TABLE 80.—RELATIONSHIP OF SODIUM INTAKE AND DEGREE OF INITIAL SHOCK TO PLASMA CARBON-DIOXIDE COMBINING POWER AND pH OF URINE

Excess Sodium Intake *Gm.*	Degree of Shock on Admission	Preoperative Specimen		Postoperative Specimen			
		Plasma CO_2 *mEq./L.*	Urine pH	Plasma CO_2 *mEq./L.*	Hours after Wounding	Urine pH	Hours after Wounding
1.0 to 5.0 (Average of cases)	None or slight	24.0±1.3 (6 cases)	5.9 (4 cases)	31.0 (2 cases)	21.5 (2 cases)	6.8±0.24 (7 cases)	26.4±4.4 (7 cases)
	Moderate or severe	24.2±1.4 (9 cases)	5.7 (2 cases)	26.0±2.1 (7 cases)	32±3.8 (7 cases)	6.2±0.13 (10 cases)	31.7±4.0 (10 cases)
5.1 to 10.0 (Average of cases)	None or slight	24.0±1.7 (6 cases)	5.6 (3 cases)	24.0±1.8 (6 cases)	27.5±3.5 (6 cases)	7.2±0.22 (9 cases)	25.8±3.1 (9 cases)
	Moderate or severe	21.3±1.7 (12 cases)	5.9 (4 cases)	25.5±1.8 (8 cases)	25.1±1.6 (8 cases)	6.1±0.12 (14 cases)	24.1±1.6 (14 cases)
10.1 to 15.0 (Individual cases)	None or slight	25	.....	26	29	7.4	29
		26	5.8	33	17	8.0	15
	Moderate or severe	19	5.9	25	34	6.7	34
		11	.....	25	39	5.6	33
		23	5.6	.....	.....	6.7	33
		22	5.5	34	35	5.4	28
15.1 to 20.0 (Individual cases)	Moderate or severe	15	6.1	33	26	5.5	26
		26	.....	26	24	8.1	24

The preoperative specimens were taken when no alkali, or very small quantities, had been given; the postoperative specimens after the patients had received the amount of alkali indicated under "Excess Sodium Intake." The time between wounding and collection of the postoperative specimens is also indicated. Enough patients received between 1 and 10 Gm. of sodium to permit statistical analysis; determinations are listed individually for those who received between 10.1 and 20 grams. The excess sodium intake in grams was calculated from the percentage of sodium in sodium citrate or sodium bicarbonate. Sodium administered in isotonic saline solution is not included in the data.