TABLE 96.—*Essential data in 12 injuries of intraperitoneal viscera without penetration of peritoneal layer of abdominal wall*

Case	Wounding agent	Type of wound	Location of wound	Organ injured	Lesion	Treatment	Comment
1	Not recorded	Penetrating [1]	Left lower quadrant	Descending colon	Incomplete laceration	Suture	
2	do	Perforating [2]	Right flank	Liver	Minor laceration	Drainage	
3	Shell fragment	do	Right upper quadrant	Cecum and ascending colon.	Complete laceration	Exteriorization	Patient also had compound fracture of femur.
4	do	do	do	Liver	Stellate tear, right lobe	Drainage	
5	do	do	Left abdomen	Spleen	Severe laceration	Splenectomy	
6	do	do	do	Ileum	Contusion	Laparotomy	
7	do	Penetrating	Right flank	Ascending colon	Small anterior perforation.	Suture	
8	Not recorded	Perforating	Left chest	Stomach	Hematoma of wall	Thoracotomy; transdiaphragmatic abdominal exploration.	Died of shock and pulmonary edema, from extensive lung injury.
9	Shell fragment	do	Right abdomen	Cecum	Contusion	Laparotomy	
10	do	do	do	Ascending colon	Perforation and contusions.	Exteriorization	
11	Not recorded	do	Posterolateral left chest.	Splenic flexure of colon; jejunum.	Perforation, colon; contusions, jejunum.	Exteriorization of colon	
12	Shell fragment	do	Left chest and left abdominal wall.	Left lobe of liver, transverse colon, jejunum.	Lacerations	Drainage of liver; exteriorization of colon; suture of jejunum.	

[1] Penetrating: Missile retained in abdominal wall; peritoneum intact.
[2] Perforating: Through-and-through wound of abdominal parietes; peritoneum intact.