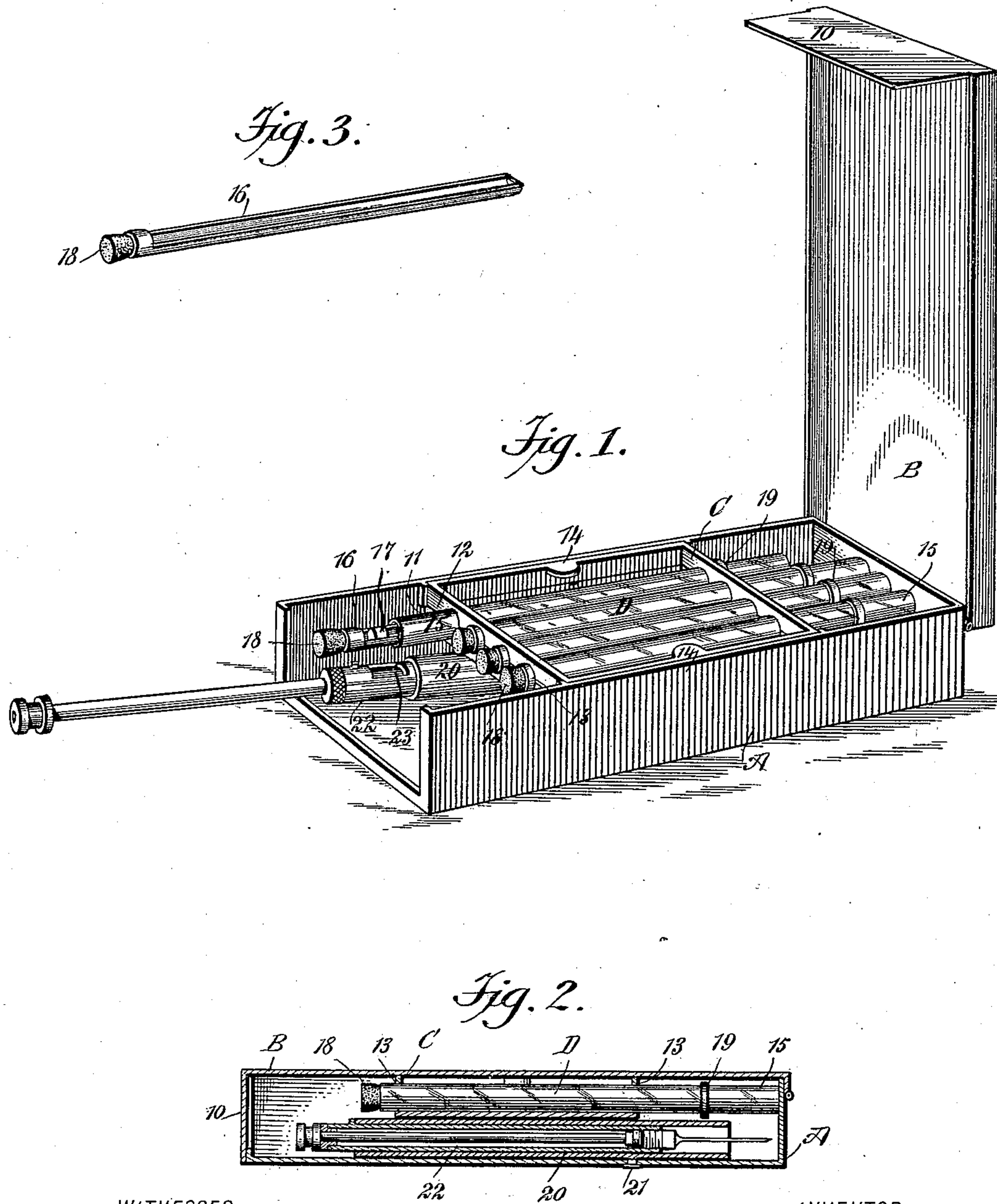


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T. A. CHAPPELL.
HYPODERMIC SYRINGE CASE.
APPLICATION FILED MAY 15, 1902.

NO MODEL.



WITNESSES:
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THOMAS ANDREW CHAPPELL, OF BRONWOOD, GEORGIA.

HYPODERMIC-SYRINGE CASE.

SPECIFICATION forming part of Letters Patent No. 722,943, dated March 17, 1903.

Application filed May 15, 1902. Serial No. 107,397. (No model.)

To all whom it may concern:

Be it known that I, THOMAS ANDREW CHAPPELL, a citizen of the United States, and a resident of Bronwood, in the county of Terrell and State of Georgia, have invented a new and Improved Hypodermic-Syringe Case, of which the following is a full, clear, and exact description.

The purpose of the invention is to provide a case adapted to hold a hypodermic syringe and containers for medical tablets or the like for charging the syringe, the holder for the syringe and the containers being in such relation to each other that the one may receive a charge from the other without removing either from the case, thus preventing an accidental loss of material.

Another purpose of the invention is to provide a means whereby a syringe in the holder may be moved beneath the outlet portions of the tablet-containers in the case and to construct the containers in two sections—a tubular body-section and an inner receiving-section segmental in cross-section and which carries the cork or stopper for the body.

A further purpose of the invention is to provide a case which will render the use of a hypodermic syringe very convenient and which will admit of the needle remaining on the syringe without danger of breakage.

The invention consists in the novel construction and combination of the several parts, as will be hereinafter fully set forth, and pointed out in the claims.

Reference is to be had to the accompanying drawings, forming a part of this specification, in which similar characters of reference indicate corresponding parts in all the figures.

Figure 1 is a perspective view of the improved case opened and illustrating a syringe in position to receive a charge from one of the containers. Fig. 2 is a longitudinal section through the case closed, the section being also taken through the syringe-holder and a syringe within the holder; and Fig. 3 is a detail perspective view of a receiving-section of a container.

The case is usually constructed, as shown in Fig. 1, with a box-like body A, open at the top and at one end, and a cover B, hinged to the body and provided with an end section

10 to close the open end of the body when closing the top thereof. A tray C is fitted in the body of the case at its central portion, and while the upper edge of the tray is substantially flush with the upper edge of the body the bottom of the tray is removed some distance from the corresponding portion of the body of the case, as is shown best in Fig. 2. This tray is preferably made in two sections 11 and 12, the lower section being fixed and the upper section removable, and at the ends of the tray C apertures 13 are produced, partly in each section, and these apertures are by preference circular, while at the upper side edges of the removable tray-section 12 inwardly-extending lugs 14 are provided to facilitate lifting said sections in order that containers D may be placed in the tray between the two sections, being seated in the apertures 13 in the tray, as is shown in Figs. 1 and 2. These containers D consist of a tubular body-section 15 and a receiving-section 16, adapted to have end movement in the body and being capable of being drawn from the body. The body-sections 15 of the containers D are by preference of glass or other transparent or semitransparent material and are open at their forward ends and closed at their rear ends. The receiving-sections 16 of the containers, as is illustrated in Fig. 3, are semi-circular or segmental throughout their length with the exception of their inner ends, which are closed, and their outer ends (which outer ends are circular in cross-section and are adapted to receive a cork or stopper 18 when a receiving-section of a container is carried within the body-section thereof) serve not only to close the receiving-section, but likewise the open end of the body-section of a container, as is shown in Figs. 1 and 2. The tablets 17 to be introduced into the hypodermic syringe are located in the receiving-sections 16 of the containers, and when the receiving-sections of the containers are wholly within the body-sections of the same the open portions of the receiving-sections are uppermost, as is shown in Fig. 1, and to discharge a tablet from the receiving-section of a container the said receiving-section is drawn out a suitable distance from the body-section of the container, as is shown at the left in Fig. 1,

and the receiving-section is then turned so as to spill a tablet therefrom. In order that the containers when placed in position in the tray shall have limited sliding movement therein and may not be accidentally drawn from the said tray, collars 19 are attached to or made integral with the exterior of the body-sections 15 of the containers near their rear ends, and these collars when the body of a container has been drawn out sufficiently and the contents are to be discharged engage with the rear end of the tray C, and the containers are therefore prevented from being moved farther in a forward direction.

15 In the space beneath the tray C a tubular holder 20 is located, adapted to receive a hypodermic syringe 22, and this holder 20 is open at both of its ends, as is shown in Fig. 2. Preferably near the inner end of the holder

20 a pivot-pin 21 connects it with the bottom of the body-section A of the case, as is also shown in Fig. 2. The hypodermic syringe used in connection with a case of the construction described is provided with an opening 23 in its barrel near its outer end.

25 When the syringe is to be charged with material, the container having the necessary material is drawn outward bodily until its collar 19 engages with the tray C. Then the receiving-section of that container is drawn out sufficiently to expose a tablet therein. The syringe is now drawn sufficiently from the holder to expose the opening 23 in its barrel, and the holder is moved upon its pivot by

35 moving the syringe in a lateral direction to bring the opening in the syringe beneath the partially-withdrawn receiving-section of the container, and the said receiving-section is then turned downward until a tablet shall drop therefrom into the opening 23 in the barrel of the syringe, whereupon the receiving-section of the container is again carried into its body-section and the body-section is pushed rearward until, for example, its rear end engages with the rear end of the body of the case, which is the normal position of all of the containers. It will be understood that prior to bringing the syringe in position to receive a charge the piston of the syringe

50 is drawn to the head end thereof or away from the needle, so that after the charge has been placed in the syringe the syringe may be withdrawn from the holder and the piston is pushed in to crush the tablet and is next operated to draw the liquid therein and again operated to effect an injection. It is evident that as the holder 20 for the syringe is pivoted about centrally below the mass of containers the syringe by the movement of the

60 holder may be brought to receiving position beneath the outlet portion of any one of the containers.

It will be observed that the holder 20 is made of such length that the needle of the syringe need not be removed and that said holder

acts in a measure as a protector for the needle.

Having thus described my invention, I claim as new and desire to secure by Letters Patent—

1. A case, containers located in the said case, supports for the containers, in which supports said containers have rotary and end movement, the containers being adapted to contain medical tablets or the like, and a holder pivotally supported in the case below the supports for the containers, the said holder being adapted to receive and carry a syringe with needle attached beneath the outlet portion of any one of the containers, substantially as described.

2. In a hypodermic-syringe case, a body open at one end, a tray located in the said body, containers having end movement in the said tray, each container consisting of a body and a receiving-section having end movement in the body, the receiving-section being open at one side for the greater portion of its length, and a holder pivoted to the body beneath the said tray, said holder extending beyond said tray, so that a syringe carried by the holder and which the holder is adapted to receive, may be brought beneath the receiving-section of any container when the receiving-section is drawn from the body-section of the container.

3. A hypodermic-syringe case, consisting of a body-section open at one end, a tray carried by the body-section, constructed in two sections, a fixed and a removable section, containers carried by the said tray and extending beyond the ends thereof, each container consisting of a cylindrical body open at one end and closed at the other, and a receiving-section having sliding movement in the body, the receiving-section being adapted to contain tablets, being open from a point near its outlet to a point at or near its inner end, and a stopper carried by the receiving-section at its outer end, which stopper likewise serves to close the open end of the body, and a holder pivoted upon the body of the case beneath the said tray, which holder extends beyond the forward end of the tray, the said holder being adapted to receive a syringe, for the purpose set forth.

4. A syringe-case provided with a removable tray, and a series of containers held in said tray and each provided with a trough-like member, the latter being capable of a sliding and turning movement relative to the container.

In testimony whereof I have signed my name to this specification in the presence of two subscribing witnesses.

THOMAS ANDREW CHAPPELL.

Witnesses:

S. R. CHRISTIE,
J. W. ROBERTS.