



FIGURE 26.—Diagrammatic showing of multiple wounds of head, neck, chest, abdomen, right upper extremity, and both lower extremities caused by shell fragments. There is a penetrating lacerated wound, 4 by 10 cm., in the right posterior side of the skull in the region of the squamous suture; both parietal bones, the occipital bone and the right mastoid bone, are extensively crushed. A penetrating wound, 2 cm. in diameter, enters the base of the neck in the right lateral side. A penetrating wound, 2 by 3 cm., in the right mid chest area in the anterior axillary line enters the thoracic cavity through the fourth intercostal space through a transverse fracture of the fourth rib. A through-and-through wound is present in the lower abdomen; the point of entry, 2 cm. in diameter, is in the left lower quadrant, and the point of exit, 4 cm. in diameter, is in the right side near the umbilicus. A wound, 4 by 6 cm., penetrates the right anterior shoulder without a palpable fracture. A through-and-through wound in the proximal third of the right mid arm reveals a compound comminuted fracture of the humerus; the point of entry is located laterally and measures 10 cm. in diameter; the point of exit is located medially and measures 12 cm. in diameter. A penetrating wound, 5 cm. in diameter, in the right distal arm, exposes a compound comminuted fracture of the lateral epicondyle of the humerus. There are several large lacerated, penetrating wounds in both anterior thighs, in the knees, and in the right mid leg. The largest wound is in the distal anterior right thigh and measures 20 cm. in diameter; there is a compound comminuted fracture of the femur in this latter wound. (Redrawn from Tribby, case No. 465.)