

Injured , 28 January 1945 in truck accident in Leghorn, Italy.

Admitted to 12th General Hospital, 11 February 1945, from 7th Sta. Hosp.

Died, 15 February 1945 of Subdural hematoma, result of his injury.

This 37 year old soldier was admitted to 7th Sta. Hosp 28 January 1945 with signs of brain injury (neck rigidity, yawning and aphasia), he responded poorly to questioning. He was otherwise neurologically negative. A spinal tap showed a xanthochromia, 23 WBC and total protein of ~~60~~ 60 mg%. He gradually became less responsive and by 11 February 1945, was comatose. On admission to 12th Gen Hosp, he appeared to be in extremis, corneal reflexes gone, pupils dilated and fixed, there was papilloedema of one diopter right, and two on the left. The pulse was 100 and poor quality, blood pressure 142/80, abdominal reflexes were absent, bladder distended, bilateral knee and ankle clonus was present. He was cold and blue. He was operated upon immediately, four burr holes were placed and a tremendous subdural hematoma was found on the left and washed out, and a swollen one was found on the right. He improved but slightly and died with sudden cardiac failure the 15 February 1945.

*smaller*

The salient features of the postmortem were:

" The head os swathed in bandages, removal of which discloses a recently-shaven calvarium with anterior and posterior small sutured linear incisions of the scalp marking the sites of burr holes, of which there are two on the left side and two on the right. The right lung weighs 600 grams; the upper and middle lobes are slightly congested, but otherwise seem normal. The lower lobe is partially atelectatic and is the site of a rather extensive purulent bronchiolitis, although gross pneumonic consolidation is not apparent to the touch. The hilar structures are unchanged save for some acute hyperplasia of the tracheo-bronchial nodes. The left lung resembles the description of its mate in all essentials."

~~Major Martin's report on the brain (gross):~~

" The brain appeared rather smaller than usual. Convolutiond were generally flattened. No herniation cones about tentorium or foramen magnum. The anterior two-thirds of left temporal lobe was grossly lacerated in several places and about at Broca's area there was an area 2 cm wide which was dirty red-black in color and frankly necrotic. On coronal section of the brain a hemorrhage into the white matter and extending backwards through the substance of the temporal lobe was found, with a good deal of softening of the brain about this tract of clot. The entire left frontal lobe cortex was quite firm and light green in color. Sections were cut away for microscopic study of white matter, cortex and arachnoid over the left frontal pole. All the changes described for the left frontal lobe were present on the right to a lesser extent. There was moderate dishing in of the convexity of the left frontal lobe, but this was left evident on the right."

Kidney (2 sec): The changes are similar, though more striking in one instance than in the other. There is a moderate internal hydronephrosis which involves essentially the proximal convoluted tubule. The distal convoluted tubules contain rare orange-colored granular casts and more frequent calcified blue-staining massed, as well as some casts which have a mucoid appearance. All have excited a variable degree of epithelial activity in the involved tubular segment. The collecting tubules of the pyramid in one section shows an extreme degree of irritative

nuclear hyperplasia, occasioned by the frequent presence of orange-staining granular casts in their lumina.

Clinical Diagnoses:

- (1) Subdural hematoma, left and right, severe.
- (2) Bronchopneumonia, terminal

Pathological Diagnoses:

- (1) Subdural hematoma, bilateral, severe, old (surgically removed).
- (2) Laceration, multiple, left temporal lobe.
- (3) Burr holes, four, recent, of skull.
- (4) Suppurative bronchiolitis and early bronchopneumonia, terminal.
- (5) Atelectasis, basal, partial, of both lower lung lobes.
- (6) Acute passive congestion, moderate, of liver and spleen.
- (7) Hemoglobinuric nephropathy, moderate.
- (8) Sulfonamide nephropathy, moderate.