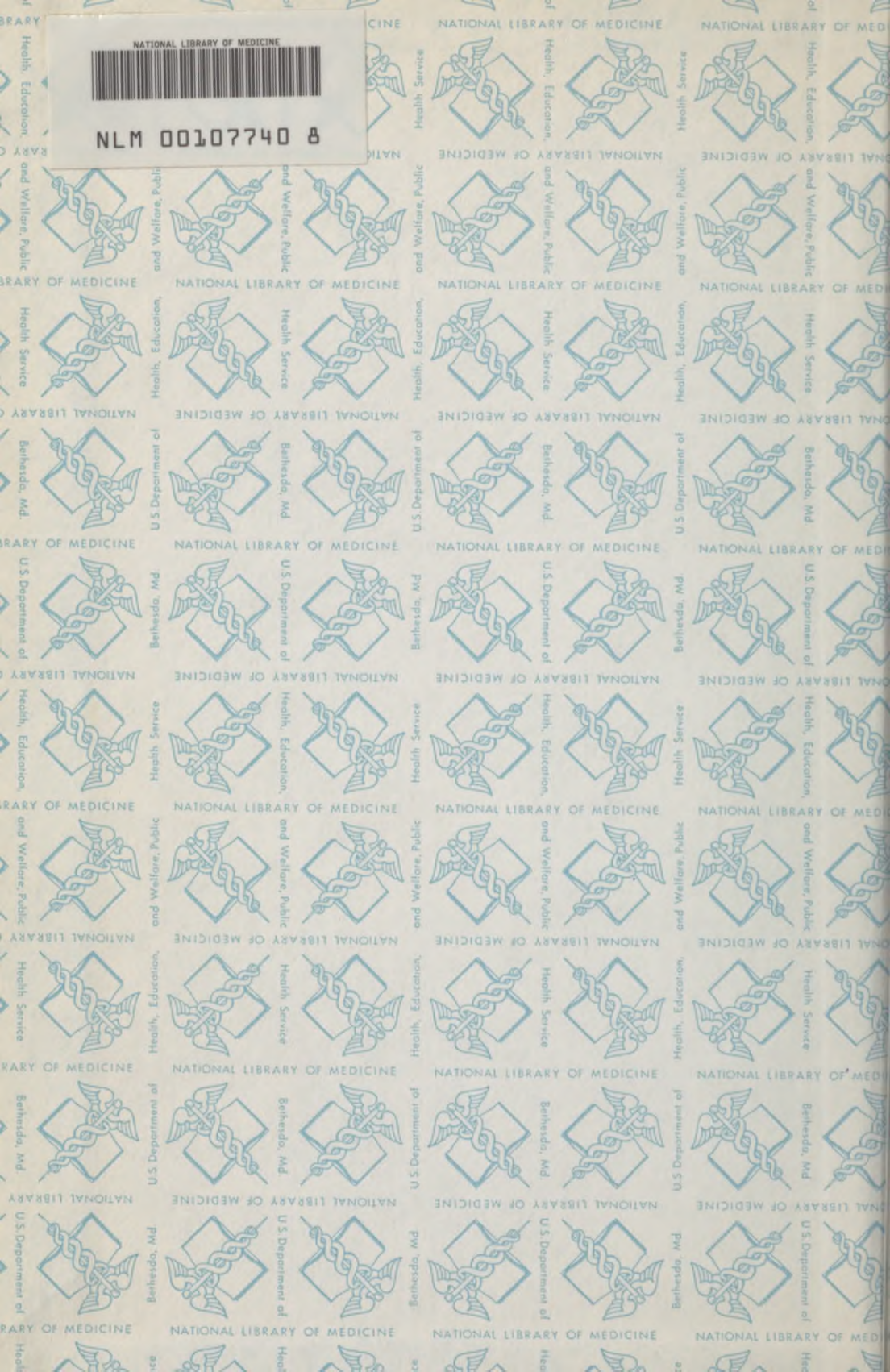


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PRESCRIPTIONS

—AND—

156

HOW TO USE THEM.

AN ANATOMICAL AND PHYSIOLOGICAL TREATISE

—ON THE—

HUMAN · BODY

WITH A PRACTICAL DESCRIPTION OF ITS

DISEASES

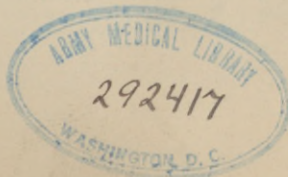
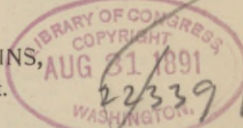
THEIR SYMPTOMS AND TREATMENT.

“For life is not to live, but to be well.”—MARTIAL.

ANATOMY AND PHYSIOLOGY | DISEASES AND THEIR TREATMENT
BY PROF. GEORGE HENCKEL. | BY ORVILLE JUAN PERKINS, M. D.

VOLUME III.

CHICAGO, ILL.
HENCKEL & PERKINS,
265-269 Dearborn St.



Annex

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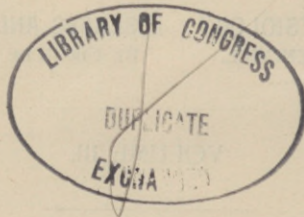
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NOTICE TO READER.

We wish to impress upon our patrons, in case they have any need to resort to any of the remedies prescribed in this volume, to first read carefully what has been written in reference to the disease to be treated, and then tear out the corresponding prescription, making sure that the number corresponds with that given under the disease.

These prescriptions are money to you, and we advise that you have a place for this volume and see that it is always in its place; or otherwise a leaf or more may become destroyed. One leaf ruined may contain the prescription that you will most desire in six months or a year, therefore see to it that every unused one is kept intact.

A rule never to allow children to meddle with or handle medicines or chemicals is as good as it is old, and we advise our readers to adopt it, if they have not done so already.

Duplicates of this volume (III) can be had separately and will be supplied by the undersigned or any of their General Agents, upon receipt of *two dollars* for the book and ten cents for postage.

HENCKEL & PERKINS,
263-269 Dearborn street, Chicago.

RICKETS (RACHITES).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age-----

No. 1.

- R
Phosphorus gr. ʒ.
Oleum Amygdalae dulcis, ... fl ʒ vii ss.
Sum Acacia, ʒ iij.
Aquae Dist., fl ʒ x ss.

M.-Sig.:—ʒj three times a day.

O. J. Perkins M.D.

For ----- Age-----

No. 1.

- R
Phosphorus gr. ʒ.
Oleum Amygdalae dulcis, ... fl ʒ vii ss.
Sum Acacia, ʒ iij.
Aquae Dist., fl ʒ x ss.

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O. J. Perkins M.D.

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O. J. Perkins M.D.

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- R
Phosphorus gr. ʒ.
Oleum Amygdalae dulcis, ... fl ʒ vii ss.
Sum Acacia, ʒ iij.
Aquae Dist., fl ʒ x ss.

M.-Sig.:—ʒj three times a day.

O. J. Perkins M.D.

FELON OR WHITLOW.

For----- Age-----

No. 2.

- R
Quiniae Sulph. 3 ss.
Acid Hydrochlor. dil. ʒ ij.
Tr. Columbæ fl ʒ j.
N. Ext. Nucis Vom. (P. D. & Co.) “ ʒ ss.
Syrup Simp. q. s. ad. “ ʒ iv.

M.-Sig.:—ʒj three times a day before meals.

O. J. Perkins M.D.

For----- Age-----

No. 2.

- R
Quiniae Sulph. ʒ ss.
Acid Hydrochlor. dil. ʒ ij.
Tr. Columbæ fl ʒ j.
N. Ext. Nucis Vom. (P. D. & Co.) “ ʒ ss.
Syrup Simp. q. s. ad. “ ʒ iv.

M.-Sig.:—ʒj three times a day before meals.

O. J. Perkins M.D.

For----- Age-----

No. 2.

- R
Quiniae Sulph. ʒ ss.
Acid Hydrochlor. dil. ʒ ij.
Tr. Columbæ fl ʒ j.
N. Ext. Nucis Vom. (P. D. & Co.) “ ʒ ss.
Syrup Simp. q. s. ad. “ ʒ iv.

M.-Sig.:—ʒj three times a day before meals.

O. J. Perkins M.D.

For----- Age-----

No. 2.

- R
Quiniae Sulph. ʒ ss.
Acid Hydrochlor. dil. ʒ ij.
Tr. Columbæ fl ʒ j.
N. Ext. Nucis Vom. (P. D. & Co.) “ ʒ ss.
Syrup Simp. q. s. ad. “ ʒ iv.

M.-Sig.:—ʒj three times a day before meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

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One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

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The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

SPRAINS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 3.

R

Emplastrum Opii et Belladonnae.

Sig.:—Apply to the part, as directed.

O. J. Roberts M. D.

For.....

Age.....

No. 3.

R

Emplastrum Opii et Belladonnae.

Sig.:—Apply to the part, as directed.

O. J. Roberts M. D.

For.....

Age.....

No. 3.

R

Emplastrum Opii et Belladonnae.

Sig.:—Apply to the part, as directed.

O. J. Roberts M. D.

For.....

Age.....

No. 3.

R

Emplastrum Opii et Belladonnae.

Sig.:—Apply to the part, as directed.

O. J. Roberts M. D.

PREScription No. 4.
PARASITES—LICE.

For ----- Age -----

No. 4.

R

Acidum Carbolicum ʒj.
Aquae Rosae ʒss.

M.-Sig.:—Apply with a stiff brush upon retiring.

O. J. Perkins M.D.

For ----- Age -----

No. 4.

R

Acidum Carbolicum ʒj.
Aquae Rosae ʒss.

M.-Sig.:—Apply with a stiff brush upon retiring.

O. J. Perkins M.D.

For ----- Age -----

No. 4.

R

Acidum Carbolicum ʒj.
Aquae Rosae ʒss.

M.-Sig.:—Apply with a stiff brush upon retiring.

O. J. Perkins M.D.

For ----- Age -----

No. 4.

R

Acidum Carbolicum ʒj.
Aquae Rosae ʒss.

M.-Sig.:—Apply with a stiff brush upon retiring.

O. J. Perkins M.D.

BALDNESS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----
No. 5.
 R
Quiniae Sulph. ℥j.
Glycerina fl. ʒj.
Sinct. Cantharidis “ ʒj.
Lanolin “ ʒj.
Spt. Myricae “ ʒij.
Ext. M. Faberandi (P. D. & Co.) “ ʒss.
Aquae Rosae “ ʒxvj.
 M.-Sig.:—To be well shaken and applied three times a week with a stiff brush.

O. J. Perkins M. D.

For----- Age-----
No. 5.
 R
Quiniae Sulph. ℥j.
Glycerina fl. ʒj.
Sinct. Cantharidis “ ʒj.
Lanolin “ ʒj.
Spt. Myricae “ ʒij.
Ext. M. Faberandi (P. D. & Co.) “ ʒss.
Aquae Rosae “ ʒxvj.
 M.-Sig.:—To be well shaken and applied three times a week with a stiff brush.

O. J. Perkins M. D.

For----- Age-----
No. 5.
 R
Quiniae Sulph. ℥j.
Glycerina fl. ʒj.
Sinct. Cantharidis “ ʒj.
Lanolin “ ʒj.
Spt. Myricae “ ʒij.
Ext. M. Faberandi (P. D. & Co.) “ ʒss.
Aquae Rosae “ ʒxvj.
 M.-Sig.:—To be well shaken and applied three times a week with a stiff brush.

O. J. Perkins M. D.

For----- Age-----
No. 5.
 R
Quiniae Sulph. ℥j.
Glycerina fl. ʒj.
Sinct. Cantharidis “ ʒj.
Lanolin “ ʒj.
Spt. Myricae “ ʒij.
Ext. M. Faberandi (P. D. & Co.) “ ʒss.
Aquae Rosae “ ʒxvj.
 M.-Sig.:—To be well shaken and applied three times a week with a stiff brush.

O. J. Perkins M. D.

BALDNESS

1917

1917

1917

No. 2

No. 2

DANDRUFF.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 6.

R *Oléum Ricini (Castor Oil), best.* . . . fl. ʒ ij.
Spts. Cologne (95%). " ʒ xiv.

M.-Sig.:—Apply as a dressing.

A. J. Perkins M.D.

For.....

Age.....

No. 6.

R *Oléum Ricini (Castor Oil), best.* . . . fl. ʒ ij.
Spts. Cologne (95%). " ʒ xiv.

M.-Sig.:—Apply as a dressing.

A. J. Perkins M.D.

For.....

Age.....

No. 6.

R *Oléum Ricini (Castor Oil), best.* . . . fl. ʒ ij.
Spts. Cologne (95%). " ʒ xiv.

M.-Sig.:—Apply as a dressing.

A. J. Perkins M.D.

For.....

Age.....

No. 6.

R *Oléum Ricini (Castor Oil), best.* . . . fl. ʒ ij.
Spts. Cologne (95%). " ʒ xiv.

M.-Sig.:—Apply as a dressing.

A. J. Perkins M.D.

SOFT CORNS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 7.

R

Zinci Oxidum..... gr. x.
" " *Morphia Sulph.*..... j.

M.-Sig.—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 7.

R

Zinci Oxidum..... gr. x.
" " *Morphia Sulph.*..... j.

M.-Sig.—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 7.

R

Zinci Oxidum..... gr. x.
" " *Morphia Sulph.*..... j.

M.-Sig.—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 7.

R

Zinci Oxidum..... gr. x.
" " *Morphia Sulph.*..... j.

M.-Sig.—Use externally as directed.

O. J. Perkins M.D.

BUNIONS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 8.

R

Tinct. Sodi. comp. fl. ʒ ss.
Potass. Sodicum gr. v.

M.-Sig.:—Use externally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 8.

R

Tinct. Sodi. comp. fl. ʒ ss.
Potass. Sodicum gr. v.

M.-Sig.:—Use externally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 8.

R

Tinct. Sodi. comp. fl. ʒ ss.
Potass. Sodicum gr. v.

M.-Sig.:—Use externally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 8.

R

Tinct. Sodi. comp. fl. ʒ ss.
Potass. Sodicum gr. v.

M.-Sig.:—Use externally as directed.

C. J. Perkins M.D.

CHILBLAINS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----Age-----

No. 9.

℞ *Ferri cit. et Strych*..... ʒ iij.
Vinum album..... fl. ʒ iv,
 " ʒ j.
Tinct. Sautheriae..... " ʒ j.
Syrup Simp. q. s. ad...... " ʒ vj.

M.-Sig.:—ʒ three times a day after meals.

A. J. Perkins M.D.

(OVER)

For-----Age-----

No. 9.

℞ *Ferri cit. et Strych*..... ʒ iij.
Vinum album..... fl. ʒ iv,
 " ʒ j.
Tinct. Sautheriae..... " ʒ j.
Syrup Simp. q. s. ad...... " ʒ vj.

M.-Sig.:—ʒ three times a day after meals.

A. J. Perkins M.D.

(OVER)

For-----Age-----

No. 9.

℞ *Ferri cit. et Strych*..... ʒ iij.
Vinum album..... fl. ʒ iv,
 " ʒ j.
Tinct. Sautheriae..... " ʒ j.
Syrup Simp. q. s. ad...... " ʒ vj.

M.-Sig.:—ʒ three times a day after meals.

A. J. Perkins M.D.

(OVER)

For-----Age-----

No. 9.

℞ *Ferri cit. et Strych*..... ʒ iij.
Vinum album..... fl. ʒ iv,
 " ʒ j.
Tinct. Sautheriae..... " ʒ j.
Syrup Simp. q. s. ad...... " ʒ vj.

M.-Sig.:—ʒ three times a day after meals.

A. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.			

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The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.			

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The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty one years, full dose.			

CHILBLAINS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 10.

℞
Lin. Belladonnae..... fl. ʒ ij.
 " *Aconiti* (Br. Ph.)..... " ʒ j.
Acid Carbolium..... ℥ X.
Collodium..... ʒ j.

M.-Sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 10.

℞
Lin. Belladonnae..... fl. ʒ ij.
 " *Aconiti* (Br. Ph.)..... " ʒ j.
Acid Carbolium..... ℥ X.
Collodium..... ʒ j.

M.-Sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

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℞
Lin. Belladonnae..... fl. ʒ ij.
 " *Aconiti* (Br. Ph.)..... " ʒ j.
Acid Carbolium..... ℥ X.
Collodium..... ʒ j.

M.-Sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 10.

℞
Lin. Belladonnae..... fl. ʒ ij.
 " *Aconiti* (Br. Ph.)..... " ʒ j.
Acid Carbolium..... ℥ X.
Collodium..... ʒ j.

M.-Sig.:—Use externally as directed.

O. J. Perkins M.D.

COLD FEET.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 11.

- R Strychnia Sulph. crys. gr. ss.
- Alcohol fl. ʒ ij.
- Tinct. Ferri Mur. " ʒ ij.
- Syrup Simp. q. s. ad. " ʒ iv.

M. By dissolving the Strychnia in the Alcohol, and then add the other ingredients. Sig. :-ʒj three times a day before meals.

A. J. Perkins M.D.

(OVER)

For

Age

No. 11.

- R Strychnia Sulph. crys. gr. ss.
- Alcohol fl. ʒ ij.
- Tinct. Ferri Mur. " ʒ ij.
- Syrup Simp. q. s. ad. " ʒ iv.

M. By dissolving the Strychnia in the Alcohol, and then add the other ingredients. Sig. :-ʒj three times a day before meals.

A. J. Perkins M.D.

(OVER)

For

Age

No. 11.

- R Strychnia Sulph. crys. gr. ss.
- Alcohol fl. ʒ ij.
- Tinct. Ferri Mur. " ʒ ij.
- Syrup Simp. q. s. ad. " ʒ iv.

M. By dissolving the Strychnia in the Alcohol, and then add the other ingredients. Sig. :-ʒj three times a day before meals.

A. J. Perkins M.D.

(OVER)

For

Age

No. 11.

- R Strychnia Sulph. crys. gr. ss.
- Alcohol fl. ʒ ij.
- Tinct. Ferri Mur. " ʒ ij.
- Syrup Simp. q. s. ad. " ʒ iv.

M. By dissolving the Strychnia in the Alcohol, and then add the other ingredients. Sig. :-ʒj three times a day before meals.

A. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{1}{2}$	
Nine to twelve years, $\frac{2}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{1}{2}$	
Nine to twelve years, $\frac{2}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{1}{2}$	
Nine to twelve years, $\frac{2}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{1}{2}$	
Nine to twelve years, $\frac{2}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

SWEATING OF THE FEET.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 12.

- R *Acid Salicylicum*..... grs. vj.
- Starch*..... " XX.
- Finely Powdered Soapstone*..... " CLXXIV.

M.-Sig.:--Use externally as directed.

For----- Age-----

No. 12.

- R *Acid Salicylicum*..... grs. vj.
- Starch*..... " XX.
- Finely Powdered Soapstone*..... " CLXXIV.

M.-Sig.:--Use externally as directed.

For----- Age-----

No. 12.

- R *Acid Salicylicum*..... grs. vj.
- Starch*..... " XX.
- Finely Powdered Soapstone*..... " CLXXIV.

M.-Sig.:--Use externally as directed.

For----- Age-----

No. 12.

- R *Acid Salicylicum*..... grs. vj.
- Starch*..... " XX.
- Finely Powdered Soapstone*..... " CLXXIV.

M.-Sig.:--Use externally as directed.

BARBER'S ITCH.

For ----- Age -----

No. 13.

℞ Sulphur ʒj to ʒij.
 Oleum Rosae gtt. v.
 Cosmoline ʒj.

M.-Sig.:—Use locally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 13.

℞ Sulphur ʒj to ʒij.
 Oleum Rosae gtt. v.
 Cosmoline ʒj.

M.-Sig.:—Use locally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 13.

℞ Sulphur ʒj to ʒij.
 Oleum Rosae gtt. v.
 Cosmoline ʒj.

M.-Sig.:—Use locally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 13.

℞ Sulphur ʒj to ʒij.
 Oleum Rosae gtt. v.
 Cosmoline ʒj.

M.-Sig.:—Use locally as directed.

O. J. Perkins M.D.

FILL IN THE SPACE FOR NAME AND AGE BEFORE WRITING

PIMPLES (ACNE).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 14.

R Hydraz. Ammon ʒ ss.
Oleum Rosae gtt. v.
Cosmoline ʒ ss.

M.-Ft. unguentum et sig.:—Apply externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 14.

R Hydraz. Ammon ʒ ss.
Oleum Rosae gtt. v.
Cosmoline ʒ ss.

M.-Ft. unguentum et sig.:—Apply externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 14.

R Hydraz. Ammon ʒ ss.
Oleum Rosae gtt. v.
Cosmoline ʒ ss.

M.-Ft. unguentum et sig.:—Apply externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 14.

R Hydraz. Ammon ʒ ss.
Oleum Rosae gtt. v.
Cosmoline ʒ ss.

M.-Ft. unguentum et sig.:—Apply externally as directed.

O. J. Perkins M.D.

PIMPLES (ACNE).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 15.

R Huile de Cade..... 3 ss.
Sulphur Preparat..... 3 j.
M.-et ft. unguentum. Sig.: -Apply night and morning - "Tilbury Fox," London.

For..... Age.....

No. 15.

R Huile de Cade..... 3 ss.
Sulphur Preparat..... 3 j.
M.-et ft. unguentum. Sig.: -Apply night and morning - "Tilbury Fox," London.

For..... Age.....

No. 15.

R Huile de Cade..... 3 ss.
Sulphur Preparat..... 3 j.
M.-et ft. unguentum. Sig.: -Apply night and morning - "Tilbury Fox," London.

For..... Age.....

No. 15.

R Huile de Cade..... 3 ss.
Sulphur Preparat..... 3 j.
M.-et ft. unguentum. Sig.: -Apply night and morning - "Tilbury Fox," London.

PIMPLES (ACNE ROSACEA).

For..... Age.....

No. 16.

- ℞ Sulph. Sublim ʒ ij ss.
 Acid. Tannic ʒ j ss.
 Ung. Petrolii ʒ ij.

M.-et ft. unguentum. Sig.:—Apply to the afflicted part upon retiring.
 —“G. H. Fox,” London.

For..... Age.....

No. 16.

- ℞ Sulph. Sublim ʒ ij ss.
 Acid. Tannic ʒ j ss.
 Ung. Petrolii ʒ ij.

M.-et ft. unguentum. Sig.:—Apply to the afflicted part upon retiring.
 —“G. H. Fox,” London.

For..... Age.....

No. 16.

- ℞ Sulph. Sublim ʒ ij ss.
 Acid. Tannic ʒ j ss.
 Ung. Petrolii ʒ ij.

M.-et ft. unguentum. Sig.:—Apply to the afflicted part upon retiring.
 —“G. H. Fox,” London.

For..... Age.....

No. 16.

- ℞ Sulph. Sublim ʒ ij ss.
 Acid. Tannic ʒ j ss.
 Ung. Petrolii ʒ ij.

M.-et ft. unguentum. Sig.:—Apply to the afflicted part upon retiring.
 —“G. H. Fox,” London.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

PREScription No. 17.
MOTH PATCHES.

For ----- Age -----

No. 17.

R
Bismuthi subnitras } aa. ʒj.
Hydrarg. Ammoniac }
Ung. Petrolii } ʒj.

M.-Ft. unguentum et sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 17.

R
Bismuthi subnitras } aa. ʒj.
Hydrarg. Ammoniac }
Ung. Petrolii } ʒj.

M.-Ft. unguentum et sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 17.

R
Bismuthi subnitras } aa. ʒj.
Hydrarg. Ammoniac }
Ung. Petrolii } ʒj.

M.-Ft. unguentum et sig.:—Use externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 17.

R
Bismuthi subnitras } aa. ʒj.
Hydrarg. Ammoniac }
Ung. Petrolii } ʒj.

M.-Ft. unguentum et sig.:—Use externally as directed.

O. J. Perkins M.D.

SUNBURN.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 18.

R

Hydrarg. Chlorid Cor. gr. j.
Emulsion of Almonds. fl. ʒ ij.

M.-Sig.:—Apply externally, using a soft rag or sponge.

C. J. Perkins M.D.

For

Age

No. 18.

R

Hydrarg. Chlorid Cor. gr. j.
Emulsion of Almonds. fl. ʒ ij.

M.-Sig.:—Apply externally, using a soft rag or sponge.

C. J. Perkins M.D.

For

Age

No. 18.

R

Hydrarg. Chlorid Cor. gr. j.
Emulsion of Almonds. fl. ʒ ij.

M.-Sig.:—Apply externally, using a soft rag or sponge.

C. J. Perkins M.D.

For

Age

No. 18.

R

Hydrarg. Chlorid Cor. gr. j.
Emulsion of Almonds. fl. ʒ ij.

M.-Sig.:—Apply externally, using a soft rag or sponge.

C. J. Perkins M.D.

FRECKLES.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 19.

R
Acid. Lacti }
Glycerina } aa. fl. ʒ ss.

M.-et sig.—Apply night and morning with a sponge.

O. J. Perkins M. D.

For ----- Age -----

No. 19.

R
Acid. Lacti }
Glycerina } aa. fl. ʒ ss.

M.-et sig.—Apply night and morning with a sponge.

O. J. Perkins M. D.

For ----- Age -----

No. 19.

R
Acid. Lacti }
Glycerina } aa. fl. ʒ ss.

M.-et sig.—Apply night and morning with a sponge.

O. J. Perkins M. D.

For ----- Age -----

No. 19.

R
Acid. Lacti }
Glycerina } aa. fl. ʒ ss.

M.-et sig.—Apply night and morning with a sponge.

O. J. Perkins M. D.

FRECKLES.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 20.

R

Acid. Salicylicum grs. xxx.
Spiritus Myricae fl. ʒ ij.

M.-Sig.:—Apply night and morning, using a soft rag or sponge.

O. J. Perkins M.D.

For ----- Age -----

No. 20.

R

Acid. Salicylicum grs. xxx.
Spiritus Myricae fl. ʒ ij.

M.-Sig.:—Apply night and morning, using a soft rag or sponge.

O. J. Perkins M.D.

For ----- Age -----

No. 20.

R

Acid. Salicylicum grs. xxx.
Spiritus Myricae fl. ʒ ij.

M.-Sig.:—Apply night and morning, using a soft rag or sponge.

O. J. Perkins M.D.

For ----- Age -----

No. 20.

R

Acid. Salicylicum grs. xxx.
Spiritus Myricae fl. ʒ ij.

M.-Sig.:—Apply night and morning, using a soft rag or sponge.

O. J. Perkins M.D.

SALT RHEUM OR TETTER (ECZEMA).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

Age-----

No. 21.

R Hydriary. Ammon. 3 ss.
Ung. Petrolii (carbolyzed) ʒj.

M.-Ft. unguentum. Sig. i.—Apply externally as directed.

O. J. Perkins M.D.

For-----

Age-----

No. 21.

R Hydriary. Ammon. 3 ss.
Ung. Petrolii (carbolyzed) ʒj.

M.-Ft. unguentum. Sig. i.—Apply externally as directed.

O. J. Perkins M.D.

For-----

Age-----

No. 21.

R Hydriary. Ammon. 3 ss.
Ung. Petrolii (carbolyzed) ʒj.

M.-Ft. unguentum. Sig. i.—Apply externally as directed.

O. J. Perkins M.D.

For-----

Age-----

No. 21.

R Hydriary. Ammon. 3 ss.
Ung. Petrolii (carbolyzed) ʒj.

M.-Ft. unguentum. Sig. i.—Apply externally as directed.

O. J. Perkins M.D.

RINGWORM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 22.

R *Sr. Sodii* 3 ss.
Potass. Sodi grs. viij.
Aqua dist. q. s. ad. fl. ʒ j.

M.-Sig.:—Apply externally as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 22.

R *Sr. Sodii* 3 ss.
Potass. Sodi grs. viij.
Aqua dist. q. s. ad. fl. ʒ j.

M.-Sig.:—Apply external'y as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 22.

R *Sr. Sodii* 3 ss.
Potass. Sodi grs. viij.
Aqua dist. q. s. ad. fl. ʒ j.

M.-Sig.:—Apply external'y as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 22.

R *Sr. Sodii* 3 ss.
Potass. Sodi grs. viij.
Aqua dist. q. s. ad. fl. ʒ j.

M.-Sig.:—Apply external'y as directed.

O. J. Perkins M.D.

ITCH (SCABIES).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 23.

- R Sulphur Sublim..... ʒ ij.
- Balsam. Peruvianum..... ʒ j.
- Butyri Petrolii..... ʒ ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 23.

- R Sulphur Sublim..... ʒ ij.
- Balsam. Peruvianum..... ʒ j.
- Butyri Petrolii..... ʒ ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 23.

- R Sulphur Sublim..... ʒ ij.
- Balsam. Peruvianum..... ʒ j.
- Butyri Petrolii..... ʒ ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 23.

- R Sulphur Sublim..... ʒ ij.
- Balsam. Peruvianum..... ʒ j.
- Butyri Petrolii..... ʒ ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

ST. ANTHONY'S FIRE—ERYSIPELAS.

For ----- Age -----

No. 24.

R
Tr. Ferri mur...... fl. ʒ iiʒ.
Glycerina..... “ ʒ ss.
Aqua q. s. ad...... “ ʒ ij.

M.-Sig:—ʒj every three hours.

O. J. Perkins M.D.

For ----- Age -----

No. 24.

R
Tr. Ferri mur...... fl. ʒ iiʒ.
Glycerina..... “ ʒ ss.
Aqua q. s. ad...... “ ʒ ij.

M.-Sig:—ʒj every three hours.

O. J. Perkins M.D.

For ----- Age -----

No. 24.

R
Tr. Ferri mur...... fl. ʒ iiʒ.
Glycerina..... “ ʒ ss.
Aqua q. s. ad...... “ ʒ ij.

M.-Sig:—ʒj every three hours.

O. J. Perkins M.D.

For ----- Age -----

No. 24.

R
Tr. Ferri mur...... fl. ʒ iiʒ.
Glycerina..... “ ʒ ss.
Aqua q. s. ad...... “ ʒ ij.

M.-Sig:—ʒj every three hours.

O. J. Perkins M.D.

BEFORE TAKING TO THE DRUG STORE.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

ST. ANTHONY'S FIRE—ERYSIPELAS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 25.

R Chloral Hydrat..... ʒj.
 Potass. Brom..... ʒij.
 Syrup Simp..... fl. ʒj.
 Aqua q. s. ad..... “ ʒiv.

M.—Sig.:—ʒiv every two to four hours, as required.

O. J. Perkins M.D.

For ----- Age -----

No. 25.

R Chloral Hydrat..... ʒj.
 Potass. Brom..... ʒij.
 Syrup Simp..... fl. ʒj.
 Aqua q. s. ad..... “ ʒiv.

M.—Sig.:—ʒiv every two to four hours, as required.

O. J. Perkins M.D.

For ----- Age -----

No. 25.

R Chloral Hydrat..... ʒj.
 Potass. Brom..... ʒij.
 Syrup Simp..... fl. ʒj.
 Aqua q. s. ad..... “ ʒiv.

M.—Sig.:—ʒiv every two to four hours, as required.

O. J. Perkins M.D.

For ----- Age -----

No. 25.

R Chloral Hydrat..... ʒj.
 Potass. Brom..... ʒij.
 Syrup Simp..... fl. ʒj.
 Aqua q. s. ad..... “ ʒiv.

M.—Sig.:—ʒiv every two to four hours, as required.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{3}{8}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{3}{8}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{3}{8}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{3}{8}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

MUSCULAR RHEUMATISM—MUMPS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 26.

R Chloroform ℥ 80.
 Tr. Aconiti } aa. fl. ℥ iv.
 Tr. Opii }
 Lin. Camph. comp. q. s. ad " ℥ ij.

M.-Ft. linimentum. Sig. :—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 26.

R Chloroform ℥ 80.
 Tr. Aconiti } aa. fl. ℥ iv.
 Tr. Opii }
 Lin. Camph. comp. q. s. ad " ℥ ij.

M.-Ft. linimentum. Sig. :—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 26.

R Chloroform ℥ 80.
 Tr. Aconiti } aa. fl. ℥ iv.
 Tr. Opii }
 Lin. Camph. comp. q. s. ad " ℥ ij.

M.-Ft. linimentum. Sig. :—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 26.

R Chloroform ℥ 80.
 Tr. Aconiti } aa. fl. ℥ iv.
 Tr. Opii }
 Lin. Camph. comp. q. s. ad " ℥ ij.

M.-Ft. linimentum. Sig. :—Use as directed.

O. J. Perkins M.D.

NOSEBLEED.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

Age-----

No. 27.

Rx

Tr. Ferri mur...... ʒ iij.
Strychniae Sulph. cryst...... gr. ʒ
Syrup Solutani, q. s. ad...... fl. ʒ iv.

M.-Sig.:—ʒ j three times a day before meals.

O. J. Perkins M.D.

For-----

Age-----

No. 27.

Rx

Tr. Ferri mur...... ʒ iij.
Strychniae Sulph. cryst...... gr. ʒ
Syrup Solutani, q. s. ad...... fl. ʒ iv.

M.-Sig.:—ʒ j three times a day before meals.

O. J. Perkins M.D.

For-----

Age-----

No. 27.

Rx

Tr. Ferri mur...... ʒ iij.
Strychniae Sulph. cryst...... gr. ʒ
Syrup Solutani, q. s. ad...... fl. ʒ iv.

M.-Sig.:—ʒ j three times a day before meals.

O. J. Perkins M.D.

For-----

Age-----

No. 27.

Rx

Tr. Ferri mur...... ʒ iij.
Strychniae Sulph. cryst...... gr. ʒ
Syrup Solutani, q. s. ad...... fl. ʒ iv.

M.-Sig.:—ʒ j three times a day before meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

ANÆMIA—CHLOROSIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 28.

℞ *Ferri Sulph. pulv.*..... } aa. ʒ ss.
Potass. Carb. puras...... }
Fragacantha q. s.

M.-Ft. Pil. No. xxvii. Sig.:—Take as directed.

O. J. Perkins M.D.

For----- Age-----

No. 28.

℞ *Ferri Sulph. pulv.*..... } aa. ʒ ss.
Potass. Carb. puras...... }
Fragacantha q. s.

M.-Ft. Pil. No. xxvii. Sig.:—Take as directed.

O. J. Perkins M.D.

For----- Age-----

No. 28.

℞ *Ferri Sulph. pulv.*..... } aa. ʒ ss.
Potass. Carb. puras...... }
Fragacantha q. s.

M.-Ft. Pil. No. xxvii. Sig.:—Take as directed.

O. J. Perkins M.D.

For----- Age-----

No. 28.

℞ *Ferri Sulph. pulv.*..... } aa. ʒ ss.
Potass. Carb. puras...... }
Fragacantha q. s.

M.-Ft. Pil. No. xxvii. Sig.:—Take as directed.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

ANÆMIA—CHLOROSIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 29.

R Hydrarg. Bichloridi gr. j.
 Sodae Arseniat. grs. iij.
 Strychniae Sulph. gr. ʒ.
 Vinum Ferri Amarum fl. ʒ xvj.

M.—Sig.—3 ij in water after meals.

C. J. Perkins M.D.

For

Age

No. 29.

R Hydrarg. Bichloridi gr. j.
 Sodae Arseniat. grs. iij.
 Strychniae Sulph. gr. ʒ.
 Vinum Ferri Amarum fl. ʒ xvj.

M.—Sig.—3 ij in water after meals.

C. J. Perkins M.D.

For

Age

No. 29.

R Hydrarg. Bichloridi gr. j.
 Sodae Arseniat. grs. iij.
 Strychniae Sulph. gr. ʒ.
 Vinum Ferri Amarum fl. ʒ xvj.

M.—Sig.—3 ij in water after meals.

C. J. Perkins M.D.

For

Age

No. 29.

R Hydrarg. Bichloridi gr. j.
 Sodae Arseniat. grs. iij.
 Strychniae Sulph. gr. ʒ.
 Vinum Ferri Amarum fl. ʒ xvj.

M.—Sig.—3 ij in water after meals.

C. J. Perkins M.D.

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{100}$	} of the Adult Dose.
Two to four years, $\frac{10}{100}$	
Five to eight years, $\frac{5}{100}$	
Nine to twelve years, $\frac{3}{100}$	
Thirteen to sixteen, $\frac{1}{100}$	
Seventeen to twenty, $\frac{1}{200}$	
At twenty-one years, full dose.	

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{100}$	} of the Adult Dose.
Two to four years, $\frac{10}{100}$	
Five to eight years, $\frac{5}{100}$	
Nine to twelve years, $\frac{3}{100}$	
Thirteen to sixteen, $\frac{1}{100}$	
Seventeen to twenty, $\frac{1}{200}$	
At twenty-one years, full dose.	

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{100}$	} of the Adult Dose.
Two to four years, $\frac{10}{100}$	
Five to eight years, $\frac{5}{100}$	
Nine to twelve years, $\frac{3}{100}$	
Thirteen to sixteen, $\frac{1}{100}$	
Seventeen to twenty, $\frac{1}{200}$	
At twenty-one years, full dose.	

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{100}$	} of the Adult Dose.
Two to four years, $\frac{10}{100}$	
Five to eight years, $\frac{5}{100}$	
Nine to twelve years, $\frac{3}{100}$	
Thirteen to sixteen, $\frac{1}{100}$	
Seventeen to twenty, $\frac{1}{200}$	
At twenty-one years, full dose.	

SCURVY (SCORBUS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 30.

℞
Quiniae Sulph...... 3 ss.
Tr. Capsici..... gttss. x.
Tr. Ferri mur...... fl. ʒ ij.
Aquae dist. q. s. ad...... “ ʒ iv.

M.-Sig.: -ʒj three times a day before meals.

O. J. Perkins M.D.

For.....

Age.....

No. 30.

℞
Quiniae Sulph...... 3 ss.
Tr. Capsici..... gttss. x.
Tr. Ferri mur...... fl. ʒ ij.
Aquae dist. q. s. ad...... “ ʒ iv.

M.-Sig.: -ʒj three times a day before meals.

O. J. Perkins M.D.

For.....

Age.....

No. 30.

℞
Quiniae Sulph...... 3 ss.
Tr. Capsici..... gttss. x.
Tr. Ferri mur...... fl. ʒ ij.
Aquae dist. q. s. ad...... “ ʒ iv.

M.-Sig.: -ʒj three times a day before meals.

O. J. Perkins M.D.

For.....

Age.....

No. 30.

℞
Quiniae Sulph...... 3 ss.
Tr. Capsici..... gttss. x.
Tr. Ferri mur...... fl. ʒ ij.
Aquae dist. q. s. ad...... “ ʒ iv.

M.-Sig.: -ʒj three times a day before meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{30}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{30}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{30}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{30}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

VALVULAR DISEASE OF THE HEART.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 31.

R

℞ *N. Ext. Lily of the Valley (P. D. & Co.).* fl. ʒ ij.
Syrup Simp...... " ʒ vj.
Aqua q. s. ad...... " ʒ ij.

M.-Sig.:—ʒj every 4, 6, or 8 hours, as required.

O. J. Perkins M.D.

For.....

Age.....

No. 31.

R

℞ *N. Ext. Lily of the Valley (P. D. & Co.).* fl. ʒ ij.
Syrup Simp...... " ʒ vj.
Aqua q. s. ad...... " ʒ ij.

M.-Sig.:—ʒj every 4, 6, or 8 hours, as required.

O. J. Perkins M.D.

For.....

Age.....

No. 31.

R

℞ *N. Ext. Lily of the Valley (P. D. & Co.).* fl. ʒ ij.
Syrup Simp...... " ʒ vj.
Aqua q. s. ad...... " ʒ ij.

M.-Sig.:—ʒj every 4, 6, or 8 hours, as required.

O. J. Perkins M.D.

For.....

Age.....

No. 31.

R

℞ *N. Ext. Lily of the Valley (P. D. & Co.).* fl. ʒ ij.
Syrup Simp...... " ʒ vj.
Aqua q. s. ad...... " ʒ ij.

M.-Sig.:—ʒj every 4, 6, or 8 hours, as required.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

CANKER SORE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 32.

- R Quinine Sulph. 3 ss.
- Tr. Capsici fl. ʒ ij.
- Tr. Nucis Vom " ʒ ij.
- Tr. Rhei " ʒ ss.
- Syrup Simp. q. s. ad. " ʒ iv.

M.-Sig.:—j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 32.

- R Quinine Sulph. ʒ ss.
- Tr. Capsici fl. ʒ ij.
- Tr. Nucis Vom " ʒ ij.
- Tr. Rhei " ʒ ss.
- Syrup Simp. q. s. ad. " ʒ iv.

M.-Sig.:—j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 32.

- R Quinine Sulph. ʒ ss.
- Tr. Capsici fl. ʒ ij.
- Tr. Nucis Vom " ʒ ij.
- Tr. Rhei " ʒ ss.
- Syrup Simp. q. s. ad. " ʒ iv.

M.-Sig.:—j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 32.

- R Quinine Sulph. ʒ ss.
- Tr. Capsici fl. ʒ ij.
- Tr. Nucis Vom " ʒ ij.
- Tr. Rhei " ʒ ss.
- Syrup Simp. q. s. ad. " ʒ iv.

M.-Sig.:—j three times a day before meals.

O. J. Perkins M.D.

MERCURIAL SORE MOUTH.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 33.

R Potassa Chlorat (pulv.)..... 3 iij.
 Aqua..... fl. ʒ viij.

M.-Ft. solution. Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 33.

R Potassa Chlorat (pulv.)..... 3 iij.
 Aqua..... fl. ʒ viij.

M.-Ft. solution. Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 33.

R Potassa Chlorat (pulv.)..... 3 iij.
 Aqua..... fl. ʒ viij.

M.-Ft. solution. Sig.:—Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 33.

R Potassa Chlorat (pulv.)..... 3 iij.
 Aqua..... fl. ʒ viij.

M.-Ft. solution. Sig.:—Use as directed.

O. J. Perkins M.D.

THRUSH.

For ----- Age -----

No. 34.

R

Sodii Hyposulphis..... grs. ij.
Aqua..... fl. ʒ ij.

M.-Ft. solution. Sig. :-Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 34.

R

Sodii Hyposulphis..... grs. ij.
Aqua..... fl. ʒ ij.

M.-Ft. solution. Sig. :-Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 34.

R

Sodii Hyposulphis..... grs. ij.
Aqua..... fl. ʒ ij.

M.-Ft. solution. Sig. :-Use as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 34.

R

Sodii Hyposulphis..... grs. ij.
Aqua..... fl. ʒ ij.

M.-Ft. solution. Sig. :-Use as directed.

O. J. Perkins M.D.

APHTHÆ.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 35.

R Potass. Chloras. ʒ iʒss.
Aqua fl. ʒ iv.

M.-Ft. sol. et sig.:—3 j four times a day.

O. J. Perkins M.D.

For

Age

No. 35.

R Potass. Chloras. ʒ iʒss.
Aqua fl. ʒ iv.

M.-Ft. sol. et sig.:—3 j four times a day.

O. J. Perkins M.D.

For

Age

No. 35.

R Potass. Chloras. ʒ iʒss.
Aqua fl. ʒ iv.

M.-Ft. sol. et sig.:—3 j four times a day.

O. J. Perkins M.D.

For

Age

No. 35.

R Potass. Chloras. ʒ iʒss.
Aqua fl. ʒ iv.

M.-Ft. sol. et sig.:—3 j four times a day.

O. J. Perkins M.D.

APTHAE.

E. M. Vindick

APTHAE.
No. 27
No. 32

E. M. Vindick

APTHAE.
No. 27
No. 32

E. M. Vindick

APTHAE.
No. 27
No. 32

E. M. Vindick

APTHAE.
No. 27
No. 32

SORE MOUTH.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 36.

R Pulv. Alum..... 3 ij.
 Pow'd Ext. Hydrastis can. (P. D. & Co.) 3 iv.
 Symph. Adorata (White pond lily root.) 3 ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For..... Age.....

No. 36.

R Pulv. Alum..... 3 ij.
 Pow'd Ext. Hydrastis can. (P. D. & Co.) 3 iv.
 Symph. Adorata (White pond lily root.) 3 ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For..... Age.....

No. 36.

R Pulv. Alum..... 3 ij.
 Pow'd Ext. Hydrastis can. (P. D. & Co.) 3 iv.
 Symph. Adorata (White pond lily root.) 3 ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For..... Age.....

No. 36.

R Pulv. Alum..... 3 ij.
 Pow'd Ext. Hydrastis can. (P. D. & Co.) 3 iv.
 Symph. Adorata (White pond lily root.) 3 ij.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

SORE THROAT (PHARYNGITIS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 37.

- R Potass. Chloras..... ʒ iv.
- Tr. Ferri mur..... fl. ʒ j.
- Glycerina..... “ ʒ jss.
- Aqua q. s. ad..... “ ʒ iv.

M.-Sig.:—Use as a gargle.

O. J. Perkins M.D.

For.....

Age.....

No. 37.

- R Potass. Chloras..... ʒ iv.
- Tr. Ferri mur..... fl. ʒ j.
- Glycerina..... “ ʒ jss.
- Aqua q. s. ad..... “ ʒ iv.

M.-Sig.:—Use as a gargle.

O. J. Perkins M.D.

For.....

Age.....

No. 37.

- R Potass. Chloras..... ʒ iv.
- Tr. Ferri mur..... fl. ʒ j.
- Glycerina..... “ ʒ jss.
- Aqua q. s. ad..... “ ʒ iv.

M.-Sig.:—Use as a gargle.

O. J. Perkins M.D.

For.....

Age.....

No. 37.

- R Potass. Chloras..... ʒ iv.
- Tr. Ferri mur..... fl. ʒ j.
- Glycerina..... “ ʒ jss.
- Aqua q. s. ad..... “ ʒ iv.

M.-Sig.:—Use as a gargle.

O. J. Perkins M.D.

CLERGYMAN'S SORE THROAT (Chronic Pharyngitis).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 38.

R
Potass. Bromide ʒ j.
M. Ex. Hydras. Can. (non-alco.) P. D. & Co. fl. ʒ j.
Aqua dist. q. s. ad. “ ʒ xvj.

M.-Sig.—Use one tablespoonful night and morning as a gargle.

O. J. Perkins M.D.

For..... Age.....

No. 38.

R
Potass. Bromide ʒ j.
M. Ex. Hydras. Can. (non-alco.) P. D. & Co. fl. ʒ j.
Aqua dist. q. s. ad. “ ʒ xvj.

M.-Sig.—Use one tablespoonful night and morning as a gargle.

O. J. Perkins M.D.

For..... Age.....

No. 38.

R
Potass. Bromide ʒ j.
M. Ex. Hydras. Can. (non-alco.) P. D. & Co. fl. ʒ j.
Aqua dist. q. s. ad. “ ʒ xvj.

M.-Sig.—Use one tablespoonful night and morning as a gargle.

O. J. Perkins M.D.

For..... Age.....

No. 38.

R
Potass. Bromide ʒ j.
M. Ex. Hydras. Can. (non-alco.) P. D. & Co. fl. ʒ j.
Aqua dist. q. s. ad. “ ʒ xvj.

M.-Sig.—Use one tablespoonful night and morning as a gargle.

O. J. Perkins M.D.

CLERGYMAN'S SORE THROAT.

NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 39.

℞ *Sr. Suanaci Am.*.....
Sr. Cubebae.....
Syrup Senegae.....
Syrup Simp......

} aa. fl. ʒj.

M.-Sig.:—j in soft water three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 39.

℞ *Sr. Suanaci Am.*.....
Sr. Cubebae.....
Syrup Senegae.....
Syrup Simp......

} aa. fl. ʒj.

M.-Sig.:—j in soft water three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 39.

℞ *Sr. Suanaci Am.*.....
Sr. Cubebae.....
Syrup Senegae.....
Syrup Simp......

} aa. fl. ʒj.

M.-Sig.:—j in soft water three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 39.

℞ *Sr. Suanaci Am.*.....
Sr. Cubebae.....
Syrup Senegae.....
Syrup Simp......

} aa. fl. ʒj.

M.-Sig.:—j in soft water three times a day.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

QUINSY (TONSILLITIS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 40.

R

Potassa Chlor..... ʒj.
 Fr. Ferri mur..... fl. ʒj.
 Glycerina q. s. ad..... " ʒj.

M.-Sig.:—Use as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 40.

R

Potassa Chlor..... ʒj.
 Fr. Ferri mur..... fl. ʒj.
 Glycerina q. s. ad..... " ʒj.

M.-Sig.:—Use as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 40.

R

Potassa Chlor..... ʒj.
 Fr. Ferri mur..... fl. ʒj.
 Glycerina q. s. ad..... " ʒj.

M.-Sig.:—Use as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 40.

R

Potassa Chlor..... ʒj.
 Fr. Ferri mur..... fl. ʒj.
 Glycerina q. s. ad..... " ʒj.

M.-Sig.:—Use as directed.

C. J. Perkins M.D.

QUINSY—FEVER IN CHILDREN.

NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 41.

R *Sr. Aconiti*..... gtts. v.
Aqua pura..... fl. ʒ iv.

M.—Sig.:—ʒj every fifteen to twenty minutes to allay fever.

C. J. Perkins M.D.

For ----- Age -----

No. 41.

R *Sr. Aconiti*..... gtts. v.
Aqua pura..... fl. ʒ iv.

M.—Sig.:—ʒj every fifteen to twenty minutes to allay fever.

C. J. Perkins M.D.

For ----- Age -----

No. 41.

R *Sr. Aconiti*..... gtts. v.
Aqua pura..... fl. ʒ iv.

M.—Sig.:—ʒj every fifteen to twenty minutes to allay fever.

C. J. Perkins M.D.

For ----- Age -----

No. 41.

R *Sr. Aconiti*..... gtts. v.
Aqua pura..... fl. ʒ iv.

M.—Sig.:—ʒj every fifteen to twenty minutes to allay fever.

C. J. Perkins M.D.

CHRONIC TONSILLITIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 42.

R

Potass. Brom. ʒ j.
Tinct. Ferri mur. fl. ʒ ij.
Glycerina “ ʒ j.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 42.

R

Potass. Brom. ʒ j.
Tinct. Ferri mur. fl. ʒ ij.
Glycerina “ ʒ j.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 42.

R

Potass. Brom. ʒ j.
Tinct. Ferri mur. fl. ʒ ij.
Glycerina “ ʒ j.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 42.

R

Potass. Brom. ʒ j.
Tinct. Ferri mur. fl. ʒ ij.
Glycerina “ ʒ j.

M.-Sig.:—Use as directed.

O. J. Perkins M.D.

CHRONIC TONSILLITIS.

FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 43.

Rx

Quiniae Sulph. 3 ss.
Ext. Glycyrr. fluid. fl. ʒ j.
Syrup Simp. " ʒ iv.

M.-Sig.:—3j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 43.

Rx

Quiniae Sulph. 3 ss.
Ext. Glycyrr. fluid. fl. ʒ j.
Syrup Simp. " ʒ iv.

M.-Sig.:—3j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 43.

Rx

Quiniae Sulph. 3 ss.
Ext. Glycyrr. fluid. fl. ʒ j.
Syrup Simp. " ʒ iv.

M.-Sig.:—3j three times a day before meals.

O. J. Perkins M.D.

For ----- Age -----

No. 43.

Rx

Quiniae Sulph. 3 ss.
Ext. Glycyrr. fluid. fl. ʒ j.
Syrup Simp. " ʒ iv.

M.-Sig.:—3j three times a day before meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

GASTRIC FEVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 44.

R *Bismuthi subcarb* 3 j.
Morphiae Sulph gr. j.

M.-et div. into pulv. No. xii. Sig.—One powder every three to four hours as required.

O. J. Perkins M.D.

For ----- Age -----

No. 44.

R *Bismuthi subcarb* 3 j.
Morphiae Sulph gr. j.

M.-et div. into pulv. No. xii. Sig.—One powder every three to four hours as required.

O. J. Perkins M.D.

For ----- Age -----

No. 44.

R *Bismuthi subcarb* 3 j.
Morphiae Sulph gr. j.

M.-et div. into pulv. No. xii. Sig.—One powder every three to four hours as required.

O. J. Perkins M.D.

For ----- Age -----

No. 44.

R *Bismuthi subcarb* 3 j.
Morphiae Sulph gr. j.

M.-et div. into pulv. No. xii. Sig.—One powder every three to four hours as required.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

SICK HEADACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 45.

Rx

Pepsin Cordial. (P. D. & Co.)... fl. ʒ iiij.

Sig.:—One or two teaspoonfuls after each meal as may be required.

O. J. Perkins M.D.

For ----- Age -----

No. 45.

Rx

Pepsin Cordial. (P. D. & Co.)... fl. ʒ iiij.

Sig.:—One or two teaspoonfuls after each meal as may be required.

O. J. Perkins M.D.

For ----- Age -----

No. 45.

Rx

Pepsin Cordial. (P. D. & Co.)... fl. ʒ iiij.

Sig.:—One or two teaspoonfuls after each meal as may be required.

O. J. Perkins M.D.

For ----- Age -----

No. 45.

Rx

Pepsin Cordial. (P. D. & Co.)... fl. ʒ iiij.

Sig.:—One or two teaspoonfuls after each meal as may be required.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

DYSPEPSIA—REGURGITATION.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 46.

R

Tinct. Columbae..... fl. ʒj.
Aqua q. s. ad...... “ ʒiv.

M.-Sig.:—ʒj before each meal.

O. J. Perkins M.D.

For----- Age-----

No. 46.

R

Tinct. Columbae..... fl. ʒj.
Aqua q. s. ad...... “ ʒiv.

M.-Sig.:—ʒj before each meal.

O. J. Perkins M.D.

For----- Age-----

No. 46.

R

Tinct. Columbae..... fl. ʒj.
Aqua q. s. ad...... “ ʒiv.

M.-Sig.:—ʒj before each meal.

O. J. Perkins M.D.

For----- Age-----

No. 46.

R

Tinct. Columbae..... fl. ʒj.
Aqua q. s. ad...... “ ʒiv.

M.-Sig.:—ʒj before each meal.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

DYSPEPSIA—WATERBRASH.

For ----- Age -----

No. 47.

℞ *Bismuthi subcarb.* ʒ iv.

Div. into pulv. No. xxiv.

Sig.:—One powder in a tablespoonful of water or milk three times a day before meals.

J. J. Perkins M.D.

For ----- Age -----

No. 47.

℞ *Bismuthi subcarb.* ʒ iv.

Div. into pulv. No. xxiv.

Sig.:—One powder in a tablespoonful of water or milk three times a day before meals.

J. J. Perkins M.D.

For ----- Age -----

No. 47.

℞ *Bismuthi subcarb.* ʒ iv.

Div. into pulv. No. xxiv.

Sig.:—One powder in a tablespoonful of water or milk three times a day before meals.

J. J. Perkins M.D.

For ----- Age -----

No. 47.

℞ *Bismuthi subcarb.* ʒ iv.

Div. into pulv. No. xxiv.

Sig.:—One powder in a tablespoonful of water or milk three times a day before meals.

J. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

DYSPEPSIA—CAULIALGIA—HEARTBURN.

For

No. 48.

R

Tinct. Senticianae..... } aa. fl. ʒ j.
Spts. Am. Sr...... }
Aqua q. s. ad...... " ʒ iv.

M.-Sig.:—ʒj one hour after meals.

O. J. Perkins M.D.

Age

No. 48.

R

Tinct. Senticianae..... } aa. fl. ʒ j.
Spts. Am. Sr...... }
Aqua q. s. ad...... " ʒ iv.

M.-Sig.:—ʒj one hour after meals.

O. J. Perkins M.D.

For

No. 48.

R

Tinct. Senticianae..... } aa. fl. ʒ j.
Spts. Am. Sr...... }
Aqua q. s. ad...... " ʒ iv.

M.-Sig.:—ʒj one hour after meals.

O. J. Perkins M.D.

Age

For

No. 48.

R

Tinct. Senticianae..... } aa. fl. ʒ j.
Spts. Am. Sr...... }
Aqua q. s. ad...... " ʒ iv.

M.-Sig.:—ʒj one hour after meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty one years, full dose.		

DYSPEPSIA—TYMPANITIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 49.

- ℞ Pulv. Ext. Nucis Vom. (P. D. & Co.) . grs. ij.
 " Rhei " xij.
 " Specac " vj.
 " Capsici " ij.

M.-et div. in pilulae No. xij.

O. J. Perkins M.D.

For ----- Age -----

No. 49.

- ℞ Pulv. Ext. Nucis Vom. (P. D. & Co.) . grs. ij.
 " Rhei " xij.
 " Specac " vj.
 " Capsici " ij.

M.-et div. in pilulae No. xij.

O. J. Perkins M.D.

For ----- Age -----

No. 49.

- ℞ Pulv. Ext. Nucis Vom. (P. D. & Co.) . grs. ij.
 " Rhei " xij.
 " Specac " vj.
 " Capsici " ij.

M.-et div. in pilulae No. xij.

O. J. Perkins M.D.

For ----- Age -----

No. 49.

- ℞ Pulv. Ext. Nucis Vom. (P. D. & Co.) . grs. ij.
 " Rhei " xij.
 " Specac " vj.
 " Capsici " ij.

M.-et div. in pilulae No. xij.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{10}$	
Nine to twelve years, $\frac{1}{10}$	
Thirteen to sixteen, $\frac{1}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{10}$	
Nine to twelve years, $\frac{1}{10}$	
Thirteen to sixteen, $\frac{1}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{10}$	
Nine to twelve years, $\frac{1}{10}$	
Thirteen to sixteen, $\frac{1}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{10}$	
Nine to twelve years, $\frac{1}{10}$	
Thirteen to sixteen, $\frac{1}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

DIARRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

Age-----

No. 50.

- ℞ *Tinct. Opii deodorata* fl. ʒ ss.
- " *Rhei* " ʒ ss.
- " *Catechu comp. (U. S. P.)* " ʒ j.
- Oleum Sassafras* gtts. xx.
- Tinct. Lavandulæ comp. q. s. ad.* fl. ʒ iv.

M.-Sig 1-3 j every two, four, or six hours as required.—"Dr. Lomis."

For-----

Age-----

No. 50.

- ℞ *Tinct. Opii deodorata* fl. ʒ ss.
- " *Rhei* " ʒ ss.
- " *Catechu comp. (U. S. P.)* " ʒ j.
- Oleum Sassafras* gtts. xx.
- Tinct. Lavandulæ comp. q. s. ad.* fl. ʒ iv.

M.-Sig 1-3 j every two, four, or six hours as required.—"Dr. Lomis."

For-----

Age-----

No. 50.

- ℞ *Tinct. Opii deodorata* fl. ʒ ss.
- " *Rhei* " ʒ ss.
- " *Catechu comp. (U. S. P.)* " ʒ j.
- Oleum Sassafras* gtts. xx.
- Tinct. Lavandulæ comp. q. s. ad.* fl. ʒ iv.

M.-Sig 1-3 j every two, four, or six hours as required.—"Dr. Lomis."

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

DIARRHOEA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----
No. 51.
 R
Tinct. Rhei } aa. fl. ʒ iv.
 " *Opii deodorata* }
Bismuthi subcarb. ʒ iv.
Acid Carbolie (pura) ʒ ss.
Tinct. Lavendulae fl. ʒ j.
Syrup Simp. q. s. ad. " ʒ v.
 M.-Sig.:— Shake thoroughly, and give ʒ j every two, four or six hours, as required.

O. J. Perkins M.D.

For ----- Age -----
No. 51.
 R
Tinct. Rhei } aa. fl. ʒ iv.
 " *Opii deodorata* }
Bismuthi subcarb. ʒ iv.
Acid Carbolie (pura) ʒ ss.
Tinct. Lavendulae fl. ʒ j.
Syrup Simp. q. s. ad. " ʒ iv.
 M.-Sig.:— Shake thoroughly, and give ʒ j every two, four or six hours, as required.

O. J. Perkins M.D.

For ----- Age -----
No. 51.
 R
Tinct. Rhei } aa. fl. ʒ iv.
 " *Opii deodorata* }
Bismuthi subcarb. ʒ iv.
Acid Carbolie (pura) ʒ ss.
Tinct. Lavendulae fl. ʒ j.
Syrup Simp. q. s. ad. " ʒ iv.
 M.-Sig.:— Shake thoroughly, and give ʒ j every two, four or six hours, as required.

O. J. Perkins M.D.

For ----- Age -----
No. 51.
 R
Tinct. Rhei } aa. fl. ʒ iv.
 " *Opii deodorata* }
Bismuthi subcarb. ʒ iv.
Acid Carbolie (pura) ʒ ss.
Tinct. Lavendulae fl. ʒ j.
Syrup Simp. q. s. ad. " ʒ iv.
 M.-Sig.:— Shake thoroughly, and give ʒ j every two, four or six hours, as required.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

CHRONIC DIARRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 52.

R *Bismuthi subcarb.*..... 3 iv.
Morphia Sulph...... gr. j.
M.-et div. in pulv. No. xvj. Sig.:—Take one powder night and morning.

O. J. Perkins M.D.

For..... Age.....

No. 52.

R *Bismuthi subcarb.*..... 3 iv.
Morphia Sulph...... gr. j.
M.-et div. in pulv. No. xvj. Sig.:—Take one powder night and morning.

O. J. Perkins M.D.

For..... Age.....

No. 52.

R *Bismuthi subcarb.*..... 3 iv.
Morphia Sulph...... gr. j.
M.-et div. in pulv. No. xvj. Sig.:—Take one powder night and morning.

O. J. Perkins M.D.

For..... Age.....

No. 52.

R *Bismuthi subcarb.*..... 3 iv.
Morphia Sulph...... gr. j.
M.-et div. in pulv. No. xvj. Sig.:—Take one powder night and morning.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

DYSENTERY.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 53.

B

- Morphiæ Sulph.* grs. vj.
- Cosmo-line.* " LXIV.
- White Wax.* " XX.
- Oléum Theobromæ* " XC.

M.-et ft. suppos. No. xij. Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 53.

B

- Morphiæ Sulph.* grs. vj.
- Cosmo-line.* " LXIV.
- White Wax.* " XX.
- Oléum Theobromæ* " XC.

M.-et ft. suppos. No. xij. Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 53.

B

- Morphiæ Sulph.* grs. vj.
- Cosmo-line.* " LXIV.
- White Wax.* " XX.
- Oléum Theobromæ* " XC.

M.-et ft. suppos. No. xij. Sig.:—Use as directed.

O. J. Perkins M.D.

For

Age

No. 53.

B

- Morphiæ Sulph.* grs. vj.
- Cosmo-line.* " LXIV.
- White Wax.* " XX.
- Oléum Theobromæ* " XC.

M.-et ft. suppos. No. xij. Sig.:—Use as directed.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

DYSENTERY.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 54.

R Pulv. Epii..... GTS. XX.
 " Resinae..... " XXX
 " Acaciae..... " XX.
 Aqua q. s.

M.-et div. in pilulae xxv. Sig.:—One pill every four hours until relieved.

O. J. Perkins M.D.

For ----- Age -----

No. 54.

R Pulv. Epii..... GTS. XX.
 " Resinae..... " XXX
 " Acaciae..... " XX.
 Aqua q. s.

M.-et div. in pilulae xxv. Sig.:—One pill every four hours until relieved.

O. J. Perkins M.D.

For ----- Age -----

No. 54.

R Pulv. Epii..... GTS. XX.
 " Resinae..... " XXX
 " Acaciae..... " XX.
 Aqua q. s.

M.-et div. in pilulae xxv. Sig.:—One pill every four hours until relieved.

O. J. Perkins M.D.

For ----- Age -----

No. 54.

R Pulv. Epii..... GTS. XX.
 " Resinae..... " XXX
 " Acaciae..... " XX.
 Aqua q. s.

M.-et div. in pilulae xxv. Sig.:—One pill every four hours until relieved.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

EPIDEMIC DYSENTERY.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 55.

R
Morphine Sulph...... grs. ij.
Tinct. Rhei..... fl. ʒ j.
Aqua Cinnamomi q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two hours until four doses are given, then at longer intervals as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 55.

R
Morphine Sulph...... grs. ij.
Tinct. Rhei..... fl. ʒ j.
Aqua Cinnamomi q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two hours until four doses are given, then at longer intervals as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 55.

R
Morphine Sulph...... grs. ij.
Tinct. Rhei..... fl. ʒ j.
Aqua Cinnamomi q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two hours until four doses are given, then at longer intervals as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 55.

R
Morphine Sulph...... grs. ij.
Tinct. Rhei..... fl. ʒ j.
Aqua Cinnamomi q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two hours until four doses are given, then at longer intervals as directed.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{3}{8}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{3}{8}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{3}{8}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{3}{8}$	
At twenty-one years, full dose.		

CONSTIPATION.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 56.

R *Cascara Cordial* (P. D. & Co.).. fl. ʒ xij.

Sig.:--Take as directed.

O. J. Perkins M.D.

For..... Age.....

No. 56.

R *Cascara Cordial* (P. D. & Co.).. fl. ʒ xij.

Sig.:--Take as directed.

O. J. Perkins M.D.

For..... Age.....

No. 56.

R *Cascara Cordial* (P. D. & Co.).. fl. ʒ xij.

Sig.:--Take as directed.

O. J. Perkins M.D.

For..... Age.....

No. 56.

R *Cascara Cordial* (P. D. & Co.).. fl. ʒ xij.

Sig.:--Take as directed.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

CONSTIPATION.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 57.

R
 Pulv. Ex. Aloe. Soc. (P. D. & Co.) } aa. 3 j.
 " " Hyoscyami, " " }
 " " Specac, " " }
 " " Nucis Vomicae, " " } aa. grs. xij.

M.-et ft. pilulae No. cxx. Sig.—Dose, one to three pills at bedtime.

O. J. Perkins M.D.

For ----- Age -----

No. 57.

R
 Pulv. Ex. Aloe. Soc. (P. D. & Co.) } aa. 3 j.
 " " Hyoscyami, " " }
 " " Specac, " " }
 " " Nucis Vomicae, " " } aa. grs. xij.

M.-et ft. pilulae No. cxx. Sig.—Dose, one to three pills at bedtime.

O. J. Perkins M.D.

For ----- Age -----

No. 57.

R
 Pulv. Ex. Aloe. Soc. (P. D. & Co.) } aa. 3 j.
 " " Hyoscyami, " " }
 " " Specac, " " }
 " " Nucis Vomicae, " " } aa. grs. xij.

M.-et ft. pilulae No. cxx. Sig.—Dose, one to three pills at bedtime.

O. J. Perkins M.D.

For ----- Age -----

No. 57.

R
 Pulv. Ex. Aloe. Soc. (P. D. & Co.) } aa. 3 j.
 " " Hyoscyami, " " }
 " " Specac, " " }
 " " Nucis Vomicae, " " } aa. grs. xij.

M.-et ft. pilulae No. cxx. Sig.—Dose, one to three pills at bedtime.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

INTESTINAL COLIC.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 58.

R Morphine Sulph. gr. j.
 Pulv. Pepsinum purum (P. D. & Co.) grs. iv.
 Bismuthi Subnit. xij.

M.-et div. in pulv. No. iv. Sig.:—One powder every half hour to relieve pain

O. J. Perkins M.D.

For ----- Age -----

No. 58.

R Morphine Sulph. gr. j.
 Pulv. Pepsinum purum (P. D. & Co.) grs. iv.
 Bismuthi Subnit. xij.

M.-et div. in pulv. No. iv. Sig.:—One powder every half hour to relieve pain.

O. J. Perkins M.D.

For ----- Age -----

No. 58.

R Morphine Sulph. gr. j.
 Pulv. Pepsinum purum (P. D. & Co.) grs. iv.
 Bismuthi Subnit. xij.

M.-et div. in pulv. No. iv. Sig.:—One powder every half hour to relieve pain

O. J. Perkins M.D.

For ----- Age -----

No. 58.

R Morphine Sulph. gr. j.
 Pulv. Pepsinum purum (P. D. & Co.) grs. iv.
 Bismuthi Subnit. xij.

M.-et div. in pulv. No. iv. Sig.:—One powder every half hour to relieve pain

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

LEAD COLIC.

For ----- Age -----

No. 59.

℞ *Jr. Aconiti*
 (Made from P. D. & Co.'s normal liquid.)
Chloroform
Glycerina } aa. fl. ʒ j.

M.-Sig.:—Apply externally as directed. Shake well before using.

O. J. Perkins M.D.

For ----- Age -----

No. 59.

℞ *Jr. Aconiti*
 (Made from P. D. & Co.'s normal liquid.)
Chloroform
Glycerina } aa. fl. ʒ j.

M.-Sig.:—Apply externally as directed. Shake well before using.

O. J. Perkins M.D.

For ----- Age -----

No. 59.

℞ *Jr. Aconiti*
 (Made from P. D. & Co.'s normal liquid.)
Chloroform
Glycerina } aa. fl. ʒ j.

M.-Sig.:—Apply externally as directed. Shake well before using.

O. J. Perkins M.D.

For ----- Age -----

No. 59.

℞ *Jr. Aconiti*
 (Made from P. D. & Co.'s normal liquid.)
Chloroform
Glycerina } aa. fl. ʒ j.

M.-Sig.:—Apply externally as directed. Shake well before using.

O. J. Perkins M.D.

LEAD COLIC.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 60.

R Potass. Iodidi ʒ ijss.
 Tinct. Sennae comp. } aa. fl. ʒ ss.
 " Cardam. comp. }
 Aqua q. s. ad. fl. ʒ iv.

M.-Sig.:—ʒj three times a day after meals.

O. J. Perkins M.D.

For ----- Age -----

No. 60.

R Potass. Iodidi ʒ ijss.
 Tinct. Sennae comp. } aa. fl. ʒ ss.
 " Cardam. comp. }
 Aqua q. s. ad. fl. ʒ iv.

M.-Sig.:—ʒj three times a day after meals.

O. J. Perkins M.D.

For ----- Age -----

No. 60.

R Potass. Iodidi ʒ ijss.
 Tinct. Sennae comp. } aa. fl. ʒ ss.
 " Cardam. comp. }
 Aqua q. s. ad. fl. ʒ iv.

M.-Sig.:—ʒj three times a day after meals.

O. J. Perkins M.D.

For ----- Age -----

No. 60.

R Potass. Iodidi ʒ ijss.
 Tinct. Sennae comp. } aa. fl. ʒ ss.
 " Cardam. comp. }
 Aqua q. s. ad. fl. ʒ iv.

M.-Sig.:—ʒj three times a day after meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

PERITONITIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 61.

R

Cloum Terebinth fl. ʒ j.
Fluid Opium (P. D. & Co.) “ ʒ vj.
Mucil. Acac. “ ʒ iv.

M.-Sig.:—ʒj every two hours.

O. J. Perkins M. D.

For

Age

No. 61.

R

Cloum Terebinth fl. ʒ j.
Fluid Opium (P. D. & Co.) “ ʒ vj.
Mucil. Acac. “ ʒ iv.

M.-Sig.:—ʒj every two hours.

O. J. Perkins M. D.

For

Age

No. 61.

R

Cloum Terebinth fl. ʒ j.
Fluid Opium (P. D. & Co.) “ ʒ vj.
Mucil. Acac. “ ʒ iv.

M.-Sig.:—ʒj every two hours.

O. J. Perkins M. D.

For

Age

No. 61.

R

Cloum Terebinth fl. ʒ j.
Fluid Opium (P. D. & Co.) “ ʒ vj.
Mucil. Acac. “ ʒ iv.

M.-Sig.:—ʒj every two hours.

O. J. Perkins M. D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

DROPSY OF THE PERITONEUM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 62.

R

Pub. Zingiberis grs. xxx
 " *Jalapae* " xl.
Potassa Bitartras " lxxx.

M.-et div. in pulv. No. 4. Sig.:—One powder every other night.

O. J. Perkins M.D.

For

Age

No. 62.

R

Pub. Zingiberis grs. xxx
 " *Jalapae* " xl.
Potassa Bitartras " lxxx.

M.-et div. in pulv. No. 4. Sig.:—One powder every other night.

O. J. Perkins M.D.

For

Age

No. 62.

R

Pub. Zingiberis grs. xxx
 " *Jalapae* " xl.
Potassa Bitartras " lxxx.

M.-et div. in pulv. No. 4. Sig.:—One powder every other night.

O. J. Perkins M.D.

For

Age

No. 62.

R

Pub. Zingiberis grs. xxx
 " *Jalapae* " xl.
Potassa Bitartras " lxxx.

M.-et div. in pulv. No. 4. Sig.:—One powder every other night.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

FUNCTIONAL AFFECTIONS OF THE LIVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 63.

R *Sodii Sulphas* ʒj.
Aqua q. s. to dissolve.
Acid. Sulph. arom gtts. xj.

M.-Sig.:—Take one-half upon retiring, and balance in the morning, if required, to cause a free evacuation.

O. J. Perkins M.D.

For ----- Age -----

No. 63.

R *Sodii Sulphas* ʒj.
Aqua q. s. to dissolve.
Acid. Sulph. arom gtts. xj.

M.-Sig.:—Take one-half upon retiring, and balance in the morning, if required, to cause a free evacuation.

O. J. Perkins M.D.

For ----- Age -----

No. 63.

R *Sodii Sulphas* ʒj.
Aqua q. s. to dissolve.
Acid. Sulph. arom gtts. xj.

M.-Sig.:—Take one-half upon retiring, and balance in the morning, if required, to cause a free evacuation.

O. J. Perkins M.D.

For ----- Age -----

No. 63.

R *Sodii Sulphas* ʒj.
Aqua q. s. to dissolve.
Acid. Sulph. arom gtts. xj.

M.-Sig.:—Take one-half upon retiring, and balance in the morning, if required, to cause a free evacuation.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

FUNCTIONAL AFFECTIONS OF THE LIVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 64.

℞

Acid. Nitro. Hydrochlor. dil. ʒvj.
Aqua pura q. s. ad. fl. ʒiv.

M.-Sig.:—ʒj three times a day before meals.

C. J. Perkins M.D.

For.....

Age.....

No. 64.

℞

Acid. Nitro. Hydrochlor. dil. ʒvj.
Aqua pura q. s. ad. fl. ʒiv.

M.-Sig.:—ʒj three times a day before meals.

C. J. Perkins M.D.

For.....

Age.....

No. 64.

℞

Acid. Nitro. Hydrochlor. dil. ʒvj.
Aqua pura q. s. ad. fl. ʒiv.

M.-Sig.:—ʒj three times a day before meals.

C. J. Perkins M.D.

For.....

Age.....

No. 64.

℞

Acid. Nitro. Hydrochlor. dil. ʒvj.
Aqua pura q. s. ad. fl. ʒiv.

M.-Sig.:—ʒj three times a day before meals.

C. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{3}$	
At twenty-one years, full dose.	

COLD IN THE HEAD—CORYZA—NASAL CATARRH.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 65.

℞ *Jr. Opii*..... gtts. xv.
Vin. Specac..... " XXX.
Jr. Capsici..... " V.
Aqua q. s. ad..... fl. ʒ j.

M.—Sig.:—Take at one dose as directed

C. J. Perkins M.D.

For..... Age.....

No. 65.

℞ *Jr. Opii*..... gtts. xv.
Vin. Specac..... " XXX.
Jr. Capsici..... " V.
Aqua q. s. ad..... fl. ʒ j.

M.—Sig.:—Take at one dose as directed

C. J. Perkins M.D.

For..... Age.....

No. 65.

℞ *Jr. Opii*..... gtts. xv.
Vin. Specac..... " XXX.
Jr. Capsici..... " V.
Aqua q. s. ad..... fl. ʒ j.

M.—Sig.:—Take at one dose as directed

C. J. Perkins M.D.

For..... Age.....

No. 65.

℞ *Jr. Opii*..... gtts. xv.
Vin. Specac..... " XXX.
Jr. Capsici..... " V.
Aqua q. s. ad..... fl. ʒ j.

M.—Sig.:—Take at one dose as directed

C. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

CHRONIC CATARRH.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 66.

R *Calcium Iodidi*..... grs. xvj.
Syrup Trifolium comp. (P. D. & Co.) fl. ʒ viij.
M.-Sig.:—j three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 66.

R *Calcium Iodidi*..... grs. xvj.
Syrup Trifolium comp. (P. D. & Co.) fl. ʒ viij.
M.-Sig.:—j three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 66.

R *Calcium Iodidi*..... grs. xvj.
Syrup Trifolium comp. (P. D. & Co.) fl. ʒ viij.
M.-Sig.:—j three times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 66.

R *Calcium Iodidi*..... grs. xvj.
Syrup Trifolium comp. (P. D. & Co.) fl. ʒ viij.
M.-Sig.:—j three times a day.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{4}$	
Thirteen to sixteen,	$\frac{1}{3}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{4}$	
Thirteen to sixteen,	$\frac{1}{3}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{4}$	
Thirteen to sixteen,	$\frac{1}{3}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{4}$	
Thirteen to sixteen,	$\frac{1}{3}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

CHRONIC CATARRH.

For ----- Age -----

No. 67.

R

Sodii Bicarb..... } aa. ʒ ij.
Sodii Boras..... }
Ac. Carbolic (pura)..... ʒ ss.
Glycerina..... fl. ʒ ij.
Aqua dist..... “ ʒ ij.

M.-Sig.:— Use a wineglassful as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 67.

R

Sodii Bicarb..... } aa. ʒ ij.
Sodii Boras..... }
Ac. Carbolic (pura)..... ʒ ss.
Glycerina..... fl. ʒ ij.
Aqua dist..... “ ʒ ij.

M.-Sig.:— Use a wineglassful as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 67.

R

Sodii Bicarb..... } aa. ʒ ij.
Sodii Boras..... }
Ac. Carbolic (pura)..... ʒ ss.
Glycerina..... fl. ʒ ij.
Aqua dist..... “ ʒ ij.

M.-Sig.:— Use a wineglassful as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 67.

R

Sodii Bicarb..... } aa. ʒ ij.
Sodii Boras..... }
Ac. Carbolic (pura)..... ʒ ss.
Glycerina..... fl. ʒ ij.
Aqua dist..... “ ʒ ij.

M.-Sig.:— Use a wineglassful as directed.

O. J. Perkins M.D.

Chronic Catarrh

NOTE: TO GO ON

Chronic Catarrh

NOTE: TO GO ON

Chronic Catarrh

NOTE: TO GO ON

Chronic Catarrh

NOTE: TO GO ON

CROUP.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 68.

- R
- Ammonii Carb.* grs. viij.
 - Ammonii Chlor.* " xij.
 - Ex. Eucalyptus fluidum (P. D. & Co.)* fl. ʒ i ss.
 - Syrup Acaciae* " ʒ ss.
 - Syrup Wild Cherry q. s. ad.* " ʒ ij.

M.-Sig.—ʒj in milk or water every two, three or four hours.—⁶Col. and Clin. Rec.

O. J. Perkins M.D.

For ----- Age -----

No. 68.

- R
- Ammonii Carb.* grs. viij.
 - Ammonii Chlor.* " xij.
 - Ex. Eucalyptus fluidum (P. D. & Co.)* fl. ʒ i ss.
 - Syrup Acaciae* " ʒ ss.
 - Syrup Wild Cherry q. s. ad.* " ʒ ij.

M.-Sig.—ʒj in milk or water every two, three or four hours.—⁶Col. and Clin. Rec.

O. J. Perkins M.D.

For ----- Age -----

No. 68.

- R
- Ammonii Carb.* grs. viij.
 - Ammonii Chlor.* " xij.
 - Ex. Eucalyptus fluidum (P. D. & Co.)* fl. ʒ i ss.
 - Syrup Acaciae* " ʒ ss.
 - Syrup Wild Cherry q. s. ad.* " ʒ ij.

M.-Sig.—ʒj in milk or water every two, three or four hours.—⁶Col. and Clin. Rec.

O. J. Perkins M.D.

For ----- Age -----

No. 68.

- R
- Ammonii Carb.* grs. viij.
 - Ammonii Chlor.* " xij.
 - Ex. Eucalyptus fluidum (P. D. & Co.)* fl. ʒ i ss.
 - Syrup Acaciae* " ʒ ss.
 - Syrup Wild Cherry q. s. ad.* " ʒ ij.

M.-Sig.—ʒj in milk or water every two, three or four hours.—⁶Col. and Clin. Rec.

O. J. Perkins M.D.

WINTER COUGH.

For ----- Age -----

No. 69.

R *Anodyne Pine Expecto-
rant (P. D. & Co.).* A. 3 iv.

Sig.—3 j three to six times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 69.

R *Anodyne Pine Expecto-
rant (P. D. & Co.).* A. 3 iv.

Sig.—3 j three to six times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 69.

R *Anodyne Pine Expecto-
rant (P. D. & Co.).* A. 3 iv.

Sig.—3 j three to six times a day.

O. J. Perkins M.D.

For ----- Age -----

No. 69.

R *Anodyne Pine Expecto-
rant (P. D. & Co.).* A. 3 iv.

Sig.—3 j three to six times a day.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

WHOOPIING COUGH.

For ----- Age -----

No. 70.

℞ Potass. Brom. ʒ ij.
 Chloral Hydrat. ʒ j.
 Syrup Wild Cherry (P. D. & Co.).. fl. ʒ j.
 Aqua q. s. ad. “ ʒ ij.

M.-Sig.—3j every four to six hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 70.

℞ Potass. Brom. ʒ ij.
 Chloral Hydrat. ʒ j.
 Syrup Wild Cherry (P. D. & Co.).. fl. ʒ j.
 Aqua q. s. ad. “ ʒ ij.

M.-Sig.—3j every four to six hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 70.

℞ Potass. Brom. ʒ ij.
 Chloral Hydrat. ʒ j.
 Syrup Wild Cherry (P. D. & Co.).. fl. ʒ j.
 Aqua q. s. ad. “ ʒ ij.

M.-Sig.—3j every four to six hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 70.

℞ Potass. Brom. ʒ ij.
 Chloral Hydrat. ʒ j.
 Syrup Wild Cherry (P. D. & Co.).. fl. ʒ j.
 Aqua q. s. ad. “ ʒ ij.

M.-Sig.—3j every four to six hours as directed.

C. J. Perkins M.D.

WHOOPING COUGH.

PLEASE PRINT IN THIS SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 71.

R

Quinine Sulph. grs. xxxij.
Elixir of Licorice, (aromatic) . . . fl. ʒ ij.
 (P. D. & Co.)
Aqua q. s. ad. " ʒ iv.

M.-Sig.—ʒj four times a day.

C. J. Perkins M.D.

For

Age

No. 71.

R

Quinine Sulph. grs. xxxij.
Elixir of Licorice, (aromatic) . . . fl. ʒ ij.
 (P. D. & Co.)
Aqua q. s. ad. " ʒ iv.

M.-Sig.—ʒj four times a day.

C. J. Perkins M.D.

For

Age

No. 71.

R

Quinine Sulph. grs. xxxij.
Elixir of Licorice, (aromatic) . . . fl. ʒ ij.
 (P. D. & Co.)
Aqua q. s. ad. " ʒ iv.

M.-Sig.—ʒj four times a day.

C. J. Perkins M.D.

For

Age

No. 71.

R

Quinine Sulph. grs. xxxij.
Elixir of Licorice, (aromatic) . . . fl. ʒ ij.
 (P. D. & Co.)
Aqua q. s. ad. " ʒ iv.

M.-Sig.—ʒj four times a day.

C. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

ASTHMA.

For..... Age.....

No. 72.

- R Chlor. Anodyne (P. D. & Co.)..... fl. ʒ ij.
 N. Ex. Lily of the Valley (P. D. & Co.) " ʒ j.
 Tr. Lobelia..... " ʒ iv.
 Syrup Scillae..... " ʒ j.
 Syrup Simp..... " ʒ iv.

M.-Sig.—ʒ j every three hours or oftener, as directed.

O. J. Perkins M.D.

For..... Age.....

No. 72.

- R Chlor. Anodyne (P. D. & Co.)..... fl. ʒ ij.
 N. Ex. Lily of the Valley (P. D. & Co.) " ʒ j.
 Tr. Lobelia..... " ʒ iv.
 Syrup Scillae..... " ʒ j.
 Syrup Simp..... " ʒ iv.

M.-Sig.—ʒ j every three hours or oftener, as directed.

O. J. Perkins M.D.

For..... Age.....

No. 72.

- R Chlor. Anodyne (P. D. & Co.)..... fl. ʒ ij.
 N. Ex. Lily of the Valley (P. D. & Co.) " ʒ j.
 Tr. Lobelia..... " ʒ iv.
 Syrup Scillae..... " ʒ j.
 Syrup Simp..... " ʒ iv.

M.-Sig.—ʒ j every three hours or oftener, as directed.

O. J. Perkins M.D.

For..... Age.....

No. 72.

- R Chlor. Anodyne (P. D. & Co.)..... fl. ʒ ij.
 N. Ex. Lily of the Valley (P. D. & Co.) " ʒ j.
 Tr. Lobelia..... " ʒ iv.
 Syrup Scillae..... " ʒ j.
 Syrup Simp..... " ʒ iv.

M.-Sig.—ʒ j every three hours or oftener, as directed.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

ASTHMA.

Fill in the space for name and age, before taking to the drug store.

For

Age

No. 73.

R

Linci Valerianat...... grs. xxx.
Pil. Asafetidae comp...... ʒj.

M.-et ft. pilulae No. xxx. Sig.—One pill three times a day.

O. J. Perkins M.D.

For

Age

No. 73.

R

Linci Valerianat...... grs. xxx.
Pil. Asafetidae comp...... ʒj.

M.-et ft. pilulae No. xxx. Sig.—One pill three times a day.

O. J. Perkins M.D.

For

Age

No. 73.

R

Linci Valerianat...... grs. xxx.
Pil. Asafetidae comp...... ʒj.

M.-et ft. pilulae No. xxx. Sig.—One pill three times a day.

O. J. Perkins M.D.

For

Age

No. 73.

R

Linci Valerianat...... grs. xxx.
Pil. Asafetidae comp...... ʒj.

M.-et ft. pilulae No. xxx. Sig.—One pill three times a day.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

CHRONIC BRONCHITIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

No. 74.

℞ Ammon. Muriat..... ʒj.
 Syrup Senegae..... fl. ʒ ss.
 Tinct. Opii Camph..... ʒj.
 Syrup Solutanus..... ʒ ss.
 Aquae Saurtheriae q. s. ad..... ʒ ij.

M.-Sig.-ʒj four times a day.

O. J. Perkins M.D.

Age

For

No. 74.

℞ Ammon. Muriat..... ʒj.
 Syrup Senegae..... fl. ʒ ss.
 Tinct. Opii Camph..... ʒj.
 Syrup Solutanus..... ʒ ss.
 Aquae Saurtheriae q. s. ad..... ʒ ij.

M.-Sig.-ʒj four times a day.

O. J. Perkins M.D.

Age

For

No. 74.

℞ Ammon. Muriat..... ʒj.
 Syrup Senegae..... fl. ʒ ss.
 Tinct. Opii Camph..... ʒj.
 Syrup Solutanus..... ʒ ss.
 Aquae Saurtheriae q. s. ad..... ʒ ij.

M.-Sig.-ʒj four times a day.

O. J. Perkins M.D.

Age

For

No. 74.

℞ Ammon. Muriat..... ʒj.
 Syrup Senegae..... fl. ʒ ss.
 Tinct. Opii Camph..... ʒj.
 Syrup Solutanus..... ʒ ss.
 Aquae Saurtheriae q. s. ad..... ʒ ij.

M.-Sig.-ʒj four times a day.

O. J. Perkins M.D.

Age

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{30}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

CHRONIC BRONCHITIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 75.

R

Syrup *Trifolium comp.* (P. D. & Co.) fl. ʒ iv.
Potass. *Sodidi* ʒ j.

M.-Sig.—3j three times a day after meals.

O. J. Perkins M.D.

For

Age

No. 75.

R

Syrup *Trifolium comp.* (P. D. & Co.) fl. ʒ iv.
Potass. *Sodidi* ʒ j.

M.-Sig.—3j three times a day after meals.

O. J. Perkins M.D.

For

Age

No. 75.

R

Syrup *Trifolium comp.* (P. D. & Co.) fl. ʒ iv.
Potass. *Sodidi* ʒ j.

M.-Sig.—3j three times a day after meals.

O. J. Perkins M.D.

For

Age

No. 75.

R

Syrup *Trifolium comp.* (P. D. & Co.) fl. ʒ iv.
Potass. *Sodidi* ʒ j.

M.-Sig.—3j three times a day after meals.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty-one years, full dose.		

INFLUENZA—LA GRIPPE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 76.

R Phenacetine..... 3 j.

Div. and put into capsules No. xv. Sig.—One capsule every four hours as directed.

O. J. Perkins M.D.

For..... Age.....

No. 76.

R Phenacetine..... 3 j.

Div. and put into capsules No. xv. Sig.—One capsule every four hours as directed.

O. J. Perkins M.D.

For..... Age.....

No. 76.

R Phenacetine..... 3 j.

Div. and put into capsules No. xv. Sig.—One capsule every four hours as directed.

O. J. Perkins M.D.

For..... Age.....

No. 76.

R Phenacetine..... 3 j.

Div. and put into capsules No. xv. Sig.—One capsule every four hours as directed.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

PLEURISY.

For..... Age.....

No. 77.

R

Pulv. Specac et Opii..... ʒ ij.
Syrup Simp...... fl. ʒ j.
Aquae q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two, three or four hours as required to allay pain.

O. J. Perkins M.D.

For..... Age.....

No. 77.

R

Pulv. Specac et Opii..... ʒ ij.
Syrup Simp...... fl. ʒ j.
Aquae q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two, three or four hours as required to allay pain.

O. J. Perkins M.D.

For..... Age.....

No. 77.

R

Pulv. Specac et Opii..... ʒ ij.
Syrup Simp...... fl. ʒ j.
Aquae q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two, three or four hours as required to allay pain.

O. J. Perkins M.D.

For..... Age.....

No. 77.

R

Pulv. Specac et Opii..... ʒ ij.
Syrup Simp...... fl. ʒ j.
Aquae q. s. ad...... “ ʒ ij.

M.-Sig.—ʒ j every two, three or four hours as required to allay pain.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{2}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty one years, full dose.	

INFLAMMATION OF THE LUNG—PNEUMONIA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 78.

R Quinine Sulph. grs. xij.
Pulv. Opium. " j.

M. and put into four capsules. Sig.—two capsules at one dose every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 78.

R Quinine Sulph. grs. xij.
Pulv. Opium. " j.

M. and put into four capsules. Sig.—two capsules at one dose every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 78.

R Quinine Sulph. grs. xij.
Pulv. Opium. " j.

M. and put into four capsules. Sig.—two capsules at one dose every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 78.

R Quinine Sulph. grs. xij.
Pulv. Opium. " j.

M. and put into four capsules. Sig.—two capsules at one dose every two hours.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

CONSUMPTION OF THE LUNGS—COUGHING UP BLOOD

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 79.

R

M. Ex. Ergotae (P. D. & Co.)..... fl. ʒ iij.
Tinct. Opii..... “ ʒ ij.
Acid Gallic..... ʒ jss.
Syrup Simp...... ʒ ss.
Aqua q. s. ad...... ʒ ij.

M.—Sig.—j every two hours.

C. J. Perkins M.D.

For..... Age.....

No. 79.

R

M. Ex. Ergotae (P. D. & Co.)..... fl. ʒ iij.
Tinct. Opii..... “ ʒ ij.
Acid Gallic..... ʒ jss.
Syrup Simp...... ʒ ss.
Aqua q. s. ad...... ʒ ij.

M.—Sig.—j every two hours.

C. J. Perkins M.D.

For..... Age.....

No. 79.

R

M. Ex. Ergotae (P. D. & Co.)..... fl. ʒ iij.
Tinct. Opii..... “ ʒ ij.
Acid Gallic..... ʒ jss.
Syrup Simp...... ʒ ss.
Aqua q. s. ad...... ʒ ij.

M.—Sig.—j every two hours.

C. J. Perkins M.D.

For..... Age.....

No. 79.

R

M. Ex. Ergotae (P. D. & Co.)..... fl. ʒ iij.
Tinct. Opii..... “ ʒ ij.
Acid Gallic..... ʒ jss.
Syrup Simp...... ʒ ss.
Aqua q. s. ad...... ʒ ij.

M.—Sig.—j every two hours.

C. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$
Two to four years,	$\frac{1}{10}$
Five to eight years,	$\frac{1}{8}$
Nine to twelve years,	$\frac{1}{6}$
Thirteen to sixteen,	$\frac{1}{4}$
Seventeen to twenty,	$\frac{1}{2}$

} of the Adult Dose.

At twenty-one years, full dose.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$
Two to four years,	$\frac{1}{10}$
Five to eight years,	$\frac{1}{8}$
Nine to twelve years,	$\frac{1}{6}$
Thirteen to sixteen,	$\frac{1}{4}$
Seventeen to twenty,	$\frac{1}{2}$

} of the Adult Dose.

At twenty-one years, full dose.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$
Two to four years,	$\frac{1}{10}$
Five to eight years,	$\frac{1}{8}$
Nine to twelve years,	$\frac{1}{6}$
Thirteen to sixteen,	$\frac{1}{4}$
Seventeen to twenty,	$\frac{1}{2}$

} of the Adult Dose.

At twenty-one years, full dose.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$
Two to four years,	$\frac{1}{10}$
Five to eight years,	$\frac{1}{8}$
Nine to twelve years,	$\frac{1}{6}$
Thirteen to sixteen,	$\frac{1}{4}$
Seventeen to twenty,	$\frac{1}{2}$

} of the Adult Dose.

At twenty-one years, full dose.

CONSUMPTION OF THE LUNG—COUGH.

PLEASE PRINT IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 80.

R

Syrup Solutani.....
 Syrup pruni Virg..... } aa. fl. ʒ j.
 Tinct. Hyoscyami.....
 Potass. Sod..... ʒ ij.
 Aqua q. s. ad..... fl. ʒ v.

M.—Sig.—ʒ j three to six times a day as required.

O. J. Perkins M.D.

For..... Age.....

No. 80.

R

Syrup Solutani.....
 Syrup pruni Virg..... } aa. fl. ʒ j.
 Tinct. Hyoscyami.....
 Potass. Sod..... ʒ ij.
 Aqua q. s. ad..... fl. ʒ v.

M.—Sig.—ʒ j three to six times a day as required.

O. J. Perkins M.D.

For..... Age.....

No. 80.

R

Syrup Solutani.....
 Syrup pruni Virg..... } aa. fl. ʒ j.
 Tinct. Hyoscyami.....
 Potass. Sod..... ʒ ij.
 Aqua q. s. ad..... fl. ʒ v.

M.—Sig.—ʒ j three to six times a day as required.

O. J. Perkins M.D.

For..... Age.....

No. 80.

R

Syrup Solutani.....
 Syrup pruni Virg..... } aa. fl. ʒ j.
 Tinct. Hyoscyami.....
 Potass. Sod..... ʒ ij.
 Aqua q. s. ad..... fl. ʒ v.

M.—Sig.—ʒ j three to six times a day as required.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{2}$	.....
At twenty-one years, full dose.			

CONSUMPTION OF THE LUNG—SCROFULA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

Age-----

No. 81.

℞ Syrup *Trifolium comp.* } aa. fl. ʒ v.
 (P. D. & Co.)
 Syrup *Haematac hypophos.* }
 (P. D. & Co.)

M.-Sig. — ʒ ij after meals.

C. J. Perkins M.D.

For-----

Age-----

No. 81.

℞ Syrup *Trifolium comp.* } aa. fl. ʒ v.
 (P. D. & Co.)
 Syrup *Haematac hypophos.* }
 (P. D. & Co.)

M.-Sig. — ʒ ij after meals.

C. J. Perkins M.D.

For-----

Age-----

No. 81.

℞ Syrup *Trifolium comp.* } aa. fl. ʒ v.
 (P. D. & Co.)
 Syrup *Haematac hypophos.* }
 (P. D. & Co.)

M.-Sig. — ʒ ij after meals.

C. J. Perkins M.D.

For-----

Age-----

No. 81.

℞ Syrup *Trifolium comp.* } aa. fl. ʒ v.
 (P. D. & Co.)
 Syrup *Haematac hypophos.* }
 (P. D. & Co.)

M.-Sig. — ʒ ij after meals.

C. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{2}$	
Nine to twelve years,	$\frac{3}{1}$	
Thirteen to sixteen,	$\frac{1}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{2}$	
Nine to twelve years,	$\frac{3}{1}$	
Thirteen to sixteen,	$\frac{1}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{2}$	
Nine to twelve years,	$\frac{3}{1}$	
Thirteen to sixteen,	$\frac{1}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{2}$	
Nine to twelve years,	$\frac{3}{1}$	
Thirteen to sixteen,	$\frac{1}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

CONSUMPTION OF THE LUNG—NIGHT SWEATS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 82.

R Zinc Sulph..... grs. vj.
Ex. Hyoscyami..... " XXIV.

M. et div. in pilulae No. vj. Sig.—One pill every night.

O. J. Perkins M.D.

For

Age

No. 82.

R Zinc Sulph..... grs. vj.
Ex. Hyoscyami..... " XXIV.

M. et div. in pilulae No. vj. Sig.—One pill every night.

O. J. Perkins M.D.

For

Age

No. 82.

R Zinc Sulph..... grs. vj.
Ex. Hyoscyami..... " XXIV.

M. et div. in pilulae No. vj. Sig.—One pill every night.

O. J. Perkins M.D.

For

Age

No. 82.

R Zinc Sulph..... grs. vj.
Ex. Hyoscyami..... " XXIV.

M. et div. in pilulae No. vj. Sig.—One pill every night.

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{100}$	
Seventeen to twenty,	$\frac{1}{200}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{100}$	
Seventeen to twenty,	$\frac{1}{200}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{100}$	
Seventeen to twenty,	$\frac{1}{200}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{100}$	
Seventeen to twenty,	$\frac{1}{200}$	
At twenty one years, full dose.		

ACUTE BRIGHT'S DISEASE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 83.

℞ Potass. Bitartras ʒ ij.
 Pulv. Sulapae grs. x.
 " Lingiber " xx.

M. et div. in pulv. No iv. Sig.—One powder every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 83.

℞ Potass. Bitartras ʒ ij.
 Pulv. Sulapae grs. x.
 " Lingiber " xx.

M. et div. in pulv. No iv. Sig.—One powder every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 83.

℞ Potass. Bitartras ʒ ij.
 Pulv. Sulapae grs. x.
 " Lingiber " xx.

M. et div. in pulv. No iv. Sig.—One powder every two hours.

O. J. Perkins M.D.

For ----- Age -----

No. 83.

℞ Potass. Bitartras ʒ ij.
 Pulv. Sulapae grs. x.
 " Lingiber " xx.

M. et div. in pulv. No iv. Sig.—One powder every two hours.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

DIABETES.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 84.

R Potass. phosph. ʒj.
Aqua fl. ʒv

M.-Sig.-ʒj to ij three to six times a day.

O. J. Perkins M.D.

For----- Age-----

No. 84.

R Potass. phosph. ʒj.
Aqua fl. ʒv

M.-Sig.-ʒj to ij three to six times a day.

O. J. Perkins M.D.

For----- Age-----

No. 84.

R Potass. phosph. ʒj.
Aqua fl. ʒv

M.-Sig.-ʒj to ij three to six times a day.

O. J. Perkins M.D.

For----- Age-----

No. 84.

R Potass. phosph. ʒj.
Aqua fl. ʒv

M.-Sig.-ʒj to ij three to six times a day.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

GRAVEL.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 85.

℞ Chloral Hydrat. grs. XL.
 Syrup Sacac. fl. ʒ ss.
 Syrup Chocolate " ʒ j.
 Elix. Simp. " ʒ ss.

M. Sig.—ʒiv every hour till pain is relieved.

O. J. Perkins M.D.

For.....

Age.....

No. 85.

℞ Chloral Hydrat. grs. XL.
 Syrup Sacac. fl. ʒ ss.
 Syrup Chocolate " ʒ j.
 Elix. Simp. " ʒ ss.

M. Sig.—ʒiv every hour till pain is relieved.

O. J. Perkins M.D.

For.....

Age.....

No. 85.

℞ Chloral Hydrat. grs. XL.
 Syrup Sacac. fl. ʒ ss.
 Syrup Chocolate " ʒ j.
 Elix. Simp. " ʒ ss.

M. Sig.—ʒiv every hour till pain is relieved.

O. J. Perkins M.D.

For.....

Age.....

No. 85.

℞ Chloral Hydrat. grs. XL.
 Syrup Sacac. fl. ʒ ss.
 Syrup Chocolate " ʒ j.
 Elix. Simp. " ʒ ss.

M. Sig.—ʒiv every hour till pain is relieved.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{2}{100}$	
Seventeen to twenty,	$\frac{1}{100}$	
At twenty one years, full dose.		

INCONTINENCE OF URINE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 86.

R

Catamel..... gts. iv.
Mucilage of Linseed..... fl. ʒ iv.

M. Sig.—Use half at night and balance in the morning as an injection.

C. J. Perkins M.D.

For

Age

No. 86.

R

Catamel..... gts. iv.
Mucilage of Linseed..... fl. ʒ iv.

M. Sig.—Use half at night and balance in the morning as an injection.

C. J. Perkins M.D.

For

Age

No. 86.

R

Catamel..... gts. iv.
Mucilage of Linseed..... fl. ʒ iv.

M. Sig.—Use half at night and balance in the morning as an injection.

C. J. Perkins M.D.

For

Age

No. 86.

R

Catamel..... gts. iv.
Mucilage of Linseed..... fl. ʒ iv.

M. Sig.—Use half at night and balance in the morning as an injection.

C. J. Perkins M.D.

INCONTINENCE OF URINE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 87.

R

Tinct. Ferri. Mur...... fl. ʒ j.
Simp. Elixir q. s. ad...... “ ʒ ij.

M. Sig.—ʒj three times a day before meals as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 87.

R

Tinct. Ferri. Mur...... fl. ʒ j.
Simp. Elixir q. s. ad...... “ ʒ ij.

M. Sig.—ʒj three times a day before meals as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 87.

R

Tinct. Ferri. Mur...... fl. ʒ j.
Simp. Elixir q. s. ad...... “ ʒ ij.

M. Sig.—ʒj three times a day before meals as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 87.

R

Tinct. Ferri. Mur...... fl. ʒ j.
Simp. Elixir q. s. ad...... “ ʒ ij.

M. Sig.—ʒj three times a day before meals as directed.

O. J. Perkins M.D.

INCONTINENCE OF URINE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 88.

R

Tinct. Belladonnae fl. ʒ j.
(Made from P. D. & Co.'s normal liquid)
Simp. Elixir " ʒ ij.

M. Sig.—ʒj three times a day two hours after meals as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 88.

R

Tinct. Belladonnae fl. ʒ j.
(Made from P. D. & Co.'s normal liquid)
Simp. Elixir " ʒ ij.

M. Sig.—ʒj three times a day two hours after meals as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 88.

R

Tinct. Belladonnae fl. ʒ j.
(Made from P. D. & Co.'s normal liquid)
Simp. Elixir " ʒ ij.

M. Sig.—ʒj three times a day two hours after meals as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 88

R

Tinct. Belladonnae fl. ʒ j.
(Made from P. D. & Co.'s normal liquid)
Simp. Elixir " ʒ ij.

M. Sig.—ʒj three times a day two hours after meals as directed.

C. J. Perkins M.D.

KÆMATURIA—BLOODY URINE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 89.

R

Tinct. Ferri Mur fl. ʒ ss.
M. Ex. Belladonnae (P. D. & Co.). “ ʒ ss.
Simp. Elixir q. s. ad “ ʒ ij.

M. Sig.—ʒj every four hours.

O. J. Perkins M. D.

For ----- Age -----

No. 89.

R

Tinct. Ferri Mur fl. ʒ ss.
M. Ex. Belladonnae (P. D. & Co.). “ ʒ ss.
Simp. Elixir q. s. ad “ ʒ ij.

M. Sig.—ʒj every four hours.

O. J. Perkins M. D.

For ----- Age -----

No. 89.

R

Tinct. Ferri Mur fl. ʒ ss.
M. Ex. Belladonnae (P. D. & Co.). “ ʒ ss.
Simp. Elixir q. s. ad “ ʒ ij.

M. Sig.—ʒj every four hours.

O. J. Perkins M. D.

For ----- Age -----

No. 89.

R

Tinct. Ferri Mur fl. ʒ ss.
M. Ex. Belladonnae (P. D. & Co.). “ ʒ ss.
Simp. Elixir q. s. ad “ ʒ ij.

M. Sig.—ʒj every four hours.

O. J. Perkins M. D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

DELIRIUM TREMENS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 90.

R

Sodium Bromid..... 3 v.
 Chloral Hydrat..... 3 ijss.
 Syrup Chocolate..... }
 Syrup Saccharae..... } aa. fl. ʒ ij.
 Elixir Semp..... }
 Aqua dist. q. s. ad..... fl. ʒ viij.
 M. Sig. - ʒiv every three hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 90.

R

Sodium Bromid..... 3 v.
 Chloral Hydrat..... 3 ijss.
 Syrup Chocolate..... }
 Syrup Saccharae..... } aa. fl. ʒ ij.
 Elixir Semp..... }
 Aqua dist. q. s. ad..... fl. ʒ viij.
 M. Sig. - ʒiv every three hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 90.

R

Sodium Bromid..... 3 v.
 Chloral Hydrat..... 3 ijss.
 Syrup Chocolate..... }
 Syrup Saccharae..... } aa. fl. ʒ ij.
 Elixir Semp..... }
 Aqua dist. q. s. ad..... fl. ʒ viij.
 M. Sig. - ʒiv every three hours as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 90.

R

Sodium Bromid..... 3 v.
 Chloral Hydrat..... 3 ijss.
 Syrup Chocolate..... }
 Syrup Saccharae..... } aa. fl. ʒ ij.
 Elixir Semp..... }
 Aqua dist. q. s. ad..... fl. ʒ viij.
 M. Sig. - ʒiv every three hours as directed.

C. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

ST. VITUS DANCE—CHOREA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 91.

℞ Sourd Seed..... ʒ ss.
 Sugar..... ʒ v.
 Milk..... fl. ʒ ij.

M. Triturate the seed with the sugar, adding a few drops of milk from time to time until a paste is formed; add the balance of the milk, rub up well and filter. Take at one dose early in the morning, and two hours later give a dose of castor oil. — *DuPont Med. World.*

For ----- Age -----

No. 91.

℞ Sourd Seed..... ʒ ss.
 Sugar..... ʒ v.
 Milk..... fl. ʒ ij.

M. Triturate the seed with the sugar, adding a few drops of milk from time to time until a paste is formed; add the balance of the milk, rub up well and filter. Take at one dose early in the morning, and two hours later give a dose of castor oil. — *DuPont Med. World.*

For ----- Age -----

No. 91.

℞ Sourd Seed..... ʒ ss.
 Sugar..... ʒ v.
 Milk..... fl. ʒ ij.

M. Triturate the seed with the sugar, adding a few drops of milk from time to time until a paste is formed; add the balance of the milk, rub up well and filter. Take at one dose early in the morning, and two hours later give a dose of castor oil. — *DuPont Med. World.*

For ----- Age -----

No. 91.

℞ Sourd Seed..... ʒ ss.
 Sugar..... ʒ v.
 Milk..... fl. ʒ ij.

M. Triturate the seed with the sugar, adding a few drops of milk from time to time until a paste is formed; add the balance of the milk, rub up well and filter. Take at one dose early in the morning, and two hours later give a dose of castor oil. — *DuPont Med. World.*

ST. VITUS DANCE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 92.

R

Hematic Hypophosphites (P. D. & Co.). fl. ʒ iv.

Sig.—3 j three times a day as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 92.

R

Hematic Hypophosphites (P. D. & Co.). fl. ʒ iv.

Sig.—3 j three times a day as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 92.

R

Hematic Hypophosphites (P. D. & Co.). fl. ʒ iv.

Sig.—3 j three times a day as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 92.

R

Hematic Hypophosphites (P. D. & Co.). fl. ʒ iv.

Sig.—3 j three times a day as directed.

O. J. Perkins M.D.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{5}$	
Five to eight years,	$\frac{5}{3}$	
Nine to twelve years,	$\frac{3}{2}$	
Thirteen to sixteen,	$\frac{2}{1}$	
Seventeen to twenty,	$\frac{1}{1}$	
At twenty-one years, full dose.		

SUNSTROKE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 93.

R Potassa Bromid. ʒ vss.
Aqua. fl. ʒ viij.

M. Sig.—ʒiv every two hours as directed.

O. J. Perkins M. D.

For..... Age.....

No. 93.

R Potassa Bromid. ʒ vss.
Aqua. fl. ʒ viij.

M. Sig.—ʒiv every two hours as directed.

O. J. Perkins M. D.

For..... Age.....

No. 93.

R Potassa Bromid. ʒ vss.
Aqua. fl. ʒ viij.

M. Sig.—ʒiv every two hours as directed.

O. J. Perkins M. D.

For..... Age.....

No. 93.

R Potassa Bromid. ʒ vss.
Aqua. fl. ʒ viij.

M. Sig.—ʒiv every two hours as directed.

O. J. Perkins M. D.

NOTE I I I

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{30}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE I I I

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{30}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE I I I

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{30}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE I I I

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{30}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{3}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

EPILEPSY.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 94.

R Potassa Bromid. ʒ iiss.
 Tinct. Sent. fl. ʒ ij.
 Aqua dist. q. s. ad. “ ʒ viij.

M. Sig.—ʒiv as directed.

O. J. Perkins M.D.

For

Age

No. 94.

R Potassa Bromid. ʒ iiss.
 Tinct. Sent. fl. ʒ ij.
 Aqua dist. q. s. ad. “ ʒ viij.

M. Sig.—ʒiv as directed.

O. J. Perkins M.D.

For

Age

No. 94.

R Potassa Bromid. ʒ iiss.
 Tinct. Sent. fl. ʒ ij.
 Aqua dist. q. s. ad. “ ʒ viij.

M. Sig.—ʒiv as directed.

O. J. Perkins M.D.

For

Age

No. 94.

R Potassa Bromid. ʒ iiss.
 Tinct. Sent. fl. ʒ ij.
 Aqua dist. q. s. ad. “ ʒ viij.

M. Sig.—ʒiv as directed.

O. J. Perkins M.D.

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NERVOUS HEADACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 95.

R

Acid hydrobromic } aa. fl. ʒ ss.
 (Wade's Formula.)
M. Ex. Suarane

M. Sig.—ʒj in a half tumblerful of water. To be repeated as required.
 —*Coll. and Clin. Record*

For.....

Age.....

No. 95.

R

Acid hydrobromic } aa. fl. ʒ ss.
 (Wade's Formula.)
M. Ex. Suarane

M. Sig.—ʒj in a half tumblerful of water. To be repeated as required.
 —*Coll. and Clin. Record*

For.....

Age.....

No. 95.

R

Acid hydrobromic } aa. fl. ʒ ss.
 (Wade's Formula.)
M. Ex. Suarane

M. Sig.—ʒj in a half tumblerful of water. To be repeated as required.
 —*Coll. and Clin. Record*

For.....

Age.....

No. 95

R

Acid hydrobromic } aa. fl. ʒ ss.
 (Wade's Formula.)
M. Ex. Suarane

M. Sig.—ʒj in a half tumblerful of water. To be repeated as required.
 —*Coll. and Clin. Record*

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NERVOUS HEADACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 96.

- R
- Caffeine*..... } aa. grs iv.
 - Salicylate of Sodium*..... }
 - Hydrochlorate of Cocaine*..... " jss.
 - Syrup*..... fl. ʒ vj.
 - Aqua*..... " ʒ ij.

M. Sig.:—Take one-half at the beginning of attack, and balance in 30 to 40 minutes.
—*Dujardin-Beaumonts.*

For ----- Age -----

No. 96.

- R
- Caffeine*..... } aa. grs iv.
 - Salicylate of Sodium*..... }
 - Hydrochlorate of Cocaine*..... " jss.
 - Syrup*..... fl. ʒ vj.
 - Aqua*..... " ʒ ij.

M. Sig.:—Take one half at the beginning of attack, and balance in 30 to 40 minutes.
—*Dujardin-Beaumonts.*

For ----- Age -----

No. 96.

- R
- Caffeine*..... } aa. grs iv.
 - Salicylate of Sodium*..... }
 - Hydrochlorate of Cocaine*..... " jss.
 - Syrup*..... fl. ʒ vj.
 - Aqua*..... " ʒ ij.

M. Sig.:—Take one half at the beginning of attack, and balance in 30 to 40 minutes.
—*Dujardin-Beaumonts.*

For ----- Age -----

No. 96.

- R
- Caffeine*..... } aa. grs iv.
 - Salicylate of Sodium*..... }
 - Hydrochlorate of Cocaine*..... " jss.
 - Syrup*..... fl. ʒ vj.
 - Aqua*..... " ʒ ij.

M. Sig.:—Take one-half at the beginning of attack, and balance in 30 to 40 minutes.
—*Dujardin-Beaumonts.*

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NERVOUS HEADACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 97.

R

Citrate of Caffeine..... grs. iss.
Phenacetine..... " ij.
Sugar of Milk..... " iv.

M. Sig.—Take at one dose.—*La. Medicine Moderne.*

For..... Age.....

No. 97.

R

Citrate of Caffeine..... grs. iss.
Phenacetine..... " ij.
Sugar of Milk..... " iv.

M. Sig.—Take at one dose.—*La. Medicine Moderne.*

For..... Age.....

No. 97.

R

Citrate of Caffeine..... grs. iss.
Phenacetine..... " ij.
Sugar of Milk..... " iv.

M. Sig.—Take at one dose.—*La. Medicine Moderne.*

For..... Age.....

No. 97.

R

Citrate of Caffeine..... grs. iss.
Phenacetine..... " ij.
Sugar of Milk..... " iv.

M. Sig.—Take at one dose.—*La. Medicine Moderne.*

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{5}$	.....
Nine to twelve years,	$\frac{1}{3}$	.....
Thirteen to sixteen,	$\frac{1}{2}$	.....
Seventeen to twenty,	$\frac{3}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{5}$	.....
Nine to twelve years,	$\frac{1}{3}$	.....
Thirteen to sixteen,	$\frac{1}{2}$	.....
Seventeen to twenty,	$\frac{3}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{5}$	.....
Nine to twelve years,	$\frac{1}{3}$	.....
Thirteen to sixteen,	$\frac{1}{2}$	.....
Seventeen to twenty,	$\frac{3}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{5}$	.....
Nine to twelve years,	$\frac{1}{3}$	.....
Thirteen to sixteen,	$\frac{1}{2}$	.....
Seventeen to twenty,	$\frac{3}{4}$	.....
At twenty-one years, full dose.			

NERVOUS HEADACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 98.

Rx

Potass. Bromid...... 3 ij.
Spts. Am. Brom...... fl. ʒ ij.
Aquae Camph...... “ ʒ vj.

M. Sig.—ʒ iv three times a day.—“*Dr. Day*,” *London*.

For.....

Age.....

No. 98.

Rx

Potass. Bromid...... 3 ij.
Spts. Am. Brom...... fl. ʒ ij.
Aquae Camph...... “ ʒ vj.

M. Sig.—ʒ iv three times a day.—“*Dr. Day*,” *London*.

For.....

Age.....

No. 98.

Rx

Potass. Bromid...... 3 ij.
Spts. Am. Brom...... fl. ʒ ij.
Aquae Camph...... “ ʒ vj.

M. Sig.—ʒ iv three times a day.—“*Dr. Day*,” *London*.

For.....

Age.....

No. 98.

Rx

Potass. Bromid...... 3 ij.
Spts. Am. Brom...... fl. ʒ ij.
Aquae Camph...... “ ʒ vj.

M. Sig.—ʒ iv three times a day.—“*Dr. Day*,” *London*.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

INSOMNIA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

No. 99.

R

- Chloral Hydrat*..... gts. XL.
- Potass. Bromide*..... " XL.
- Syrup Scac.*..... fl. ʒ ss.
- Syrup Chocolate*..... " ʒ j.
- Elx. Simp.*..... " ʒ ss.

M. Sig.—ʒiv fifteen minutes before getting into bed.

O. J. Perkins M.D.

For

No. 99.

R

- Chloral Hydrat*..... gts. XL.
- Potass. Bromide*..... " XL.
- Syrup Scac.*..... fl. ʒ ss.
- Syrup Chocolate*..... " ʒ j.
- Elx. Simp.*..... " ʒ ss.

M. Sig.—ʒiv fifteen minutes before getting into bed.

O. J. Perkins M.D.

For

No. 99.

R

- Chloral Hydrat*..... gts. XL.
- Potass. Bromide*..... " XL.
- Syrup Scac.*..... fl. ʒ ss.
- Syrup Chocolate*..... " ʒ j.
- Elx. Simp.*..... " ʒ ss.

M. Sig.—ʒiv fifteen minutes before getting into bed.

O. J. Perkins M.D.

For

No. 99.

R

- Chloral Hydrat*..... gts. XL.
- Potass. Bromide*..... " XL.
- Syrup Scac.*..... fl. ʒ ss.
- Syrup Chocolate*..... " ʒ j.
- Elx. Simp.*..... " ʒ ss.

M. Sig.—ʒiv fifteen minutes before getting into bed.

O. J. Perkins M.D.

Age

Age

Age

Age

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{4}$	.....
At twenty-one years, full dose.			

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	.....
Five to eight years,	$\frac{1}{8}$	.....
Nine to twelve years,	$\frac{1}{6}$	.....
Thirteen to sixteen,	$\frac{1}{4}$	.....
Seventeen to twenty,	$\frac{1}{4}$	.....
At twenty-one years, full dose.			

NEURALGIA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

No. 100.

R
Strychniae Sulph. (cryst.)..... gr. j.
Ferri Pyrophosphates..... }
Quiniae Sulph...... } aa. ʒ j.
Acid phosphor. dil...... }
Syr. Lingiberis..... } aa. ʒ ij.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----

No. 100.

R
Strychniae Sulph. (cryst.)..... gr. j.
Ferri Pyrophosphates..... }
Quiniae Sulph...... } aa. ʒ j.
Acid phosphor. dil...... }
Syr. Lingiberis..... } aa. ʒ ij.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----

No. 100.

R
Strychniae Sulph. (cryst.)..... gr. j.
Ferri Pyrophosphates..... }
Quiniae Sulph...... } aa. ʒ j.
Acid phosphor. dil...... }
Syr. Lingiberis..... } aa. ʒ ij.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----

No. 100.

R
Strychniae Sulph. (cryst.)..... gr. j.
Ferri Pyrophosphates..... }
Quiniae Sulph...... } aa. ʒ j.
Acid phosphor. dil...... }
Syr. Lingiberis..... } aa. ʒ ij.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----

No. 100.

R
Strychniae Sulph. (cryst.)..... gr. j.
Ferri Pyrophosphates..... }
Quiniae Sulph...... } aa. ʒ j.
Acid phosphor. dil...... }
Syr. Lingiberis..... } aa. ʒ ij.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

Age-----

Age-----

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NEURALGIA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 101.

℞ *Sodidi Arsenic*..... gr. j.
Ext. Belladonnae..... }
Valerianate Morph...... } aa. grs. viij.
Pulv. Ext. Senti. (P. D. & Co.)... grs. v.
Fl. Ext. Aconite Root (P. D. & Co.) gtts. v.

Ft. pill. mass et div. into lx pills. Sig.—A pill one to three times in twenty-four hours.

O. J. Perkins M. D.

(OVER)

For..... Age.....

No. 101.

℞ *Sodidi Arsenic*..... gr. j.
Ext. Belladonnae..... }
Valerianate Morph...... } aa. grs. viij.
Pulv. Ext. Senti. (P. D. & Co.)... grs. v.
Fl. Ext. Aconite Root (P. D. & Co.) gtts. v.

Ft. pill. mass et div. into lx pills. Sig.—A pill one to three times in twenty-four hours.

O. J. Perkins M. D.

(OVER)

For..... Age.....

No. 101.

℞ *Sodidi Arsenic*..... gr. j.
Ext. Belladonnae..... }
Valerianate Morph...... } aa. grs. viij.
Pulv. Ext. Senti. (P. D. & Co.)... grs. v.
Fl. Ext. Aconite Root (P. D. & Co.) gtts. v.

Ft. pill. mass et div. into lx pills. Sig.—A pill one to three times in twenty-four hours.

O. J. Perkins M. D.

(OVER)

For..... Age.....

No. 101.

℞ *Sodidi Arsenic*..... gr. j.
Ext. Belladonnae..... }
Valerianate Morph...... } aa. grs. viij.
Pulv. Ext. Senti. (P. D. & Co.)... grs. v.
Fl. Ext. Aconite Root (P. D. & Co.) gtts. v.

Ft. pill. mass et div. into lx pills. Sig.—A pill one to three times in twenty-four hours.

O. J. Perkins M. D.

(OVER)

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty one years, full dose.		

NEURALGIA.

For ----- Age -----

No. 102.

R Phenacetine 3 jss.
 Caffeine grs. xv.
 Pub. Ext. Cannab. Ind. (P. D. & Co.) }
 Pub. Ext. Aconite (P. D. & Co.) . . } aa. grs. ijss.
 Hyoscin. hydrobrom. gr. ʒ

M. Capsules No. xv. Sig.—One as directed every one to three to five hours.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 102.

R Phenacetine 3 jss.
 Caffeine grs. xv.
 Pub. Ext. Cannab. Ind. (P. D. & Co.) }
 Pub. Ext. Aconite (P. D. & Co.) . . } aa. grs. ijss.
 Hyoscin. hydrobrom. gr. ʒ

M. Capsules No. xv. Sig.—One as directed every one to three to five hours.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 102.

R Phenacetine 3 jss.
 Caffeine grs. xv.
 Pub. Ext. Cannab. Ind. (P. D. & Co.) }
 Pub. Ext. Aconite (P. D. & Co.) . . } aa. grs. ijss.
 Hyoscin. hydrobrom. gr. ʒ

M. Capsules No. xv. Sig.—One as directed every one to three to five hours.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 102.

R Phenacetine 3 jss.
 Caffeine grs. xv.
 Pub. Ext. Cannab. Ind. (P. D. & Co.) }
 Pub. Ext. Aconite (P. D. & Co.) . . } aa. grs. ijss.
 Hyoscin. hydrobrom. gr. ʒ

M. Capsules No. xv. Sig.—One as directed every one to three to five hours.

O. J. Perkins M.D.

(OVER)

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

CONVULSIONS IN CHILDREN.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 103.

R Potass. Brom grs. xvj.
Aqua fl. ʒ iv

M. Sig.—3 every fifteen minutes as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 103.

R Potass. Brom grs. xvj.
Aqua fl. ʒ iv

M. Sig.—3 every fifteen minutes as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 103.

R Potass. Brom grs. xvj.
Aqua fl. ʒ iv

M. Sig.—3 every fifteen minutes as directed.

O. J. Perkins M.D.

For ----- Age -----

No. 103.

R Potass. Brom grs. xvj.
Aqua fl. ʒ iv

M. Sig.—3 every fifteen minutes as directed.

O. J. Perkins M.D.

ACUTE ARTICULAR RHEUMATISM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 104.

- R Hydrarg. Chlor. Mite..... grs. v.
- Sodae Bicarb..... " XX.
- Sugar of Milk..... " XX.

M. et div. put into capsules No. xx. Sig.—One capsule every hour as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 104.

- R Hydrarg. Chlor. Mite..... grs. v.
- Sodae Bicarb..... " XX.
- Sugar of Milk..... " XX.

M. et div. put into capsules No. xx. Sig.—One capsule every hour as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 104.

- R Hydrarg. Chlor. Mite..... grs. v.
- Sodae Bicarb..... " XX.
- Sugar of Milk..... " XX.

M. et div. put into capsules No. xx. Sig.—One capsule every hour as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 104.

- R Hydrarg. Chlor. Mite..... grs. v.
- Sodae Bicarb..... " XX.
- Sugar of Milk..... " XX.

M. et div. put into capsules No. xx. Sig.—One capsule every hour as directed.

O. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{5}$	
Nine to twelve years,	$\frac{1}{3}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{3}{4}$	
At twenty-one years, full dose.		

ACUTE ARTICULAR RHEUMATISM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 105.

R *Olei Sautheri*..... ℥ CLX.
Mucilag. Sacac..... fl. ʒ ij.
Glycerina..... }
Aquae..... } aa. fl. ʒ j.

M. Sig.—ʒ ij every three hours.

C. J. Perkins M. D.

(OVER)

For----- Age-----

No. 105.

R *Olei Sautheri*..... ℥ CLX.
Mucilag. Sacac..... fl. ʒ ij.
Glycerina..... }
Aquae..... } aa. fl. ʒ j.

M. Sig.—ʒ ij every three hours.

C. J. Perkins M. D.

(OVER)

For----- Age-----

No. 105.

R *Olei Sautheri*..... ℥ CLX.
Mucilag. Sacac..... fl. ʒ ij.
Glycerina..... }
Aquae..... } aa. fl. ʒ j.

M. Sig.—ʒ ij every three hours.

C. J. Perkins M. D.

(OVER)

For----- Age-----

No. 105.

R *Olei Sautheri*..... ℥ CLX.
Mucilag. Sacac..... fl. ʒ ij.
Glycerina..... }
Aquae..... } aa. fl. ʒ j.

M. Sig.—ʒ ij every three hours.

C. J. Perkins M. D.

(OVER)

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE III

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

MEASLES.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 106.

R

Pulv. Specac et Opii..... grs. x.
Syrup Simp...... }
Aqua dist...... } aa. fl. ʒ ij.

Sig.—3 j every four hours as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 106.

R

Pulv. Specac et Opii..... grs. x.
Syrup Simp...... }
Aqua dist...... } aa. fl. ʒ ij.

Sig.—3 j every four hours as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 106.

R

Pulv. Specac et Opii..... grs. x.
Syrup Simp...... }
Aqua dist...... } aa. fl. ʒ ij.

Sig.—3 j every four hours as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 106.

R

Pulv. Specac et Opii..... grs. x.
Syrup Simp...... }
Aqua dist...... } aa. fl. ʒ ij.

Sig.—3 j every four hours as directed.

O. J. Perkins M. D.

SCARLET FEVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 107.

R

Antipyrine..... grs. xvj.
N. Ext. Lily of the Valley..... gtts. x.
(P. D. & Co.)
Syrup Simp. q. s. ad..... fl. ʒ ij.

M. Sig.—ʒj as directed

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 107.

R

Antipyrine..... grs. xvj.
N. Ext. Lily of the Valley..... gtts. x.
(P. D. & Co.)
Syrup Simp. q. s. ad..... fl. ʒ ij.

M. Sig.—ʒj as directed.

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 107.

R

Antipyrine..... grs. xvj.
N. Ext. Lily of the Valley..... gtts. x.
(P. D. & Co.)
Syrup Simp. q. s. ad..... fl. ʒ ij.

M. Sig.—ʒj as directed.

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 107.

R

Antipyrine..... grs. xvj.
N. Ext. Lily of the Valley..... gtts. x.
(P. D. & Co.)
Syrup Simp. q. s. ad..... fl. ʒ ij.

M. Sig.—ʒj as directed.

O. J. Perkins M.D.

(OVER)

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{30}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{1}{10}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

SCARLET FEVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 108.

R

Acid Salicylic grs. XL viij.

Aqua dist. } aa. ʒ j.

M. Stand in the hot bath until the acid is all dissolved. Sig.—ʒ j as directed.

(OVER

O. J. Perkins M.D.

For

Age

No. 108.

R

Acid Salicylic grs. XL viij.

Aqua dist. } aa. ʒ j.

M. Stand in the hot bath until the acid is all dissolved. Sig.—ʒ j as directed.

(OVER

O. J. Perkins M.D.

For

Age

No. 108.

R

Acid Salicylic grs. XL viij.

Aqua dist. } aa. ʒ j.

M. Stand in the hot bath until the acid is all dissolved. Sig.—ʒ j as directed.

(OVER

O. J. Perkins M.D.

For

Age

No. 108.

R

Acid Salicylic grs. XL viij.

Aqua dist. } aa. ʒ j.

M. Stand in the hot bath until the acid is all dissolved. Sig.—ʒ j as directed.

(OVER

O. J. Perkins M.D.

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{1}{20}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{3}$	
At twenty-one years, full dose.		

MALARIA.

For ----- Age -----

No. 109.

- R *Quinia Sulph*..... grs. c.
- Cleum Piper. nig*..... gtts. l.
- Cleum Sassafras*..... " l.
- Acid Arsenicus*..... grs. iv.
- Strych. Sulph. (cryst.)*..... " ij.

M. Ft. pil. No. l. Sig.—One pill at meal time.—“*Dr. Watkins*,” *Med. Summary*.

For ----- Age -----

No. 109.

- R *Quinia Sulph*..... grs. c.
- Cleum Piper. nig*..... gtts. l.
- Cleum Sassafras*..... " l.
- Acid Arsenicus*..... grs. iv.
- Strych. Sulph. (cryst.)*..... " ij.

M. Ft. pil. No. l. Sig.—One pill at meal time.—“*Dr. Watkins*,” *Med. Summary*.

For ----- Age -----

No. 109.

- R *Quinia Sulph*..... grs. c.
- Cleum Piper. nig*..... gtts. l.
- Cleum Sassafras*..... " l.
- Acid Arsenicus*..... grs. iv.
- Strych. Sulph. (cryst.)*..... " ij.

M. Ft. pil. No. l. Sig.—One pill at meal time.—“*Dr. Watkins*,” *Med. Summary*.

For ----- Age -----

No. 109.

- R *Quinia Sulph*..... grs. c.
- Cleum Piper. nig*..... gtts. l.
- Cleum Sassafras*..... " l.
- Acid Arsenicus*..... grs. iv.
- Strych. Sulph. (cryst.)*..... " ij.

M. Ft. pil. No. l. Sig.—One pill at meal time.—“*Dr. Watkins*,” *Med. Summary*.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

TYPHOID FEVER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 110.

R

Argentii Nitras (cryst.)..... grs. x.
Sugar of Milk..... ʒ j.
Fragacantha q. s. ad. pil. mass.

Divide into pil. No. lx. Sig.—One pill every four hours as directed.

O. J. Perkins M.D.

(OVER)

For

Age

No. 110.

R

Argentii Nitras (cryst.)..... grs. x.
Sugar of Milk..... ʒ j.
Fragacantha q. s. ad. pil. mass.

Divide into pil. No. lx. Sig.—One pill every four hours as directed.

O. J. Perkins M.D.

(OVER)

For

Age

No. 110.

R

Argentii Nitras (cryst.)..... grs. x.
Sugar of Milk..... ʒ j.
Fragacantha q. s. ad. pil. mass.

Divide into pil. No. lx. Sig.—One pill every four hours as directed.

O. J. Perkins M.D.

(OVER)

For

Age

No. 110.

R

Argentii Nitras (cryst.)..... grs. x.
Sugar of Milk..... ʒ j.
Fragacantha q. s. ad. pil. mass.

Divide into pil. No. lx. Sig.—One pill every four hours as directed.

O. J. Perkins M.D.

(OVER)

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{3}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

WORMS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 111.

R

Pulv. Santonin..... grs. ij.
Sugar of Milk..... " X

M. et div. into pulv. No. ij. Sig.—One powder as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 111.

R

Pulv. Santonin..... grs. ij.
Sugar of Milk..... " X

M. et div. into pulv. No. ij. Sig.—One powder as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 111.

R

Pulv. Santonin..... grs. ij.
Sugar of Milk..... " X

M. et div. into pulv. No. ij. Sig.—One powder as directed.

C. J. Perkins M.D.

For.....

Age.....

No. 111.

R

Pulv. Santonin..... grs. ij.
Sugar of Milk..... " X

M. et div. into pulv. No. ij. Sig.—One powder as directed.

C. J. Perkins M.D.

TAPEWORM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 112.

R Chloroform (best)..... fl. ʒ j.
Oleum Siglii..... ℥ j.
Glycerina..... fl. ʒ x

M. Sig.—One third at a dose two hours apart.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 112.

R Chloroform (best)..... fl. ʒ j.
Oleum Siglii..... ℥ j.
Glycerina..... fl. ʒ x

M. Sig.—One third at a dose two hours apart.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 112.

R Chloroform (best)..... fl. ʒ j.
Oleum Siglii..... ℥ j.
Glycerina..... fl. ʒ x

M. Sig.—One third at a dose two hours apart.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 112.

R Chloroform (best)..... fl. ʒ j.
Oleum Siglii..... ℥ j.
Glycerina..... fl. ʒ x

M. Sig.—One third at a dose two hours apart.

O. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{2}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{2}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{2}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{2}{10}$	
Seventeen to twenty, $\frac{1}{10}$	
At twenty-one years, full dose.	

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

BLACK EYE.

For ----- Age -----

No. 113.

- R *Tinct. Capsici*..... 3j.
- Mucilage Gum Acaciae*..... 3j.
- Glycerina*.....gtts. x.

M. Sig.—Apply with a camel's hair brush as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 113.

- R *Tinct. Capsici*..... 3j.
- Mucilage Gum Acaciae*..... 3j.
- Glycerina*.....gtts. x.

M. Sig.—Apply with a camel's hair brush as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 113.

- R *Tinct. Capsici*..... 3j.
- Mucilage Gum Acaciae*..... 3j.
- Glycerina*.....gtts. x.

M. Sig.—Apply with a camel's hair brush as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 113.

- R *Tinct. Capsici*..... 3j.
- Mucilage Gum Acaciae*..... 3j.
- Glycerina*.....gtts. x.

M. Sig.—Apply with a camel's hair brush as directed.

C. J. Perkins M.D.

INFLAMMATION OF THE CONJUNCTIVA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 114.

R Sulphate of Hydrast. gr. j.
Aqua dist. ʒ j.

Make solution. Sig.—Apply as an eye wash.

O. J. Perkins M.D.

For ----- Age -----

No. 114.

R Sulphate of Hydrast. gr. j.
Aqua dist. ʒ j.

Make solution. Sig.—Apply as an eye wash.

O. J. Perkins M.D.

For ----- Age -----

No. 114.

R Sulphate of Hydrast. gr. j.
Aqua dist. ʒ j.

Make solution. Sig.—Apply as an eye wash.

O. J. Perkins M.D.

For ----- Age -----

No. 114.

R Sulphate of Hydrast. gr. j.
Aqua dist. ʒ j.

Make solution. Sig.—Apply as an eye wash.

O. J. Perkins M.D.

EARACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 115.

R

Camphorated Chloral..... 3 ss.
Glycerina..... fl. ʒ iij.
Oil Sweet Almonds..... " ʒ j.

M. Sig.—Apply to ear as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 115.

R

Camphorated Chloral..... 3 ss.
Glycerina..... fl. ʒ iij.
Oil Sweet Almonds..... " ʒ j.

M. Sig.—Apply to ear as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 115.

R

Camphorated Chloral..... 3 ss.
Glycerina..... fl. ʒ iij.
Oil Sweet Almonds..... " ʒ j.

M. Sig.—Apply to ear as directed.

O. J. Perkins M.D.

For.....

Age.....

No. 115.

R

Camphorated Chloral..... 3 ss.
Glycerina..... fl. ʒ iij.
Oil Sweet Almonds..... " ʒ j.

M. Sig.—Apply to ear as directed.

O. J. Perkins M.D.

PILES (HEMORRHOIDS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 116.

- R *Plumba Sodiidi*..... 3 ij.
- Sr. Sodiidi comp*..... gtt. xx.
- Pub. Sall*..... grs. xx.
- Ext. Hyosey*..... " xx.
- Cocca Butter*..... 3 ij.

M. Ft. supposit. No. xx. Sig.—Apply one night and morning as directed.

O. J. Perkins M. D.

(OVER)

For ----- Age -----

No. 116.

- R *Plumba Sodiidi*..... 3 ij.
- Sr. Sodiidi comp*..... gtt. xx.
- Pub. Sall*..... grs. xx.
- Ext. Hyosey*..... " xx.
- Cocca Butter*..... 3 ij.

M. Ft. supposit. No. xx. Sig.—Apply one night and morning as directed.

O. J. Perkins M. D.

(OVER)

For ----- Age -----

No. 116.

- R *Plumba Sodiidi*..... 3 ij.
- Sr. Sodiidi comp*..... gtt. xx.
- Pub. Sall*..... grs. xx.
- Ext. Hyosey*..... " xx.
- Cocca Butter*..... 3 ij.

M. Ft. supposit. No. xx. Sig.—Apply one night and morning as directed.

O. J. Perkins M. D.

(OVER)

For ----- Age -----

No. 116.

- R *Plumba Sodiidi*..... 3 ij.
- Sr. Sodiidi comp*..... gtt. xx.
- Pub. Sall*..... grs. xx.
- Ext. Hyosey*..... " xx.
- Cocca Butter*..... 3 ij.

M. Ft. supposit. No. xx. Sig.—Apply one night and morning as directed.

O. J. Perkins M. D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{20}{10}$	} of the Adult Dose.
Two to four years, $\frac{10}{10}$	
Five to eight years, $\frac{5}{10}$	
Nine to twelve years, $\frac{3}{10}$	
Thirteen to sixteen, $\frac{1}{2}$	
Seventeen to twenty, $\frac{3}{4}$	
At twenty-one years, full dose.	

FROSTBITES.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 117.

R Acid Nitric dil. fl. ʒj.
Aguas Mentb. Pip. " ʒj.

M. Sig.—Use externally as directed.

O. J. Perkins M.D.

For----- Age-----

No. 117.

R Acid Nitric dil. fl. ʒj.
Aguas Mentb. Pip. " ʒj.

M. Sig.—Use externally as directed.

O. J. Perkins M.D.

For----- Age-----

No. 117.

R Acid Nitric dil. fl. ʒj.
Aguas Mentb. Pip. " ʒj.

M. Sig.—Use externally as directed.

O. J. Perkins M.D.

For----- Age-----

No. 117.

R Acid Nitric dil. fl. ʒj.
Aguas Mentb. Pip. " ʒj.

M. Sig.—Use externally as directed.

O. J. Perkins M.D.

DIARRHŒA IN CHILDREN.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 118.

R

Bismuthi Subnit...... grs. xvj.
Tinct. Opii deod...... gttts. xij.
Tinct. Rhei...... }
Essence Cinna...... } aa. fl. ʒ ij.
Acid Carbolic. (pure)..... gtt. j
Pepsin Cordial (P. D. & Co.)... fl. ʒ ss.
Glycerina q. s. ad...... “ ʒ ij.
 M. Sig.—ʒj every two, four or six hours as required.

O. J. Perkins M. D.

For ----- Age -----

No. 118.

R

Bismuthi Subnit...... grs. xvj.
Tinct. Opii deod...... gttts. xij.
Tinct. Rhei...... }
Essence Cinna...... } aa. fl. ʒ ij.
Acid Carbolic. (pure)..... gtt. j
Pepsin Cordial (P. D. & Co.)... fl. ʒ ss.
Glycerina q. s. ad...... “ ʒ ij.
 M. Sig.—ʒj every two, four or six hours as required.

O. J. Perkins M. D.

For ----- Age -----

No. 118.

R

Bismuthi Subnit...... grs. xvj.
Tinct. Opii deod...... gttts. xij.
Tinct. Rhei...... }
Essence Cinna...... } aa. fl. ʒ ij.
Acid Carbolic. (pure)..... gtt. j
Pepsin Cordial (P. D. & Co.)... fl. ʒ ss.
Glycerina q. s. ad...... “ ʒ ij.
 M. Sig.—ʒj every two, four or six hours as required.

O. J. Perkins M. D.

For ----- Age -----

No. 118.

R

Bismuthi Subnit...... grs. xvj.
Tinct. Opii deod...... gttts. xij.
Tinct. Rhei...... }
Essence Cinna...... } aa. fl. ʒ ij.
Acid Carbolic. (pure)..... gtt. j
Pepsin Cordial (P. D. & Co.)... fl. ʒ ss.
Glycerina q. s. ad...... “ ʒ ij.
 M. Sig.—ʒj every two, four or six hours as required.

O. J. Perkins M. D.

DIARRHOEA IN CHILDREN.

PRESCRIPTION 24. 118.

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SOOTHING SYRUP.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 119.

℞ *Camph. Monobrom*..... grs. ij.
Normal Liquid Hyosciami..... gtts. viij.
(P. D. & Co.)
Syrup Lactucarii (Aubergier's).. ʒ ij.

M. Sig.—One-half to ʒj once or twice in twenty-four hours.

O. J. Perkins M.D.

For----- Age-----

No. 119.

℞ *Camph. Monobrom*..... grs. ij.
Normal Liquid Hyosciami..... gtts. viij.
(P. D. & Co.)
Syrup Lactucarii (Aubergier's).. ʒ ij.

M. Sig.—One-half to ʒj once or twice in twenty-four hours.

O. J. Perkins M.D.

For----- Age-----

No. 119.

℞ *Camph. Monobrom*..... grs. ij.
Normal Liquid Hyosciami..... gtts. viij.
(P. D. & Co.)
Syrup Lactucarii (Aubergier's).. ʒ ij.

M. Sig.—One-half to ʒj once or twice in twenty-four hours.

O. J. Perkins M.D.

For----- Age-----

No. 119.

℞ *Camph. Monobrom*..... grs. ij.
Normal Liquid Hyosciami..... gtts. viij.
(P. D. & Co.)
Syrup Lactucarii (Aubergier's).. ʒ ij.

M. Sig.—One half to ʒj once or twice in twenty-four hours.

O. J. Perkins M.D.

SOOTHING SYRUP.
PRESCRIPTION NO. 118.

℞ Syrup
℞i
M. S.
C. W.

NO. 118

℞ Syrup
℞i
M. S.
C. W.

NO. 118

℞ Syrup
℞i
M. S.
C. W.

NO. 118

℞ Syrup
℞i
M. S.
C. W.

NO. 118

TOOTHACHE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 120.

℞ *Plumbi Acetas* grs. x.
Aquae dist. fl. ʒ ss.
Fluid Opium “ ʒ j.

M. Sig.—Apply to the hollow tooth with absorbent cotton.

C. J. Perkins M.D.

For

Age

No. 120.

℞ *Plumbi Acetas* grs. x.
Aquae dist. fl. ʒ ss.
Fluid Opium “ ʒ j.

M. Sig.—Apply to the hollow tooth with absorbent cotton.

C. J. Perkins M.D.

For

Age

No. 120.

℞ *Plumbi Acetas* grs. x.
Aquae dist. fl. ʒ ss.
Fluid Opium “ ʒ j.

M. Sig.—Apply to the hollow tooth with absorbent cotton.

C. J. Perkins M.D.

For

Age

No. 120.

℞ *Plumbi Acetas* grs. x.
Aquae dist. fl. ʒ ss.
Fluid Opium “ ʒ j.

M. Sig.—Apply to the hollow tooth with absorbent cotton.

C. J. Perkins M.D.

THIELEMANN'S CHOLERA MIXTURE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 121.

Rx

Oil of Peppermint..... fluid drachms 2
Chloroform..... " " 2
Fluid Ext. of Speac (P. D. & Co.)..... " " 2
Fluid Ext. of Valerian (P. D. & Co.)..... " " 5
Tinct. of Opium, deodorized..... " " 6
Ether..... " " 8
Alcohol..... " " 3
Sherry Wine, sufficient to make fluid ounces 8

Mix according to art. Adult dose 25 to 30 drops.

For ----- Age -----

No. 121.

Rx

Oil of Peppermint..... fluid drachms 2
Chloroform..... " " 2
Fluid Ext. of Speac (P. D. & Co.)..... " " 2
Fluid Ext. of Valerian (P. D. & Co.)..... " " 5
Tinct. of Opium, deodorized..... " " 6
Ether..... " " 8
Alcohol..... " " 3
Sherry Wine, sufficient to make fluid ounces 8

Mix according to art. Adult dose 25 to 30 drops.

For ----- Age -----

No. 121.

Rx

Oil of Peppermint..... fluid drachms 2
Chloroform..... " " 2
Fluid Ext. of Speac (P. D. & Co.)..... " " 2
Fluid Ext. of Valerian (P. D. & Co.)..... " " 5
Tinct. of Opium, deodorized..... " " 6
Ether..... " " 8
Alcohol..... " " 3
Sherry Wine, sufficient to make fluid ounces 8

Mix according to art. Adult dose 25 to 30 drops.

For ----- Age -----

No. 121.

Rx

Oil of Peppermint..... fluid drachms 2
Chloroform..... " " 2
Fluid Ext. of Speac (P. D. & Co.)..... " " 2
Fluid Ext. of Valerian (P. D. & Co.)..... " " 5
Tinct. of Opium, deodorized..... " " 6
Ether..... " " 8
Alcohol..... " " 3
Sherry Wine, sufficient to make fluid ounces 8

Mix according to art. Adult dose 25 to 30 drops.

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{4}$	
At twenty-one years, full dose.	

STINGS FROM POISONOUS PLANTS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 122.

- ℞
- Borax pulv.* 3 ij.
 - Acid Carbolic.* 3 j.
 - Morphia Sulph.* grs. x.
 - Pulv. Acaacia.* 3 iv.
 - Aqua q. s. ad.* fl. ʒ viij.

M. Agitate till solution is formed. Sig.—Apply with camel's hair brush. External use only.—*Dr. L. D., in Med. and Surgical Reporter.*

For ----- Age -----

No. 122.

- ℞
- Borax pulv.* 3 ij.
 - Acid Carbolic.* 3 j.
 - Morphia Sulph.* grs. x.
 - Pulv. Acaacia.* 3 iv.
 - Aqua q. s. ad.* fl. ʒ viij.

M. Agitate till solution is formed. Sig.—Apply with camel's hair brush. External use only.—*Dr. L. D., in Med. and Surgical Reporter.*

For ----- Age -----

No. 122.

- ℞
- Borax pulv.* 3 ij.
 - Acid Carbolic.* 3 j.
 - Morphia Sulph.* grs. x.
 - Pulv. Acaacia.* 3 iv.
 - Aqua q. s. ad.* fl. ʒ viij.

M. Agitate till solution is formed. Sig.—Apply with camel's hair brush. External use only.—*Dr. L. D., in Med. and Surgical Reporter.*

For ----- Age -----

No. 122.

- ℞
- Borax pulv.* 3 ij.
 - Acid Carbolic.* 3 j.
 - Morphia Sulph.* grs. x.
 - Pulv. Acaacia.* 3 iv.
 - Aqua q. s. ad.* fl. ʒ viij.

M. Agitate till solution is formed. Sig.—Apply with camel's hair brush. External use only.—*Dr. L. D., in Med. and Surgical Reporter.*

GONORRHŒA (CLAP).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 123.

℞ Hydrarg. Bichlor. gr. ½.
Squæ dist. ʒ viij.

M. Sig.—Use locally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 123.

℞ Hydrarg. Bichlor. gr. ½.
Squæ dist. ʒ viij.

M. Sig.—Use locally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 123.

℞ Hydrarg. Bichlor. gr. ½.
Squæ dist. ʒ viij.

M. Sig.—Use locally as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 123.

℞ Hydrarg. Bichlor. gr. ½.
Squæ dist. ʒ viij.

M. Sig.—Use locally as directed.

C. J. Perkins M.D.

GONORRHŒA (CLAP).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 124.

Rx

- Bals. Copaibae* } aa. ʒ j.
- Spts. Nitrici dulcis* }
- Liq. Potass.* ʒ ij.
- Pulv. Ext. Glycyrrhiza (P. D. & Co.)* ʒ ss.
- Oil Saurtheriae* gtt. xvj.
- Syrup Acaciae* ʒ vj.

Mix the copaiba, liq. potass., sweet spts. nitre and glycyrrhiza first, separately, and then add the other ingredients. Sig.—ʒ iv three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 124.

Rx

- Bals. Copaibae* } aa. ʒ j.
- Spts. Nitrici dulcis* }
- Liq. Potass.* ʒ ij.
- Pulv. Ext. Glycyrrhiza (P. D. & Co.)* ʒ ss.
- Oil Saurtheriae* gtt. xvj.
- Syrup Acaciae* ʒ vj.

Mix the copaiba, liq. potass., sweet spts. nitre and glycyrrhiza first, separately, and then add the other ingredients. Sig.—ʒ iv three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 124.

Rx

- Bals. Copaibae* } aa. ʒ j.
- Spts. Nitrici dulcis* }
- Liq. Potass.* ʒ ij.
- Pulv. Ext. Glycyrrhiza (P. D. & Co.)* ʒ ss.
- Oil Saurtheriae* gtt. xvj.
- Syrup Acaciae* ʒ vj.

Mix the copaiba, liq. potass., sweet spts. nitre and glycyrrhiza first, separately, and then add the other ingredients. Sig.—ʒ iv three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 124.

Rx

- Bals. Copaibae* } aa. ʒ j.
- Spts. Nitrici dulcis* }
- Liq. Potass.* ʒ ij.
- Pulv. Ext. Glycyrrhiza (P. D. & Co.)* ʒ ss.
- Oil Saurtheriae* gtt. xvj.
- Syrup Acaciae* ʒ vj.

Mix the copaiba, liq. potass., sweet spts. nitre and glycyrrhiza first, separately, and then add the other ingredients. Sig.—ʒ iv three times a day after eating.

O. J. Perkins M.D.

GLEET.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 125.

R

Hydrarg. Bichlor gr. $\frac{1}{2}$.
Ext. Hydrast. can. fl. $\frac{3}{4}$ ss.
 (Non-alcoholic. P. D. & Co.)
Aquae dist. q. s. ad. $\frac{3}{4}$ iv.

M. Sig.—Use locally as directed.

O. J. Perkins M.D.

For

Age

No. 125.

R

Hydrarg. Bichlor gr. $\frac{1}{2}$.
Ext. Hydrast. can. fl. $\frac{3}{4}$ ss.
 (Non-alcoholic. P. D. & Co.)
Aquae dist. q. s. ad. $\frac{3}{4}$ iv.

M. Sig.—Use locally as directed.

O. J. Perkins M.D.

For

Age

No. 125.

R

Hydrarg. Bichlor gr. $\frac{1}{2}$.
Ext. Hydrast. can. fl. $\frac{3}{4}$ ss.
 (Non-alcoholic. P. D. & Co.)
Aquae dist. q. s. ad. $\frac{3}{4}$ iv.

M. Sig.—Use locally as directed.

O. J. Perkins M.D.

For

Age

No. 125.

R

Hydrarg. Bichlor gr. $\frac{1}{2}$.
Ext. Hydrast. can. fl. $\frac{3}{4}$ ss.
 (Non-alcoholic. P. D. & Co.)
Aquae dist. q. s. ad. $\frac{3}{4}$ iv.

M. Sig.—Use locally as directed.

O. J. Perkins M.D.

PRIMARY SYPHILIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 126.

R

Hydrarg. Bichlor. gr. j.
Syrup Trifolium Co. (P. D. & Co.). ʒ viij.

M. Sig.—3 j three times a day.

C. J. Perkins M.D.

(OVER)

For

Age

No. 126.

R

Hydrarg. Bichlor. gr. j.
Syrup Trifolium Co. (P. D. & Co.). ʒ viij.

M. Sig.—3 j three times a day.

C. J. Perkins M.D.

(OVER)

For

Age

No. 126.

R

Hydrarg. Bichlor. gr. j.
Syrup Trifolium Co. (P. D. & Co.). ʒ viij.

M. Sig.—3 j three times a day.

C. J. Perkins M.D.

(OVER)

For

Age

No. 126.

R

Hydrarg. Bichlor. gr. j.
Syrup Trifolium Co. (P. D. & Co.). ʒ viij.

M. Sig.—3 j three times a day.

C. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{2}{10}$	
Seventeen to twenty,	$\frac{1}{10}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{2}{10}$	
Seventeen to twenty,	$\frac{1}{10}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{2}{10}$	
Seventeen to twenty,	$\frac{1}{10}$	
At twenty-one years, full dose.		

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{10}$	
Nine to twelve years,	$\frac{3}{10}$	
Thirteen to sixteen,	$\frac{2}{10}$	
Seventeen to twenty,	$\frac{1}{10}$	
At twenty-one years, full dose.		

TERTIARY SYPHILIS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 127.

R Calcium Sulphide..... gts. xvj.
Potass. Sodat. ʒ j
Syrup Trifolium Co. (P. D. & Co.) ʒ viij.

M. Sig.—ʒ j in a tumblerful of water three times a day.

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 127.

R Calcium Sulphide..... gts. xvj.
Potass. Sodat. ʒ j
Syrup Trifolium Co. (P. D. & Co.) ʒ viij.

M. Sig.—ʒ j in a tumblerful of water three times a day.

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 127.

R Calcium Sulphide..... gts. xvj.
Potass. Sodat. ʒ j
Syrup Trifolium Co. (P. D. & Co.) ʒ viij.

M. Sig.—ʒ j in a tumblerful of water three times a day.

O. J. Perkins M.D.

(OVER)

For----- Age-----

No. 127.

R Calcium Sulphide..... gts. xvj.
Potass. Sodat. ʒ j
Syrup Trifolium Co. (P. D. & Co.) ʒ viij.

M. Sig.—ʒ j in a tumblerful of water three times a day.

O. J. Perkins M.D.

(OVER)

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{8}$	
Nine to twelve years,	$\frac{3}{4}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{8}$	
Nine to twelve years,	$\frac{3}{4}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{8}$	
Nine to twelve years,	$\frac{3}{4}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE IIII

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{10}$	} of the Adult Dose.
Two to four years,	$\frac{10}{10}$	
Five to eight years,	$\frac{5}{8}$	
Nine to twelve years,	$\frac{3}{4}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

SPERMATORRHŒA (INVOLUNTARY EMISSIONS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----Age-----

No. 128.

R
M. Ext. Hydras. can. (non-alc.)... ʒj.
(P. D. & Co.)
M. Ext. Nucis Vom. (P. D. & Co.) } aa. ʒ ss.
M. Ext. Belladonnæ " " }
 Syrup Simp. q. s. ad..... ʒ iv.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----Age-----

No. 128.

R
M. Ext. Hydras. can. (non-alc.)... ʒj.
(P. D. & Co.)
M. Ext. Nucis Vom. (P. D. & Co.) } aa. ʒ ss.
M. Ext. Belladonnæ " " }
 Syrup Simp. q. s. ad..... ʒ iv.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----Age-----

No. 128.

R
M. Ext. Hydras. can. (non-alc.)... ʒj.
(P. D. & Co.)
M. Ext. Nucis Vom. (P. D. & Co.) } aa. ʒ ss.
M. Ext. Belladonnæ " " }
 Syrup Simp. q. s. ad..... ʒ iv.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

For-----Age-----

No. 128.

R
M. Ext. Hydras. can. (non-alc.)... ʒj.
(P. D. & Co.)
M. Ext. Nucis Vom. (P. D. & Co.) } aa. ʒ ss.
M. Ext. Belladonnæ " " }
 Syrup Simp. q. s. ad..... ʒ iv.

M. Sig.—ʒj three times a day.

O. J. Perkins M.D.

(OVER)

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{3}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{3}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{3}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{1}{20}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{5}$	
Nine to twelve years, $\frac{1}{4}$	
Thirteen to sixteen, $\frac{1}{3}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

PRIAPISM.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For----- Age-----

No. 129.

℞ *Camphor Monobrom*..... grs. XXX.
Lupulin " C.

M. et divide into pulv. No. x. Sig.—One at bedtime, and one through the night if necessary.—*Medical Summary*.

For----- Age-----

No. 129.

℞ *Camphor Monobrom*..... grs. XXX.
Lupulin " C.

M. et divide into pulv. No. x. Sig.—One at bedtime, and one through the night if necessary.—*Medical Summary*.

For----- Age-----

No. 129.

℞ *Camphor Monobrom*..... grs. XXX.
Lupulin " C.

M. et divide into pulv. No. x. Sig.—One at bedtime, and one through the night if necessary.—*Medical Summary*.

For----- Age-----

No. 129.

℞ *Camphor Monobrom*..... grs. XXX.
Lupulin " C.

M. et divide into pulv. No. x. Sig.—One at bedtime, and one through the night if necessary.—*Medical Summary*.

IMPOTENCE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 130.

℞ *Acid Phos. dil.*..... } aa. ʒ ij.
Sr. Nucis Vom...... }
Sr. Cannab. Ind...... } ʒ j.
Elix. Calisaya q. s. ad...... } ʒ iv.

M. Sig.—ʒ j every three hours during the daytime.—*Med. Herald.*

For..... Age.....

No. 130.

℞ *Acid Phos. dil.*..... } aa. ʒ ij.
Sr. Nucis Vom...... }
Sr. Cannab. Ind...... } ʒ j.
Elix. Calisaya q. s. ad...... } ʒ iv.

M. Sig.—ʒ j every three hours during the daytime.—*Med. Herald.*

For..... Age.....

No. 130.

℞ *Acid Phos. dil.*..... } aa. ʒ ij.
Sr. Nucis Vom...... }
Sr. Cannab. Ind...... } ʒ j.
Elix. Calisaya q. s. ad...... } ʒ iv.

M. Sig.—ʒ j every three hours during the daytime.—*Med. Herald.*

For..... Age.....

No. 130.

℞ *Acid Phos. dil.*..... } aa. ʒ ij.
Sr. Nucis Vom...... }
Sr. Cannab. Ind...... } ʒ j.
Elix. Calisaya q. s. ad...... } ʒ iv.

M. Sig.—ʒ j every three hours during the daytime.—*Med. Herald.*

IRRITABLE BLADDER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 131.

R *Uvae Ursae*..... ʒj.
Lupulin..... ʒ ss.
Aquae bullient..... ʒj.
Vein, adde.
Sodii Bicarb...... ʒij.
Tinct. Opii. camp...... fl. ʒij.

M. Sig.—3 ij every four hours.

O. J. Perkins M.D.

(OVER)

For..... Age.....

No. 131.

R *Uvae Ursae*..... ʒj.
Lupulin..... ʒ ss.
Aquae bullient..... ʒj.
Vein, adde.
Sodii Bicarb...... ʒij.
Tinct. Opii. camp...... fl. ʒij.

M. Sig.—3 ij every four hours.

O. J. Perkins M.D.

(OVER)

For..... Age.....

No. 131.

R *Uvae Ursae*..... ʒj.
Lupulin..... ʒ ss.
Aquae bullient..... ʒj.
Vein, adde.
Sodii Bicarb...... ʒij.
Tinct. Opii. camp...... fl. ʒij.

M. Sig.—3 ij every four hours.

O. J. Perkins M.D.

(OVER)

For..... Age.....

No. 131.

R *Uvae Ursae*..... ʒj.
Lupulin..... ʒ ss.
Aquae bullient..... ʒj.
Vein, adde.
Sodii Bicarb...... ʒij.
Tinct. Opii. camp...... fl. ʒij.

M. Sig.—3 ij every four hours.

O. J. Perkins M.D.

(OVER)

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{2}{10}$	} of the Adult Dose.
Two to four years,	$\frac{1}{10}$	
Five to eight years,	$\frac{1}{8}$	
Nine to twelve years,	$\frac{1}{6}$	
Thirteen to sixteen,	$\frac{1}{4}$	
Seventeen to twenty,	$\frac{1}{2}$	
At twenty-one years, full dose.		

UTERINE TONIC (FOR LESSENING LABOR PAINS).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For..... Age.....

No. 132.

R

N. Est. Cimici, rac. (P. D. & Co.) } aa. ʒj.
N. Est. Cramp. bark " }
Simp. Elixir q. s. ad..... ʒij.

M. Sig.—ʒj upon retiring.

O. J. Perkins M.D.

For..... Age.....

No. 132.

R

N. Est. Cimici, rac. (P. D. & Co.) } aa. ʒj.
N. Est. Cramp. bark " }
Simp. Elixir q. s. ad..... ʒij.

M. Sig.—ʒj upon retiring.

O. J. Perkins M.D.

For..... Age.....

No. 132.

R

N. Est. Cimici, rac. (P. D. & Co.) } aa. ʒj.
N. Est. Cramp. bark " }
Simp. Elixir q. s. ad..... ʒij.

M. Sig.—ʒj upon retiring.

O. J. Perkins M.D.

For..... Age.....

No. 132.

R

N. Est. Cimici, rac. (P. D. & Co.) } aa. ʒj.
N. Est. Cramp. bark " }
Simp. Elixir q. s. ad..... ʒij.

M. Sig.—ʒj upon retiring.

O. J. Perkins M.D.

ITCHING OF THE GENITALS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 133.

R *Plumbi Diacetat* gts. xvj.
Alcohol ʒ ij.
Glycerine ʒ ij.
Aquæ, rosæ q. s. ad ʒ j.

M. Sig.—To be used externally three or four times a day as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 133.

R *Plumbi Diacetat* gts. xvj.
Alcohol ʒ ij.
Glycerine ʒ ij.
Aquæ, rosæ q. s. ad ʒ j.

M. Sig.—To be used externally three or four times a day as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 133.

R *Plumbi Diacetat* gts. xvj.
Alcohol ʒ ij.
Glycerine ʒ ij.
Aquæ, rosæ q. s. ad ʒ j.

M. Sig.—To be used externally three or four times a day as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 133.

R *Plumbi Diacetat* gts. xvj.
Alcohol ʒ ij.
Glycerine ʒ ij.
Aquæ, rosæ q. s. ad ʒ j.

M. Sig.—To be used externally three or four times a day as directed.

C. J. Perkins M.D.

NURSING SORE MOUTH.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 134.

R

Jr. Eupatorii. aromat...... }
N. Ext. Hydras. can. (non-alc.).. } aa. ʒ ij.
(P. D. & Co.)
Aquae q. s. ad..... ʒ iv.

M. Sig. - ʒ j every hour during the daytime.

O. J. Perkins M.D.

For ----- Age -----

No. 134.

R

Jr. Eupatorii. aromat...... }
N. Ext. Hydras. can. (non-alc.).. } aa. ʒ ij.
(P. D. & Co.)
Aquae q. s. ad..... ʒ iv.

M. Sig. - ʒ j every hour during the daytime.

O. J. Perkins M.D.

For ----- Age -----

No. 134.

R

Jr. Eupatorii. aromat...... }
N. Ext. Hydras. can. (non-alc.).. } aa. ʒ ij.
(P. D. & Co.)
Aquae q. s. ad..... ʒ iv.

M. Sig. - ʒ j every hour during the daytime.

O. J. Perkins M.D.

For ----- Age -----

No. 134.

R

Jr. Eupatorii. aromat...... }
N. Ext. Hydras. can. (non-alc.).. } aa. ʒ ij.
(P. D. & Co.)
Aquae q. s. ad..... ʒ iv.

M. Sig. - ʒ j every hour during the daytime.

O. J. Perkins M.D.

SORE NIPPLE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 135.

℞
Balsam Peru } aa ʒ ss.
Sr. Arnicae }
Olei Amygdal. dulcis }
Aquae Calcis } aa ʒ ss.

M. Sig.—Shake well and apply with a camel's hair brush.—*Dr. Scarff, Md. Medical Journal.*

For ----- Age -----

No. 135.

℞
Balsam Peru } aa ʒ ss.
Sr. Arnicae }
Olei Amygdal. dulcis }
Aquae Calcis } aa ʒ ss.

M. Sig.—Shake well and apply with a camel's hair brush.—*Dr. Scarff, Md. Medical Journal.*

For ----- Age -----

No. 135.

℞
Balsam Peru } aa ʒ ss.
Sr. Arnicae }
Olei Amygdal. dulcis }
Aquae Calcis } aa ʒ ss.

M. Sig.—Shake well and apply with a camel's hair brush.—*Dr. Scarff, Md. Medical Journal.*

For ----- Age -----

No. 135.

℞
Balsam Peru } aa ʒ ss.
Sr. Arnicae }
Olei Amygdal. dulcis }
Aquae Calcis } aa ʒ ss.

M. Sig.—Shake well and apply with a camel's hair brush.—*Dr. Scarff, Md. Medical Journal.*

SORE NIPPLE.

℞ *Acid. Salicylic.* grs ʒ i
Ungt. Sassafras. grs ʒ i
 M.

No. 132

℞ *Acid. Salicylic.* grs ʒ i
Ungt. Sassafras. grs ʒ i
 M.

No. 132

℞ *Acid. Salicylic.* grs ʒ i
Ungt. Sassafras. grs ʒ i
 M.

No. 132

℞ *Acid. Salicylic.* grs ʒ i
Ungt. Sassafras. grs ʒ i
 M.

No. 132

INFLAMED BREAST.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 136.

R

Emp. Bella. et Phytolac. dec.

O. J. Perkins M. D.

For ----- Age -----

No. 136.

R

Emp. Bella. et Phytolac. dec.

O. J. Perkins M. D.

For ----- Age -----

No. 136.

R

Emp. Bella. et Phytolac. dec.

O. J. Perkins M. D.

For ----- Age -----

No. 136.

R

Emp. Bella. et Phytolac. dec.

O. J. Perkins M. D.

PRURITUS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 137.

℞ Hydrarg. Bichlor. ʒ ss.
 ℞. Opii ʒ j.
 Aquae ʒ viij.

M. Sig.—For external use only as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 137.

℞ Hydrarg. Bichlor. ʒ ss.
 ℞. Opii ʒ j.
 Aquae ʒ viij.

M. Sig.—For external use only as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 137.

℞ Hydrarg. Bichlor. ʒ ss.
 ℞. Opii ʒ j.
 Aquae ʒ viij.

M. Sig.—For external use only as directed.

C. J. Perkins M.D.

For ----- Age -----

No. 137.

℞ Hydrarg. Bichlor. ʒ ss.
 ℞. Opii ʒ j.
 Aquae ʒ viij.

M. Sig.—For external use only as directed.

C. J. Perkins M.D.

PRURITUS.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 138.

R

Acid. Hydrocyan. dil. ʒ ij.
Plumbi. Diacetati. ʒ j.
Olei. cacao. ʒ ij.

M. Sig.—Apply after washing with cold water.

O. J. Perkins M.D.

Age.....

No. 138.

R

Acid. Hydrocyan. dil. ʒ ij.
Plumbi. Diacetati. ʒ j.
Olei. cacao. ʒ ij.

M. Sig.—Apply after washing with cold water.

O. J. Perkins M.D.

For.....

Age.....

No. 138.

R

Acid. Hydrocyan. dil. ʒ ij.
Plumbi. Diacetati. ʒ j.
Olei. cacao. ʒ ij.

M. Sig.—Apply after washing with cold water.

O. J. Perkins M.D.

Age.....

No. 138.

R

Acid. Hydrocyan. dil. ʒ ij.
Plumbi. Diacetati. ʒ j.
Olei. cacao. ʒ ij.

M. Sig.—Apply after washing with cold water.

O. J. Perkins M.D.

SEDATIVE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 139.

R

Chlor. Anodyne (P. D. & Co.)..... 3 ij.
Syrup Simp...... }
Aquae..... } aa ʒ ij.

M. Sig.—ʒ j every two to four hours as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 139.

R

Chlor. Anodyne (P. D. & Co.)..... 3 ij.
Syrup Simp...... }
Aquae..... } aa ʒ ij.

M. Sig.—ʒ j every two to four hours as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 139.

R

Chlor. Anodyne (P. D. & Co.)..... 3 ij.
Syrup Simp...... }
Aquae..... } aa ʒ ij.

M. Sig.—ʒ j every two to four hours as directed.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 139.

R

Chlor. Anodyne (P. D. & Co.)..... 3 ij.
Syrup Simp...... }
Aquae..... } aa ʒ ij.

M. Sig.—ʒ j every two to four hours as directed.

O. J. Perkins M.D.

(OVER)

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

NOTE!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under, $\frac{3}{10}$	} of the Adult Dose.
Two to four years, $\frac{1}{10}$	
Five to eight years, $\frac{1}{8}$	
Nine to twelve years, $\frac{1}{6}$	
Thirteen to sixteen, $\frac{1}{4}$	
Seventeen to twenty, $\frac{1}{2}$	
At twenty-one years, full dose.	

FEMALE GONORRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 140.

R

Hydrarg. Bichlor..... gr. ij.
Aquae Dist..... o ij.

M. Sig.—Use locally a teacupful at a time as directed.

C. J. Perkins M.D.

For

Age

No. 140.

R

Hydrarg. Bichlor..... gr. ij.
Aquae Dist..... o ij.

M. Sig.—Use locally a teacupful at a time as directed.

C. J. Perkins M.D.

For

Age

No. 140.

R

Hydrarg. Bichlor..... gr. ij.
Aquae Dist..... o ij.

M. Sig.—Use locally a teacupful at a time as directed.

C. J. Perkins M.D.

For

Age

No. 140.

R

Hydrarg. Bichlor..... gr. ij.
Aquae Dist..... o ij.

M. Sig.—Use locally a teacupful at a time as directed.

C. J. Perkins M.D.

FEMALE GONORRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 141.

R

Acid. Boricum (finest powder)..... gr. x.
Glycerina..... ʒ ij.

M. Sig.—Apply upon absorbent cotton as directed.

O. J. Perkins M.D.

For

Age

No. 141.

R

Acid. Boricum (finest powder)..... gr. x.
Glycerina..... ʒ ij.

M. Sig.—Apply upon absorbent cotton as directed.

O. J. Perkins M.D.

For

Age

No. 141.

R

Acid. Boricum (finest powder)..... gr. x.
Glycerina..... ʒ ij.

M. Sig.—Apply upon absorbent cotton as directed.

O. J. Perkins M.D.

For

Age

No. 141.

R

Acid. Boricum (finest powder)..... gr. x.
Glycerina..... ʒ ij.

M. Sig.—Apply upon absorbent cotton as directed.

O. J. Perkins M.D.

LEUCORRHŒA (WHITES).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For.....

Age.....

No. 142.

R

℞. Ext. Hydras. can. colorless.

(P. D. & Co.)

Glycerina. aa ʒ j.

M. Sig.—ʒ ij to a quart of water as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 142.

R

℞. Ext. Hydras. can. colorless.

(P. D. & Co.)

Glycerina. aa ʒ j.

M. Sig.—ʒ ij to a quart of water as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 142.

R

℞. Ext. Hydras. can. colorless.

(P. D. & Co.)

Glycerina. aa ʒ j.

M. Sig.—ʒ ij to a quart of water as directed.

O. J. Perkins M. D.

For.....

Age.....

No. 142.

R

℞. Ext. Hydras. can. colorless.

(P. D. & Co.)

Glycerina. aa ʒ j.

M. Sig.—ʒ ij to a quart of water as directed.

O. J. Perkins M. D.

LEUCORRHŒA (WHITES).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For _____ Age _____

No. 143.

- R
Zinci Sulphate ʒ j.
Alum. grs. xv.
Cocoa Butter. ʒ iiij.
White Wax. ʒ ss
Oil Sweet Almond q. s.
Ext. Hyoscy. grs. iiij.

M. et ft. supposit. No. vi, Sig.—Use locally as directed.

O. J. Perkins M.D.

For _____ Age _____

No. 143.

- R
Zinci Sulphate ʒ j.
Alum. grs. xv.
Cocoa Butter. ʒ iiij.
White Wax. ʒ ss.
Oil Sweet Almond q. s.
Ext. Hyoscy. grs. iiij.

M. et ft. supposit. No. vi, Sig.—Use locally as directed.

O. J. Perkins M.D.

For _____ Age _____

No. 143.

- R
Zinci Sulphate ʒ j.
Alum. grs. xv.
Cocoa Butter. ʒ iiij.
White Wax. ʒ ss.
Oil Sweet Almond q. s.
Ext. Hyoscy. grs. iiij.

M. et ft. supposit. No. vi, Sig.—Use locally as directed.

O. J. Perkins M.D.

For _____ Age _____

No. 143.

- R
Zinci Sulphate ʒ j.
Alum. grs. xv.
Cocoa Butter. ʒ iiij.
White Wax. ʒ ss.
Oil Sweet Almond q. s.
Ext. Hyoscy. grs. iiij.

M. et ft. supposit. No. vi, Sig.—Use locally as directed.

O. J. Perkins M.D.

AMENORRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For-----

No. 144.

R

Ferri. Sulphate essic.
Serebinthinae alba. aa. 3 ss.
Pulv. Aloes soc. gʒs. x.

M. et divide into pil. No. xxx. Sig.—One pill night and morning.

O. J. Perkins M. D.

Age-----

For-----

No. 144.

R

Ferri. Sulphate essic.
Serebinthinae alba. aa. 3 ss.
Pulv. Aloes soc. gʒs. x.

M. et divide into pil. No. xxx. Sig.—One pill night and morning.

O. J. Perkins M. D.

Age-----

For-----

No. 144.

R

Ferri. Sulphate essic.
Serebinthinae alba. aa. 3 ss.
Pulv. Aloes soc. gʒs. x.

M. et divide into pil. No. xxx. Sig.—One pill night and morning.

O. J. Perkins M. D.

For-----

Age-----

For-----

Age-----

DYSMENORRHŒA.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 145.

Rx

Ext. Cannab. Ind. } aa. gr. ijss.
Ext. Hyoscyami }
Cacao Butter 3 V.

M. et ft. suppos. No. v. Sig.—One to be used every night as directed.

O. J. Perkins M.D.

Age

No. 145.

Rx

Ext. Cannab. Ind. } aa. gr. ijss.
Ext. Hyoscyami }
Cacao Butter 3 V.

M. et ft. suppos. No. v. Sig.—One to be used every night as directed.

O. J. Perkins M.D.

For

Age

No. 145.

Rx

Ext. Cannab. Ind. } aa. gr. ijss.
Ext. Hyoscyami }
Cacao Butter 3 V.

M. et ft. suppos. No. v. Sig.—One to be used every night as directed.

O. J. Perkins M.D.

Age

No. 145.

Rx

Ext. Cannab. Ind. } aa. gr. ijss.
Ext. Hyoscyami }
Cacao Butter 3 V.

M. et ft. suppos. No. v. Sig.—One to be used every night as directed.

O. J. Perkins M.D.

IRRITATION OF THE BLADDER.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 146.

- R Potassium Citrate ʒ iv.
- N. Ext. Sriticum Repens (P. D. & Co.)
- Sr. Hyoscyami aa. ʒ j.
- N. Ext. Buch. ʒ ss.
- Aquae q. s. ad ʒ iij.

M. Sig.—ʒ j in a wineglass of water three to four times a day.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 146.

- R Potassium Citrate ʒ iv.
- N. Ext. Sriticum Repens (P. D. & Co.)
- Sr. Hyoscyami aa. ʒ j.
- N. Ext. Buch. ʒ ss.
- Aquae q. s. ad ʒ iij.

M. Sig.—ʒ j in a wineglass of water three to four times a day.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 146.

- R Potassium Citrate ʒ iv.
- N. Ext. Sriticum Repens (P. D. & Co.)
- Sr. Hyoscyami aa. ʒ j.
- N. Ext. Buch. ʒ ss.
- Aquae q. s. ad ʒ iij.

M. Sig.—ʒ j in a wineglass of water three to four times a day.

O. J. Perkins M.D.

(OVER)

For ----- Age -----

No. 146.

- R Potassium Citrate ʒ iv.
- N. Ext. Sriticum Repens (P. D. & Co.)
- Sr. Hyoscyami aa. ʒ j.
- N. Ext. Buch. ʒ ss.
- Aquae q. s. ad ʒ iij.

M. Sig.—ʒ j in a wineglass of water three to four times a day.

O. J. Perkins M.D.

(OVER)

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty-one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty one years, full dose.		

NOTE!!!!

The dose in this prescription is for an adult. If the age is given otherwise, the pharmacist will please make dose directions in accordance with the following table:

One year or under,	$\frac{20}{100}$	} of the Adult Dose.
Two to four years,	$\frac{10}{100}$	
Five to eight years,	$\frac{5}{100}$	
Nine to twelve years,	$\frac{3}{100}$	
Thirteen to sixteen,	$\frac{1}{2}$	
Seventeen to twenty,	$\frac{1}{4}$	
At twenty one years, full dose.		

HÆMORRHAGE (FLOWING).

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 147.

R

N. Ext. Ergotæ (P. D. & Co.) . . . } aa. ʒj.
Tr. Cannab. Ind. }
Syrup Simp. q. s. ad. ʒiv.

M. Sig.—ʒj every two hours until 6 doses are taken, and then at longer intervals as required.

O. J. Perkins M.D.

For

Age

No. 147.

R

N. Ext. Ergotæ (P. D. & Co.) . . . } aa. ʒj.
Tr. Cannab. Ind. }
Syrup Simp. q. s. ad. ʒiv.

M. Sig.—ʒj every two hours until 6 doses are taken, and then at longer intervals as required.

O. J. Perkins M.D.

For

Age

No. 147.

R

N. Ext. Ergotæ (P. D. & Co.) . . . } aa. ʒj.
Tr. Cannab. Ind. }
Syrup Simp. q. s. ad. ʒiv.

M. Sig.—ʒj every two hours until 6 doses are taken, and then at longer intervals as required.

O. J. Perkins M.D.

For

Age

No. 147.

R

N. Ext. Ergotæ (P. D. & Co.) . . . } aa. ʒj.
Tr. Cannab. Ind. }
Syrup Simp. q. s. ad. ʒiv.

M. Sig.—ʒj every two hours until 6 doses are taken, and then at longer intervals as required.

O. J. Perkins M.D.

HÆMORRHAGE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For

Age

No. 148.

R

Plumbi Acetas grs. xxxij.
Acid. acetic. dil. ʒj.
Aquae ʒj.

M. Sig.—ʒj in a wineglass of water every 4 to 6 hours.

O. J. Perkins M.D.

For

Age

No. 148.

R

Plumbi Acetas grs. xxxij.
Acid. acetic. dil. ʒj.
Aquae ʒj.

M. Sig.—ʒj in a wineglass of water every 4 to 6 hours.

O. J. Perkins M.D.

For

Age

No. 148.

R

Plumbi Acetas grs. xxxij.
Acid. acetic. dil. ʒj.
Aquae ʒj.

M. Sig.—ʒj in a wineglass of water every 4 to 6 hours.

O. J. Perkins M.D.

For

Age

No. 148.

R

Plumbi Acetas grs. xxxij.
Acid. acetic. dil. ʒj.
Aquae ʒj.

M. Sig.—ʒj in a wineglass of water every 4 to 6 hours.

O. J. Perkins M.D.

UTERINE TONIC AND ALTERATIVE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----
 No. 149.
 R
N. Ext. Hydras. can. (non-alc.).
 (P. D. & Co.)
N. Ext. Mitchellia Repens
 (P. D. & Co.)
N. Ext. Cimici. Rac.
 (P. D. & Co.)
N. Ext. Chamac. lut. (false unicorn)
 (P. D. & Co.)
 aa. ʒ ss.
Simp. Elix.
 ʒ ij.
 M. Sig.—Teaspoonful three times a day.

O. J. Perkins M.D.

For ----- Age -----
 No. 149.
 R
N. Ext. Hydras. can. (non-alc.).
 (P. D. & Co.)
N. Ext. Mitchellia Repens
 (P. D. & Co.)
N. Ext. Cimici. Rac.
 (P. D. & Co.)
N. Ext. Chamac. lut. (false unicorn)
 (P. D. & Co.)
 aa. ʒ ss.
Simp. Elix.
 ʒ ij.
 M. Sig.—Teaspoonful three times a day.

O. J. Perkins M.D.

For ----- Age -----
 No. 149.
 R
N. Ext. Hydras. can. (non-alc.).
 (P. D. & Co.)
N. Ext. Mitchellia Repens
 (P. D. & Co.)
N. Ext. Cimici. Rac.
 (P. D. & Co.)
N. Ext. Chamac. lut. (false unicorn)
 (P. D. & Co.)
 aa. ʒ ss.
Simp. Elix.
 ʒ ij.
 M. Sig.—Teaspoonful three times a day.

O. J. Perkins M.D.

For ----- Age -----
 No. 149.
 R
N. Ext. Hydras. can. (non-alc.).
 (P. D. & Co.)
N. Ext. Mitchellia Repens
 (P. D. & Co.)
N. Ext. Cimici. Rac.
 (P. D. & Co.)
N. Ext. Chamac. lut. (false unicorn)
 (P. D. & Co.)
 aa. ʒ ss.
Simp. Elix.
 ʒ ij.
 M. Sig.—Teaspoonful three times a day.

O. J. Perkins M.D.

HOT FLASHES IN THE CHANGE OF LIFE.

FILL IN THE SPACE FOR NAME AND AGE, BEFORE TAKING TO THE DRUG STORE.

For ----- Age -----

No. 150.

R Fowler's Solution..... 3 j.
Tr. Card. Co..... 5 ss.
Aquea q. s. ad..... 5 iv.

M. Sig.—; j three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 150.

R Fowler's Solution..... 3 j.
Tr. Card. Co..... 5 ss.
Aquea q. s. ad..... 5 iv.

M. Sig.—; j three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 150.

R Fowler's Solution..... 3 j.
Tr. Card. Co..... 5 ss.
Aquea q. s. ad..... 5 iv.

M. Sig.—; j three times a day after eating.

O. J. Perkins M.D.

For ----- Age -----

No. 150.

R Fowler's Solution..... 3 j.
Tr. Card. Co..... 5 ss.
Aquea q. s. ad..... 5 iv.

M. Sig.—; j three times a day after eating.

O. J. Perkins M.D.

HOT FLASHES IN THE CHANGE OF LIFE.

PRESCRIPTION NO. 120.

C. K. ...

1. 2
2. 3
3. 4

...
...
...
...
...

No. 120

1. 2
2. 3
3. 4

...
...
...
...
...

No. 120

C. K. ...

...

C. K. ...

1. 2
2. 3
3. 4

...
...
...
...
...

No. 120

1. 2
2. 3
3. 4

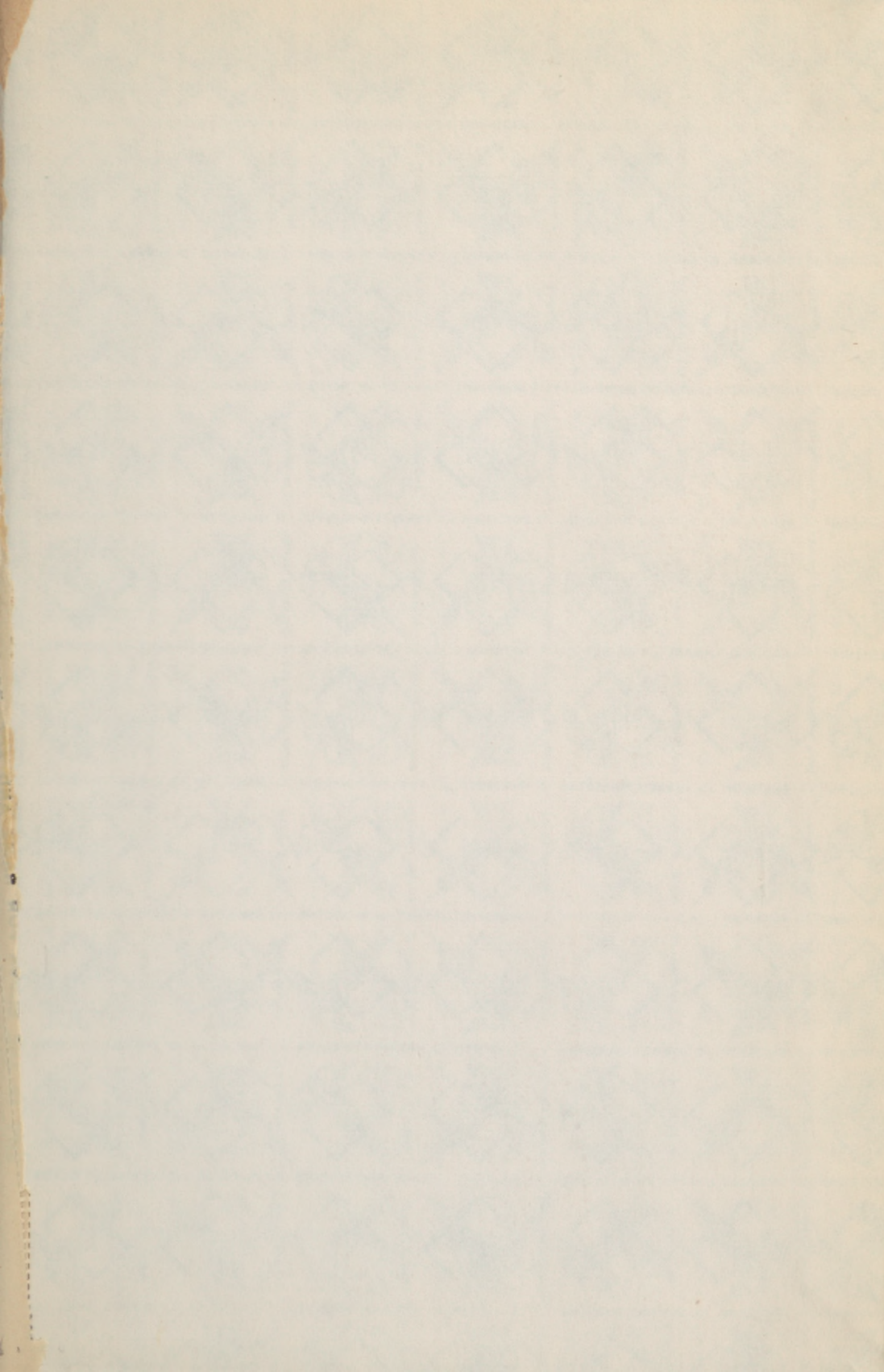
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No. 120

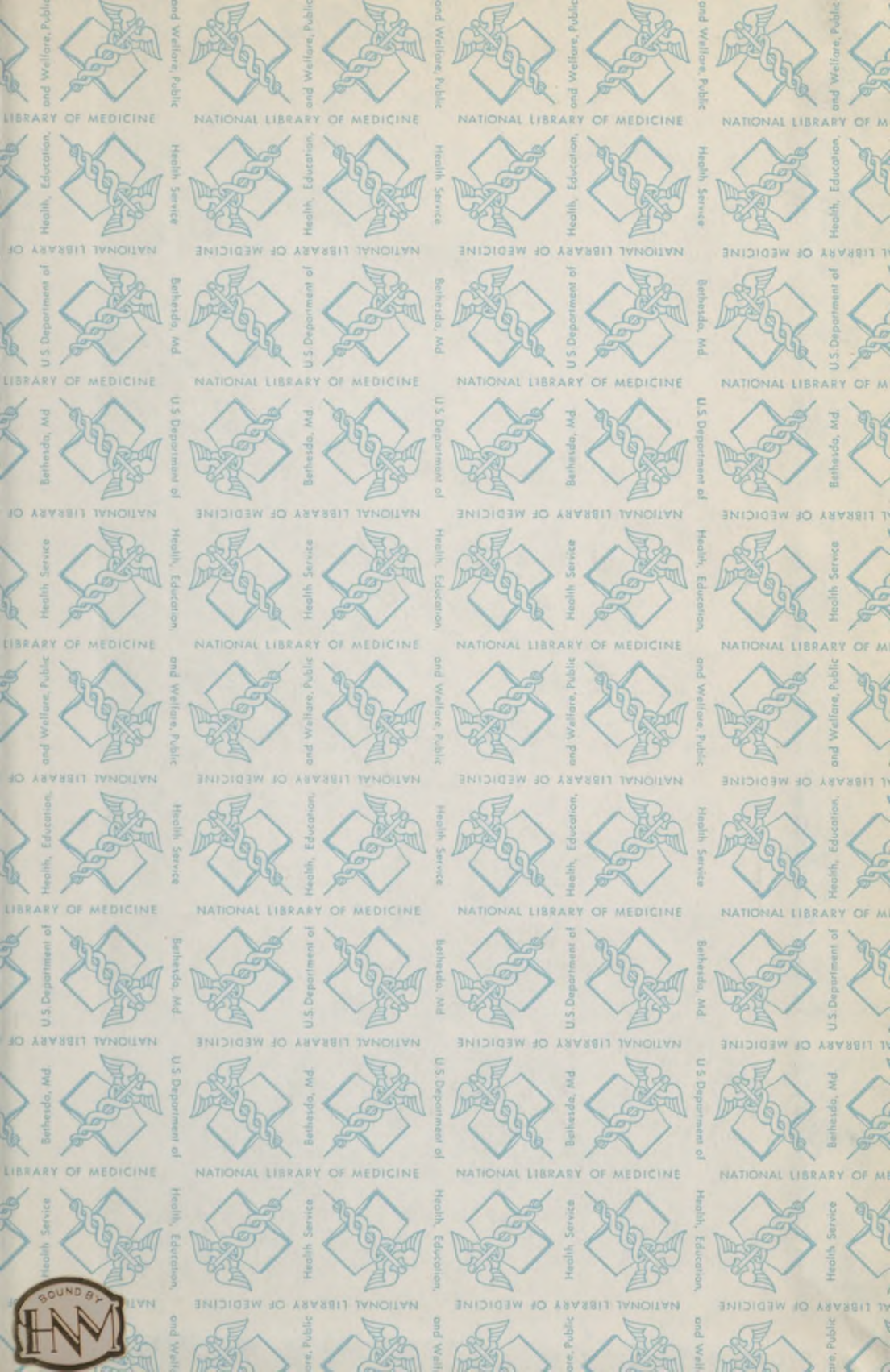
C. K. ...

...

C. K. ...







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