ANNUAL REPORT

OF THE

BOARD OF MANAGERS

OF THE

New Jersey State Hospital

ΑT

TRENTON, N. J.

FOR THE

Year Ending October 31st

1912

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UNION HILL, N. J.
DISPATCH PRINTING COMPANY.
1913.



Letter of Transmittal.

TRENTON, NEW JERSEY.

To His Excellency, Governor James F. Fielder, Trenton, New Jersey:

DEAR SIR—Enclosed herewith the annual report of the Board of Managers of the New Jersey State Hospital at Trenton, together with the report of the Medical Director and Warden of that institution.

Very truly yours,

SCOTT SCAMMELL, Secretary.

Board of Managers.

| GARRET D. W. VROOM, PresidentTrenton |
|---|
| JOSEPH RICE, Vice-PresidentTrenton |
| STEWART PATON, M.DPrinceton |
| PROF. E. G. CONKLINPrinceton |
| J. LYLE KINMONTHAsbury Park |
| ARTHUR D. FORSTTrenton |
| LUTHER M. HALSEY, M.DWilliamstown |
| GEORGE T. TRACEY, M.DBeverly |
| |
| SCOTT SCAMMELL, SecretaryTrenton |
| HARVEY H. JOHNSON, TreasurerTrenton |
| |
| Medical Committee—LUTHER M. HALSEY, M.D., Chairman STEWART PATON, M.D. GEORGE T. TRACEY, M.D. |
| House and Grounds Committee—ARTHUR D. FORST, Chairman JOSEPH RICE J. LYLE KINMONTH |
| Auditing Committee—JOSEPH RICE, Chairman J. LYLE KINMONTH |
| PROF E G CONKLIN |

Consulting Staff.

Physicians.

WILLIAM A. CLARK, M.D., HORACE G. NORTON, M.D., CHAS. J. CRAYTHORNE, M.D., FRANK G. SCAMMELL, M.D.

Surgeons.

JOSEPH B. SHAW, M.D., NELSON B. OLIPHANT, M.D., THOS. B. MACKENZIE, M.D., MARTIN W. REDDAN, M.D.

Gynecologists.

GEORGE N. J. SOMMER, M.D., H. B. COSTILL, M.D., E. S. HAWKE, M.D., GEORGE H. PARKER, M.D.

Neurologists.

PAUL S. CORT, M.D., STEWART PATON, M.D.

Ophthalmologists.

CHARLES F. ADAMS, M.D., IRVINE F. P. TURNER, M.D.

Dentist.

DR. JAMES I. WOOLVERTON

Resident Officers.

| Medical Department. |
|---|
| HENRY A. COTTON, M.DMedical Director |
| JOHN C. FELTY, M.DFirst Assistant Physician |
| EDGAR B. FUNKHOUSER, M.D Second Assistant Physician |
| WILLIAM C. SANDY, M.DThird Assistant Physician |
| FREDERICK S. HAMMOND, M.D., Fourth Assistant Physician and Pathologist |
| J. ERWIN DIEHL, M.DFifth Assistant Physician |
| LILLA RIDOUT, M.D |
| E. RAY BUHRMAN, M.DAssistant in Laboratory |
| VINCENT L. PEREZ, D.D.SResident Dentist |
| Business Department. |
| SAMUEL T. ATCHLEYWarden |

Report of the Board of Managers.

To His Excellency, James F. Fielder, Governor of New Jersey:

SIR—We have the honor to present to you herewith the annual report of the Board of Managers of the New Jersey State Hospital at Trenton as required by provisions of the Act relative to the government and management of insane hospitals owned by the State of New Jersey.

From the Medical Director's report annexed hereto you will observe that on October 31, 1912, there were 1,451 patients, 742 men and 709 women. During the year 488 patients were admitted, 282 men and 206 women. In addition to these, two men were returned to the institution who had escaped and 11 patients who voluntarily committed themselves. The number of admissions therefore were 501, making the total number under care 1,952. Of this number there have been discharged during the year 405, 251 men and 154 women, leaving the total number of patients under care November 1st, 1912, 1,547, 781 men and 766 women.

We give you these figures largely for the reason that we desire to call your attention to the fact that the number of patients, 1,952, is the largest number that we have ever had in the institution at any one time. We are very glad to mention the fact that of the number of patients discharged during the past year there were 147 recoveries. This, based on the number of admissions, would be 29% of the cases admitted that have recovered. This recovery rate is considerably higher than the majority of insane hospitals.

The general health of the hospital has been very good during the year; no epidemics. We watch our water supply very carefully and an analysis is made every month.

We are very glad to report that the results of the voluntary commitment act have been very pleasing during the past year, there being 28 voluntary commitments, of which 12 have recovered.

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There have been a number of changes in our Medical Staff. Dr. Ralph P. Truitt left us to take a position as chief resident physician of Bay View Hospital near Baltimore, and it is very pleasing to the Board that he is doing excellent work there, which we think is due to his training in our institution.

NEW JERSEY STATE HOSPITAL.

Dr. Williams resigned to go into private practice. The Board regrets losing his services very much, as he was a conscientious and faithful officer while in the hospital.

Dr. Mary L. Evans, one of the staff for the past three years, left us to establish a private sanitarium in the West. She was a very industrious and capable physician.

Dr. Diehl has been appointed to the position of Senior Assistant Physician. Dr. E. Ray Buhrman succeeds to the position made vacant by the retiring of Dr. Evans, and is well fitted for the work. Dr. Kenneth B. Jones has been appointed an interne.

During the past few months the Board has employed Dr. Farrar to take the position made vacant by the resignation of Dr. William C. Sandy. Dr. Farrar is well equipped for the work, coming to us from the Shepherd Pratt Hospital.

The Board, taking a view of the rapid advancement in the treatment of mental disorders, decided to grant a leave of absence to Dr. F. S. Hammond and Dr. E. B. Funkhouser to go to Munich and take special courses, and in the reports received from them we feel they are making gratifying progress. We are of the opinion that each year some one member of the staff should be sent to the centers of Europe, where they are making a most exhausting study of conditions, and that it will be a very material help to this hospital, besides making the physicians more earnest and enthusiastic in their work.

We are having at the present time a very exhaustive examination of the patients' eyes, which we feel quite sure will be a very material help.

During the past year the visiting staff has performed 13 operations with good results. During the past year in the hospital dental office 283 cases were treated, the greater proportion of which were extractions of teeth in very bad condition. Many diseased conditions of the mouth were also treated, and while most of these cases were of local origin, general systemic infection frequently arises

by lack of oral hygiene. If we possessed a laboratory where teeth could be made I am sure we could report to you much more improvement.

An innovation started at the hospital is working out much good, that is, during the past year many County Medical Societies have held their meetings at the State Hospital. The members inspected the hospital, clinical demonstrations of cases were given them and we are sure if such work is continued the general practitioner will become more conversant with mental troubles, as we know that he must play a most important part in the treatment of incipient cases of mental disease.

The Sterilization Committee has visited the institution and has selected-a number of cases for operation. At the present time this law is being held up by an appeal to the Supreme Court. It has seemed to work out successfully in several states in which it has been tried, and while it may need some amendments, it would be unfortunate if it were claimed unconstitutional.

The University Extension Course started by Fordham University selected this hospital for instruction in clinical psychiatry and modern hospital methods. The meetings have been quite well attended and we feel it is a recognition of the good work we are trying to do. It gives us much pleasure to report that the exhibit of this hospital at the International Congress of Mental Hygiene had a great many favorable comments. We desire to call your attention to the fact that work is being done all over the country in mental hygiene and is making very marked progress. Not only medical men, but prominent laymen, are becoming very much interested and realize that this must necessarily be one of the prime factors in preventing mental diseases.

There were graduated from the institution 12 nurses last year, a number of whom are taking post-graduate courses in New York hospitals. Our nurses are of much better type than a number of years ago; they are more competent and take a greater interest in their work, which we think is largely due to their training.

We have tried to enlarge upon the occupation and amusement, giving individual patients more personal supervision. Their cases are studied more carefully and more systematically by the nurses and physicians, and the music is an ever-increasing source of amusement to them all.

We desire to call your attention to the fact that \$100,000 has been appropriated for a criminal insane hospital. It is absolutely necessary that this class of patients be segregated, and while this will make a very good beginning, we will probably need as much more before the building can be completed to take care of the criminal insane in the State.

It has been unfortunate that the amount appropriated for the dairy barns and laboratory was not sufficient to build them, but by some alterations in the plans and reducing the size of the basement in the laboratory we trust we will be able to complete them within the amount appropriated. We regret that we have not been able as yet to start work upon the new dairy barns, but all of the bids received were considerably in excess of the amount appropriated, and the State architect is at work at the present time trying to place the cost within the appropriation.

The necessity for more dairy barns is a very important business proposition for the State. Under our present conditions when our new barn is completed it will accommodate about one-half of our stock, meaning that we will have to purchase between fifty and one hundred thousand quarts of milk at a cost of 2½c per quart above the cost of production, making a loss of from \$1,500 to \$2,500 to the State of New Jersey yearly, besides not being able to raise our own stock, which would furnish us with from \$500 to \$1,000 worth of beef yearly, as with additional barns we could raise all our own stock, make all our own milk and practically kill that amount of beef yearly. We think this matter should be considered carefully, as it means a great deal towards the maintenance of our institution.

We desire to call your attention to the necessity of a new piggery. During the past year we have had a very severe epidemic of hog cholera. If we had buildings along advanced lines, in which ordinary sanitary precautions could have been taken, we doubt very much if this condition would have existed. During the Warden's régime we have been very successful in raising pigs, and it has been exceedingly profitable and a great saving to the institution. We have made considerable lard, sausage, fresh pork and ham, which has been a great saving over what they would have been purchased for in the open market. At Norristown, Pa., they raise sufficient pigs to supply their whole institution, and they have found it very economical.

We have a very fine herd of cattle and will soon be in a position to supply all the milk needed. To do this and to have perfectly healthy cows, the most advanced sanitary measures must be observed. The buildings must be so constructed that they will have plenty of light and ventilation and can be readily cleaned. We are very well aware that one of the most potent factors in the development of tuberculosis in cattle is badly ventilated and poorly lighted buildings in which the cattle are kept. The Warden deserves a great deal of credit for the care he has taken in developing this herd, the careful systematic inspection and the high state of development in which he is bringing our farms, but which it will be utterly impossible for him to continue unless he has proper buildings and is able to take precautionary measures against the herd becoming diseased.

In regard to the general management of the institution, the grounds are in excellent condition, the farms will compare favorably with the most advanced farming in this section. While last year was our first year, the report of the Warden shows conclusively that he has saved the State considerable money. If this continues it will be beyond question a good investment for the State. The Warden is doing everything in his power to bring the institution to a high state of efficiency and to raise as much as possible for the institution, which we are satisfied will show most gratifying results in a few years.

We feel that our Medical Staff deserves considerable praise for their work during the past year; several medical papers have been prepared showing original work and of a very advanced character. We desire particularly to call your attention to one paper, "The Fatty Degeneration of the Nervous Elements of the Cortex," which is a very advanced step in the cause of that psychosis known as dementia praecox, which seems to demonstrate very clearly that this condition is practically due to a fatty degeneration and will undoubtedly lead to something in the future which may be of assistance to us in this troublesome condition. Considerable of this work has been done, in conjunction with Professor Alzheimer, by our Medical Director, of whose original work of investigation we desire to speak in the highest praise. We have prepared at this hospital colored micro-photographs to illustrate these papers, and they have been the cause of considerable favorable comment, being the first

work of this kind ever done in this country. We are satisfied that the staff are thoroughly conscientious in their work, seeking at all times what is best for the hospital and patients, and the marked improvement in many cases is largely the result of this work.

Our out-patient department in conjunction with Mercer Hospital is doing excellent work. The field work in connection with the hospital has been more successful during the past year, especially the "after care" work of the insane. The work of our laboratory has grown considerably during the past year; 107 post-mortems have been held, which have given us a large number of specimens for careful study. This, in connection with histological, bacteriological and serological examinations, have given us a fund of data and many specimens which will be of inestimable value to the hospital in the future.

While we have nothing startling to report to you in regard to the work in the tuberculosis cottages, yet there have been a certain number of cases that have made marked improvement. While we must remember that the insane person with tuberculosis is an exceedingly difficult person to treat, yet the isolation of these cases, removing from the wards of the hospital the source of infection, must necessarily in the future result in good.

We have an appropriation which is now available for an admission ward on the female side of the house. We need one just as badly on the male side of the house, as it is only by the careful study under advanced methods that proper classification can be made and in many instances proper treatment given.

We still need considerable for new furniture in several of the wards of the building, as some of it is very antiquated and in very bad condition.

We did ask for an appropriation of \$15,000 for the installation of four new 150 H. P. boilers to replace the four old boilers which have reached the limit of their usefulness. The amount necessary for the installation of these boilers was not appropriated by the Legislature, and we are up against a very serious problem. It will be utterly impossible to properly heat the institution the coming winter with our present boiler capacity, and if some steps are not taken there is no question in the minds of the Board that many persons will suffer during the cold weather. While the makeshift for this present condition would be the installation of four new

boilers which would tide us over for a time, yet the construction of the new criminal insane building will still leave us sadly deficient in the way of heat.

We beg to call your attention to the very exhaustive report of Professor Pryor, which shows conclusively that in view of the construction of the criminal insane building, and that as this institution has undoubtedly reached the state where it is absolutely necessary to seriously consider the question of a central heating plant, he demonstrated conclusively in the report that it would be a great saving to the institution over our present system of heating. The cost to run the boilers would be very decidedly decreased, more heat and the nucleus can be developed now with additions in the future which would make all the needed requirements for the institution.

In view of the fact of the condition of a large number of our boilers, the Board is unanimously of the opinion that this matter should be taken up at once and a favorable disposition made of it which will supply our needs. In addition to that, such a power plant as Professor Pryor has outlined would supply us with a certain amount of electricity for lighting our building would unquestionably be a marked saving in another direction.

In addition to this, we desire to call your attention to the report of our Chief Engineer, which confirms Professor Pryor's report.

In regard to the report on the condition of our water plant and fire protection, in reading over this report you will see that we are very short of water during the dry season of the year, and in case of fire the result might be very disastrous, not only to the buildings but to the patients and employees, as we would not have the water pressure to reach the top stories of the buildings on account of insufficient water. We should have at least three more wells, and to drill these wells to a depth of 400 feet at a cost of \$2.50 per foot would necessitate the expenditure of \$3,000, and to pipe and connect them properly with our present system, it would practically cost \$3,000 more. Then we should have in connection with same a fire pump which would handle 1,000 gallons of water per minute at a cose of \$2,000, and equipment at \$500, making a total of \$8,500.

The buildings should be equipped with fire walls, fire doors and sprinklers in certain sections, the fire doors to cut off the draft which now exists the entire length of the building. Under the

present conditions, if a fire should break out it would sweep the whole building and we would be helpless to prevent it, as it is impossible to get water to this part of the buildings without breaking through the roof or cutting holes through the ceilings, which would be very difficult to do. At the present time we are unable to give you the cost of building fire walls and equipping with sprinklers, etc. We should have an entire equipment of new and up-to-date fire plugs, small hose house at certain places on our water lines with ladders, hose, etc., for same. Also a fire alarm system should be established throughout the institution at a cost of \$5,000. If this were done it would make a saving in insurance of 50 per cent.

We desire to say, as the Board of Managers, that the recommendations of the Medical Director and Warden for improvement we heartily endorse.

As required by law, most of the county institutions have been visited, and the following are the statistics:

CHMREDIAND COUNTY HOSPITAL FOR INSANE

| CUMBERLAND COUNTY HOSPITAL FO | OR INS | ANE. | |
|---|---------|----------|--------|
| | Male. | Female. | Total. |
| Admitted from Nov., 1911, to Nov., 1912 | 25 | 22 | 47 |
| Died from Nov., 1911, to Nov., 1912 | 9- | 13 | 22 |
| Discharged from Nov., 1911, to Nov., 1912 | II | 13 | 24 |
| BURLINGTON COUNTY HOSPITAL FO | R INS | ANE. | . • |
| Admitted from Nov., 1911, to Nov., 1912 | | | 51 |
| Discharged, 10 cured and 10 improved | | | 20 |
| Died | 0.0 | | 22 |
| Number present in hospital Nov. 1, 1912 | 88 | 93 | 181 |
| ATLANTIC COUNTY HOSPITAL FOR | INSA | NE. | |
| Admitted from Nov. 1, 1911, to Nov. 1, 1912 | 29 | 23 | 52 |
| Discharged | 10 | 10 | 20 |
| Died | 8 | 12 | 20 |
| On roll Nov. 1, 1912 | 55 | 56 | 111 |
| SALEM COUNTY ALMSHOUS | E. | | |
| Admitted from Nov., 1911, to Nov., 1912 | | | 23 |
| Discharged | | | 14 |
| Died | | | 4 |
| GLOUCESTER COUNTY ALMSHO | USE. | | |
| Number present Nov. 1, 1912 | or disc | charged. | 7 |
| CAMDEN COUNTY ASYLUM FOR I | NSAN | E. | |
| Admitted Nov., 1911, to Nov., 1912 | | | 180 |
| Discharged | | | 120 |
| Died | | | 46 |

We would again call your attention to the condition of affairs in Camden County Hospital. The senitary arrangements are not all they should be, and the provisions made for excited and violent patients are to be condemned. These patients are kept in the basement and have very little air or sunlight. We think their condition would be much improved by having more attention paid to them by the management.

In the Cumberland County Hospital a number of patients are kept in restraint continually, which we feel is not in harmony with modern views of caring for these patients, and the condition of the patients was not as good as it could be.

The Atlantic County Hospital is clean and sanitary. It was impossible to find out the number of acute cases admitted during the year. There was a tendency on the part of the Superintendent to withhold information regarding these cases. We also found a number of patients in restraint in this hospital.

We have, on several occasions, called your attention to the fact of the absolute necessity of having all acute cases sent to the State hospitals, as only in such institutions are modern methods practised and careful investigations made as to the diagnosis and treatment of such. As an economic problem it would be very much better for the State to have all these county institutions used for the chronic insane, and it should be obligatory on the part of the physicians and judges in the commitment of all acute cases that they be sent to the State institutions.

As one of the greatest things to be obtained in an institution of this character is the cure or amelioration of the condition of the patients committed to our care, the Board, in conjunction with the Medical Director, has taken very decidedly advanced grounds in doing everything that is possible for the careful study and investigation of these cases, and to place this institution on a plane with the best in this country, and we are convinced that if the same thorough, conscientious work is done in the future as in the past few years, we can all point with pride to the fact that we are accomplishing results at the New Jersey State Hospital and will be very proud of the fact that there is an institution in this country that is making a more determined effort to be well forward to the front with the good work that was started here by Dorothea Dix and

continued by the State, which will be an everlasting monument to the relief of the most unfortunate condition with which mankind is afflicted; that is, diseases of the mind.

Respectfully submitted,

GARRET D. W. VROOM, President.
JOSEPH RICE, Vice-President.
STEWART PATON, M.D.,
PROF. E. G. CONKLIN,
J. LYLE KINMONTH,
ARTHUR D. FORST,
LUTHER M. HALSEY, M.D.,
GEORGE T. TRACEY, M.D.,

Managers.

Medical Director's Report

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New Jersey State Library

Medical Director's Report.

To the Board of Managers of the New Jersey State Hospital at Trenton:

GENTLEMEN—I have the honor to submit the sixty-fifth annual report of the operations of the medical department of the New Jersey State Hospital at Trenton for the year ending October 31, 1912.

At the beginning of the fiscal year there were present in the hospital 1,451 patients, 742 men and 709 women. During the year 488 patients were admitted, 282 men and 206 women; two men were returned from escape, and adding the 11 patients nominally admitted for discharge at the end of their four months' visit, the number of admissions would be 501, making the total number under care 1,952. Of this number we have dismissed during the year 405—251 men and 154 women, leaving the total number of patients under care November 1, 1912, 1,547—781 men and 766 women. Of the total number of dismissals during the year, 89 men and 58 women were discharged recovered at the time of leaving the hospital. The decrease in the number of discharges from that of last year is 13. The number of recoveries, 147, shows a decrease of 26 over last year. This makes the recovery rate, calculated upon the number of admissions, 29 per cent.

The recovery rate, based upon the number of discharges, is 36 per cent., or a decrease of 5 per cent. from last year. The daily average number of patients is 1,498, an increase of 87 over last year.

The number of deaths during the year has been 151—88 men and 63 women. Our total number of deaths has increased 8 per cent. over last year. The percentage of deaths to discharges is 37 per cent. The death rate, computed upon the number of patients under treatment during the year, is 7 per cent., the same as last year.

Of the number of patients on visit at the end of our last fiscal year, 6 men and 5 women, total 11, have been nominally admitted for discharge during the year, at the end of the four months' visit. We have remaining on visit at the end of this year 11 men and 12 women, total 23.

The general health of the hospital the past year has been exceptionally good. We were fortunate enough to escape any epidemics.

We have to report four suicides during the year. Hannah Allen, admitted May 7, 1911, was a private voluntary patient from Trenton, suffering from neurasthenia. She had talked of suicide to her family and to the physicians, but in such a way that no one thought she would carry out her threat. The family, however, had been warned of the danger and difficulty of caring for her in a single room, and were told that it would be better to keep her in a dormitory, where she could be watched all the time. They refused to consent to this plan, as they were paying for her and thought she should have a private room. On April 9th, between the hours of 6 and 7 o'clock a. m., she tied a handkerchief around her neck and also fied to the bed-post. By falling on her knees she was able to accomplish her purpose. Dr. Sandy was called and he adopted measures to restore life, but he was not successful. The county physician was notified, and apparently was satisfied that the hospital was not to blame.

On June 24th, Louis Kotana, Hungarian patient from Middlesex County, fifty-five years of age, climbed up a large tree on the front lawn. He had been in the hospital one month and three days. The patient climbed the tree about 4 o'clock in the afternoon, and it was not reported until 6 o'clock. He said that if anyone came up for him he was going to jump down, and also that he intended to commit suicide. Ladders and ropes were secured and blankets were held under the tree, but the patient jumped from the tree, falling about sixty feet. He died at 11 o'clock that night.

On October 7th, Mamie Henneby, thirty-five years of age, a private patient from Trenton, committed suicide by hanging, was found in the bathroom about 10:30 a. m. hanging by the neck from overhead exposed plumbing. She had used a sheet, first getting up on the washstand. She could not be restored to life, although every means was resorted to. The county physician was notified and made the cause of death "suicide by hanging."

On October 17th, Victoria Stout, an indigent patient from Trenton, thirty-one years of age, committed suicide by bichloride of mercury poisoning. From her statement it was assumed that Mrs. Henneby, who committed suicide ten days before, gave her the tablets, which she kept hidden until she used them.

We regret to report this large number of suicides, but feel that the hospital cannot be entirely blamed, as we exercised a reasonable amount of caution with these patients. The last two, Mamie Henneby and Victoria Stout, were patients who slept in the observation ward and were under constant surveillance day and night. Mrs. Henneby went to the bathroom and there was able to elude observation long enough to commit the act. Victoria Stout was able to secrete the tablets and took them at a time when she thought no one was watching her.

We have had only six suicides during the last five years, averaging little more than one suicide a year, which is less than the average in State hospitals throughout the country for the past three years. We had only one suicide the previous year.

VOLUNTARY COMMITMENTS.

| Name. | Diagnosis. | Duration. | Date of admission. | Date of discharge. | Condition on discharge., |
|--|--|--|--|---|--|
| S. W. G. H. G. H. H. K. J. C. B. G. H. G. W. H. | Gen. Paralysis Habitual Drunkard Habitual Drunkard Delirium Tremens Delirium Tremens Arteriosclerotic | 2 weeks 8 days 3 days 3 mos. 6 mos. | Dec. 12, 1911 Jan. 10, 1912 Jan. 20, 1912 Feb. 2, 1912 Feb. 3, 1912 | Dec. 26, 1911 Jan. 23, 1912 Mar. 18, 1912 Jan. 18, 1912 Feb. 10, 1912 | Improved Recovered Recovered Recovered Recovered |
| W. D. H. W. E. C. | Brain Disease Alcoholic Dementia Manic Depressive Insanity, manic | 2 years 1 mo. 17 dys. | Feb. 23, 1912 Feb. 3, 1912 | Apr. 1, 1912 Mar. 20, 1912 | Died Improved |
| G. W. H. C. | phase Gen. Paralysis Organic Brain | 3 wks. 27 dys. 3 wks. 29 dys. | Mar. 5, 1912 Mar. 28, 1912 | Apr. 2, 1912 Apr. 27, 1912 | Recovered Recovered |
| N. A. A. B. R. C. P. C. G. | Gen. Paralysis Habitual Drunkard Narcotic Inebriety Unclassified | 3 mos. 4 dys. 2 yrs. 14 dys. 4 yrs. 2 mos. 1 month 1 day | Mar. 28, 1912 May 15, 1912 June 3, 1912 July 15, 1912 Aug. 10,1912 Nov. 1, 1911 | May 2, 1912 May 29, 1912 Sept. 3, 1912 Aug. 15, 1912 Aug. 11, 1912 | Not Imp. Recovered Recovered Recovered Not Insanc |
| Female M. J. | No Psychosis, Manic Depressive Insanity, depressed | | Jan. 11, 1912 | Nov. 22, 1911 | Recovered |
| C. F. S. McG. E. R. | phase Neurasthenia Manic Depressive Insanity, manic phase | 7 mos. 1 day 1 yr. 15 dys. 2 mos. 1 wk. 5 days | Feb. 23. 1912 Mar. 2, 1912 | Mar. 13, 1912 Mar. 8, 1912 May 18, 1912 | Recovered Recovered |

VOLUNTARY COMMITMENTS.

We continue to receive a comparatively large number of patients who avail themselves of the voluntary commitment law. During the year 18 men and 7 women, total 25, were admitted on voluntary papers. Of these 28, 14 men and 4 women have been discharged; 9 men and 3 women recovered. There remain in the hospital as voluntary commitments 4 men and 3 women.

The following table shows types of mental diseases in voluntary patients and the result of treatment.

MEDICAL STAFF.

We have had several changes in the Medical Staff during the year.

Dr. Ralph P. Truitt, who was Junior Assistant Physician for nearly two years, resigned on April 1st to accept a position as Chief Resident Physician at the City Detention Hospital for the Insane at Bay View, Baltimore. Dr. Truitt's experience in this hospital, and the character of the work done by him while here, lead us to believe that he is fitted for the work of reorganizing the work of the City Asylum, of which it was sorely in need.

From visits made at the Baltimore institution we are convinced that Dr. Truitt had used his experience here to considerable advantage. He was able to remove restraint from over thirty patients and in a very short time entirely reorganized the medical and clinical work of the hospital.

Dr. Harry D. Williams, who had been a member of the staff for over three years, resigned on June 1st to go into private practice in the City of Trenton. He was a conscientious and faithful officer while in the hospital, and is well fitted for the work he has chosen.

Dr. Mary L. Evans, woman physician for the last three years, resigned on October 1st to establish a private sanitarium for nervous and mental diseases in Portland, Oregon. She was faithful, industrious and capable in her work, and she carries the best wishes of her associates in this hospital for her success.

Dr. J. Erwin Diehl was appointed to the position of Senior Assistant Physician to succeed Dr. Williams.

Dr. Harry A. Bishop, a graduate of the University of Maryland, 1911, was appointed interne June 10th, and on October 1st was promoted to Assistant Physician.

Dr. E. Ray Buhrman appointed woman physician October 1st to succeed Dr. Evans. Dr. Buhrman has had considerable experience in insane hospital work, and spent some years at the Westborough State Hospital, Massachusetts. She comes well prepared to take up the work in this hospital.

Dr. Kenneth B. Jones, Assistant Physician at Bay View Hospital, Baltimore, has been appointed as interne, services to begin January 1, 1913.

CONSULTING STAFF.

There have been changes in the Consulting Staff during the year. As usual the medical men and surgeons serve for three months each, and we take this opportunity to extend the thanks of the Board of Managers and the Medical Director to all the consulting physicians who have rendered services during the year.

Especially interesting has been the work of Dr. Turner, ophthal-mologist, who has visited the hospital weekly and not only examined the eyes of all new patients, but thoroughly examined many of the old patients with special reference to the eyes in organic brain diseases and dementia praecox. The result of this work will be published in the near future.

The following is a table of operations performed during the year:

OPERATIONS.

| Date. | Patient. | Sex. | Operation. | Surgeon. | Result. |
|--|---|---------------------------|--|---|--|
| Nov. 2, 11 Nov. 12, 11 Nov. 16, 11 Dec. 5, 11 | M. E. J. M. E. J. E. B. K. B. | Fe. Male Fe. | 606 treatment 606 treatment 606 treatment Curettage and round ligament | Dr. Hammond Dr. Hammond Dr. Hammond Dr. Sommer | Successful Successful Successful Successful |
| Feb. 18, 12 | Е. М. | Fe. | suspension Appendectomy and breaking up adhesions | Dr. Sommer | Successful |
| Mar. 18, 12 Mar. 18, 12 May 23, 12 Aug. 7, 12 | C. N. A. S. W. L. C. M. V. H. G. | Fe. Fe. Male Fe. | Chloecystotomy Tonsillotomy Trephining Vaginal cysts | Dr. Shaw Dr. Adams Dr. Sommer Dr. Sommer | Successful Successful Successful Successful |
| Aug. 15, 12 | C. S. | Male | removed Resection one right rib and drainage | Dr. Reddan | Successful |
| Aug. 21, 12 | L. B. | Male | Cancer of | Dr. Reddan | Successful |
| Aug. 28, 12 | W. C. T. | Male | Operation on bladder | Dr. Reddan | Successful |
| Oct. 24, 12 | C. P. | Male | Trephining | Dr. Schellinger | Successful |

Men, 6; women, 7; total, 13.

DENTAL WORK.

For the first year after the installation of our dental outfit Dr. Fred S. Collier of Trenton visited the hospital once a week and attended to the patients' teeth as well as he could in his limited time. Realizing the necessity for a resident dentist to devote all of his time to the work, Dr. Vincent Perez was appointed on April 1st. Following is a report of the work done by him during that time.

April 1st to October 1st, inclusive. During this period a total of 283 cases were treated in the hospital dental office. This includes 153 male and 128 female patients.

In a great majority of the cases treated extractions were necessary, owing to the long neglected condition of the teeth before the patients were admitted to the hospital. A large number of patients were suffering from pyorrhoea alveolaris, most of the cases of local origin and some having the origin in constitutional derangement. As most of the cases are of local origin, pathological conditions can be attributed to a general lack of oral hygiene.

The operations performed were as follows:

| Male. | | Female. | |
|-------------------|-----|-------------------------|-----|
| Extractions | 358 | Extractions | 291 |
| Fillings | | Fillings | |
| Devitalizations | 29 | Devitalizations | 25 |
| Abscess treatment | 6 | Abscess treatment | 6 |
| Pericementitis | 3 | Hypertrophy of the gums | 1 |
| | | Gingivitis | 4 |

Owing to the lack of a laboratory it has not been possible to accomplish more prosthetic work. However, a few artificial dentures have been made, also repairs on broken plates.

VISITS OF BOARDS, COUNTY MEDICAL SOCIETIES, ETC.

The custom established by your Board of inviting the various county medical societies to hold one of their monthly meetings at this hospital has been accepted by the medical societies of the counties of Somerset, Middlesex, Burlington and Gloucester. The attendance at these meetings was exceptionally good, considering the distance from the hospital of most of the physicians who attended. Usually a whole day was devoted to the meetings. The hospital was inspected, and the newer methods explained. The members showed considerable interest in the work of the hospital, and in

all cases expressed their appreciation to the Board of Managers for the courtesies extended to them.

In the establishment of this custom your Board has taken an important step in the direction of securing the affiliation of the general practitioner with the work of the hospital and arousing their interest in the problem of mental hygiene, for, after all, the general practitioner is the one who must play an important role in the treatment of incipient cases in mental diseases, and who has still a more important task in aiding prevention. That they are willing and ready to take advantage of any information that can be obtained from State hospitals has been proven without doubt. It only remains for the State hospitals to gather important information which can be disseminated among the profession.

On October 4th the Advisory Board of the Commission of Charities and Corrections held a meeting at the hospital. They made a tour of inspection and noted the improvements which had been made since their last visit.

During the summer the Sterilization Committee, consisting of Drs. Costill and Marcy and Dr. Wight, Commissioner of Charities and Corrections, held several meetings at the hospital with a view of selecting cases for operation in accordance with the law passed at the last session of the Legislature. Some twenty-five cases were presented to them and the histories and copies of the records given to them. They decided that the cases presented were favorable ones for operation, and that quite a number could be released from the hospital if such an operation as suggested should be performed. The patients were represented by Counsellor Barton B. Hutchinson of Trenton.

Fearing the unconstitutionality of the act, the counsel for the patients, in conjunction with the counsel for other institutions, decided to test a case which was taken before the Supreme Court. Decision has not yet been rendered, consequently the Commission has not acted finally in these cases. It is to be hoped, for all concerned, that the act will not be declared unconstitutional. For, while it is defective in the fact that it only takes into account inmates of the various State institutions, at the same time it is a step in the right direction, and, unquestionably can only operate to the advantage of the patients and the public at large.

In September the Fordham University held a University Extension Course in Neurology and Psychiatry. This hospital was selected by those in charge for instruction in clinical psychiatry and modern hospital methods. The students who took the course were representative men from all over the United States, and on two Saturdays they were entertained by the hospital. Patients were demonstrated and methods explained.

MENTAL HYGIENE.

It is gratifying to note the advanced attitude your Board has taken in regard to mental hygiene. The exhibit authorized by the Board for the International Congress of Hygiene and Demography, held in Washington in September last, formed part of the general exhibit by several other institutions. The part assigned to this hospital was that referring to the historical data and modern institutional methods. All these facts were illustrated by photographs. The various eras were represented from the period of the establishment of insane hospitals by Dorothea Dix in 1848, then the later period when the asylum methods were changed for real hospital treatment, and the newer era which is characterized by the establishment of psychiatric clinics in connection with the Ann Arbor University, Mich., Johns Hopkins University and the Harvard Medical School.

This whole exhibit, of which the above was a section, received much favorable comment. It was especially noteworthy, as this was the first exhibit in Mental Hygiene in this country, and was the first time that the International Congress of Hygiene recognized the importance of having a special section devoted to this work.

At the conference in Washington many opportunities were given the members of the Board and the Medical Director to speak on the subject of Mental Hygiene to popular audiences, and during the year we have frequently been called upon to give lectures on this subject before women's clubs, civic organizations, etc.

We wish to refer to the activity of the National Committee of Mental Hygiene which, although in existence only a few years, has made tremendous progress and has succeeded in enlisting some of the best men in this country in the work of preventing mental diseases and ameliorating the condition of those mentally affected.

NURSING STAFF.

We are glad to report considerable improvement in the services of the nurses and attendants during the year. No cases of abuse have come to the attention of the officers of the institution, and we are beginning to feel that the present methods are largely responsible for the better care and treatment of the patients.

The policy of placing female nurses in charge of the male wards has now passed the experimental stage, and no one who has noted the contrast would feel justified in removing these nurses from the male wards. It is gratifying to note that in no instance has anything occurred which could throw discredit upon the policy of the Board.

The annual exercise of the Training School was held June 14th. The following graduates received diplomas:

Susan Elizabeth Brinsfield, Anna Elizabeth Berg, Helen Mary Diamond, Martha Lucinda Hepner, Minnie Belle Merkle, Mary Elizabeth McGarry, Flora Glover Nash, Beulah Louise Powers, Martha Anastasia Rafferty, Marta Ann Tryon.

Dr. Smith Ely Jeliffe of New York delivered the address to the graduates. The usual dance for the graduating class was held in the evening.

The thoroughness of the training received by the nurses in this hospital has been abundantly shown by the fact that every year our graduates are admitted to the New York general hospitals for post-graduate courses, and after six to nine months in this work are given responsible positions in these hospitals, with an increase in salary, so that it is impossible, with few exceptions, for us to re-employ these nurses.

It was found necessary to incorporate the Training School for Nurses so that it could be recognized by other States, especially New York. After the post-graduate courses our nurses are eligible for certificates as registered nurses in the State of New York, but such certificate was withheld from them because our Training School was not incorporated. This difficulty has now been overcome, and

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hereafter our graduates who do post-graduate work in New York will receive such certificates.

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Miss Elvina K. Bailey, who resigned on account of ill health, after several months spent in the West was able to resume her duties as supervisor. The hospital is to be congratulated on again having the services of Miss Bailey, whose long experience in this work, and her ability as a disciplinarian, adds considerable prestige to the Training School, and exercises a notable influence in the care and treatment of the patients.

Mrs. Margaret McMartin, whose services have been entirely satisfactory, has been retained as assistant supervisor.

Miss Agnes Fay, a former nurse at this hospital, who has had additional experience in general hospital work, was appointed as night supervisor.

Miss Julia Loftus, who was appointed as assistant supervisor, resigned during the year.

OCCUPATIONS AND AMUSEMENTS.

We are pleased to report that since the organization of the attendants' orchestra it has been successful, and is now in its third year. The patients derive much pleasure from the daily concerts and the weekly dances, for which the orchestra furnishes the music. Prof. Veghte continues his good work as director of the orchestra, and we are indebted to him for his untiring efforts for the success of this feature of our entertainments.

The occupational work in charge of Miss Amy R. Rickey continues to be beneficial to the patients. The work is gradually expanding and taking in more of the patients who are benefited by such occupation. We find that with a little tact and coaxing many patients who would become apathetic, indifferent and indolent, take an interest in basket and raffia work.

Miss Rachel A. Schauffler has been employed to supplement the work in amusements and occupations. She spends her time reading to the patients, playing games and taking them out for walks, and this summer will conduct a class in gardening. Her work so far has been successful, and she has been able to interest many patients who previously took very little interest in their surroundings. She receives instructions from the physicians in regard to these especially selected cases. She has also shown a disposition to find the needs of certain patients and thus effectually stimulate those who are most in need of such treatment. We are convinced that this should be made a very important feature of our treatment, and the result so far substantiates this view.

Miss MacEachron has taken charge of the choir and drills the patients in chorus work, and also arranges for amateur theatricals. in which the nurses and patients take part. Her devotion to the interests of the patients is responsible for the success she has achieved.

We have been fortunate enough to secure the services of Miss Isabelle Clark of Trenton, a teacher of fancy dancing, including folk and esthetic dancing. She will conduct two classes a week for the patients. The interest taken by them in this form of amusement is known to all and will certainly result in benefit to the patients.

NEW BUILDINGS, IMPROVEMENTS, ETC.

At the last session of the Legislature over \$200,000 was appropriated for extraordinary improvements, but, unfortunately, with one or two exceptions this money does not become available until the 1st of November.

Five thousand dollars appropriated for screening the windows has been expended, and the hospital is now equipped with permanent copper screens.

Fifteen hundred dollars appropriated for new furniture has been expended, and add much to the attractiveness of the wards.

A hydrotherapeutic equipment has been completed and is now in use.

Ten thousand dollars appropriated for overhauling the heating system in the main building has been contracted for, and the work of installation is progressing favorably. One of the main difficulties to be met with was that of ventilation, as there was no system in the hospital to secure fresh air on the wards. Prof. Pryor of the Stevens Institute has gone over these matters in his plans and special attention was given to this feature as well as that of heating. The amount expended will equip only a small part of the hospital, and it will be necessary to ask for money to equip the rest of the hospital.

New Jersey State Library

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The appropriation for a criminal insane building, \$100,000, does not become available until the 1st of November. We should be congratulated on obtaining this appropriation, as the Legislature has been petitioned for more than twenty-five years to provide adequate accommodations for this class of patients, but up to last year this petition was always disregarded. It is due to the efforts of Senator George W. C. Gaunt, Chairman of the Appropriation Committee, that this amount was received. Plans are under way for the erection of this building.

Plans are also being drawn for the erection of an admission building to the female department, for which the Legislature appropriated \$40,000.

A new laboratory building, for which \$10,000 was given, is also in the hands of the State architect, and we hope to begin work on same early in the spring.

MEDICAL WORK.

We have continued the medical work as outlined in our previous reports. This year we have appended to the annual report a clinical report by various members of the staff, which will be a summary and analysis of the records for the last five years. Such a report once in five years is of extreme value, as from the large amount of material collected during that time we can come to some definite conclusions regarding the clinical features of psychiatry.

We continue to send to the committing physicians abstracts of the records of patients committed by them, and they have expressed much appreciation for our courtesy.

The second volume of collected papers by the members of the Staff is about ready for publication. The following papers have been contributed during the year:

For the meetings of the American Medico-Psychological Association and the American Medical Association, held during the summer at Atlantic City, we prepared colored micro-photographs to illustrate the papers. This should receive special attention, as it is the first work of that character done in this country, and slides projected on a screen received much favorable comment. Later these plates were loaned to Dr. Achucarro of Madrid for his lectures on the Normal and Abnormal Histopathology of the Cortex, given at the Fordham University Extension Course in Neurology and Psychiatry. Drawings from these colored plates will be used to illustrate the articles when they are published.

I take this opportunity to bring to your consideration the faithful, conscientious work of the various members of the medical staff who have endeavored at all times to act for the best interest of the patients and the hospital, and the success in the care and treatment of the patients is due in a large measure to their faithful work.

OUT-PATIENT DEPARTMENT.

We continue to hold weekly clinics at the Mercer Hospital in the City of Trenton for the treatment of indigent cases of nervous and mental diseases.

The establishment of this department was commented upon in our last report, and the results obtained fully compensated those who spent their time in this work.

Drs. E. B. Funkhouser and William C. Sandy, Senior Assistant Physicians in this hospital, were appointed assistants in this department at Mercer Hospital and give their time once a week on alternate months.

FIELD WORK.

The work in this department has gone steadily forward during the past year. Under an appropriation made by the Legislature in 1910, we still have the services of the two field workers mentioned in our last report, who have carried on the study in heredity and have also done much toward "after care" work. All patients discharged from the hospital during the year have been visited and reports made upon same to the Medical Director. This not

[&]quot;Study of Heredity in Mental Diseases."

[&]quot;Post-Graduate Course at Munich."
"Fatty Degeneration of the Nervous Elements of the Cortex."

[&]quot;A Review of the Present Knowledge of the Histopathology of the Cortex."

[&]quot;Report of a Case of Hereditary Ataxia; Analysis of a Case."

[&]quot;Polyneuritic Delirium."
"Analysis and Results of 2,000 Wassermann Tests Among the Insane."

[&]quot;Analysis and Results of 2,000 Wassermann Tests Among the Insane.
"Translation of Alzheimer's Review, 'The Present Status of the Pathological Histology of the Psychoses.'"

[&]quot;Practical Eugenics."
"Value of Field Work in Studying the Heredity of Mental Diseases."

only gives us a chance to keep in touch with our discharged patients and to know whether they recover or relapse, but allows the families to keep in communication with the hospital in regard to obtaining necessary advice concerning their friends and relatives who have been discharged.

At the last session of the Legislature \$2,500 was appropriated for this work, and we shall continue along the same lines as explained in our last report.

LABORATORY REPORT.

As in all other hospital departments the laboratory work completed in the past year has shown a marked increase over that of previous years.

In particular, the number of autopsies performed has reached a figure never before obtained in the history of the institution. In all, 107 post-mortem examinations were held upon patients dying in the hospital, in addition to which 7 more examinations were made by request in other hospitals.

The 107 State Hospital autopsies represent 70 per cent. of the total 151 deaths in the institution, and shows an increase of 3 per cent. over the similar figures of last year.

As in previous years histological, bacteriological and serological examinations have been continued to be made of all specimens submitted by the three general hospitals in the City of Trenton, and 413 of these examinations are recorded.

Considerable time and attention have been devoted to a complete statistical investigation of the hospital population by means of the Wassermann reaction. Some 2,000 reactions have been performed and the results of these reactions performed on the entire number of hospital inmates during a year are on record and have been made the subject of a publication.

The microphotographic apparatus obtained by the special appropriation of last year has become available through installation in temporary quarters, and special work in colored microphotography (the first undertaken in this country) has been conducted.

The histologic cortex material of the past year has been particularly rich in the various syphilitic brain disorders, there being 7 cases of various types of cerebral lues, and one further case of

insular sclerosis in which a very definite etiological connection between the condition and lues could be determined by the histologic cortex findings.

As shown in the following anatomical examinations as in previous years serve a useful purpose in correcting both avoidable and unavoidable clinical errors:

| | Clinical. | Anatomical. |
|--------------------------------|-----------|-------------|
| Acute Meningitis (Delirium) | 1 | I |
| Alcoholic Psychosis | 3 | 3 |
| Arteriosclerotic Brain Disease | 20 | 18 |
| Delirium (Undifferentiated) | 5 | 5 . |
| Dementia Praecox | 13 | 12 |
| Epilepsy | | 3 |
| Exhaustion Psychosis | r | 1 |
| General Paralysis | 18 | 15 |
| Imbecility and Idiocy | 5 | 5 |
| Involutional Psychosis | 1 | I |
| Korsakow's Psychosis | 2 | I |
| Lues Cerebri | | 7 |
| Manic Depressive Insanity | | 3 |
| Morhinism (Toxic Delirium) | 1 | 1 |
| Organic Brain Disease | 4 | 0 |
| Paranoid Condition | 2 | 2 |
| Senile Dementia | 19 | 27 |
| Tabes with Psychosis | I | О |
| Unclassified | I | I |
| | | |

As is seen there are a number of notable discrepancies between the anatomical and clinical findings and which are particularly noticeable in the general paralysis and lues cerebri groups. It is of at least clinical interest to say regarding the 7 cerebral lues cases that 4 of these were clinically called general paralysis, 1 tabes with psychosis, 1 organic brain disease and 1 dementia praecox.

Still another diagnostically interesting case is one of supposed epilepsy of ten years standing which at autopsy proved to be one of juvenile general paralysis.

Several other cases of special interest, but of a different order, have been 3 cases of sudden death in apparently healthy persons which at autopsy showed no sonatic disorder sufficient to account for their sudden demise, but which on microscopic examination presented a very severe acute glia disturbance and nerve cell alteration as the only significant organic condition.

With regard to equipment: In view of the rapidly increasing activities of the laboratory and the ever-continued overcrowding of storage room and working space, it is a source of the highest

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satisfaction that the projected new laboratory building will in the following year become an assured fact, and one that will allow the assembling and proper use of apparatus at present either inactively stored or inconveniently placed.

RECOMMENDATIONS.

The amount appropriated for additions to the main building will be used entirely for the female department. We feel that similar buildings should be erected in the male department, and request that \$40,000 be appropriated for this purpose.

We are still very much in need of a congregate dining room for the annex building, for which we have requested an appropriation for the last few years. Connected with this dining room should be a central kitchen, the cost of which at present cannot be definitely given.

We are very much in need of an X-ray apparatus, and request that \$2,000 be appropriated for this purpose.

The main building has been pretty well supplied with furniture, but we still lack adequate furniture for the annex, and it is requested that \$2,000 be appropriated for new furniture.

We have not been able to complete remodeling the museum, for which money was appropriated a year ago, and would ask for \$500 to complete this work.

One thousand dollars is asked for for laboratory supplies which are necessary because of the continued increase in the cost of maintenance at the hospital and the difficulty in obtaining the necessary supplies to run the laboratory.

We shall need \$3,500 to continue our research and "after care" work.

CONCLUSIONS.

In concluding this report I wish to express my indebtedness to the members of the Board and the various committees, especially the Medical Committee, for the support and encouragement extended to me during the year.

The advanced stand taken by the Board of Managers in all matters pertaining to hospital management and the work of prevention is a source of gratification. Also the prompt recognition by them of the advisability of inaugurating the most up-to-date methods accounts largely for the success we have obtained. Only by such active interest, co-operation and advice can we hope to place this hospital among the first in the modern care and treatment of mental diseases.

We wish to express our thanks to the supervisors, nurses and attendants who have endeavored to co-operate with us, and who have performed their duties in a conscientious and faithful manner.

We also acknowledge our indebtedness to the Warden and his department, who have rendered us assistance during the past year.

Finally, I wish to acknowledge my indebtedness to the members of the Staff for their loyalty, support, co-operation and faithful work during the past year.

Respectfully submitted,

HENRY A. COTTON. Medical Director.

November 13, 1912.

1—GENERAL STATISTICS FOR THE YEAR.

| • | Males | . Females. | Totals. |
|---|--------|-----------------|---------|
| | 742 | 709 | 1451 |
| Patients in hospital November 1, 1911 | | 211 | 501 |
| Admitted within the year | 001 | 196 | 460 |
| Viz: by commitment | | 100 | 25 |
| by voluntary commitment | | 3 | - 3 |
| by transfer | . 0 | | 2 |
| from escape | . 2 | \mathbf{o} | |
| *From visit | . 0 | · | 11 |
| Whole number of cases within the year | . 1032 | | 1952 |
| Dismissed within the year | | 154 | 405 |
| Viz: discharged within the year as recovered at time of | f | | |
| leaving hospital | . ყა | | 151 |
| as capable of self-support | . 17 | 3 | . 20 |
| as improved | . 33 | 11 | 44 |
| as not improved | . 8 | 4 | 12 |
| as not insane | . 1 | 1 | 2 |
| died | . 88 | 63 | 151 |
| | . 0 | 2 | 2 |
| escapedon visit | . 11 | $1\overline{2}$ | 23 |
| Oil Visit | | 766 | 1547 |
| Patients remaining in the hospital Nov. 1, 1912 Viz: as indigent patients | | 676 | 1297 |
| | | 82 | 133 |
| as private patients | | | 67 |
| convicts | | | อัก |
| criminal | | | 1952 |
| Number of different persons within the year | | | 484 |
| Number of different persons admitted | | | 1498 |
| Daily average number of patients | | • | 1100 |
| *Six male and five female patients nominally admitted | ea for | aischarge. | |

2-INSANE RECEIVED ON FIRST AND SUBSEQUENT COMMITMENTS.

| | Cas | Cases Committed. | | |
|------------------------------|--------|------------------|---------|--|
| | Males. | Females. | Totals. | |
| First | . 245 | 182 | 427 | |
| Second | | 18 | . 46 | |
| Third | | 5 | 10 | |
| Fourth | | 0 | 0 | |
| Fifth | . 1 | 0 | 1 | |
| Sixth | . 1 | 0 | 1 | |
| Seventh | | 0 | 1 | |
| Eighth | | 0 | 'n | |
| Ninth | | ŏ | ň | |
| Tenth | | ŏ | ŏ | |
| Eleventh | | ŏ | Ŏ | |
| Twelfth Thirteenth | | ŏ | Ö | |
| Fourteenth | | ŏ | 0 | |
| Fifteenth | . 0 | 1 | 1 | |
| 2 IIICCIICII | | | | |
| Totals | . 282 | 206 | 488 | |
| | | 206 | 485 | |
| Total persons | | | 406 | |
| Never before in any hospital | . 238 | 168 | 406 | |

3. NATIVITY AND PARENTAGE OF INSANE PERSONS FIRST ADMITTED TO ANY HOSPITAL.

| | | Male | ٧. | F | EMALE | s. | Т | OTALS. | |
|--|---|---|---|---|--|---|--|--|---|
| PLACES OF NATIVITY. | Patients. | Fathers. | Mothers. | Patients. | Fathers. | Mothers. | Patients. | Fathers. | Mothers. |
| United States New Jersey Middle Atlantic States New England States Southern States | 10 108 37 6 | 47 54 15 12 11 | 57 53 17 1 13 | 5 84 30 3 8 | 21 41 13 2 10 | 26 43 14 2 8 | 15 192 67 9 15 | 68 95 28 14 21 | 83 96 31 3 21 |
| Totals Other Countries— England Germany Ireland Austria Syria Venezuela Norway Scotland Russia Holland Italy Hungary Japan Sweden Denmark Switzerland Poland Canada France New Foundland Total foreign Unknown | 168 3 9 11 10 0 1 1 3 9 0 7 9 1 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | 139 5 19 21 10 0 1 3 8 1 1 1 3 0 1 0 98 1 | 141 5 19 24 10 1 0 1 3 8 0 7 11 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 130 7 3 9 2 0 0 0 0 0 0 0 4 8 0 1 1 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 | 87 9 111 30 3 3 0 0 0 0 2 0 0 4 4 9 0 1 3 0 2 0 1 1 1 76 5 | 93 10 7 26 2 0 0 0 2 0 0 4 9 9 1 3 0 2 1 1 0 0 1 1 1 0 1 1 0 1 0 1 1 0 1 0 | 298 10 12 20 11 1 3 9 0 11 1 1 1 1 0 4 0 0 105 3 | 206 14 30 511 10 1 58 11 22 6 11 50 21 174 6 | 234 15 26 50 12 1 0 15 8 0 11 12 10 15 10 11 10 11 10 11 11 10 11 11 11 11 11 |
| Totals | 238 | 238 | 238 | 168 | 168 | 168 | 406 | 406 | 406 |

4. RESIDENCE OF INSANE PERSONS ADMITTED BY COMMITMENT

| | FIRST ADMITTED TO ANY HOSPITAL | | | OTHER 18810N | ıs. |] 7 | OTALS | | |
|--|--|---|--|---|--|--|---|--|---|
| PLACES. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| Atlantic Bergen Burlington Camden Cape May Cumberland Essex Gloucester Hudson Hunterdon Mercer Middlesex Monmouth Ocean Passaic Somerset Salem Union Warren Totals Citles or large towns, 10,000 | 2 0 18 1 4 1 1 177 444 446 0 10 9 0 0 238 | 2 0 8 4 3 0 15 0 7 48 32 29 4 0 11 2 0 0 | 4 0 10 20 24 4 7 1 18 125 76 73 10 0 21 11 0 0 0 406 | 1 0 0 0 4 4 0 0 0 1 0 7 20 2 4 1 1 2 1 0 0 - 44 | 2 0 1 3 1 1 1 2 0 2 10 6 2 0 5 1 1 0 0 5 1 1 0 0 0 0 0 0 0 0 | 30 11 71 11 13 30 90 86 11 77 22 10 | 3 0 2 22 1 4 1 1 18 97 46 48 7 1 12 10 0 0 | 4 0 9 7 4 4 1 17 0 9 58 38 31 4 0 16 3 1 0 | 7 0 111 295 8 2 26 1 1 27 155 84 79 11 28 13 1 0 |
| or over | 86 152 | 40 128 | 126 380 | $egin{array}{c} 22 \ 22 \ \end{array} $ | 14 24 | 36 46 ∦ | 108 17# | 54 / 152 | 162 326 |

5. CIVIL CONDITION OF PATIENTS ADMITTED TO THE HOSPITAL.

| , / | Males. | Females. | |
|--|------------|-----------|-----|
| Unmarried | 122 | 94 | 216 |
| Married | 137 | 85 | 222 |
| Widowed | | 26 | 44 |
| Divorced | | 1 | 3 |
| Unknown - the every surrent verse recent v | | 0 | 3 |
| | | | - |
| Totals | 282 | 206 | 488 |

6. OCCUPATIONS OF INSANE PERSONS FIRST ADMITTED TO ANY HOSPITAL.

MALES

| Accountant | 1 | Mason 1 |
|---------------------|---------------|---|
| Acrobat | 1 | Machinists 2 |
| Barbers | $\bar{2}$ | Metal ceiling worker 1 |
| Boatman | 1 | Morocco worker 1 |
| Bank cashier | i | Ministers 2 |
| Blacksmith | 4 | Mechanic 1 |
| Boilermaker | ī | Miner 1 |
| Bootblacks | ż | Packer 1 |
| Bookkeepers | 3 | Printer 1 |
| Butcher | ĭ | Powder Hakers |
| Butler | i | Painters 3 |
| Carpenters | 8 | Potters |
| | 3 | Paper hangers 4 |
| Coachmen | 1 | Photographers |
| Cooper | 7. | Paper cutter |
| Clerks | 4. | Polisher 1 |
| Cook | 1 | Plumbers |
| Chainmaker | $\frac{1}{2}$ | Real estate |
| Chauffeurs | 2 | recar course in its in |
| Contractor | 7 | reporter |
| Coppermaker | 1 | Tiethica |
| Designer | 1 | Rubber worker 1 |
| Dyer | 1 | Salesman 1 |
| Electrical engineer | 1 | |
| Electroplater | 1 | Students 3 |
| Engineers | 2 | Shoemaker 1 |
| Farmers | 24 | Sculptor 1 |
| Grocer | 1 | Tailors 3 |
| Gardeners | 2 | Upholsterer 1 |
| Hotel keepers | 2 | Waiters |
| Illustrator | 1 | Watchmen 3 |
| Ironworkers | 2 | Weaver 1 |
| Laborers | 77 | None 23 |
| Lawyer | 1 | Unknown 1 |
| Janitor | 1 | |
| Jockey | 1 | Total 238 |
| | | |

FEMALES

| Clerk Cigar maker Cigar packer Cook Dressmakers Decorator | 1 1 1 3 1 | Servants Saleswoman Pottery School girl Seamstress Teacher None | 1 1 1 1 |
|---|-----------------------|---|------------------|
| Housekeepers | 104 1 | Total | |

7. AGES OF INSANE AT FIRST ATTACK, ADMISSION AND DEATH.

| | | | | An _M Hosi | | | : | PERS | sons | Dı | ED. | |
|--|---|-------------|---|---------------------------------------|---------------------------------|--|--------|--|---|---|---|--|
| | | Fii ttac | | Adn | hen nitte | | | Fir: | | | t Ti | |
| AGES. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | 'Fotals. | Males. | Females. | Totals. |
| Congenital 15 years and less From 15-20 years From 20-25 years From 25-30 years From 30-35 years From 30-35 years From 40-50 years From 40-50 years From 60-70 years From 70-80 years From 70-80 years Uver 80 years Unknown | 12 13 27 33 36 39 36 19 11 3 15 | | 60 61 47 71 56 36 21 4 24 | 34 36 50 47 31 15 6 | 17 46 26 17 20 2 | 64 53 96 73 48 35 8 0 | 3 1 | 20 0 3 3 3 5 11 15 12 7 | 2 1 4 10 6 8 14 25 33 22 20 4 2 | 0 0 1 3 1 7 8 12 18 16 15 7 0 | 0 1 1 0 3 4 4 9 10 14 14 12 1 | 0 1 2 3 4 11 12 21 28 30 29 9 |
| Totals | 282 | 206 | 488 | 282 | 206 | 488 | 88 | 63 | 151 | 88 | 63 | 151 |

8. PROBABLE CAUSE OF MENTAL DISEASE IN PERSONS ADMITTED TO THIS HOSPITAL.

| | | | | | Predi | SPOSIN | G CAU | SES. | |
|---|---|--|--|---|--|---|---|---|---------------------------------------|
| | AD | MITTEL |). | He | eredita endenc | ry y. | Inte | mperai | ice. |
| EXCITING CAUSES. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| A—Physical.— Alcohol Alcohol and other causes Arteriosclerotic Grain Disease Birth Injury Arrested Development Childbirth Constitutional Inferiority Constitutional Inferiority and Other Causes Chorea Climacteric Drugs Epilepsy Gastritis Ill Health Ill Treatment Lactation Mastoiditis Menstrual Disorders Nephritis Operation Pregnancy Scarlet Fever Sexual Irregularities Senility and Other Causes Sunstroke Syphilis Trauma Tetanus Tetanus Tetanus Tetanus Tomestic Trouble Faulty Environment Fright Grief Overwork Overstudy | 7852301022410558070001000041106228611 310011001 | 10 0 14 1 1 0 13 34 0 0 12 1 2 0 0 20 1 5 0 0 3 2 2 2 1 1 0 0 0 1 0 0 0 0 | \$85 37 11 13 10 10 10 10 10 10 10 10 10 10 | 13 1 2 0 0 0 15 0 10 0 2 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 50200417 003020700000003100000 2211210 | 18 14 0 0 44 32 0 13 0 4 0 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 0 0 4 4 0 0 0 0 2 0 0 0 0 0 0 0 0 0 0 0 | 001000010000000000000000000000000000000 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| Shut-in Personality Worry Unknown Totals | $\begin{vmatrix} 15 \\ 27 \\ 282 \end{vmatrix}$ | 16 18 206 | 31 45 488 | $\begin{bmatrix} 1\\0\\-47 \end{bmatrix}$ | 56 | $\frac{0}{4}$ | 0 0 0 13 | 0 0 7 | 0 0 0 |

9. PROBABLE DURATION OF MENTAL DISEASE BEFORE ADMISSION.

| | FIRST | ADMITTED | TO ANY H | OSPITAL. |
|---------------------|-------|----------|-------------|----------|
| Previous Duration. | | Males. | Females. | Totals. |
| Congenital | | 9 | 11 | 20 |
| Under 1 month | | 53 | 33 | 86 |
| From 1 to 3 months | | 17 | 16 | 33 |
| From 3 to 6 months | | 16 | 13 | 29 |
| From 6 to 12 months | | 20 | 17 | 37 |
| From 1 to 2 years | | 24 | 19 | 43 |
| From 2 to 5 years | | 52 | 24 | 76 |
| From 5 to 10 years | | Ð | 14 | 23 |
| From 10 to 20 years | | 11 | 14 | 25 |
| Over 20 years | | 4 | 0 | 4 |
| | | | | - |
| Totals | | 215 | 161 | 376 |
| Unknown | | 23 | 7 | 30 |
| | | | 1.00 | |
| Totals | | 238 | 16 8 | 406 |

New Jersey State Library

Aggregates.

Females.

Totals.

4 1

0000030210

Totals.

Males.

000000011

 $\frac{1}{0}$ $\frac{1}{2}$ $\frac{1}{0}$ $\frac{1}$

000

Recovered.

Females

0

1 1 0

 $\frac{2}{0}$

Males

000000011

 $\begin{array}{c} 2 \\ 1 \\ 1 \\ 1 \\ 7 \\ 16 \\ 2 \\ 4 \\ 2 \\ 0 \end{array}$

| Capable of |Self-Support.

Females

000000000 000000000

0000000000

022000000 0200100

Totals.

Males.

 $_{0}^{0}$

 $\frac{4}{2}$

1

0

COMMITTED.

Females.

Males.

 $100 \\ 190 \\ 000 \\ 129 \\ 180 \\ 1$

3

1 8

Ayrısı (1)

 $\begin{array}{c} 0 & 0 & 1 & 0 \\ 0 & 1 & 0 & 0 \\ 0 & 3 & 0 & 1 \\ 0 & 0 & 0 & 0 \end{array}$

0 3 3 0 3 1 0 1 0

Totals.

5 1 7

16

7 28

 $^{9}_{0}_{2}$

FORM OF MENTAL DISEASE.

First Admitted to Any Hospital.

A—Organic Brain Disorders.

I—Definite Organic Brain Disease.
Organic Brain Disease
Aphasia.

Arteriosclerotic Brain Disease
Brain Tumor
Cerebral Abscess
Cerebral Syphilis
General Paralysis
Senile Psychosis
Traumatic Psychosis
II—Psychosis Due to Intoxication.
Alcoholic intoxication
Alcoholic Delirium
Alcoholic Dementia
Habitual Drunkard
Delirium Tremens
Alcoholic Hallucinosis
Chronic Alcoholism
Polyneuritic Delirium
Alcoholic Paranoid Condition
Chora Psychosis
2—Drug Psychosis.
Drug Habits (Morphine, etc.)
III—Acute Toxic or Infective Exhaustive Types.
Exhaustion Delirium
Tebrile and Post-Febrile Delirium
Toxic Delirium

DISCHARGED.

Totals.

01000420

0020010011

0 0 0 0 0 0 0 4 0

0 0

Males.

00000400

0001000000

Not Improved.

Females.

000000000

Totals.

0

0

1000000

Males.

0021000000

1 0

Died.

Females

> $\begin{array}{c} 0 & 0 & 0 \\ 0 & 0 & 0 \\ 0 & 0 & 0 \end{array}$ 0021000

1 0 0 1 0 0

0

Totals. Males.

 $_{\mathbf{1}}^{2}$ $_{\mathbf{1}}^{3}$

 $\frac{1}{0}$

Improved.

Females.

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FORM OF MENTAL DISEASE IN PATIENTS COMMITTED, DISCHARGED, WITH THEIR CONDITION ON DISCHARGE.

| | | | | | | | | | | | | | | • | | | | | | | |
|--|--|------------------------------|---|--|---|---|---|--|--|---|--|---|-------------------------|---|---|---|---|---|---|---|--|
| | | | | | | | | | | | | Disc | HARGI | ED. | | | | | | | |
| | Cox | IMIT | red, | Re | cover | ed. | Sel. | apabl f–Sup | e of port. | Im | prove | ed. | Not | Impro | ove d . | | Died | l. | Agg | grega | tes. |
| FORM OF MENTAL DISEASE. | Males | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| Undifferentiated Delirium B—Perversion of Mental Adjustment 1—Manic Depressive Insanity. | 3 | 1 | 4 | 3 | 1 | 4 | 0 | 0 | . 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 3 | 6 | 1 | 7 |
| Manic Phase Depressed Phase Mixed Phase 2—Other Depressions. | 10 11 1 | 18 28 4 | 28 39 5 | 7 4 1 | 9 15 2 | 16 19 3 | 0 0 | 0 1 0 | 0 1 0 | 3 0 0 | 0 4 0 | 3 4 0 | 0 0 1 | 0. 0 | $\begin{smallmatrix}0\\0\\1\end{smallmatrix}$ | 1 0 0 | 1 4 0 | 2 4 0 | 11 4 2 | $\frac{10}{24}$ | 21 28 4 |
| Depression of Involutional Period 3—Paranoid Condition 4—Dementia Praecox C—Neurotic—defective. | $\begin{matrix} 0 \\ 6 \\ 35 \end{matrix}$ | 3 13 28 | 3 19 63 | 0 1 0 | 0 4 0 | 0 5 0 | 0 1 1 | 1 0 0 | 1 1 1 | 0 7 | $egin{array}{c c} 1 \\ 1 \\ 2 \end{array}$ | 1 1 9 | 0 0 1 | $\begin{bmatrix} 0 \\ 1 \\ 2 \end{bmatrix}$ | $egin{array}{c} 0 \ 1 \ 3 \end{array}$ | 0 0 11 | 1 3 6 | 1 3 17 | $\begin{array}{c} 0 \\ 2 \\ 20 \end{array}$ | $egin{array}{c} 3 \\ 9 \\ 10 \\ \end{array}$ | 3 11 30 |
| Neurasthenia Epileptic Insanity Constitutional Inferiority Imbeeliity Psychosthenia Psychopathic Personality diocy Hysterical Psychosis Delirium Depressive Episode in Deaf Mute | 12 0 2 0 | 124 9 100 00 103 | 1 6 7 21 1 2 0 0 3 1 11 | 0 0 1 0 0 1 0 1 0 4 | 1 0 0 0 2 0 0 1 0 0 2 | 1 0 1 0 2 1 0 2 0 0 6 | 1 0 1 0 1 0 0 0 0 | 0 9 0 1 0 0 0 0 0 0 | 1 0 1 2 0 1 0 0 0 0 0 0 | 0 0 1 1 0 0 0 0 0 | 0 0 1 1 0 0 0 0 0 | 0 0 2 2 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 | 5 0 2 2 0 0 0 0 0 2 0 | 0 0 0 5 0 0 0 0 1 0 2 | 5 0 2 7 0 0 0 0 1 2 2 | 6 0 5 4 0 2 0 1 0 2 4 | 1 0 1 7 2 0 0 1 1 0 4 | 7 0 6 11 2 2 0 2 1 2 8 |
| Totals | 238 | 168 | 406 | 75 | 45 | 120 | 12 | 3 | 15 | 25 | 10 | 35 | 7 | 4 | 11 | 86 | 57 | 153 | 205 | 119 | 324 |

NEW JERSEY STATE HOSPITAL

Totals.

Males.

Recovered.

Females.

Males.

Capable of Selt-Support

Females.

Totals.

COMMITTED

Females.

Males.

Totals.

FORM OF MENTAL DISEASE.

DISCHARGED.

Totals.

Not Improved.

Females.

Males.

Totals.

Died.

Females.

Males.

Totals.

Maĺes.

Improved.

Females.

Males.

Aggregates.

Females.

Totals.

| All Other Admissions. | | | | | | | 1 | 1 | 1 | · | | 1 | · | | | - | | <u>'</u> | | | | |
|---|-----|-----|-------------|-----|-----|-----|-------|-----|-------|-----|-----|-----|-----|------|-----|-----|-----|----------|-----|-----|----|---|
| A-Organic Brain Disease. | | | | 1 1 | | | 1 | 1 | | i | | | - 1 | 1 | | | | | | | | |
| I-Depnite Organic Brain Discase. | | | | | | | 1 | - 1 | | Į | - 1 | | 1 | 1 | | | | | | . 1 | | |
| Aphasia | -0 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | | 0 | 0 1 | | ! | | _ | _ | h | | | | ^ | |
| Arteriosclerotic Brain Disease | ŏ | ŏ | | ŏ | ŏ | ŏ | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Ö | 0 | 0 | Ŏ, | 0 | Ŏ | |
| Lucin Tumor | ő | ŏ | ŏ | ŏ | ŏ | ŏ | 0 i | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Ų. | 0 | 0 | |
| Brain Tumor | | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Cerebral Abscess | , o | 0 | 0 | 0 | 0 | 0 | 0 | .0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Cerebral Syphilis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 1 | 0 | |
| General Paralysis | 3 | 3 | 6 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 1 | 1 | 2 | 1 | 3 | |
| Senile Psychosis | 0 | 3 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 1 | 0 1 | '0 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | ō | ĭ | |
| Traumatic Psychosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Ó | 0 | Ŏ. | 0 | 0 | 0 | Õ | ō | ŏ | ō | ō | ŏ | õ | |
| lI-Psychosis Due to Intoxication. | | ĺ | | ĺ | ĺ | [| 1 1 | | | | | | | , | | | , | | , | , , | Ŭ, | |
| 1—Alcoholic Intoxication | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | O. | 0 | 0 | 0.1 | 0.1 | 0 | 0 | |
| Alcoholic Delirium | 0 | 0 | U | 0 | 0 | 0 | ő | ő | ä | ő | ő | ň | ŏ | ŏ. | ŏ | ň | ŏ | ŏ | ŏ | ň | ŏ | |
| Alcoholic Hallucinosis | 1 2 | i 0 | 2 | 1 | 1 | 2 | l ŏ l | ŏ | Ö | ŏ | ň | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | 1 | 1 | õ | |
| Alcoholic Dementia | l ō | ő | 0 | ō | l õ | ō | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | ŏ | 7 | 6 | ~ | |
| Alcoholic Paranoid Condition | ŏ | ŏ | ő | ŏ | ŏ | ŏ | 0 | . 0 | ŏ | ŏ | ő | ő | ŏ | ő. | ő | ŏ | 0 | ŏ | 0 | ŏ | 0 | |
| Habitual Drunkard | | 4 | 14 | Š | ŏ | 5 | 1 6 | . 0 | ő | ő | ő | ő | 0 | . 0 | ŏ | ŏ | 6 | 0 | 5 | 0 | õ | |
| Delirium Tremens | | ō | $\tilde{2}$ | 2 | ŏ | 2 | ő | ő | ŏ | ŏ | ő | ŏ | ŏ | ŏ | ő | ŏ | ŏ | | | | မ | |
| Polyneurotic Delirium | | ŏ | ĩ | 2 | ŏ | 2 | ő | ő | . 0 | | ő | ŏ | ŏ | ő | 0 | | | 0 | 2 | o l | 2 | |
| Chorea Psychosis | 1 7 | X | ő | 1 6 | 1 % | ő | löl | ŏ | ő | 0 | 9 | | | | ñ | 0 | 0 | 0 | 2 | 0 | 2 | |
| 2—Drug Psychosis. | | V | 0 | 0 | | | 101 | 0 | U | 0 | 0 | 0 | 0 | . 0 | U | 0 | 0 | 0 | 0 (| 0 | 0 | |
| | 3 | 0 | | 1 | | 1 | 1 . 1 | _ | | | _ | | _ | | _ | | | | | ! | | |
| Drug Habits (Morphine, etc.) | 0 | į v | 3 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | |
| III-Acute Toxic or Infective Exhaustive | Į. | į | į. | Į. | Ĺ | Į į | 1 | | | 1 | | | - 1 | | | | | | | 1 1 | | |
| Types. | 1 | 1 . | | | | | 1 | | | | 1 | | 1 | | | | | | | . 1 | | |
| Febrile and Post-Febrile Delirium | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 [| 0 | 0 | |
| Undifferentiated Delirium | 0 | 1 | 1 |] 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 1 | 0 | 1 | 1 | |
| Exhaustion Delirium | | 0 | 0 | 0 | 0 | 0 | 0 | - 0 | 0 | 0 | 0 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 1 | 0 | 0 | ō | |
| Toxic Delirium | 1 | 0 | 1 | 0 | 0 | U | 0 | 0 | 0 1 | 0 | 0 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Õ | |
| Delirium | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Õ | 0 | 0 | 0 | 0 | Ō | Õ | ŏ | ŏ | ŏ | ŏ | |
| B-Perversion of Mental Adjustment. | | | ĺ | 1 | Ì | | 1 1 | | i " i | 1 | - | 1 | - 1 | - | | Ĭ | | - 1 | | | • | |
| I-Manic Depressive Insanity. | 1 | 1 | | | İ | | | | i | i | . 1 | ĺ | 1 | i | | | 1 | 1 | 1 | | | |
| Manic Phase | 6 | 7 | 13 | 1 | 6 | 7 | 2 | 0 | 2 | 0 | 0 | 0.1 | 0 | 0 | . 0 | . 1 | 1 1 | 2 | 4 | 7 i | 11 | • |
| | | | | | | | ٠, | 0 | - 1 | 0 1 | 9 ! | ٠, | " 1 | ٠, ١ | • | - | - 1 | - 1 | - 1 | • 1 | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | *** | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | , | |

10. FORM OF MENTAL DISEASE IN PATIENTS COMMITTED, DISCHARGED, WITH THEIR CONDITION ON DISCHARGE.

| | | | | | | | | | | | D | ISCH! | RGED | | | | | | | | |
|--|-------------|-----------------------|---|----------------------------|-----------|-----------------|------------------|----------------|------------------|---|------------------|-------------|------------------|-------------|-------------|-------------|----------------------------|-----------------------|-----------|----------|-----------------------|
| | Co | MMIT | TED. | Re | cove | red. | Se | lf-Su Canab | pport le of | In | nprov | ed. | Not | Impr | oved. | | Died | l. | Ag | grega | ites. |
| FORM OF MENTAL DISEASE. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| Depressed Phase Mixed Phase Other Depressions. | 3 | 3 4 | 7 | 0 | 3 | 3 | 1 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 2 0 | 6 | 3 3 | 9 4 |
| Constitutional Depression Depression of Involutional Period 3—Paranoid Condition 4—Dementia Praecox C—Neurotic—defective | 3 | 0 2 4 4 | 0 2 4 7 | 0 0 1 0 | 0 1 0 | 0 0 2 0 | 0 0 0 1 | 0 0 0 | 0 0 0 1 | $\begin{array}{c} 0 \\ 0 \\ 0 \\ 2 \end{array}$ | 0 0 1 0 | 0 0 1 2 | 0 0 0 0 | 0 0 0 | 0 0 0 | 0 0 0 | 0 0 0 | 0 0 0 | 0 0 1 3 | 0 0 2 0 | 0 0 3 3 |
| Neurasthenia Epileptic Psychosis Constitutional Inferiority Imbecility Psycopathic Personality Idiocy Hysterical Psychosis | 0 | 3 0 0 0 0 | 4 0 4 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 1 0 | 0 0 0 0 0 | 0 0 0 0 1 0 0 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 3 0 0 | 0 0 0 0 0 0 | 0 0 0 3 0 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 2 0 0 0 0 0 | 0 0 0 0 0 | 0 0 3 1 0 | 0 0 0 | 2 0 0 3 1 |
| Unclassified | ŏ | ő | ŏ | 0 | ő | ŏ | ő | ő | 0 | 1 | ő | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Totals | 44 | 38 | 82 | 18 | 13 | 31 | 5 | 0 | 5 | 8 | 1 | 9 | 1 | 0 | 1 | 2 | 6 | 8 | 34 | 20 | 54 |
| Aggregate Cases | 282 | 206 | 488 | 93] | 58 | 151 | 17 | 3 | 20 | 33 | 11 | 44 | 8 | 4 | 12 | 88 | 63 | 151 | 239 | 139 | 378 |
| Aggregate Persons | 27 9 | 206 | 485 | 93 | 58 | 151 | 17 | 3 | 20 | 33 | 11 | 44 | 8 | 4 | 12 | 88 | 63 | 151 | 239 | 139 | 378 |

NEW JERSEY STATE HOSPITAL.

11. DISCHARGES OF THE INSANE, CLASSIFIED BY ADMISSION AND RESULT

| NUMBER OF ADMISSION. | | Recovered. | | Capable of Self-Support. | | ٠ | Improved. | | | Not Improved. | | | Died. | |
|--|---|------------|--|-----------------------------|---|---|--|---|---|--|---|---|---|--|
| | Males. | Females. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| First Second Third Fith Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Eleventh Twelfth Thirteenth Totals | 74 14 2 0 1 1 1 0 0 0 0 0 0 | | 9304401000000000000000000000000000000000 | | 15 3 2 0 0 0 0 0 0 0 0 0 0 0 | 26 4 3 0 0 0 0 0 0 0 0 0 0 0 | 9 2 0 0 0 0 0 0 0 0 | 35 6 3 0 0 0 0 0 0 0 0 0 0 0 | 6 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 10 1 1 0 0 0 0 0 0 0 0 0 | 86 0 2 0 0 0 0 0 0 0 0 0 | 58 3 2 0 0 0 0 0 0 0 0 0 | 144 3 4 0 0 0 0 0 0 0 0 0 0 0 |

12. CAUSES OF DEATH AND FORMS OF

| | | ranoic | | | aecox aditio | | Epi | leps y | |
|---|----------------------------|---|--------------------------------------|---|--------------------------------------|--------------------------------------|---|-----------------------|---------------------------------|
| CAUSES. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| General Diseases.— General Miliary Tuberculosis Pulmonary Gangrene Gangrene Status Epileplicus Cellulitis | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 | 0 0 0 1 | 0 0 0 0 | 0 0 0 1 |
| Diseases of the Nervous System.— General Paralysis Cerebral Syphilis Cerebral Softening Cerebral Hemorrhage Delirium Tremens Internal Hemorrhage | 0 0 0 2 0 0 | 0 0 0 1 0 0 | 0 0 0 3 0 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 2 0 0 0 | 0 0 0 0 0 | 0 0 2 0 0 0 |
| Discases of Circulatory System.— General Arteriosclerosis Myocarditis Chronic Myocardial Degeneration Organic Heart Disease Dilatation of Heart Endocarditis Septicaemia Fernicious Anemia Cardiac Exhaustion | 0 0 1 0 1 | 1 0 0 2 0 1 0 0 | 1 0 1 2 1 1 0 0 | 0 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 1 0 0 0 0 | 0 0 0 1 0 0 0 0 | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 0 0 0 | 1 0 0 0 0 0 0 |
| Purulent Pericarditis Respiratory System.— Pulmonary Tuberculosis Pulmonary Abscess Broncho Pneumonia Lobar Pneumonia Pulmonary Gangrene Hypostatic Congestion of Lungs | 0 0 0 1 | 0 1 0 0 0 0 | 5 0 0 0 1 | 0 0 0 0 0 0 | 0 0 0 0 1 0 | 0 0 0 1 0 0 | 0 1 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 1 0 0 0 0 |
| Digestive System.— Cirrhosis of Liver Intestinal Obstruction Abscess of Liver Malnutrition Hemorrhage from Gastric Ulcer Ulcerative Enterocolitis Gastroenteritis Acute Enterocolitis Peritonitis | 0 1 0 0 0 | 000000000000000000000000000000000000000 | 0 0 0 0 1 0 0 0 0 | 0 | 1 0 0 0 0 0 0 | 1 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 |
| Genito-Urinary Diseases.— Nephritis Pyelonephritis | . 1 | 0 | 1 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| III—Defined Causes.— Exhaustion Suicide Sunstroke | 0 0 | 1 0 0 | 1 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 0 |
| Totals | . 11 | 7 | 18 | 0 | 3 | 3 | 5 | 0 | 5 |

NEW JERSEY STATE HOSPITAL.

MENTAL DISEASES IN PERSONS WHO DIED.

| Const Inf | itutio eriori | nal ty. | 1m | becili | ty. | Une | classi | fie d. | f | rugs | | N | euras | thenia |
|---|---|---------------------------------|---|---------------------------------|--------------------------------------|-----------|-----------------------|-----------------------|-------------|---|----------------------------|---|---|-----------------------|
| Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 |
| 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 0 | 000000 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 |
| 0 0 0 0 0 0 0 1 0 | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 1 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 1 | 0 0 0 0 0 0 1 0 | 00000000 | 000000000 | 000000000 | 0000000000 | 0 | 0 0 0 0 0 0 0 0 0 | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 |
| 1 0 0 0 0 | 0 0 0 0 0 | 1 0 0 0 0 | 0 0 0 0 0 | 4 0 0 0 0 0 | 4 0 0 0 0 0 | 0 0 0 0 0 | 1 0 0 0 0 | 1 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 |
| 0 0 0 0 0 0 | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 0 | 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 0 | 000000000 | 00000000 | 00000000 | 000000 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 0 | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 0 0 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 0 1 | 0 0 1 | 0 0 1 | 0 0 | 0 0 1 | 0 0 | 0 0 | 0 0 | 0 | 0 0 | 0 0 | 0 0 | 0 1 0 | 0 1 0 |

12. CAUSES OF DEATH AND FORMS OF

| | Agg | grega | tes. | | Organ | | | enile menti | ล. |
|---|--|---|--|---------------------------------|---|---|--|--|---|
| CAUSES. | Males. | Females | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| General Diseases.— General Tuberculosis General Miliary Tuberculosis Posterior Lateral Sclerosis of Spine | 0 | 0 | 0 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Gangrene Status Epilepticus Cellulitis | 0 1 0 | 0 0 | 0 1 0 | 0 | 0 | 0 | 0 | 0 _. | 0 |
| Discases of Nercous System.— General Paralysis Cerebral Softening Delirium Tremens Cerebral Hemorrhage Internal Hemorrhage Cerebral Syphilis Delirium | 15 3 0 6 1 0 | 10 0 0 1 0 0 | 25 3 0 7 1 | 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 1 0 3 1 0 | 0 0 0 0 0 | 0 1 0 3 1 0 |
| Diseases of Circulatory System.— General Arteriosclerosis Myocarditis Organic Heart Disease Dilatation of Heart Valvular Heart Disease Cardiac Exhaustion Septicaemia Myocardial Degeneration Pernicious Anemia Endocarditis | 24 0 3 5 2 0 2 2 0 1 | 16 0 3 3 1 0 1 1 0 2 | 40 0 6 8 3 0 3 0 3 | 0 0 0 0 0 0 0 | 000000000000000000000000000000000000000 | 0 0 1 0 0 0 0 0 | 23 0 1 3 2 0 0 0 0 | 15 0 1 1 1 0 0 1 0 | 38 0 2 4 3 0 1 0 |
| Respiratory System.— Pulmonary Tuberculosis Pulmonary Gangrene Empyema Broncho Pneumonia Lebar Pneumonia | 8 1 1 1 | 9 0 0 1 1 | 17 1 1 2 2 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 1 1 | 1 0 0 0 | 1 0 0 1 1 |
| Digestive System.— Cirrhosis of Liver Intestinal Obstruction Intestinal Tuberculosis Peritonitis Carcinona of Stomach Ulcerative Enterocolitis Malnutrition Pulmonary Abscess Gastroenteritis Gastritis Acute Enterocolitis Acute Enterocolitis Genito-Urinary Diseases.— | 0 0 0 1 0 0 0 0 0 0 1 0 | 1 1 1 1 2 1 0 1 0 0 | 1 1 1 2 2 1 0 1 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 0 | 0 | 0 0 1 0 0 0 0 0 0 | 0 1 1 0 1 0 0 0 0 | 0 1 1 1 0 0 0 0 1 |
| Nephritis | 6 0 1 | 2 0 0 | 8 0 1 | 0 0 0 | 0 0 0 | 0 0 0 | 0 0 | 0 0 0 | 0 0 0 |
| III-Defined Causes.— Exhaustion | 0 | 1 3 | 1 4 | 0 | 0 0 | 0 | 0 | 0 | 0 |
| Totals | 88 | 63 | 151 | 2 | 0 | 2 | 38 | 23 | 61 |

MENTAL DISEASES IN PERSONS WHO DIED.

| | Pa | dener ralys | al is. | | Brain Tumor. | | | Alcoholic Delirium. Man | | Man | nic Depressiv Insanity. | | | | |
|--|---|--|----------------------------------|---|---|---|--------------------------------------|--------------------------------------|---|--|---|---|-----------------------|---|--|
| | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| | 0 | 0 | 0 | 0 0 | 0 0 | 0 | 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0.0 | 0 0 |
| | 0 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 | 0 0 0 | 0 0 | 0 0 | 0 0 0 | 0 0 | 0 0 | 0 0 |
| | 15 0 0 0 0 0 0 | 9 0 0 0 0 0 | 24 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 1 0 0 | 0 0 0 0 0 0 | 0 0 0 1 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 | 0 0 0 0 0 0 | | 0 0 0 0 0 0 0 | 0 0 0 0 0 |
| | 0 0 0 0 0 0 0 0 | 0 0 0 1 0 0 0 0 0 0 | 0 0 0 1 0 0 0 0 0 0 0 | 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 | 0 0 0 0 0 0 1 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 1 0 0 | 0 0 1 0 0 0 0 0 | 0 | 0 0 0 1 0 0 0 0 0 0 0 0 | | 0 0 0 0 0 0 0 0 | 0 |
| | 0 0 1 0 | 0 0 0 | 0 0 1 0 0 | 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 0 0 0 0 | 1 0 0 0 | 1 0 0 0 0 | 2 0 0 0 0 | 0 0 0 0 | 0 0 1 0 | 1 0 0 1 0 |
| | 000000000000000000000000000000000000000 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 | 0 | 0 | 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 1 0 | 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 0 0 0 0 0 0 0 | 0 0 0 0 1 1 0 0 0 | 0 0 0 0 1 1 1 0 0 0 |
| | 0 0 | 0 0 | 0 0 0 | 0 0 0 | 0 0 | 0 0 | 0 0 | 1 0 0 | 1 0 0 | 3 0 0 | 0 0 | 3 0 0 | 1 0 1 | 0 0 0 | 1 0 1 |
| | 0 | 0 | 0 0 | 0 | 0.0 | 0 | 0 | 0 | 0 | 1 0 | 0 | 1 | 0 | 0 2 | 0 2 |

13. DURATION OF MENTAL DISEASES, TREATMENT, IN PATIENTS RECOVERED OR DIED.

| | Fire | ST A | DMI | TTEL | то | ANY | Ho | SPI | ral. | ALL | OTI | HER | ADM | issi | ONS |
|---|--|---|--|--|---|--|--|---|---|---|--|--|--|--|--|
| PERIOD | Duration Before Admission. | | | Hospital Residence. | | | Whole Duration. | | Whole Known Period of Mental Disease. | | n l tal | Whole Known Period of Hospital Residence. | | n d ital | |
| _ | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. | Males. | Females. | Totals. |
| A—Recovered.— Under 1 month From 1-3 months From 3-6 months From 6-12 months From 1-2 years From 2-5 years From 10-20 years Over 20 years Unknown Totals B—Died.— | 34 8 4 2 5 9 5 0 5 77 | 15 8 6 3 5 4 1 1 1 4 | 49 16 10 5 10 13 6 6 1 9 | 36 5 6 1 4 6 6 5 0 8 | 3 9 21 7 2 3 2 1 0 0 0 | 39 14 27 8 6 9 8 6 0 8 | 10 14 17 12 7 6 5 6 0 0 | 0 3 12 12 7 5 2 3 0 4 -48 | 10 27 29 24 14 11 7 9 0 4 | 0 4 4 4 0 0 3 1 0 0 0 | 0 1 1 4 1 1 1 0 0 1 | 0 5 8 1 1 4 1 0 1 -26 | 7 4 3 1 0 1 0 0 0 0 | 0 1 4 3 1 0 0 0 0 | 0 8 8 6 2 1 1 0 0 0 |
| Congenital Under 1 month From 1-3 months From 3-6 months From 6-12 months From 1-2 years From 2-5 years From 5-10 years From 10-20 years Over 20 years Unknown Totals | 1 7 2 3 6 9 22 7 7 7 3 19 86 | 24 55 55 57 21 30 12 58 | 3 11 7 8 11 12 39 9 10 3 31 - | 0 21 10 8 8 8 11 10 4 7 7 0 | 0 11 5 6 6 6 12 6 3 3 0 | 0 32 15 14 14 17 22 10 10 10 0 | 1 6 3 7 3 13 25 8 9 10 1 | 2 2 1 3 4 4 13 10 5 3 11 | 3 8 4 10 7 17 38 18 14 13 12 - | 0 0 0 0 1 0 0 1 0 0 0 | 0 0 0 0 1 1 1 0 1 0 | 0 0 0 0 2 1 1 2 0 1 0 0 | 0 0 0 0 1 0 1 0 0 0 0 0 | 0 0 0 0 2 1 2 0 0 0 0 0 | 0 0 0 0 3 1 3 0 0 0 0 0 |

Warden's Report

To the Board of Managers of the New Jersey State Hospital at Trenton:

Gentlemen—I have the honor to submit to you the annual report of the Warden's department for the fiscal year ending October 31st, 1912, showing amount of cash receipts and expenditures, appraisement of personal property, also reports are appended showing in detail the products of the farm, garden and dairy, and the value of different products, also an estimate of requirements for the coming year.

INVENTORY.

The annual appraisement of the personal property of the institution was made during the third week in October, as required by law, and amounts to \$209,121.82. Messrs. Thos. B. Taylor and John W. Hendrickson, who were appointed by the Board of Managers as appraisers, assisted the Warden in making same, who desires at this time to express his appreciation of the manner in which they performed the duties required of them.

APPRAISEMENTS.

| Buildings, grounds, etc., valued at: |
|--|
| Personal property appraised as above\$209,121.82 |
| The cash receipts and payments have been as follows: |
| Balance in hands of Treasurer, November 1st, 1911 11,869.32 Cash receipts from all sources 359,576.10 Cash payments during the year 357,300.69 Cash balance October 31st, 1912 14,144.73 |
| The average number of patients for the year of 1912 was 1,499, making the |

The average number of patients for the year of 1912 was 1,499, making the average cost of maintenance per patient per annum \$243.8326, or \$4.6993 per week.

RECOMMENDATIONS.

FOR DAIRY BARN AND EQUIPMENT CONSISTING OF COW STABLES, FEED ROOM, SILOS, STANCHIONS, ETC.

The Legislature of 1911 appropriated money to purchase 254 3/4 acres of land for the purpose of producing our own milk and raising vegetables for the needs of the institution. We find the buildings on this land are neither suitable nor large enough for the purpose of housing our herd of cattle. There are no silos on this property, and the barn is unsanitary and would be condemned by the State Board of Health. The amount needed for this purpose is \$10,000.00.

PIGGERY CONSISTING OF BUILDINGS AND EQUIPMENT FOR HOUSING AND KLLING PIGS AND CATTLE, ALSO FOR MAKING SOAP, FERTILIZERS, ETC.

We had the misfortune to have our piggery burned. It was an old wooden structure badly constructed and very unsuitable for our purpose. We find the raising of pigs very profitable, they are fed on the offal and refuse from the kitchen until within a few weeks before killing when they are fed on grain for the purpose of hardening and preparing the meat. We find the product from our pigs a great help toward the maintenance of our institution. At Norristown, Pa., they raise pigs enough to supply the entire institution with lard and salt pork, besides having their own sausage, pork loins and scrapple, and I think we should do the same at the New Jersey State Hospital. Would respectfully ask for this purpose \$10.000.00.

RENEWAL OF INSURANCE POLICIES.

Would ask the Legislature to appropriate the sum of \$5,000.00 for expense of renewing the different insurance policies when same become due.

LUMBER FOR NEW FLOORS, ALSO FOR BUILDING FENCES AROUND THE INSTITUTION.

An appropriation of \$2,500.00 is asked for lumber to continue repairs to buildings and fences as outlined in report last year.

OIL, LEAD, ETC., FOR PAINTING BUILDINGS AND FENCES.

As our buildings and fences need painting, would ask the Legislature for an appropriation of \$1,000.00 for purchasing oil, lead and other materials for this purpose.

FOR LABOR AND MATERIAL FOR PAINTING INTERIOR OF ANNEX ADDITIONS.

The interior of the Annex building proper is badly in need of painting, nothing much having been done for some years past to the walls and wood work of this building. The additions built about seven years ago and occupied in whole, or in part, have had nothing done to the interior since the buildings were erected. As the walls were finished originally in white, the constant passing backward and forward of the inmates, and occupancy for so many years has left the woodwork and walls much the worse for wear. Painting all the way through is necessary, and for this purpose an appropriation of \$5,500.00 is asked for.

NEW FURNITURE.

Most of our furniture is very old, and although we have had some new furniture during the last three years, some of the wards are inadequately furnished, and we do not feel that we are fully equipped yet. As we expect to open new wards in the Annex additions in the near future, it will be necessary for us to have more new furniture. One thousand five hundred dollars will be sufficient for this purpose.

FOR COVERING CORNERS OF CAMPANILES AT ANNEX WITH COPPER.

When the Annex building was erected twenty-five years ago, the roof was adorned with ornamental and at the same time costly campaniles for protecting the corners and other parts of which galvanized iron was used, which is now rusted away leaving no protection against storms, and if not repaired soon, the whole structure will shortly be in ruins, and rebuilding would be a great expense to the institution. I would recommend necessary repairs made at once, and the rusted and worthless galvanized iron replaced with sheet

New Jersey State Library

NEW JERSEY STATE HOSPITAL.

copper where needed. Erecting scaffolding, which is difficult, adds materially to the expense and obliges us to ask for an appropriation of \$1,200.00 for this purpose.

FOR REMODELING HOUSE AT THE KNIGHT FARM.

The dwelling at the Knight Farm originally intended for a family and necessary servants, and farm help, is not in its present condition suitable for our purpose, as we will need house room here for forty or fifty patients engaged in working on the farm, dairy and piggery, also the dairyman and his family, and paid help employed in the dairy. For this purpose the State Architect estimated a cost of \$12,000.00, for which an appropriation is asked.

FOR ELECTRICAL SUPPLIES AND LABOR.

Would ask for an appropriation for electrical supplies and labor consisting of laying cable, building conduit; new panels for Nos. I, 2 and 3 East and West, Annex; change rooms on stairways to night lights Nos. I, 2 and 3 East and West, Annex; new panels for Nos. I, 2, 7, 8 and 9, East and West main building; new receptacles on stairways with lamp guards; new fixtures on East and West dining rooms, main building; new fixtures in reception rooms and office halls; new fixtures in Annex centre; wiring and furnishing fixtures and lamps in the new laundry; new fixtures in dining rooms in Annex and halls Nos. I, 2 and 3, East and West; changing of lights in rooms Nos. I, 2 and 3, East and West. Three thousand dollars will be needed for this purpose.

FOR CAR LOAD OF TERRA-COTTA PIPE.

Would request an appropriation of \$480.00 for purchasing terracotta pipe of different sizes. This pipe is needed for connecting the Medical Director's residence with the sewer, which has never been done, and also for laying drains and for general repair work.

FOR COMPLETING REMODELING MUSEUM.

Up to the present time no provision has been made for a place of recreation for the male attendants. There has been on the grounds an old museum which was donated by Mr. Randolph in 1850. For the last fifteen years this has been closed, and it is our purpose to make it a recreation hall for male attendants. If we do

not provide a place for the male attendants, we cannot blame them for going down town to visit saloons and frequently coming back to the hospital intoxicated. We feel that the State should make conditions as agreeable as possible for the attendants to prevent this dissipation. We received a small appropriation, but feel, in order to make the building suitable for the purpose outlined, we shall need \$2,500.00.

FOR BUILDING A SEPTIC TANK AND SEWAGE DISPOSAL BED AT THE KNIGHT FARM.

Would request the Legislature to appropriate \$600.00 for labor and material to build a septic tank and sewage disposal bed at the Knight Farm.

FOR REPLACING COTTON RUBBER LINED HOSE.

Much of the fire hose throughout the wards of the institution is poor and unsafe for fire protection, would, therefore, ask for an appropriation of \$2,000.00 for replacing same with cotton rubber lined $2\frac{1}{2}$ " fire hose.

FOR RENAILING CEILINGS, TOP FLOORS, ANNEX ADDITIONS.

A few years ago the ceilings of the new wings at the Annex began falling, which endangered the lives of both patients and employees and it was necessary that we had money at once for repairing them. The Board of Managers went before the State House Commission and stated the conditions. The Governor gave us \$1,200.00 from the emergency fund to repair same. That amount of money repaired the ceilings on the first and second floors. At that time nothing was done on the third, or top floor, as it was not occupied, but it is now necessary for us to make use of this floor for patients and attendants, and as the ceilings show signs of falling, it will be very dangerous to occupy this floor before renailing them.

RESEARCH WORK.

The last session of the Legislature appropriated money for carrying on research work. In this hospital, as well as other hospitals,

this work is done by trained field workers who are studying the heredity of our patients. Aside from this they do very valuable "after care work" in looking after discharged patients, and when necessary the field workers see that they are returned to the hospital, and frequently recurrent attacks are prevented. Both of these features of our work are very important, and we feel that this work should be continued, and we are asking for \$3,500.00 for continuing same.

FOR ADDITIONAL LAND FOR BURIAL PLOT.

Our plot of ground in Ewing cemetery, which is used for the purpose of burying remains of people who have no friends, or relatives to take charge of them, is about exhausted. We have only room for twenty more bodies, and as we bury on an average of twenty bodies per year, it is very necessary that we should have more land at once for this purpose. We can purchase a plot large enough to bury six hundred bodies for \$2,500.00, which is the same price we paid for land fourteen years ago. Would, therefore, ask for an appropriation for this purpose.

FOR X-RAY APPARATUS.

Every institution of this size is provided with an X-ray apparatus, and we feel that we are negligent if we do not give the patients every advantage that is given elsewhere. An X-ray apparatus could be used for accidents and studying bones in cases of accidents, also for studying malformation of the skull in patient, admitted. Recently we had several patients here who have come to the hospital as the result of injury, and we have not been able to give them the proper treatment because we have no facilities for X-ray examinations. We feel that \$2,000.00 will supply this deficiency.

FOR EQUIPMENT OF STAFF LAUNDRY.

When plans for our new laundry were drawn provisions were made for a staff laundry room, where the officer's clothing could be washed separately from that of the patients'. However, sufficient money was not appropriated to cover this item. The officer's clothing now has to be washed with the patients', and it is a great incon-

venience to try to separate the two classes, hence we are asking for \$3,000.00 for machinery to equip this staff laundry.

FOR ADDITIONS TO MAIN BUILDINGS.

At the last session of the Legislature \$40,000.00 was appropriated for addmission wards to the main buildings. Plans for these buildings are now under way, and these additions will be limited to the female side of the institution. We feel that the male side should also have admission wards for the proper care of new patients. The number of patients is increasing rapidly, and we have to make provision for the future. This will take care of at least two hundred patients. In the last five years we have used old buildings for the treatment of acute cases, at considerable disadvantage to the patients. We hope that this will receive consideration.

FOR LABORATORY SUPPLIES AND APPARATUS.

It is not necessary to dwell upon the necessity of having a properly equipped laboratory in an institution of this kind. No modern hospital would give up its laboratory, and the expense of the same is one which we do not feel should be carried by the house fund. We frequently have to replace apparatus, purchase new apparatus, and we ask for \$1,000.00 for this purpose.

FOR REPAIRS TO MEDICAL DIRECTOR'S RESIDENCE.

Nothing has been done to the residence of the Medical Director for some years. We feel that there are some things which should be attended to. We do not feel that we are able to spare the money from our maintenance fund to do these repairs. The electric lighting should be gone over, an additional bath room installed, as the present one is inadequate, and a porch built on the south side of the house. We feel that \$2,500.00 will be sufficient for this purpose.

FOR BORING WELLS AND CONNECTING SAME WITH THE WATER SYSTEM, ALSO EXTENDING PIPING IN OLD WELLS.

On account of the increase in our population we find that our present water supply for the institution is insufficient. During the dry season of the year in case a fire should break out in the Hos-

pital, we would be very short of water, as the supply is no more than sufficient for our daily requirements, and we have no reserve. Would, therefore, ask for an appropriation of \$3,500.00 for boring more wells and connecting same with the present water system and for extending the piping in the old wells, as we find the piping in these wells has not been put down as deep as it should be.

For New Central Power Plant\$60,000.00

REPORT Frederick L. Pryor, M. E. Consulting Engineer, Hoboken, N. J.

Jos. P. Byers, Commissioner, Department of Charities and Corrections, Trenton, N. I.

Examination of Power Plant conditions at New Jersey State Hospital, Trenton, N. J., December 10, 1912.

Mr. Jos. P. Byers, Commissioner, Department of Charities and Corrections, Trenton, N. J.

My dear Commissioner Byers:

In response to your request, I have made an examination of the engineering conditions at the New Jersey State Hospital at Trenton, and beg to submit the following report as the result of my findings:

POWER PLANT.

The power plant, as now existing at the hospital, consists of two boiler rooms, located about 900 feet apart and having no connection with each other. The main boiler house supplies steam for the laundry, refrigerating machine, the main hospital and adjacent buildings. The Annex boiler house supplies steam for heating the annex hospital and for operating the air compressor and deep well pumps. The main boiler plant consists of six boilers, two new 150 H. P. boilers just installed, and four 125 H. P. boilers that have been installed for about twenty years, and are in such condition that they will have to be replaced this coming summer. The annex boiler plant consists of four boilers about 125 H. P. each, which have been installed about twelve years.

Thre is no electric generating system, current being purchased from the public

lighting corporation.

In studying the problem, I first ascertained what the immediate growth of the institution is to be, and from information furnished me, I have assumed that there will be built on the grounds of the institution, within one or two years, a Criminal Insane building, and two large wings to the main hospital building.

Both of these extensions will need additional boiler capacity and lighting service. If some other scheme is not adopted, there must be an additional boiler room erected near the Criminal Insane building, and additional boiler capacity installed in the main boiler house. These installations will require about 300 and 200 boiler horsepower, respectively.

Such an arrangement will mean that the hospital authorities will be operating three distinct boiler rooms to furnish steam for the purposes of the institution, in addition to purchasing electric energy for lighting and power.

It occurs to me that in view of this fact, it is an opportune time to begin to centralize the boiler plants and possibly install generating units, so that one plant may be run under closer and necessarily better supervision, and therefore obtain the highest economy of operation.

The advantages and disadvantages of a central station over three isolated

plants could be stated as follows;

ADVANTAGES. Better supervision Increased economy Larger units Less reserve capacity Lower investment value Less auxiliary apparatus Less labor Decreased payroll

DISADVANTAGES.

Cost of tunnel construction Old boiler rooms and equipment to be Higher investment value abandoned

Heat loss in transmission

Decreased economy

A study of the relative advantages and disadvantages indicates the value of the central plant.

I estimate that there is now a yearly consumption of 8,500 tons of coal, with the increased demands there will be required about 11,000 tons of coal, if three separate plants are operated. With a central plant there is no doubt that the increased supervision and the larger and more modern units will result in a saving of at least ten per cent., which means a yearly saving of \$2,500.00.

The labor saving can be estimated on the following basis. With three separate plants, there would be required per day (8 hr. shifts) labor as follows:

Main Boiler House—900 H.P. operating 150 H.P. reserve—3 firemen, 3 helpers. Annex Boiler House-375 H.P. operating-125 H.P. reserve-3 firemen, 3 helpers. Criminal Boiler House-200 H.P. operating-100 H.P. reserve-3 firemen. Note:—The Annex fire-room squad attends to the well pumping machinery. Central Plant-1,650 H.P. operating-275 H.P. reserve-6 firemen, 6 helpers. The saving would be 3 firemen, which is equivalent to \$2,000 per year. The gain in operating a central plant is therefore approximately \$4,500.00 per

On the other hand, the cost of the tunnel construction and the heat losses tend to offset the above saving. A tunnel 4 feet 6 inches by 6 feet 6 inches can be constructed for \$8.00 per foot (Mr. G. S. Drew) and the equipment of pipes can be installed for \$5.00 per foot. As there would be about 1,500 feet of tunnel more than constructed for separate stations, the cost would be approximately \$20,000.00. Figuring depreciation, interest, etc., at 10 per cent., the yearly charge would be \$2,000.00.

The transmission losses through 1,500 feet of tunnel would require about

100 tons of coal per year, or \$250.00.

The added cost of operating the central station due to these items is \$2,250.00. Therefore, it can be estimated that there would be a net gain for a central plant of \$2,250.00 per year, provided the building construction and equipment do not cost more than separate plants. In an original proposition it is obvious the central installation would be cheaper than three separate plants, but in this case, two buildings are already constructed, although one of the equipments will have to be replaced this coming summer.

If a separate Criminal boiler house is erected, the cost might be considered as follows:

| 300 H.P. boilers and | accessories | | | 9,000.00 |
|-------------------------|--------------------|---------|---------|-------------|
| Building | | | | 3,000.00 |
| Stack | | | | 3,000.00 |
| Tunnel to hospital | | | | |
| R. R. siding, coal tres | stle, coal storage | , etc., | ; | 10,000.00 |
| • | | | | |
| Total | | | 9 | \$27 000.00 |

Four new boilers must be installed the coming summer, in the main boiler house, as the present equipment is in exceedingly bad condition. One of the present boilers has been patched in two places during the last month, in order to make the boiler useful through the winter. The other three boilers are of the same age, and the probabilities are, that they are in just as serious state. An appropriation must be made for new boilers with necessary new equipment, and will have to amount to \$20,000,00.

For the two new wings, additional boiler capacity will have to be added to the main boiler plant, and it could be done more satisfactorily at the time of replacing the old installation. For 200 horsepower boiler capacity and equipment, \$5,000.00 should be provided.

For boiler plants there must be expended within a short time:

| Criminal Boiler House | \$27,000.00 |
|---|-------------|
| Re-equipment, Main Boiler House | 20,000.00 |
| Additional equipment, Main Boiler House | . 5,0000.00 |
| | |
| Total | \$52,000.00 |

A central plant, to contain the above equipment could be started with a small additional expenditure, which would make possible the realization of the proper engineering equipment for the hospital needs. The cost of initial start would be:

| 1,100 H.P. boilers and equipment\$28,000 | .oo |
|--|-----|
| Stack for 2,000 H.P 5,000 | .00 |
| Coal Trestle (already built) | |
| Tunnels to Main and Criminal Buildings (1,000 ft.) | .00 |
| Building 14,000 | .00 |
| T-1-1 | |

A central station can be started for \$8,000.00 more than must be now actually expended for equivalent plant in separate locations. As this extra is for tunnel, the yearly charge would not exceed \$500, and the saving due to operating 1,100 H.P. in one plant would amount to at least double that figure.

To gain the maximum operating economy before noted (\$2,250.00), the entire plant should be under one roof. When the remainder of the main plant and the annex need replacing, they could be erected in central station at an additional cost of:

| Additional boilers, 825 H.P. \$21,000.00 Additional building 6,500.00 Enclosing coal trestle 2,500.00 Tunnel, (600 ft. to Annex Hospital) 8,000.00 |
|--|
| Original erection |

To replace the additional equipment at some later date, in its present location, would cost \$21.000.00, hence the extra cost or an entire central station is only \$25.000.00 more than having scattered plants. This is just about the sum invested in tunnels which I showed as a yearly loss of \$2,000.00. In short, when a central plant is possible there should be a saving of at least \$2,000.00 per year, over the cost of operating the separate plants.

Further economy and a particularly desirable item can be obtained by installing at the central station, an electric generating plant.

The institution is paying for electric energy about 5 cents per K.W. hour, and it can be generated much cheaper.

The electric load is not large at any time but extends over the whole day and year, and therefore amounts to considerable money. I made observations and found at present that the maximum load is less than 100 kilowatt per hour, but the yearly load amounts to 175,000 K.W. hours. At 5 cents the cost per year is \$8,750.00.

Generating units can be purchased and installed at one of the existing boiler plants, or they could be placed in the central location. Higher pressure boilers could be installed in connection with the new equipment and the steam used in the engines for current production. An engine room would have to be constructed, and engines, generators and auxiliaries erected. A switchboard and necessary wiring would have to be installed. For immediate use to take care of the present and contemplated additions, I would suggest an installation of 250 K.W. The cost of such a plant would be:

| Additional Buildings \$2,500.00 Engines, Generators and Auxiliaries 12,000.00 Electric distribution 3,000.00 Moving pumping machinery to engine room 5,000.00 |
|---|
| \$23,000.00 |
| The cost of operating power units would be: |
| Interest, depreciation, etc., on \$23,000.00 \$3,200.00 Attendance, 3 engineers, per year 3,000.00 Additional coal, supplies, etc. 1,000.00 |
| 7,200.00 |
| Current from outside, estimated for new extension \$9,500.00 Saving for power installation, per year 2,300.00 Total saving for Central Power Plant, per year 4,500.00 Cost of complete Central Plant, including power units 120,000.00 Cost of partial boiler installation, including power units 82,000.00 |

My recommendations in regard to the power plant situation can be summarized as follows:

NEW JERSEY STATE HOSPITAL.

FIRST PROPOSITION:

SECOND PROPOSITION:

THIRD PROPOSITION:

FOURTH PROPOSITION:

If none of the above propositions are feasible, provide the following amounts:

Immediately:

| For replacing boilers and equipment, Main Boiler House | 20,000.00 |
|---|-----------|
| Before September, 1913: For Criminal Hospital Power Plant | 27,000.00 |
| Before September, 1913: For additional boilers, Main Hospital | 5,000.00 |

MISCELLANEOUS HOSPITAL EQUIPMENT.

In addition to examining the power plant situation, I made an inspection of the equipment throughout and found several places that require prompt attention. Those items are all necessary, but the ones involving conservation of wastes are the most urgent.

For Steam Radiators, Piping, Plumbing, etc.\$35,000.00

Heating and Ventilating Main Building: In the Main building of the hospital I understand that the heating has been unsatisfactory for some time, and the ventilation has been worse than none at all. Such air as has reached the wards comes up through ducts from the cellar. The air in the cellar is decidedly unfit for breathing purposes. This year I was able to renovate part of the hospital; probably one-fourth of the entire main building, at a cost of substantially \$10,000.00. I estimate the remainder will cost \$35,000.00, and that amount should be available for that purpose. One-third should be available immediately, and the remaining two-thirds should be available within two years.

Hot Water Generators: The hot water generator system about the Hospital should be supplied with new heaters as the old ones are nearly worn out. The cost to be \$1,500.00.

Waste Steam Apparatus: I find a dearth of preventive apparatus for waste steam throughout the hospital. Steam traps should be provided everywhere to keep the hot water from flowing to the sewer, and steam reducing valves should be provided to regulate the pressure that is supplied to various systems. I estimate to put in traps, reducing valves, relief valves, temperature control valves, etc., throughout the hospital, will cost \$2,500.00.

Annex Boiler House: In the Annex boiler house certain repairs are urgent unless the entire central plant scheme is carried out. A new steam header should replace the one now in extremely unsafe condition. New grates of the dumping type are desirable on account of the case of operation and better economy that can be secured in the fire-room. Forced Draft should be provided to operate the fires more economically as the coal is now burned insufficiently. A blow-off tank should be provided for the boilers as they now blow-off in atmosphere, causing the grounds to be in bad condition. An additional high pressure steam main should be constructed from the Annex boiler house to the hospital, so that the heating and kitchen systems can be controlled separately. The items will cost:

| New Header\$ | 500.00 |
|-------------------------|--------|
| Forced draft apparatus | 750.00 |
| New pressure steam main | 250.00 |
| New grates | 750.00 |
| Blow-off tank | |
| | |

Repairs and renovations in the annex boiler house amount\$2,750.00

Feed Water Purifiers: The boiler feed water obtained at the hospital is not good for boiler purposes and should be purified before it is used in the boilers. Purifiers of ample capacity should be purchased and installed for all boiler rooms at a cost of \$2,000.00.

SUMMARY:

To summarize the miscellaneous items, I would state that from my examination, funds should be provided as follows:

| Renovating heating and ventilating system, Main Hospital\$ | 35,000.00 |
|--|-----------|
| Repairs and renovations of Annex boiler house equipment | |
| New hot water generators | |
| Apparatus for economizing steam and water losses | |
| Feed water purifiers | 2,000.00 |
| | |
| Total\$ | 43,750.00 |

Two-thirds of the amount can be made available later, but the rest should be available this summer.

Respectfully submitted.

Receipts and Disbursements

The Board of Managers of the New Jersey State Hospital at Trenton N. J.:

Gentlemen—The following abstract of receipts and disbursements for the year ending October 31st, 1012, is respectfully submitted:

RECEIPTS.

| patient | s, convi | ct pat | n State Treasurer for county ients, state patients | \$177,824.98 | |
|----------|-----------|--------|--|--------------------|------------|
| | | | State Treasurer for reimburse- | | |
| | | | gent patients | 638.28 | |
| | | | State Treasurer for officers' | 16,711.70 | |
| | | | Atlantic county | 366.66 | |
| Amount : | " | . " | Bergen county | 111.71 | |
| " | " | " | Burlington county | • | |
| " | " | " | Camden county | 505.91 | |
| " | " | " | Cape May county | 142.33 | |
| " | " | " | Cumberland county | 3,045.61 | |
| " | " | " | | 498.63 7,656.27 | |
| " | " | " | Gloucester county Hunterdon county | | |
| 44 | " | " | | 7,340.68 | |
| " | " | " | Mercer county | 30,953.30 | |
| " | " | " | Middlesex county Monmouth county | 24,812.50 | |
| " | | " | | 19,019.63 | |
| " | " | " | Ocean county | 6,058.00 | |
| " | " | 44 | Salem county | 6,280.34 | |
| | " | 46 | Somerset county | 9,298.39 | |
| " | 66 | " | Union county | 271.06 | |
| " | " | " | Warren county | 89.74 | |
| " | " | " | Private patients | 41,753.63 | |
| " | " | " | Interest | 151.93 | |
| " | " | " | Petty cash expense fund | 1,000.00 | |
| •• | •• | •• | Sundries | 5,044.82 | _ |
| | | | | | 359,576.10 |
| | | | DISBURSEMENTS. | | |
| Pav roll | of office | ers | | 16,711.70 | |
| | | | | 131,203.99 | |
| | | | | 208,384.58 | |
| | | | nd | 1,000.00 | |
| renv cas | | | | .42 | |
| | | | | | |
| | to stat | | | | 357,300.69 |

75

FARM REPORT FOR YEAR ENDING OCTOBER 31, 1912.

| • | | |
|---|---|-------------|
| 4,132 2-3 bushels potatoes, at \$0.60 | \$ 2,479.60 | |
| 356 tons ensilage, at \$5.00 | 1,780.00 | |
| 116 tons hay, at \$19.00 | 2,204.00 | |
| 22 tons straw, at \$12.00 | 264.00 | |
| 9.352 bundles corn stalks, at \$0.03½ | 327.32 | |
| 1,753 bushels shelled corn, at \$0.75 | 1,314.75 | |
| 700 bushels wheat, at \$0.95 | 665.00 | |
| 8 acres oats, peas and barley, at \$30.00 | 240.00 | |
| 6 acres corn fodder (green), at \$30.00 | 180.00 | |
| 3,000 bushels beets, at \$0.30 | 900.00 | |
| 237,938 quarts milk, at \$0.05½ | 13,086.59 | |
| 24 calves sold | 67.00 | |
| 1,432 lbs. tankage | 5.73 | |
| 568 lbs. beef hides sold | 55.74 | |
| 443 lbs. veal slaughtered | 66.48 | |
| 2,854 lbs. beef slaughtered | 298.35 | |
| Cash for cattle condemned by Tuberculosis Commis- | | |
| sion | 150.00 | |
| Manure | 2,000.00 | |
| Rent for Knight farm | 400.00 | |
| 371 dozen eggs | 97.98 | |
| 6 baskets cherries | 3.25 | |
| 2 baskets currants | 2.75 | |
| 26 baskets apples | 9.10 | |
| Money received for board | 248.00 | • |
| Killing 31,364 lbs. pork, producing | 3,846.78 | |
| Value of farm product for the year | | \$30,692.42 |
| EXPENSE. | | |
| Purchasing and keeping hogs in food | \$ 300.00 | |
| Keeping horse, wear, tear on wagon, etc | 184.00 | |
| 22 tons straw, per ton \$12.00 | 264.00 | |
| Fertilizers, seeds, etc. | 2,723.12 | |
| Feeding of cows and horses | 7,775.89 | |
| Wages | | |
| Rent of land | 90.00 | |
| Insurance | 103.00 | |
| Interest on investment, \$52,000.00 | 2,600.00 | |
| Horseshoeing, wear, tear, etc. | 800.00 | |
| Sundries | 275.00 | |
| Board of men | 1,440.00 | |
| | | \$20.622.15 |
| Value of farm product for the year | | \$30,692.42 |
| Expense of farm for the year | 22,278.23 | 22,278.23 |
| Profit of maintaining farm for year ending October 31st, 1912 | | \$ 8,414.19 |
| GARDEN REPORT FOR YEAR ENDING C | | |
| | CTOBER 31, 1 | 912. |
| | | 912. |
| 1,474 bunches asparagus, at \$0.20 | \$ 294.80 | |
| 1,474 bunches asparagus, at \$0.20 | \$ 294.80 368.20 | |
| 1,474 bunches asparagus, at \$0.20 | \$ 294.80 368.20 191.76 | |
| 1,474 bunches asparagus, at \$0.20 | \$ 294.80 368.20 191.76 493.29 | |
| 1,474 bunches asparagus, at \$0.20 | \$ 294.80 368.20 191.76 | |

| | Profit of maintaining garden for the year | \$3,713.33 |
|---|---|------------------|
| | 5,823.58 | 5,823.58 |
| | Value of garden product for the year | 9,536.91 |
| | Doute of mon | |
| | Board of men | |
| | Fuel for heating 98.80 | |
| | Horseshoeing, wear, tear, etc | |
| | Wages | |
| | Keeping of horses 520.00 | |
| | Lime, fertilizers and seeds 750.00 | |
| | Keeping of lawns | 400.00 |
| | Credit of hauling | 175.00 |
| | Manure | 150.00 |
| | Miscellaneous plants and flowers | 100.00 |
| | 400 calla lilies, per 100 \$15.00 | 60.00 |
| | 2,000 chrysanthemums, at \$0.10 | 200.00 |
| | 2,000 pansy plants, per 100 \$4.00 | 80.00 |
| | 15,000 carnations, at \$0.04 | 600.00 |
| | 3,000 roses, per 100 \$2.00 | 60.00 |
| | 1,495 bunches cut flowers, at \$0.20 | 299.00 |
| | 4,200 bedding plants, at \$0.05 | 210.00 |
| | 17 bushels peppers, at \$0.50 | 280.00 |
| | 75 bushels kale, at \$0.50 | 37.50 8.50 |
| | 10 bushels brussels sprouts, at \$0.50 | 5.00 |
| | to bushels onion sets, at \$3.50 | 35.00 |
| | 1,100 heads celeriac, at \$0.03 | 33.00 |
| | ı load pumpkins | 3.00 |
| | 175 bushels carrots, at \$0.50 | . 87.50 |
| | 175 bushels parsnips, at \$0.50 | 87.50 |
| | 400 bushels turnips, at \$0.50 | 200.00 |
| | 300 lbs. horseradish, at \$0.10 | 30.00 |
| | 20,000 heads celery, at \$0.05 | 1,000.00 |
| | 11,000 heads late cabbage, at \$0.05 | 550.00 |
| | 400 heads endive, at \$0.05 | 20.00 |
| | 2,000 bundles leek, at \$0.05 | 100.00 |
| | 4,017 quarts strawberries, at \$0.07½ | 392.31 301.27 |
| | 9 bushels okra, at \$1.50 | 13.50 |
| • | 42 bushels peppers, at \$0.50 | 21.00 |
| | 179 bushels lima beans, at \$1.00 | 179.00 |
| | 104 bushels squash, at \$0.50 | 52.00 |
| | 24 bushels egg plant, at \$1.00 | 24.00 |
| | 74 bushels grapes, at \$1.50 | 111.00 |
| | 74 bushels tomatoes (yellow-egg), at \$0.80 | 59.20 |
| | 700 bushels tomatoes, at \$0.60 | 420.00 |
| | 54 bushels cucumbers, at \$0.75 | 40.50 |
| | 17 bushels carrots, at \$0.50 | 8.50 |
| | 286 bushels string beans, at \$0.75 | 214.50 |
| | 451 bushels beets, at \$0.65 | 293.15 |
| | 152 bushels onions, at \$1.50 | 253.50 228.00 |
| | 169 bushels peas, at \$1.50 | 57.00 |
| | 3,575 heads cabbage (early), at \$0.05 | 178.75 |
| | 362 heads cauliflower, at \$0.20 | 72.40 |
| | 12,618 heads lettuce, at \$0.03 | 378.54 |
| | 514 bunches kohl-rabi, at \$0.05 | 25.70 |
| | | |

Analysis of Expenses

ADMINISTRATIVE.

| • | | |
|--|--------------|--------------|
| Superintendent or Medical Director, salary | \$ 3,833.33 | |
| Warden or Steward, salary | 3,000.00 | |
| Physicians, salary | 8,878.26 | |
| Clerical service | 8,847.75 | |
| Wages | 123,080.15 | |
| Postage | 694.98 | |
| Telephone | 966.33 | |
| Telegraph | 91.76 | |
| Freight and express | 516.09 | |
| Stationery and office supplies | 1,356.25 | |
| Traveling expenses—Managers | 19.50 | |
| Traveling expenses—officers | 364.89 | |
| Treasurer and secretary, salary | 1,000.00 | |
| Printing and printing supplies | 812.62 | |
| Sundries | 2,733.91 | |
| Sundries | -17 33-9- | \$156,195.82 |
| • | | 7-5-7-50 |
| | | |
| TABLE SUPPLIES. | | • |
| | | |
| Butter | \$ 14,555.97 | |
| Bread, crackers, cake, etc | 1,009.17 | |
| Beans | 2,192.56 | |
| Beef, fresh | 15,562.64 | • |
| Coffee, cocoa, etc. | 3,902.72 | |
| Cereals | 1,760.06 | |
| Cheese | 963.05 | |
| Canned goods | 1,473.95 | |
| Eggs | 8,719.09 | |
| Fruit, fresh and dried | 4,546.49 | |
| Flour | 10,919.36 | |
| Fish | 3,104.01 | |
| Ham | 4,753.21 | |
| Lamb and mutton | 3,028.37 | |
| Lard | 1,947.69 | |
| Milk | 4,020.82 | |
| Molasses and syrup | 111.12 | |
| Oysters and clams | 1,312.98 | |
| Other meats | 2,630.30 | |
| Peas | 68.90 | |
| Potatoes, white and sweet | 5,095.00 | |
| Pork salt | 451.54 | |
| Poultry | 1,722.38 | |
| Rice | 703.50 | |
| Spices, pickles, etc. | 727.49 | |
| Sugar | 7,111.89 | |
| Tea | 726.14 | |
| Vegetables | 1,543.27 | |
| vegetables | -,0-10/ | |

\$105,435.09

HOUSE SUPPLIES

| HOUSE SUPPLIES. | | |
|--|---|---------------------|
| Beds and bedding Brooms Brushes Carpets, rugs, etc. Crockery and glassware Cutlery Furniture and upholstery Kitchen furnishings Laundry supplies, soap, etc. Soap, toilet Towels, toweling, etc. Table linen Woodenware, baskets, pails, etc. Sundries | \$ 5,296.13 569.00 193.44 865.54 1,077.87 286.15 1,911.36 1,046.63 1,926.95 1,874.12 846.55 411.53 463.98 668.17 | \$17,437.42 |
| CLOTHING AND CLOTHING MATE | TATAT | |
| Clothing Dry goods for clothing, etc. Furnishing goods Hats, caps, etc. Rubber boots and rubbers Shoes Slippers Sundries | \$ 3,137.83 3,562.77 192.34 219.40 28.85 2,138.89 174.75 13.83 | \$9,468.66 |
| | | |
| REPAIRS. | | |
| Brick Doors, sash, etc. Electrical work and supplies Glass Hardware Lumber Lime, cement, plaster, etc. Machinery, tools, etc. Paint, oil, etc. Plumbing, steamfitting, etc. Roofing and materials Sundries | \$ 81.80 318.83 1,160.38 29.09 415.81 3,561.50 619.49 2,502.16 853.13 3,590.72 1,574.07 1,643.85 | \$16,350.8 <i>2</i> |
| | | 410,000.0 |
| FARM, STABLE AND GROUND | S. | |
| Blacksmith supplies Carriages, wagons, repairs, etc. Fertilizers, vines, seeds, etc. Hay, grain, etc. Harness and repairs Horses Pigs Rent Tools, farm machinery, etc. Sundries | \$ 453.13 1,662.76 3,556.63 8,016.78 149.45 300.00 300.00 700.00 328.10 1,069.96 | |