

THE FIFTY-SECOND ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

AT

GREYSTONE PARK

FOR THE YEAR ENDING JUNE 30th

1927

HOSPITAL PRINT

1927

THE FIFTY-SECOND ANNUAL REPORT

MANAGERS AND OFFICERS

NEW JERSEY STATE HOSPITAL

GREYSTONE PARK

FOR THE YEAR ENDING JUNE 30, 1921

1921

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OFFICERS

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ARTHUR G. LANE, M.D.	Clinical Director
GEORGE R. HAMPTON, M.D.	Senior Assistant Physician
GEORGE B. McMURRAY, M.D.	Senior Assistant Physician
LAURENCE M. COLLINS, M.D.	Senior Assistant Physician
WILLIAM J. LEIN, M.D.	Senior Assistant Physician
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JOSEPH DONOVAN, M.D.	Senior Assistant Physician
PERRY J. GAMBILL, M.D.	Senior Assistant Physician
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ALBERT V. ROCHE, M.D.	Assistant Physician
PERCY L. SMITH, M.D.	Assistant Physician
ANTONIO HUBERT, M.D.	Assistant Physician
RAYMOND J. HARQUAIL, M.D.	Assistant Physician
MARGARET DOUGLAS, M.D.	Assistant Physician
GEORGE W. COMEAU, M.D.	Assistant Physician
THOMAS M. MAXWELL, M.D.	Assistant Physician
CHARLES WYATT HUTCHINGS, M.D.	Assistant Physician
KENNETH Y. SINCLAIR, M.D.	Assistant Physician
LINDSAY E. ROBINSON, M.D.	Assistant Physician
JACKSON F. HENNINGSEN, D.D.S.	Resident Dentist
EDWARD M. GREVATT, D.D.S.	Resident Dentist
CATHERINE F. WHEELER, R.N.	Superintendent of Nurses
MILDRED H. HURLEY	Directress of Psychiatric Social Service Department
REBECCA A. ADAMS	Directress of Ward Occupational Therapy
EDITH S. MOODIE	Directress of Physical Training
PHILLIP B. ROBERTS	Pharmacist
GEORGE J. HAMBERGER	Business Manager
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REPORT TO THE COMMISSIONER

TO THE HONORABLE WILLIAM J. ELLIS,
COMMISSIONER OF INSTITUTIONS AND AGENCIES.

The Board of Managers of The New Jersey State Hospital at Grey-stone Park hereby respectfully submits to you its fifty-second annual report of that institution, covering the fiscal year from July 1, 1926, to June 30, 1927. We have incorporated in this the annual report of the Medical Superintendent and Chief Executive Officer as submitted to us by Dr. Marcus A. Curry.

In reviewing the accomplishments of the past year we feel well pleased with the progress that has been made. The Board had devoted much time and attention to the building program and we wish to place ourself on record as sincerely grateful for the spirit of cooperation constantly shown by you and your Department in this connection. During the year the Reception Building has been finished, and furnished partly with State Use articles and partly with those obtained in the market. Mrs. Garrison, as Chairman of the furnishing committee, has given much time and personal attention to the selection of furniture and materials and we feel that the result is a credit to her taste and good judgment. Plans for the cottage for nurses, the addition to the firehouse, the occupational therapy building and the employees' building have been accepted and the many necessary orders and contracts studied and signed. Work is now in progress on all of these buildings. The employees' cafeteria has been opened for use and the kitchen connected with it has also been placed in service. Remodeling of the main kitchen in the Administration Building was completed early in the year and that kitchen has also given excellent service.

We have devoted much careful study to the subject of water supply and are exceedingly glad to report what appears to be a satisfactory solution of the problem of additional reserve for emergency use. After several test wells had been drilled without an adequate supply being located, a well was sunk on the property belonging to Mrs. Cutler, not far from the boundry line of the hospital land, and water of excellent quality was found which it is estimated will give a flow of 500,000 gallons a day from each well. About nine acres of land have been purchased from Mrs. Cutler and it is planned to drill two wells and have the water piped to the hospital reservoir system, where it will pass through the regular purification plant and be distributed in the same manner as the present supply. In this work the constant advice and

assistance of Mr. Earle have been deeply appreciated.

The internal affairs of the institution have likewise been given attention by the Board as a whole and by the different members as individuals and committees. In general, matters have been very satisfactory with a smooth functioning of all divisions under their various heads. There have been no important changes in the officers during the year. In the medical department Dr. McMurray, as for several years past, has been appointed by us to act superintendent during the necessary absence of Dr. Curry from the institution: Dr. Lane, Clinical director has continued in immediate charge of the medical care of the patients and has also done excellent work in connection with the mental hygiene clinics; Dr. Collins, as resident surgeon, has continued the same high type of work as in previous years; Dr. Gambill, as specialist in diseases of the eye, ear, nose and throat, has shown himself skillful and competent; Dr. Christian, pathologist, is recognized throughout the district as accurate, reliable and energetic; Dr. Hampton has continued his fine work in the X-Ray division and has added several new and beneficial forms of electrotherapy during the year. The ward physicians, both senior and junior, have also carried on very satisfactory work, though handicapped by insufficient personnel.

In the nursing division Miss Wheeler, superintendent of nurses, has shown herself thoroughly capable and conscientious, a high type of institutional executive. Miss Hurley has increased the efficiency of the social service division and Miss Adams, in the curative work rooms, and Miss Moodie, in the division of physical education, have obtained fine results with very discouraging material in the deteriorated classes of patients. All other divisions of the medical department have also carried on their work in an efficient manner, for which both the heads and assistants are to be commended.

In the business department we feel that a word of special reference is due to Business Manager George J. Hamberger, who took up the duties of this position at the opening of the fiscal year. Although this department is one highly complicated and involved, Mr. Hamberger has adjusted himself very well and has not only carried on the work in a satisfactory manner but has already been able to make several noteworthy improvements. In the dairy he has increased efficiency by improving the milk producing qualities of the herd, using the non-producers for beef and buying in their place cows of a high grade; in this manner and by various other improvements he has been able without materially adding to the number of cows to increase the milk supply sufficiently to meet the needs of the hospital, thus making it possible in March to discontinue the purchase of milk

which effects a saving over the previous year of an average of \$1,906.20 per month. In the bakery a saving of about 2,000 loaves of bread a week was brought about by various improvements, including a change in the size of the loaves which reduced waste. In the main kitchen the amount of waste was also greatly reduced by more efficient handling, to which the superior equipment of the remodeled plant was a contributing factor. We feel that Mr. Hamberger is sincere and energetic in the prosecution of his duties and that he is to be commended for his success during this difficult first year.

The other officers of this department, including Mr. Coursen, assistant business manager, and Mr. Van Winkle, treasurer and chief clerk, have carried on their many duties in their usual competent and satisfactory manner. Mr. Landesman, as engineer-in-charge, has not only continued his plant supervision but as director of the mechanical forces has completed several pieces of construction work in a manner superior to that usually obtained under contract. The head gardener, Mr. Kelly, again raised produce of such excellent quality as to win for the second time the blue ribbon at the Trenton Fair in competition with all other institutions of the State. Mr. Koch, as florist, has not only supplied the wards with flowers and plants and kept the grounds in fine condition, but he has produced flowers of such quality as to win prizes and cups at the Morris County Flower Show in competition with some of the best growers of the State. Furthermore, as foreman in charge of the grading around the new buildings, he has done very excellent work and by the skillful manner in which he has utilized patient labor, has effected a large saving over the amount which would have been required to accomplish the same work under contract. Although in reviewing the work of the hospital organization we make reference to certain people who have made outstanding accomplishments, we are not unmindful of the fact that many equally good results have been attained in the various divisions by workers and groups to whom we cannot at this time extend individual credit, but whose faithful application is nevertheless fully appreciated.

Again, Dr. Curry, as superintendent, has been the officer in charge, upon whose shoulders has rested the burden of responsibility for the welfare of the 4,395 patients who have been under care of the institution during the year, and also for the welfare of the officers and employees, the majority of whom not only work but live at the institution. A hospital executive must carry his responsibilities twenty-four hours a day, every day, knowing that the possibilities of trouble in an institution for mental cases are as numerous as those in a powder

magazine and that any mischance means a notoriety which is bad for the patients and the morale of the institution and adds to the anxiety and suffering of the many thousands of people in the community who have friends or relatives in this or other hospitals. Dr. Curry has carried on his work with wholehearted devotion to the best interests of the patients and while avoiding sensationalism has felt that the public is entitled to honest information about all features of a public institution, and that it is only through bringing the facts before the people that institutions and their work can receive intelligent backing. In this, as in all matters of internal administration, he has had our united support throughout the year. We furthermore indorse such recommendations as he has incorporated in his report, and would call to your especial attention the matter of a permanent road for the main approach to the institution and the necessity of increasing the farm land, not because they are the most important of the recommendations, but because we fear they are the most likely to be disregarded.

At the close of the year covered by this report there remained on the records of the hospital 3,783 patients—1,905 males and 1,878 females—an increase of 215 patients over the previous year. Of this number 292 patients—144 males and 148 females—were outside of the institution but still carried on the hospital records and subject to return without legal or medical procedure if deemed advisable. During the year there were admitted, including first admissions, readmissions and transfers from other institutions for the insane in this State, 827 patients—447 males and 380 females. The discharges totaled 367 patients—181 males and 186 females; 153 were recorded as recovered, 168 as improved, 26 as unimproved, 12 as without psychosis and 8 as transferred to other hospitals for mental diseases. The deaths during the year numbered 245 patients—129 males and 116 females.

At the opening of the fiscal year the terms of Mr. A. B. Leach and Mrs. Philip McKim Garrison as managers expired. Governor Moore appointed Dr. George W. King, Superintendent of Hudson County Hospital for the Insane, to succeed Mr. Leach and reappointed Mrs. Garrison. During the year the Board of Managers held ten regular and two informal meetings, with one special meeting; the total attendance was 77. Visits, conferences, inspections and committee meetings made a grand total of 399 trips to the hospital by individual members of the Board. In addition to these recorded visits many conferences were held at the homes or offices of the

different managers with each other or with the Superintendent and other resident officers.

In concluding our report we desire to express our highest personal esteem for you and our gratitude as a Board for the fine manner in which you, the members of your Department and the State Board of Control have worked with us throughout the year for the furtherance of all matters concerning The New Jersey State Hospital at Greystone Park.

Respectfully submitted,

DANIEL S. VOORHEES, *President.*

W. L. R. LYND, *Vice-President.*

AUGUSTUS S. KNIGHT

GEORGE RICHTER

JANE MILLARD DOYLE

MARIAN K. GARRISON

GEORGE W. KING

June 30, 1927

TREASURER'S REPORT

TREASURER'S REPORT

**TREASURER'S REPORT OF CASH RECEIPTS AND
DISBURSEMENTS FOR THE FISCAL YEAR
ENDING JUNE 30, 1927.**

RECEIPTS

From Atlantic County.....	\$ 107.71
" Bergen County.....	83,846.15
" Essex County.....	9,919.45
" Hudson County.....	28,497.72
" Hunterdon County.....	179.27
" Mercer County.....	197.94
" Middlesex County.....	514.52
" Monmouth County.....	562.53
" Morris County.....	43,223.62
" Passaic County.....	135,102.67
" Somerset County.....	545.56
" Sussex County.....	10,174.19
" Union County.....	98,959.05
" Warren County.....	2,367.70
" Private Patients.....	238,763.08
" Individuals and excess amounts collected by Counties for support of Ind. patients.....	7,807.11
" Miscellaneous receipts.....	5,015.25
	\$665,783.52

DISBURSEMENTS

Amount of Collections deposited with Wm. T. Read, State Treasurer.....	\$665,783.52
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SALARIES AND WAGES

Employees' Pay-rolls—12 months.....	\$756,218.77
Officers' Pay-rolls—12 months.....	17,000.00
Amount of bills paid for services.....	7,680.13
	\$780,898.90

A. J. VAN WINKLE
Treasurer.

REPORT OF THE CHIEF EXECUTIVE OFFICER

REPORT OF THE CHIEF EXECUTIVE OFFICER

TO THE BOARD OF MANAGERS:

As Medical Superintendent and Chief Executive Officer, I have the honor to submit to you herewith the fifty-second annual report of The New Jersey State Hospital at Greystone Park. This report covers the year from July 1, 1926, to June 30, 1927, and in it I have endeavored to describe in considerable detail the work accomplished in all branches of the institution during the past twelve months, and to indicate what seem to me to be the most pressing needs in the several divisions. In order to do this in a just and comprehensive manner I have to a large extent incorporated the reports submitted to me by the heads of the various divisions having to do with the care and treatment of the patients and with the business and maintenance and functioning of the hospital.

The year has not been marked by spectacular achievements, but, on the contrary, has seen the establishment of a large number of improvements which, I believe, are destined to have far reaching results. These will be duly enumerated in the proper sections of this report.

There have been few changes in the medical staff and in the heads of divisions, although the rank and file of employees, particularly nurses and attendants, have shown the usual heavy turnover. The most serious handicap which has made itself felt to a greater degree than ever before has been the inadequate housing facilities for employees. The insuperable fact of no quarters has stood as a complete barrier against many desirable additions to the personnel and has greatly crippled proper functioning, especially in the vitally important division of ward care of patients.

HEALTH

The general health of both patients and employees has been excellent during the past year. No epidemics of any kind have developed. One case each of measles, mumps and scarlet fever were reported. Erysipelas has appeared occasionally, twenty-one cases having been reported, but with only one death. Tuberculosis has been of rather frequent occurrence, 84 cases having been reported during the year, the great majority being of the pulmonary type. Both annexes of the Dormitory Building are now in use as isolation wards for the tuberculous, but their capacity is only 82, which is far from adequate. The hospital milk and water supplies have been frequently tested

in order to insure freedom from the possibility of infection from these sources. As a preventive measure, typhoid and small-pox vaccines have been administered to all newly admitted patients under sixty years of age whose physical condition permitted.

STATISTICAL RESUME'

Complete statistical tables, compiled according to the form prescribed by The National Committee for Mental Hygiene and adopted by the American Psychiatric Association, have been prepared by Mr. William J. Littell, senior clerk and statistician, and will be found in the appendix to this report. I have had Mr. Littell prepare a brief resume' for incorporation at this point, however, in order that the salient facts regarding the patients received and discharged during the past year may be readily available. I am unable to account in any way for the marked increase in the admissions this year. As a rule, the admission rate is something of a barometer of social and economic conditions in the hospital district, but it does not seem to me that there has been sufficient business depression to effect such a decided rise. It may be noted that the increase is proportionately greater for men than for women, although affecting both. The voluntary commitments have increased from 52 in 1926 to 70 in this year. Mr. Littell's resume' is as follows:

General Data: There were admitted during the year covered by this report 827 patients—447 males and 380 females. This is not only the highest number of admissions for any one year since the opening of the institution, but is nearly 100 in excess of admission for the year ending June 30, 1926, during which the previous maximum number of patients were admitted. Of these admissions 692—387 males and 305 females—were admitted for the first time to any institution for the insane. The readmissions numbered 130—59 males and 71 females—and there were received by transfer from other institutions for the insane within the State 5 patients—1 male and 4 female.

The total number of patients under treatment during the year was 4,395—2,215 males and 2,180 females—over 200 in excess of the previous year. The highest number of patients actually in the institution at any one time during the year was 3,524, on March 30th, and the highest census was 3,785, on April 30th. There were outside the institution on parole 269 patients—122 males and 147 females—and 23 patients—22 males and 1 female—who escaped.

The total discharges numbered 612 patients—310 males and 302 females—leaving a net gain of 215 patients over the preceding year

on the records, but owing to the increased number on parole the increase in patients actually in the hospital is only 157.

First Admissions: The number of native born first admissions was 425—233 males and 192 females—constituting 61½ per cent of the total. The parents of 223 native born patients were also native born, of 136 they were foreign born, of 53 they were of mixed races, while of 13 native born patients data concerning parentage was unobtainable.

Of the foreign born patients 25 were natives of Austria, 37 of Germany, 26 of Ireland, 40 of Italy and 41 of Poland. These five countries contributed over 63 percent of the total foreign born. Twenty-eight foreign born patients had been in the United States less than 5 years, while 150 had been residents for 15 years or more. Ninety-seven of the foreign born patients were naturalized, 112 were aliens and the citizenship of 53 could not be ascertained.

The principal psychoses of first admissions were psychosis with cerebral arteriosclerosis in 119 cases, general paralysis in 64, manic depressive psychosis in 80 and dementia precox in 227 cases.

Table VII shows the principal races to be as follows: African, 64; German, 65; Irish, 61; Italian, 56 and Slavonic, 72. These comprise nearly 46 percent of all races, while 240, or over 34½ percent were of mixed races. Data concerning the race of 15 patients could not be obtained.

As to the age of first admissions the largest number for any five-year period was 83—from 30 to 35 years. Nineteen were between 15 and 20 years of age and but 1 patient under 15 years. There were 30 patients between 65 and 70 years and 41 over 70 years of age.

Relative to the degree of education of first admission patients 373, or nearly 54 percent, had a common school, 66 a high school and 28 a college education. The number with very limited education was 94, while 30 were illiterate. The degree of education in 101 cases was unascertainable.

The environment of 618 patients—nearly 90 percent—was urban, 67 rural and 7 unknown.

In the case of 408 first admissions, or 59 percent, their economic condition is recorded as marginal, 157 as in comfortable circumstances and 124 dependent.

In the use of alcohol 86 patients—12.4 percent—were intemperate. One hundred and forty are stated to be temperate, 381 as abstinent and in 85 cases information was not available.

The marital condition of first admission patients is as follows: Single, 263—168 males and 95 females; married, 317—162 males

and 155 females; widowed, 83—34 males and 49 females; separated, 11; divorced, 7, and unascertainable, 11.

Readmissions: The readmissions numbered 130—59 males and 71 females. Of these 30 were diagnosed as suffering from manic depressive psychosis and 57 from dementia precox, the two combined comprising 67 percent of the total readmissions.

Discharged: During the year 153 patients—72 males and 81 females—were discharged as recovered, a percentage of 22.1 based on the number of first admissions. This is a decreased percentage from last year, a circumstance attributable to the fact that while the number of patients discharged is substantially the same for both years the number of first admissions increased by nearly 100, and to our new practice of keeping the patients on trial visit at home for a year before discharged. The number discharged as improved was 168, as unimproved, 28, and as without psychosis, 12. Eight patients were transferred to other institutions for the insane within New Jersey.

Died: There were 245 patients who died during the year—129 males and 116 females—a percentage, based on the total number under treatment, of a fraction over $5\frac{1}{2}$ slightly lower than last year and practically the same as in 1924, when the lowest rate in ten years was attained.

Of those who died 58 were diagnosed as afflicted with psychosis with cerebral arteriosclerosis, over $23\frac{1}{2}$ percent of the total deaths. Other principal psychoses of those who died were senile psychosis, 25 patients; general paralysis, 33; manic depressive psychosis, 30 and dementia precox, 40 patients.

The more prominent causes of death were diseases of the circulatory system, comprising 113 cases, or over 46 percent of the total number of deaths. Other numerous causes were pulmonary tuberculosis, in 31 cases and nephritis, in 21 cases.

Over $67\frac{1}{2}$ percent, or 166 patients, were in excess of 50 years of age at time of death. Of these 59 were over 70 years of age, including 11 patients who had passed the age of 80 years and 1 who was over 90 years old. The average age at death for the year was 55.39 years.

Twenty-seven of the patients who died had been under institutional care and treatment for over 20 years. Included among the latter are 7 patients who had been under treatment for between 25 and 30 years, 8 between 30 and 40 and 1 for over forty years. Fifty patients have been hospital residents for periods varying from 5 to 20 years.

CLINICAL WORK

In a large modern hospital the position of Clinical Director is of vital importance to the organization, since it is impossible for the Superintendent to give that degree of close personal attention to the various branches of the medical service which is absolutely essential if the clinical work is to be correlated in the most efficient manner. Since early in 1921 Dr. Arthur G. Lane has been Clinical Director at this hospital. He is deeply interested in his specialty, a student, keeping abreast of the most recent discoveries in the diagnosis and treatment of mental cases without being radical or iconoclastic, and an excellent lecturer and teacher, whether instructing nurses or physicians. He is also highly successful in dealing personally with patients, both those of the advanced type usually encountered within the hospital and those with the milder varieties of disorders to be found at the mental hygiene clinics. In addition to his many regular duties he has been frequently called upon for consultation and advice in matters having to do with the building program at the institution, which has been continually before us since 1920, and also regarding executive matters which directly affect the medical staff. He has submitted the following report which I have incorporated practically verbatim:

The expansion of the clinical work during the past fiscal year occasioned by the great increase of admissions is evidenced in the statistical tables and special reports made by the various diagnostic and treatment divisions as found recorded elsewhere in this volume. The difficulty in keeping pace in our medical personnel with the advance in admission rate has necessitated a greater amount of work being placed on our physicians and nursing staff. That this burden has been cheerfully accepted by all alike is gratefully appreciated. We have had a very low rate of changes among our physicians and the few vacancies have been readily filled, thus keeping our housing accommodations for the medical staff filled to capacity. The new constructions now under way for additional housing for the nursing and attendant staff will go a long way toward solving one of our difficult problems, the one of ratio of ward personnel to patients which is such an important factor in the care and treatment of mental diseases. However until these provisions are made accessible and the larger ward service provided we will continue to labor with this handicap. We are now about to occupy the new Reception Building with its added facilities for the modern care and treatment and we will feel this difficulty very seriously; it will mean that we must again use the thinning out

process to stretch the present number of employees over these new wards and activities. Our ratio of physicians to patients, also below the recognized standard, is a factor which must not be overlooked in measuring our capacity to cope with our rapidly increasing admission and census rate. It must also be considered as we open our new buildings now ready for occupancy as well as those now under construction and those planned in the future development.

A word from the clinical division would seem to be indicated in explanation of our recovery rate while we are speaking of our increased admissions. It has always been considered that a hospital of this nature producing a recovery rate of between 20 and 25 percent is fully up to standard. While we have been able to keep well within these figures during the past year we have fallen short of the previous year to a slight extent. It must be remembered that practically all patients who are discharged from our records are those who have gone successfully through a year's trial visit in the community. This alone accounts for the apparent discrepancy in recovery rate, as all patients discharged during the past fiscal year were out on their trial visit period before the fiscal year, with its increased admissions, was operative. In other words, should our admission rate have remained comparable with last year our recovery rate would also have remained directly comparable with last year.

The actual diagnostic and treatment work has proceeded smoothly and we have endeavored to give painstaking and exhaustive attention to all the complicating features, both mental and physical, which are operating in the individual cases to produce their psychoses. The new Reception Building we anticipate will greatly facilitate our diagnostic efforts in that it provides many features for observation and study which were formerly not available. Removing the admission routine and purely mental problems from the Clinic Building will also allow us to use the latter building in a more intensive manner for the purpose of physical diagnosis and for the medical and surgical ailments which may be coexisting with and at times complicating the mental picture in many patients. It will be our endeavor in the future to use this clinic unit to its full capacity as the space vacated by the reception activities provides for further expansion and the addition of increased facilities and armamentarium in all the specialties.

From a medical standpoint the health of the general population of the hospital has been exceptionally favorable. We have suffered from no epidemics and in spite of a larger census throughout the year the actual death rate was markedly reduced over that of the preceding year.

In the last report mention was made of the inauguration of malarial treatment for general paralysis at this hospital but which had not been in progress sufficiently long for us to present facts and figures which would be conclusive evidence of its efficacy. At this time we are very favorably impressed with our results and such evidence as we have to present indicates that in no other form of treatment is there the possibility of securing such a percentage of arrests of this disease. Formerly remissions spontaneously occurred in approximately 3 or 4 percent of untreated cases. With the introduction of arsenical medication intensively administered there seemed to be a slight increase of remissions to the extent of approximately 6 or 7 percent. More often, however, than under the malarial treatment these remissions were not as satisfactory in the sense of a restoration to a state approaching the patient's psychotic mental efficiency—nor were the remissions as prolonged. Of the large group treated previous to malarial intoxication that did not show remissions it was found that while the actual period of confinement in bed and the period of intensive nursing was somewhat lessened, they were still a problem in ward routine, care and supervision. From both the mental and physical aspects the attention which these patients require makes of them the most expensive group from a nursing standpoint of any class of patients in a mental hospital. It would seem that anything that promises a lessening of this supervision is an economical advantage.

Our experience since the first case inoculated in July, 1925, includes 126 cases treated. Of this number we have had a death rate of 6½ percent, or 22 cases. Of the 104 remaining cases 30 have had a definite remission in their mental and physical symptoms and are now out of the hospital and in the community, approximately 16 percent. Of the 74 cases remaining in the hospital there are only 5 cases which have shown no definite improvement. This leaves in the hospital 69 cases showing various gradations of improvement, among which undoubtedly we will find patients who will soon be able to leave the hospital and thus augment our remission group.

A clinical problem which is steadily increasing and which ultimately will demand recognition from an institutional viewpoint is the cerebral disease, encephalitis lethargica. The extent to which this disease has invaded our State is very difficult to estimate, but that it has been much more prevalent than was formerly appreciated must be assumed by the experience we are now called upon to face, namely: the hospitalization of increasing numbers of patients suffering from its residuals.

As our knowledge of the disease in its multiplicity of manifestation progresses it becomes apparent that the designation of sleeping sickness is a misnomer and that the cases exhibiting somnolence to a pathological degree are not in the aggregate sufficiently large to have appropriated this nosological term. Experience has shown that disturbance of the sleep cycle is only an incidental symptomatic expression and as a diagnostic criterion may be entirely absent. The great variety of neurological symptoms indicative of selective involvement of the tissues in and about the basal nuclei tend to complicate the diagnosis. The extent of involvement, as well as the severity of the process make also a variety of prognostic criteria which vary in results from almost immediate death to the very mild transient states which leave practically no residuals. As up to the present time we have no known specific for the cure of the infamatory stage we must treat symptomatically each manifestation as it arises, hoping with each individual case that the destruction of brain tissue may be kept at the minimum. It is true that hospitals for mental ailments see but rarely cases in the early stages, but as time goes on we are finding ourselves confronted with more and more cases which come to us suffering from the residuals of the disease. Such cases are, as a rule, incapacitated to such an extent as to be dependent on others. The mental symptoms vary considerably, but rarely do we find evidence of the involvement of the intellectual center so almost universally characteristic of other organic brain diseases. The most prominent and probably the most characteristic symptom of these cases as a group seems to be an interference in emotional control with conduct disorders based upon this series of variations. As only a relatively small number of cases of this illness eventually reach a mental hospital we know that this emotional instability cannot be a universally constant expression of all cases. This leaves a great group of cases who only exhibit the neurological residuals of focal brain tissue destruction. On the other hand, we are able from our experience to confirm the finding of other research workers that the emotional instability, with its accompanying conduct disorders resulting in pronounced personality deviations, can exist with practically no neurological symptomatology. It is in this latter group that some of the most difficult institutional problems are found. It seems also that this latter type of residual producing personality reaction deviations is most commonly found in the group of infantile and adolescent cases and that the neurological residuals are found predominating in the adult cases. At the present time practically no mental hospital is equipped for the adequate supervision and training of this young

group of patients. On a ward of adult psychotic patients one such child with his impulsive and uncontrollable conduct creates a scene of constant turmoil, very disturbing to the group and provocative of much danger to himself. As their intellectual equipment is, as a rule, unimpaired there is of course the compelling necessity for schoolroom teaching which mental hospitals do not provide. Not being properly classifiable in the mental defective group and because of their disturbing conduct traits they are not eligible for the state training schools they offer a peculiar problem which must ultimately be solved. That much can be done in the line of habit training and reeducation in personality traits has been demonstrated by several students of this group. Our out patient clinics are very frequently confronted with these cases who are brought to us by parents, school authorities, welfare organizations and occasionally by officers of clinical jurisdiction for a solution in the line of institutional supervision and treatment.

We regret exceedingly that our personnel has been so limited that the additional clinics promised in the last yearly report have not been inaugurated, but with the advent of another year a determined effort will be made to organize a trained personnel of clinic workers that we may more adequately serve the already established clinics with services more comprehensive and also furnish other communities with the clinic facilities which they are so urgently demanding of us. A glance at the figures of attendance as found in the mental hygiene clinic report will indicate that the existing clinics, in spite of various handicaps, have been functioning in a very active manner and those in personal contact with the work are very enthusiastic in the belief that such valuable service has been rendered to the community in the preventive line of endeavor. Of the large number who have felt that their mental problems were sufficiently grave to consult mental specialists only a relatively small group were recommended for institutional treatment. It is also gratifying to know that successfully treated patients are now active in the community in bringing others to the clinics. That much good is to come from such widely disseminated mental hygiene is very certain and we are eagerly looking forward to the time when our whole hospital district will be served with these facilities.

In addition to the above extramural activities several mental hygiene talks have been given by the Clinical Director to interested groups—consultation service rendered in psychotic and neurological problem cases for the medical profession in the hospital district—as well as lecture courses in psychiatry consisting of fifteen lectures each given

for two general hospital nurses' training classes. A short series of lectures in clinical psychiatry was given to our medical staff, as well as an intensive course in psychology and psychiatry to our own nurses' training school. This makes a total of approximately 75 hours of didactic work. The psychiatric lectures for the medical staff were interrupted during the winter for a course of lectures in electric modalities and electrotherapeutics. These lectures, given by Dr. Hampton, of our staff, were intensely interesting and very valuable, as they were made in such a manner that the practical application of this form of treatment in psychoses and neuroses was made clearly evident.

SURGICAL OPERATIONS, ACCIDENTS, BIRTHS, ETC.

Dr. Laurence M. Collins, senior physician and resident surgeon, has been in charge of the operative work of the institution, as for several years past. He has personally performed the greater number of the major operations, assisted by other members of the resident staff, and deserves great credit for the fine manner in which this division has functioned. Dr. Clifford Mills, of Morristown, consultant surgeon, has been called in from time to time to operate, assist or diagnose, and has rendered valuable service to the institution. Late in the year two new names were added to the list of surgeons on the board of consultants, Dr. George P. Pitkin and Dr. Joseph M. Recton.

Dr. Collins has listed the work of the year and its results as follows:

No. of Cases	Diagnosis	Operation Performed	Results
3	Fracture of left femur.....	Fracture reduced, splint applied	Recovered
2	Intracapsular fracture of neck of right femur.....	" " " "	" "
5	Colles fracture.....	" " " "	" "
2	Potts fracture.....	" " " "	" "
2	Fracture of middle third of humerus	" " " "	" "
1	Fracture of upper third of humerus	" " " "	" "
1	Fracture of neck of left humerus	" " " "	" "
1	Impacted fracture of neck of right humerus.....	" " " "	" "
1	Fracture of head of left humerus	" " " "	" "
1	Fracture of second metacarpal bone of right hand.....	" " " "	" "

No. of Cases	Diagnosis	Operation Performed	Result
1	Compound fracture of little finger	Fracture reduced, splint applied	Recovered
1	Fracture of metacarpal bone of thumb.....	" " " "	" "
1	Fracture of metacarpal bones of left hand.....	" " " "	" "
1	Fracture of metacarpal bones of foot.....	" " " "	" "
1	Osteomyelitis of second finger, right hand.....	Bone curetted.....	" "
1	Osteomyelitis of left index finger with necrosis.....	Amputation	" "
1	Ankylosis of second finger of right hand with chronic osteomyelitis.....	Amputation at metacarpophangeal articulation	" "
1	Ankylosis of second toes, both feet.....	Amputation at metatarsophalangeal articulation.....	" "
2	Bursitis of elbow.....	Aspirated	" "
1	Synovitis of knee.....	"	" "
1	Fracture of fifth and sixth ribs	Chest immobilized with adhesive tape	" "
1	Fracture of seventh rib.....	Chest immobilized with adhesive tape	" "
1	Fracture of ninth rib.....	Chest immobilized with adhesive tape	" "
1	Fracture of patella.....	Leg immobilized.....	" "
1	Fracture of right astragalus..	Fracture reduced, splint applied..	" "
1	Fracture of ascending ramus of pubis.....	Cast applied.....	" "
1	Dislocation of left knee.....	Dislocation reduced and immobilized	" "
4	Dislocation of shoulder.....	Dislocation reduced.....	" "
1	Dislocation of right hip.....	" " " "	" "
10	Cellulitis of neck.....	Incision and drainage.....	" "
1	Infection of chest wall.....	" " " "	" "
1	Infection of scalp.....	" " " "	" "
10	Lacerated wounds of scalp...	Wounds sutured.....	" "
4	Carbuncle of neck.....	Incision and drainage.....	" "
4	Contusion of shoulder.....	Immobilized	" "
6	Contusion of hip.....	"	" "
5	Foreign bodies in hand.....	Removal	" "
5	Sebaceous cyst of scalp.....	Extirpation of sac.....	" "
1	Laceration of tendon, second finger	Tendon sutured.....	" "

No. of Cases	Diagnosis	Operation Performed	Result
3	Incarcerated right inguinal hernia	Bassini	"
3	Incarcerated left inguinal hernia	"	"
2	Strangulated left hernia.....	"	"
4	Right inguinal hernia.....	"	"
5	Left inguinal hernia.....	"	"
1	Double inguinal hernia.....	"	"
1	Femoral hernia.....	Sac resected, hernia reduced.....	"
1	Post-operative ventral hernia..	Tissues dissected, hernia reduced..	"
1	Right lateral hernia, traumatic	" " " "	"
1	Left incarcerated omental hernia with tumor of left testicle	Omentum resected, orchidectomy performed, with Bassini.....	"
3	Tumor of testicle.....	Orchidectomy	"
10	Acute catarrhal appendicitis..	Appendectomy	"
12	Chronic catarrhal appendicitis	"	"
4	Acute suppurative appendicitis	Appendectomy with drainage...	"
1	Acute gangrenous appendicitis, appendix retrocecal...	" " " "	"
1	Left ovarian cyst, chronic catarrhal appendix.....	Appendectomy, left salpingo-ophorectomy	"
1	Chronic salpingitis, cystic ovary, fibroid uterus and chronic appendix.....	Complete hysterectomy with appendectomy	"
1	Fibroid uterus with chronic catarrhal appendix.....	Hysterectomy with appendectomy	"
4	Fibroid uterus.....	Hysterectomy	"
1	Fibroid uterus (s'oughing)...	"	Died
3	Laceration of cervix.....	Trachelorraphy	Recovered
3	Chronic endometritis.....	Curettage	"
1	Uterine polyp.....	Extirpated	"
3	Double pyo-salpinx with chronic catarrhal appendix.	Double salpingectomy with appendectomy	"
1	Right pyo-salpinx.....	Right salpingectomy.....	"
1	Ruptured uterus.....	Hysterectomy	"
2	Ovarian cyst.....	Oo-phorectomy	"
3	Tubercular peritonitis.....	Laparotomy with exposure of intestines and evacuation of fluid	"
1	Cholelithiasis	Cholecystectomy	Died

No. of Cases	Diagnosis	Operation Performed	Result
1	Intestinal obstruction due to adhesions	Gut resected.....	Died
1	Intestinal obstruction due to volvulus	Gut untwisted.....	Recovered
2	Cholelithiasis	"	Recovered
1	Carcinoma of stomach.....	Exploratory	Died
1	Carcinoma of prostate.....	Prostatectomy	"
3	Carcinoma of right breast....	Amputation	Improved
2	Carcinoma of left breast....	"	"
6	External hemorrhoids.....	Hemorrhoidectomy	Recovered
5	Internal and internal hemorrhoids	"	"
1	Perinephritic abscess.....	Incision and drainage.....	"
3	Abscess of hip.....	" "	"
5	Elongated prepuce.....	Circumcision	"
4	Adenitis of axilla.....	Incision and drainage.....	"
4	Pleurisy with effusion.....	Aspirated	"
1	R. O. P. (pregnancy).....	Forceps	"
1	Breech presentation.....	Version	"

Fortunately we have had no suicides occur during the past year. There have been, however, the usual number of minor accidents, which seem bound to occur in an institution and also, I deeply regret to report, three of a fatal character. A colored male patient of quiet habits was polishing the floor of his ward with the usual heavy block. Without warning he suddenly struck another colored male patient on the head, inflicting fatal injuries. Late in April and early in May extensive investigations were made into injuries apparently received while in the institution by a patient who was an inmate of the hospital for only three days and who died at his home. Neither the hospital authorities, the Department of Institutions and Agencies nor the County Prosecutor's office were able to develop positive evidence as to who or what did violence to the patient. In June a patient who was working with others in digging a trench for a sewer pipe on the hospital property was caught by material sliding into the trench; in this material was a heavy stone which struck the patient in such manner as to produce fatal injuries.

There were but two births at the institution during the year:

Patient admitted May 25, 1926; male child born January 4, 1927. Child removed from the hospital by the Social Service Department on February 17, 1927, and given to the State Board of Children's Guardians.

Patient admitted December 5, 1926; female child born May 2, 1927. Child removed from the hospital by its father.

GYNCOLOGICAL DIVISION

Again this year the gynecological work of the hospital has been done by Dr. Margaret Douglas. A routine examination has been made of all women patients soon after admission and of such other cases, patients or employees, as have been referred to this division. In addition to this routine work, a survey has been begun this year which is to include all women patients resident in the institution. With each examination smears are made for laboratory examination. If treatment is indicated it is carried out under the direction of Doctor Douglas, but if an operation is advised it is not performed upon a patient until after consent of the nearest relative has been obtained. All surgical cases are transferred to the surgical division and are reported under the list of operations performed. Doctor Douglas has submitted the following tabulation of her work this year:

EXAMINATIONS	
New admissions	379
Referred cases	29
Survey cases, Main Building patients.....	1,078
Student nurses	8
Total.....	1,494
TREATMENTS	
Patients	2,911
Employees	72
Total.....	2,983
SMEARS	
Positive for gonococci.....	50

EYE, EAR, NOSE AND THROAT DIVISION

The work in the eye, ear, nose and throat division has been highly satisfactory in character. Dr. P. J. Gambill, who has been in charge of this section since early in 1924, is an unusually capable specialist, being a good diagnostician and a successful surgeon. He has made a routine examination of all new patients soon after admission, treated any conditions found to require attention and if surgical work was necessary he applied to the nearest relative for permission to operate. Other patients have been referred to this division from the regular ward services for examination and treatments. Employees of the institution may apply for an appointment or may be examined at the request of other physicians of the hospital. As the report shows, a considerable number have availed themselves of this opportunity.

Doctor Gambill has submitted a detailed report of all medical and surgical work done by him during the year, both for patients and for employees, but for the sake of brevity I have omitted the enumeration of the long list of diseases treated.

EXAMINATIONS

Patients:	Eye	Ear	Nose	Throat	Total
Routine	862	862	862	862	3,448
Special	124	99	114	172	509
Employees:					
Special	58	43	46	73	220
Total.....	1,044	1,004	1,022	1,107	4,177

MEDICAL TREATMENTS

	Patients		Employees		Total	
	Treated	Treatments	Treated	Treatments	Treated	Treatments
Eye:						
Number treated	503	...	176	...	679	...
Number treatments .....	...	809	...	341	...	1,150
Ear:						
Number treated	331	...	105	...	436	...
Number treatments .....	...	964	...	327	...	1,291
Nose:						
Number treated	289	...	105	...	385	...
Number treatments .....	...	1,220	...	324	...	1,544
Throat:						
Number treated	137	...	126	...	263	...
Number treatments .....	...	464	...	348	...	812
Total:						
Number treated	1,251	...	512	...	1,763	...
Number treatments .....	...	3,457	...	1,340	...	4,797

SURGICAL OPERATIONS

Operation Performed:	Patients	Employees	Total
Cataract extraction	1	..	1
Ethmoidectomies	2	..	2
Incision and drainage, peritonsillar abscess	8	11	19
Iridectomies	1	..	1
Myringotomies	9	12	21
Radical antrum (modified).....	3	..	3
Removal of aural polyps.....	4	..	4

Operation Performed:	Patients	Employees	Total
Removal of nasal polyps.....	15	8	23
Removal of chalazion from eyelid.....	2	1	3
Removal of lingual tonsil.....	1	..	1
Submucous resection of septum under local anesthesia	18	..	18
Tonsillectomies under local anesthesia...	..	2	2
Tonsillectomies under general anesthesia.	97	2	99
Turbinectomies (anterior)	2	..	2
Total.....	163	36	199

DENTAL DIVISION

In the dental division Dr. J. F. Henningsen has continued as resident dentist in charge, with Mr. P. R. DeNapoly as mechanical dentist. Dr. F. C. Bartleman, of Newark, formerly resident dentist at this hospital, is still employed as a consultant and has visited the hospital weekly during the year. Dr. E. M. Grevatt, assistant resident dentist, resigned on October 15, 1926. Although the dental staff has been without an assistant during the greater part of the year, a very creditable amount of work has been accomplished.

Dr. Henningsen has submitted the following report:

During the past year every effort has been made to maintain the efficiency of the dental division and to correlate its work with that of the other divisions of medical service. To arrive at the correct treatment of a patient's condition the advice of the Clinic Director and the opinion of the ward physician are obtained which, in conjunction with the laboratory and radiographic reports, formulate a basis for specific care of the case. This year, owing to the increased number of admissions, it became necessary to chart the examinations upon form sheets to prevent delays in their appearance in the summary.

If extractions are required or any other work involving bony structures or soft tissues the work is confined to one quadrant at a time under local anesthesia or, if general is used, to one jaw. In case any acute infectious condition, such as stomatitis, is present this must be treated before work can be performed, so as not to endanger the patient by a general systemic involvement. During the early part of April the physicians on the female admission service referred a case which upon examination was seen to be acute ulcerative stomatitis; the patient was treated and isolated in a private room. The same day an examination was made of the remaining patients on the ward and those on the transfer list to see if any others were infected. A sub-acute case was found and this patient likewise placed in quarantine and under treatment. Cultures were made from seven other suspects not in an infectious stage

and the patients given prophylactic treatment. In two weeks the patients had recovered and were released from quarantine. It is probable that prompt action averted an epidemic.

The use of nitrous oxid and oxygen anesthesia is confined to acute cases and those patients who cannot cooperate with the operator. During the year it was necessary to administer nitrous oxid in over fifty cases; anesthesia was induced without untoward symptoms in any instance. In one case requiring the opening of the antrum and sphenopalatine fossa block anesthesia of Meckel's ganglion was induced before the patient was operated upon under ether and successfully prevented any undue shock. In another surgical case of interest a splint was made for a fractured mandible which enabled the bone to unite with a favorable result despite the presence of co-existent syphilitic necrosis in a non-cooperative patient. In the prosthetic branch of the division denture needs of patients have been supplied in cases where mouths were left entirely or nearly edentulous by the removal of oral sepsis. The mechanical dentist, who is thoroughly conversant with this speciality of dentistry, has been able to finish satisfactorily all cases undertaken this year.

The following tabulation indicates the work of the division during the year:

PROSTHETIC DENTISTRY

Full upper dentures.....	58
Full lower dentures.....	41
Partial upper dentures (clasps)	5
Partial lower dentures (c'asps).....	1
Partial upper gold denture.....	1
Partial lower dentures.....	14
Total	120
Dentures repaired.....	42

OPERATIVE DENTISTRY

Fillings:	
Amalgam	119
Cement	136
Silicate	42
Temporary	165
Total	462
Prophylaxis	48
Removal of Ca'culus.....	193
Gold inlay.....	4
Vulcanite splint for fracture.....	1
Carmichael crowns	1
Gold crowns.....	2

EXODENTIA AND ORAL SURGERY

Extractions	3,783
Impactions:	
Lower third molar.....	71
Upper third molar.....	58
Supernumerary	2
Lower cuspid	1
Upper cuspid	4
Upper lateral incisor.....	1
Lower second molar.....	2
Upper second molar.....	1
—	—
Total impacted teeth removed.....	140
Cysts:	
Dentigerous	2
Radicular	4
Mucous	1
—	—
Total cysts removed.....	7
Fibromas removed	2
Radical antrum	1
Necrosis of maxilla (acute suppurative).....	1
Acute osteomyelitis	1
Fracture of mandible.....	2
General anesthetics:	
Nitrous oxid and oxygen.....	57
Ether	4
Ethyl chloride	1
—	—
Total general anesthetics.....	62
Patients placed in isolation for treatment.....	3
Vincent's angina treatments.....	40

The following is a report of the work performed outside of working hours at the hospital and without charge by the operators the children of the Morris County Children's Home, at Parsippany, during the year:

Fillings:	
Amalgam	60
Silicate	2
Temporary	3
—	—
Total fillings	65
Removal of calculus.....	15
Prophy'axis	23
Extractions	38
General anesthetics	1
Ethyl chloride	1

PATHOLOGICAL DIVISION

The work of the pathological division has been continued this year under the direction of Dr. Thomas B. Christian. The importance of accurate and prompt reports from the laboratory in an institution of this kind can hardly be overestimated, for the diagnosis and whole system of treatment are frequently based upon the results of chemical and microscopic examinations. Evidence of the extent to which the laboratory is called upon is furnished by the number of examinations performed which have during the past year averaged over eighty for every working day. Doctor Christian is deserving of commendation for the manner in which he has organized the work and the high standards of accuracy and efficiency which he has maintained. His report runs in part as follows:

When a patient is admitted to this hospital we obtain as a routine measure a specimen of blood for a complete blood chemistry, the Wassermann test, and complete blood count. It is our custom every morning at nine o'clock to check the names of all patients admitted within the previous twenty-four hours and immediately to obtain a sample of blood from each one. A specimen of urine from each new patient is also sent to the laboratory as soon as possible. The results of this routine work are reported to the physicians in charge, the findings of blood chemistry examinations, urinalyses and blood counts are handed in within twenty-four hours and the Wassermann tests usually within forty-eight hours after the patient is admitted. In case of a high leucocyte count or other reports showing diseased condition the reports are immediately telephoned in or sent in on temporary written forms.

The patients that show positive blood Wassermanns are given a lumbar puncture and examination of the spinal fluid. The lumbar punctures are performed on the patients the same day that the blood is found to be positive except in certain cases showing a strong four plus Wassermann reaction and evidence of active syphilis; these, except in emergencies, have punctures made a few days later after having received one or two doses of neo-arsphenamine in order to sterilize the blood. These precautions are taken since it is considered not wise to perform a lumbar puncture on a patient suffering from active syphilis where there may be danger of transmitting the spirochetes to an otherwise normal spinal fluid. All patients having a negative Wassermann but with a history of syphilis are given another blood Wassermann test and in addition a spinal fluid examination. All showing any neurological symptoms are given spinal fluid

examinations at the request of the physicians.

The purposes of the lumbar puncture are as follows: (1) To determine evidence of cerebral syphilis through testing the fluid for the Wassermann reaction, the number of cells present, the amount of globulin present and the condition of the colloidal gold curve; also the amount taken from the patient, its color, appearance and the pressure of the fluid. (2) To determine pathological condition of the spinal fluid in other nervous diseases, especially encephalitis lethargica in which there is also given a routine examination for the quantitative determination of sugar. (3) In diseases simulating infectious meningitis to discover if possible the presence of tubercle bacilli or other bacteria that might be in the fluid. (4) For therapeutic purposes to relieve pressure in cases of delirium tremens and other conditions with chronic signs of intra-cranial pressure. (5) In other special cases to drain the fluid from the spinal canal in order that it may be replenished from the blood serum which has immediately before the lumbar puncture been injected with neo-arsphenamine. (6) Repetition of spinal fluid tests for the purpose of reexamination in larger amounts in order to check up a tentative diagnosis based on physical findings.

Tests are frequently repeated in all cases showing pathology in the urine examination or pathology in the blood chemistry findings to determine the results of treatment being given by the physician in charge. This gives the physician an accurate proof of the benefit the patient is receiving from his type of treatment. Every patient showing a four plus Wassermann test is immediately put under anti-syphilitic treatment which includes neo-arsphenamine, sulpharsphenamine, bismuth preparations and sodium iodide. When patients are under anti-syphilitic treatment some are certain to show a reaction from the drug; immediately upon the observance of any reaction the physician in charge of the ward notifies the pathological division and the patient is given treatment to counteract the untoward effects of the drug. In every case of syphilis showing involvement of the nervous system, whether general paralysis, cerebral syphilis or other forms, an effort is made as soon as possible to obtain permission from the nearest relative for giving malarial treatment for this condition. If permission is granted the patient is inoculated with malaria, the duration of the treatment depending upon the individual.

All miscellaneous examinations, such as feces, throat cultures, stomach analyses, blood cultures, various smears and so on, are made by request of the physician in charge of the patients. All needing intravenous treatments or intra-spinal treatments, such as those suf-

fering from encephalitis lethargica, are reported to the pathologist by the physician in charge. The doctor specializing in gynecological work makes vaginal and cervical smears from each patient sent to her and the laboratory returns reports as to the evidence found of gonorrhea or other types of infection. The smears are repeated at intervals during the treatment of such patients as show positive gonorrhea in order to determine a cure.

All laboratory work performed for patients is recorded on a composite sheet for individual examinations. The reports of all examinations and all work done by the pathological division are also kept on file in the laboratory office. In surgical operations gross and microscopic examinations of pathological tissue are made and a report sent to the record office for filing. All newly admitted patients are supplied from the laboratory with typhoid vaccine for preventive inoculation. On patients showing various forms of suppurative inflammation such as abscesses, boils and so on, if their condition warrants, cultures and vaccines are made from the bacteria causing the infection. All patients with diabetes are treated with diet and insulin and a daily routine examination of urine for sugar and acetone is formed with tests for blood sugar determination four days apart. Post-mortems are performed on (1) All bodies that are unclaimed; (2) All bodies for the examination of which a written permission has been obtained from the nearest relative; (3) All bodies requiring post-mortem examination through order from the coroner.

Every patient in the hospital showing evidence of syphilis is given weekly anti-syphilitic treatment. The following table show the work done this year:

	Male	Female	Total
Number of cases under treatment.....	173	103	276
Number doses neoarsphenamine administered	722	494	1,216
Number doses mercury and other drugs....	1,448	459	1,907

The free clinic for venereal diseases among those who are not connected with the institution has remained in operation throughout the year and is open to all indigent persons in the hospital district. The time for the clinic is every Friday, between the hours of 2:00 P.M. and 4:30 P.M. The following are the requirements for receiving treatment: (1) Must be referred by a physician. (2) Must be an indigent case. The drugs, such as salvarsan and mercury, and the apparatus used in the clinic are furnished by the United States Public Health Service. The following is a summary of the work during the past year:

	Male	Female	Total
Syphilis	173	112	285
Gonorrhoea	75	42	117
Chancroid	17	2	19

During the hospital year at the pathological laboratory a total of 26, 029 examinations were performed; of this number 13,649 were made for the male division and 12,004 for the female division, the remainder being miscellaneous, such as water and milk. The following table shows the number and variety of tests made:

	Male	Female	Total
Urine:			
Chemical and microscopical.....	1,704	1,174	2,878
Quantitative for albumin.....	725	624	1,349
Quantitative for sugar.....	117	153	270
Quantitative for chlorides.....	16	10	26
Cultures for types of bacteria.....	12	9	21
Microscopical examination of stained smears.....	41	27	68
Phenolsulphenaphthalein functional tests.....	7	4	11
Positive casts	478	367	845
Blood:			
Enumeration of red blood cells.....	560	568	1,128
Enumeration of white blood cells.....	796	643	1,439
Estimation of hemoglobin.....	30	83	113
Differential leukocyte	796	643	1,439
Examination for plasmodium malaria.....	121	73	194
Widal tests.....	64	71	135
Cultures	42	24	66
Examination for pneumococcus.....	16	12	28
Determination of blood groups.....	61	34	95
Sugar	640	531	1,171
Non protein nitrogen.....	998	778	1,776
Urea nitrogen.....	944	847	1,791
Creatinine	924	823	1,747
Uric acid.....	12	6	18
Cholesterol	2	1	3
Chlorides	21	16	37
Total nitrogen.....	4	2	6
Tests for CO ₂ in the blood.....	3	2	5
Wassermann tests.....	1,100	819	1,919
Hecht-Weinberg-Gradwohl tests.....	1,100	819	1,919
Estimation of coagulation time.....	14	12	26
Spinal Fluid:			
Wassermann tests.....	291	126	417
Cell count.....	291	126	417
Globulin	291	126	417

	Male	Female	Total
Colloidal gold curve.....	287	127	414
Microscopical examination of stained smears.....	22	14	36
Cultures	4	3	7
Quantitative sugar estimations.....	291	126	417
Quantitative chlorides	2	1	3
Non-protein nitrogen	2	1	3
Urea nitrogen	2	1	3
Creatinine	2	1	3
Sputum:			
For tubercle bacilli.....	82	50	132
For bacterial flora.....	41	34	75
Cultures	27	16	43
For types of pneumococci.....	16	24	40
Feces:			
For parasitic organisms.....	18	34	52
For tubercle bacilli.....	21	19	40
For typhoid bacilli	26	14	40
For bacterial flora.....	28	36	64
For occult blood.....	41	33	74
Smears:			
For gonococci.....	74	1,525	1,599
For treponema pallidum.....	31	12	43
From diphtheriae cultures.....	32	45	77
From eyes	10	4	14
From pus from ears.....	4	3	7
From pus from wounds.....	6	2	8
Examination gums for Vincent's angina.....	42	25	67
Examination throat for Vincent's angina.....	50	30	80
Stomach Contents:			
Total acidity.....	11	7	18
Free HCl.....	11	7	18
Combined HCl	11	7	18
Salts	11	7	18
For Oppler Boas bacillus.....	11	7	18
Cultures	11	7	18
Occult blood.....	11	7	18
Miscellaneous:			
Patients inoculated with plasmodium malaria.....	45	31	76
Autogenous vaccines.....	16	7	23
Cultures from teeth.....	14	9	23
Examination of granulomas.....	12	8	20
Basal metabolism estimations.....	10	23	33
Sugar tolerance tests.....	3	6	9
Examination of tissues.....	86	132	218
Autopsies	4	6	10
Typhoid vaccine (doses).....	(6,000)	(6,000)	(12,000)
Total number.....	13,649	12,004	25,653

Water:

For colon bacilli.....	72
For typhoid bacilli.....	72
For bacterial count.....	72
Quantitative chlorine estimations.....	4

Milk:

Specific gravity	26
Fat content	26
Total solids	26
Sugar	26
Proteids	26
Bacterial counts	26
Grand total.....	26,029

ROENTGENOLOGY AND ELECTROTHERAPEUTICS

The division of X-ray and electrotherapy work has been continued under the competent direction of Dr. George R. Hampton. Assisted only by a young woman whom he has trained in the giving of treatments under supervision, Doctor Hampton has accomplished a very large amount of work. The present quarters occupied by this division are not sufficiently spacious for the increased number of treatments which are being given and when the Clinic Building is remodeled next year more adequate rooms will be provided. Doctor Hampton has submitted the following condensed report of the activities in his division:

The X-ray and electrotherapeutic rooms have had a very active year. The number of X-rays taken was nearly three thousand, while nearly 3,200 electrotherapeutic treatments were given. The latter is almost twice the number given during the previous year.

As in former years the greater portion of the X-ray work consisted in the taking of dental films and plates. The routine examination of each patient's teeth immediately after admission has been continued. Next in order was the large number of head pictures taken. Whenever a patient's history gave mention of a previous head injury the skull was X-rayed to determine whether or not there was any pathology present which might have a bearing on the patient's mental condition. Chest pictures and barium meal series of the intestinal tract were frequently taken to clear up any suspicion of hidden areas of infection, while the usual number of films have been necessary for such accidents and injuries to patients and employees as are common in a large community of this sort.

The electrotherapeutic section has doubled its activity and an assistant has been necessary to keep up with the increasing demand for this type of treatment. The new high frequency machine which was installed about a year ago has been in daily service, while the new Alpine lamps have been in constant use from nine until 5 o'clock daily. Decidedly good results have been noted in patients who have received a systematic course of treatment with the ultra-violet rays; they have invariably increased in body weight. Pulmonary lesions have been greatly benefited and the general condition has shown gradual improvement. Diathermia has been regularly used in all suitable cases, especial attention being given to the treatment of abdominal adhesions, constipation and intestinal hypomotility.

ROENTGENOGRAPHY

Exposures:

Head	510
Maxilla	1,412
Chest	246
Abdomen	43
Abdomen (barium meal).....	119
Spine	9
Pelvis	6
Upper extremity	180
Lower extremity	104
Teeth (films)	370
Total exposures.....	2,989

Diagnoses:

Fractures—	
Skull	4
Nasal bone	5
Mandible	6
Alveolar process	1
Maxillary	1
Rib	9
Clavicle	1
Humerus	13
Radius	11
Ulna	1
Femur	10
Metacarpal	1
Pelvis	1
Tibia	3
Fibula	2
Os calcis	1

Osteomyelitis—	
Mandible	1
Ulnar	2
Radius	1
Phalange	1
Bone cyst	4
Foreign Bodies—	
Bullet in head.....	2
Bullet in chest.....	2
Needle in mandible.....	1
Pin in hand.....	1
Chest—	
Pu'monary tuberculosis (acute).....	70
Pulmonary tuberculosis (chronic).....	45
Bronchitis	6
Pleu isy with effusion.....	7
Aneurism	3
Cardiac hypertrophy	5
Abdomen—	
Appendicitis	13
Duodenal adhesions	5
Cholecystitis	7
Colonic hypomotility	5
Elongated colon	9
Pregnancy	4
Teeth—	
Impactions	177
Periapical abscess	108
Septic roots	117
Pyorrhea	114
Unerupted teeth	15
Miscellaneous—	
Sinusitis (maxillary)	8
Mastoiditis	6
Brain tumor	3
Hypertrophied turbinates	11
ELECTROTHERAPEUTIC AND X-RAY TREATMENTS	
Static head breeze.....	591
High frequency current (autocondensation).....	924
Galvanic and sinusoidal current.....	98
Static spark and sinusoidal current.....	63
Vacuum electrode and sinusoidal current.....	244
Ultra-violet ray and sinusoidal current.....	1,038
Diathermia and sinusoidal current.....	92
Infra-red ray and sinusoidal current.....	71
X-ray and sinusoidal current.....	38
Total treatments.....	3,169

OCCUPATIONAL THERAPY DIVISION

The work of the occupational therapy division has been continued this year under the direction of Dr. George B. McMurray, with Miss Rebecca A. Adams in charge of the section of curative workrooms. In addition to those patients who are employed under the supervision of the different instructors in this division a great many others are variously occupied in different parts of the hospital. Many who are not able to attend classes are able to carry out work on the wards, housekeeping and similar duties, under the direction of the nurses and attendants; others assist the matrons in the different cottages for employees; groups of men and women work in the laundry; the gardener and florist, the farmer and dairyman all have male patients assigned to them, and another group works in each kitchen. This year particularly large numbers have been engaged in grading and in putting in the foundations of buildings and additions constructed by the hospital. The various shops, especially the mattress shop, furnish employment to patients of the more quiet and orderly types. Doctor McMurray has submitted the following report for the year:

The occupational therapy division has during the past year, in its different sections, under very competent teachers and instructors, been an important factor in improving the mental and physical health of a great many patients. From time to time during the year small parties have been given under the supervision of this division and have tended to hold the interest of the patients and to stimulate them to better efforts. Exhibits have been given at the institution on Field Day, at the Morris County Fair, the Flemington Fair, the Sussex County Fair and at the State Fair in Trenton. A number of private exhibits have been held in Morristown and at the Madison Elks Club and the Madison Rotary Club and at the Dover Rotary and Kiwanis Clubs.

The new occupational therapy building is nearing completion. It is a large, light, roomy, well ventilated structure of the factory type, one story high, and will do away with the present shop conducted in the basement of the Dormitory Building, which cannot be properly lighted and ventilated. Many plans are already being made for improvements in the division which will be possible with the added space and facilities furnished by this up-to-date building.

The work of the occupational therapy division is conducted along two separate lines: the first and older section is that in which the patients are employed in shops distinct from the wards, such as those

located in the original Industrial Building and in the basement of the Dormitory Building; the second section is the curative work rooms on the wards or adjacent to them. In the first section there are four subdivisions: Men's Arts & Crafts, Women's Arts & Crafts, Printing and Bookbinding and the Cement Block industry. All of these groups are supervised by competent and intelligent teachers who are well trained in this line of work. The following is a resume of the work accomplished during the past year:

MEN'S ARTS AND CRAFTS

Willow:	
Chairs	80
Extension	14
Chaise longue	3
Settee	1
Bookcase	1
Tables	4
Fireside wood baskets.....	23
Ferneries	78
Dog and cat baskets.....	4
Hampers	75
Wash baskets	43
Lunch baskets	39
Scrap and market baskets.....	357
Cut flower trays.....	118
Total articles of willow.....	840
Reed:	
Flower and fancy baskets.....	941
Melon baskets	349
Sewing baskets	27
Bags	155
Vases	158
Toy bassinets and cradles.....	19
Ferneries (full size).....	11
Ferneries (half size).....	14
Wood baskets	10
Pedestals	2
Fern baskets (on stand).....	12
Horn of Plenty (large).....	2
Tea trays	5
Total articles of reed.....	1,705
Brooms:	
Regular	1,776
Hearth	427
Whisk	167
Total brooms made.....	2,370

Toys:	
Boats	130
Chairs	77
Tables	18
Beds	12
Wheel barrows	11
Wagons and carts.....	94
Miscellaneous	244
Total toys	586
Carpentry:	
Large bookcases, Clinic library.....	4
Inlaid serving trays.....	6
Inlaid nut bowls.....	12
Wall cabinets	31
Book troughs	20
Desk letter boxes.....	12
Folding trunk racks.....	12
Three fold screen.....	1
Maypoles (complete)	2
Medicine cabinet	1
Shirt waist box.....	1
Tip top tables.....	12
Book ends	18
Smoking stands and trays.....	17
Coat and hat trees.....	3
Total articles made.....	152
Miscellaneous:	
Broom handles salvaged.....	975
Chairs and settees recaned.....	383
Carpenter repair jobs.....	51
Iron beds and springs repaired.....	350
Clocks repaired	12
Victrolas repaired	49
Cues tipped	127
Total salvage and repair jobs.....	1,947
Scrub brushes made.....	879
Textiles:	
Loom rugs	1,029
Loom runners	4
Hooked rugs	26
Knotted rugs	11
Cocoa fibre mats.....	92
Grass fibre mats.....	2
Total textiles	1,164
Total articles made and repaired.....	9,643

In addition to the above about 95,000 lbs. of waste paper was collected and baled, and about 4 tons of rags. Five acres of willow were cultivated, peeled and stored.

WOMEN'S ARTS AND CRAFTS

Fancy Work:

Hooked rugs.....	41
Hooked chair seats.....	13
Braided rugs.....	96
Raffia baskets	17
Miscellaneous embroidered and fancy articles...	3,450

Total fancy articles..... 3,617

Crocheted lace and tatting (yards)..... 713

Plain Sewing:

Sheets (single)	6,885
Sheets (double)	1,285
Pillow cases	7,156
Towels (hand)	16,274
Towels (dish)	2,265
Towels (barber)	142
Towels (office)	271
Aprons	1,699
Table cloths	137
Bags (ward and laundry).....	1,140
Strainers (dairy and coffee).....	7,522
Night dresses and shirts.....	3,302
Drawers	1,872
Petticoats (gingham)	2,032
Petticoats (outing flannel).....	1,938
Operating gowns	55
Operating caps	24
Laboratory coats	6
Strong dresses	23
Dressing covers	192
Abdominal binders	48
Middy blouses, bloomers, streamers, etc.....	147
Large covering sheets (painters).....	2
Burial suits (four pieces).....	448
Mending jobs	185

Total plain sewing..... 55,050

PRINTING AND BOOKBINDING

Ruling impressions	862,330
Printing impressions	1,232,292
Total impressions	2,094,622
Binding and stitching jobs.....	14,507
Pads, etc., made up.....	3,072

CONCRETE BLOCK INDUSTRY

In this section of the occupational therapy division concrete blocks are made for use about the institution in building and construction work. Ashes and cinders from the boiler plant are utilized. The following blocks were constructed during the past year:

8" x 8" x 16"	27,647
4" x 8" x 16"	3,875

Total blocks

31,522

CURATIVE WORKROOMS

The section of curative workrooms has continued active this year, having as its head Miss Rebecca A. Adams, who by training, temperament and ability, is highly qualified for the position. This branch of the occupational therapy division was organized in 1923 to supply graded constructive activity for patients of the more deteriorated types long resident in the hospital and also to provide suitable classes for newly admitted patients. The work is carried out either on the wards or in nearby rooms and is of a varied and interesting character calculated to attract and stimulate the powers of attention and concentration. Miss Adams has submitted a tabulated report of the year's work which I have adapted as follows:

The employees in this section now consist of six trained occupational therapists and ten partially trained assistants. Seventeen classes are held daily, with a total enrolment of 17 in the smallest and 76 in the largest. Two new classes were opened during the year, one being for negro patients. A total of thirty-six parties have been given from time to time during the year to provide entertainment for the patients. Nine exhibitions and sales were held away from the institution and were not only successful financially, but were advantageous in stimulating wider outside interest in the work being done at the hospital.

The work covered during the year may be briefly summarized as follows:

Individual patients treated in curative workrooms.....	1,237
Articles built for use in hospital.....	10
Articles completed for sale.....	2,080
Articles made from waste material for use of patients.....	663
Articles built for use in occupational division.....	13

The following were among the gifts received during the year:

Two Victrolas; \$10., which was expended for Victrola records; 120 pounds of candy for the Christmas celebration; 6 pounds of angora

goat hair and 8 pounds of sheep wool for use in spinning homespun, and numerous boxes of silk, wool and cotton pieces for use in weaving and hooking rugs.

From January to March Miss Adams gave a twenty-hour course in the theory and practice of occupational therapy to a class of six students of the School of Nursing; an examination was held at the completion of the course. Doctor McMurray held a series of four lectures for the employees of the occupational therapy division upon the subject of keeping accurate individual records. The purpose was to give the instructors a better understanding of mental symptoms so that they might be enabled to make more intelligent observations and notes upon the condition and progress of patients under treatment in occupational classes.

During the year Miss Adams attended the following meetings:

Annual meeting of the American Occupational Therapy Association; annual meeting of the Directors of Occupational Therapy in New York State Hospitals; annual meeting of the New Jersey Hospital Association; April meeting of the Massachusetts Occupational Therapy Association. She also visited eight hospitals in Pennsylvania, Massachusetts and New York for the purpose of studying occupational therapy. On June 22nd a meeting was held at this hospital for the purpose of organizing a New Jersey occupational therapy association. Eighty people attended the meeting and fifty-six enrolled as members. Miss Adams was chosen as the first Secretary of the new unit. The invitation of the New Jersey Hospital Association to hold its annual meeting in conjunction with that organization was accepted.

Outside of their regular duties at this institution the members of the curative workrooms staff gave their services one evening each week during April and May to teach handicrafts to younger children at the Morris County Children's Home. The children showed great interest in the work and it is planned to resume classes in September.

DIVISION OF PHYSICAL EDUCATION

In the division of physical education the work has been continued throughout the year under the supervision of Miss Edith S. Moodie, who was made director in 1923 and has been in charge since that time. Within the four years the division has expanded from an experimental beginning with one instructor to its present stage where work is carried on with patients from all the residence buildings of the institution and the staff of instructors has reached a total of ten. From the very first I have instructed Miss Moodie to devote the major energies of her division to those patients who are regarded as the least promising material

for improvement—the deteriorated and indifferent or violent and destructive who are not sufficiently cooperative to be sent to the Industrial Building or to other outside work and consequently tend to remain on wards except for their daily periods in the exercise yards. Certain classes, however, have been organized for newly admitted patients in order to widen the list of interest offered to this group, toward the improvement of which all the facilities of the hospital are directed. The division of physical education has centered most of its work upon the women patients, since the men have more opportunities for beneficial exercise in the wider list of out-of-door employments open to them.

The enrollment for the past year shows instruction given to 1,150 women patients and 201 men, or a total of 1,351 patients. Of the women 979 were enrolled in classes while 171 participated in ward recreation only; many of these latter were infirm cases. Classes in singing for men patients, an innovation of this year, make up the greater part of their enrollment, although a few classes in gymnastics are also given for men.

The following table shows the aggregate attendance at all activities of physical education during the year, classified according to buildings:

Building	Classes	Ward Games	Parties	Singing	Stories	Total
Main	95,856	41,525	5,881	100,735	94,981	338,978
Clinic	10,473	7,818	960	15,843	10,285	45,379
Dormitory	19,862	27,550	1,772	47,462	45,431	142,077
Total	126,191	76,893	8,613	164,040	150,697	526,434

A new experiment was made this year of having the patients present pantomimes and pageants. Three were given—the story of Bluebeard, at Hallowe'en; a pageant of the Nativity, at Christmas, and a pageant of the Resurrection, at Easter. The two latter were repeated for the benefit of patients not able to attend the first presentation. The religious pageants were performed with a spirit of reverence and decorum and all were greatly enjoyed by both actors and audience.

The changes in the teaching staff of this division have always been frequent as many young instructors, while they realize the value of the experience offered in a mental hospital and are willing to devote some months to acquiring it, find the work too trying for them to consider remaining in the service permanently. During the year three senior instructors and five junior instructors resigned and one senior and seven junior instructors were employed; two juniors passed the examinations and were promoted to senior grade. Five of the ten members of the staff in service on June 30th, including the director,

were on the staff for the entire year. The new senior instructor, employed, Miss Beatrice Ford, had had previous experience in physiotherapy in institutions for mental diseases and showed herself capable that when a vacancy occurred she was promoted to the position of first assistant to the director. The general health of the instructors has been good during the year and although minor accidents while on duty are of fairly frequent occurrence, as might be expected from the type of patients under treatment by this division, there have been none of a character at all serious.

The wise policy adopted somewhat over a year ago of creating a rank of senior instructors has greatly strengthened the efficiency of the division. The personnel at the end of the year is the strongest and most experienced since the institution of the work. Miss Moodie attended two important conferences this year—the National Recreation Congress, at Atlantic City, and the Eastern District Conference of the American Physical Education Association, held at Washington, D. C.

During the year the division received from the amusement fund a portable Victrola, several hundred yards of cambric for making costumes, various song leaflets and books of music, 75 Victrola records, balls, reed and other minor equipment, as well as candy, cigarettes and presents and prizes for the different holidays and tournaments. Light refreshments for the parties and picnics were provided from the hospital supplies and were greatly appreciated by the patients. Various welcome gifts have been received, including a number of Victrola records.

SOCIAL SERVICE DIVISION

The greater the emphasis placed upon individual treatment of patients the more important becomes the position of the social service division in the organization of a mental hospital. The system of paroling patients outside the hospital on trial visit depends almost entirely upon the activity of this division and in most cases the feeling of the friends and relatives of a newly committed patient, as well as the sentiment of the community in general, are greatly influenced by the tact and interest shown by the social worker who is the personification of the institution to those with whom she comes in contact. In addition to a pleasing personality the successful worker must have quick intelligence, ability to reach an understanding of the truth through a mass of conflicting evidence and a sufficient knowledge of psychiatry and the psychology of human relationships so that she is

able to shift the salient facts from the irrelevant in obtaining histories and is competent to advise in matters concerning adjustments of the patient and his family when he is returned to his home.

From the time of its inception at this hospital the social service division has been under the direction of Miss Mildred H. Hurley and its increasing value to the hospital and the hospital district is largely due to her good judgment and executive ability. Miss Hurley has submitted the following report of the year's work:

Since the last annual report there have been three changes in the personnel of this division; one resignation and two appointments, increasing the staff to eight. This includes the director, four field workers, two mental hygiene clinic assistants and one historian.

During the past year 3,262 visits were made in the community in regard to the welfare of the patients outside on trial visit, as well as to obtain information in reference to those in the hospital, to secure medical and material aid or employment for 24 families and individuals and to conduct 42 special investigations for the following reasons; First, for further data to assist the physicians in making differential diagnoses; secondly, to plan for the removal of recovered patients from the hospital; thirdly, to procure information as to the justice or injustice of certain commitments; fourthly, to obtain all necessary information regarding the reasons for patients' return from trial visit, and fifthly, to locate friends and relatives at the request of patients in the hospital.

Visits to the homes of patients being considered for trial visit were made in 238 cases for the purpose of presenting the environmental factors to the physicians, as well as to assist the family in planning the patient's future. We believe that this method has increased cooperation between the relatives and the hospital and that the patients have been benefitted as a result. The social service division was instrumental in obtaining the trial visit of 27 recovered patients, referred by the medical staff, who were either friendless or whose relatives were reluctant or refused to take them out. Homes and employment had to be provided for 12 of this number before they could leave the hospital.

In regard to newly admitted cases, 511 medical and social histories were obtained from 801 individuals and efforts were made to locate friends and relatives of new patients who were sent to the hospital with a record of being without family. Interviews held in the office with friends and relatives of hospital and paroled patients numbered 547 and 398 visits were paid to individual patients on the wards. Fifty-eight psychometric examinations were made in the social

service office, 20 of which were upon ward patients, as all mentally defective patients are automatically referred to the division for psychological examination and consultation with the State Department regarding transfer to other institutions. Only one child born in the hospital was referred to the social service division this year, which arranged for his commitment and removal to the State Board of Children's Guardians.

During the year Miss Hurley was called upon to give six talks to extra-mural groups regarding psychiatric social service. She also extended the courtesies of the division and institution to many visiting social workers from the community and from other hospitals and institutions. The director and other members of the divisional staff have been encouraged to attend, whenever possible, conferences pertaining to social service, health and psychiatry. Among the more important of these at which one or more workers have been present may be mentioned the annual meeting of the American Association of Psychiatric Social Workers, the New Jersey State Conference of Social Workers and the annual meeting of the New Jersey Hospital Association.

The social service division has this year, as heretofore, received splendid cooperation from social agencies, public officials and individuals, for which it is profoundly grateful. In return it has endeavored to reciprocate whenever called upon and to the best of its ability.

MENTAL HYGIENE CLINICS

During the past year three mental hygiene clinics outside the institution have been in operation, located at Elizabeth, Hackensack and Paterson, respectively; they have each been held once in two weeks. In addition an informal clinic has been maintained at the institution for the convenience of the immediate district. This had not met on fixed dates, but examinations have been made by appointment. Although I have included a few figures from this intra-mural clinic in the report I feel that perhaps it is hardly fair to do so, since it is not advertised at all and consequently is almost unknown to the general public.

The clinic personnel has been taken from the hospital staff, which in itself, considering the limited number available, has been something of an achievement. Doctor Lane, the Clinical Director, has been in charge and has been assisted by a physician and normally by two social service workers. The medical follow-up of the clinic patients was greatly handicapped by the illness and resignation of one worker,

so that only one was available for the entire year, with a second worker for about four months. Nevertheless, 467 follow-up visits to the homes were made to advise in the carrying out of the recommendations made by the clinic physicians. The psychological tests have been made by the social service division, while the physicians have conducted the physical and psychiatric examinations.

As Doctor Lane noted in his report of the clinical work of the institution it has been impossible to increase the number of outside clinics under the existing conditions, although other communities are desirous of having them and we feel that the results show ample justification for extending this work throughout the hospital district. As the Legislature has very wisely decided to make a special appropriation for a clinic staff, which will become available beginning July 1, 1927, I have every hope and expectation that another year will see this highly important work established on a satisfactory basis.

Miss Hurley has submitted a detailed report showing the number attending the clinics, the sources from which they were drawn and the examinations made. It will be observed that all the clinics were run in excess of capacity, as it was necessary to turn away from each several persons who desired advice, but for whom time could not be found.

MENTAL HYGIENE CLINICS

	Eliza- beth	Hack- sack	Pater- son	Grey- stone Park	Total
Sources referring patients:					
Social agencies	99 ...	42 ...	20 ...	25 ...	186 ...
Newspapers	33 ...	19 ...	88 ...	0 ...	140 ...
Schools	11 ...	8 ...	9 ...	1 ...	29 ...
Physicians	11 ...	30 ...	22 ...	2 ...	65 ...
Department Institutions and Agencies	6 ...	0 ...	0 ...	3 ...	9 ...
Friends	7 ...	0 ...	2 ...	0 ...	9 ...
Other clinic patients.....	3 ...	3 ...	3 ...	0 ...	9 ...
Miscellaneous	0 ...	0 ...	0 ...	27 ...	27 ...
No. original patients.....	170 ...	102 ...	144 ...	58 ...	474 ...
No. return patients (visits)....	148 ...	134 ...	138 ...	0 ...	420 ...
No. parole patients (visits)....	12 ...	1 ...	10 ...	0 ...	23 ...
No. patients turned away.....	24 ...	13 ...	33 ...	0 ...	70 ...
Total patients' visits to clinics..	354 ...	250 ...	325 ...	58 ...	987 ...
Accompanying patients:					
Relatives and friends.....	199 ...	115 ...	198 ...	0 ...	512 ...
Representing social agencies..	117 ...	59 ...	31 ...	0 ...	207 ...
Physicians	0 ...	2 ...	5 ...	0 ...	7 ...

	Eliza- beth	Hacken- sack	Pater- son	Grey- stone Park	Total
Total persons accompanying patients to clinics.....	316	176	234	0	726
Visitors	10	2	2	0	14
Total visits to clinics.....	680	428	561	58	1727
Psychiatric examinations (first) ..	127	106	149	31	413
Psychiatric examinations (return) ..	129	108	130	0	367
Total	256	214	279	31	780
Psychological examinations (first) ..	91	19	18	27	155
Psychological examinations (return) ..	2	0	0	0	2
Total	93	19	18	27	157
Total examinations	349	233	297	58	937

*Miscellaneous refers to patients and employees given psychological tests at the institution.
 †An "original patient" is one coming to the clinic for the first time.

Another tabulation has been made showing the number of patients referred to other agencies and to institutions from the clinics:

Reference	No. of Patients
Brain clinic.....	5
Dental clinic.....	1
Eye, Ear, Nose and Throat clinic.....	6
General Medical clinic.....	3
Genito-Urinary clinic.....	12
Neurological Institute.....	9
New York Polyclinic Hospital.....	1
Oculist	6
Ophthalmologist	1
Otologist	1
Pathological laboratory.....	1
Physicians	20
Reconstruction Hospital.....	1
Surgical clinic.....	1
Speech clinic	1
Tuberculosis clinic.....	1
Venereal clinic.....	24
X-ray clinic.....	7
Total	101
State Hospital	14
Veterans' Hospital	2

Although it is impossible to evaluate work of this kind with accuracy, especially work that has been in progress for such a short time, I

wish to offer a few tentative figures for your considerations, realizing all the while that many other factors undoubtedly enter into the result and that some of these may be of such a nature as to change conditions radically, entirely apart from the services of the clinics. In three counties of the State (Bergen, Passaic and Union) extramural clinics were opened late in the fiscal year ending June 30, 1926. The tables showing the manner of support of patients on the hospital records reveal that the increase in the number of patients from these three counties compared with the increase in the hospital as a whole is as follows: 1925, 54/87; 1926, 69/117; 1927, 79/215. In other words, the year before the clinics were opened Bergen, Passaic and Union counties furnished 62 percent of the increase in hospital population; this year they furnished only 36 percent of the increase.

In the report of the intramural clinic held at the institution are included 20 patients and 7 employees sent in for psychological examinations. Subtracting this number from the total of 474 original patients there remain 447 who came to the clinics from the communities. Of this number it was necessary to have only 16 committed to mental hospitals—2 to the Veterans' Hospital and 14 to the State hospital. This means that 96½ percent of those who came to the clinics for advice were enabled to make adjustments outside. There is, of course, no way to estimate what proportion of those might have required hospitalization if they had not sought professional advice, but those in closest touch with the clinics feel that it might have amounted to a considerable number.

Although the per capita cost of maintenance for patients is now over \$8.00 a week, which amounts to more than \$400.00 for every patient in the hospital a year, that is by no means the only cost which must be taken into account in reviewing the economy of avoiding hospitalization. There must be considered also the loss to the community of the patient's earnings while he is confined to an institution; then, if he has young children, charitable organizations may have to come to the assistance of the family or the children be placed in a Home in order that the remaining parent may be free to work. In other words, there is an indirect loss to the community of the money which would have been earned and spent by the patient and in many instances also a direct burden for the continued support of his dependents. Finally, it must be remembered that in the past three years New Jersey has expended large sums collected from the public by direct tax for the purpose of construction and equipment at its various institutions, and still more is needed to provide adequate housing for the present institutional population. Further increase in the number committed to

institutions means that additional housing must again be provided. Consequently it is not only the per capita cost of maintenance which is saved when the admission rate is cut down, but it is the expense to the communities and the increased investment in plant and equipment as well.

WARD EMPLOYEES AND SCHOOL OF NURSING

Throughout the year Miss Catherine F. Wheeler, R. N., has been in charge of the training school for nurses and of the ward employees. She has had to contend with many problems because the inadequate housing both for nurses and attendants made it impossible to engage a sufficient force to care for the patients in a satisfactory manner. As a result of this insufficient personnel there have been numerous executive difficulties to be surmounted in the effort to place the employees where their services were most needed and at the same time leave no section of the hospital with a dangerously small force. Miss Wheeler has handled all matters pertaining to her division in a most commendable manner and has shown at all times not only a desire to uphold the best traditions of her profession, but also a keen comprehension of the special psychiatric and institutional angles of the work which is rarely found among nursing superintendents. Miss Wheeler has submitted the following report of the work in her division:

During the year the School of Nursing has gone on in a successful manner. Nine students were admitted. Twelve first and second year students attended lectures and received practical instruction in dietetics at St. Elizabeth's College, Convent, New Jersey. Instruction in massage was given by an outside teacher. The remainder of the class work was carried on by the nurse instructor, with lectures by the Clinical Director and other members of the hospital staff. During November, 1926, the school was inspected and approved by the New Jersey State Board of Examiners of Nurses. One student completed her course of training and was graduated in October, 1926. The outside affiliation in general hospital experience was carried on with Bellevue and Allied Hospitals, as in former years.

The turnover in the graduate staff continues high. A nurse instructor was appointed September 1st, to replace the one who resigned the previous February. Forty graduate nurses were appointed and 31 resigned. On June 30, we had throughout the various services covering day and night duty 11 supervising nurses, 14 charge nurses, 5 general duty nurses, 1 instructor and 1 assistant, making a total with the superintendant of nurses, of 34 graduate nurses engaged in the supervision and ward care of patients and in the School of Nursing. Two

other graduate nurses were employed, one in the division of occupational therapy and one as hydrotherapist, which gave a grand total of 36 in the institution. It is hoped that the new residence for nurses now under construction will help to increase the nursing staff.

In the hydrotherapy and treatment rooms on the same date we had 5 trained workers, assisted by 7 attendants experienced in this line of work. In the ward attendants' group there were at the end of the fiscal year 112 female attendants and 145 male attendants, or a total of 257 serving in the capacity of charge and general ward duty. Two wards in the new Reception Building having been taken over for temporary quarters for male and female attendants were under the supervision of two experienced attendants. Several attendants were employed in the division of occupational therapy and in other sections of the institution, so that the enrolment under this classification on June 30th, was 126 females and 161 males, making a total of 287.

STAFF MATTERS

The staff of resident physicians has changed only slightly during the past year. Two assistants resigned: one had been on our staff for three years and accepted a more lucrative position in a private institution; the other, having been with us about a year and half, decided to take up a slightly different specialty. Three appointments have been made and the staff is now filled to the arbitrary limit set by present housing accommodations, with twenty resident physicians.

Included in this number are the superintendent, the clinical director, the pathologist, the roentgenologist, the eye, ear, nose and throat specialist and the gynecologist. Of the remainder, in addition to ward duty, one of the senior men is in charge of the occupational therapy division and acts as executive officer in the absence of the superintendent, another is in charge of the surgical division and a third assists in the clinical. In other words, with twenty physicians on the staff six are engaged in executive or special work which precludes all ward duty, three give part of their time to a specialty and the balance to ward work and only eleven are engaged solely in the examination and ward care and treatment of patients. With practically 3,500 patients actually in the hospital this number is obviously much too small.

In view of the limited number on the staff I feel that the hospital medical work has been carried on in a very satisfactory manner this year. Staff meetings have been held five times weekly, four of these meetings being for the presentation and diagnosis of recently admitted patients and the fifth to consider the question of parole for those who

have been reported as greatly improved or for whom a trial visit has been requested by their families or friends. In addition to these meetings I have held each week on Monday a conference of all the divisions having to do with the care and treatment of patients, for the purpose of organizing the work and adjusting any apparent conflicts or overlapping of functions.

Doctor Lane, the clinical director, offered instruction in psychiatry by a series of lectures given during the winter and Doctor Hampton, the roentgenologist and electrotherapist, also gave talks on the functions and scope of electricity in diagnosis and treatment. Members of the staff belonging to the Morris County Medical Society have attended various meetings during the year and its annual meeting was held at this institution in September, as has been the custom for years. Doctor Collins, Doctor Christian, and Doctor Donovan and I attended the meeting of the New Jersey State Medical Association at Atlantic City in June. Doctor Gambill during the year was present at several meetings having to do his specialty. Doctor Lane and I attended the annual meeting of the Association for Research in Nervous and Mental Diseases, which was held in New York City early in January, and also the meeting of the American Psychiatric Association at Cincinnati in June. The staff has also been represented at various other meetings and conferences dealing with problems of psychiatry, hospital work, nursing, social service, occupational therapy and other kindred topics. Through reports from these gatherings, visits to other institutions and discussion of current medical literature every effort is made to stimulate interest and keep the entire staff in touch with present day developments.

There have been a few changes in our Board of Consultants this year. I regret to report the removal by death of Dr. James T. Wrightson, of Newark, who had been a consultant for many years and was always a staunch friend of the institution and deeply interested in its welfare. Four new consultants have been appointed during the year: Dr. William J. Arlitt, neurologist, Dr. H. Austin Cossitt, gastro-enterologist and Drs. George P. Pitkin and Joseph M. Rector, surgeons. I feel that all these are men whom any hospital might be glad to have among its consultants.

PHARMACEUTICAL DIVISION

During the past year there has been no change in the personnel of the hospital pharmacy. Mr. Phillip B. Roberts, Ph. G., has remained in charge, with Mr. Louis D. Bangert, Ph. G. as first assistant and Mr. F. Heiman, second assistant. The previous excellent work has been

continued. Closer cooperation with the physicians and nurses has resulted in a considerable saving in drugs and other supplies so that while there has been an increase over the previous year in the number of new and repeated prescriptions, galencals, and so on, the increase has not been as great as the growth of the institution.

Two classes of pupils nurses were given a course of instruction in drugs and solutions. The available space for laboratory work in the old drug room makes it necessary to divide the classes into small sections and repeat the work with each section. It is hoped that it will be possible when the new buildings are opened to arrange a more convenient room for this work.

For some time past this division has supervised all supplies purchased from the medical and surgical account. This year it also assisted the furnishing committee of the Board of Managers in checking and installation of equipment in the new Reception Building and Employees' Cafeteria. The uncrating, placing and setting up were done with patient labor.

PHOTOGRAPHY

The work in the photographic division has shown a decided increase during the past year. As routine procedure two views, full face and profile, are taken of each patient on admission and suitably mounted prints are filed in the case records for identification purposes. When it seems advisable photographs are also made before a trial visit. Patients accepted for deportation are photographed according to Federal specifications. In addition to the portrait work pictures are made of different events of hospital interest, such as Field Day, and also of building and construction work to supply a permanent record of progress and methods. Mr. Frederick C. Wainwright has been in charge of the hospital studio this year, as for many years past, and has also selected and transported and shown the films for the motion pictures entertainments given every two weeks during the winter season. He has submitted the following summary of the year's work, which is evidence of a very creditable amount accomplished:

No. newly admitted patients photographed.....	810
No. patients photographed for trial visit or deportation.....	176
No. photographs of Field Day, construction work, etc.....	275
<hr/>	
Total photographs made during year.....	1,261
No. moving picture shows given during season.....	22
No. reels of film shown.....	230

GREENHOUSE, GROUNDS AND GRADING

In this division are included many different activities, all important to the appearance of the grounds and living quarters and the enjoyment, comfort and health of the patients and employees of the institution. This year, as for some years past, Mr. Otto Koch has been in charge of all this work and has obtained very satisfactory results with a comparatively small expenditure of money. He has submitted to me a detailed report which I have summarized as follows:

At the greenhouse twenty patients have been constantly employed growing cut flowers and potted plants for the wards, propagating stock for flower beds to make the grounds attractive and keeping the buildings and equipment in good condition. A list of the plants and cut flowers grown will be found in the statistical appendix. The entire greenhouse has been painted twice during the year, inside and out, and two thousand and feet of new benches have been constructed and put in place. A storage shed, thirty by forty feet in dimensions, was built with concrete blocks made by patients in the occupational therapy division.

During the winter three large trees were moved as it was necessary to clear the space to be occupied by the new home for nurses and although these particular trees were not of a size and type favorable to transplanting it seemed wiser to make an attempt to save them rather than to cut them. It will be impossible to say for another year whether or not they will survive, but all are showing indications of life at the present time. In the spring a number of young evergreens were moved with success. A new nursery for young spruces was established near the greenhouse and about two thousand seedlings and small evergreens were transplanted from the area near the Dover road where they were poorly located both for growth and for preservation from passing motorists. In November six acres of willows were harvested and stored.

Numerous patients are constantly employed on the grounds, clearing up rubbish, keeping the gutters and catch basins clear, caring for the flower beds and mowing the lawns in summer, shoveling snow in winter and maintaining everything in a tidy and attractive form. This work covered the area from the lawns around the Dormitory Building, the golf course and athletic field to the cottages and recreation grounds at the entrance to the hospital property on the center drive. Well-kept and ample lawns are not only desirable for the pleasant impression which they make upon visitors, but also for their soothing and restful effect upon the patients, whether looking out from the windows or

strolling, sitting or engaging in picnics and games in the shade of the fine old trees.

The roads on the hospital property, unfortunately, are none of them of a permanent character and require frequent resurfacing. During the past year the road leading to the cow barns has been rebuilt, using 647 cubic yards of stone from the hospital crusher. Other roads have been repaired from time to time, for which about 1,200 yards of stone have been utilized. The Fordson tractor purchased last season for use in this division has been in constant service, having been used on the grading, for plowing snow from the roads in winter and mowing the lawns in summer; in this latter duty it has accomplished the work of twenty-five hand mowers and has saved several hundred dollars on the purchase of lawn mowers alone.

Grading has been carried on to an extensive degree throughout the year as far as the weather permitted. About 100 cubic yards of soil were used in grading around the north annex to the Dormitory Building, but the greater part of the grading has been done in the vicinity of the new group—the Clinic, Cafeteria and Reception Buildings to the north of the center drive and the area directly across the drive where the Employees' Building is now being erected. About 3,000 yards of soil were handled between July 1st. and November 5th. by hand labor. From November 5th. until June 30th., one or two steam shovels have been employed whenever the ground was in suitable condition and 19,107 yards of soil have been dug out and distributed. Both horses and automobile trucks have been utilized and patient labor was employed, as many 85 men having been kept busy. Top soil to the amount of 2,740 yards was removed from the area to be graded up for the Employees' Building and used for finishing the surface around the Cafeteria and Reception Buildings, while heavy sub-soil has been hauled across the drive in order to build up the naturally sloping site before laying the foundations for the Employees' Building. This work has been done under Mr. Koch's direct supervision, according to plans and specifications drawn up by Mr. Brindley, landscape architect, and grade stakes set by Inspector Robert Sturgis.

CLERICAL DIVISION

The clerical and stenographic personnel of the medical department now numbers twenty-two, an increase of one over last year. Mr. James E. Lauenstein, as principal clerk, has apportioned the work and arranged it so that there has been no interference with the smooth functioning of the division during the brief absences due to sickness or

other cause. Only one illness occurred during the year of sufficient duration to require sick leave and the temporary employment of a substitute.

Three members of the force are non-stenographic, but combine typing with clerical work in the compilation of statistics, the making up of reports and the writing of index cards. They have completed this year, in addition to routine duties, a comprehensive cross index with a total of approximately 50,000 cards. This index is well worth the labor involved, since it affords ready-at-hand material for obtaining statistics of practically any nature regarding the patient population of the institution.

The nineteen stenographers are assigned to the various medical staff units and allied activities, where they record and transcribe the examinations made by the physicians, the different case and progress notes and the reports of the laboratory, the social service division, the occupational therapy division, and so on. A heavy correspondence is also handled, as well as numerous secretarial duties for the divisional executives.

From even this brief summary it is evident that an accurate and competent clerical division is essential to the work of the medical department for maintaining contact between the different divisions, keeping permanent records, tabulating statistics so that information about the patients is readily available and for facilitating communication with those interested in the patients and the hospital.

RECREATION: AMUSEMENTS, SPORTS, MUSIC AND ENTERTAINMENTS

Since practically all abnormal conduct is based upon abnormal thinking, systematized diversion is a valuable therapeutic agent in a mental hospital. Whatever turns a patient's thoughts from their fixed channels into more wholesome lines helps toward normal adjustment. Games which promote self-confidence and self-reliance are particularly valuable. Doctor McMurray has been in general charge of the division of recreation and amusements this year and has endeavored so far as possible to fit the activity to the patient in order that the greatest benefit might be obtained.

During the summer months baseball was particularly interesting to the male patients. About three games a week were played on the average between teams representing the Main, Clinic and Dormitory Buildings, and a fourth team made up of ex-service men from the "Soldiers' Ward." These contests proved stimulating not only to the players, but also to a large group of baseball fans. Among other outdoor games which were greatly enjoyed was golf, some of the patients being excellent players, while others found amusement in caddying.

Croquet has been popular with the women patients and grounds have been equipped near the Industrial Building and on the south side of the Main Building.

Field sports proved of great benefit to the patients who took part in the different activities. Over three hundred patients entered in the Field Day competitions on October 9th. after having been carefully trained for weeks under a competent coach. Field Day, as usual was a gala occasion, not only for the participants but for the many patients who as spectators filled the grandstand and many sections of reserved seats near the running track. Hundreds of visitors from the outside were present, which gave the athletic performers the pleasure of acting before a large and enthusiastic audience. In order that none of the contestants might feel a sense of failure, each one who took part received a prize, irrespective of his place in the final results.

As usual, many walking parties have enjoyed the extensive grounds around the institution throughout the year, sometimes going merely for the pleasure of exercise, fresh air and change of scene and other times held by different groups of patients, usually under the auspices of the occupational therapy or physical education divisions.

During the fall and winter months motion picture entertainments were given on every other Friday evening and on special holidays in the amusement hall of the Dormitory Building. In order to permit larger attendance dancing between pictures was given up and the entire space filled with chairs. The films have been selected with care to avoid tragic and depressing scenes and a news reel is always included to provide a means of contact with events of the outside world. A dance for patients has been held each Monday afternoon, except during the heat of summer. It has been found that these dances are more generally satisfactory in the afternoon than in the evening, as they are easily arranged and is no interference with the patients' hours of sleep.

The bowling alleys during the past year have been repaired and improved; four new sets of pins have been purchased, as well as a number of bowling balls. So many patients have enjoyed this sport that it was necessary to maintain a regular schedule and bowling tournaments with prizes aroused much enthusiasm. The billard and pool tables on the men's wards have also provided considerable entertainment during the winter months.

During the past year we have added to the hospital musical equipment eight new Victrolas and many records. Four new radio sets have been installed, which with the number previously in service make it

possible for a great many patients to enjoy concert programs, as well as listen-in to the important sporting events and news reports. A fine Steinway concert piano has been secured for the larger amusement hall. A spot light, with rheostat and color wheel as an attachment to the motion picture machine, was obtained in February for use in this same hall. The pipe organ in the chapel has been repaired and tuned and a number of hymn books, as well as a new Bible for the pulpit were purchased.

Friends of the institution have provided numerous concert entertainments during the year. Among these may be mentioned the following; An afternoon concert by Mrs. Ray Dennis, accompanied by Mr. Rocke at the piano, was immensely enjoyed; a very fine concert by Mrs. Otis Post, violinist, Mrs. A. H. McAlpin, pianist, Miss Ariazie Hagopian, soloist, and Mr. Barkolow, pianist, proved a treat for a large audience; the band of the Morristown Elks' Club gave an excellent evening concert; the American Legion, of Morristown, presented a fine minstrel show for the patients; an orchestra composed of boys and girls from the Batten High School, Elizabeth, gave an enjoyable concert; Mr. Guy Hunter, vocalist, sang for the patients; the Kiwanis Club, of Maplewood and South Orange, brought a group of entertainers to the hospital on two occasions during the year and both entertainments were enthusiastically received by the patients; Argonne Post 360, of Elizabeth, put on a vaudeville show for the benefit of the soldiers and all other patients; and the Volunteer Bible Class, of the First Baptist Church of Plainfield, gave a very excellent concert for the ex-service men.

As usual, a great deal of interest was felt in the Christmas celebration. Through the generous gifts and money received from friends of the hospital it was possible to provide worthwhile gifts for every patient and to supply candy, fruit, tobacco and other good things, as well as decorations for the wards and the Christmas trees. At the large gathering on Christmas Eve in the amusement hall around a huge and brilliantly lighted tree, Christmas carols were sung under the direction of instructors from the division of physical education, after which the superintendent as Santa Claus gave a little talk on the spirit of Christmas and then directed the distribution of gifts. All packages were wrapped, tagged with the individual names and arranged so that the huge baskets of presents were distributed among the hundreds of patients with no confusion or delay. The next morning special messengers went through the wards and gave out gifts to all who were not well enough to attend the exercises at the tree. An excellent Christmas dinner was provided and in the evening a motion picture entertainment

was given. All of this was accomplished only by extra work on the part of officers and employees, but the pleasure and gratitude of the patients proved ample reward.

LIBRARY DIVISION

The work of supplying the patients with reading matter has become so extensive that I am this year giving a separate section to reporting its activities. As for several years past Miss Rebecca A. Adams, director of curative workrooms, has devoted considerable time to library work and has assisted in planing schedules and systematizing records. On September 1st. a full time paid worker, Miss Susan Beers, was assigned to this division, which made it possible to extend its usefulness much more widely.

The library in the Main Building has been open daily, except Sundays. The book cart has made weekly trips through the wards, both mens' and womens', and patients from wards not visited have been brought to the library one day each week to select reading matter. The circulation of books and magazines has been as follows:

Fiction	4,042
Non-fiction, including magazines.....	4,944
Books in foreign languages.....	335
Total	9,321

A library desk and fourteen Werneke bookcase sections have added to the equipment. An accession book was purchased and 2,300 volumes have been entered and assigned numbers. The collection has been thoroughly gone over and wornout and undesirable volumes have been discarded while duplicate copies have been sent to the Dormitory Building. Two library receptions were held with a combined attendance of about four hundred patients.

At the Clinic Building the Flora Roberts Coffin Library has shown the following circulation:

Fiction	2,165
Non-fiction, including magazines.....	1,602
Books in foreign languages.....	121
Total	3,888

Four new bookcases, made in the occupational therapy division, were installed and 588 volumes brought up from the basement and placed on the shelves. The whole collection was gone over thoroughly and an inventory taken.

Visits have been made on an average of twice a month to the Dormitory Building and tuberculous annexes, at which times numbers of books have been placed on the shelves installed there and large quantities of magazines distributed on the wards. Book shelves and other material have been transferred to the workroom in the basement of the Reception Building in preparation for book repairing to be done there.

During the year the library division has purchased twenty-nine books in Yiddish, an encyclopedia in ten volumes, twenty-six non-fiction books on various subjects and nineteen books of fiction. These have all been catalogued and placed on the shelves. Approximately 338 books and 6,784 magazines have been donated by churches, organizations and individuals during the year. Both the Morristown Public Library and the Morris County Free Library have given most cordial cooperation in the way of advice and in supplementing our collection by lending books on special subjects which have been requested by patients. Two patients as librarians have labored faithfully in administering the two collections, while three or four others have assisted regularly in the distribution of books on the wards.

RELIGIOUS SERVICES

It has never seemed necessary to establish a resident chaplain at this institution, but religious services are held according to regular schedule. The Roman Catholic priest of Morris Plains is always on call to comfort and administer rites to the sick and dying, and Mass is held weekly in the hospital chapel. In January of this year it became possible to change the service from Tuesday to Sunday morning and since that time many employees have found attendance here more convenient. Protestant services are held in chapel on Sunday afternoons and clergymen from Morristown and Morris Plains officiate. Methodist, Baptist, Presbyterian and Episcopalian denominations serve in rotation, in order that as many as possible of the patients may feel that they are still connected with their own church. A rabbi from Morristown comes to the hospital each Saturday to provide public worship for the Jewish patients. Every effort is made to cooperate with the leaders of the different faiths in providing proper observance for days of special significance.

WAR RISK PATIENTS

A separate tabulation has been made of the ex-service patients cared for in the institution in order to show the number and the changes in this interesting group:

On records July 1, 1926.....	139
Admitted during year.....	41
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Total under treatment during year.....	180
Discharged during year:	
Recovered	5
Improved	7
Transferred	5
Died	2
<hr/>	
Total discharged during year.....	19
<hr/>	
Remaining on records June 30, 1927.....	161
Status of patients on records:	
Claims allowed	109
Claims pending	18
Claims disallowed	34
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Total	161
On June 30th. there was the following distribution of these patients:	
Resident in institution.....	143
Outside, on visit.....	15
Outside, escaped	3
<hr/>	
Total	161

After having had an opportunity to hear this year, at the annual meeting of the American Psychiatric Association, a detailed account of the methods in Federal hospitals I feel more strongly than ever that the ex-service patients should not be maintained in State institutions. In the government hospitals the ratio of nurses and physicians to patients is much higher than is possible in a State institution and the per capita cost is greatly in excess of that allowed the State hospitals under contract to care for the same type patients. I feel that if some ex-service men are entitled to treatment in Federal hospitals all are so entitled and a government hospital should be constructed in New Jersey to care for her disabled veterans who are now scattered through a number of institutions. With the comparatively small number in any one institution under the present system the ex-service patients cannot be classed according to their mental status and according to the fact that they are veterans. In other words, either a special ward or wards must

be set apart for this group and all maintained there, irrespective of their condition, or else they must be scattered through the institution with other patients of similar mental classification, in which case there can be no distinction made between them and the rank and file. Where a hospital is devoted solely to veterans this difficulty does not exist.

In this institution we have provided every comfort which our facilities have permitted, so many in fact that other patients and their friends have occasionally felt that they were being unfairly treated in comparison with this special group. On the other hand, we are not able to make the careful classifications, either on the wards or in the sports and occupations, which would be possible in Federal hospital. Again I state that this problem cannot, I believe, be settled with justice to all until a Federal government hospital is constructed in New Jersey.

FIRE PROTECTION AND FIRES

The work of fire prevention and the equipment for fire fighting has been maintained this year at a high standard of efficiency under the direction of Mr. William H. Matthews, chief of the local fire company. All of the apparatus and the fire alarm system have been regularly tested and fire drills frequently held. The present apparatus is of excellent type and with a sufficient water supply should prove adequate to any demands. Certain improvements in the fire alarm system are advisable, which will be found discussed in the section of Recommendations.

There have been occasional minor fires during the year which were extinguished promptly. One of a more serious character occurred on the afternoon of May 14th., at the Dormitory Building. As the fire originated apparently in the empty attic space just below the roof it had gained considerable headway before it was observed. The patients were removed from the wards and the fire fighting apparatus was used effectively. The fire wall, constructed three years ago in this attic, was of great value in this emergency and probably saved the building. The damage to the roof was rather extensive, but beyond that little harm was done. Repairs were promptly made by our own force.

WATER SUPPLY

During the year constant attention has been given to the matter of water supply. The high pressure reservoir known as the "Klor-dike" was thoroughly cleaned and given temporary repairs and the filter cleaned. The water treatment plant was also gone over and new machinery for automatically chlorinating the water was installed. With

\$20,000 appropriated for the purpose test wells were made in the vicinity of the hospital to determine, if possible, an available source for additional water supply. Finally, a tract of land, consisting of approximately nine acres located slightly over one mile distant from the Main Building, was purchased after trial drilling had shown the presence of a large vein of water-bearing gravel, about thirty feet in depth, which promised a flow of about one million gallons per day from two wells. This water under chemical tests has been found to be free from contamination and of an excellent soft quality.

An appropriation of \$100,000 has been made for bringing this water to the institution and will become available July 1st. It will be used as a reserve supply and should be amply sufficient for all contingencies, such as fire or drought. The hospital officers will feel a great relief when a large and permanent water supply is an accomplished fact. Several times within recent years it has been necessary, because of a decrease in rainfall, to close the continuous baths and reduce the amount of water used in all divisions, and at such times we have known that in case of fire on the upper floors of the higher buildings the pressure would be perilously low. Our average daily consumption of water during February of this year which showed the largest total, owing to the demands of the heating plants, was 1,002,000 gallons. We feel that a reserve of 500,000 gallons a day, in addition to our present supply, would be a safe margin, so if the new wells can provide twice that amount we should be fully protected.

NEW BUILDING AND IMPROVEMENTS

In new buildings and improvements this year a creditable amount of work has been completed and a great deal more has been planned and is now in progress. The remodeling of the main kitchen, which was under way at the beginning of the year, has been completed and the rooms put in use; a decided improvement in the sanitary conditions of food preparation and in comfort and satisfaction of the kitchen employees has resulted. The kitchen of the new treatment group has been completed and equipped and meals for the Clinic patients are now being prepared there instead of in the former temporary kitchen in the basement of that building. The Employees' Cafeteria has likewise been completed and furnished; the first meal served in it was the luncheon for the members of the State Freeholders Association which was held at the hospital on June 13th. A few days later the serving of meals to employees was begun; 125 now are eating there and accommodations are sufficient to care for 200. Meals are

prepared in the new kitchen; the cafeteria system of service is used and results have been very satisfactory. The Reception Building was practically completed and furnished during the fall and early winter, but certain delays were encountered in obtaining and having installed the window guards. Two wards were temporarily taken over for employees' quarters, pending the completion of additional housing for attendants. The window guards have now been put in place and the building will be opened for patients some time in July.

An appropriation of \$11,500.00 for a new dairy barn was expended in remodeling sheds into model dairy barns. A detailed account of this work will be found in the report of the dairy. An appropriation of \$7,000.00 for garages (materials only) was used in the construction of a ten-car garage at the rear of the staff house, a two-car garage attached to the superintendent's house and a one-car garage attached to the clinical director's house. All are of fireproof construction and have been supplied with heat, electricity and hot and cold water. Their use has relieved the congestion of automobiles in the main garage and has proved a great convenience to members of the staff, since most of the men use their own cars in driving to the various buildings where they are on duty.

Construction has been started during the year on four new buildings which are not yet completed. An addition to the firehouse to provide quarters for fifty men employees engaged in outside work (i. e., not on the wards) has been built under contract of concrete block and stucco construction and is now practically ready to be put into service, lacking only the hardware for completion. It will provide comfortable and sanitary rooms for men who have hitherto been housed in highly unsatisfactory make-shift quarters never intended for other than storage purposes. A home for nurses to house sixty has been started and the outside construction is now well along. This building is connected with the two nurses' homes opened in 1922 and completes the fourth side of a quadrangle enclosed by these buildings and the nurses' dining hall. It is of similar material and design with the rest of the group (combination red brick and stucco), two stories in height, with roof of variegated slate. An occupational therapy building, for which \$75,000.00 was appropriated, has nearly been completed during the year. It is constructed of red brick and is of a factory type with very extensive window space, one story in height, with a "saw tooth" roof. It is located at the rear of the Main Building near the old Industrial Building, where it will be most accessible to the majority of the patients. I feel that this building is destined to be a highly important factor in the welfare of our patients, since it will make

possible the carrying out of occupational therapy under conditions approximately ideal. The latest construction which has been started is upon the Employees' Building, planned to house 250 ward employees—male and female. It is located directly across the center drive from the Reception Building and will provide living quarters for those employees working in the new group. As yet only the foundations are laid.

In addition to the many details involved in the final location and the instituting and carrying on of construction work on all these buildings time has been found to consider specific plans for the use of funds which will become available after July 1st. Those which will be given early attention including reconstruction of the Clinic Building to make it suitable for a treatment hospital; a house for the business manager, and a two-family house for physicians. Beside the major construction work of the year many improvements and repairs have been made by the hospital mechanics, under the direction of the engineering division. These will be found enumerated with more or less detail in the report of the engineer-in-charge.

BUSINESS DEPARTMENT

On the first day of the fiscal year Mr. George J. Hamberger took up the duties of warden, or business manager as is now the official title, succeeding Mr. O. M. Bowen, who resigned to become superintendent of the Ward Home, a private institution. Mr. Hamberger has been active throughout the year, becoming acquainted with his manifold duties which cover the farm, livestock, gardens, laundry, kitchens, stores and supplies, motor transportation, business office and plant upkeep. He is conscientious, sincerely interested in his work and loyal to the institution. After consultation with me he has instituted a number of changes, which under his supervision have shown an economy to the State. These have been especially marked in the dairy, the bakery and in reduction of kitchen waste.

There have been no important changes in the heads of divisions in this department during the year. Mr. E. I. Coursen has continued as assistant to the business manager, having general supervision of the outside work, and Mr. A. J. Van Winkle, as chief clerk and treasurer, has been in charge of the business office and records. It is impossible to go into detail as to the many satisfactory results achieved in the business department during the year, so I shall endeavor merely to summarize the accomplishments in the various divisions.

ENGINEERING DIVISION

Nearly two years ago the position of engineer-in-charge was created and filled by the appointment of Mr. Henry Landesman, C. E. The duties of this position comprise the supervision and keeping of records at the power plant and through cooperation with the business manager, the direction of the hospital mechanics. In addition the engineer-in-charge has studied all plans and specifications of prospective buildings, worked out practical methods of linking up the different connections with the supply plants of the institution, inspected construction work in progress and carried out with the hospital mechanics any final touches not covered by contract yet required to make a new building ready for occupancy. Obviously the amount of detail included in duties of such general scope prohibit more than cursory survey in this report, so I shall confine myself to an enumeration of the more important pieces of work accomplished.

Each of the shops, such as the carpenter, machine, paint, blacksmith, electrical, and so on, has its own foreman. Orders for repairs or new work are placed through Mr. Landesman's office and details are settled after a personal inspection by the foreman or by the foreman and Mr. Landesman jointly. If the purchase of new material is required Mr. Landesman places the order through the business office; otherwise the method of attack is quickly decided and the work carried out as expeditiously as possible. Mr. Landesman has submitted to me a comprehensive report which I have condensed as follows:

During the year approximately 376 new work orders and 9,650 general repairs have been executed. A careful record has been kept of the time required and the material used. Three fireproof garages have been constructed entirely by the hospital force—a ten-car garage of cinder blocks with brick chimney and trim, located behind the staff house, and a two-car and one one-car garage connected with the cottage of the superintendent and the clinical director, respectively, and built of cinder block and brick with facing. The two small garages were successfully incorporated with the house architecture in each case, plans having been drawn up by the State Division of Architecture and the materials selected and carefully matched to the original buildings.

Twelve new hog colony houses of scientific model have been constructed and a new poultry house, 200' x 20', built according to plans approved by the State Department of Agriculture; has been about 40 percent completed. In connection with the two dairy barns constructed this year the hospital mechanics put in the floors, litter and feed

carriers, sashes, doors and other equipment. Additional horse stables and isolation stalls for sick horses were constructed adjacent to the barns in a portion of a shed for storing farm implements.

A vault for patients valuables was constructed in the basement of the Main Building with cinder blocks furnished by the occupational therapy division. An inclosed corridor was built between the Main Building, South, and the entrance to the congregate dining hall, in order that the women patients going to and fro might be protected in inclement weather. It was necessary during the year to completely reconstruct the bakery; concrete floors were laid, new plumbing installed and dust-proof partitions erected. This and all other work, except the construction of a new chimney and the actual repair of the ovens, was done by the hospital mechanics. The incinerator was torn apart and reconstructed, the furnace relined and the garbage receiving room remodeled, including fireproof walls and ceiling. The cold storage rooms were cleaned, repaired and repainted.

A new electric cable to the attendants' cottage, south, was put in. New hot water generators were installed at the attendants' cottages, both north and south. At the laundry a new panel board with control mechanism was installed and a flat ironer and a washer set up and connected for use. New machinery has been installed in the carpenter shop machine shop and blacksmith shop. The building formerly used as a pavilion for the tuberculous was put in condition for occupancy by working patients, the walls repaired, woodwork painted, new gutters and leaders installed and porches remodeled. Roofs and exposed metal have been painted where necessary about the various buildings; 80 percent of the interior of the Dormitory Building has been painted, as well as the entire attendants' cottage, north, the carpenter shop and several apartments. A number of repairs have been made on the roof of the Clinic Building and 1,350 square feet of the Dormitory Building roof were replaced. The sheet-metal workers have made and erected 57 dormers on the Main Building; 14 more are ready to install, and 112 in process of manufacture.

Revisions and additions to the heating system were made in the four "sections" wards of the Main Building—1/4A and B, north and south; also on the second floor of the attendants' cottage, south, and in the supervisors' office, Main Building, south. A barber shop under 1/2 north, Main Building, was equipped with sink, showers, toilet, and so on. Two tubs were installed at the Clinic Building. A sanitary toilet was put in place at the concrete block making building and toilets and drinking fountains were installed in the exercise yards of the Dormitory Building. At the greenhouse old pipe lines were torn out and

new piping and fixtures installed. In connection with contract work at the sewage plant a trench was dug and a new water line, hydrant and other piping installed by the hospital mechanics and a house erected over the screen chamber.

The power plant is under the immediate charge of Mr. Richard Rogers practical engineer, who lives at the institution and is always available for emergency calls day or night. The plant is now equipped with up-to-date gages and recorders and an accurate record is kept of all facts regarding operation. The following are a few of the facts selected at random from the complete reports: The average daily consumption of water was low for the month of September, with 712,466 gallons, and high in February, with 1,002,000 gallons; the average consumption of ice in the institution was low in January, with an average of 29.7 cakes, and high in July, with 68.3 cakes. The amount of coal used was low in June, with a daily average of 31.51 tons, and high in December, with 118.61 tons; at that time, however, the coal obtained was of inferior grade with 37.4 percent ash, and the amount used dropped to a daily average of 83.10 tons in February with an improved quality showing only 27.6 percent ash.

Mr. Landesman in his report has made a number of recommendations; some of these have already been taken care of in the final appropriations made this year; others will be included in the budget and some I shall take up later in the general list of Recommendations.

LAUNDRY

Mr. Daniel W. Leyhan has continued throughout the year as supervisor of the laundry. The work is done by a combination of patients and employees of both sexes. During the year 4,883,723 pieces were laundered, a slight increase over the previous record. New machinery has been purchased with an appropriation for the purpose and has been partly installed. Plans are being drawn up for an addition to the building, to be used as an officers' laundry and the remainder of the machinery cannot be put in place until the modeling contingent upon this is completed. Work will be pushed forward on this as rapidly as possible.

GARAGE

Early in the fiscal year the addition to the main garage, with pit and other apparatus for facilitating repairs, was completed. This has not only proved a great convenience for the mechanics, but has made possible more rapid work. Storage space was further increased by

the removal from the main garage of the officers' automobiles which are now housed in the new garages built this year. The hospital motor equipment consists of light and heavy trucks used in conveying supplies and in grading and other work, tractors used on the farm and grounds, a bus which transports the attendants to and from the house which is rented in Morris Plains pending the completion of the Employees' Building, an ambulance for moving sick patients to the hospital building, light passenger cars used by the social service division in their visits to the different sections of the hospital district, and heavier passenger automobiles used by the resident officers in their official capacities, including trips to Trenton for conferences with the central authorities, conveying patients and physicians to court hearings, returning escaped or paroled patients to the institution, transferring patients to other institutions in the State or in nearby states and similar duties.

Almost all repair work on these varied types of motors is carried out by the hospital mechanics and the amount of mileage obtained, as well as practically continuous service, is evidence of the efficiency of this division. The following new motor equipment was obtained during the year: One Hudson sedan, one Studebaker sedan, one Essex coach, two Reo trucks, one Chevrolet bus and a Fordson tractor which was assigned, not to the garage, but to the greenhouse and grounds division.

FARM

During the year the hospital land has been increased by two purchases—one of 18½ acres and one of 8.99 acres—raising the total to 929.49 acres. The first purchase was made in order to provide an outlet for the sewage system and consisted of area along the side of the pond into which the water flows from the disposal plant. Gravel of an excellent quality is included in this purchase which will make it possible for the institution to work its own gravel pit. The second purchase was made to augment the water supply by drilling wells. While it is undesirable that buildings or any source of contamination be placed upon this area it can perhaps be used for farm or garden purposes as it is level and fertile soil.

The increased number of buildings and the additional recreation ground required for the larger hospital population has cut down the land available for farm and garden purposes and this year exceptionally heavy rains, with consequent washing and flooding of the slopes and low lying areas which make up the greater part of the cultivated land, have still further decreased production. Since the great-

er part of the hospital property is watershed of a hilly and stony character, overgrown with trees and bushes and unsuited for tilling, there is urgent need that additional land be purchased at a not too great distance from the institution to increase the available tillage and also to pasture young stock and dry cows. The farm produce of the past year was given a valuation of \$11,228.89. A detailed account of the amount and value of each product will be found in the statistical tables.

GARDEN

The garden produce of the past year, grown under the direction of Mr. John J. Kelly, was of excellent quality as shown by the prizes won at different fairs, particularly the winning for the second time of the first place among institutional exhibits at the State Fair. The value of the products was \$33,488.06 an increase of \$3,530.37 over the previous year.

STABLE

Horses are found more economical in certain varieties of work than motor vehicles and a number of teams are kept busy on the farm in the grading and in miscellaneous short hauls. At present we have 26 horses.

DAIRY

The appropriation of \$11,500.00 for a new dairy barn was utilized as follows: One barn was enlarged and remodeled, with new roof, floors, siding and fixtures, providing space for 80 head of cattle. Another barn was also completely remodeled and re-equipped and contains bull, calf and maternity pens. Both barns were furnished with fire protection and made model structures in every respect.

A feed mixer, with magnetic field, has been installed and is giving satisfactory results. This renders almost negligible the danger of nails and wire in the feed, from which we have lost many valuable animals in the past years.

A consistent effort has been made throughout the year to build up the productivity of the herd. Poor and non-paying cows have been eliminated and good grade and pure bred animals have been purchased, including a fine selection of young, pure bred bulls and also a number of pure bred cows. All calves that measure up to standard are kept and added to the herd. The milk supply has been increased to meet the requirements of the institution, eliminating the purchase of milk for which we were formerly paying about \$2,000.00 a month.

During the year one bull and 41 cows were slaughtered for food, three diseased cows were slaughtered and four cows died. The herd has continued as formerly under the supervision of Dr. H. W. Dustan, veterinarian, and he has passed upon all carcasses used for food. Two new bulls and 44 cows were purchased. The herd now consists of 117 milking cows, 24 dry cows, 49 heifers, 6 bulls and 5 calves, a total of 201 head. The valuation of the dairy produce is tabulated in the statistical appendix; the total is \$65,131.83 an increase of \$12,337.11 over last year. For the first time cattle from this herd were exhibited at the Morris County Fair and a bull and three cows won blue ribbons.

PIGGERY

At the piggery twelve new colony houses have been built and have resulted in a saving in the lives of young pigs, as in the old houses many were crushed by the sows rolling on them. Pure bred sows and boars have been selected and every attempt is being made to increase the number of pigs raised. All stock has been inoculated against hog cholera. At the present time there are 40 brood sows, 3 boars, 118 fattening hogs, 88 shoats and 42 suckling pigs. The produce for the year was valued at \$9,802.34, a decrease of \$27.78 over the previous year. There was an increase of 735 lbs. in the amount of pork produced, but the valuation of the product was lower due to market conditions.

HENNERY

Careful study has been given this industry and a new poultry house, 200' x 20', is being erected which will give more space and permit of increased production. At the present time there are 315 hens, 318 pullets, 1 rooster and 305 cockerels. The value of the produce for the year was \$1,829.22, an increase of \$442.00 over last year.

INVENTORY

The annual inventory of the hospital property was made in the business office, using the same basis as in previous years:

Real estate	\$ 9,033,642.29
Personal property	1,048,010.12
Total	\$10,081,652.41

This is an increase in valuation of \$1,034,952.13 over the previous year, largely due to the new buildings and their equipment.

RECOMMENDATIONS

Included in the annual Budget there will be a number of requests for appropriations in addition to the usual one for salaries and wages, materials and supplies, current repairs and miscellaneous routine expenses. Some of these are of a more or less technical nature, such as equipment for the machine shop and boiler plant, which would require more detailed explanation than is advisable in this report; others are self-evident. Several, however, I feel should be given a word of explanation here in order that their practical need may be readily understood.

MENTAL HYGIENE CLINICS

I think that our admission rate of the past year is ample argument for the continuation of the mental hygiene clinics, since they offer at present our only promise of relief from a situation which may readily become intolerable. Our admissions last year increased by 97 patients, or more than 13 percent over the year before. They have increased by more than 60 percent over the admissions of ten years ago. If they should go on increasing at anything approaching this same rate the burden of building and equipping hospitals would presently become insupportable. Only \$25,000.00 is asked for the clinics; if only 60 patients are kept out of this institution for a year as a result of the clinic activities that amount would be made up to the State. In fact, we have patients in the institution now whose hospital life has been so long that if the present per capita cost had been operative throughout that time the cost to the State for one of them would have amounted to the full sum that is being asked for the clinic.

ADDITIONAL HOUSING FOR STAFF

Additional staff quarters are absolutely necessary if an adequate ratio of physicians to patients is to be attained. Married doctors, particularly if they have families, can be housed much more satisfactorily to themselves and also to the other members of the staff if they are provided with independent cottages. It is not necessary that these cottages be large or of elaborate architecture, but however small they should be for the sake of economy in upkeep, of sound and substantial construction. If a sufficient number of such cottages could be constructed, about six in addition to the two-family house and the house for the business manager already provided for, it would be possible to move out of the present quarters the senior men and the assistants who

have children, thus leaving the apartments available for single men or for juniors who have a wife but no children. Otherwise, it will be necessary to construct another staff house on the apartment plan, which would be less satisfactory than the cottages.

REBUILDING OF ROAD

Although the necessary outlay seems large on first consideration I feel that it would be the part of economy to make a substantial concrete or other permanent road to the principal buildings of the institution. The wear on the present roads, particularly the center drive, is so heavy that frequent repairs are required to maintain even a passable condition; a crew of men must be put to work after each heavy rain to restore the gullied areas and frequent scraping is necessary to take off the "washboard" surface. If the appropriation available for next year should be used in gravel and oil it would relieve this situation in some measure, but I am confident that with existing traffic conditions such a surface would not stand up to a degree at all satisfactory. Also I feel that it would be unwise to narrow the present road, for with the numbers of cars passing up and down, particularly on a visiting day when many people come to see the patients, a narrow road would be a constant annoyance and possibly a source of danger.

UNCLIMBABLE FENCE

This year a considerable amount of unclimbable fence was put in place along the public highway northeast of the Dormitory Building and has been a protection to the crops raised there. This fencing should be continued each year until the entire hospital property is protected from trespassers who destroy and steal fruits, vegetables and even trees, annoy patients and conduct themselves in general as the urban population feels free to do in a rural district.

SHOWER BATHS

Owing to the increased cost of construction work the appropriation for shower baths was insufficient to complete the stack through a tier of wards on the four floors of the Main Building, as it was possible to do with an equal sum before the higher prices were in effect. In consequence it was necessary to do part of the work with the hospital mechanics. I recommend that an appropriation be made for another tier of shower baths and that it be sufficient to cover the entire contract.

AUTOMOBILE EXCHANGE

Each year one or more trucks and passenger automobiles reach a condition where the expense of upkeep is too high for economical service and it is necessary for replacements to be made. This year two trucks and two passenger cars should be supplied to take the place of an equal number now in worn condition.

CHANGING FIRST FLOOR OF ADMINISTRATION
BUILDING INTO OFFICES

For several years the offices on the ground floor of the Main Building have been exceedingly cramped. Since this is the administration building and the offices of the superintendent, the business manager, the physicians on duty in the building, the engineer-in-charge, the superintendent of nurses, the pharmacists, the business department, the record room and all necessary clerks and stenographers, as well as the telephone operators, all are located on this floor. With the removal of the business manager's household from the first floor space will become available which should immediately be remodeled for office use. This would relieve the crowded conditions on the second floor without decentralizing the work and would also make it possible to use for other purposes the present dark and damp overflow offices which have been fitted up in the basement as a temporary measure.

MODERN ELEVATORS

Modern elevators are greatly needed to replace the unsafe and obsolete types in use in both the north and south sides of the Dormitory Building and in the Main Building. In the Dormitory Building the old elevators have been much used and are now so rickety that they are dangerous, but must be continued in service until replaced, since they are required for the transportation of supplies and of sick and feeble patients. In the Main Building the elevator is of an antiquated plunger type which can be operated only when special arrangements are made with the engineer and is so unsafe that it has on several occasions dropped to the bottom of its well. It should be replaced by a modern electric elevator which would give practical service.

RECONSTRUCTION OF INDUSTRIAL BUILDING

This building was not originally of very substantial construction and has deteriorated through use and weathering. The walls, coping, window frames and sash should be reconstructed and other necessary

repairs carried out if the building is to be continued in service. I accordingly recommend that an appropriation be made for this purpose.

ADDITIONS AND IMPROVEMENTS TO FIRE-ALARM SYSTEM

With several new buildings completed and others already under construction the fire-alarm system should be extended and such improvements made that all the institutional property may be adequately safeguarded.

LOCKS FOR MAIN AND DORMITORY BUILDINGS

The locks on the doors throughout the wards of the Main and Dormitory Buildings are becoming badly worn. They are of an old type and varied in character so that it is necessary for a supervising nurse or a physician to carry several heavy keys in order to make rounds. I recommend that the old and worn locks be replaced and that the new locks be of a type similar to those in the Clinic and Reception Buildings in order that they may be fitted to master keys, thus simplifying the lock problem of the institution and reducing possibilities of lost keys by cutting down the number which it is necessary to carry.

WATER SOFTENER AND HEATER—LAUNDRY

At the laundry it would be an economy to install a heater for the water used in the building, as under the present system it has to be piped for a considerable distance after it is heated and a loss occurs. A water softener would reduce the amount of soap required and produce better results. It should be of a type as not only to soften the water, but also to purify it, since in coming through the pipes, many of which are old, the water picks up a certain amount of soil and corrosion products.

SEWAGE DISPOSAL

In the sewage disposal system for the better functioning of the contact beds and to reduce as much as possible the odor which is so objectionable to nearby residents, the present foul slag should be removed from the beds and replaced by new crushed stone. I accordingly recommend that an appropriation be made for this purpose.

FARM LAND

As already mentioned in the business manager's report, additional farm land is urgently needed in order that we may increase the supply

of garden produce and cattle fodder to meet the present requirements of the institution, since our available land is insufficient for growing these in great enough quantities. Additional pasturage is also needed for the young stock and dry cows; this would save the cost of constant feeding which is necessary with our present very limited pasture. I recommend that a suitable farm near the institution be purchased and a farm colony of working patients established there to cultivate the crops and care for the stock.

STORE

The present hospital store, maintained for the convenience of patients and their friends is a temporary and rather unsightly shack far down on the center drive. A permanent building, centrally located, is needed to house the store and would soon be paid for with the proceeds of sales. In order to simplify the visiting of patients this building should contain a booth for the usher, where visitors could be received and register and then be directed to the proper building. I accordingly recommend that an appropriation be made for a combined store and usher's office.

APPOINTMENTS AND RESIGNATIONS

Physicians Appointed:

Charles Wyatt Hutchings, M.D.....	July 17, 1926
Kenneth Y. Sinclair, M.D.....	June 1, 1927
Lindsay E. Robinson, M.D.....	June 1, 1927

Physicians' Resignations:

Thomas M. Maxwell, M.D.....	February 28, 1927
Theodore R. Ford, M.D.....	March 28, 1927

Other Resident Officers' Resignations:

Edward M. Grevatt, D.D.S., Assistant Resident Dentist.....	October 15, 1927
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LOSS OF OLD EMPLOYEES

In an institution which has existed for a long time there are usually to be found a central group of employees who have been connected with it for many years; perhaps for their entire working lifetime. This hospital is fortunate in having a rather large number of such employees, both men and women, who have remained continuously faithful to the institution through all fluctuations of employment conditions elsewhere. Each year sees certain final changes in this group, for death takes some from the list and others

are relieved from active service under the State Employees' Retirement System. During the past year we have had four men die and one man and one woman retire.

On October 17, 1926, Mr. Alfred N. Berry, who was the oldest member of the nursing staff of the hospital, died suddenly while returning from his vacation, being stricken on the trolley car within a short distance of the institution. He had been employed on the wards since February 14, 1903, first as an attendant then for many years on night patrol duty and later as charge of the tuberculous ward for men, which position he occupied until his death. He was uniformly faithful and kind in his ministrations to the hundreds of sick people who came under his care during the twenty-three years spent in what to many people would seem the most trying of occupations.

A few weeks later, on November 18, 1926, Mr. John Mansfield died. He had been in charge of the shoe repairing division since December 2, 1901, and was an excellent workman at his trade, learned in the days when hand work and pride in honest skill were the rule instead of the exception. Although more than seventy years of age he was engaged in active duty until his last illness and was widely loved and respected, both at the institution and at his home in Morristown.

In the midst of the Christmas holidays, on December 21, 1926, Mr. John Boyd passed away. He had entered the service of the institution on November 12, 1894, in the clerical division. There his faithfulness to duty and his absolute integrity and loyalty won him promotion and he was trusted with many secretarial duties and was finally made secretary to the Board of Managers. When the local postoffice of Greystone Park was opened he was placed in charge and continued while the office grew from fourth-class to third-class. In recent years, as the postoffice work become increasingly heavy and his own health declined, Mr. Boyd was obliged to drop almost all clerical work, but he never ceased to feel himself a part of the institution. His position made him known to the entire hospital and his Irish humor and friendliness brought him innumerable friends. The final illness was very brief, so that he was absent from his office only a few days before the end. After thirty-two years of continuous service he left a stainless record for faithfulness to duty and kindness of heart.

On February 14, 1927, occurred the last of this year's deaths among the old employees; that of Mr. Ollie D. Johnson, who had been in the service of the institution since April 23, 1906. Mr. Johnson was an outside worker in the business department and was employed in

a variety of positions during his twenty years at the hospital. He was always faithful and willing in his performance of any task assigned him and his death removed one of those reliable workers whose labor made the foundation of institutional success.

The first retirement of the year occurred on March 1, 1927, when Miss Jullia B. Maguire was placed on pension, after having been in the service of the medical department since August 14, 1893. Miss Maguire came to the institution as a young woman and one of the early graduates from the original training school for nurses. She served on the wards in various capacities and was finally made assistant supervisor on the women's side of the Main Building, where her immaculate presence and keen eyes will long be remembered. For several years she gave instruction to the training school in practical nursing and ward duty. When the nursing division and the training school were completely reorganized (1921-1923), Miss Maguire was placed in charge of one of the new residence halls for graduate nurses, where she remained on duty until failing health necessitated her retirement.

On May 1, 1927, Mr. Edward Murphy retired on pension. He had been employed in the business department of the institution for a period of forty-five years, since April 1, 1882. Much of his work was connected with the hospital gas plant, but after that closed he was employed in the upkeep and improvement of the grounds, and assisted by a crew of patients he laid pipe lines, put in foundations for buildings, laid walks, moved trees and accomplished many other tasks requiring practical judgment and good sense. He was always popular with patients and fellow employees and his many friends at the institution feel that he is still one of them as his home in Morris Plains is only a short distance from the hospital property. On the day of his retirement an informal meeting of the business department employees was held in his honor, at which he was presented with a purse as a token of his long service and esteem in which he was held.

DISTINGUISHED VISITORS

The institution has been fortunate during the past year in having many sincerely interested visitors; State officials, professional people and public-spirited citizens. It is impossible to enumerate all of these, but I wish to mention a few whose presence has been of more than usual interest. State Comptroller N. A. K. Bugbee and State Treasurer William T. Read were here on May 10th. and went into conditions and needs with some care. Senator E. I. Edwards, Vice-Chancellor

Bentley, General Gilkinson, General Murray, Colonel Salter and Colonel Margerum were also present on May 10th.

Members of the State Board of Control of Institutions and Agencies have paid us official visits, including Mr. E. P. Earle, Chairman, who has given very valuable advice on many occasions, Mr. Frank A. Fetridge, Mrs. Lewis S. Thompson, Mrs. Adaline Y. Lawrence, Dr. Ambrose F. Dowd and Mr. William C. Cannon. Commissioner William J. Ellis has been exceedingly generous in his visits, not only coming to the hospital with various groups on tours of inspection, but making many personal trips for conferences regarding policies, buildings, and so on, and to assist in the investigation of certain institutional matters. Mr. Charles N. Leatham, Jr. Director of the Division of Architecture and Construction, has been a frequent visitor; Mr. George Holbig, Departmental Steward, has given much time to this institution and his advice on matters pertaining to food, kitchens and household has been of especial value; Captain George Geiger and other members of the Department have also been at the institution on different occasions.

Late in July a delegation from Hudson County, with Assemblywoman Carty and Miss Brown, Freeholder, at its head, made a tour of the institution. Assemblywoman Summers, from Passaic County, visited the hospital with a party in August. The Appropriations Committee of the Legislature visited the institution on January 18th. and made a careful study of its needs. Senator Frank D. Abell, of Morris County, has constantly kept in touch with the hospital throughout the year, as has also Assemblyman Howard Barrett, of this district.

Among the physicians from outside the State who have visited us within the year are Dr. Richard H. Hutchins, Superintendent of the Utica State Hospital, New York, who was here in November and again in June; Dr. Samuel Hamilton, of Bloomingdale Hospital, White Plains, New York, who spent two days at the institution in November; Dr. Mella, of U. S. Veterans' Hospital No. 81, Bronx, New York, who visited us in August; Dr. Stephens and Dr. Chamberlain, of The National Committee for Mental Hygiene, New York, were here in the late winter, and Dr. Roy L. Leak, superintendent of the State Hospital at Middletown, Connecticut, who paid us a visit in June.

Many people of this State connected with other institutions or with charitable organizations have visited the institution during the year, either to inspect the new buildings, to go into the work of some special division or to make a general tour of the hospital. Mr. Montgomery and Miss Walker, of Monmouth County, were here in July. Dr. Henry A. Cotton, superintendent of the State Hospital at Trenton, Dr. David F. Weeks, superintendent of the State Village for Epileptics

at Skillman, Dr. S. B. English, superintendent of the State Tuberculous Sanatorium at Glen Gardner, Mr. A. H. Meese, superintendent of the North Jersey Training School for Feeble-minded Females, accompanied by Dr. Ellen Potter, Medical Director of the institution, and Dr. Guy Payne, superintendent of Essex County Hospital at Overbrook, have all been here during the year, some of them several times. On April 18th., Dr. Weeks, accompanied by Mrs. Weeks, brought a party consisting of Mrs. Francis DeL. Hyde, Mrs. Brice Collard and Mrs. Charles Brophy, all of the Board of Managers of the epileptic village, with Mrs. William Woodin and Mrs. Mallieu, of New Jersey. They had lunch at the institution and visited as many points of interest as time permitted. Miss Helen M. Wilde, of the Central Parole Bureau, visited the institution on June 24th.

A large meeting was held at the hospital in the fall at which delegations from the different institutions and from other associations interested in gardening were present, and silver cups were presented to John J. Kelly, hospital gardener, and Otto Koch, florist, which were won by their exhibits at the Trenton State Fair and the Morris County Fair. On June 13th. the State Freeholders Association met at the hospital and was served with luncheon. On June 22nd. there was a meeting of those interested in occupational therapy in this State; lunch was served and the New Jersey Occupational Therapy Association was organized, with fifty-six of those present enrolled as members.

ACKNOWLEDGEMENTS

When I approached the subject of expressing our appreciation of the many gifts made to the patients and the institution during the past year I find myself completely at a loss, for the numbers of givers and the variety and quantity of donations make any individual acknowledgement out of the question in a report of this kind, since many pages would be required for even a list of the names of those contributing. Each gift has been acknowledged upon receipt, either with personal thanks orally expressed or by card or letter from the superintendent and many have also been acknowledged in the monthly issues of *The Psychogram*. Among the groups which have been especially liberal in their contributions are the American Legion posts and their Woman's Auxiliaries. Numerous other organizations have made gifts to the institution, including fraternal and charitable societies, churches and Sunday schools; a very large number of private individuals have also made donations. The gifts have been equally varied—books, magazines, candy, fruit, cigarettes, tobacco, Victrola records, pictures, clothing and money, as well as many other things not classified, but

equally welcome. Our appreciation of these gifts and our gratitude to the givers is based not only upon the worth of the contributions and the happiness which they bring to the patients, but even more upon the evidence which they bear as to the sentiment of the community toward the institution and what it is trying to accomplish and the quality of the sympathy for the patients, not as dangerous individuals who must be confined to protect society, but as sick people who are being treated in a hospital and are quite capable of feeble pleasure in being remembered by those outside.

CONCLUSION

In bringing this report to a close I realize that I have given you only a view of the results accomplished. There has been no time or space for describing the means, the personal effort on the part of individuals by whom these results were brought about. Organization at best can only mark out channels to direct energies and prevent in some measure the loss of power through excess of friction; the actual accomplishment depends upon individuals, the heads of divisions and faithful subordinates who fill their particular niches, putting their hearts as well as their heads and hands into the work.

If obstacles have been overcome and some degree of success achieved this past year the credit belongs to the earnest and loyal officers and employees in both medical and business departments and in many sub-divisions, who have all done their especial duties well and thus wrought for progress. To each of these, whether official or most humble worker, I am sincerely grateful. Also to the members of the consulting staff who have responded so readily to our requests for aid and advice and to all the State officials who have shown a personal interest in the progress of the institution and the welfare of those for whom it exists I wish to express my gratitude. For the Commissioner who has worked hand in hand with the local officers, never sparing himself in the service, my appreciation is deep and abiding. To you of the Board of Managers who have been unflinching in your endeavors for the institution and more than generous in your patience and support I can merely say my thanks, but I think you each one know how much I value your friendship.

Respectfully submitted,

MARCUS A. CURRY

Superintendent and Chief Executive Officer,

June 30, 1927.

**STATISTICAL APPENDIX TO CHIEF EXECUTIVE OFFICER'S
REPORT**

TABLE 1.

GENERAL INFORMATION

Data correct at end of hospital year, June 30, 1927

1. Date of opening as a hospital for mental diseases.....	August 17, 1876
2. Type of hospital.....	State
3. Hospital plant--	
Value of hospital property:	
Real estate, including buildings.....	\$9,033,642.28
Personal property.....	1,048,010.12
Total.....	\$10,081,652.40
Total acreage of hospital property owned.....	929.49
Additional acreage rented.....	None
Total acreage under cultivation during previous year.....	235

4. OFFICERS AND EMPLOYEES

Actually in Service at End of Year

	Males	Females	Total
Superintendents.....	1	..	1
Clinical directors.....	1	..	1
Assistant physicians.....	16	1	17
Pathologists.....	1	..	1
Consulting surgeons.....	1	..	1
Total physicians.....	20	1	21
Business managers.....	1	..	1
Resident dentists.....	2	..	2
Consulting dentists.....	1	..	1
Pharmacists.....	2	..	2
Graduate nurses.....	8	28	36
Other nurses and attendants.....	161	126	287
Occupational therapists.....	4	12	16
Social workers.....	..	8	8
All other officers and employees.....	297	101	398
Total officers and employees.....	496	276	772

TABLE I. (Continued.)

5. CENSUS OF PATIENT POPULATION AT END OF YEAR

	Actually in Hospital			Absent from Hospital but Still on Books		
	Males	Females	Total	Males	Females	Total
White--						
Insane.....	1,651	1,638	3,289	135	137	272
Epileptics.....	..	..	..	..	..	..
Mental defectives.....	6	2	8	..	..	..
Alcoholics.....	2	..	2	..	..	..
Drug addicts.....	..	..	..	..	..	..
Neurosyphilitics (without psychosis).....	..	..	..	..	..	..
All other cases.....	2	..	2	..	..	..
Total.....	1,661	1,640	3,301	135	137	272
Other Races--						
Insane.....	100	90	190	9	11	20
Epileptics.....	..	..	..	..	..	..
Mental defectives.....	..	..	..	..	..	..
Alcoholics.....	..	..	..	..	..	..
Drug addicts.....	..	..	..	..	..	..
Neurosyphilitics (without psychosis).....	..	..	..	..	..	..
All other cases.....	..	..	..	..	..	..
Total.....	100	90	190	9	11	20
Grand total.....	1,761	1,730	3,491	144	148	292
6. Patients under treatment in occupational therapy classes, including physical training, on date of report.....				295	1,152	1,447
7. Other patients employed in general work of hos- pital on date of report.....				739	453	1,192
8. Average daily number of all patients actually in hospital during year.....	1,716.54	1,721.03	3,437.57			
9. Voluntary patients admitted during year.....	36	34	70			
10. Persons given advice or treatment in out-patient clinics during year.....	235	269	504			

TABLE II.

FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 1927

RECEIPTS

Balance on hand from previous fiscal year.....	\$.....
Received from appropriations.....	2,618,211.24
Received from paying patients.....	246,175.40
Received from all other sources.....	427,151.44
Total receipts.....	\$3,291,538.08

DISBURSEMENTS

1. Expenditures for maintenance of patients:	
Salaries and wages.....	\$780,314.39
Provisions (food).....	340,885.99
Fuel, light and water.....	121,226.33
All other expenditures for maintenance.....	343,080.73
Total expenditures for maintenance.....	\$1,585,507.44
2. Expenditures for purposes other than maintenance, including new buildings, other additions and permanent betterments.....	978,201.18
3. Expenditures for repayment of loans and interest on loans.....	.....
Total expenditures.....	\$2,563,708.62
Amount returned to State Treasurer.....	727,829.44
Balance on hand at close of year.....	.....
Total disbursements.....	\$3,291,538.08

TABLE III.

MOVEMENT OF INSANE PATIENT POPULATION
For year beginning July 1, 1926, and ended June 30, 1927

	Males	Females	Total
1. Patients on books of hospital at beginning of hospital year:			
a—In hospital.....	1,664	1,670	3,334
b—On parole or otherwise absent.....	104	130	234
Total.....	1,768	1,800	3,568
2. Admissions during year:			
a—First admissions.....	387	305	692
(Includes all patients admitted as insane for the first time to <i>any</i> hospital for mental diseases, public or private, wherever situated, in or outside of State, excepting institutions for temporary care.)			
b—Readmissions.....	59	71	130
(Includes all patients admitted who have been previously under treatment in a hospital for mental diseases excepting transfers and patients who have received treatment only in institutions for temporary care.)			
c—Transfers from other hospitals for mental diseases.....	1	4	5
(Includes all patients coming directly from any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
3 Total received during year.....	447	380	827
(Includes total of items 2 a, b and c.)			
4. Total on books during year.....	2,215	2,180	4,395
(Includes total of items 1 and 3.)			

TABLE III. (Continued.)

5. Discharged from books during year:			
(Does not include patients away from hospital on parole, on visit, or on other temporary leave from hospital.)			
a—As recovered.....	72	81	153
b—As improved.....	88	80	168
(Does not include transfers.)			
c—As unimproved.....	10	16	26
(Includes all patients discharged not benefited by treatment, exclusive of transfers.)			
d—As without psychosis.....	8	4	12
(Includes all discharged patients who are found to have had no psychosis.)			
e—Transferred to other hospitals for mental diseases.....	3	5	8
(Includes all patients sent directly to any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
f—Died during year.....	129	116	245
6. Total discharged, transferred and died during year.....	310	302	612
(Includes total of items 5 a, b, c, d, e and f.)			
7. Patients remaining on books of hospital at end of hospital year:			
a—In hospital.....	1,761	1,730	3,491
b—On parole or otherwise absent.....	144	148	292
Total.....	1,905	1,878	3,783

TABLE IV.

NATIVITY OF FIRST ADMISSIONS AND OF PARENTS OF FIRST ADMISSIONS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Males	Females	Total	Fathers	Mothers	Both Parents	Fathers	Mothers	Both Parents
United States.....	233	192	425	10	22	124	5	19	97
Africa.....	..	..	..	..	..	..	..	..	..
*Asia.....	..	..	..	..	..	..	..	..	..
Australia.....	1	1	2	..	..	..	..	..	..
Austria.....	12	13	25	2	2	15	2	..	15
Belgium.....	..	..	..	..	..	..	..	..	..
Canada.....	2	1	3	..	1	2	1	2	1
Central America.....	..	..	..	..	..	..	..	..	..
China.....	3	..	3	..	..	3	..	..	..
Czecho-Slovakia.....	2	1	3	..	..	2	..	..	1
Cuba.....	..	..	..	..	..	..	..	..	..
Denmark.....	1	1	2	1	..	2	..	..	1
England.....	8	5	13	5	1	12	5	3	7
Europe.....	..	..	..	..	..	..	..	..	..
Finland.....	..	..	..	..	..	..	..	..	..
France.....	2	1	3	1	..	2	1	1	3
Germany.....	17	20	37	9	6	28	13	1	30
Greece.....	2	..	2	..	..	2	..	..	..
Holland.....	4	2	6	..	..	7	..	..	3
Hungary.....	8	10	18	..	..	10	..	..	13
India.....	..	..	..	1	..	..	..	..	..
Ireland.....	15	11	26	4	3	33	1	5	28
Italy.....	27	13	40	1	..	38	1	..	18
Japan.....	..	..	..	..	..	..	..	..	..
Jugo-Slavia.....	..	..	..	..	..	..	..	..	..
Mexico.....	..	..	..	..	..	..	..	..	..
Norway.....	1	2	3	..	..	1	..	..	2
Philippine Islands.....	1	..	1	..	..	1	..	..	..
Poland.....	24	17	41	..	1	26	1	2	17
Porto Rico.....	..	..	..	..	..	..	..	..	..
Portugal.....	1	..	1	..	..	1	..	..	..
Roumania.....	..	..	..	1	..	..	..	..	1
Russia.....	9	6	15	2	..	11	2	..	8
Scotland.....	1	2	3	2	1	..	2	..	4
South America.....	..	..	..	..	..	..	..	..	..
Spain.....	1	..	1	..	..	1	..	..	..
Sweden.....	..	1	1	..	..	1	..	..	2
Switzerland.....	1	1	2	..	..	1	..	1	2
Turkey-in-Asia.....	..	..	..	..	..	..	..	..	..
Turkey-in-Europe.....	..	..	..	..	..	..	..	..	..
Wales.....	..	1	1	1	..	..	..	..	1
†West Indies.....	2	2	4	..	1	2	..	..	2
Other countries.....	6	1	7	1	..	6	..	1	2
Unascertained.....	3	1	4	1	4	14	3	1	11
Total.....	387	305	692	42	42	345	36	36	269

*Not otherwise specified. †Includes Newfoundland. ‡Except Cuba and Porto Rico.

TABLE V.

CITIZENSHIP OF FIRST ADMISSIONS

	Males	Females	Total
Citizens by birth.....	233	192	425
Citizens by naturalization.....	50	47	97
Aliens.....	68	44	112
Citizenship unascertained.....	36	22	58
Total.....	387	305	692

TABLE VI.

PSYCHOSES OF FIRST ADMISSIONS

<i>Psychoses</i>	M.	F.	T.	M.	F.	T.
1. TRAUMATIC PSYCHOSES.....				4	1	5
2. SENILE PSYCHOSES.....				9	15	24
3. PSYCHOSES WITH CEREBRAL ARTERIOSCLEROSIS.....				70	49	119
4. GENERAL PARALYSIS.....				48	16	64
5. PSYCHOSES WITH CEREBRAL SYPHILIS.....				16	8	24
6. PSYCHOSES WITH HUNTINGTON'S CHOREA.....						
7. PSYCHOSES WITH BRAIN TUMOR.....				1		1
8. PSYCHOSES WITH OTHER BRAIN OR NERVOUS DISEASES, total.....				5	5	10
a. Cerebral embolism.....						
b. Paralysis agitans.....						
c. Meningitis, tubercular or other forms.....						
d. Multiple sclerosis.....						
e. Tabes dorsalis.....						
f. Acute chorea.....						
g. Other diseases.....	5	5	10			
9. ALCOHOLIC PSYCHOSES, total.....				22	1	23
a. Delirium tremens.....	7	1	8			
b. Korsakow's psychosis.....						
c. Acute hallucinosis.....	9		9			
d. Other types, acute or chronic.....	6		6			

TABLE VI. (Continued.)

	M.	F.	T.	M.	F.	T.
10. PSYCHOSES DUE TO DRUGS AND OTHER EXOGENOUS TOXINS, total.....	..	..	..	..	1	1
a. Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined.....	..	1	1	..	..	..
b. Metals, as lead, arsenic, etc.....	..	..	..	..	..	..
c. Gases.....	..	..	..	..	..	..
d. Other exogenous toxins.....	..	..	..	..	..	..
11. PSYCHOSES WITH PELLAGRA.....	..	..	..	..	..	..
12. PSYCHOSES WITH OTHER SOMATIC DISEASES, total.....	..	..	..	17	11	28
a. Delirium with infectious diseases...	1	1	2	..	..	..
b. Post-infectious psychosis.....	..	..	..	..	..	..
c. Exhaustion delirium.....	1	2	3	..	..	..
d. Delirium of unknown origin.....	1	..	1	..	..	..
e. Cardio-renal diseases.....	12	7	19	..	..	..
f. Diseases of the ductless glands.....	..	..	..	..	..	..
g. Other diseases or conditions.....	2	1	3	..	..	..
13. MANIC-DEPRESSIVE PSYCHOSES, total.....	..	..	..	31	49	80
a. Manic type.....	11	18	29	..	..	..
b. Depressive type.....	11	16	27	..	..	..
c. Other types.....	9	15	24	..	..	..
14. INVOLUTION MELANCHOLIA.....	..	..	..	3	16	19
15. DEMENTIA PRÆCOX (schizophrenia).....	..	..	..	121	106	227
16. PARANOIA AND PARANOID CONDITIONS.....	..	..	..	2	2	4
17. EPILEPTIC PSYCHOSES.....	..	..	..	1	2	3
18. PSYCHONEUROSES AND NEUROSES, total.....	..	..	..	4	4	8
a. Hysterical type.....	..	1	1	..	..	..
b. Psychasthenic type (anxiety and obsessive forms).....	1	1	2	..	..	..
c. Neurasthenic type.....	3	..	3	..	..	..
d. Other types.....	..	2	2	..	..	..

TABLE VI. (Continued.)

	M.	F.	T.	M.	F.	T.
19. PSYCHOSES WITH PSYCHOPATHIC PERSONALITY.....	..	..	..	7	7	14
20. PSYCHOSES WITH MENTAL DEFICIENCY.....	..	..	..	9	2	11
21. UNDIAGNOSED PSYCHOSES.....	..	..	..	6	7	13
22. WITHOUT PSYCHOSIS, total.....	..	..	..	11	3	14
a. Epilepsy without psychosis.....	..	..	..	..	..	..
b. Alcoholism without psychosis.....	4	..	4	..	..	..
c. Drug addiction without psychosis...	2	2	4	..	..	..
d. Psychopathic personality without psychosis.....	..	..	..	..	..	..
e. Mental deficiency without psychosis.....	4	1	5	..	..	..
f. Others.....	1	..	1	..	..	..
Total.....	..	..	..	387	305	692

TABLE IX.

DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Illiterate			Reads and writes*			Common school			High school			College			Unascertained			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
1. Traumatic.....	4	1	5							3	1	4	1		1							
2. Senile.....	9	15	24					2	2	6	5	11								3	8	11
3. With cerebral arteriosclerosis....	70	49	119	5	4	9	7	7	14	32	21	53		2	2	1	1	2	25	14	39	
4. General paralysis....	48	16	64				4	6	10	30	6	36	2		2	2		2	10	4	14	
5. With cerebral syphilis.....	16	8	24				4	3	7	9	3	12							3	2	5	
6. With Huntington's chorea.....																		1				
7. With brain tumor...	1		1															1				
8. With other brain or nervous diseases..	5	5	10		1	1	1	3	4	3	1	4						1		1		
9. Alcoholic.....	22	1	23	1		1	2		2	16	1	17	2		2	1		1				
10. Due to drugs & other exogenous toxins.		1	1								1	1										
11. With pellagra.....																						
12. With other somatic diseases.....	17	11	28		1	1	2	3	5	10	5	15		1	1	1		1	4	1	5	
13. Manic-depressive...	31	49	80		1	1	1	10	11	16	25	41	3	9	12	3	3	6	8	1	9	
14. Involution melancholia.....	3	16	19		2	2		1	1	3	10	13		1	1			1	1	1	1	
15. Dementia præcox...	121	106	227	2	3	5	13	16	29	76	60	136	17	19	36	7	3	10	6	5	11	
16. Paranoia or paranoid conditions...	2	2	4				2		2					2	2							
17. Epileptic psychoses.	1	2	3		1	1												1	1	1	1	
18. Psychoneuroses and neuroses.....	4	4	8							3	3	6	1	1	2							
19. With psychopathic personality.....	7	7	14		2	2				4	4	8	2	1	3	1		1				
20. With mental deficiency.....	9	2	11	4	2	6	1		1	3		3							1		1	
21. Undiagnosed psychoses.....	6	7	13		1	1	2	2	4	2	4	6							2		2	
22. Without psychosis..	11	3	14				1	1	2	7		7		2	2	1		1	2		2	
Total.....	387	305	692	12	18	30	40	54	94	223	150	373	28	38	66	19	9	28	65	36	101	

*Includes those who did not complete fourth grade in school.

TABLE X.

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Urban			Rural			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	4	1	5	4	1	5						
2. Senile.....	9	15	24	7	15	22	2		2			
3. With cerebral arteriosclerosis ...	70	49	119	56	46	102	11	3	14	3		3
4. General paralysis ...	48	16	64	44	16	60	2		2	2		2
5. With cerebral syphilis.....	16	8	24	16	8	24						
6. With Huntington's chorea.....												
7. With brain tumor...	1		1	1		1						
8. With other brain or nervous diseases..	5	5	10	5	4	9		1	1			
9. Alcoholic.....	22	1	23	18	1	19	4		4			
10. Due to drugs & other exogenous toxins.		1	1		1	1						
11. With pellagra.....												
12. With other somatic diseases.....	17	11	28	13	9	22	4	2	6			
13. Manic-depressive ...	31	49	80	29	48	77	2	1	3			
14. Involution melan- cholia.....	3	16	19	3	12	15		4	4			
15. Dementia præcox...	121	106	227	108	97	205	11	9	20	2		2
16. Paranoia or para- noid conditions...	2	2	4	1	2	3	1		1			
17. Epileptic psychoses.	1	2	3	1	2	3						
18. Psychoneuroses and neuroses.....	4	4	8	4	4	8						
19. With psychopathic personality.....	7	7	14	6	5	11	1	2	3			
20. With mental deficiency.....	9	2	11	7	1	8	2	1	3			
21. Undiagnosed psychoses.....	6	7	13	6	5	11		2	2			
22. Without psychosis...	11	3	14	9	3	12	2		2			
Total.....	387	305	692	338	280	618	42	25	67	7		7

TABLE XI.

ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Dependent			Marginal			Comfortable			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	4	1	5				4	1	5						
2. Senile.....	9	15	24	4	5	9	2	4	6	3	6	9			
3. With cerebral arteriosclerosis...	70	49	119	25	10	35	31	24	55	11	15	26	3		3
4. General paralysis...	48	16	64	9	4	13	33	9	42	6	3	9			
5. With cerebral syphilis.....	16	8	24	3	2	5	13	6	19						
6. With Huntington's chorea.....															
7. With brain tumor...	1		1				1		1						
8. With other brain or nervous diseases..	5	5	10				4	3	7	1	2	3			
9. Alcoholic.....	22	1	23	8		8	13	1	14	1		1			
10. Due to drugs & other exogenous toxins..		1	1					1	1						
11. With pellagra.....															
12. With other somatic diseases.....	17	11	28	1	2	3	12	7	19	4	2	6			
13. Manic-depressive...	31	49	80	2	2	4	24	30	54	5	17	22			
14. Involution melan- cholia.....	3	16	19		2	2	2	5	7	1	9	10			
15. Dementia præcox...	121	106	227	17	13	30	79	58	137	25	35	60			
16. Paranoia or para- noid conditions...	2	2	4		1	1	2		2		1	1			
17. Epileptic psychoses.	1	2	3		1	1	1		1		1	1			
18. Psychoneuroses and neuroses.....	4	4	8				3		3	1	4	5			
19. With psychopathic personality.....	7	7	14		1	1	7	4	11		2	2			
20. With mental deficiency.....	9	2	11	5	1	6	4	1	5						
21. Undiagnosed psychoses.....	6	7	13	3		3	3	5	8		2	2			
22. Without psychosis...	11	3	14	2	1	3	9	2	11						
Total.....	387	305	692	79	45	124	247	161	408	58	99	157	3		3

TABLE XII.

USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	4	1	5	1		1	2		2		1	1	1		1
2. Senile.....	9	15	24	5	13	18	1		1				3	2	5
3. With cerebral arteriosclerosis...	70	49	119	19	38	57	13	3	16	13	2	15	25	6	31
4. General paralysis...	48	16	64	17	11	28	16	1	17	6	2	8	9	2	11
5. With cerebral syphilis.....	16	9	24	6	4	10	4	3	7	4	1	5	2		2
6. With Huntington's chorea.....															
7. With brain tumor...	1		1				1		1						
8. With other brain or nervous diseases..	5	5	10	3	5	8	1		1	1		1			
9. Alcoholic.....	22	1	23							22	1	23			
10. Due to drugs & other exogenous toxins..		1	1								1	1			
11. With pellagra.....															
12. With other somatic diseases.....	17	11	28	6	9	15	5	1	6	3		3	3	1	4
13. Manic-depressive...	31	49	80	11	36	47	12	9	21	2	2	4	6	2	8
14. Involution melan- cholia.....	3	16	19	1	12	13	2	3	5					1	1
15. Dementia præcox...	121	106	227	64	87	151	34	15	49	12	1	13	11	3	14
16. Paranoia or paranoid conditions.....	2	2	4	1	2	4	1		1						
17. Epileptic psychoses..	1	2	3		2	2							1		1
18. Psychoneuroses and neuroses.....	4	4	8	1	3	4	2		2	1	1	2			
19. With psychopathic personality.....	7	7	14	3	4	7	2	2	4	2	1	3			
20. With mental deficiency.....	9	2	11	3	2	5	4		4				2		2
21. Undiagnosed psychoses.....	6	7	13	1	5	6	1	1	2	2	1	3	2		2
22. Without psychosis..	11	3	14	5	1	6	1		1	4		4	1	2	3
Total.....	387	305	692	147	234	381	102	38	140	72	14	86	66	19	85

TABLE XII.

LIST OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH PRINCIPAL PSYCHOSES

T	Temperature			Admission			Total			PSYCHOSES
	M.	F.	T.	M.	F.	T.	M.	F.	T.	
1										Traumatic
2										Senile
3										With cerebral arteriosclerosis
4										General paralysis
5										With cerebral syphilis
6										With Huntington's chorea
7										With brain tumor
8										With other brain or nervous diseases
9										Alcoholic
10										Due to drugs & other exogenous toxins
11										With pellagra
12										With other somatic diseases
13										Manic-depressive
14										Involution melan-
15										Dementia præcox
16										Paranoia or paranoid conditions
17										Epileptic psychoses
18										Psychoneuroses and neuroses
19										With psychopathic personality
20										With mental deficiency
21										Undiagnosed psychoses
22										Without psychosis
Total										

TABLE XIII.

MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
1. Traumatic	4	1	5	3	3	3	1	1	2													
2. Senile	9	15	24	2	3	5	4	5	9	3	7	10										
3. With cerebral arteriosclerosis	70	45	119	14	11	25	36	20	56	15	18	33	1		1				4		4	
4. General paralysis	48	16	64	13	3	16	26	8	34	5	5	10	1		1				3		3	
5. With cerebral syphilis	16	8	24	6	1	7	8	6	14	1	1	2	1		1							
6. With Huntington's chorea																						
7. With brain tumor	1		1	1		1																
8. With other brain or nervous diseases	5	5	10	4	2	6	1	1	2	2	2	2										
9. Alcoholic	22	1	23	8		8	9	1	10	3		3	1		1	1			1		1	
10. Due to drugs & other exogenous toxins		1	1					1	1													
11. With pellagra																						
12. With other somatic diseases	17	11	28	4		4	12	11	23											1		1
13. Manic-depressive	31	49	80	15	16	31	13	28	41	1	4	5	1	1	2				1		1	
14. Involution melancholia	3	16	19		4	4	3	11	14		1	1										
15. Dementia præcox	121	106	227	77	44	121	34	51	85	3	8	11	2	1	3	3	2	5	2		2	
16. Paranoia or paranoid conditions	2	2	4		1	1	2		2		1	1										
17. Epileptic psychoses	1	2	3		2	2	1		1													
18. Psychoneuroses and neuroses	4	4	8	2	2	4	2		2		1	1		1	1							
19. With psychopathic personality	7	7	14	3	1	4	4	6	10													
20. With mental deficiency	9	2	11	8	1	9		1	1				1		1							
21. Undiagnosed psychoses	6	7	13	1	3	4	2	3	5	3	1	4										
22. Without psychosis	11	3	14	7	1	8	4	1	5										1	1		
Total	387	305	692	168	95	263	162	155	317	34	49	83	8	3	11	4	3	7	11		11	

TABLE XIV.

PSYCHOSES OF READMISSIONS

PSYCHOSES	Males	Females	Total
1. Traumatic psychoses.....	2		2
2. Senile psychoses.....		1	1
3. Psychoses with cerebral arteriosclerosis.....	6	6	12
4. General paralysis.....	4	2	6
5. Psychoses with cerebral syphilis.....		1	1
6. Psychoses with Huntington's chorea..			
7. Psychoses with brain tumor.....			
8. Psychoses with other brain or nervous diseases..	1	1	2
9. Alcoholic psychoses.....	1	1	2
10. Psychoses due to drugs and other exogenous toxins			
11. Psychoses with pellagra.....			
12. Psychoses with other somatic diseases.....	1	1	2
13. Manic-depressive psychoses.....	9	21	30
14. Involution melancholia.....	1	2	3
15. Dementia præcox.....	26	31	57
16. Paranoia and paranoid conditions.....			
17. Epileptic psychoses.....	2		2
18. Psychoneuroses and neuroses.....	1	2	3
19. Psychoses with psychopathic personality.....	1		1
20. Psychoses with mental deficiency.....	1		1
21. Undiagnosed psychoses.....	1	1	2
22. Without psychosis.....	2	1	3
Total.....	59	71	130

TABLE XV.

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
AND CONDITION ON DISCHARGE

PSYCHOSES	Total			Recovered			Improved			Unimproved		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	4		4				4		4			
2. Senile		3	3					1	1		2	2
3. With cerebral arteriosclerosis.....	18	21	39	10	10	20	7	8	15	1	3	4
4. General paralysis.....	6	3	9	5		5	1	3	4			
5. With cerebral syphilis.....	2	1	3		1	1	2		2			
6. With Huntington's chorea.....												
7. With brain tumor....												
8. With other brain or nervous diseases...	3		3	2		2	1		1			
9. Alcoholic.....	16		16	15		15	1		1			
10. Due to drugs & other exogenous toxins...		1	1		1	1						
11. With pellagra.....												
12. With other somatic diseases.....	2	7	9	2	5	7		2	2			
13. Manic-depressive....	36	62	98	28	50	78	8	9	17		3	8
14. Involution melan- cholia.....	1	9	10		5	5	1	4	5	7	6	13
15. Dementia præcox....	62	51	113				55	45	100			
16. Paranoia or paranoid conditions.....		3	3					1	1		2	2
17. Epileptic psychoses..	2	1	3				2	1	3			
18. Psychoneuroses and neuroses.....	3	7	10	1	3	4	1	4	5	1		1
19. With psychopathic personality.....	8	5	13	4	4	8	4	1	5			
20. With mental deficiency.....	2	1	3	2	1	3						
21. Undiagnosed psychoses.....	5	2	7	3	1	4	1	1	2	1		1
22. Without psychosis...	8	4	12									
Total.....	178	181	359	72	81	153	88	80	168	10	16	26

TABLE XVI.

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Causes of death	Total			Senile			With cerebral arterio-sclerosis			General paralysis			Alcoholic			Manic-depressive			Involution melancholia			Dementia præcox			Paranoia or paranoid conditions			Epileptic psychoses			Psycho-neuroses and neuroses			With psychopathic personality			With mental deficiency			*All other psychoses		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
I. EPIDEMIC, ENDEMIC AND INFECTIOUS DISEASES:																																										
Typhoid and paratyphoid fever.....																																										
Measles.....																																										
Scarlet fever.....																																										
Diphtheria.....																																										
Influenza.....																																										
Dysentery.....																																										
Erysipelas.....																																										
Lethargic encephalitis.....																																										
Tuberculosis of the respiratory system.....																																										
Tuberculosis of other organs.....																																										
Syphilis (non-nervous forms).....																																										
Purulent infection, septicæmia.....																																										
Other infectious diseases.....																																										
II. GENERAL DISEASES NOT INCLUDED IN CLASS I.:																																										
Cancer and other malignant tumors.....																																										
Tumor (non-cancerous).....																																										
Rheumatism.....																																										
Pellagra.....																																										
Diabetes.....																																										
Alcoholism (acute or chronic).....																																										
Other general diseases.....																																										
III. DISEASES OF THE NERVOUS SYSTEM:																																										
Meningitis (non-epidemic).....																																										
Tabes dorsalis (locomotor ataxia).....																																										
Other diseases of spinal cord.....																																										
Cerebral hemorrhage (apoplexy).....																																										
General paralysis of insane.....																																										
Other forms of mental disease.....																																										
Epilepsy.....																																										
Chorea.....																																										
Other diseases of nervous system.....																																										
IV. DISEASES OF THE CIRCULATORY SYSTEM:																																										
Pericarditis.....																																										
Endocarditis and myocarditis.....																																										
Angina pectoris.....																																										
Other diseases of the heart.....																																										
Arteriosclerosis.....																																										
Other diseases of arteries.....																																										
Other diseases of circulatory system.....																																										
V. DISEASES OF THE RESPIRATORY SYSTEM:																																										
Bronchitis.....																																										
Bronchopneumonia.....																																										
Lobar pneumonia.....																																										
Pleurisy.....																																										
Asthma.....																																										
Other diseases of the respiratory system (tuberculosis excepted).....																																										
VI. DISEASES OF THE DIGESTIVE SYSTEM:																																										
Diseases of the pharynx and tonsils.....																																										
Ulcer of stomach and duodenum.....																																										
Other diseases of stomach (cancer excepted).....																																										
Diarrhea and enteritis.....																																										
Appendicitis and typhlitis.....																																										
Hernia and intestinal obstruction.....																																										
Other diseases of intestines.....																																										
Cirrhosis of liver.....																																										
Biliary calculi.....																																										
Other diseases of liver.....																																										
Other diseases of digestive system (cancer and tuberculosis excepted).....																																										
VII. NON-VEREAL DISEASES OF GENITO-URINARY SYSTEM AND ANNEXA:																																										
Nephritis.....																																										
Other diseases of kidneys and annexa.....																																										
Diseases of bladder.....																																										
Diseases of prostate.....																																										
Benign tumors of uterus.....																																										
Other diseases of genital organs.....																																										
Other diseases of genito-urinary system.....																																										
VIII. DISEASES OF THE SKIN AND CELLULAR TISSUE:																																										

TABLE XVIII.

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL CLASSIFIED ACCORDING TO PRINCIPAL PSYCHOSES.

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
1. Traumatic.....	1		1																		1		1																			
2. Senile.....	9	16	25	4	2	6	1	4	5	1	3	4		2	2	1	1	2	2	3	5				1	1																
3. With cerebral arteriosclerosis....	37	21	58	10	4	14	1	6	7	7	1	8	3	4	7	7	4	11	4	2	6	3		3										1		1						
4. General paralysis ...	23	10	33	1		1	5	5	10	5	1	6	2		2	5		5	5	3	8			1		1																
5. With cerebral syphilis	4		4				1		1	1		1			2		2																									
6. With Huntington's chorea.....	1		1				1		1																																	
7. With brain tumor...	1		1				1		1																																	
8. With other brain or nervous diseases..																																										
9. Alcoholic	2		2	1		1																													1		1					
10. Due to drugs and other exogenous toxins..																																										
11. With pellagra.....																																										
12. With other somatic diseases.....	12	8	20	10	5	15	1	2	3	1		1						1	1																							
13. Manic-depressive ...	10	20	30	2	3	5	1	2	3						3	1	4				1	1		4	4	3	2	5	1	1	2		2	2		2	2	1	1		2	2
14. Involution melancholia	2	8	10		2	2	1	1	2										2	2																						
15. Dementia præcox...	20	26	46							1		1				4	4	4	1	5	3	2	5		2	4	1	1	2	2	2	4		2	2	1	4	5	8	8	16	
16. Paranoia or paranoid conditions.....	5	5	10																1	1																						
17. Epileptic psychoses..																																										
18. Psychoneuroses and neuroses																																										
19. With psychopathic personality.....	1		1							1		1																														
20. With mental deficiency.....	1	2	3				1	1																																		
21. Undiagnosed psychoses	1		1																1	1																						
22. Without psychosis..																																										
Total.....	129	116	245	28	16	44	12	21	33	17	5	22	5	6	11	18	12	30	16	12	28	8	8	16	3	5	8	2	2	4	2	4	6	1	4	5	4	7	11	13	14	27

APPENDIX TO BUSINESS DEPARTMENT REPORT

AGRICULTURAL PRODUCTS

FARM

3,380.5 tons alfalfa	\$ 132.37
2,304 12-16 baskets apples	693.81
2 8-16 baskets apples, crab	2.13
91.18 tons beets, cow	911.30
197.95 tons grass	1,607.42
9,365 tons hay, mixed	2,368.26
7 800 tons hay, timothy	161.60
101 baskets plums	102.40
101 baskets plums	102.40
173 bushels rye	180.35
506.75 tons silage	4,560.75
18 tons straw	279.00
165 bushels wheat	229.00
	\$11,228.89

DAIRY

27,483 lbs. beef	\$ 3,980.15
68 ea. calves sold	542.00
602 lbs. liver, beef	55.94
1,674,888 tons manure	3,349.78
1,227,001.66 lbs. milk	57,054.68
5 lots offal sold	149.28
	\$65,131.83

HENNERY

3,055 3-12 doz. eggs	\$ 1,365.48
342 lbs. broilers	140.17
1,085½ lbs. fowl	323.57
	\$ 1,829.22

PIGGERY

50,745 lbs. pork	\$ 9,729.73
764½ lbs. liver, pork	72.61
	\$ 9,802.34

GARDEN

3,983 bunches asparagus	\$ 979.84
69 2-16 baskets beans, string	83.32
1,168 7-16 baskets beans, lima	1,103.63
3,517 5-16 baskets beets	1,826.66
1,392 bunches beets	50.86
8.1 tons beets, cow	81.00

1,962 11-25 barrels cabbage	2,806.39
2,345 baskets carrots	1,334.08
56 bunches carrots	1.65
283 13-20 barrels cauliflower	717.33
10,295 bunches celery	2,172.55
493 9-25 barrels cabbage sauer kraut	863.38
104 qts. cherries	13.28
226 11-16 baskets cucumbers	161.87
99,218 ears corn, sweet	1,851.96
156 qts. currants	21.72
6 5-16 baskets egg plant	3.93
274 baskets endive	303.05
1,225 hds. endive	57.00
10 qts. gooseberries	1.30
159 5-16 baskets grapes	111.49
1,243 9-16 baskets kale	274.16
7,617 hds. leek	318.58
3,004 12-16 baskets lettuce	1,744.55
7,037 hds. lettuce	489.16
506 ea. melons, musk	28.90
380 qts okra	30.80
1,209 6-16 baskets onions	790.30
60,431 bunches onions	1,974.80
90 baskets onion sets	540.00
4,780 bunches parsley	112.40
822 12-16 baskets parsnips	616.00
2 bunches parsnips	.07
366 4-16 baskets peas	408.11
123 9-16 baskets peppers	53.71
12,180 lbs. pumpkins	194.80
16,527 bunches radishes	398.24
528 qts. raspberries	59.80
55,497 bunches rhubarb	1,564.30
1,985 5-16 baskets spinach	742.50
446 4-16 baskets squash	231.38
9,734 1-16 baskets tomatoes	5,698.90
3,148 baskets tomatoes, canned	1,721.90
199 4-16 baskets tomatoes, green	119.31
5 8-16 baskets tomatoes, yellow	3.70
425 15-16 baskets turnips	236.60
3,853 qts. strawberries	588.31
	<hr/>
	\$33,488.00

FLORIST'S REPORT.

RECORD OF CUT FLOWERS.

Roses	14,679
Carnations	1,617
Chrysanthemums (large)	2,327
Chrysanthemums (small)	13,834
Dahlias	3,566
Snapdragon	57,869
Gladiolus	9,503
Lilies (calla)	320
Asters	4,478
Strawflowers	1,450
Narcissus (paper white)	200
Narcissus (double)	1,359
Sprenger (strings)	1,738
Peonies	245
Pansies	3,000
Phlox (hardy)	225
Sweet peas	3,500
Larkspur	2,924
Golden glow	2,800
Scabiosa	1,500
Stevia	400
Calendula	2,000
Zinnia	5,355

PLANTS AND BULBS GROWN FOR FLOWER BEDS AND CUT FLOWERS.

Pansies	1,006
Geraniums	3,086
Coleus	4,762
Celossia	320
Petunia	1,983
Salvia	2,983
Vinca	2,506
Helichrysum	600
Chrysanthemums	4,885
Lobelia	150
Dahlia	1,040
Cannas	1,846
Alternanthera	24
Snapdragon	7,862
Sweet peas (feet)	40
Asters	5,000
Balsam	100

TABLE SHOWING IN DETAIL MANNER OF SUPPORT

JUNE 30, 1927.

COUNTY	INDIGENT			ST. INDIGENT			PRIVATE			CONVICT			CRIMINAL			TOTAL		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Bergen.....	180	205	385	82	66	148	41	53	94	..	..	..	1	..	1	304	324	628
Essex.....	69	50	119	210	197	407	31	52	83	..	..	..	2	..	2	312	299	611
Hudson.....	95	84	179	162	132	294	85	85	170	..	..	..	..	..	..	342	302	644
Hunterdon.....	1	1	2	2	1	3	..	4	4	..	..	..	..	..	..	3	6	9
Mercer.....	3	..	3	..	..	3	..	1	1	..	..	..	..	..	..	3	1	4
Middlesex.....	2	1	3	..	..	..	2	5	7	..	..	..	..	..	..	6	10	16
Monmouth.....	97	100	197	44	26	70	15	24	39	1	..	1	..	..	1	157	151	308
Morris.....	..	..	..	..	..	..	..	4	4	8	..	..	..	..	..	1	4	5
Ocean.....	..	..	..	..	..	..	..	4	4	8	..	..	..	..	..	393	371	764
Passaic.....	293	286	579	69	45	114	31	40	71	..	..	..	..	..	..	4	10	14
Somerset.....	1	3	4	2	12	14	1	7	8	..	..	..	..	..	..	4	37	41
Sussex.....	34	23	57	12	4	16	3	10	13	1	..	1	..	..	..	50	37	87
Union.....	211	250	461	58	54	112	44	40	84	..	..	..	..	..	..	313	344	657
Warren.....	7	3	10	3	1	4	..	3	3	1	..	..	..	..	..	11	7	18
New York.....	..	..	..	..	1	1	2	5	7	..	..	..	..	..	..	2	6	8
Utah.....	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	1	..	1
Total.....	994	1009	2003	645	527	1172	260	340	600	3	..	3	3	2	5	1905	1878	3783

NOTE:—In all cases where inquiry has not been held, or final court order has not been received, the patients are credited to the County from which they were sent.

Gladiolus.....	10,600
Roses.....	1,558
Carnations.....	968
Begonias.....	1,968
Zinnias.....	1,680
Verbena.....	1,021
Ageratum.....	514
Jerusalem cherries.....	840
Ferns.....	45
Hyacinths.....	2,000
Easter lilies.....	385
Spirea.....	300
Sweet alyssum.....	206
Palms (small), in 6-inch pots.....	150
Sweet William.....	304
Lemon verbena.....	150
Crotons.....	175
Delphiniums.....	1,000
Scabiosa.....	1,000
Dracæna.....	100
Tulips.....	4,000
Calendula.....	400
Heliotrope.....	550
Fuchsia.....	1,500

