> <p>Slept well last night &amp; is much more easy, less cough &amp; expectoration which is now almost entirely purulent.</p>

PA301084	May 5 <sup>th</sup>	<p><i>Cont<sup>r</sup>. Mist Pectoral. Ol Ricini</i> operated twice <i>Continuatur Haust Anodynus h.s.</i> Much improve, less cough &amp; expectoration, is however exceedingly weak &amp; emaciated.</p> <p><i>Cont<sup>r</sup>. Mist Pectoralis et Haust Anodynus h.s.</i> Eats a little Preserved Meat &amp; has a glass of Port Wine daily – an egg every morning for breakfast.</p>
	May 6 <sup>th</sup>	<p>Blistered surface nearly healed. Cough not very troublesome. <i>Cont<sup>r</sup>. Mist Pectoral. Haust Anodynus. h.s.</i> Diet consists of Preserved Meat &amp; a glass of Porter</p>
	May 7 <sup>th</sup>	<p>Able to sit up to day, very little cough &amp; expectoration, less debility. Bowels inclined to be constipated. <i>Ol Ricini z vj ex cyath Aquæ Menth Pip. Omit<sup>t</sup> Haust Anodynus</i></p>
	May 8 <sup>th</sup>	<p>The same Diet as yesterday Rather more cough, pain on taking a deep inspiration, feels much depressed in spirits, &amp; is daily becoming more emaciated, appetite for food continues good. Pulse 90 &amp; very small, Bowels regular. <i>Emplast Lyttæ p.d.</i></p>
	May 9 <sup>th</sup>	<p><i>Cont<sup>r</sup>. Mist Pectoral.</i> Slept very badly last night, pain &amp; cough less troublesome, expectorates freely. Is not able to leave her bed. <i>Cont<sup>r</sup> Mist Pectoralis. Haust Anodynus hora somni</i> Blistered surface dressed To day ate some fowl &amp; drank half a tumbler of Porter. An egg for breakfast.</p>
	May 10 <sup>th</sup>	<p>Cough more troublesome, expectorates pure pus, no pain. Blistered surface discharges pus. <i>Cont<sup>r</sup> Mist Pectoralis et Haust Anodynus.</i> Bowels regular. Pulse 96 &amp; very weak.</p>
	May 11 <sup>th</sup>	<p>Slept well, but this morning cough is very troublesome, more pain in left side of Thorax. Seems aware that she cannot live long.</p>
	May 12 <sup>th</sup>	<p><i>Cont<sup>r</sup> Mist Pectoralis et Haust Anodynus.</i> Slept very well &amp; is more cheerful, free from pain, very little cough. Bowels regular. Pulse 100 &amp; very small, thirst. <i>Lemonade pro potu ordinario</i></p>
	May 13 <sup>th</sup>	<p><i>Cont<sup>r</sup> Mist Pectoralis et Haust Anodynus h.s.</i> Diet consists of an egg for breakfast, Fowl or Preserved Meat &amp; small quantity of Porter for dinner.</p>
	May 14 <sup>th</sup>	<p>Remains in much the same condition. Continue Medicine &amp; Diet. Blistered surface healed. Rather more pain to day than she has had for some time, cough rather troublesome, is now, exceedingly emaciated, &amp; there is complete prostration of strength. Appetite for food continues pretty good, less thirst. Pulse very small &amp; quick. Bowels regular.</p>
	May 15 <sup>th</sup>	<p><i>Cap<sup>t</sup>. Mist Pectoralis tussi urgente</i> <i>Haust Anodynus hora somni</i> Diet as before. Sleeps well, but is disturbed early morning with a severe paroxysm of cough &amp; expectorates a large quantity of purulent matter. Cavernous respiration can be distinctly heard on right side of Thorax.</p>
	May 16 <sup>th</sup>	<p>Continue Medicine &amp; Diet A good night's rest. Cough is now very troublesome &amp; expectoration profuse. Pulse 100 &amp; small, little or no pain, respiration hurried. <i>Continuatur Mist Pectoralis et</i></p>

		<p>May 17<sup>th</sup></p> <p>May 18<sup>th</sup></p> <p>May 19<sup>th</sup></p> <p>May 20<sup>th</sup></p> <p>May 21<sup>st</sup></p> <p>May 22<sup>nd</sup></p> <p>May 23<sup>rd</sup></p>	<p><i>Haust Anodynus</i> – Diet as before</p> <p>Sleeps well with the Anodyne draught. Bowels regular. Cough &amp; expectoration as yesterday. Continue Medicine. Diet as before</p> <p>Very restless last night, much troubled with cough, had several paroxysms of severe pain during the night. Pulse 110 &amp; weak. Thirst. Appetite for food less. Ate a small piece of Fowl &amp; drank half a glass of Port Wine for dinner – an egg for breakfast.</p> <p>Slept pretty well. Strength of Anodyne increased. Continue <i>Mist Pectoralis</i></p> <p>Diet as before</p> <p>Remains in same state, <i>Continur Haust Anodynus h.s. Tinct. Opii m xxx ad Aquæ Zj</i></p> <p>Strength completely prostrated, cough &amp; expectoration less, Bowels regular, <i>Continur Mist Pectoralis &amp; Haust Anodynus</i></p> <p>Fowl &amp; Port Wine for Dinner</p> <p>Looks much worse &amp; scarcely able to articulate, quite conscious, very little cough or expectoration. Pulse scarcely perceptible</p> <p>Ate nothing today</p> <p>Vespere. Bowels moved 3 times since noon to day. <i>Cap<sup>l</sup> Mist Cretæ Zj post singulus dejectiones. Omit<sup>r</sup> Mist Pectoralis et Haust Anodynus</i></p> <p>1PM Is evidently sinking, quite conscious</p> <p>Margaret Foley died at 5 AM.</p>
Colica	11	<p>Mary Connelly 27 10<sup>th</sup> May 1849 At Sea Discharged 18<sup>th</sup> May 1849</p> <p>Vespere</p> <p>May 11<sup>th</sup></p> <p>May 12<sup>th</sup></p> <p>May 15<sup>th</sup></p> <p>May 18<sup>th</sup></p>	<p>Called to see this woman at 4 AM having been suddenly seized with severe abdominal pain, obstinate constipation, bowels not having been moved for last 6 days. Pulse quick &amp; full.</p> <p>Hot fomentations to the abdomen <i>et postea Liniment Anodynum abdomini infricand</i></p> <p><i>Rx. Ext. Colocynth Comp gr viij Ol Crotonis g<sup>tt</sup> j ℞ ft Pil ij st.s.</i></p> <p>Bowels not moved, occasional sever pain in the abdomen. <i>Continuatur Foment et Liniment Anodynum.</i></p> <p><i>Rx. Magnes Sulph. Zj Ol Ricini Zj Decoct Hordei lb j M ft Enema statim injiciendum</i></p> <p>Bowels slightly moved this morning, but is not entirely free from pain, which is not increased on making pressure. <i>Contin<sup>r</sup> Foment et Liniment Anodynum.</i> Low Diet</p> <p><i>Rx. Pulv. Jalapa Comp. Zj Aquæ Ment Pip Zifs ℞ ft Haust h.s.s.</i></p> <p>Vespere. Much relieved having had two copious stools since morning. Low Diet</p> <p>Free from pain. No medicine</p> <p>Low Diet</p> <p>Bowels inclined to be constipated, slight return of abdominal pain, which is relieved on making pressure. <i>Cap<sup>l</sup>. Pulv. Jalap. Comp zj Aquæ Ment Pip Zifs ℞ ft Haust. st.s.</i> Low Diet</p> <p>Has had no symptoms of Colic since the 15<sup>th</sup>. Bowels regular. Discharged from the Sick List.</p>
PA301085			

Pleuritis	12	<p>Mary Mulhern 23. May 15<sup>th</sup> 1849 At Sea Discharged 21<sup>st</sup> May 1849</p> <p>May 16<sup>th</sup></p> <p>May 17<sup>th</sup></p> <p>May 18<sup>th</sup></p> <p>May 21<sup>st</sup></p>	<p>This woman is of a very full habit of body. Was seized suddenly this afternoon with severe pain of the right side of the Thorax. Pain greatly increased at each inspiration, countenance flushed &amp; anxious. Pulse quick &amp; hard, thirst. Bowels rather constipated. Nausea <i>Rx Pulv. Ipecac ꝑi Antim Potass Tart<sup>r</sup> gr i Aquæ Zj ℥ ft Haust Emeticus st.s</i> Vespere. Emetic operated well, pain continues, <i>Venæsectio Extrahatur sanguis brachio ad deliquium animi. Cap<sup>t</sup> Hydr Chloridi gr v et postea. Infus. Sennæ Comp. Zij.</i> Low Diet Slept well, very little pain &amp; can take a deep inspiration without causing much pain. Pulse 76 &amp; soft, skin moist &amp; soft. Bowels freely purged. <i>Rx. Antim Potass Tart<sup>r</sup> gr ¼ Aquæ Zj ℥ ft Haust. 2<sup>ndis</sup> horis sumendus, ant usque ad nauseam .</i> Low Diet No pain or cough, respiration natural, no pyrexia. Bowels regular: kept in a constant state of Nausea yesterday. <i>Cont<sup>r</sup>. Haust Antim Potass Tart<sup>r</sup> &amp; Low Diet</i> No symptoms of Pleuritis. <i>Discont<sup>r</sup> Haust Antim Potass Tart<sup>r</sup>.</i> Preserved Soup Discharged from the Sick List</p>
<p>Palpitatio Cordis</p> <p>PA301086</p>	13	<p>Cath<sup>c</sup> Reilly 20. May 16<sup>th</sup> 1849 At Sea Discharged 6<sup>th</sup> June 1849</p> <p>May 17<sup>th</sup></p> <p>May 18<sup>th</sup></p> <p>May 19<sup>th</sup></p> <p>May 20<sup>th</sup></p> <p>May 21<sup>st</sup></p> <p>May 22<sup>nd</sup></p> <p>June 6<sup>th</sup></p>	<p>This is an exceedingly delicate woman &amp; has suffered from sea sickness severely, menstruates very irregularly. Has occasionally very severe pain in the region of the heart, which organ palpitates violently on making slightest exertion. Pulse 100 &amp; very feeble, countenance anxious, lips pale, slight cough, no expectoration. Bowels rather confined <i>Cap<sup>t</sup> Ol Ricini zvj Aquæ Zifs st.</i> Much the same. Bowels moved twice by the Ol. Ricini. Cough troublesome – <i>Cap<sup>t</sup> Mist Pectoralis tussi urgente. Visicator. Regioni cordis applic.</i> Low Diet Does not sleep well at night, being very restless and much disturbed with cough, no expectoration. Blistered surface dressed simply. <i>Rx. Tinct Digital m v Tinct Scillæ m ċ Mucilag Acac. Zj ℥ ft Haust. ter in die sumendus.</i> Bowels regular. Low Diet No sleep last night, less cough &amp; palpitations of the heart. Blister dressed. <i>Cont<sup>r</sup>. Haust Tinct. Digital ċ Tinct Squillæ.</i> Vespere. Wishes to have a draught to procure sleep – <i>Rx. Tinct Opii m xx Aquæ Zj m ft Haust. h.s.</i> Slept well, less cough &amp; palpitation. <i>Omitt<sup>r</sup> Haust – Tinct Digitalis – Repetatur Haust Anodynus h.s.</i> Blistered surface healed. Appetite pretty good. Preserved Meat for Dinner. Very little cough &amp; occasional palpitation of the heart. <i>Cap<sup>t</sup> Mist Pectoralis. Omitt<sup>r</sup> Haust Anodynus.</i> Bowels rather confined <i>Ol. Ricini Zj</i> Greatly improved, no irregular action of the heart, no cough. <i>Omitt<sup>r</sup> medicina.</i> Preserved Meat. A glass of Porter daily. Has remained quite well since the 22<sup>nd</sup> ulto. &amp; to day was discharged from Sick List.</p>



<p>Fistula in Ano</p> <p>PA301087</p>	<p>14</p>	<p>Catherine McDonald 40. may 20<sup>th</sup> 1849 Discharged 2<sup>nd</sup> July 1849</p> <p>May 22<sup>nd</sup></p> <p>May 24<sup>th</sup></p> <p>May 26<sup>th</sup></p> <p>May 27<sup>th</sup></p> <p>May 28<sup>th</sup></p> <p>June 3<sup>rd</sup></p> <p>June 4<sup>th</sup></p> <p>June 10<sup>th</sup></p> <p>June 16<sup>th</sup></p> <p>June 20<sup>th</sup></p> <p>June 26<sup>th</sup></p> <p>June 30<sup>th</sup> July 2<sup>nd</sup>.</p>	<p>This woman complains to day of pain of the abdomen, bowels loose, passes a considerable quantity of blood, occasional even griping flatus. <i>Cap<sup>t</sup> Ol. Ricini Zj</i> May 21<sup>st</sup>. Pain much relieved, still passes blood. <i>Cap<sup>t</sup>. Pil Opii gr i in singulus bis in die.</i> Diet consists of Arrow Root etc Is improving, less pain, 2 stools during the last 24 hours. <i>Continue Pil Opii bis in die.</i> Remained well yesterday, this evening complained of pain in the hypogastrium &amp; has vomited several times. Says that she has not made water for the last 24 hours. Catheter passed &amp; about lb j of urine drawn off. <i>Cap<sup>t</sup>. Haust Efferves p.r.n.</i> At midnight called to see her, occasionally delirious. Pulse small &amp; quick, countenance anxious. Bowels moved twice since 6 PM. Stomach irritable, pain at scrobiculus cordis &amp; in the hypogastrium – introduced catheter &amp; drew off about a pint of urine. <i>Vesicular scrobiculus cordis. Cap<sup>t</sup> Pil Opii gr i</i> Slept well after cathetuisim. Stomach still irritable – <i>Continuatur Haust Efferves.</i> Bowels quiet – Eats very little. Abstained from solid food &amp; to day stomach is quiet. No Medicine Has remained pretty well since the 28<sup>th</sup> ulto. has pain of the chest &amp; cough. <i>Cap<sup>t</sup> Mist Pectoralis. Vesicator pectori applicat<sup>m</sup>.</i> Says that she has hæmorrhoids – on examination found a considerable swelling on the left nates with redness of the integuments. The tumor on being laid open discharged several ounces of exceedingly fetid pus. This woman until to day, had never given a hint, of an abscess forming – although for the last week she now says, she had felt more or less pain in the nates &amp; a fistula opening into the rectum. Bowels regular, no irritability of stomach, no pain of chest. Director introduced into the abscess &amp; the integuments divided to the extent of 4 inches – a small tent introduced. The abscess has daily lessened &amp; now discharges a small quantity of purulent matter only. The communication with the gut is nearly two inches from the anus. A weak solution <i>Copri Sulph</i> injected. Very little discharge from abscess – appears to be healing from the bottom &amp; external wound daily diminishing – <i>Continuatur Injunctio Copri S.</i> Bowels inclined to be relaxed – <i>Cap<sup>t</sup>. Pil Opii gr i.</i> Appetite good &amp; general health much improved during the last week. No pain &amp; very little discharge of healthy pus. <i>Sol. Argent Nitrat gr i ad Aquæ zi per injictioni</i> – Bowels regular. Abscess now very small, probe does not pass the eighth of an inch. Scarcely any discharge. Dressed simply. Abscess quite healed Discharged from the Sick L:ist</p>
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<p>Vulnus et Concussi Cerebri</p> <p>PA301088</p>	<p>15</p>	<p>Mary Hughes 19. June 10<sup>th</sup> 1849 At Sea 16<sup>th</sup> June 1849 3 PM 6 PM June 11<sup>th</sup> June 12<sup>th</sup> June 13<sup>th</sup> June 14<sup>th</sup> “ 15<sup>th</sup> June 16<sup>th</sup> July 8<sup>th</sup> July 9<sup>th</sup> July 10<sup>th</sup> July 13<sup>th</sup> July 14<sup>th</sup> July 22<sup>nd</sup></p>	<p>This woman was struck over the summit of the head with a wooden bowl. On examination a small contused wound with considerable surrounding puffiness was observed. No fracture of the cranium – about an hour after the injury she became insensible, violent throbbing of the temporal arteries &amp;c limbs rigid – pupil dilated. <i>Venæsectio ad lb j</i> Another &amp; more severe attack of rigidity of all the voluntary muscles, total insensibility – tumultuous action of the carotid arteries – Pulse very full &amp; frequent. Bled to about 8 ounces – <i>Lotio Frigida capiti</i> – She became quite conscious after the bleeding &amp; the rigidity of muscles relaxed – <i>Cap<sup>i</sup>. Hydr. Chlor gr v st.</i> June 11<sup>th</sup> Had two paroxysms of insensibility &amp; rigidity almost titanic of the voluntary muscles. <i>Cucurbitulæ Cruentæ temporibus</i> – <i>Continuatur Lotio Frigida</i> – <i>Cap<sup>i</sup>. Pulv Jalap Comp z j Aquæ Ment P. Z ifs</i> Whilst the blood was oozing from the temples, recovered from insensibility etc. June 12<sup>th</sup> To Day complains of oppression at the chest. Respiration hurried, irregular action of the heart – no cephalalgia <i>Cucurbitulæ Cruentæ regioni cordis</i> Bowels freely moved by the purgative medicine <i>Vesicator pectori applicandum</i> <i>Cap<sup>i</sup>. Hydr Chlorid gr i 3tis horis s.</i> Low Diet June 13<sup>th</sup> Blister dressed – no pain of head or chest. Pulse 70. Soft. <i>Cont<sup>r</sup>. Pil Calomel gr i in singulis 4<sup>tis</sup> horis</i> Vespere. Mouth a little sore – <i>omit<sup>r</sup> Pil Calomel</i> Low Diet June 14<sup>th</sup> Remains well “ 15<sup>th</sup> No return of symptoms. Appetite good. Preserved Meat etc June 16<sup>th</sup> Quite well. This woman had a return of headach to day the 7<sup>th</sup> July. <i>Cucurbitulæ Cruentæ temporibus.</i> <i>Cap<sup>i</sup>. Pulv. Jalap Camp z j. Lotion frijida capiti.</i> Low Diet July 8<sup>th</sup> Occasional headach &amp; oppression of the chest. Bowels purged by the <i>Pulv Jalap. Co. Continuatur Lotio frijida Capiti. Emplast Lyttæ pectori.</i> Low Diet. July 9<sup>th</sup> Much better, slept well, no headach or oppression at the heart Pulse natural. Blister dressed. Rest enjoined – Low Diet July 10<sup>th</sup> Slight occasional headach – <i>Continuatur Lotio frijida</i> – Low Diet July 13<sup>th</sup> Some oppression at the heart. Pulse irregular, depression of spirits, headach. Bowels constipated. <i>Cap<sup>i</sup>. Pulv. Jalap. Comp. z j ex cyath Aquæ Ment Pip. Lotio frigid capiti.</i> Blistered surface continues to discharge – dressed simply. July 14<sup>th</sup> Much better to day, &amp; complains merely of debility. <i>Omitt<sup>r</sup> Medicina</i> July 22<sup>nd</sup> Has had no complaint for the last 8 days &amp; to day was discharged from the Sick List.</p>
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<p>Dysentery</p> <p>PA301089</p>	<p>16</p>	<p>Ellen Gallavan 24 June 6<sup>th</sup> 1849 At Sea 24<sup>th</sup> July 1849 Hospital at Hobart Town June 6<sup>th</sup></p> <p>June 7<sup>th</sup></p> <p>June 8<sup>th</sup></p> <p>June 9<sup>th</sup></p> <p>June 10<sup>th</sup></p> <p>June 11<sup>th</sup></p> <p>June 12<sup>th</sup></p> <p>June 18<sup>th</sup></p> <p>June 14<sup>th</sup></p> <p>June 15<sup>th</sup></p> <p>June 16<sup>th</sup></p>	<p>At 6 PM was attacked with violent colic, obstinate constipation, twisting pain about the naval, has vomited twice, countenance anxious. Pulse small &amp; quick, pain of abdomen relieved by pressure.</p> <p><i>Fomentatio calida abdomini applicanda. Capiat Ol Ricini zj Tinct Opii m xx Aquæ Ment Pip Zij</i></p> <p>11 PM..Pain much relieved by the fomentation. Bowels not moved, <i>Repetatur Ol Ricini et Tinct Opii. Fomentatio abdomini applicanda</i></p> <p>Much relieved this morning &amp; slept well from 2 AM. Bowels moved twice.</p> <p>7 PM. Return of the colic. <i>Cap<sup>t</sup>. Pil Opii gr i et repetatur si opus sit. Contin<sup>r</sup> Fomenatio</i></p> <p>Slept well, no return of pain. Bowels not moved to day. <i>Cap<sup>t</sup>. Pil Colocynth C. m vij et postea. Sol Magnes. Sulph.</i> Low Diet</p> <p>Bowels purged freely, no pain</p> <p>Low Diet</p> <p>Had great pain of the abdomen for several hours last night, relieved by pressure- great pain in the fundament, oppression of the chest. Pulse irregular &amp; small, great anxiety of countenance, <i>Cataplasma Sinapis abdomini. Suppositorium Opii. Cucurbitulæ Cruentæ regioni cordis.</i></p> <p>Vespere. Much relieved, no oppression of the heart, less pain of fundament. Pulse quiet.</p> <p>Has great pain in the fundament, greatly increased on moving the body, occasional pain of the abdomen, resembling labour pains, Hot fomentations to the fundament. <i>Cap<sup>t</sup>. Ol Ricini Zj.</i> had no motion yesterday, countenance anxious. Pulse small &amp; quick, thirst</p> <p>Vespere. Much relieved by the fomentations. Bowels Moved once by the <i>Ol Ricini</i>. Stools quite natural.</p> <p>Slept well, bowels quiet, no abdominal pain, occasional pain of fundament.</p> <p>Return in a slight degree of pain in the abdomen &amp; fundament, but paroxysms less severe than they were a few days since, looks weak. Pulse quiet, skin rather hot &amp; dry. <i>Epithema Terebinth abdomini. Suppositorium Opii.</i> Stomach inclined to reject its contents, <i>Cap<sup>t</sup> Haust Efferves p.r.n.</i></p> <p>Last night severe pain of the abdomen, not increased by pressure, pain occasionally very severe in fundament.</p> <p><i>Rx. Tinct. Opii m xi Decoct Hordie lb j ℞ ft Enema statim administro</i></p> <p>Vespere. Has felt much easier since the enema, but then an occasional paroxysm of pain.</p> <p>Bowels inclined to be loose, small quantity of purulent matter mixed with blood passed by stool. <i>Repetatur Enema Tinct Opii et Decoct Hordie ter in die.</i></p> <p>Vespere Much relieved by the Enemata</p> <p>Bowels quiet until 4 AM. Has now violent tenesmus, passing a very small quantity of feculent matter mixed with blood &amp; pus. Pulse small 80, thirst, countenance anxious, occasional severe abdominal pain.</p> <p><i>Rx. Calomelanos gr i Opii grfs ℞ ft Pil. 3<sup>tis</sup> horis sumenda. Epithema Terebinth abdomini</i></p> <p>Diet consists principally of Arrow Root. <i>Decoct Hordie pro potu ordinario</i></p>
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PA301090	June 17 <sup>th</sup>	<p>Very little discharge of blood &amp; pus with the stools which are more natural to day, less tenesmus &amp; tormina. <i>Contin<sup>r</sup> Pil Colomel ĉ Opii</i>. Diet etc as yesterday.</p> <p>Vespere. Pain of fundament very severe this evening, no abdominal pain. Occasional pain of the Sacrum. <i>Epithema Terebinth dorso. Repetatur Enema Tinct Opii et Decoct Hordie</i></p>
	June 18 <sup>th</sup>	<p>Bowels very relaxed, but motions unmixed with blood or pus, very little tenesmus or tormina. Stools nearly natural. Has passed no water since yesterday morning. Catheter passed &amp; about a pint of urine removed.</p> <p>Vespere. <i>Omitt<sup>r</sup> Pil Calomel ĉ Opii</i>. Stools quite natural, has had 3 motions since 10 AM. No pain</p>
	June 19 <sup>th</sup>	<p>Several loose, natural motions during the night no blood or pus in stools, less pain at stool, slight occasional pain at fundament &amp; sacrum, no pain of abdomen, occasional nausea, face always expressive of anxiety, very much debilitated &amp; emaciated, tongue dry &amp; red, thirst. Pulse small &amp; 80. <i>Cap<sup>t</sup> Pil Opii gr i Haust Efferves pro re nata</i>. Eats an egg for breakfast. Arrow Root for dinner. <i>Decoct Hordie pro potu ordinario</i></p>
	June 20 <sup>th</sup>	<p>2 motions during the night tinged with blood, no pus, pain occasionally very sever in fundament &amp; sacrum. Makes water, scalding pain, tongue clean, less thirst – appetite for food pretty good – <i>Admistratur Enema Tinct Opii m xxx Decoct Hordie lb j et repetatur vespere si opus sit</i></p>
	June 21 <sup>st</sup>	<p>Much easier to day, only one motion during last 12 hours – slight occasional pain of sacrum. No medicine</p>
	June 22 <sup>nd</sup>	<p>Had 2 motions during the night &amp; 2 this morning – much pain of abdomen, fundament &amp; sacrum, stools occasionally passed unconsciously <i>Cap<sup>t</sup> Pil Opii gr i ter in die _ Liniment Anodynum dorso infricandum. Epithema Terebinth abdomini</i></p>
	June 23 <sup>rd</sup>	<p>Says she feels much better to day, less depression of spirits, is however much emaciated &amp; debilitated. Pulse small, 84, not much thirst, appetite pretty good. One motion only, reddish &amp; without pain.</p> <p>Preserved meat</p>
	June 24 <sup>th</sup>	<p>Vespere. Continue to remain easy</p> <p>Required the catheter to be passed, not having made water for the last 36 hours. Bowels remain quiet occasional pain. Eats an egg for breakfast. Preserved Meat &amp; a glass of Port Wine at dinner. No medicine</p>
	June 25 <sup>th</sup>	<p>Remains the same as yesterday.</p>
	June 28 <sup>th</sup>	<p>Improving daily, bowels regular, slight occasional abdominal pain. Appetite pretty good.</p> <p>Preserved Meat &amp; glass of Port Wine daily.</p>
	July 1 <sup>st</sup>	<p>Has been gaining strength lately, bowels regular, no pain. Continue Preserved Meat &amp; glass of Port Wine. Is still much emaciated &amp; debilitated</p>
	July 10 <sup>th</sup>	<p>Last night vomited twice, bowels have been quite regular till to day for the last fortnight, had 3 loose motions tinged with blood since 6 AM, occasional pain of abdomen, fundament &amp; back. <i>Cataplasm Sinapis abdomini, fomentatur calida to the fundament – Liniment Anodyne sacro.</i></p> <p><i>Cap<sup>t</sup> Pil Opii gr i in singulis ter in die</i>  <i>Rx Tinct. Opii m x ĉ Decoct Hordie lb j M st Enema bis in die adminis<sup>m</sup></i>. Diet to consist of Farinaceous food –</p>

		<p>July 11<sup>th</sup></p> <p>July 12<sup>th</sup></p> <p>July 13<sup>th</sup></p> <p>July 14<sup>th</sup></p> <p>July 20<sup>th</sup></p> <p>July 24<sup>th</sup></p>	<p>Decoct Hordie pro potu ordinario Somewhat better, less pain, slept well, 3 motions during last 24 hours. <i>Continuatur Foment. Cap<sup>i</sup> Pil Opii bis in die – Supposit Opii</i> Is greatly debilitated. Eats an egg for breakfast &amp; a piece of mutton or other meat at dinner.</p> <p>Bowels quiet – little or no pain, great anxiety of countenance, great emaciation &amp; debility</p> <p>Remains easy – bowels moved once last 24 hours. Appetite for food not so good, occasional thirst, tongue red &amp; dry. <i>Rx. Pil Hydrarg gr ii Extr. Hyoscyami gr ij. Pulv. Ipecac gr i ℥ ft Pil. mane nocteque sumenda</i></p> <p>Remains the same s yesterday. <i>Continue Pil Hydrarg etc bis in die.</i> Fowl &amp; glass of Port Wine for dinner.</p> <p>For the last 6 days there has been no change in symptoms. Omitted <i>Pil Hydrarg etc</i> on the 17<sup>th</sup> inst. Bowels are now quite regular, but has occasional abdominal &amp; other pains, occasional nausea – no vomiting, debility &amp; emaciation daily increasing.</p> <p>This woman was to day sent to the Colonial Hospital at Hobart Town, Van Diemen's Land being excessively debilitated &amp; emaciated.</p>
<p>Dysentaria Parturition With Rupture of the Perineum</p> <p>PA301091</p>	17	<p>Maria Rutlege 36. July 4<sup>th</sup> 1849 Sent to Hospital Hobart Town 24<sup>th</sup> July 1849</p> <p>July 5<sup>th</sup></p> <p>July 6<sup>th</sup></p> <p>July 7<sup>th</sup></p> <p>July 8<sup>th</sup></p> <p>July 9<sup>th</sup></p>	<p>This woman complained a week ago of obstinate constipation. Took <i>Ol. Ricini Zj ex cyath Aquæ Menth Pip.</i> This not operating. Took 2 pills composed of <i>Pil Hydrarg Hyoscyamus &amp; Ipecac.</i> &amp; the following morning <i>Ol. Ricini Zj.</i> This latter dose operated 4 times. This woman expects her confinement to take place in about a fortnight. Removed to the Hospital &amp; put on the Sick List to day July 4<sup>th</sup>.</p> <p>Bowels quiet, Vespere. Pain of the abdomen, tenesmus, passed two mucous motions mixed with blood, nausea, looks pale, countenance anxious, pulse small.</p> <p>Had 4 motions during the night, tenesmus, stools mixed with blood &amp; pus, tongue red &amp; furred, thirst. <i>Cap<sup>i</sup> Pil Opii gr i Rx. Tinct Opii m xxx Decoct Hordie lb j ℥ ft Enema ter in die injiciendum.</i> Arrow Root</p> <p>Violent tenesmus, had 5 loose mucous motions during the last 24 hours, passed blood &amp; pus. Nausea, tongue dry &amp; furred, thirst. <i>Cataplasma Sinapis abdomini – Continuatur Enemata Tinct Opii et Decoct Hordie ter in die</i></p> <p>8<sup>th</sup>Bowels very loose &amp; she complains of great prostration of strength, pallid countenance, which is expressive of great anxiety- made an examination per vaginam, as uteri slightly dilated. Vagina hot without the least secretion, being dry, &amp; hot to the touch. 9 PM. Delivered of a male child.</p> <p>Passes a small quantity of feculent matter mixed with blood, no pain. <i>Continantur Enemata Tinct Opii et Decoct Hordie ter in die. Supposit. Opii.</i> This woman was delivered of a male child at 9 o'clock, feeble labour pains commencing at about 6 PM at 6.30 made an examination per vaginam &amp; found the head of the child descending into the vagina at 7 PM the membranes broke &amp; the liquor amni escaped. From this time till 9 PM there was scarcely any action of the uterus, but imperceptibly</p>

<p>PA301092</p>		<p>July 10<sup>th</sup></p> <p>July 11<sup>th</sup></p> <p>July 12<sup>th</sup></p> <p>July 13<sup>th</sup></p> <p>July 14<sup>th</sup></p> <p>July 15<sup>th</sup></p>	<p>the child gradually descended &amp; was born alive at 9 PM. The Perineum was supported during the protracted birth of the child. To day the 9<sup>th</sup> she is exceedingly debilitated, face pallid, pulse small &amp; quick, bowels very loose &amp; stools passed unconsciously, no lochial discharge. Complains of pain in the perineum – on examining the seat of pain, found slight rupture extending from the vagina for about an inch – redness of the surrounding integuments, breasts flaccid, no secretion of milk. Child doing well. Hot fomentations to the perineum, which are to be frequently repeated. The Placenta was retained 7 hours not coming away till 4 AM of to day the 9<sup>th</sup> July. Child given to one of the Nurses.</p> <p>Bowels still very loose, &amp; uninfluenced by <i>the opiate Pills &amp; injections of Tinct Opii &amp; Decoct Hordie. Cap<sup>i</sup>. Mist Cretæ Zi post singulus dejections liquidas</i>, stools unmixed with blood or pus. Integuments of perineum inflamed – labia red &amp; swollen. <i>Continuatur Fomentations</i>. No lochial discharge. Breasts remain flaccid, no milk. One of the nurses has charge of the child.</p> <p>Slept well, an appearance of the lochia, the labia pudenda much swollen &amp; painful, bowels not so relaxed. <i>Continu<sup>r</sup> Mist Cretæ. C.</i> Ate an egg this morning. Preserved Meat. Countenance anxious, face pallid, Pulse small &amp; quick, great debility – A small quantity of Port Wine from time to time, sometimes with Arrow Root. <i>Continantur Fomentationes</i></p> <p>Somewhat stronger, slept at intervals, Pulse fuller, bowels less frequently disturbed – <i>Contin<sup>r</sup> Mist Cretæ Comp. p.r.n. Contin<sup>r</sup> Fomentation s perineo etc</i> Eats Arrow Root with Port Wine. An egg for breakfast. Child doing well, breasts somewhat fuller, no milk or secretion from the vagina, has occasional hiccough</p> <p>Less relaxation of the bowels, no appearance of the Lochia, remains exceedingly debilitated, occasional slight hiccough, nausea. <i>Continua Mist Cretæ Comp.</i> Very uneasy secretion in perineum &amp; occasional severe pain – integuments of labia &amp; perineum look as though they would slough. Continue Fomentations. Child doing well.</p> <p>Diet as before</p> <p>Restless during the night, very little discharge from the bowels – vagina dry &amp; hot. In better spirit to day – appetite good, integuments of perineum of a dark red colour, no lochia, no secretion of milk, but mammae fuller. great debility. Pulse 90, but fuller than yesterday. Appetite pretty good,. Has something daily from the Cabin table. Port Wine or glass of Porter. <i>Continuatur Fomentations calidae</i></p> <p>Child not so well, having diarrhoea. <i>Cap<sup>i</sup> Hydr. C. Cretæ gr i lacchari gr iij ꝯ ft Pulv. bis in die – s.</i></p> <p>Much better to day. Breasts pretty full, secretion of milk, no lochial discharge. Stiffness &amp; pain of perineum, integuments of perineum &amp; labia pudendi will evidently slough. Continue fomentations. Bowls quiet – appetite good – allowed to eat what she fancies. Is gaining strength.</p> <p>Child no better, bowels quiet, but it is evident infant will not live long.</p>
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		July 16 <sup>th</sup>	Improving, did not sleep well however had 2 natural motions during the night. <i>Cap<sup>t</sup> Mist Cretæ Comp. p.r.n.</i> no lochia – milk secreted in small quantity. took the infant to breast for first time. appetite good. Pulse 76 & moderately full. Integuments have commenced to slough.
		July 17 <sup>th</sup>	<i>Continue Fomentatio</i> Complains of more pain in perineum – sloughing of integuments proceeding. Bowels quiet, gaining strength daily. Pulse 70 & natural. Appetite good – tongue clean. Child daily becoming emaciated & takes no nourishment to day. Diet as before. Vespere – a [layr?] black slough on each labium pudenda, extending to within half an inch of the anus. edges of slough touched with weak solution of <i>Acid Nitricum</i> – <i>Cataplasma</i> , gaining strength rapidly – Full Diet. Very little milk secreted, no lochial discharge. Infant very sickly.
		July 18 <sup>th</sup>	A considerable slough removed – <i>Repetatur Cataplasma</i> . In other respects doing well. At 1 PM to day the infant died. Full Diet.
		July 19 <sup>th</sup>	Improving daily – a portion of slough removed – sloughing has stopped within half an inch of the anus – but a considerable portion of the labia is included in the slough. Edges dressed with <i>Lotio Acid Nitric. Cataplasma</i> . Bowels quiet. Full Diet – glass of Porter
		July 24 <sup>th</sup>	Slough has been entirely separated for the last 3 days, surround looking quite healthy, granulations drying? up. At 2 PM sent to Colonial Hospital, Hobart Town.

**A Nosological Synopsis of the Sick Book kept during the Period of this Journal, in conformity with the 30<sup>th</sup> Article of the Surgeons' Instructions.**

<b>Diseases Nosologically arranged</b>	<b>Numbers</b>						<b>Nos. of such Cases as are detailed in the Journal</b>
	<b>Total</b>	<b>Discharged to Duty</b>	<b>Sent to the Hospital</b>	<b>Died on board</b>	<b>Invalided</b>	<b>Remaining</b>	
<b>Pyrexiae</b>							
Ord. I. Febres.							
Internulleates Quotutiana Tertiana							
Continua Synochus	1	1					
Typhus							
<i>Febricula</i>	7	7					
Ord. II. Phlegmasiae.							
Phlogosis							
Pneumonia							
Rheumatismus							
Cynanche							
Bronchitis							
Ophthalmia							
<i>Pleuritis</i>	3	3					2.6.12
Ord. III. Exanthemata.							
Variola							
Rubeola							
Erysipelas							
Vaccina							
Ord. IV. Haemorrhagiae							
Haemoptysis							
Phthisis incipiens							
Phthisis confirmata	1			1			3.10
<i>Menorrhagia</i>	1	1					4
Ord. V. Profluvia.							
Catarrhus	1	1					
Dysenteria	10	7	3				4.16.17
<b>Neuroses.</b>							
Ord. I. Comata.							
Apoplexia							
Ord. II. Adynamiae.							
Dyspepsia	9	9					1.5.7
<i>Debilitas</i>	3	3					
<i>Cephalalgia</i>	6	6					
Ord. III. Spasmi.							
Asthma							
Diarrhoea	18	17	1				
Colica	2	2					11
<i>Pleurodynia</i>	5	5					9
<i>Palpitatio Cordis</i>	3	3					13
<i>Tussis</i>	2	2					
Ord. IV. Vesaniae.							
Amentia							



Mania							
<b>Cachexiae.</b>							
Ord. I. Marcores.							
Tabes							
Ord. II. Intumescenciae.							
Anasarca							
Ascites							
Hydrothorax							
Ord. III. Impetigines.							
Syphilis							
Scrophula							
Icterus							
Scorbutus							
<b>Locales.</b>							
Ord. I. Dysaethesiae.							
Amaurosis							
Ord. II. Dysorexiae.							
Ord. III. Dyscinesiae.							
Ord. IV. Apocenosae.							
Gonorrhoea							
<i>Leucorrhoea</i>	1	1					
Ord. V. Epischesae							
Ischuria							
Obstipatio	2	2					
Dysuria							
Ord. VI. Tumores.							
Aneurisma							
Ord. VII. Ectopiae.							
Hernia							
Prolapsus <i>Uteri</i>	1	1					8
Luxatio							
Ord. VIII. Dialyses.							
Vulnus	2	2					15
Ulcus	2	2					
<i>Fistula Ani</i>	1	1					14
<b>GENERAL TOTAL</b>	<b>82</b>	<b>77</b>	<b>4</b>	<b>1</b>			
NOTE.—Medical Officers are desired particularly to Notice that the Numbers in each Disease and the general Total must not only correspond with the Sick Book, but also with the particulars contained in the several Nosological Returns for the period.							

## GENERAL REMARKS

Edward Nolloth  
Surgeon Superintendent

The “Maria” Female Convict Ship commenced fitting at Deptford on the 27<sup>th</sup> of February 1849 and on the 8<sup>th</sup> of March left for Kingstown Harbour, Ireland where she arrived on the 18<sup>th</sup> March. During the passage we had several rainy days which proved that the Main Deck was very leaky & the ship’s carpenter was employed daily in endeavouring to caulk the ship effectually.

On the 22<sup>nd</sup> of March examined at Grange Gorman Penitentiary, Dublin, 226 women, 56 children and 2 Free Settlers; many of the children unfit for embarkation, some labouring under Measles or the debility consequent on that disease, others having a contagious disease of the head (Porrigo).

On the 30<sup>th</sup> of March 1849, 83 Female Convicts and their 15 children and on the 2<sup>nd</sup> of April 83 Female Convicts and their 20 children with 2 Free Settlers and their 2 children were embarked & the whole with the exception of the Free Settlers and their children put into 24 Messes. The Free Settlers and their children were partitioned off from the Prisoners on the starboard side in midships of the Prison Deck.

On embarkation the women &c with but few exceptions appeared to be in good health and cheerful. The Matron (Mrs Gragan) embarked with the first party of prisoners on the 30<sup>th</sup> of March, her husband and 3 children embarked on the 2<sup>nd</sup> of April and with Mr Hart his wife and 6 daughters were accommodated, but, indifferently, in a portion of the Cabin partitioned off from the part in which the Master, myself and 2 cabin passengers (Mr & Mrs Matheson) were located. This arrangement proved exceedingly inconvenient to all parties, which was partly to be attributed to the fact of Mr Hart being an exceedingly disagreeable man, endeavouring by every means in his power (but without success) to excite an ill feeling between myself and the Master. The Matron proved to be very willing, but was not by any means adapted to fulfil the duties of her office.

The ship’s crew consisted (officers included) of 29 men and 4 boys – Total number of souls on board 254.

April 5<sup>th</sup> at 11 AM the “Maria” was towed to the Kirk Light, during the night & for the 2 following days, strong breezes from the southward – Most of the women &c suffering greatly from Sea-sickness.

The following was the routine generally observed during the voyage to Van Diemen’s Land. The cooks admitted on Deck at 5: 30 AM to light the fires and prepare breakfast, at 6:30 the Prisoners &c roused and at 7 AM beds & beddings stowed on the Booms. By 8AM all hands had washed and cleaned themselves and breakfast ready. At 9.30 the Prison Deck, Hospital etc scrubbed and scraped & the Berths cleaned and ventilated & Solution of Chloride of Zinc daily employed in the manner directed & it was found to be exceedingly useful in purifying the water closets etc.

All the people except those employed cleaning etc sent on Deck and at 10 AM Prayers were read. The women &c during the rest of the forenoon employed in knitting, learning to read and write etc. At noon Dinner, when Lime Juice was generally served out and a glass of wine on alternate days given to each woman, & a smaller quantity to the children.

The afternoon until 3 PM employed as in the forenoon, and at 3 PM beds taken below. At 4 PM supper generally ready and at 5 Prayers read. At sunset or a little before all the Prisoners &c sent below and the Prison doors locked – at 8 PM went round the prison, and the Prison doors finally secured for the night.

During the voyage we had a great number of hot days, particularly for 10 days whilst becalmed near the Equator & during the last 3 weeks of the voyage. The Thermometer when at the highest was 90° and at the lowest 39° - occasional hail and sleet with very strong breezes.

We did not put into any Port and arrived at Hobart Town, Van Diemen’s Land on the 23<sup>rd</sup> of July 1849.

On the 24<sup>th</sup>, 4 prisoners, and 1 infant were sent on shore to the Colonial Hospital. On the 25<sup>th</sup>, 3 prisoners, by order of the Comptroller General, were sent on shore to undergo punishment for misconduct during the voyage. The conduct of the Prisoners in general was good. During the 26<sup>th</sup> and 27<sup>th</sup> July, officers from the Comptroller General’s Office were employed taking a description of the Prisoners.

On the 28<sup>th</sup>, 155 Prisoners were removed to the “Anson”, Convict Hulk, making in the whole 165 disembarked from the “Maria”, 1 of the original number having died on the passage out. In the afternoon 3 female prisoners and 3 infants were removed to the Nursery Establishment, and 30 children to the Orphan Asylum.

1 Free-Settler and 1 child were also disembarked, the other Free-Settler and her child going on to Sydney.

August 2<sup>nd</sup> the ship’s company completed landing stores etc at the Commissariat Wharf - Landed all the Medical stores and returned them into the Colonial Hospital. August 3<sup>rd</sup> the “Maria” discharged from the Service.

During the voyage 82 Prisoners were admitted to the Sick List, but many others were more or less under Medical & surgical treatment, but were not put on the Sick List, no alteration in Diet being considered requisite.

In the accompanying Nosological Synopsis the Prisoners are alone included, but in the body of the Journal the case of Johanna Kelleher (daughter of a Prisoner) is detailed.

The Sick List of the children and Free Settlers is distinct from that of the Prisoners. The first case in the Synopsis is one of Synochus, which soon yielded to treatment as did the 7 cases of Febricula, some of which at the onset might have been considered cases of Synochus, but yielding in a few days to active treatment have been mainly called Febricula.

The 3 cases of Pleuritis with one exception rapidly recovered, great debility remaining for a considerable time in one instance. The case of Menorrhagia occurred in a woman of 38 years of age, of a very sickly habit of body & subject to Dysentery. the particulars are given in the Journal. Of the 10 cases of Dysentery, 3 were extremely obstinate and 2 of them were ultimately sent to the Colonial Hospital. 1 case under the head of Dysentery was also sent to the Hospital, parturition with rupture of the perineum occurring whilst the woman (Maria Rutledge) was labouring under this disease. The particulars of this case are given in the Journal. Of the 9 cases of Dyspepsia several were exceedingly obstinate and all were to be attributed to functional disorder of the stomach occasioned by frequent attacks of Sea-sickness.

The cases of Debility were attributed also to Sea-sickness. 2 of the 6 cases of Cephalalgia were exceedingly obstinate, and occurred to women of a most violent disposition. Diarrhoea towards the end of the voyage became very common & sometimes appeared to depend on the daily use of Lime Juice. The disease generally ceased on its discontinuance & with slight modification of the usual diet. The woman (Mary Foley) who died of Phthisis Pulmonalis was more or less under treatment for several weeks before being admitted to the Sick List, the progress of the disease from this time was remarkably rapid. In the case of Prolapsus Uteri, occurring shortly after parturition in the Penitentiary, some inconvenience was experienced in consequence of the neglect & carelessness of the woman, who would not wear a pessary & being of a violent temper had a return of the prolapsus 4 times.

In one case of Vulnus, the woman had been struck violently over the vertex of the head with a wooden bowl, & was subject for several days, to almost titanic rigidity of the voluntary muscles, with total insensibility: the details of this case are given in the Journal. 1 of the 2 cases of Ulcus was extremely obstinate. The case of Fistula in ano was remarkable from the circumstance of its healing so very rapidly, without dividing the gut.

Edward Nolloth  
(late) Surgeon Superintendent  
Of the "Maria"  
Female Convict Ship.