(12)
9436-5

THE

SEVENTY-FIRST ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

AT

GREYSTONE PARK

FOR THE YEAR ENDED JUNE 30

1946

974.901
H79.1

This Hospital is approved by the
AMERICAN COLLEGE OF SURGEONS
THE AMERICAN MEDICAL ASSOCIATION
and the
AMERICAN HOSPITAL ASSOCIATION

Board of Managers

PRESIDENT

AUGUSTUS S. KNIGHT, M. D. ..... Far Hills

VICE-PRESIDENT

GEORGE O'HANLON, M. D. ..... Jersey City

MRS. JAYNE MILLARD DOYLE ..... Newton
MRS. MARIAN K. GARRISON ..... Llewellyn Park, Orange
COL. FRANKLIN D'OLIER ..... Basking Ridge
FRANK D. ABELL ..... Morristown
FREDERICK S. MOSELEY JR ..... Far Hills

HAROLD M. PRETTYMAN, *Secretary*
Morristown

ROBERT A. LOWERY, *Treasurer*
Rockaway

Officers

MARCUS A. CURRY, M. D.
Medical Superintendent and Chief Executive Officer

GEORGE B. McMURRAY, M. D.
Assistant Medical Superintendent and Chief Executive Officer

LAURENCE M. COLLINS, M. D.
Clinical Director

***HENRY BREVOORT SMITH
Business Manager

HERBERT L. O'CONNOR
Acting Business Manager

ARCHIE CRANDELL, M. D. ..... Assistant Clinical Director
GEORGE R. HAMPTON, M. D. ..... Senior Resident Physician
JOSEPH DONOVAN, M. D. ..... Senior Resident Physician
PERRY J. GAMBILL, M. D. ..... Senior Resident Physician
RAYMOND J. HARQUAIL, M. D. ..... Senior Resident Physician
JAMES M. LASLEY, M. D. ..... Senior Resident Physician
DANIEL GEORGE MELVIN, M. D. ..... Senior Resident Physician
EDWARD KESSLER, M. D. ..... Senior Resident Physician
THOMAS J. DREDGE, M. D. ..... Senior Resident Physician
WILLIAM S. VOORHIES, JR., M. D. ..... Senior Resident Physician
CARL M. SAGERT, M. D.
Senior Resident Physician and Pathologist
WILLIAM H. LONGLEY, JR., M. D. ..... Senior Resident Physician
HELEN I. ANDERSON, M. D. ..... Senior Resident Physician
AMEDEO ESPOSITO, M. D. ..... Senior Resident Physician
JACK G. OATMAN, M. D. ..... Senior Resident Physician
*WILLIAM O'GORMAN, M. D. ..... Resident Physician
FRANK D. FENIMORE, M. D. ..... Senior Resident Physician
**BENJAMIN WASSELL, M. D. ..... Resident Physician
MERNA MARY WARNE, M. D. ..... Senior Resident Physician
*J. LLOYD MORROW, M. D. ..... Resident Physician
AMEDEO C. NACLERIO, M. D. ..... Senior Resident Physician
ARCHIE SOFMAN, M. D. ..... Senior Resident Physician
*SAMUEL L. POLLOCK, M. D. ..... Resident Physician

STUART N. CAHOON, M. D. ..... Senior Resident Physician
*JEROME MCSWEENEY, M. D. ..... Resident Physician
PERCY R. CRANE, M. D. ..... Resident Physician
ROBERT P. F. FITZGERALD, M. D. ..... Resident Physician
JOSEPH F. ZIGARELLI, M. D. ..... Resident Physician
KENNETH M. BREMER, M. D. ..... Resident Physician
MARSHALL D. HOGAN, M. D.
(Part Time) Proctologist and Urologist
HAROLD S. HATCH, M. D. (Part Time) Tuberculosis Specialist
JAMES R. MENTEL, D. D. S., ... Senior Resident Dentist
*EDWIN E. SAUNDERS, D. D. S., ... Senior Resident Dentist
*JOSEPH Y. BLOOM, D. D. S. ..... Resident Dentist
ROY C. STRICKLER, D. D. S., ... Resident Dentist
DOROTHY E. CLARK, R. N. ..... Director of Nursing
WILLIAM R. PEEBLES
Administrative Assistant, Personnel Director
WILLIAM G. BEUCLER
Administrative Assistant to Chief Executive Officer
GEORGE R. KOEHLER
Educational Assistant to the Clinical Director
*MARGARET CARLIN
Director of Hospital Psychiatric Social Service
AGNES ALVORD
Director of Hospital Psychiatric Social Service
MARGARET DEVRIES ..... Director of Occupational Therapy
DOROTHY E. JOHNSON
Director of Physical Education and Training
PHILIP B. ROBERTS, Ph. G., ... Pharmacist
LOUIS BANGERT, Ph. G., ... Pharmacist
GEORGE H. ROWLAND, Ph. G., ... Pharmacist
EDWARD I. COURSEN ..... Assistant Business Manager
HENRY E. LANDESMAN, M. E., ... Engineer-inCharge
EARL W. FULLER, M. D. .. Director of Mental Hygiene Clinic
THEODORE GEBIRTIG, M. D.,
Assistant Director of Mental Hygiene Clinic
MILDRED H. HURLEY
Director of Mental Hygiene Clinic Social Service

Resigned
**Military Leave*
***Sick Leave*

Board of Consultants

GEORGE H. LATHROPE, M. D. ..... Clinical Medicine
CHRISTOPHER C. BELING, M. D. ..... Neurologist
CLIFFORD MILLS, M. D. ..... Surgeon
WILLIAM H. LAWRENCE, Jr., M. D. ..... Surgeon
B. M. JAMES, M. D. ..... Dermatologist
HARRISON S. MARTLAND, M. D. ..... Pathologist
CLARENCE O'CROWLEY, M. D. ..... Urologist
DAVID A. KRAKER, M. D., F. A. C. P.,
Gastro-Enterologist and Proctologist
FRANCIS C. BARTLEMAN, D. D. S. ..... Dentist

TABLE OF CONTENTS

	Page
Report of the Board of Managers	17
Treasurer's Report	23
Report of the Chief Executive Officer, Introductory	27
Health	30
Statistical Resume	31
Clinical Work	34
Shock Therapy	37
Surgical Operations, Accidents, Births, Etc	39
Health Service for Employees	43
Division of Urology, Proctology, and Colonic Therapy	44
Gynecological Division	45
Division of Oral Surgery and Dentistry	46
Eye, Ear, Nose and Throat Division	49
Division of Pathology and Bacteriology	52
Roentgenology and Electrotherapeutics	54
Tuberculosis	57
Division of Education	59
Occupational Therapy Division	61
Physical Education Division	64
Social Service Division	67
Northern New Jersey Mental Hygiene Clinics	69
School of Nursing and General Nursing Service	74
Staff Matters	79
Pharmaceutical Division	80
Photography	81
Barber Shop	81
Administrative Assistant to the Chief Executive Officer	82
Administrative Assistant, Personnel Office	84
Overcrowding	86
Greenhouse and Grounds	87
Library	89
Religious Services	91
Fire Protection and Fires	91
Water Supply	94
Construction Work	95
Business Department	97
Recommendations	118
Loss of Employees By Retirement and Death	121
Distinguished Visitors	122
Acknowledgments	123
Appointments and Resignations	124
Conclusion	125
Statistical Tables—Standard Forms	Appendix
Business Department Statistics	Appendix

REPORT OF THE BOARD OF MANAGERS

Report To The Commissioner

To The Honorable Sanford Bates,
Commissioner of Institutions and Agencies:

The Board of Managers of The New Jersey State Hospital at Greystone Park present to you their seventy-first report together with the report of Dr. Marcus A. Curry, Medical Superintendent and Chief Executive Officer, for the fiscal year from July 1, 1945 to June 30, 1946.

On July 1, 1945, there were on the hospital books *6,500 patients, 3,042 men and 3,458 women. On June 30, 1946, there were on the hospital books 6,658 patients, 3,104 men and 3,554 women, constituting an increase of 158 patients made up of 62 men and 96 women. There were 5,729 patients actually resident in the institution, 2,753 men and 2,976 women; 930 were outside the hospital on parole, visit or escape. During the year there were 1,635 admissions, (including 1,626 regularly admitted and 9 temporarily admitted for special care) which consisted of 762 men and 873 women, making the total 109 greater than last year. The discharges numbered 818 patients, of whom 366 were considered to have recovered, 374 improved, 17 unimproved, and 61 were without psychosis; 23 were transferred to other hospitals for mental diseases. The deaths numbered 627 and the total number under treatment was 8,126. The recovery rate was 29.4 per cent. and the improved 30 per cent. based on the number of first admissions, 1,247.

Throughout the year there has been continuous increase of unsatisfactory conditions, impossibilities of maintaining high standards of work and accomplishments similar to what we had to report last year. The serious depletions of the staff of doctors, nurses, attendants and employees in all departments persisted and grew worse. Simultaneously, the overcrowding with patients has gone on even more rapidly and with ever increasing proportions of older and more feeble patients who are less able to help themselves or the other patients. Dr. Curry tells all this so convincingly in his report that it would only be verbose for us to repeat here and we hope that all he says will be read with care and thoughtfulness by everyone who is interested in the welfare of the States' wards and wishes to help in relieving the critical conditions.

*Exclusive of those under special care.

Due to lack of funds to build the needed additions and to the impossibility of retaining the required personnel because we could not compete with the higher salaries and more satisfying accommodations that others have been paying these results have arisen.

All of these descriptions present only the worse sides of our Hospital picture but the other and most promising prospects are many; and they must include first our recognition that you by your constant inquiries, personal visits and reports from your capable Departmental associates of their investigations have gained the full knowledge that we have of conditions, shortcoming and needs to bring back and increase the high standards of accomplishment that we had 10 or 15 years ago. Then though already overcrowded and growing in population faster than personnel and sufficient housings could be provided yet the changes of this Hospital under the able management of Dr. Curry and his staffs from a custodial to an up-to-date curative institution was known and appreciated throughout this State and Nation. Competent examinations, proper classifications and assignments and modern treatments of the patients by ever improving personnel were maintained. Then when trend towards more overcrowding seriously hampered this program the State built the new Hospital at Marlboro which took a good part of the overload from here and seemed to be large enough to continue the relief for a number of years. But with the changes of conditions and problems that have arisen since that time, and which Dr. Curry clearly and correctly emphasizes in his Report,—more overcrowding, insufficient personnel and lack of housing than we have ever known before—have certainly brought this Hospital to conditions that must be corrected, and as soon as possible.

All the members of this Board welcome and are grateful for the immense help that you and your colleagues are giving us and that you are so well equipped to continue during these times of emergency. We promise that our cooperation will be unreserved and most cordial. All of us know the conditions and all are working as best they can for the welfare and benefits of the patients, the State and our Hospital.

The Managers held 12 regular meetings during the year with an attendance of 55. Doctor O'Hanlon had a perfect attendance record; Doctor Knight was absent twice; Mrs. Doyle and Mr. Abell were absent once; Mrs. Garrison was absent twice; Mr. Moseley returned from military leave and attended one meeting; and Colonel D'Olier has not been

present for the reason that he has been on special work for the United States Government. Conferences, committee meetings and visits numbered 48, which made 103 recorded trips to the hospital by Board Members. Many conferences were held off the grounds or outside of office hours and were not listed in official reports.

Respectfully submitted,

AUGUSTUS S. KNIGHT, M. D., *President*
GEORGE O'HANLON, M. D., *Vice-President*
JAYNE MILLARD DOYLE
MARIAN K. GARRISON
FRANK D. ABELL
FREDERICK S. MOSELEY, JR.

TREASURER'S REPORT

Treasurer's Report of Cash Receipts and Disbursements for the Fiscal Year Ended June 30, 1946

RECEIPTS

From	Bergen County	$ 222,122.92
"	Burlington County	200.40
"	Camden County	220.80
"	Cumberland County	208.20
"	Essex County	287,371.24
"	Hudson County	112,893.73
"	Hunterdon County	1,371.60
"	Mercer County	559.80
"	Middlesex County	2,052.67
"	Monmouth County	1,972.13
"	Morris County	80,691.14
"	Ocean County	725.92
"	Passaic County	240,620.71
"	Somerset County	1,807.92
"	Sussex County	18,972.04
"	Union County	26,761.30
"	Warren County	1,766.40
"	Private Patients	216,385.93
"	Excess Maintenance Collected by Counties	29,092.38
"	State Contributing Patients	12,472.48
"	Miscellaneous Receipts	11,774.54
		$ 1,270,044.25

DISBURSEMENTS

Amount of Collections deposited with State Treasurer ..... $ 1,270,044.25

AMOUNTS RECEIVED FROM STATE TREASURER FOR PAY-ROLLS

Officers' Pay-rolls	$ 10,536.72
Employees' Pay-rolls	1,096.035.10
Conscientious Objectors	15,545.49
Mental Hygiene Pay-Rolls	29,712.92
Reconstruction	13,555.90
	$ 1,165,386.13

ROBERT A. LOWERY
Treasurer.

REPORT OF THE CHIEF EXECUTIVE OFFICER

Report of the Chief Executive Officer

To The Board Of Managers:

As required by law and directive I herewith present to you the annual report of The New Jersey State Hospital at Greystone Park, covering the fiscal year from July 1, 1945 to June 30, 1946. This is the seventy-first report of the institution and my twenty-sixth as Superintendent and Chief Executive Officer.

The total number of admissions for the year was 1,635 patients, 109 more than last year. Those discharged showed 29.4 per cent. recovered, 30 per cent. improved and 4.89 per cent. without psychosis, based on the total number of first admissions. The three groups comprised 64.29 per cent. which is about 1.1 per cent. less than last year. On June 30th the number carried outside the hospital on parole, visit or escape was 930 patients, an increase of 40 over the number so carried at the beginning of the year. The increase on the books for the year was 154 patients and the increase of those actually in the institution was 114 patients.

The medical service of the hospital was strengthened in the latter half of the year by doctors returning from military duty, so that including all administrative officers and specialists there were twenty-seven on the staff on June 30th, which was a great improvement over the eighteen at the beginning of the year, although still below the thirty-three of 1941, which was then considered somewhat under accepted standards. The nursing service has shown less improvement in actual personnel, but looks toward the future with more confidence than for a number of years past. Social service has continued to maintain and even to increase the number of patients on parole, although personnel and equipment are still far from pre-war level.

In the Business Department conditions have been extremely difficult and as yet improvement has been slight. In the spring, Mr. H. Brevoort Smith, Business Manager, found his health so impaired that he decided to go on sick leave and then to retire. The position left vacant has not yet been permanently filled, but we were extremely fortunate in obtaining the services of Mr. Herbert L. O'Connor, Superintendent and Business Manager of the New Jersey State Hospital at Marlboro, who is acting as a temporary appointee and is making a careful study of the entire

Department. Some of the most serious problems are connected with food service and dairy.

Through the effort of Commissioner Bates, Dr. Carpenter of Civil Service and others, several promising steps were taken in the course of the year. The reclassification of personnel was completed, a local personnel office was opened and placed under the direction of Mr. William Peebles from the Central Office, a merit rating system was put in effect, a new officer was appointed, the Institutional Collector, and on April 15th all institutional personnel who were working more than 48 hours a week were put on the 48 hour week. This last may well be the most important change of the decade, if sufficient personnel can be obtained and retained to keep up maximum service on that basis. Such personnel will require increased appropriations for salaries and an expansion of housing facilities, or else suitable inducements for living off the grounds.

Overcrowding of patients has materially increased this year, despite a good discharge rate and an increased number on parole. The hospital is being increasingly burdened by the admission of old and feeble patients, many of them bedfast, for whom the prospect of recovery is slight. These patients are able to do little for themselves and contribute nothing to the running of the wards where they are confined, so the personnel requirements are high, while the results are practically nil. I still feel that the custodial care of the aged, whether or not they are infirm mentally as well as physically, is not one of the proper functions of a curative mental hospital with its highly trained personnel and expensive equipment for psychotherapy.

Overcrowding clogs up all facilities of the hospital, reduces recoveries, increases noise and stress and accidents, with their bad effects upon patients and personnel alike, makes cleanliness and order much more difficult of attainment and is costly in the damage done to housing and furnishings. When combined with a serious shortage of personnel, as has been the case this year, the results are better undescribed.

Yet, with all our overcrowding, the number of working male patients has decreased. All of the outdoor activities, the garden, farm, dairy and grounds are hampered because so few interested male patients are available. A glance at the statistics explains the reason. Of the first admissions, there were 257 men between 20 and 50 years of age; of those discharged, 264 were men within this age group, and of those who died, 53. In other words, 60 more men of working age left the hospital than

were admitted for the first time. Among the readmissions, there was a considerable number in this age and sex group, but they do not as a rule become steady and dependable workers.

Since the spring of 1944 when we had a mild typhoid epidemic in a restricted area of the hospital, we have been obliged to maintain in isolation fourteen women patients who are typhoid carriers, according to repeated tests by the Board of Health. This has been a difficult and unsatisfactory procedure, since we have no area designed for such purposes and have been obliged to use space in the largest and most crowded part of the institution, the Main building, south side. These patients are for the most part deteriorated and untidy, which makes their isolation even more difficult. I feel that an institution of this size should have a separate isolation pavilion for the care of these and other infectious cases, and that so long as no such protection is provided for our general population—patient and personnel—we are laying ourselves open to severe criticism.

In the financial and service readjustments, that have been made this year, have been one or two which seem to me of questionable value as they work out in practice. One change which to me is not entirely satisfactory is the physicians' salary adjustment, which puts a premium upon the unmarried and childless. Financially, this may be absolutely right, but much can be said against it. Usually, the best and steadiest workers are the settled, married men who have made their places in the community and look upon the hospital as their permanent home. They have identified themselves with the institution to such an extent that their loyalty is unquestioned and they work not only for the pay and their professional standing, but because they want their hospital to be out in front, the finest in the country. State salaries at best are not equal to those increments which a sturdy and skillful physician can receive in industry or the community. The state service has heretofore offered two advantages: the work was not too difficult for the man whose health was not equal to the strain of travel at all hours and in all weather; the homes and family maintenance, while usually inferior to that which a man of similar training could provide for himself in the community, were basically satisfactory and could be added to as desired. In general, the children of doctors are regarded as a national asset; we are constantly being told that a weakness of the country is the failure of the professional class to reproduce itself numerically. I feel that state money is being

well spent when it encourages families among the resident officers of state institutions, particularly when the cost of maintaining a child in addition to the father's maintenance runs so far below the cost, for instance, of maintaining for life a woman patient who died last winter after 69 years in this institution.

I wish to express my appreciation of the efforts which have been made this year by Commissioner Bates on behalf of this hospital. He called a conference in the fall, with various authorities present, for the purpose of deciding upon the proper increases for the nurse and attendant groups and then followed the matter up and had the increases made. He called a conference in reference to the policy of buying electric current rather than making it, and appointed an engineer from Washington to make a study of the situation. He was most active in the establishment of the 48 hour week. He named Dr. Cotton to the Central Office staff and Dr. Cotton has already made two surveys of this hospital, with studies of existing conditions and recommendations for improvements; at present he is having made, a series of complete measurements for a study of capacity, building by building, with a view to action on the problem of overcrowding.

In the following summaries of the reports from various divisions of hospital activity, two important groups are missing,—the clerical force of the medical department and the clerical force of the business department. I wish to pay tribute to the many faithful employees in these two divisions without whose constant, faithful and accurate work the treatment, maintenance and financial affairs of the entire institution would be in a state of unimaginable confusion. Each individual could well be mentioned for the way in which assignments have been carried out, even at times to the extent of many hours of evening work, but perhaps the credit can be given through the divisional heads, Mr. Harold Prettyman of the medical department and Mr. Robert Lowery of the business department both of whom have devoted themselves to the hospital interests with a loyalty and zeal of the highest type.

Health

The general health of the hospital population has been comparatively well maintained, although the effects of lower diet and less supervision could be observed. The death rate was slightly higher than that of the previous year, but below that of 1944. No epidemics of a serious nature

occurred. The number of deaths from tuberculosis was rather high, 97; the screening of the hospital population for this disease was continued as medical personnel permitted. Eight cases of erysipelas were reported and four of amebic dysentery. The fourteen typhoid carriers who have been kept in isolation since the outbreak of 1944 received periodic checks but continued positive. The usual health examinations of employees, veterinarian inspection of animals slaughtered for food, and periodic tests of water and milk were carefully maintained.

Statistical Resume

The medical clerical service was continued under the direction of Mr. Harold Prettyman, Chief Clerk, who has carried many responsibilities in a conscientious and loyal manner. Conditions in the Record Office were relieved by the return of Mr. Joseph Brown from army duty and he was again placed in charge of files and statistics. Much credit is due to this division for the manner in which work has been carried on despite the war time shortages of personnel and equipment. Some improvements have been effected this year, but the case record files are still inadequate and much of the office equipment badly worn out. Statistical tables will be found in complete form at the end of this report. A summary is incorporated at this point for reference.

General Data: During the year ending June 30, 1946, there were admitted 1,635 patients—762 men and 873 women. This figure is 109 over the admissions of last year. The admissions included 1,247 first admissions to any hospital for the insane—580 men and 667 women; 357 readmissions—172 men and 185 women; 22 transfers from other similar institutions in New Jersey—7 men and 15 women; 9 special cases—3 men committed under Provisions of Section 2:192-1-2 (Revised Statutes of 1937) and 6 women admitted for surgery or observation from The North Jersey Training School at Totowa; the number of patients discharged, including deaths were 1,481—700 men and 781 women—leaving an increase on the books of 154 patients at the close of the year.

There were under treatment 8,142 patients—3,804 men and 4,338 women—which was 266 more than the preceding year. The maximum census for the year was 6,680 obtained on June 15th, and the highest number actually in the hospital any one time was 5,753 on April 12th. The average daily number in the hospital was 5,684.6. At the close of the year 905 patients—330 men and 575 women—were carried on pa-

role or visit and 25 patients—21 men and 4 women—were carried on escape. This is an increase of 40 over the number outside of the institution at the close of last year making an increase of patients actually in the institution at the close of the year 114.

First Admissions: There were 889 patients of native birth—404 men and 485 women; the foreign born number 358—176 men and 182 women or 28.7 per cent. of the total first admissions and is 1.1 per cent. less than last year. Both parents of 515 patients were also of native birth, while in 81 cases one parent was born in this country and the other was of foreign birth. Of the foreign born patients, 73 were natives of Italy, 51 of Germany, 35 of Ireland, 44 of Poland and 26 of England, these five countries furnished 63.9 per cent. of the foreign born first admissions. The naturalized citizens numbered 236 and the aliens 122.

Table 6, psychoses of first admissions, shows 365 patients diagnosed as suffering with Cerebral Arteriosclerosis, 215 with Dementia Precox, and 100 with Manic Depressive Psychosis. These three groups furnished 54.5 per cent. of the total. Other psychoses showing high incidence were Involutional 101; Senile 95; Syphilitic Meningo-Encephalitis 43; Paranoid Condition 27; Psychopathic Personality 35; Mental Deficiency 29; Psychoneurosis 31.

In the classification according to color 1,117 patients—514 men and 603 women were listed as white, 128—65 men and 63 women as black, and 2 patients—1 man and 1 woman as yellow.

The age tabulation reckoned in five year groups shows that the median line for admissions fell between the ages of 50 to 54 half of the total admissions being below this age and half above; the greatest number of admissions were listed in the four five year periods between 25 to 29; 35 to 39; 45 to 49 and 55 to 59, and included 33.6 per cent. of the total. Under 25 were 111 patients and 265 were 70 and over.

As to degree of education, 713 or 57.2 per cent. had received a common school education, 314 were graduated from high school and 69 had collegiate education; 126 were listed as having learned to read and write and 25 were illiterate.

There were 1,160 patients of urban environment or 93 per cent. of the first admissions. The rural district supplied 87 patients.

The economic conditions of 981 patients or 78.7 per cent. was listed as marginal; 227 dependent and 39 as comfortable.

In regard to the use of alcohol, 467 were described as abstinent, 601 as temperate and 179—131 men and 48 women—as intemperate.

The marital condition of the first admissions was classified as follows: single, 351—193 men and 158 women; married, 534—246 men and 288 women; widowed, 274—94 men and 180 women; separated, 54—31 men and 23 women; divorced, 34—16 men and 18 women.

Readmissions: The total in this group was 357—172 men and 185 women. In the classification according to psychosis, 136 were suffering from Dementia Precox and 69 from Manic Depressive insanity or 57.4 per cent. of the readmissions.

Discharges: The total of those discharged regularly from the care of the institution was 818—392 men and 426 women. Of this number 366—164 men and 202 women—were considered recovered from their psychosis. This is 29.4 per cent. based on the number of first admissions and 7 per cent. less than last year. A total of 374—177 men and 197 women—were discharged as improved or 30 per cent. based on the number of first admissions and is 5.2 per cent. more than last year. The manner of discharges of the remaining patients was as follows: unimproved 17—4 men and 13 women; without psychosis, 61—47 men and 14 women. In addition to those discharged, 23 patients—16 men and 7 women—were transferred to other similar institutions in New Jersey; also 13 special cases—3 men committed under Provisions of Section 2:192-1-2 (Revised Statutes of 1937) and 10 women admitted from The North Jersey Training School at Totowa for surgery or observation. Of those discharged as recovered, patients suffering from Manic Depressive Psychosis constituted 33.06 per cent. or 121 patients.

Deaths: During the year 627 patients died—289 men and 338 women. This is a rate of 7.7 per cent. based on the number under treatment and is 0.6 per cent. more than last year.

The largest single cause of death was disease of the circulatory system which was certified in 342 cases or 54.5 per cent. of the total number. This is 7.6 per cent. less than last year.

Syphilis was the cause of death in 17 cases; tuberculosis in 97; cancer and other tumors 22; lobar pneumonia 14; and broncho pneumonia 12. The psychoses of those who died included psychosis with Cerebral Arteriosclerosis 297; Dementia Precox 91; psychosis with Syphilitic Meningo Encephalitis 37; Senile 83 and Manic Depressive Psychosis 31.

The average age at death was 64.98 years and is 1.33 per cent. less

than last year. At the time of death 427 patients or 68.1 per cent. had passed the age of 60 years and is 4 per cent. less than last year. Those over 70 years of age were 282. Of these 93 were in the 80's and 18 in the 90's.

The tabulation of the duration of hospital life showed that 124 had been in the hospital less than one month and 45 patients had a hospital residence of 20 years and over at the time of death; and of these, 32 were suffering from Dementia Precox.

For a number of years finger printing of patients for identification purposes has been carried on at the institution. During the past year 966 prints were made, 417 men and 549 women, making the grand total on June 30th, 12,507 finger prints of patients on file, 6,212 men and 6,295 women.

Clinical Work

As Clinical Director, Dr. Laurence M. Collins continued throughout the year to conduct staff meetings, supervise and direct the medical staff, the hospital social service and the division of education and also to act as chief surgeon of the institution. At the beginning of the period, his duties were excessively heavy and the medical personnel greatly reduced. As the physicians were discharged from army duty and returned to the local staff the situation began to improve and at the end of the year was more nearly normal than at any time in the past five years. Unfortunately, this applied only to the medical staff, not to the nurses and others who are vitally important in carrying out treatment procedures. Too much credit cannot be given to Dr. Collins for the manner in which he maintained standards of medical and psychiatric service throughout the war period, when he and the other resident physicians were carrying on under heavy strain. His report is as follows:

"As in former years, I am submitting a statistical resume of the activities of the hospital in the course of the fiscal year.

We admitted 1,635 patients during the year, 109 more than last year, and only 31 less than our greatest admissions in 1936 and 1937, when we admitted 1,666 each year. But in those years there were almost fifty more men than women admitted, whereas this year we admitted 111 more female than male patients. This corresponds to the 111 female excess of 1943, when our total admissions were 1,375, but is a drop from last year's 224 excess of women out of 1,526 total admissions.

Apparently these figures can be interpreted as follows: There was an absolute drop in male admissions as the armed forces took more and more men from civilian population, with a low of 651 male admissions last year when the military was at peak load. This year there is an increase of 111 men over last year, corresponding to the return to civil life of service men, and the difficulty many of them have in being hospitalized in army and veteran hospitals; the female admissions are the same as last year, or actually 2 less.

The first admissions for the year were divided 53.4 per cent. women and 46.6 per cent. men and the same percentage was true of the total admissions. First admissions to any mental hospital totalled 1,247; readmissions 357 and transferred patients 22. While 1,635 entered, 1,481 left during the year. Of these 818 were discharged, 366 or 29.4 per cent. (of first admissions) as recovered, 374 or 30 per cent. as improved and 17 as unimproved, with 61 discharged as without psychosis. The recovery rate is 7 per cent. less than last year, but the improved rate is 5.2 per cent. more. This may indicate a greater conservation in evaluation of recovery; or it may indicate the shortage of treatment facilities at the end of the war period. One third (33.6 per cent.) of those considered recovered were diagnosed in the manic depressive group. Deaths during the year totaled 627, or 7.7 per cent. of the total number under treatment, which is only 0.6 per cent. greater rate than last year. Of these 83 went to autopsy, or an average autopsy rate of 13.4 per cent. slightly lower than last year.

Our population continues to grow older; the median was in the 50-54 year old group this year, whereas it was in the 45-49 year old group last year. We admitted 265 patients who were 70 years old or over; 460 were diagnosed in the senile and cerebral arteriosclerotic categories this year from our first admissions.

The greatest single diagnostic group was the 365 cerebral arteriosclerotics; next was 215 diagnosed dementia precox, while 100 were classed as manic depressives and 101 as involutional; senile psychoses showed 95, psychoses with syphilis 43, paranoid condition 27, psychopaths 35, mental defectives 29 and psychoneurotics 31.

Dr. Archie Crandell returned in January to resume his duties as Assistant Clinical Director, he entered active duty with the Army Air Forces January 21, 1943. Eight physicians and one dentist are veterans of World War II; Dr. William H. Longley, Jr., entered active duty April

10, 1941 and finished his terminal leave April 6, 1946; Dr. Jack Oatman entered active duty April 10, 1941 and his terminal leave expired February 22, 1946; Dr. Amedeo C. Naclerio served from June 18, 1942 to March 7, 1946; Dr. Archie Sofman from July 19, 1942 to March 26, 1946. These doctors all returned to the hospital during the latter days of 1945 and after a vacation period reported for duty while still on terminal leave. Having been carried on military absence during their time in the army, they were promoted to senior resident physicians on their return. Dr. James R. Mentel, Senior Dentist, served with the Navy from February 25, 1943 until February 20, 1946 and is now once more in charge of the Dental Division.

Three physicians, not formerly on the staff, have come to us after varying lengths of service in the army; Dr. Joseph F. Zigarelli, from September 17, 1941 to February 7, 1946; Dr. Robert P. F. Fitzgerald, from July 1, 1941 to December 17, 1945 and Dr. Kenneth M. Bremer from May 12, 1942 to March 28, 1946.

The return of these doctors from the service has made possible the more adequate covering of the wards and greater attention to the care of the patients. The staff was not, however, returned to the pre-war strength. Dr. William O'Gorman, Dr. Benjamin Wassell, Dr. J. Lloyd Morrow, who has been carried on military absence, have not returned to the staff, preferring private practice on leaving the army. I wish to express at this time the deep appreciation we feel toward those members of the staff who worked with such loyalty and devotion to duty throughout the war years.

The distribution of the staff to services has been three doctors each on the male reception service, female reception service, main building male service, main building female service; two on the clinic building surgical service, shock therapy service, dormitory service and one in the out-patient and in the tuberculosis unit. Specialists include eye, ear, nose and throat, x-ray and electrotherapy, and pathologist; part time specialists in chest diseases and in proctology and urology are still serving.

Staff meetings were held five times a week, Mondays for the consideration of cases for parole and discharge Tuesdays and Fridays for the diagnosis of women patients and Wednesday and Saturdays for diagnosis of men patients. In addition, ward rounds with the Superintendent were made each Monday and all the newly admitted patients of the preceding week were seen, temporary diagnoses made and cases assigned for study to the various staff members. Considerable instruction, for the newer members especially was carried on at these meetings, and the affiliate nurses and theological students also made use of the staff meetings for teaching purposes.

Dr. Esposito has been in charge of the shock service for the past several years. Dr. Zigarelli who has served in the army for a long period of time came directly to us from the service in November, 1945 and has been valued as assistant to Dr. Esposito. This service is still in need of additional medical personnel which we hope we will be able to obtain in the near future so that the doctors will be able to give more time to psychotherapy in the cases under their immediate supervision. The shock treatment has still been carried out on both the male and female services in the Main building.

Appended is a summarized statement of the movement of non-resident and deportable patients during the year which as usual has been handled through this division.

Cases transferred outside the State	23
Cases transferred to mental hospitals within the State	19
Cases transferred to the North Jersey Training School	5
Cases handled and reported who were removed by relatives, discharged or died	36

Shock Therapy

An active shock therapy service was again maintained under the experienced direction of Dr. Amedeo Esposito, assisted since November by Dr. Joseph Zigarelli. Fine results have been obtained, especially in spite of the lack of a properly trained and adequate force of nurses and attendants for the exacting requirements of this service. From Dr. Esposito's detailed report I have selected the following:

"Insulin continued to be the most used form of shock, 9,736 injections being recorded this year; 173 metrazol injections were given and 6,260 electro-shock treatments. During the year the use of introcostrin (curare) in combination with electro-shock was begun and was used in 60 treatments where electro-shock alone was contraindicated because of some skeletal deformitory or old fracture.

Treatment was completed on 298 patients—122 men and 176 women, Still undergoing treatment at the end of the year were 114 patients—55 men and 59 women—making a total of 412 patients—177 men and 235

women—who were treated on the service during the year. Of the 298 patients whose treatment was completed, 21 patients—13 men and 8 women—remained in the hospital unimproved; 35 patients—13 men and 22 women—remained in the hospital improved; 242 patients—96 men and 146 women—were paroled or discharged from the hospital. These figures reduced to percentages show 7.1 per cent. unimproved, 11.7 per cent. improved but under hospital care, and 81.2 per cent. paroled or discharged. Not all patients who were paroled were considered recoveries. Of the 96 male patients, 8 were returned; 2 of these were reparoled after a short course of treatment; the other 6 were still in the hospital at the close of the year. Three male patients were transferred to a veterans' hospital before treatments were completed. Included in the 122 men under treatment were 5 who had been returned from parole granted during the previous year. Of the 146 women patients who were paroled, 13 were returned to the hospital; of these, 7 were reparoled after further treatment and 6 were in the hospital at the close of the year. Included in the total of 176 under treatment were 14 women who had returned from paroles granted the previous year. Results in cases of dementia precox group who had been ill over two years continued to be better than expected, with over 58 per cent. of those treated being paroled. These were not necessarily cured, but had at least improved sufficiently to adjust at home under supervision.

Women patients from the Reception building who could not be admitted to the shock therapy wards because of lack of space were brought over three times a week for electro-shock treatments. During the year these treatments were completed on 118, of whom 64 were paroled and 54 remained in the hospital. In the Main building older resident wards, electro-shock treatments were given twice each week throughout the year.

Two patients died while undergoing treatment; both were in critical condition from exhaustion delirium when they reached the hospital and shock was administered in a vain effort to save them. One fracture was incurred during electric shock and a patient while undergoing insulin shock sustained rupture of a gastric ulcer. This case of ruptured ulcer and the case during the previous year, when one of the patients suffered a ruptured stomach with carcinoma, lead me to believe that insulin treatments are especially hazardous to individuals with stomach ulcers or other stomach pathology.

The women's ward has been filled to capacity throughout the year. Among men patients, however, many of the acute psychiatric cases still go to the veterans' hospitals, either by first admission or by early transfer; this limited considerably the total number of cases treated as well as the amount of material from which the selection for shock therapy was made and probably accounted for the difference in rate of parole among those treated, which was only 78.6 per cent. for the men as compared with 82.9 per cent. for the women.

Lack of personnel has been more pronounced since the loss of the services of the conscientious objectors, who were a great help on the men's wards during the war years. Two experienced women nurses were also lost from the service. At the end of the year the shock therapy wards were still not supplied with a trained group of attendants and nurses."

Surgical Operations, Accidents, Births, Etc.

In addition to his duties as Clinical Director, Dr. Laurence M. Collins continued to serve as chief surgeon of the hospital and performed most of the major abdominal operations himself. He has submitted the following report of the work in this division:

"As in former years, most surgical procedures were carried out in the main operating room in the Clinic building where a modern surgical operating table is located. In this same building is also located a fracture room well equipped with up to date appliances. Other operating rooms have been maintained in the Main building and other areas where minor surgery and emergency treatments received prompt attention. Dr. Edward Kessler has remained in charge of all orthopedic procedures, has assisted Dr. Gambill and myself, and has also frequently performed major surgical operations."

No. of Cases	*Diagnosis*	*Operation Performed*	*Result*
2	Carcinoma of trachea	Gastrotomy	Died
2	Tumor of left breast	Tumor enucleated	Recovered
1	Abscess of right breast	Incised and drained	"
1	Gangrene of leg	Amputation of leg above knee joint	"
4	Left indirect inguinal hernia	Left Bassini	"
3	Right indirect inguinal hernia	Right Bassini	"
3	Double indirect inguinal hernia	Double Bassini	"

No. of Cases	Diagnosis	Operation Performed	Result
3	Left direct inguinal hernia	Left Bassini	Recovered
2	Right direct inguinal hernia	Right Bassini	"
1	Tumor mass in right testicle	Right orchidectomy	"
1	Left hydrocele	Bottle operation	"
1	Ventral hernia	Tissues dissected and walls repaired	"
5	Acute catarrhal appendicitis	Appendectomy	"
6	Chronic catarrhal appendicitis	Appendectomy	"
4	Acute gangrenous appendicitis	Appendectomy with drainage	"
2	Acute suppurative appendicitis	Appendectomy with drainage	"
4	Chronic cholelithiasis	Cholecystectomy	"
1	Tuberculous peritonitis	Laparotomy	Improved
1	Intestinal obstruction due to adhesions	Adhesions freed	Recovered
1	Subdiaphragmatic abscess	12th rib resected, right side, with drainage	"
3	Ischiorectal abscess	Incised and drained	"
3	Foreign body in stomach	Gastrotomy	"
1	Ruptured pyloric ulcer	Ulcer area cauterized and wound purse stringed	"
4	Ruptured gastric ulcer	Ulcer area cauterized and wound purse stringed	"
1	Ruptured duodenal ulcer	Ulcer area cauterized and wound purse stringed	"
6	Fibroid uterus	Supravaginal hysterectomy	"
3	Fibroid uterus, laceration of cervix	Panhysterectomy	"
7	Fibroid uterus, double fibrocystic ovaries, double salpingitis	Supravaginal hysterectomy with double salpingo-oophorectomy	"
1	Fibroid uterus, large intraligamentous cyst, double cystic ovaries, double salpingitis	Supravaginal hysterectomy with double salpingo-oophorectomy	"
1	Fibroid uterus, right cystic ovary, double salpingitis	Supravaginal hysterectomy with double salpingo-oophorectomy	"
2	Right ovarian cyst, prolapse of uterus	Right oophorectomy with suspension of uterus	"
1	Left ovarian cyst	Left oophorectomy	"
1	Double cystic ovaries	Double oophorectomy	"
1	Left cystic ovary, left salpingitis	Left salpingo-oophorectomy	"
1	Large eroded cervix	Amputation of cervix	"
1	Fracture of mandible	Jaw wired	"
1	Fracture of index finger	Fracture reduced, splint applied	"

No. of Cases	Diagnosis	Operation Performed	Result
1	Fracture 3rd finger, right hand	Fracture reduced, splint applied	Recovered
1	Fracture right 3rd phalanx	Fracture reduced, cast applied	"
1	Fracture 1st phalanx, right ring finger	Fracture reduced, splint applied	"
1	Fracture right 4th and 5th metacarpal bones	Fracture reduced, cast applied	"
13	Left Colles' fracture	Fracture reduced, cast applied	"
7	Right Colles fracture	Fracture reduced, cast applied	"
1	Fracture distal end right ulna	Fracture reduced, cast applied	"
1	Fracture lower third right radius	Fracture reduced, cast applied	"
1	Fracture middle third, radius and ulna	Fracture reduced, cast applied	"
2	Fracture middle third, left ulna	Fracture reduced, cast applied	"
1	Fracture lower third, left ulna	Fracture reduced, cast applied	"
1	Chip off styloid process, left ulna	Fracture reduced, cast applied	"
1	Fracture of right humerus, upper third	Fracture reduced, immobilized with adhesive	"
1	Fracture of right humerus, upper third	Fracture reduced, Kirschner wire inserted, cast applied	"
2	Fracture neck of right humerus	Fracture reduced, immobilized with adhesive	"
3	Fracture neck of left humerus	Fracture reduced, immobilized with adhesive	"
1	Fracture neck of left humerus	Fracture reduced, immobilized with adhesive	Died
1	Fracture neck of left humerus	Fracture reduced, cast applied	Recovered
1	Supracondylar fracture, right humerus	Fracture reduced, cast applied	"
1	Fracture head of right humerus	Fracture reduced, cast applied to right arm and body	"
1	Fracture middle third, right humerus	Fracture reduced, cast applied	"
1	Fracture distal third, right humerus	Fracture reduced, cast applied	"

No. of Cases	Diagnosis	Operation Performed	Result
5	Fracture right clavicle	Fracture reduced, immobilized with adhesive	Recovered
			"
1	Fracture of posterior fossae, base of skull, comminuted fracture of nasal bones, fracture of mandible	Treated for shock	Died
1	Fracture of 3rd and 4th thoracic vertebra	Body cast applied	Recovered
1	Fracture 9th rib	Immobilized with adhesive strapping	"
1	Fracture 11th rib	Immobilized with adhesive strapping	"
2	Fracture of pelvis	Immobilized with sand bags	"
1	Fracture left ramus of pelvis	Immobilized with adhesive strapping	"
1	Fracture of pubic bone	Immobilized with sand bags	"
8	Fracture neck of left femur	Fracture reduced, immobilized with sand bags	"
4	Fracture neck of left femur	Fracture reduced, immobilized with sand bags	Died
16	Fracture neck of right femur	Fracture reduced, immobilized with sand bags	Recovered
1	Fracture neck of right femur	Fracture reduced, immobilized with sand bags	Died
1	Fracture upper third left femur	Fracture reduced, cast applied	Recovered
1	Fracture head of left femur	Open reduction, Parahm bands applied	"
1	Fracture left femur	Open reduction, pinned with Lorenzo screw	"
1	Fracture left femur	Open reduction, pinned with Lorenzo screw	Died
2	Fracture right femur	Open reduction, pinned with Lorenzo screw	Recovered
1	Fracture right femur	Fracture reduced, cast applied	"
1	Intracapsular fracture neck of right femur	Immobilized with sand bags	Died
2	Intracapsular fracture left femur	Immobilized with sand bags	Recovered
2	Intertrochanteric frature left femur	Immobilized with sand bags	"
2	Intertrochanteric fracture right femur	Immobilized with sand bags	"
4	Fracture lower third, right tibia	Fracture reduced, cast applied	Recovered

No. of Cases	Diagnosis	Operation Performed	Result
2	Fracture lower third, left tibia	Fracture reduced, cast applied	Recovered
			"
1	Fracture upper third, left tibia	Fracture reduced, cast applied with a walker	"
2	Fracture lower right fibula	Fracture reduced, cast applied	"
1	Fracture head of left fibula	Fracture reduced, cast applied	"
2	Fracture right patella	Open reduction, Kirschner wire inserted	"
1	Fracture 2nd metatarsal, right	Fracture reduced, cast applied	"
1	Fracture 2nd, 3rd and 4th toes and left fibula, lower third	Fractures reduced, cast applied	"

The proportion of accidents and injuries has continued high as a result of overcrowded conditions on the wards and depleted personnel. Eight patients, three women and five men, succeeded in committing suicide this year, all by hanging with some article of clothing or bedding fastened to some firm support, such as bed, table, door or window guard. Because of the lack of attendants and nurses it was possible for these acts to be performed unobserved. One man died as the result of an accident which occurred before his admission to this hospital, but is included in the statistical table under Violent and Accidental deaths.

Three babies were born in the hospital this year, all normal and spontaneous deliveries. The record is as follows:

Female child, legitimate, colored, born December 17, 1945; removed from hospital on February 17, 1946, by an aunt.

Female child, legitimate, born on December 22, 1945; removed from hospital on January 10, 1946, by mother and her husband.

Male child, illegitimate, born May 8, 1946; child still remains in this hospital.

Health Service For Employees

The employees' health center is located in the Clinic building and comprises an examination and treatment service on the first floor and a hospital ward on the third floor. Surgery for employees has been carried on in the regular operating rooms and is included in the foregoing lists. Dr. Joseph Donovan, senior physician, has continued in charge of employees' medical services, assisted by other physicians and specialists as required. The figures for this year show a considerable

increase over those of 1945, amounting to approximately 10 per cent. in ward admissions and 60 per cent. in the out-patient clinic. Ward service was still far below pre-war levels, reflecting the reduced personnel. Dr. Donovan's report has been summarized as follows:

"At the out-patient clinic 597 physical examinations were made of new employees and 79 re-checks on food handlers and milkers. There were 82 physical examinations and re-checks made of conscientious objectors and 100 examinations made of conscientious objectors prior to discharge (selective service.) A total of 422 inoculations were administered during the year, 314 of which were typhoid; 45 vaccines were given, 41 being small pox. Other treatments and examinations numbered 3,377, giving a total of 4,702 services rendered in the clinic.

A total of 434 were admitted for care on Ward M-3; seven deaths occurred, including one employee who died on his way to work of coronary thrombosis and was brought in for examination. Three other men employees varying in age from 67 to 69 died, two of carcinoma and one of chronic myocarditis. The mother of a physician, the mother of an employee, and the wife of an employee also died on M-3.

Communicable diseases treated included 9 pneumonia, 1 measles and 3 pulmonary tuberculosis. Diseases of the digestive system numbered 72, including 35 intestinal grippe. Diseases of the respiratory system were most numerous, totalling 177 of which La Grippe supplied 106, bronchitis 17, and upper respiratory infections 33. Diseases of the circulatory system numbered 32, of the eye, ear, nose and throat, 13; there were 15 sprains and 6 fractures listed, as well as 23 infections. Surgical cases numbered 16."

Division of Urology, Proctology and Colonic Therapy

Dr. Marshall D. Hogan has continued as part time specialist in this division, making regularly scheduled visits to the hospital and responding readily to emergency calls. Mr. Jack Taylor, a nurse trained in this field, has carried on the colonic therapy service for male patients, but no such treatment has been available for women patients. Dr. Hogan has submitted the following figures:

UROLOGY

Operations:	*Men*	*Women*	*Total*
Penal biopsy	2		2
Extravasation of urine	1		1
Medical Services:			
Cystoscopies	8		8
Cystoscopies with urological work up	2		2
Pyelograms	4	1	5
Urethral dilatations	31		31
Bladder irrigations	4		4
Urethral smears	3		3
Prostatic smears	11		11
Retention catheters inserted	44		44
Prostatic massages	102		102
Catheterizations	73		73
Total	282	1	283

PROCTOLOGY

Operations:	*Men*	*Women*	*Total*
Hemorrhoidectomies	9	1	10
Prolapsed rectum	3		3
Proctotomy	1		1
Fecal impactions	2		2
Total	15	1	16
Medical Services:	*Men*	*Women*	*Total*
Examinations	556	88	644
Consultations with examinations	82	28	110
Proctoscopic examinations	6	2	8
Total	644	118	762

COLONIC THERAPY

	Men
Number of colonic irrigations given	2,872
Number of patients treated	484
Number of patients completed	213
Average number of irrigations per patient	13
Number of fecal impactions removed	68

Gynecological Division

Dr. Merna M. Warne has continued to carry on the gynecological work of the hospital in addition to part time duties in other areas of the institution. She has kept up the standard of her work and maintained an active service in this important specialty. Her summary runs as follows:

EXAMINATIONS

Newly admitted patients	642
Patients returned from visit or parole	30

Ward patients	120
Prenatal examinations	24
Employees	38
Total	854

TREATMENTS

Ward patients	575
Employees	118
Total	693

TYPES OF TREATMENTS

Endocervicitis	171
Trichomonas vaginalis vaginitis	84
Non-specific vaginitis	202
Endocrine disorders	162
Retrodisplacement of uterus	34
Cervical polypectomy	12
Subinvolution of uterus	9
Vaginal pack	6
Prolapse of uterus	8
Removal of foreign body from vagina	2
Surgical removal of pessary	1
Incision of breast abscess	2
Total	693

DIAGNOSTIC PROCEDURES

Vaginal smears	676
Vaginal suspensions	90
Cervical cultures	10
Prostigmine pregnancy tests	8
Biopsies	12
Total	796

During the year 34 patients were referred to the Surgical Division. Prenatal care was given to all pregnant patients and there were three normal, spontaneous deliveries.

Division of Oral Surgery and Dentistry

More even than most other treatment services of the hospital the dental clinic has suffered during the past year from shortages and changes in personnel. Edwin E. Saunders, D. D. S., continued as director from the beginning of the year until James R. Mentel, D. D. S., who had been on military leave, returned to the institution in February and resumed

the position he had held prior to being called into service. Dr. Saunders remained in the division until the end of the fiscal year, and on July 1st is scheduled for transfer to a similar position as director of dental service in another state institution. Dr. J. Y. Bloom continued as junior resident dentist until his resignation on February 3, 1946. Dr. R. G. Strickler who had been appointed as dental interne on November 8, 1945, was promoted to junior resident dentist on March 16, 1946. Dr. Seymour Neleber was appointed dental interne in December, 1945, but plans to enter military service in the near future. The present staff has one vacancy for a dental interne, and Dr. Neleber's resignation will make a second. The shortage of nurses has seriously affected this division also; at present there are only two on duty, which is half of the normal staff.

Examinations of newly admitted patients have been continued and as much work as possible has been done for these patients and for those referred to the dental clinic by the ward physicians. Since this was more than could be fully handled by the present staff, no routine ward examinations were attempted.

The prosthetic section of the dental clinic has continued to function well with Mr. Patrick DeNapoly carrying on the work of dental laboratory technician. In addition to the requirements at this institution the prosthetic work of The North Jersey Training School at Totowa, the New Jersey State Home for Boys at Jamesburg, and the New Jersey State Reformatory at Rahway has been done at this hospital. Assistance has also been given to the near-by Morris County Welfare House.

EXAMINATIONS

Total visits to clinic	5,843
Individual patients examined	1,899

X-RAYS

Intra-oral	1,166

TREATMENTS

Prophylaxis	243
Vincent's infection treatments	77
Other conditions treated	2,094
Total	2,414

FILLINGS

Amalgam	601
Silicate	392
Gold	7
Total	1,000

ORAL SURGERY

Impactions removed	28
Cysts removed	2
Surgical removal of teeth	192
Alveolectomies	17
Reduction of fractured jaw	5
Apioectomies	2
Muscle trim operation	1
Removal of growth from cheek	1
Removal of growth from palate	1
Torsus palatinis operation	1
Application of mandibular splint	1
Removal of epulis	1
Total	252

EXODONTIA

Extractions	3,160
Extractions Morris County Welfare Home	16

REPLACEMENTS

Dentures, full upper or lower	162
Dentures, partial with gold clasps	53
Dentures, partial with gold clasps and gold lingual bar	49
Total	264
Bridges, fixed and removable	3
Dentures repaired	201
Intermaxillary splints	3

NORTH JERSEY TRAINING SCHOOL (TOTOWA)

Dentures, full upper and lower	8
Dentures, partial with gold clasps	2
Dentures, partial with gold clasps and gold lingual bar	1
Dentures, repaired	8

NEW JERSEY REFORMATORY (RAHWAY)

Dentures, full upper and lower	3
Dentures, partial with gold clasps	14
Dentures, partial with gold clasps and gold lingual bar	2
Dentures repaired	9

NEW JERSEY STATE HOME FOR BOYS (JAMESBURG)

Dentures, partial with gold clasps	5
Denture, partial with gold clasps and gold lingual bar	1

Eye, Ear, Nose and Throat Division

Dr. P. J. Gambill has again carried on in the rather wide field included in this specialty. He is thoroughly competent and well trained and takes great pride and interest in his work. Although there has been no shortage of personnel in the division itself, the limited number of nurses and attendants on the various wards have made it necessary for Dr. Gambill and his nurse assistant to carry out in person many of the medications which in normal times were handled by the ward nurses. For the same reason, whenever possible, employed personnel under the care of this division were kept in their own homes, rather than send them to the employees' ward where the nursing force was sufficiently taxed without this additional burden.

Dr. Gambill has submitted an excellent report enumerating the great variety of conditions treated on this service, but for reasons of space, I have listed only the surgical operations. His report is in brief as follows:

"Acute infections about the head and neck have been very frequently encountered during the past year. Penicillin and the sulfa drugs have been used extensively, careful check being maintained by urinalysis and blood counts. No serious reactions occurred which failed to clear up. It was not necessary to perform a single primary mastoidectomy this year, although there were many cases with marked mastoid tenderness and pain, and although several patients treated for acute purulent otitis media were above 70 years of age. In the absence of penicillin and the sulfa drugs many would certainly have required operations.

Great service has been rendered to the patients by carefully refracting the eyes and prescribing proper glasses, which enable them to read and to be employed in occupational therapy and other useful and beneficial activities. Minor repairs to glasses have been made in this division while major work has been sent to the proper makers with an accurate prescription. All unclaimed glasses from deceased patients have been checked and given out to other patients if possible.

Audigrams of patients with any loss of hearing were made whenever possible, not only as a record but for the purpose of differentiating between perceptive and conductive deafness in order to determine the form of treatment. Audigrams have also been made of all employees who were injured about the ears while on duty.

In April, I attended a week's symposium at Gill Memorial Hospital

at Roanoke, Virginia, which covered the latest developments in medical and surgical procedure in my specialty. Drugs, instruments and equipment were among the subjects for discussion by the most prominent specialists in the country. I have continued my interest in plastic surgery and have availed myself of every opportunity for advancement in knowledge in this field, and also have kept informed on developments in internal medicine.

My departmental nurse has continued most efficient and co-operative and has maintained a constant effort to advance her knowledge and improve her work. Without her assistance much of the work of the division could not be accomplished."

EXAMINATIONS

ROUTINE eye, ear, nose and throat examinations of patients admitted... 1,635

Special Examinations:	*Eye*	*Ear*	*Nose*	*Throat*	*Total*
Employees	251	171	199	278	899
Patients	649	324	327	389	1,689
Total	900	495	526	667	2,588

TREATMENTS

Employees:	*Eye*	*Ear*	*Nose*	*Throat*	*Total*
Number treated	140	137	174	107	558
Number treatments	195	267	312	176	950
Patients:	*Eye*	*Ear*	*Nose*	*Throat*	*Total*
Number treated	1,097	407	356	255	2,115
Number treatments	1,681	899	886	619	4,085

SURGICAL OPERATIONS

Operation Performed:	*Patients*	*Employees*	*Total*
Adenoidectomies		2	2
Antrotomies	26	2	28
Cauterization, corneal ulcer	57	3	60
Cauterization inferior turbinate	29		29
Cauterization septum (epitaxis)	25		25
Cautery puncture ectropion eyelid	1		1
Cautery puncture entropion eyelid	2		2
Curettement of middle ear	12	2	14
Diagnostic laryngoscopy	26	21	47
Direct oesophagoscopy	18		18
Dilation eustachian tubes	71	27	98
Dilation lacrymal duct	5	4	9
Dilation naso-frontal duct	23	5	28
Dilation oesophageal stricture	2		2
Drainage, abscess over mastoid	2		2

Operation Performed: (cont'd)	*Patients*	*Employee*	*Totals*
Enucleation eyeball and gold ball implant	2		2
Ethmoidotomies	43	4	47
Ethmoidectomy	3		3
Fracturing turbinates of nose into position	57		57
Incision and drainage, abscess of external ear	7		7
Incision and drainage, abscess of orbit	2	1	3
Incision and drainage, abscess of septum	2	1	3
Incision and drainage, hordeolum eyelid	51	7	58
Incision and drainage, peritonsillar abscess		6	6
Intra-ocular discission secondary membrane, subsequent to cataract extraction	2		2
Iridectomies	4		4
Myringotomies		8	8
Paracentesis of eardrum	12		12
Plastic repair, penetrating wound into larynx	1		1
Post-operative curettement old mastoid cavity	2		2
Removal aural polyps	4	3	7
Removal nasal polyps	5	2	7
Removal cataract	3		3
Removal chalazion of eyelid	6	1	7
Removal (partial) epiglottis	1		1
Removal foreign body from ear	55		55
Removal foreign body from eye	46	41	87
Removal lingual tonsil	81	2	83
Removal (complete) of middle turbinate	3		3
Removal pterygium from eye	1		1
Removal tissue from larynx for biopsy	1		1
Repair, lacerated eyelid		1	1
Repair, perforated corneal ulcer	1		1
Repair, plastic, of eyelid	1		1
Resetting fractured nose		9	9
Secondary curettement mastoid antrum	2		2
Setting fractured nose	35		35
Sphenoidotomies	18	6	24
Submucous resection of septum, partial	2		2
Tonsillectomies, general anesthesia		2	2
Tonsillectomies, local anesthesia	101		101
Trachaeotomy	2		2
Turbinectomies, partial	16	3	19
Uvulectomies, partial	32	2	34
Total	903	165	1,068

Division of Pathology and Bacteriology

Dr. Carl M. Sagert has continued throughout the year as hospital pathologist. The main laboratory is housed in a separate building not far from the Dormitory group, while a smaller laboratory is maintained in the Clinic building adjacent to the hospital wards and treatment services. The importance of prompt and reliable laboratory service in a curative and treatment institution cannot be overestimated. Dr. Sagert has submitted the following:

"Several changes have occurred in the staff during the past year. Mrs. Irene Rutan is no longer with the division and Miss Katherine Kirkham is on extended leave of absence without pay. Miss Mary Jo Hatch and Mr. Archangel Danna have joined the staff as medical technicians, During the year no new cases of typhoid fever occurred, but several cases of amebic dysentery were found in the Main building, north. Penicillin has been used on several primary cases of syphilis and a few cases of tertiary syphilis. The results in the tertiary type have not been outstanding; further fractionation of penicillin may result in a more beneficial treatment for late syphilis."

The following tabulation shows the regular treatment for syphilis.

	Men	*Women*	*Total*
Number of cases under treatment	98	49	147
Number of doses of mapharsen administered	90	80	170
Number doses of tryparsamide and other drugs administered	3,066	1,380	4,446

SUMMARY OF THE WORK OF THE PATHOLOGICAL LABORATORY

Urine:	*Men*	*Women*	*Total*
General chemical and microscopic	2,267	4,444	6,711
P. S. P. test	6	3	9
Cultures	1	6	7
Hematology:			
Red blood cell count	1,042	1,526	2,570
White blood cell count	1,045	1,515	2,560
Differential count	1,030	1,506	2,536
Hemoglobin	1,069	1,544	2,613
Examination of malaria smears	17	9	26
Bleeding time	48	63	111
Clotting time	48	63	111
Sedimentation rate	14	30	44
Blood typing	3	3	6

Hematology: (cont'd)	*Men*	*Women*	*Total*
Fragility tests	2	0	2
Platelet counts	0	2	2
Reticulocyte counts	0	1	1
Blood Chemistry:			
Urea nitrogen	692	735	1,427
Non-protein nitrogen	329	512	841
Creatinine	261	356	617
Sugar	891	1,151	2,042
Calcium	1	3	4
Uric acid	10	2	12
Cholesterol	2	2	4
Vanden Bergh	11	15	26
Icterus index	10	21	31
Sugar tolerance tests	0	2	2
Sulfa determinations	11	11	22
Blood alcohol determination	1	0	1
Immunological:			
Agglutination test B typhosus, Para typhosa A and B	476	195	671
Agglutination test proteus Ox 19	1	1	2
Agglutination test B Abortus	7	4	11
Agglutination test B Melitensis	5	2	7
Wassermann	1,440	1,351	2,791
Kline	1,434	1,347	2,781
Mazzini	2	1	3
Spinal:			
Wassermann	495	205	700
Cell counts	453	170	623
Globulin	449	202	651
Protein	446	163	609
Colloidal gold curve	490	201	691
Quantitative sugar	472	143	615
Bacteriological:			
Autogenous vaccine (vials)	1	0	1
Blood cultures	2	1	3
Throat cultures	291	176	467
Sputum cultures	4	1	5
Guinea pig inoculations	3	1	4
Feces cultures	5	2	7
Cultures, all others	15	11	26
Smears for T. B.	4	29	33
Smears for G. C.	2	856	858

Bacteriological (cont'd)	*Men*	*Women*	*Total*
Smears for Vincent's Angina	49	44	93
Spinal fluid smears for organisms	2	1	3
Smears, for all other organisms	11	5	16
Feces:			
Routine, general and chemical	32	14	46
For parasites	65	28	93
NIH swabs	1	1	2
Miscellaneous:			
Gastric analysis	8	6	14
Duodenal drainage	1	0	1
Saline suspension for trichomonas vaginalis	0	76	76
Patients inoculated with malaria	56	14	70
Basal metabolism tests	12	31	43
Friedman tests	0	12	12
Semen analysis	7	0	7
Tissues, research	6	5	11
Tissues from autopsies, total number pieces	4	4	8
Tissues, surgical and biopsy, total number pieces	24	48	72
Autopsies	49	34	83
All other examinations	9	3	12
Total	15,644	18,915	34,559
Milk bacterial plate count			13
Water analysis			19
Grand total			34,591

Roentgenology and Electro Therapeutics

The major X-ray and other electrical equipment, including the electrocardiographic machine, is located in a suite of rooms in the Clinic building, although the Tuberculosis division has some equipment for its own use, the Dental clinic has an X-ray machine for intra-oral work, and a portable X-ray for fracture work has been in regular use by Dr. Kessler. The X-ray and electrotherapeutic center at the Clinic building has continued under the direction of Dr. George R. Hampton, senior physician, whose length of service on the hospital staff is equalled only by that of the superintendent. Dr. Hampton has submitted the following tabulation of the work done in his division this year:

ROENTGENOLOGY

EXPOSURES:	
Head	1,116
Maxilla	2,562
Chest	2,020

Abdomen (barium meal)	473
Kidney	26
Gall bladder	21
Pelvis	23
Spine	238
Upper extremity	529
Lower extremity	468
Total	7,476

DIAGNOSES:	
Fractures:	
Skull	6
Mandible	8
Clavicle	4
Ribs	15
Humerus	22
Ulna	8
Radius	20
Metacarpal	5
Phalange	16
Nasal bone	9
Femur	45
Tibia	7
Fibula	6
Metatarsal	6
Patella	2
Pelvis	6
Vertebra	3
Dislocations:	
Shoulder	2
Finger	1
Elbow	1
Osteomyelitis:	
Phalange	3
Femur	1
Fibula	1
Tibia	1
Humerus	1
Spine	4
Pelvis	1
Foreign Bodies:	
Stomach (knitting needle)	1
Esophagus (crochet needle)	1
Skull (bullet)	2
Hand (splinter)	3
Finger (steel)	2

Knee (bullet)	1
Orbit (steel)	2
Chest:	
Pulmonary tuberculosis (active)	267
Pulmonary tuberculosis (arrested)	182
Bronchitis	21
Pleurisy with effusion	13
Aortic aneurysm	20
Pneumonia	19
Bronchiectasis	8
Metastasis	2
Heart:	
Auricular fibrillation	7
Auricular tachycardia	8
Coronary insufficiency	16
Cardiac hypertrophy	45
Angina pectoris	3
Hypertension	16
Heart block	7
Heart failure	20
Mitral stenosis	24
Pulsus deficit	3
Ventricular premature beats	6
Myocardial infarct	2
Teeth:	
Impactions	179
Periapical abscess	61
Pyorrhea	62
Septic roots	61
Cysts	15
Miscellaneous:	
Pregnancy	4
Mastoiditis	60
Sinusitis	30
Arthritis (hypertrophic)	15
Arthritis (atrophic)	10
Cholecystitis	4
Gastric ulcer	3
Duodenal ulcer	4
Brain tumor	4
Carcinoma of colon	3

ELECTROTHERAPEUTIC AND X-RAY TREATMENTS

High frequency current	102
Galvanic current	30
Vacuum electrode	51
Diathermia	1,652
Infra red rays	357
Fulgration	9
Massage	950
Electrocardiogram	118
Intophoresis	15
X-ray treatments	192
Total	3,476

Tuberculosis

The general situation in the group of buildings assigned for the care of the tuberculous has not improved during the year. Space and equipment are still inadequate and the construction, food service and other essentials leave much to be desired. Plans have been approved for an addition to the original building, Pavilion 1, which will provide approximately 134 beds, and various other changes have been so strongly recommended by Dr. Cotton to Commissioner Bates, that prospects for improvement in the coming year seem better than average. The low personnel has been a most serious problem throughout the year as for a number of years past. Obviously, special inducements are required for obtaining properly trained nurses and attendants to care for the tuberculous insane, since the duties are difficult and in many ways unattractive. Up to the present time we have been unable to meet the competition and so are seriously understaffed.

Dr. Daniel G. Melvin has continued as physician for the tuberculosis service, with Dr. Harold S. Hatch as consultant spending two days each week at this hospital. Some additional screening of the general resident patient population has been done this year and a photo-roentgen unit is on order which should make it possible to carry on screening at a very nominal cost. Mr. W. T. Riker, hospital physiotherapist, who is also a registered X-ray technician, has continued to do X-ray work on this service two days each week. Dr. Melvin and Mr. Riker have taken some courses in New York for special X-ray technique, and Dr. Melvin and Dr. Oatman have been attending the Neurological Institute and Presbyterian Hospital one day each week, taking a course in neurology and neurological X-ray interpretation.

Dr. Melvin has submitted the following data:

"During the year there were 52 male admissions, 71 female admis-

sions; 47 male deaths, 39 female deaths; 8 male and 1 female tranfers to other buildings; 1 male voluntary patient discharged; 1 male and 1 female discharged to other hospitals; 1 male and 3 females paroled; 5 men escaped, 4 were returned and 1 discharged; 5 males and 2 females were discharged after one year's parole. At the close of the year there were 485 patients on the service."

X-rays

14x17	1,803
10x12	153
8x10	138
Total	2,094

The reported treatments are as follows: Hypodermics, 3,341; dentist, 264; eye, ear, nose and throat, 25; casts, 3; gyneological, 9; dressings, 3,356; treatments, 13,590; medications, 51,642.

Dr. Hatch has submitted the following statement of his work here as part-time consultant:

Chest Consultation Service

Examinations

Number of patients examined	2,750

Diagnoses:

Pulmonary tuberculosis, active:	
Minimal	64
Moderately advanced	562
Far advanced	261
Pleurisy with effusion	39
Total active	926

(Of the total active examined, 852 were old cases, previously diagnosed, and 74 were new cases.)

Pulmonary tuberculosis, inactive:	
Minimal	161
Moderately advanced	358
Far advanced	1
Primary	7
Total inactive	527
Other chest conditions:	
Asthma	1
Atelectasis	9
Atypical pneumonia	1
Bronchiectasis	2
Bronchopneumonia	5

Calcified pleura	3
Chronic adhesive pleuritis	41
Chronic pneumonitis	15
Empyema	1
Emphysema	2
Lobar pneumonia	2
Lung tumor	4
Mediostinal tumor	1
Pulmonary fibrosis	35
Silicosis	5
Spontaneous pneumothorax	1
Tuberculosis suspects	18
Diagnosis pending	5

Treatments:

Number artificial pneumothorax treatments given	660

Division of Education

Under the direct supervision of Dr. Collins, Clinical Director, Mr. George R. Koehler has continued as administrative assistant and director of education, His duties have included the training of a group of students "ministers in white", the interpretation of the hospital to visiting individuals and groups with tours and talks, and also the giving of lectures in the community. In addition to these teaching functions he has maintained close contact with newly admitted patients and their families for the purpose of furthering adjustment and understanding. His report runs in part as follows;

"As compared with pre-war years the number of visitors to the institution still reflects a slight decrease; this years' total number of visitors was 360. Of this number 63 came as individuals and 297 came in 27 groups. Eighty tours of the institution were arranged for these visitors.

Eighteen advanced graduate students of mental and social hygiene, assigned to the hospital by the Council for Clinical Training of Theological Students, Inc., of New York, spent from three to six months each in clinical training and observation under this division during the past year. On June 10th, nine additional students arrived to begin similiar studies. Mrs. Eileen Wells, assistant supervisor of last years' summer group, is again serving as co-supervisor in training this summer's group of students. Added emphasis is again being placed on this aspect of the work, inasmuch as these students, coming from widely scattered areas,

return to positions of community leadership. States represented by this years' group include Florida, Wisconsin, Kentucky, New Jersey and Washington, D. C. Considerable time was spent with the students in 295 seminars and discussions periods, while teaching activities occupied a total of 810 hours. The students again assisted the Physical Education division in supervising recreation for the patients of the hospital.

Conversations were held with all newly admitted patients for the purpose of interpreting the hospital to them and assisting them in cooperating with those in charge of their welfare. For an indefinite period following admission, friendly association with most of these patients has been maintained. Other work of the division included compiling statistical slips for each patient admitted; interviewing friends and relatives to assist them in understanding the hospital; conducting practical research in problems of mental health and sociology. Forty-two lectures were given in various communities and correspondence was carried on with schools, colleges and professional and lay individuals from various parts of the country.

The first post-war conference of the Council for Clinical Training, Inc., was held for three days November 26th through November 28th at the hospital. This was one of the highlights of the Educational Division's schedule. Twenty supervisiors of the total number in attendance received part of their training at this institution. For them the conference was a time of renewing acquaintanceships. Sessions were held mornings, afternoons and evenings with discussion groups centering the thinking on a review of the various training programs as a whole and projecting plans for the devolpment of this training in other institutions.

Special guests included Dr. Marcus Curry, Dr. Laurence Collins and Dr. Augustus Knight, each of whom brought greetings to the Conference. The Rev. Robert E. Brinkman, Director of the Council, the Rev. Otis Rice and the Rev. Thomas Bigham, members of the Executive Committee and the Rev. Dr. Anton T. Boisen, recognized as founder of the work, led interesting discussion groups.

Bibliography of Lectures

Topic	*Place or Group*
"Emotional Hygiene for Living"	Washington, N. J., B. P. O. E.
"Mental Health for Youth"	Chester N. J., Federated Church.

"Counseling the Individual"	Philadelphia Seminary, Philadelphia, Pa.
"Clinical Training at Greystone"	Succasunna, N. J. Methodist Church.
"Clinical Training for Pastors"	Paterson N. J., Ministerial Association.
"Clinical Training at Greystone"	Morristown, N. J., Presbyterian Church.
"Dealing With Ill People"	Madison, N. J., Drew Univ.
"Clinical Training of Pastors"	Philadelphia Seminary, Philadelphia, Pa.
"Educational Resources in Hospitals"	Philadelphia Seminary, Philadelphia, Pa.
"Educational Resources in Hospitals"	Hackettstown, N. J., Centenary Junior College.
"Understanding The Mentally Ill"	Hackettstown, N. J., Centenary Junior College.
"The Approach to The Mentally Ill"	Hackettstown, N. J., Centenary Junior College.
"Mental Health of the School Child"	Harding Township, P. T. A.
"Clinical Training of Students"	Albright College, Reading, Pa.
"Clinical Training at Greystone"	Morristown, N. J., Library Club.
"Mental Hospitals and Their Functions"	Given throughout the year to 27 visiting groups or classes from various schools and Colleges.

Occupational Therapy Division

Throughout the year the occupational therapy division has been handicapped by the general reduction of personnel on the wards and by an insufficient force of trained teachers. The lack of materials has also affected the program adversely, since it is much more difficult to inspire interest and enthusiasm for working with inadequate scrap than for handling attractive material from which useful and saleable articles can be made. Every effort has been made to obtain supplies, but even with priorities much that was needed was not to be had at all and other goods were obtainable only in small quantities.

Shortage of ward personnel affected the program in various ways. Most of the patients who were competent had to be assigned to routine housekeeping and maintenance duties; it was sometimes difficult to arrange for patients to be escorted to the occupational therapy buildings; ward occupational therapy was more difficult to carry on successfully when those not interested in the work were poorly supervised and disturbing to the class. In view of all these restrictions the division functioned well, most of the key personnel were retained and the organization is in condition to enlarge its program rapidly as soon as teachers and material can be obtained.

One loss in this division has been keenly felt. Mr. Hayden Melvin began his service to the institution on October 15, 1930. He was educated at Duke University and was a trained occupational therapist. At the Print Shop his services were invaluable, not only in the setting up and printing of *The Psychogram* and the annual report, but also in supervising and directing the activities of the patients under his charge, where his personality and training were highly effective. His decision to resign was motivated by unfortunate inequalities in the Civil Service reclassification which that department felt it impossible to adjust for his special status, and his services were terminated on May 31, 1946, after several months leave.

Dr. George B. McMurray continued in charge of the division and made a constant effort to have the job fit the needs of the patient, so that the therapeutic value should always be the first consideration. The general setup was unchanged; the chief working areas off the wards were the Women's Occupational Therapy building, housing arts and crafts and plain sewing, the Men's Occupational Therapy building for arts and crafts, the Print Shop, where ruling, binding and printing were carried on, and the Pottery Shop. Many other working areas were to be found in other parts of the institution where patient help was employed under the supervision of personnel not connected with the occupational therapy division, such as the kitchens, laundry, dairy, farm, garden, greenhouse and all the up-keep and housekeeping services.

In the Men's Arts and Crafts section were produced 982 baskets, chiefly from willow grown on the place and harvested and prepared by workers from this same shop, 944 rugs, 1,470 regular brooms, 511 brushes and whisk brooms, 246 scrub brushes, 1,509 pieces of pottery and numerous miscellaneous articles totaling 6,153. Repairs and articles

made for hospital use totaled 1,589. Approximately 5.75 tons of waste paper were salvaged and baled. Articles sent to the storehouse to be distributed on requisition numbered 2,323.

The Women's Arts and Crafts section made a total of 2,543 articles varying from afghans and rugs to pot holders and bean bags; 37 yards of tatting were also made here. Crocheting, embroidery, braiding, quilting and needlepoint were included in the activities, as well as hooked and braided rugs, plain hand sewing and lace making.

In the Plain Sewing section most of the work was done on power machines and clothing and household goods were made for hospital use. Included were 5,504 gingham dresses, 3,663 petticoats, 1,283 pairs of men's cotton pants, 9,010 sheets, 5,383 pillow cases, 13,467 towels, including 4,496 made from sugar bags and a great variety of other articles listed under 45 types and giving a grand total of 55,096.

At the Print Shop the numerous forms and blanks required in the institution were made up, the patients' monthly magazine, *The Psychogram* was made up, printed and prepared for mailing, the annual report was printed and bound, and books were rebound for the hospital library and for special orders. The amount of work done this year is listed as follows:

PRINTING AND BOOKBINDING PRODUCTION

	Printing	*Binding*	*Ruling*	*Padding*	*Pamp. Bind'g*
Greystone Park..	2,008,346	1,430	737,150	14,468	14,351
Trenton	3,502		13,200		
Total.....	2,011,848	1,430	750,350	14,468	14,351

Curative Workrooms

Mrs. Margaret DeVries continued throughout the year as Director of Curative Workrooms and made every effort to keep up an attractive program for those whose needs were best met by classes on or near their wards. Her results were extremely good when the conditions are taken into consideration. She has submitted the following data:

"In addition to the Director there were eight therapists on duty at the beginning of the year and during the period one returned from military leave of absence. A schedule of 26 daily classes was maintained with an average enrolment of 550 patients. Special attention was paid to the disturbed groups and the shock therapy wards. For each patient who participated in these classes a prescription was obtained from the

physician in charge; this was returned to him at the end of each three month period with notes on the progress made.

Affiliate student nurses received instruction for a short period each month, 459 taking the course during the year. Exhibits of the work done were sent to the Trenton State Fair, to the meeting of the New Jersey Hospital Association in Atlantic City and to the American Legion Exposition in Morristown. Two parties were given for the patients, one the annual hot dog roast, the other an ice cream, cake and coffee affair. These not only gave pleasure but also were encouraging and rewarding for the efforts made.

During the year there were made 3,813 articles for the salesrooms and 5,942 articles for hospital use. The latter were chiefly made up of discarded materials and supplied necessities for the sick wards.

On March 14th a State occupational therapy meeting was held in the assembly room of the Administration building at which 13 hospitals were represented. A tour of the hospital shops provided much interest. Mrs. Taylor, Chief Therapist at the Veterans' Hospital at Lyons gave an interesting talk. On May 3rd and 4th the State Association held its annual meeting at Atlantic City and one of the speakers was Dr. McMurray, using as topic, "Occupational Therapy at Greystone Park."

Physical Education Division

No division in the hospital has suffered more acutely from lack of personnel than that of physical education. For most of the year, only Mrs. Dorothy Driscoll Johnson, Director, and two assistant teachers have been on duty, in comparison with nine regular assistant teachers and a vacation relief teacher fifteen years ago. Mrs. Johnson has not only given physical instruction but has also provided and supervised all group recreational and amusement activities, except those put on by individual divisions for their own patients. Considering the difficulties encountered, she has done a remarkable piece of work, for not only has the divisional and the ward shortage of personnel been extreme, but the lack of supplies had made it difficult or impossible to furnish the extras, such as sandwiches and cold drinks, or doughnuts and coffee which make ordinary gatherings into parties. During the war period classes in this division were frequently called upon to assist in the gathering of garden crops, and finally such assistance amounted to a great deal of work over a two month period.

Lack of personnel has made it necessary to close the classes on the twelve Main building wards for women patients, and also to discontinue the monthly parties for these groups. This leaves without stimulus to activity the majority of longer resident women patients for whose benefit the division was originally organized. Emphasis has now been placed on work with shock therapy patients, and with those from the various buildings who are in sufficiently good condition so that they can be handled off their wards with limited personnel.

Mrs. Johnson has submitted the following data: "Women working patients from the Main building were met one morning and one afternoon each week for games, such as volley-ball, badminton, tennis, croquet, or bowling and for special exercises in the gymnasium. For Dormitory building women there was a morning class in bowling once a week, and an afternoon class at the gymnasium. The men had a bowling class one afternoon a week. The women patients undergoing shock therapy have had three mornings a week for gymnasium exercises or games. Outdoor games and bowling were also arranged for the men patients in the shock therapy group. Average daily attendance at classes throughout the year was: Men, 30; women, 82. The total attendance at parties was: Men, 1,357; women, 1,986; total, 3,343.

Once each month a moving picture was shown with the small portable machine in the gymnasium of the Reception building. Each picture was run off four days in succession; on Saturday for the patients who worked in the laundry; on Monday for the shock therapy patients, men and women; on Tuesday for the Dormitory building, men and women; and on Wednesday for the Main building, men and women. All groups had to be small enough to be controlled by the teachers and seated in this far from large space. This year, as for some years back, it has been impossible to hold the regular moving picture shows and dances at the Dormitory building which were long a feature of the hospital amusement program and the affairs have been sadly missed. A few small tea dances were arranged for shock therapy and Reception building patients in the gymnasium.

In September Mrs. Garrison organized a Victory Party at which about 450 patients were present. This was held in the large amusement hall and was extremely successful, with Miss Georgiana Peters as guest singer and Mr. Anthony Rizzo playing the accordian. Dances were interspersed throughout the program and ice cream, cake and lemonade

were served. The Hallowe'en party was also held in the amusement hall, in the afternoon. The room had seasonal decorations, there were games and dances, and refreshments consisted of traditional doughnuts, cider and apples, with peanuts, candy and cigarettes for extras.

Despite all shortages, the annual Christmas party was put on in the amusement hall the evening of December 21st. The play, "The Three Wise Men" was done with patients taking all parts. Lovely costumes had been made in the occupational therapy shops to supplement those already on hand and a number of guests were present as well as the largest group of patients assembled during the year. First on the program was the singing of carols led by a choir group trained by Mrs. Johnson, with the hospital orchestra to furnish the instrumental music. This was followed by the play, well performed and joyously received. Then Santa Claus, Dr. Curry in traditional costume, appeared and extended greetings in a brief talk in which he also expressed appreciation to the physical education division, to the nurses and attendants, the group under the direction of Mr. Knowles who had distributed the gifts to the wards and buildings for sorting, and all others who had helped, even the extra firemen who were stationed in and about the hall as a safety measure. Various of the guests were then introduced and responded with brief talks or greetings; among these were Commissioner Sanford Bates, who was present with Mrs. Bates for their first Greystone Park party; Dr. Knight, Senator Abell and Mrs. Abell, the Rev. Joseph E. Walsh, pastor of the Presbyterian Church at Morris Plains, the Rev. Father Koevoets assistant priest at St. Virgil's Catholic Church of Morris Plains, Freeholder Stephen Griffith and Mr. Harry Van Natta and Mr. L. R. Harris. Then, as the crowning touch, the baskets of gifts were distributed by the nurses, each patient receiving a present. Gifts were distributed later throughout the wards to all patients unable to attend the party.

In January a turkey dinner was arranged for the men and women who had participated in the Christmas play. Impromptu speeches and entertainment were followed by dancing. The only out-of-door party scheduled this year was in August, for the women who had worked through the hot summer months to gather and weed the crops. Cold cuts and a wide variety of vegetables, including corn on the cob, made it a memorable occasion.

In order to make gymnasium work more appealing, a "powder" or

dressing room was fitted up, with dressing tables and benches, a couch and chair, all done in attractive colors—Williamsburg blue walls, drapes of canary yellow with flower spray pattern, etc., and supplied with facial cream and tissues. The posture and spot correction exercises placed an emphasis on beauty and so awakened and preserved interest in personal appearance and physical well being. This has a distinct mentally therapeutic value in the elimination of feelings of inferiority and self pity.

Again this year the bowling alleys furnished a pleasant source of exercise and interest all through the colder months. In the middle of April two tournaments were run off, one for men and one for women, those with high scores from different buildings and classes competing. The tennis courts and baseball diamond have been kept under the supervision of this division.

Students being instructed at the hospital under the educational division have assisted in the physical education classes to some degree, conducting and supervising some of the play of men patients in volleyball, softball, and similar games, and have assisted in conducting groups to and from parties and other activities. In the winter months they assisted somewhat with the bowling and gymnasium classes, although for most of them their stay is limited to the summer season.

In addition to these various forms of recreation, the hospital has always endeavored to provide amusements on the wards. The central radio system makes this form of entertainment available to many of the wards, while others have been provided with the more usual radio sets. A number of the wards still have pianos, although replacements which used to be given frequently by friends who thought they had no further use for their old pianos have been completely lacking in recent years. Cards, dominoes and checkers are perennial on all wards; some of the areas for men are furnished with tables for billiards or pool. Out-door sports include golf, horse-shoe pitching, walking and nature study. Some of the men patients with parole have made excellent small gardens, both vegetable and flower. Birchwood Camp, the recreation center for the parole group, has continued it popularity throughout the year. The ponds and brooks offer fishing, although not so plentiful as in the days when they were regularly stocked each spring by the Fish and Game Commission.

Social Service Division

The hospital or parole division of social service is an exceedingly

valuable organization, since it serves to keep under observation in the community hundreds of patients who might otherwise be obliged to remain for longer periods or even permanently under hospital care. This year the division has suffered from many changes in personnel with the staff at all times below requirements. Miss Margaret Carlin, who at the beginning of the year was on educational leave of absence resigned as Director of Social Service on February 1, 1946. In her place Mrs. Agnes Alvord, who had been with the division a number of years, was named as Director. In so far as the limitations of personnel and transportation permitted, standards of work were well maintained throughout the year. With the exception of Miss Carlin, all who resigned had been on the staff less than two years; there were five in this group, including a temporary appointee. Six replacements were made, four of them in the last three months. The staff now consists of ten members and should be considerably increased.

Mrs. Alvord has submitted the following data: During the year 5,314 visits were made in the community regarding patients on parole and in the hospital. Pre-parole investigations to the number of 475 were made. A total of 108 special investigations was made, 73 of which were for the purpose of obtaining additional information regarding newly admitted patients to assist the physicians in making diagnoses The remaining 35 visits were for varied reasons, chiefly to assist hospital and parole patients and their families. During the year 14 patients considered on "survey" to be recovered were removed from the hospital; one was paroled for employment at this hospital; one was paroled for employment elsewhere; 8 were paroled to relatives or friends; one was discharged to relatives and three were discharged as non-residents.

Three babies, born in the hospital, have been listed under the surgical report.

During the year 852 medical and social histories were obtained regarding newly admitted patients and 80 interim histories were obtained regarding patients who had previous residences in this hospital. Of the anamneses, 836 were obtained at the hospital office and 16 in the community. In order to secure the information, 1,392 persons were interviewed and 761 questionnaires sent out. On request, 941 abstracts were obtained from other hospitals where our patients had previously resided. Total office interviews regarding patients and other matters pertaining to social service numbered 2,218. At the request of the medical staff 20 psychometric examinations were given to hospital patients and 114 special visits were made to patients on the wards. These statistics show a marked increase in work over the past two years, though still far below pre-war standards.

In the course of the year 339 patients were returned from parole—141 men and 198 women—and 144 were returned from escape—132 men and 12 women. The number on parole, visit and escape ranged from 866 to 1,119 (Christmas holidays,) with an average of 918. At the end of the fiscal year the number stood at 930. The average number of patients carried outside the hospital stands at an all time high this year, with 918 compared to 875 in 1943. It seems probable that the number of jobs available and the amount of money in the country may be factors in enabling so many to do well in the community with less assistance from social service than formerly.

Four members of the staff attended evening courses of the New York School of Social Work and Mrs. Alvord was on educational leave of absence from July 20th to September 14th for study at that school.

The staff and stenographic force have been most cooperative in accepting the demands made upon them through fluctuation and depletion of personnel. All have been willing to accept responsibility and endeavor to work harmoniously. The usual relationship with the Confidential Social Service Exchange has been continued and cooperation has been maintained with various social agencies in this and other States."

Northern New Jersey Mental Hygiene Clinics

Dr. Earl W. Fuller continued to serve as Director of the Mental Hygiene Clinics throughout the year and did a very commendable piece of work. For the first six months he was seriously handicapped by shortages of staff and personnel, but working conditions definitely improved by January. Transportation remains unsatisfactory and the automobiles are in so worn-out a condition as to be a constant source of anxiety

On January 1st, Dr. Theodore Gebirtig returned to the Clinics as Assistant Director after having been on leave of absence for military service since September, 1942. In September, December and January social workers were added to the staff each of whom filled a vacancy of about one year's duration. One resignation which occurred at the end of December was immediately followed by a replacement. From Nov-

ember to May the clinic psychologist, Mr. Robert M. Beechley, was loaned to the Community Veterans Service Center of Paterson, where he acted as chief counsellor. During his absence Robert Weits, Ph. D., served as temporary part time replacement, giving seventeen days a month to the Clinics. Four students from the Smith College School for Social Work received training at the Clinics from September 15th to May 29th. Dr. Fuller's report runs in brief as follows:

"Much of the time of physicians and social workers during the past six months has been spent in clearing up the accumulation of work left by the war-time demands on a depleted staff. At the end of the year the waiting list had been fairly well covered. No attempt has been made to build up clinic intake, as yet. There has been no change in the sites of the clinic sessions; however, since January 1st the Paterson area has been given an additional psychiatric service each month.

During the war period, non-treatment cases and those not suited for the Clinics were rapidly eliminated from the active files and as much responsibility as possible was assigned to the psychiatric social workers. This change in methods worked out so well that it has been continued. The return of the second psychiatrist has allowed more adequate psychiatric contacts with the patients. In general, interviews with patients and with the parents of child patients have been longer and more detailed, but less frequent on the part of the psychiatrists; frequent therapeutic contacts have been maintained by the psychiatric social workers with patients and relatives. Since this technique has been used the patients seem to be making more rapid progress and the improvement appears to be more permanent, although it has not been in operation long enough to show up in statistics.

Children with reading disability have been an important activity of the Clinics not sufficiently emphasized in previous reports. In the sixteen months from January 1, 1945 to May 1, 1946, 82 children with reading disability and 2 with arithmetic disabilities were examined or re-checked. A full report of this work is being prepared by Miss Lyons, psychiatric social worker.

The war program having to do with screening and counselling for Selective Service and the Women's Army Corps ended following the cessation of hostilities. Up to the present time no heavy demands have been made by those returning to civilian life, although this has been anticipated. Public and private agencies and schools have continued their

excellent cooperation and requests for clinic service have not greatly changed.

Miss Hurley, Director of Clinic Social Service, has continued to participate on the New Jersey Veterans Advisory Committee and has been appointed a member of the New Jersey Conference on Handicapped Children. Miss Lyons has remained active in the American Association of Psychiatric Social Workers and is managing editor of their publication. Mrs. Roberts completed a special project for the Department of Institutions and Agencies on psychiatric facilities in New Jersey. In carrying this out, she held 39 interviews with representatives of 26 agencies and submitted a detailed report. The other social workers have been active in mental hygiene and many health and child welfare projects in the areas to which they have been assigned and have given consultation service to numerous state and county agencies on request.

The student social workers were assigned to the Newark Red Cross for field work one day a month. Field trips were made to the North Jersey Training School, the Bernarr McFadden Schools in Westchester, New York, and the Washington Square Reading Clinic in New York City, as well as to Greystone Park. Special educational seminars were arranged for them and among the speakers were: Dr. Ellen C. Potter, of the State Department of Institutions and Agencies: Mrs. Virginia Abbott, Supervisor of the local area for the State Board of Children's Guardians; Mrs. Margaret Davitt, medical social worker at Montclair Mountainside hospital; Miss Emily Scanlon, Chief Social Worker at the Veterans Administration, Lyons; and Mr. Robert Brinkman of the Council for Clinical Training of Theological Students.

The Clinic Psychologist, Mr. Beechley, was vice-president of the New Jersey Association of Psychologists in 1945-1946 and is now its president. Dr. Fuller has continued to serve as consultant in mental hygiene to the out-patient staff of Englewood Hospital, as consultant and psychiatrist to the Children's Heart Unit of the Victoria Foundation, and as consultant to the advisory committee on mental hygiene for the Medical Society of New Jersey. He served also on three special committees dealing with mental hygiene problems for the Department of Institutions and Agencies.

A total of 198 clinics were held as follows: Englewood, regular, 20, special, 1; Franklin, regular, 6; Hackensack, regular, 19, special psychological at Bergen County Children's Home, 20; Jersey City, regular, 20,

special 1, special psychological, 6; Morristown, regular, 21, special 3, special psychiatric, 1; Newark, regular, 19, special psychological at Theresa Grotto Home, 1; Newton, regular, 5; Passaic, regular, 20; Paterson, regular, 18, special, 11, special psychiatric, 5, special psychological, 1.

CENSUS OF OPEN CASES

	Patients on Rolls						
		16 years of age and over			Under 16 years of age		
	Total	*Total	M.	W.	*Total	M.	W.
1. Open cases on rolls first of year (7-1-45)	1,949	703	353	350	1,246	888	358
2. Cases opened during year—total	588	139	65	74	449	319	130
a. New cases never attending these clinics*	583	136	64	72	447	317	130
b. Readmitted cases**	5	3	1	2	2	2	
3. Total open cases during year (1-2)	2,537	842	418	424	1,695	1,207	488
4. Cases closed during year (Should agree with number of cards submitted.)	1,581	420	185	235	1,161	819	342
5. Total open cases on rolls end of year (3-4)	956	422	233	189	534	388	146
6. Total different cases attending clinics during year (to be reported on June 30th only)	846	214	115	99	632	446	186

*New cases attending clinics plus new cases seen by psychiatrist and psychologist in Central Office of Clinic and Community.

**Readmitted cases attending clinics plus readmitted case for further social service treatment.

Total patients attending clinics numbered 1,271, of whom 12 came to consult the social worker only, 1 was a readmitted case, 648 were continued cases, and 548 were new cases. Of the total, 361 were 16 years of age and over and 910 were under 16. During the year the psychiatrists held 650 interviews with patients of whom 323 were adults and 327 under 16 years of age. The psychologists held 685 interviews with patients, of whom 77 were adults and 608 children. Of the 1,335 interviews held by the psychiatrist and psycholigists with patients, 1,257 were held at the clinics, 73 in the central office of the clinics, and 5 in the community. There were also held 571 interviews about patients. The psychiatrists held 112 first interviews with new cases, 334 interviews with continued cases, and 204 interviews with cases not having had previous psychiatric service this admission. The psychologists held

490 interviews with new cases, 186 cases with continued cases, and 9 interviews with cases not having had previous psychological service this admission. The social workers held 873 interviews with patients of which 141 were in the local clinics, 10 in the central office of the clinic, and 722 in the community. They held 4,509 interviews about patients of which 729 were in the local clinic, 204 in the central office of the clinic, and 3,576 in the community. Of the 873 patients interviewed, 428 were adults and 444 children. There were 122 histories taken.

The tabulation of agency contact with the clinics showed that of the new cases referred by a specified agency there were 106 adults and 442 children; the State Board of Children's Guardians referred 3 adults and 77 children and other family and child welfare agencies referred 11 adults and 50 children; school groups referred 9 adults and 157 children; physicians referred 12 adults and 16 children; court groups 10 adults and 42 children; and relatives and friends 10 adults and 60 children; 31 adults came of their own volition. A total of 1,474 visits was made to the clinic by those not patients.

The lists of diagnoses of new cases showed 336 child guidance problems, of which 251 were males and 85 females; 110 mental deficiency —70 males and 40 females; 19 psychoneuroses and neuroses; 3 psychoses; 33 social adjustment problems; diagnosis was still deferred in 46 cases at the close of the year.

The psychiatrists gave 26 lectures, gave advice regarding 2 non-clinic patients and held a number of conferences with the superintendent at Greystone Park and several conferences with groups representing the Department of Institutions, the Board of Managers of the hospital and others regarding clinic function and cooperative policies, and attended 22 meetings. The psychologists attended 5 meetings. The social workers held 510 special interviews in regard to clinic affairs, gave advice in regard to 223 non-clinic patients, attended numerous special conferences and committee meetings and 14 staff meetings and gave 33 lectures. Miss Hurley wrote an article on "Student Training" for publication in *The Welfare Reporter*. A total of 5,586 letters and reports regarding patients and clinic affairs were sent out by the clinic staff."

In closing his report, Dr. Fuller expressed his appreciation to the members of the division for their understanding, loyalty and untiring efforts and on behalf of the Clinics gratitude to the Board of Managers and officials of Greystone Park for their interest and cooperation.

School of Nursing and General Nursing Service

Miss Dorothy E. Clark, R. N., B. S., Director of Nursing, has continued to carry her many duties and problems with a surprising degree of calmness and success. In addition to the immediate work of her position, she has been active in nursing organizations and in November was elected vice-president of the New Jersey State League of Nursing Education. She also served as Chairman of the Civil Service Committee of District No. 1 of the New Jersey State Nurses Association and as Secretary of the Morris County Nursing Council. As an incidental non-professional activity she was president of the Morristown Branch of A. A. U. W.

The entire nursing service of the hospital has functioned under major difficulties throughout this post-war year. Personnel has been seriously depleted in all branches except the affiliating student nurses. With the decreased personnel it became more difficult to arrange the schedules and duties were heavier and performed under more discouraging conditions. The hospital officials and the Department of Institutions and Agencies have been keenly aware of the situation. On September 21st, Commissioner Bates and Dr. Samuel Hamilton and Miss Mary E. Corcoran, R. N., (the latter two representing the State Hospital division of the United States Public Health Service) visited this institution to discuss the possibility of increasing the nursing personnel budget. On January 1st the salary ranges for nurses and attendants were raised to better levels. On April 14th the 48 hour week for all nursing personnel was inaugurated. As a result of these measures, coupled with extensive advertising, there has been an increase in the number of applications for employment.

Civilian Public Health Unit #77 which at the beginning of the year was providing 100 men employees from the conscientious objector group has been gradually reduced, the men being released from service on the same basis that the armed forces were demobilized. At the end of the year only 26 remained on duty. Following discharge, five men remained here as regular attendants over a period of months and one of these is still on duty. This group of men has been of great service to the hospital during the war years and the period of reorganization which followed.

Miss Clark's report in a condensed form is as follows:

Personnel: At the close of the fiscal year there were 46 full time graduate nurses and 1 part time graduate nurse on duty. This compares

with 36 full time and 5 part time a year ago. Seven nurses were still being carried on military leave and one was on sick leave. In the course of the year, 29 nurses entered the service of whom 13 remained on duty at the close of the year. Due to the large number of veteran nurses taking advantage of the educational opportunities provided by the G. I. Bill of Rights and the large number of nurses who married while in service, as well as those finding employment in the greatly expanded field of Public Health and the U. S. Veterans Facilities, there is still an extreme shortage of civilian nurses.

PATIENT CENSUS AND PERSONNEL CHANGES

Patient Census	1945 July	Aug.	Sept.	Oct.	Nov.	Dec.	1946 Jan.	Feb.	Mar.	Apr.	May	June	Total
Total Patients In Residence	5624	5682	5685	5714	5715	5578	5684	5691	5709	5703	5720	5731	
Women Patients	2952	2977	2974	2981	2995	2922	2974	2972	2960	2964	2975	2978	
Men Patients	2672	2705	2711	2733	2720	2656	2710	2719	2749	2739	2745	2753	
Personnel Changes													
Graduate Nurses													
Began Service	0	2	3	4	1	1	2	3	0	5	5	3	
Left Service	2	0	3	4	0	2	4	1	1	4	5	1	
Total Enrolled	51	53	53	53	54	53	51	53	52	53	53	55	
On Leave	12	14	12	9	8	10	7	8	7	8	8	8	
On Duty Part Time	4	5	4	4	4	2	4	2	3	3	2	1	
On Duty Full "	35	34	37	40	42	41	40	43	42	42	43	46	
Women Attend'ts													
Began Service	8	4	5	11	5	11	8	12	10	26	22	22	144
Left Service	8	1	0	(13 *(10	3	10	8	9	7	16	13	19	117
**Total Enrolled	72	75	80	68	70	71	71	74	77	87	96	99	
On Leave	2	3	2	2	2	3	0	1	1	0	0	0	
Sp'l Assignment	18	20	19	10	9	12	11	12	13	14	13	13	
On Ward Duty	52	52	59	56	59	56	60	61	63	73	83	86	
Men Attendants													
Began Service	5	5	5	9	3	10	18	11	18	77	45	37	243
Left Service	3	1	10	(9 *(7	11	13	14	12	40	38	41	43	242

**Total Enrolled	161	165	160	153	145	142	146	145	123	162	166	160
On Leave	12	12	15	11	10	9	8	7	6	7	7	6
Sp'l Assignment	31	30	28	28	26	25	23	23	24	21	23	24
On Ward Duty	118	123	117	114	109	108	115	115	93	134	136	130

**Attendant Totals Include												
Cons. Objectors	97	97	94	94	88	84	86	80	50	43	35	26
Cons. Objectors' Wives	5	5	6	6	5	4	4	3	2	2	1	1

*Regular Attendants transferred to other hospital groups in Oct.

There are 99 women attendants, 128 men attendants and 26 conscientious objectors on duty, making a total increase of 33 women and 7 men over the same date last year. The increase in the number on ward duty was slightly higher, amounting to 12 men and 38 women; this gives a total of only 216 attendants for night and day duty on the wards with a 48 hour week work schedule. There still seems to be a general unrest among workers. Because of the depleted ranks of personnel on our wards, many new employees have not remained. It is hoped that gradually improved conditions will tend to keep the personnel we are able to employ, thus building up a more stable group. There is a great need for a training course for attendants and when a sufficient number of permanent employees are obtained, such a course is to be instituted. Several meetings of officials representing the different New Jersey state hospitals have been held to discuss plans for similar courses in each hospital and certificates are to be issued by the Department of Institutions and Agencies for the successful completion of the course.

The Affiliate School of Nursing: During the past year, 507 student nurses from 17 general hospital schools of nursing were admitted to the affiliate school for the course in psychiatric nursing. Of these students three discontinued; two because of illness and one resigned from nursing to be married. On June 30th there were 83 student nurses on duty, the same number as last year. The eight-week course has been in effect all the year and both the faculty and the students themselves recognize the limitations of the shortened course. We are all looking forward to the return of the twelve-week program as soon as the home schools can make the needed adjustments in their own schedules. Seventy-two hours of class instruction have been given to each group. Responsibility for the

class-room program was again carried by Miss Margaret Larkin and Miss Sophie Kraykowski, although classes in special phases of nursing theory and practice were given by Miss Clark, Mrs. Ann McConkey Stefanak and Miss Elizabeth Reese. Others who co-operated in the teaching program included members of the medical staff, Dr. Fuller and Miss Hurley of the Mental Hygiene Clinics, Mrs. DeVries of the Occupational Therapy Division and Mrs. Eichlin of the Library. Two additional schools have signified their intention of sending their students next fall. During the year a committee composed of members of the faculties of several home schools and our own faculty completed the revision of the contract of affiliation and copies have now been signed by each of the affiliating schools.

The School Library has been improved and expanded, with due recognition of the need for duplicate material when 70 or 80 students are using the library at once. There are now 1,001 books, of which 902 are separate titles. During the year 99 books in psychiatry and allied subjects were added, of which 48 were separate titles. Effort was also directed toward the building up of reference material on nursing subjects in ward libraries and 37 books were added to these collections.

Graduate School of Nursing: The proposed course in advanced psychiatric nursing at Seton Hall was announced in their spring catalogue. As yet no students have reached the stage when they come to Greystone Park for their practicum. Rutgers having been made the State University, is offering extension courses to be held in Morristown for our nurses. The first course in general psychology is being planned to begin in October.

Professional and Social Activities: During the year many visitors from the faculties of those schools sending student nurses here for affiliation were received and entertained by the nursing division. September 17-19, Miss Celina Viegas, a graduate nurse from Belo Horizonte, Brazil, visited the hospital to observe the nursing and teaching service at Greystone Park as part of her course of study at Cornell University. On June 14th the committee on administration of schools of nursing of the New Jersey State League of Nursing Education held its regular monthly meeting at this hospital. Many of our graduate nurses have attended meetings of the state nursing organizations this year.

Special Assignments

Personal Grooming, Women Patients: The two women assigned to

this duty have been called to do part time duty on the wards in the serving of meals to patients. This has again curtailed their work as in the past four years. The report shows 16,357 hair cuts; 1,622 hair thinned; 1,029 waves; 1,591 scalp massages; 619 manicures and various other personal care items giving a grand total of 22,716.

Sewing Room: Under Miss Catherine Salmon the sewing room again had a year of satisfactory service. Fifteen women patients from the Main building did hand sewing for two or two and one-half hours morning and afternoon. Each day when the weather permitted they were taken out of doors for a time, and once a week were served ice cream. Special observances were arranged by Miss Salmon for holidays. In the course of the year 376 articles were made from discarded material, and 47,581 articles were repaired, including 670 blankets. This service effects a real economy while providing an occupational need for these women who are not able to go elsewhere to work. Miss Salmon's interested supervision of this group over a period of several years has been very helpful.

Clothing Items Donated: As in former years the clothing of deceased patients has in many instances been donated to the hospital by the relatives and occasionally gifts of clothing have been received from other sources. All of this has been a substantial help in supplying the needs and has been much appreciated.

The Library Service: The hospital libraries have been maintained under the general supervision of the nursing division, with Mrs. Maud B. Eichlin in charge and carrying on very satisfactorily. Her report is given on a later page as a separate topic.

Tonic and Sedative Baths: Much of the hydrotherapy of the institution has been curtailed by the lack of personnel. There were recorded 988 treatments in the women's hydro room at the Reception building, February to June inclusive. The men's hydro room at the same building has continued under the excellent direction of Mr. William T. Riker, Physiotherapist, and 2,726 treatments were given during the year.

Conclusion: In closing her report Miss Clark expressed deep appreciation for the cooperation of the various hospital divisions and of the doctors, nurses, attendants and patients 'in carrying on the difficult task of holding high the standards of care and treatment for our patients.' She also expressed her gratitude to the Board of Managers 'for their encouragement and unfailing wise council,' and closed on a note of optimism for the future of Greystone Park.

Staff Matters

For the first few months of the fiscal period the staff of physicians continued to function on a basis of approximately 50 per cent. of normal, with consequent strain and hardship, especially on the ward physicians where the reduction was greatest. Gradually the men on military leave of absence began to return and a few replacements were obtained who had not previously been connected with this hospital, so that the last half year found the staff at above 80 per cent. of normal strength. The men who returned from military leave were raised to the status of senior resident physicians.

With the increase in the size of the staff, housing again became crowded, particularly for married men with two or more children. Fifteen physicians have cottages of which ten are single houses and five, one-half of double houses. Whether or not the construction being planned by the Federal government for ex-servicemen and their families will help the staff situation is not yet clear.

The reclassification and salary adjustment program had very mixed results on the morale of the staff. Single men who lived in apartments received marked increases, while those who were married and lived in houses found themselves with little or no increment in their pay checks. Financially, this is probably justified, but practically from the angle of morale and a stable staff, it seems somewhat shortsighted.

The professional care of the patients has been carried on with the best standards which the limited personnel permitted. With the increase in physicians, it became possible to do more individual work with the patients, but the staff is not yet up to normal levels, which at best were considerably below those required by the approved ratio based upon admissions and resident patients. To a considerable extent the work of the physicians has been hampered by the lack of ward personnel, though it seems possible to hope that recent improvements in hours and compensation may show decided benefit in the near future.

The hospital staff has endeavored to maintain helpful and cooperative attitudes toward all medical and health activities in the district. Many of the men with established reputations, especially Dr. Collins, have been frequently called into consultation by the local general hospitals and physicians and to give court testimony. Dr. Crandell has resumed his interest in community service since his army discharge; he had formerly given much of his free time to the Boy Scouts and the Red

Cross. Medical meetings have been held at the hospital and membership in the county and state organizations has been encouraged. Attendance at the meeting of the American Psychiatric Association was limited to Dr. Crandell this year, as the annual meeting was held in Chicago and there were transportation and other restrictions. Dr. Gambill spent a week at a symposium on his specialty in Roanoke, Virginia. Dr. Melvin and Dr. Oatman have been using their weekly day off duty to attend special courses at the Neurological Institute and Presbyterian Hospital in New York City, and have done several air studies of the ventricular system of the brain.

The special equipment for making electro-encephalographic studies was used on a part time basis during the early part of the year, Dr. Morton Stern, formerly on this staff, coming in occasionally to carry on the work. After Dr. Zigarelli became a member of the staff he took over the encephalograph in addition to assisting Dr. Esposito in shock therapy, as he had received training in this field.

On June 5th a meeting was held at this hospital of representatives of combined staffs of the State Hospitals at Trenton and Marlboro and the Epileptic Village at Skillman, together with practically the entire staff of Greystone Park. Over one hundred people were present for the afternoon and evening meeting, including two visitors from the Veterans Hospital at Lyons and Commissioner Bates and others from the Central Office. The program consisted of: Luncheon at 12:30, followed by a tour of the hospital; welcome by Commissioner Bates, Dr. Curry and Dr. Collins; a paper by Dr. Cotton; a paper and discussion of the administration of a shock therapy service; a paper and discussion on epilepsy; a paper and discussion of the juvenile psychiatric service at Marlboro; and a paper and discussion of the electroencephalograph in neuropsychiatric practice; dinner was served at 6:30, followed by an address on *The Treatment of Psychoses* by Dr. Baldwin Keyes, Professor of Psychiatry, Jefferson Medical College of Philadelphia.

Pharmaceutical Division

This year the hospital drug division has operated for the most part with a full staff of three registered pharmacists: Mr. Philip B. Roberts, Mr. Louis D. Bangert and Mr. George Rowland. This has made it possible to arrange time schedules and vacations on a normal basis and to increase the manufacture of drugs and supplies, which is a marked economy in an institution of this size. Mr. Roberts has submitted a rather detailed list of the work which I have summarized as follows:

"During the year 19,209 individual prescriptions were filled; 1,941 requisitions for department and nursing supplies were completed. A total of 16,333 items were bottled and labeled, in addition to those purchased ready made up. Figures were made up to show the saving over cost price effected by the manufacture of a few articles—vanilla flavoring for the kitchens, tincture green soap, sulfathiazole cream, paregoric, and elixir terpin hydrate, with and without codeine—which was slightly over $3,500. Manufactured items were listed under 61 heads; the largest item was 40 per cent sucrose solution, 5,280 gallons; bathing lotion, 190 gallons; boric acid solution, 195 gallons; epsom salt solution, 345 gallons; liquor antisepticus, (gargle,) 115 gallons; sulfathiazol cream, 472 pounds.

In general the supply situation was much improved over last year. Some commodities are still so scarce that manufacturers are now accepting orders on preparations containing alcohol, sugar and glycerin on a six to eight months basis. Glass tubing, white enamel and stainless steel hospital articles are in low supply on the market. But for the most part our orders are being filled much more promptly, and many articles that were in short supply are again available."

Photography

Mr. Daniel J. Lutz has again continued throughout the year as hospital photographer. His chief duties were to make identification photographs of patients on admission and before going on parole. Other photographs were made on order, including progress records of construction, X-ray prints, and various miscellaneous items. His list is as follows:

Newly admitted patients photographed	1,431
Parole patients photographed	924
Buildings, construction, etc.,	809
Copies made	402
Enlargements, all sizes	301
X-ray prints	109
Prints of escaped patients for police, etc.,	405
Miscellaneous prints, all sizes	203

Barber Shop

Mr. Hershel Tucker continued in charge of the institutional barber

shops this year and the work has been carried on with the system previously established. Each area with men patients has been adequately covered, with shaves twice a week—three times in some instances—and haircuts once in three weeks. This has required the giving of about 788 shaves and 205 haircuts each day. The normal quota of barbers is twelve and they are assisted in lathering by a group of patients.

Two large and well equipped shops have been used for the majority of ambulatory patients, one at the Main building and one at the Dormitory. The other buildings have been covered, either by small shops, chairs on the wards, or bedside service, according to the condition of the patients. Chairs have also been maintained at the laundry, occupational therapy building, and in other work areas so that the employed patients did not have to be escorted to the central barber shops, with consequent loss of time.

The total statistics for the year show 207,952 shaves and 29,100 haircuts.

Administrative Assistant to the Chief Executive Officer

On February 8th Mr. William G. Beucler returned to the hospital, having been on military leave of absence since 1941 and retired from active duty with the rank of Major. During his absence the work of the division had been continued under the direction of Mr. William Knowles and there has been some redistribution of duties and reorganization since Mr. Beucler's return with Mr. Knowles assigned to the personnel division. His report runs in part as follows: "After five years' absence it was at once apparent that the war period had exacted its toll. There was no semblance of adequate personnel and it was impossible to procure bare necessities in the way of supplies or to effect replacements of equipment. Because of the extreme inadequacy of patients' clothing and bed linen it has become most important to salvage every conceivable piece of condemned material.

The bed repair and paint shop has functioned under lack of personnel and materials, but a large number of repairs have been continually made; 902 beds and cots were repainted and 321 bed casters were over-hauled and repaired. A ten-foot trailer for hauling beds has just been completed in this shop.

Floor maintenance has assumed a problem of large proportions because of lack of replacement, and unobtainable materials. In areas

where incontinent and destructive patients are housed, either terazzo or color-mix concrete with appropriate drainage should be used. In dining halls, quarry tile with proper drainage facilities has proved generally acceptable. Linoleum and mastic cannot be maintained in a sanitary condition in such areas. Much of the hospital flooring is now in a greatly deteriorated condition, making satisfactory maintenance extremely difficult, even where the original material was appropriate to the present use.

In the mattress and upholstery shop, lack of ticking of a proper weight has been a serious handicap. Renovations could be made only by the use of ticking which had already been through too many washing and sterilizing processes. Mattress protection in areas where untidy patients were cared for was provided by making complete covers of rubber sheeting; in other areas, envelopes to cover two-thirds of the mid-section of the mattress proved sufficient. Again, shortage of materials has prevented full use of these devices. A full list of the work done in the upholstery shop, including shoe repair, is included in the Business Department report.

A survey of the furniture and furnishings needed in various staff quarters was made in February. As a result, some progress has been made in obtaining replacements and repairs, but much remains to be done.

Living quarters for personnel are inadequate, particularly those for housing male attendants and kitchen help. Rooms in what is known as the Rear Center of the Dormitory building have been recently assigned for housing married colored employees.

Detail personnel has been depleted during the war period and has not increased this year, since the compensation offered is not in line with the requirements of the work. With two exceptions, all who have been hired since February have soon left to take positions with better pay."

Mr. Beucler expressed appreciation of the way Mr. Knowles had handled the division during the war period, saying that he deserved great credit for the manner in which he had carried on under the many difficulties.

The Housekeeping Divison, which was set up in 1944 with Mrs. Alma K. Rose as housekeeper in charge, has been placed under the supervision of Mr. Beucler since his return. Mrs. Rose reported: "The housekeeping division in functioning as an integral part of building maintenance activities has achieved outstanding results through co-

operation and coordination. A schedule has been worked out in the Dormitory building living quarters in charge of a full time housekeeper. One housekeeper has worked in specific areas, bringing about brighter and more sanitary conditions through cleaning and then putting in new shades and rag rugs. Blanket repairs have consumed considerable time, about 500 having received minor repairs and 1,200 complete reconditioning. Those needing stitching were made ready and then sent to the power machines. Lack of personnel and lack of a central room to receive all torn or unmarked clothing, linen and blankets direct from the laundry have made this division less effective than it might be."

Administrative Assistant, Personnel Office

In an effort to clarify various obscure conditions, assist in adjusting grievances and misunderstandings, and make for better relationship between all employees and the divisional and departmental heads a personnel office was established this year bringing in a new man from the Central Office to head it. Previously, this work had been handled partly by the various divisions, partly by individuals already employed at the institution in other capacities.

This arrangement had given some employees the impression that their grievances were viewed purely from the institutional angle. With the selection of Mr. William R. Peebles as Administrative Assistant, a decided step forward was taken. So far, both the institution and the employees have found him fair and sympathetic to the requirements of the situation. He has submitted the following statement:

"The first fiscal year ending in the post war period has been one during which the Institution was forced to continue operations with serious personnel shortages. It is gratifying to note, however, that during the past few months, a very definite favorable trend in the recruitment of personnel has taken place due largely to an extensive advertising campaign.

The year was an eventful one for there were many changes involving salaries and working conditions of our employees. It was a year in which the full effect of the reclassification program was felt. This program, which was effective December 1, 1944, came into its own with the advent of this last fiscal year and we now have a program which has benefited the majority of our Institutional employees and one which will continue to do so. Under the provisions of this program, employees were

reclassified and given a proper title for the particular job which they were performing. They were given a stipulated salary range for their position and entered the range either at the minimum or at an even step within the range. The establishment of these ranges and the placing of the employees on an even step within the salary range provided the basis upon which an individual employee could be incremented yearly, provided his work was satisfactory as evidenced by the Merit rating.

In addition to the normal increments as provided for under the reclassification program, an additional program sponsored by the Governor, was formulated during the past fiscal year. It is effective July 1, 1946. This plan, which recognizes length of service as a factor in the employee's salary level, provides that any employee having five years of continuous service as of June 30, 1946, shall receive one increment in addition to the increment called for under the reclassification program. If an employee has had more than ten years of continuous service as of June 30, 1946 with this institution, he would then be entitled to two additional increments in addition to the normal increment provided for under the reclassification program. These increments are granted only in cases where it does not extend the individual's salary beyond the maximum of the salary range prescribed for his particular title, and only to those employees who are performing their duties in a satisfactory manner as prescribed by the recently completed merit rating.

The reestablishment within this department of the merit rating system was an innovation of the past year. The aim of the hospital authorities was not to find weaknesses by which to penalize any employee, but rather to find opportunities to aid the employee in overcoming any possible shortcomings. A committee system of rating was used and a committee system of appellate machinery was established.

In addition to many title changes, individual salary changes and the establishment of merit rating program, other employee benefits were brought into being. The working hours were shortened to a forty-eight hour week for all personnel, including ward attendants. Many surveys were completed and consequently many salary ranges corresponding to particular titles and groups of employees were changed from those originally set forth by the reclassification program.

Late in the fiscal year, a personnel office was established with an adequate grievance machinery, in an effort to bring about a more central control over all personnel matters. This office, under the supervision

of the Superintendent and the Business Manager, now administers all matters of personnel policy that affect the employees of this institution. This involves the recruitment, hiring of all new employees, handling of employees' grievances and necessary Civil Service action requirements.

The end of the fiscal year brought with it an end to the war restrictions with regard to Civil Service procedure. For nearly three years there have been no Civil Service examinations and, therefore, no eligible lists from which to make necessary and important appointments. With the end of the war and with many of the veterans having returned, these examinations are to be resumed under a modernized examination procedure, and with shortened eligible lists which will assure the more highly qualified persons to be on top of the list. A permanent classification staff has been established by the Civil Service Commissioner to continue to adapt the classification and compensation plans to the constant changes in the State service. Consequently, surveys of employee positions will be continued and salary ranges will, as nearly as is possible, be kept in tune with the times.

The year has been one of shortages, turnover, and multiple personnel changes. It is hoped that in the coming fiscal year, many of our shortages can be adjusted and that the best possible adjustment between the employee and his job can be brought about through good working conditions, good working hours and proper return for his work."

Overcrowding

Overcrowding of patients is a distressing problem. This condition has progressively increased over a period of some years and now is so extreme as to affect adversely every aspect of hospital activity. Overcrowding, together with the shortage of ward personnel, caused constant disturbance and irritation to all patients, the evil effects of which cannot readily be estimated. Corridors and day room space had been taken over in a great many areas, some of it permanently as dormitories and infirmaries, others for temporary sleeping quarters with the beds put down at night and taken away each morning. The loss of all recreation and rest areas by day has a most unfortunate effect upon the patients; no one likes to spend his day in a dormitory and when there is nowhere else he can go, as is the case with a majority of patients, the annoyance becomes progressively worse. The constant shifting of equipment, on the other hand, represents additional work for the depleted personnel, damage to beds

and interior walls, and undesirable storing of beds and bedding during the day. There is also a less sanitary condition consequent upon the difficulty in insuring each patient of getting the same bed each night. It becomes practically impossible to maintain the desired standards of cleanliness, which in turn causes a let-down in morale of both the attendants and the patients. The entire situation is under study by the Central Office, but meantime we are working under a grave handicap.

Much of this overcrowding is due to elderly patients, as indicated by the constantly increasing demands for infirmary space. Our hospital resident population is growing steadily older, since with each additional year in the life of an institution with a constantly increasing admission rate, there are more living patients who were admitted many years before. Of the patients who died this year, 111 had been inmates for ten years or more. Among our admissions and readmissions, 285 were over 70 years of age and while the deaths and discharges of those over that age seemed to keep pace with the admissions, it did not also keep pace with the number in the resident population who reached the age of 70. Discharges in the 70 and over age group amount to less than 1 per cent. of those of that age admitted.

Greenhouse and Grounds

Greenhouse and grounds have been maintained in a separate division with individual appropriations for many years, although combined with the garden division in many ways under the immediate supervision of Mr. Britton Koch. In the greenhouses have been grown the stock for cut flowers, flower beds, and plants for the wards and dining rooms and also done for the garden division the seed testing and the first planting of a great variety of vegetables. The work on the grounds has consisted of general upkeep, repairs to gravel roads, drains and catch basins, tree maintenance, care of flower beds and shrubbery, grass cutting, spraying, and in winter keeping roads and walks open at all times, with snow plows and shovels. Two gasoline shovels and a bulldozer have been maintained in this division and used for grading and other work as required. A small sawmill has been operated near the greenhouse, cutting timber and boards from local trees to fill hospital needs for lumber. A garage repair shop has also been operated for the care of trucks and other equipment. Mr. Koch has submitted a detailed report of all the activities carried on in this division, with the total working

time given to each by patients and employees. I am giving here only a few of the larger figures:

Trucks were loaned to the garden division for 689 days, to the farm for 155 days, to the construction department for 31 days and to the engineering division for 6 days. They were used for 26 days in hauling manure for the farms, all of which shows the difficulties in assigning cost of equipment and maintenance among the various divisions.

Cutting grass in the various areas of the grounds required the services of a tractor with gang mowers for 52 days and took 656 days of employee time and 4,374 of patient time. A total of 70 lbs. of grass seed were sown and the lawns were rolled in the spring with a tractor.

Snow removal was not a heavy requirement during the past year. Trucks were used plowing for 32 days time and 129 hours at night. Spreading sand and ashes required 23 days of truck time and 45½ cubic yards of sand and 311 cubic yards of ashes. The bulldozer was used in pushing snow for three days, and the trucks were used in hauling snow away for 45 days. The snow removal work required 115 days of employee time, and 1,320 days of patient time.

Collecting and hauling leaves to cover vegetable root crops required 27 days of a truck, 45 of the employees and 428 of the patients. Planting and caring for the willows used by the occupational therapy division required 26 days of employee time, 264 of patient time, and the use of a truck and tractor for 1 day each and 3 teams for 2 days. Spraying the willow holt required 8 lbs. of arsenate of lead and 4 lbs. of casein spreader put on with a truck and power sprayer in ½ day.

Trucks were employed for 101 days in cleaning up around the grounds. Employees worked 44 days and patients 694 in trimming and cleaning out trees in the hospital nursery area. At the greenhouse vegetable crates, seed flats, benches, hot bed sash and various other equipment were repaired and all the greenhouses were painted inside and out. The main ducts and shops were cleaned out for the engineering division, using 6 days of employee time and 175 of patient time, while a truck was used 2 days in hauling away rubbish.

The Keystone shovel was in use 15 days loading trucks with fill, 3 of them for the State Highway Department. The Northwest shovel was used for 17 days in loading manure, for 4 in leveling the dump, and for 12 in pulling out tree stumps in the Wilsonville land clearance

project. The bulldozer was used in leveling ground for grading, in moving manure, and in leveling at the dump and main garden.

At the greenhouse garage repairs were made on 9 trucks, with a total time of 1,151 hours used, and also on three cars, the sprayers, the bulldozer and gasoline shovels, the tractor and various other garden and greenhouse equipment. Most of the equipment was painted during off seasons.

The sawmill was operated as needed, using 325 days of employee time and 361 of patient. The tractor was used 52½ days hauling logs and a truck for 3 days hauling lumber. In all 627 logs were cut up; lumber assigned to various divisions and areas amounted to 15,800 board feet of whitewood and 20,900 board feet of oak. The State Highway Department received 50 feet of this for curbing and the Training School at Totowa 200 feet.

The record of cut flowers raised at the greenhouse this year is listed in the tables of the appendix of this report. The total amounted to 144,054. The list of plants and bulbs grown is also included in the tables, with the total amounting to 58,699. Skillman Epileptic Village was given 13 flats of chrysanthemum stock plants, 60 stock chrysanthemum plants, and 855 geraniums from 4 inch pots.

At the State Fair in Trenton in the occupational therapy building a bed 8' x 12' was made up with evergreens, begonias, petunias, fuchsias, aceranthus, coleus, sod and peat moss. The annual chrysanthemum show of the Morris County Gardeners and Florists Society was held on November 2nd and 3rd. A group display set up in the center of the room was given a special award, and from the 12 classes in which cut flowers from this institution were entered were received 7 first prizes, 2 second prizes and 3 special awards.

Library

Mrs. Maud B. Eichlin has continued as hospital librarian this past year and has given the same type of devoted service as formerly. She is deeply interested in her work and carries out as much bibliotherapy as her time and supplies permit. Her report runs in part as follows:

"Patients are introduced to our library service soon after arrival in the Reception building and it educates and entertains them throughout their stay in the hospital. On the wards the librarian has been told repeatedly by patients how much they looked forward to the visits of the

book truck. Books, magazines, papers, puzzles, games, playing cards—all have been distributed through this service. Religious material in foreign language has been a frequent request.

The New Jersey Library Commission, the Morris County Library Service and the Inter-Library Loan Service have all assisted in supplying requested material. One of the projects has been to try to attract new employees in the hospital, in order not only to serve them but to aid them in serving the patients.

The hospital publication, *The Psychogram* has published a library page each month, giving book reviews and lists of reading material. The workers at the Print Shop have mended and re-bound books for the library as their time permitted. Such co-operation has been greatly appreciated.

The librarian has given a lecture on "Bibliotherapy for Patients" to each class of affiliate students, and the material has been broadened to include reading matter for general hospital patients. Several meetings of county and state library associations have been attended this year and have proved helpful and inspiring. The librarian addressed a Morristown church group, speaking of her work in the hospital. The following tabulation shows the variety and scope of the library service during the past year:

Books and Magazines Circulated during the year:

Fiction	5,234
Non-fiction	951
Foreign	15
Total books	6,200
Magazines	33,074
Grand Total	39,274

Donations to the Hospital Library:

Books	441
Magazines, secular	12,081
Papers, secular	704
Magazines, religious assorted	2,329
Magazines and papers, Christian Science (distributed)	14,095
Papers, Italian	51
Papers, Jewish	345
Papers Polish	174
Decks of playing cards	93
Games	20

Jigsaw puzzles	444
Miscellaneous cards	1,425
Christmas cards	8,911
Magazine subscriptions	1

Miscellaneous Notes:

Books bound at the Print Shop	61
Games loaned	3
Jigsaw puzzles loaned	657
Decks of playing cards distributed	65
Miscellaneous cards distributed	2,613
Christmas cards distributed	15,890
Christmas cards sent to storage	5,197
Books transferred to Main Building Library from Clinic Building Library	51
Books transferred to the Birchwood Camp	28

Religious Services

As in former years, every effort has been made by the hospital to co-operate with all clergy and religious leaders in providing comfort and instruction for the patients. No resident chaplain has ever been maintained, although the leader of the education division, Mr. Koehler, and his students, carry on some of the functions as friends and advisers. The Catholic church at Morris Plains has two priests, one or the other of whom is always on call for visits to this institution. They provide a regular service each Sunday and observances for special occasions. The Protestant clergy from Morris Plains and Morristown serve in rotation, the Methodist, Baptist, Presbyterian and Episcopal each appearing once in four weeks for afternoon service in the chapel. The hospital orchestra, the pipe organ, and a chorus of patients trained by the division of physical education furnish the music. Observances for Jewish patients have been maintained by the Morristown Center, and Christian Science groups have provided readers and literature for the hospital. Any clergyman who came to visit a member of his parish or other friend was always welcome, and several were present at the Christmas Tree party as usual.

Fire Protection and Fires

A fine detailed report has been submitted by the Fire Chief, Charles H. Acker, setting forth particularly conditions which need attention for improving the fire hazards at the institution. Some of these will be found in Recommendations, others will be taken up with proper authorities. I am incorporating here the material having to do with the record for the fiscal year.

The paid personnel included the Chief, an operator-driver who acted as Assistant, and a truck driver. This last man was assigned to duty on September 10th, and with the Assistant worked an alternate shift of 48 hours on duty and 48 off. Fifty-four unpaid call men, hospital employees, certified by the Business Manager after voluntary application, acted as a volunteer brigade.

The equipment consisted of one Ahrens-Fox engine placed in service in 1924; one Pirsch combination ladder and water tank truck, placed in service in 1925, one Chevrolet Squad car, placed in service in 1938. This year on January 21st a Chevrolet Army Fire Truck was received, having been purchased from the U. S. Government Surplus Property Division by the State Department of Taxation and Finance for $900. The pump with which it came equipped was changed for one received by us in 1943, capable of furnishing 500 gallons per minute, instead of 300. Included in the equipment was a 300 gallon water tank and 2 booster lines of 200 feet ¾ inch hose connected to the pump. Minor changes were made to the hose body to permit the carrying of 1,100 feet of 2½ inch fire hose. Brush fire equipment, a portable electric generator and four flood lights have been added, making this a very compact all service fire fighting unit of medium pumping capacity.

A total of 56 hydrants are located on the institution grounds, 48 on the high pressure system and 8 on the low pressure lines. During the year three new hydrants were installed, one on the Center Drive opposite the Employees' building, one on the Dormitory hill road opposite the Parole building, and one on Dover road between the Tuberculosis buildings. A fourth hydrant was installed, at the Boiler house where it had been removed during construction work. One hydrant on West Hanover Avenue has been rented throughout the year for protection of the dairy barn area. On the recommendations of the Fire Chief four hydrants were raised by the plumbing maintenance division. Semi-annual inspections of all hydrants were made by the plumbers and Fire Chief working together.

Many of the ward areas are protected by sprinkler alarm system. These were inspected weekly by the Fire Chief, with numerous alarm tests of the system. Approximately 18,000 feet of unlined linen hose, placed on racks throughout the wards and corridors, have been subject to inspections to meet the recommendations of the Fire Underwriters. During the year 2,300 feet of new hose were received which had been

on order for two years. This was placed in areas where the oldest and most questionable lengths were located. In all 476 fire extinguishers are available throughout the institution, 405 are 2½ gallon soda acid type, 43 are 2½ gallon foam type; 18 are vaporizing liquids and 10 carbon dioxide gas. All extinguishers were inspected and recharged as necessary. Two 4 gallon water pump cans which came with the army truck were placed in service in the main dairy barn.

All special gatherings of patients have been covered by members of the fire department. For the annual Christmas Tree Party, 44 men were on duty at the Amusement Hall and at Fire Headquarters, including 9 who were members of the Fairchild Company of Morris Plains. Members of this company have occasionally drilled with the local group and have signified their willingness to give assistance in emergencies.

During the year there were 44 calls upon the fire department, only two being general alarms. One of these was false, rung by a patient, and one was for a ward fire which was out on the arrival of apparatus. Fourteen other ward fires or suspicions of fires required department service, in two of these there was enough damage for adjustment claims. Five fires occurred in automobiles on the hospital grounds. There were 7 grass fires, chiefly along the railroad right of way, and 2 other fires occurred in the trestle in that area. One fire at the occupational therapy building and one at the incinerator did damage for which claims of $175. each were allowed. Three fires occurred in kitchens, one of which was in a newly completed icebox and the $50. damage was assumed by the contractor. There were three fires in Dormitory and Main building center areas, none serious, and there were two false alarms on the sprinkler system. Undoubtedly, much of the credit for the low loss suffered from fire has been due to the prompt action of those on the spot where the fire started. As Chief Acker says in his report: "The first five minutes at a blaze are worth the next five hours." For this reason a constant effort has been made to instruct all employees, those on the wards as well as those in the fire department, in the location and use of equipment.

An extensive clean-up program was made of the Main building ducts, the attic over the congregate dining halls, and around the dairy barns. In the Main building, unused dumb waiter and heat ducts were bricked up to eliminate danger of fires. Many inspections were made of the entire institution to check up on danger spots. Owing to costs,

lack of personnel; and other obstacles not all have yet been eliminated, but the very fact that they are known tends to reduce the peril somewhat.

Water Supply

The water supply of the institution is furnished first by a series of reservoirs—lower garden, upper garden, ice pond and Klondike—and second by two deep wells located off the main property in the Borough of Morris Plains. The lower garden reservoir serves the irrigation system of the garden and is not connected with the potable water supply. The upper garden reservoir supplies the low pressure system which was the original water supply; it now furnishes water to the Main building wards, and to the North and South Cottages, as well as part of the requirements of various plant and farm areas. The water is fed from the reservoir by gravity, but the level of water in the reservoir is maintained by pumping from the high pressure system about 400,000 gallons per day. The demands upon the low pressure system are estimated at 600,000 gallons per day, the difference ordinarily being made up by springs and other natural sources for the reservoir. The high pressure is supplied by pumping from the ice pond reservoir and by gravity from the Klondike. When the Klondike is naturally filled from the springs and small streams which abound in that wooded area, no pumping is required. At times a small amount of pumping has to be done, using the natural accumulation in the ice pond reservoir. When this supply is not sufficient, pumping from the deep wells will usually furnish about 600,000 gallons a day; this water is brought into the ice pond reservoir and thence forced by booster pumps to the Klondike. If desired, the water from the deep wells may be picked up and pumped from the ice pond directly into the mains, with very little admixture from the surface supply. All of the water used by the institution is chlorinated, each system having a separate chlorine treatment station.

At the beginning of the fiscal year, the Klondike reservoir was undergoing repairs in connection with a change in the pipe line, but it was soon refilled and there has been a plentiful supply of water throughout the year. Some trouble has been experienced with muddy water in the ice pond and upper garden reservoirs, from soil washing in during heavy rains. Dikes and more careful planting schedules have somewhat improved this condition, but more remains to be done. Under contract a high pressure main to the Laundry was put in this year, which was an important improvement. The low pressure connection was retained and about half the supply is drawn from each system.

Drinking water for various areas of the institution has been supplied for many years from a spring piped by gravity to a bottling room in the Dormitory building and from there sent out in 3 and 5 gallon bottles by truck to the points of use. Every effort has been made to avoid contamination of this water; the bottles are sterilized, as are the corks, and a small paper bag is fastened over the neck and cork of each bottle to prevent any organisms from the hands of the men handling the bottles reaching the water or the neck of the bottle from which it might be transmitted to the water cooler.

Each month samples are carefully collected from various points in the water supply system and sent to the State Department of Health and to the Rutgers Research Laboratories. Independent tests are run on each sample and the reports returned to the hospital.

Construction Work

Throughout the year Mr. Gordon Mundrane has continued to serve as Superintendent of Construction for the work done at this institution under the Department of Institutions and Agencies, and has given the same careful oversight and friendly co-operation as in the past. Most of the work done this year was of a minor character, but all contributed to the betterment of the hospital.

Horse Barn and Sheds: Construction operations were started on this project on April 25, 1945, following a destructive fire on March 24th. The barn itself required only repairs; the sheds were reconstructed of cinder concrete block with asbestos shingle roof. The west wing was practically completed last year, the rear shed and east wing have been completed this year. The rear shed is 105 feet long, 37 feet deep, with two stories. The ground level is for the storage of farm machinery, while the second floor has an office 15 feet x 16 feet, a paint shop 20 feet x 37 feet, and storage space for trucks. Because of the steep slope at the rear of this part of the sheds, the second floor is also at ground level. The east wing, 69 feet x 24 feet, is used for storage. A new asbestos roof was also put on the blacksmith shop at the front end of the east wing, which escaped the fire. Steel beams were erected, electrical fixtures and outlets installed, woodwork and trim were given three coats of paint, wood benches and racks were made and installed. There was

some twelve weeks delay in obtaining asbestos shingles because of the strike in the Johns-Manville plant.

Renovating Roofs and Gutters, Clinic Building: Work was started on this project August 3, 1945, leaks having caused trouble in maintenance for a number of years. To date all copper gutters felt strip repairs have been made; the exterior walls have been 91 per cent grouted, various areas have been wire brushed cleaned, masonry brick joints have been replaced in an extensive area, and 2,882 square feet of attic wall has been damp proof painted. The funds having been depleted, the work has been stopped for the time being.

Water Purification Improvements: The installation of five hydrants, as reported under Fire Prevention, was completed under contract with work supervised by the Construction Office. Laundry connections with the high pressure loop were also made. A 24 inch corrugated metal culvert was put in near the Ice Pond reservoir to drain off surface water.

Reception Building: Under contract, asphalt tile flooring was laid in the offices and corridors of the area used by the Mental Hygiene Clinics.

Dormitory Building, North and South: A contract has been awarded for linoleum to be laid in Ward 64 Day Room, Ward 65 Day Room, Ward 60 Reception Room, Ward 63 Reception Room and two Hallways, Ward 62 Hallway, Ward 61 two Hallways, and Ward 65 Hallway. Carpenters and masons of the construction division have completed preparing walls, floors and base; in the cross halls of Wards 61 and 63 it was necessary to lay new flooring in some areas. The contractor has been unable to secure the linoleum selected, although it was February when the contract was made, so none of the work has yet been started.

Alterations to Employees' Building: Alteration and reconstruction of six toilet rooms in this building was completed in May, one year after it was started. Three of the rooms have 5 toilets, 5 lavatories, 2 showers and 1 bath tub; the other three have 2 toilets, 2 lavatories and 1 stall shower each. It was necessary to remove all old plumbing and electrical fixtures, conduit, tile flooring, wainscoting and reinforcing steel beams. New 8 inch beams were put in; new lead pans, tile flooring and wainscoting, electrical conduit and fixtures installed. New brass pipe was put in for all hot water lines and new galvanized and brass pipe on cold water lines. Three coats of paint were applied to walls, ceiling and trim.

Dairy: Painting operations were carried on for several months, including the cement barn and south barn.

Refrigeration, Main Building: A new refrigerator box, 36 feet x 14 feet x 7½ feet was constructed and equipped under contracts supervised by this division, work being started August 22nd and completed October 15th. The side walls and ceiling are insulated with 4 inch and 5 inch cork and the floor is 4 inch cork covered with 3 inch concrete. The equipment consists of two 5 H.P. water cooler condensers and 2 defusers, all complete with automatic water controlled valves. The condenser units are equipped with automatic defroster arrangements to defrost coils at least 4 times every 24 hours without the use of electricity or water. Mechanics of the construction division made various water and sewer connections and installed all lighing and electrical service.

Employees' Cafeteria: A new hot water heater was installed in this building under contract, the work being completed on March 27th.

Projects under consideration at the close of the year included the necessary contracts for completing work on the additional boiler at the boiler house and reconstruction of a leaking roof over the Main building center. The boiler was installed, completed June 1, 1945, but the brick work, the steam and water lines, and the electrical work, lines and motors have not yet received attention. The roof has been thoroughly examined by representatives of the Central Office the construction division, and the institution, but no final decision has been made.

Business Department

Mr. H. Brevoort Smith, Business Manager, after carrying on through the war period and the trying months of post-war adjustment, in the spring of this year found his health impaired and the strain of his work too heavy. Early in April he submitted a request for sick leave and in June applied for retirement under the Veterans Act, to become effective October 11, 1946, when his sick leave ended. He had been Business Manager of this institution since March, 1937, and prior to that time had been in the service of the Department of Institutions and Agencies elsewhere in the state for many years.

Mr. Herbert L. O'Connor, Superintendent and Business Manager of the New Jersey State Hospital at Marlboro was persuaded to come to this institution temporarily, after Commissioner Bates had consulted with the Board of Managers of this hospital and then persuaded the Board of

Managers of Marlboro hospital to grant a temporary release. Mr. O'Connor is to make a study of the entire department and then offer such recommendations for reorganization as he feels would increase efficiency and submit them to the superintendent and Board of Managers. This hospital is most fortunate in thus obtaining the services of Mr. O'Connor even on a temporary basis, since he is an outstanding authority in this field. Since coming to us he has devoted much of his time to the food situation in all its aspects, and to the general financial set-up. He has submitted to me a report as follows:

"Because of the relatively recent effective date of my temporary incumbency as Business Manager at this Institution, any report from me covering the fiscal year ended June 30. 1946 must of necessity be drawn from divisional reports. I have received copies of the reports already sent me by the heads of these various divisions, and since they appear to be adequately comprehensive, a further report from me on this aspect of the year's activities could not fail to be largely ineffective repetition.

With respect to the broader phases of the Institution's business administration, however, I should like to point out that June 30, 1946, marks the close of the first post-war fiscal period. With V-E Day on May 8, 1945, and V-J Day on August 14, 1945, the Institution staff looked toward the alleviation of many of the problems induced by a state of war, particularly the restrictions on supplies and the grave inadequacy of personnel.

As you know, these situations did not improve with the cessation of hostilities and the gradual discharge of men and women from Military Service. On the contrary, the end of rationing brought new and more serious shortages of foods, and, for a time at least, the shortage of help became more acute than in the war years. Extensive advertising during the second half of the year resulted in the acquisition of much additional help, but a high percentage left after short periods of work. The number of vacancies existing on June 30, 1946 presented a situation which can best be described as grave. The explanation for this lies not only in the fact that higher salaries are available in Business and Industry but also in the fact that the ordinary persons interested in institutional work are now offered by a nearby Institution, salaries greatly in excess of the ranges set by our State Civil Service for comparable jobs.

Another source of unrest among our institution employees has been the general re-classification started by the Civil Service Department on

December 1, 1944. This plan is now virtually complete, but the length of time involved, and the periodic changes reported have given rise to conjectures and speculations, many of which were groundless but nonetheless disturbing to the organization as a whole. The greatest difficulty was experienced with food service and laundry workers in the low brackets, whose re-classification were among the last to be settled, and who have been rated at salaries lower than that for attendants. Since employees in both these categories are obliged to direct details of patients and simultaneously perform productive labor, they feel the difference in remuneration is discriminatory.

The issuing of initial merit ratings for employees on April 1, 1944, brought with it another minor upheaval. Most of this dissention, however, grew out of misunderstandings and was overcome by assurance that this was a trial marking, through which discrepancies could be ironed out. A long-range view of this system of marking employees looks toward greater effort on the part of individuals, and increased efficiency to the State.

Business Office: The hub or center of the institution's activities is the Business Office with its myriad of operations which vitally concern and are concerned with every phase of institutional life. All business transactions including the many division requests through the storeroom are centered in this department and a perpetual inventory is kept in order that purchases might be accomplished in an intelligent manner.

Mr. Robert Lowery, Chief Clerk, is in charge of the Business Office and has directed its activities for the past several years. He is also the Institution Treasurer. Much credit is due the business personnel for the manner in which they were able to take care of the institution's welfare throughout the year, with its many handicaps and long hours of overtime.

Revenue: On June 30, 1946, the total patient population was 5,731, of whom 2,753 were men and 2,978 women. Approximately 76 per cent. of these patients were indigents from counties from whom we collect approximately half of the maintenance cost. Seven per cent. have private status with maintenance paid by relatives or from their own estates, and the remaining 17 per cent. are indigents for whom no legal county residences can be established and whose maintenance, therefore, is assumed in full by the State. At the present time 96 per cent. of the county indigents are chargeable to Bergen, Essex, Hudson, Morris, Passaic and Sussex Counties which comprises the territory this hospital is expected to serve, but all other counties are represented except Atlantic,

Cape May, Gloucester, and Camden Counties. Seven other counties, namely, Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset and Warren have less than ten patients each. Union County is the only one outside of the six counties this institution is intended to serve which has more than ten patients. The total number from Union County is 125.

The total revenue collected from the counties during the year was $1,000,318.92. Those from private patients $216,385.93 and other Miscellaneous Revenue $53,339.40, making a total collection of $1,270,044.25. The county rate was established at the beginning of the fiscal year, July 1, 1945, as $4.20, but changed on January 1, 1946 to $4.76; the rate for private patients was changed on April 1, 1946 from $10.00 to $12.00 per week and the non-residents rate from $15.00 to $17.00.

Food and Food Service: Food service for the entire institution continued to be directed by Mr. William Walton, Sr., who has shouldered that responsbility for thirty years. A great deal of credit is due Mr. Walton for his conscientious and untiring efforts to maintain a reasonably high standard in the face of discouragements and far-reaching complications arising from the past year's economic conditions. Personnel shortages, uncertain and inadequate deliveries, rationing, rising prices, and inability to obtain replacements for worn and broken equipment, were only a few of the handicaps he was obliged to surmount in order to feed our large family three times a day throughout the entire year.

Five kitchens are operated to prepare food for the patient and employee population. The largest of them is located on the first floor of the Main building, and from it approximately 5,000 patients, or 86 per cent. of the total patient population, are served. Its principal equipment is divided into two sections, under one large ventilating hood. On one side, food is cooked for approximately 2,900 patients in the Main building, and on the other for 2,100 confined in the Dormitory and Tuberculosis areas. Only one small dining room is directly connected to this kitchen, and in it are fed those patients who help with the preparation of food. Service to the Main building patients is effected by means of insulated carts which are conveyed by means of elevators; 39 dining rooms are located in the congregate dining halls and on 10 wards the patients are fed locally, making a total of 49 dining rooms. Table service to the patients is made direct from these carts. Trucks are used to bring food to the Dormitory building, also, but those must first travel through ducts in the basement of the Main building to a point where they can be loaded

on a cable car and carried underground to a large dining room. The seating capacity of this dining room, even under crowded conditions, is 600, yet we are obliged to feed 1,000 at this point; hence, double service is required at each meal.

The other trucks leave this kitchen, in the same manner, but must be reforwarded from the Dormitory Building Center to infirmary wards 60, 61, and 63 where there are three dining rooms from which tray service can be sent out; other trucks go to Tuberculosis Pavilion I, which has four dining rooms and Pavilion II with two dining rooms. In addition to the hand trucks a motor truck is employed to transport food trucks from the Main Kitchen to two small Units, A and B, where patients are served in four small dining rooms; patients in Unit A are tuberculous, those in Unit B, working.

This Main Kitchen is designed to serve the Main building population only, and for this it is adequate; however, the demand to accommodate an additional 2,100 patients, scattered about in outlying buildings, results in unsatisfactory service to all concerned. The urgent need for two additional kitchens for this portion of the population is obvious—to serve patients in the Dormitory group and the Tuberculous group, respectively.

The second largest kitchen is located in, and serves, what is known as the Cafeteria. Here, food is cooked and served to the great majority of employees. Also from this kitchen, food is transported by means of heated food carts to 800 patients in the Reception and Clinic buildings, and in a motor truck to a small cafeteria operated at the Dairy for patients working there. This is the best equipped kitchen in the institution, but in effecting service to the Reception and Clinic buildings it is necessary to send the trucks down to the basement on elevators, through basement ducts, and up again on elevators to 17 dining rooms.

The third kitchen, in point of size, is located in a separate building where nurses, affiliates, and a few members of the Staff are served. Although dining room facilities in this building are fair, the kitchen is too small and its equipment inadequate.

Two small kitchens are operated for service to members of the Medical staff and their families, who live in apartment houses.

Maintenance of carts used in transporting food has been a continuous and annoying problem largely because the wear and tear incident to the long hauls required of these carts was aggravated by rough handling from overworked or incompetent help. Mechanics from the Tin Shop

devoted much of their time to repairing and reconditioning this equipment, in an effort to keep it in fairly good working condition, but their regular work suffered in consequence.

In addition to the shortage of employees, the food service was distinctly handicapped throughout the year by a serious lack of small equipment, such as dishes, pots, pans, and food containers.

The normal complement of employees required to take care of all the cooking for this institution has never been reached, even in normal times; hence, it has become an established custom to depend upon patient help to do the bulk of the preparation work. Patients who peel potatoes and prepare vegetables are supervised by the Nursing division, which is supposed to assign details of patients to this work, accompanied by necessary employee supervision. This system has not been satisfactory because, all too often, patients arrive at the kitchen minus the attendants. At such times, an additional and practically insurmountable burden is placed upon persons in charge of kitchens, who must accomplish definite productive work on a time schedule. This dual system of supervision precludes proper organization and increases dissatisfaction in a department already hampered by critical shortages.

Diet Therapy: This important branch of the food service is located in the Clinic building where a kitchen, complete with necessary appointments, is established as a self-contained unit.

Miss Florence Pond, a graduate of the American Dietetics Association training course of the Henry Ford Hospital, Detroit, Michigan, and Madison College, Harrisburg, Virginia, is in charge of this kitchen and has the help of one cook, one senior food server, two junior food servers, six to eight female patients, two male patients, and the assistance of the Detail men in delivering the food trucks to the various wards.

All regular and special diets are prepared and served to patients and employees on doctors' orders. In the past year, 85,567 special diet trays and 95,075 quarts of nourishments were served on wards to patients; and 15,525 special diet trays and 4,125 quarts of nourishments were served to employees' infirmary during the fiscal year.

The Diet Manual of the Massachusetts General Hospital, Boston, Mass., is used.

Bakery: This important food unit is located in the Main building and is equipped with a large gas oven, mechanically operated mixer, moulder, rounder, overhead proof box, extension moulder and two steam

proof boxes. One Head Baker, Mr. Dalhoff, is in charge and has the assistance of a baker, and one helper in addition to several male patients. Bread is baked in loaves weighing two pounds each to which enrichment in the form of Vitamin "B" is added. During the past fiscal year 796,653 loaves of bread were produced, together with numerous buns, rolls, biscuits, sheet cakes and other desserts. A new electrically operated bread cutting machine with a wrapping attachment was installed during the year which greatly improved the storage and sanitary distribution of the bread.

Butcher Shop: Located in the basement underneath the regular Food Service area in the Main building is the institution's Butcher Shop. Here there is sufficient space available to accommodate large supplies of meat which at times is received in car load lots. All meat is cut, prepared, and distributed from this central location. The employees consist of a Head Butcher, Mr. Joseph Feldenzer, who has the help of a qualified butcher, assistant butcher and one male patient. The quarters for cutting meat is rather cramped but other facilities are exceptionally good. During the year much needed refrigeration equipment was installed and the institution is indeed fortunate in this respect.

Laundry: The Institution Laundry is a modern, one-story brick structure, fairly well lighted and ventilated.

For the most part the equipment is modern, of sufficient capacity and kept in good working condition. It consists of eleven washing machines of various sizes, six tumblers, eight extractors, three 8-roll mangles, twenty-two presses and thirty-nine ironing boards.

The staff of paid workers consists of twenty-three, including the Superintendent of the Laundry, Mr. Daniel Leyhan, who in the month of October completed twenty years of service in that capacity.

Most of the sorting, loading, washing, ironing and mangle work is accomplised by groups of patients, both male and female under the supervision of the paid personnel. The therapeutic value of this type of work for patients compares favorably with other forms of Occupational Therapy.

Patients' laundry is called for and delivered daily, except Sunday. Most of this service in handled by means of three wheeled trucks that travel through the building basements, via underground cable and elevators to and from the wards. Employees' laundry is picked up by motor truck on Mondays and returned on Fridays. No special machines or

section of the laundry is set aside for the exclusive use of employees' work; it is handled separately, however, on set schedule.

In the past year the total output was 6,906,000 pieces of various types of laundry."

Engineering Divison

Mr. Henry Landesman, C. E., remained in charge of the engineering division throughout the year. This division included the power plant, water supply, sewage disposal, refrigeration, and maintenance, plus such new construction as was carried by the institutional mechanics. The many duties entailed in supervision of all the activities concerned were sucessfully handled, despite the difficulties keenly felt in this division as in all others because of lack in personnel, equipment, and replacements. Early in the year Dr. Rudolfs of Rutgers University, long a consultant at this institution, wrote a paper on the design and plant requirements of sewage disposal for institutions, and Mr. Landesman wrote for him a paper on the maintenance, engineering and plant management. These papers were read before the American Society for Mental Deficiency in Cleveland, November, 1945. Dr. Yepsen of the Central Office read the paper on engineering. Response was favorable and numerous requests were made for copies of these papers. It is felt that both Dr. Rudolfs and Mr. Landesman are to be congratulated on the work done at Greystone Park. Mr. Landesman's annual report runs in brief as follows:

"The records of the water station showed 251,232,000 gallons pumped and 447,875,000 gallons consumed, which was an increase in the amount consumed and a decrease in the pumping required. The total K.W. hours of the pumps was 443,341. Average daily per capita consumption of water was 215.4. At the power house the total amount of coal used was 33,278 tons, an increase of 2,424 tons over the previous year. During December the daily average consumption was 124 tons, and during June, 63. The average per cent. rating was 123.7, and average steam per lb. of coal fired was 6.9. The dynamo room statistics showed daily average operation of the three D.C. generators was 8.6, 13.8, and 13.5 hours, while the A.C. generator was operated 24 hours a day, with a maximum load of 560 and a minimum of 130, both occurring in June. The refrigeration plant produced 24,713 cakes of ice, a daily average of 67.7. A total of 2,694 cakes was made in June and 1,502 in February. At the sewage disposal plant the total flow recorded was 429,994,000 gallons for the year and the daily average was 1,178,000 gallons. This was a considerable increase over the previous year, amounting to about 240,000 gallons a day.

At the beginning of the year the strain of labor shortage was felt in the boiler room, but at the end of the year the firemen's force was up to quota, although one man was included whose physical condition will soon require his retirement. In the summer of 1945 an effort was made to condition all boilers. Early in the year the coal company had difficulty in furnishing coal which was up to their usual standard. Officials of the company co-operated in taking samples, following up shipments, and studying methods of firing at the institution. Their official report indicated approval of the firing conditions, and close attention gradually brought a better grade of coal, despite a grave shortage in the company's supply of barley coal. The drop in heat unit content of the coal was reflected in increased consumption. During the winter months all four boilers were in operation most of the time. Occasional shut-downs were made for cleaning and repairs. In all about a dozen tubes required replacements, evidently due to improper cleaning because of air compressor trouble. This spring, new stoker parts are needed and have been approved for purchase.

Electric generating has been continued throughout the year and the hospital plant has met all the needs. One operator, almost 80 years of age, served through the war period but has now been replaced by a young veteran; another engineer died in his sleep of a heart attack being about 78 years of age; he had worked until a few hours before his death. He has been succeeded by a former operating engineer. A consultation was held in which the Department of Institutions and Agencies, representatives of the Lackawanna Coal Company, Mr. Kuttler, Chief Engineer of the Prudential Insurance Company, and representatives of the institution discussed proposals made by the Jersey Central Power & Light Company, regarding the purchase of electrical power. Commissioner Bates appointed Mr. Butterworth, Consulting Engineer from Washington, D. C., to make further studies and he spent two days here in March, after which he rendered a report, the conclusions of which advised against the purchase of power.

The water supply has been carefully watched, the chlorinating machines have been inspected daily, and necessary repairs have been made. There have been no serious breaks in the mains this year. A

change was made in the pumping station at the Ice Pond, so that light and heat could be obtained there without keeping the reactance coils alive when the pumps were not running.

The sewage disposal plant has been carefully observed. Samples were taken of the influent, final effluent at the plant, the discharge from Jaqui pond, and the stream at Speedwell avenue bridge. These were analyzed by the Rutgers University Laboratory under the supervision of Dr. Rudolfs. These reports show that the plant is operating well, and that no part of the stream leaving the plant is unduly polluted, and that reception of the final effluent does not make the waters of the township unsafe for bathing. The engineers of the Passaic Valley Sewerage Commission have also visited the plant and made a check test of the bacteriological condition of the streams.

The various refrigerating units of the hospital are both numerous and for the most part, old. In the various dining areas, laboratories, cottages and apartments there are 81 refrigerator boxes. Less than a dozen were new within the last ten years. Beside the domestic boxes, there are 18 commercial type freezing units of various makes, and two large ammonia units, 10 and 15 ton sizes. These pieces of equipment have all been maintained in order with a minimum cost for outside services, and that chiefly for parts.

The maintenance work of the hospital has been kept up this year to the highest point permitted by existing conditions of labor and material.

Dormitory Building: All tubular fire escapes were reinforced, new metal landings were welded in place and the units were painted. Practically the entire force of painters was assigned to this building and considerable work was done, both inside and out. More could undoubtedly have been accomplished had not the painters objected to using the spraying machines.

Main Building: In the bakery, new loafing machines were installed; the cannery was replastered and painted and machinery reconditioned; various sanitation improvements were made in the kitchen and bakery area, four new vegetable steamers were installed, new drains were put in the floor, soaking and washing sinks were welded, and a room was fitted up for mops, brooms and supplies, with partitions, closets, doors, and so on. On Ward 35 a seven patient dormitory was cleaned and painted, radiator replaced, utility cabinets and dressers installed in the general utility room. On this ward and Ward 34 new batteries of steam

operated sterilizers were installed, which included the running of lines to and from the basement and vent lines through the roof. In the course of repairs to the gutters and leaders of this building, it was found that the wood framework of the facades of the dormers was rotted and coming apart, and a difficult replacement job was done by the carpenters, followed by painting. The stone work on the Main building, particularly in the front area, has been given repairs by the masons, with pointing up of open joints. Some fireproof partitions were built in the ducts, as a fire protection measure, and various openings were closed off with brick.

Clinic Building: Extensive repairs were made to all floors of water sections; the diet kitchen was cleaned and painted throughout, new shelving was built in the storerooms and all food containers were put on racks; an area was fitted up as an X-ray developing room for the fracture section.

Reception Building: Although this building has not been in service quite 19 years, it shows unusual wear. The lead pans in the bathrooms have eroded under the concrete and leaks developed. On Wards 4 and 6 it was necessary to install new lead pans, previously given a galvanum coating on both sides to avoid attack from the lime and cement in concrete. The magnesium block construction in the continuous bath section blistered off paint so continuously that some of this construction has been replaced by brick and cement. The mastic coated floors are wearing badly and experiments with various repair materials have not been successful. The hundreds of metal doors in the building have to be refinished, with the remaining areas of old enamel being first scraped off; a painter now is engaged in this work. In general it has not been possible to keep up with the needed painting on all wards.

Hill Residence: The exterior woodwork of this building was repainted. A hot water circulating pump was rebuilt and a number of the thermostatic valve controls on radiators were overhauled in the machine shop, since replacements could not be obtained.

Farm Buildings: A new roof was put on the main building at the hennery, about 5,000 square feet; other repairs were made and new ventilators erected. At the piggery approximately one half of the roof of the main building was renewed and the other section was repaired. At the dairy, several areas where milk was handled were replastered, floors relaid, and interiors painted. A heavy sheet steel sink was fabricated by the welder and installed in the milk handling room. Extensive repairs were made to the roof and the upper floor of the south barn.

The small building for patients was converted into a combination cafeteria dining room and recreation hall. A heavy utility sink was made and installed, a warming closet was installed, new hot and cold water lines and steam and electric lines were run, a full partition erected to close off the toilet section, and a stainless steel covered cafeteria counter was built. The porch was screened and glass sash made for winter use. The building was painted inside and out.

Numerous other repair and construction jobs were done in the maintenance shops and on various buildings during the year. At the carpenter shop, repair orders averaged 2,786 per month, with a total of 33,430; while new work orders totaled 37 for the year.

Institutional Collector

To facilitate collections of funds due the institution for maintenance of patients the office of Institutional Collector was opened and Mr. Frank Allen was named to fill the position. Procedures were established in accordance with directives from the Department of Institutions and Agencies and after conferences with the State Adjuster and with the Superintendent, Business Manager and Treasurer of the hospital. The double purpose was to prevent accounts from going into arrears and to collect delinquent accounts. Work was begun on March 1st.

Over 260 delinquent accounts have been investigated since that time and action taken to effect collection. In a number of instances a compromise agreement was entered into. The procedure was: the case with full data was referred to Mr. Eugene T. Urbaniak, Director of Legal Affairs, Department of Institutions and Agencies; he went over the data and recommended the compromise agreement to the Board of Managers at their regular meeting; the Board voted to approve the settlement as recommended. Institutional liens were filed in three cases where there were sufficient assets to pay for maintenance but no effort was being made to meet the obligation. A total of 33 visits were made to the County Adjusters in five counties and they were all found to be friendly and co-operative. There were 65 interviews held with relatives and friends of patients at the Greystone Park office. The collection of maintenance for war veterans was discussed with the Chief Attorney for the Veterans Administration, the disabilities decided and the proper fees granted. In 42 cases in which the mental conditions were not service connected, there was a re-adjudication. A close check is being

maintained on the financial condition of non-indigent patients and whenever an estate is exhausted or relatives become financially reduced, the facts are taken to the County Adjuster and the responsibility for future maintenance determined.

Service Unit and Store

A small building known as the Service Unit has been maintained this year as formerly for the convenience of visitors and residents at the institution. It is under the supervision of the Board of Managers, but is kept on an independent basis, financially. Profits over the cost of supplies and personnel have been regularly assigned to the fund for patients' amusements. Again this year Mr. and Mrs. Millard Fairchild have been in charge of this Unit and have managed very well indeed, despite many problems. At the Unit is an ushers' desk where visitors register and receive their passes; a card index kept up to date each day facilitates the giving of passes and directions. A rest room is also provided. At the opposite end of the building is located a lunch room, supplied with both tables and a quick lunch bar, and with a separate soda and ice cream bar.

The store has been kept in the ducts of the Main building for many years and furnishes magazines, soft drinks and light lunches to both patients and employees. This year the newspaper delivery business was transferred from private management to the Store. For a number of years one man has been in charge of this shop and proved most competent and trustworthy at all times. Funds from this business are also assigned to the patients' amusement.

Garage

At the central garage of the institution all motor vehicles have been housed and serviced, except those assigned to special divisions, such as fire service and greenhouse and garden. Included were the small sedans used by the two groups of social service workers, the larger automobiles and station wagons assigned to general hospital service, the bus and ambulance, and the trucks of all sizes. No new vehicle was received at this central garage, although the greenhouse division got a bulldozer and the fire department a fire truck from army surplus. The problem of keeping on the road this assortment of motor vehicles has been almost insuperable, since the newest were three trucks acquired in June, 1942; and three passenger cars were delivered in November, 1941. All other

vehicles are older. It has been the custom when possible to exchange cars for new ones after three years of service; that means that cars due to be turned in from 1942 on are still being maintained in service, at high cost in labor and parts, and with their condition at best none too safe. Many of the trucks can be used only on short trips about the grounds. Emergency repairs on the road have been frequent with all hospital vehicles. Mr. William Walton, Jr., has continued successfully to direct the garage activities, check on cars, mileage, gas and other equipment, assign drivers to duty and maintain a service to cover requirements. He has been hampered by a shortage in personnel, and has had to make additional adjustments to comply with the 48 hour week schedule.

Upholstery Shop

The year began with serious shortages of materials which hampered the work in this shop. Included in the work done here has been the making and repairing of mattresses, the making and repairing of shades, curtains and draperies, the upholstering and slip covering of furniture, putting down, repairing and taking up of floor coverings, the making, installing and removing of awnings, and the repairing of shoes. More ticking and slip cover material was obtained in the latter part of the year, but leather for repairs, particularly of that suitable for women's shoes, remained very scarce. The following figures have been submitted.

NEW WORK

Pillow ticks	1,241	
Single mattress ticks	436	
Double mattress ticks	3	
Single mattresses	224	
Double mattresses	7	
Hair pillows	787	
Feather pillows	51	
Furniture upholstered	40	
Furniture slip covers	33	
Linoleum jobs	6	
Glass curtains, pairs	53	
Draperies	11	
Shades	488	
Awnings	5	
Mitts for kitchen use	186	
Miscellaneous jobs	472	
Total new work		4,043

REPAIRS

Hair pillows made over	371	
Single mattresses made over	1,443	
Single mattress ticks made over and repaired	1,443	
Linoleum	17	
Awnings, hung and taken down	361	
Shoe repairs	1,575	
Miscellaneous repairs	15	
Total repairs		5,225
Total pieces work done		9,268

Tailor Shop

Work done at the tailor shop consisted of pressing, repairing and altering clothing for men patients, pressing of trousers made in other shops before sending to storehouse, pressing of men patients' clothing after laundering, making and repairing various canvas articles, making and repairing uniforms, and various pressing and repairing done as directed. The following figures for the year's work were submitted by Mr. Frank Di Primo:

Patients' suits pressed and repaired	645	
Patients' trousers pressed and repaired	1,635	
Patients' overcoats pressed and repaired	46	
Patients' overalls and pants repaired	7,576	
Patients' suits altered	85	
Patients' pants altered	455	
Total pressed, altered and repaired		10,442
Trousers pressed for storehouse		1,016
Coats pressed for laundry	17,680	
Pants pressed for laundry	19,335	
Vests pressed for laundry	400	
Total pieces pressed for laundry		37,415
Heavy canvas articles made	706	
Heavy canvas articles repaired	4,921	
Total canvas articles made and repaired		5,627
Police officers' uniforms pressed and repaired	70	
Police officer's uniform pants made	1	
Chauffeurs' uniforms pressed and repaired	235	
Chauffeurs' uniforms made	7	
Suits pressed and repaired	1,327	
Trousers pressed and repaired	376	
Overcoats pressed and repaired	36	
Total made, pressed and repaired		2,052
Total pieces work done		56,554

Garden

Garden production at the institution this past year was second highest in history, amounting to a total valuation of $45,445.81. Mr. Britton Koch was again in charge of the vegetable gardens, as well as the greenhouses and grounds, and had very good success, especially in view of the extreme difficulty in obtaining and retaining competent personnel. Patients were used extensively, but the shortage was felt even here, because the number of young and active men has shown a decided decrease during the war years and since the introduction of shock therapy. Mr. Koch has submitted a very detailed report which shows all types of work done under his directions and the quantities of each. The vegetables were delivered to eight kitchens, in addition to those in cottages, about 24 more. Beside the vegetables raised on the place, purchased vegetable produce was assigned to the garden division for sorting and distributing on requisition. The largest item purchased was potatoes, which it is felt cannot be profitably raised on the limited ground available for cultivation; 2,009,536 lbs. of potatoes were received, sorted and distributed this year. Another large item was cabbage, for in addition to the 64,778 lbs. grown here, 243,660 lbs. were purchased. From the cover crops grown, there were delivered to the dairy 7,485 lbs. of clover, 49,995 lbs. of green rye, and 1,850 lbs. of green wheat; while 4,250 lbs. of rye straw was sent to the horse barn.

About 360 flats of seed were sown and cared for at the greenhouse, including 53 flats of lettuce in 5 varities; 57 flats of tomatoes in 19 varieties; 94 flats of peppers in 15 varieties; 34 flats of onion in 5 varieties; 78 flats of cabbage in 6 varieties; and smaller quantities of celery, egg plant, and leek. Parsley, lettuce and endive were sown in frames. The plants transplanted in frames included lettuce, endive, pepper, cabbage, tomato, celery and broccoli, with totals of about 275,000 plants; 69,600 plants were transplanted in flats; 7,470 egg plants were transplanted in $2\frac{1}{2}$ inch pots; and 376,300 plants and seedlings were transplanted in the fields, including cabbage, cauliflower, celery, onion, broccoli, pepper and egg plant. In addition to the cover crops, nearly 2,000 lbs. of seed were sown directly in the fields and 2,058 onion sets were put in. Cover crops sown included 55 lbs. of alsike, $83\frac{1}{2}$ bu. of wheat and 91 bu. of rye.

Tractors were used in the garden 322 days cultivating, discing, plowing and spreading manure. From the various animal industries

manure hauled to the gardens included 1,216 team loads, 573 small truck loads, and 212 large truck loads.

Other garden activities included making crates, flats, frames, and repairing this equipment and also sash and shutters.

An exhibit was displayed at the Trenton State Fair, but won only 5th place. In November at the Morris County Gardeners Show nine varieties of vegetables were exhibited and won five 1st prizes, three 2nd prizes and one 3rd prize.

Farm

As in former years the farm has been under the immediate direction of Mr. P. F. Havens, supervised by Mr. Coursen. Credit for production was not high, amounting to $11,777.16. Heavy rains was one of the causes given for reduced production. Also, the corn harvester, destroyed by fire had not been replaced; one was borrowed from a nearby farmer, but was not in the best of condition, breakages occurred and the harvesting was delayed, with resultant drying out of the corn. The machine ordered more than a year ago has not yet been delivered. The chief farm products are feed for the dairy, although sweet corn and apples in good years add materially to the patient and personnel dietary.

Stable

There was no change in the number of animals at the horse stable this year. The two young percherons were broken to harness late in the fiscal year. The census of stock showed 7 horses assigned to the farm and 5 horses and 3 mules to the garden. The veterinarian made several calls at the stable to care for minor injuries and illnesses. At the end of the year all were reported as recovered.

Dairy

For the past four years the dairy has shown a gradual but continuous decrease in production, so that present daily milk yield is running 35 per cent below that of 1942. The reasons for this unfortunate situation are many, but seem to center about the problems of personnel and feed, with deteriorating plant as a contributing factor. When production was high, a large number of cows could be maintained on a schedule of milking three times a day, and the milk yield was 20 per cent higher from these animals than on the twice a day schedule. With the decrease in personnel consequent upon the war period it was difficult to maintain a force sufficient for even simple routine care and only a few animals could be milked three times daily. The decrease in per-

sonnel resulted in heavier duties and accumulation of overtime, which in turn brought about lessened efficiency and more frequent turnover. Within the period of four years, over 100 men were employed and left the dairy; at present the force consists of 11 paid employees, most of whom have from 5 to 60 days of over-time due them. It would require 20 paid men to keep up the work and cover the time off. Since our patients have been drawn largely from urban areas, there are few good milkers to be found among them, and the depleted employed personnel was inadequate for supervision and instruction.

In January of 1944 a gland infection appeared in the herd called by the veterinarians actinobacillosis. Other cases developed during 1944 and 1945. The animals chiefly affected were young calves and heifers; 28 were slaughtered, 10 recovered. The source of the infection was thought to be hay or grass. This spring, three cows showed a discharge from the nostrils; two were slaughtered and condemned for lung lesions; the third was treated with sulfathiazole and recovered.

There has been no epidemic mastitis, but sporadic cases appear. Tests with strip cup have been made before each milking, to determine if flakes were present in the milk, and if they were found the cow was removed from the milking line and treated. Periodically, a check was made of the entire herd by the veterinarian with udder examination, strip cup, and thybromal test.

Bangs disease seemed almost eliminated in 1945, when the February test showed two animals positive and one suspicious. This spring there has been a marked increase in cases: On March 27th, three animals were positive, four highly suspicious and five slightly suspicious, a total of twelve. By May 1st the total had risen to twenty-eight, and on June 10th the total was forty-five, of which 23 were positive, 8 highly suspicious, and 14 slightly suspicious. The positive animals were placed in isolation immediately.

Whenever animals had decreased production or for any reason should be eliminated from the herd they were slaughtered, examined by the veterinarian, and either passed for food or sent to the incinerator. During the year 50 cows, 4 heifers and 1 bull were slaughtered and passed for food, 8 cows were killed and destroyed, and 3 died. The loss of 65 cows and heifers from the herd in one year is difficult to replace from the young stock raised, and has further reduced the milk supply.

The livestock has been under the supervision of Dr. J. A. DeGroodt, veterinarian throughout the year. Dr. R. A. Hendershot has been called in from time to time and on June 25th visited the dairy and arranged for vaccination of the young stock in an effort to check the increase in Bangs disease.

One problem confronting the dairy is the lack of pasture and hay land at this institution. Corn for ensilage is raised, as well as a certain amount of beets and turnips for feed and some green fodder, alfalfa predominating. All hay and grain have to be obtained through the purchasing department, and the general scarcity and high prices have resulted in less satisfactory feed than formerly.

The existing barns are antiquated, most of them of wooden construction, are not fire resistant, and are extremely difficult to maintain in a sanitary condition. This situation has been, of course, another problem to add to that of inadequate, inefficient, and uninterested employees, who unfortunately have outnumbered the loyal and hard working men.

The daily milk production average for the year ending June 30th was 1,953 quarts, as against 3,026 quarts in 1942. At the present time, 1,000 quarts of milk are being purchased daily at a price of .117¢ per quart (compared with the Farm Supervisor's price of 10¢ set for the milk produced here.)

Mr. Hugh McLellan has continued as chief dairyman, a position which he has held since 1939, and has kept up his active and interested work, despite the heart-breaking obstacles. Mr. E. I. Coursen has maintained co-operative oversight of this and the other animal industries and the farm. The herd census is as follows:

During the year 180 calves were born and 1 bull was received from the State Hospital at Trenton; 50 cows were slaughtered, 8 destroyed, 3 died, 4 heifers and 1 bull were slaughtered; 47 calves were vealed, 56 destroyed, 33 died.

Dairy Census, June 30, 1946

Milking cows	160		
Dry cows	26		
		186	
Heifers	50		
Heifer calves	72		
		122	
Bull calves	4		
Bulls	2		
			6
Total			314

This is a decrease from last year of 21 animals, 18 of which were cows.

Piggery

Under the supervision of Mr. Coursen the piggery had a successful year. No serious outbreaks of disease occurred. All animals were injected for hemorrhagic septicemia and double treated for cholera. Mr. Ernest Spel was in charge from the beginning of the year—having been employed in 1943—until February, when he went to the Clinic for treatment of a heart ailment and in March, while at the Clinic, suffered a cerebral hemorrhage.

During the year a total of 388 pigs were slaughtered at an average weight of 283. The total of 109,875 lbs. of pork was given a valuation of $21,481.98; this was an increase in pork of 12,092 lbs. and in valuation of $3,547.40. The census for June 30th stood as follows: During the year there were 553 pigs born and 1 boar purchased; deaths of sucklings numbered 187 and there were a few deaths among the older animals.

PIGGRY CENSUS, JUNE 30, 1946

Sucklings	58
Shoats	220
Boars	2
Sows	40
Fattening hogs	129
Total	449

Poultry Plant

Appointed on July 7th, Mr. Matthew Casey was in charge of the poultry plant during the remainder of the year. Conditions showed a marked improvement over 1943 and 1944, when poor feed and inferior stock resulted in low production, This year in a lot of 1,500 chicks purchased in February coccidiosis and rickets developed. Dr. G. E. Hudson of the New Jersey Agricultural Station at New Brunswick advised feeding of cod liver oil and some of the birds recovered. The loss was approximately one-third of the lot. Deaths among the hens and pullets were also rather high. During the year 2,500 chicks were purchased; fowl and broilers killed for food amounted to 5,375 lbs., and eggs numbered approximately 15,700 dozen. Total valuation of products was $9,053.87, which is $1,864.67 above that of last year.

POULTRY CENSUS, JUNE 30, 1946

Hens	432
Pullets	908
Young stock	462
Cockerels	249
Total	2,051

Miscellaneous

Trucking Service: Every day of the year trucking was carried on about the hospital grounds delivering supplies and food from the various centers to points of use. Laundry, coal, waste materials, construction supplies, live stock and a long list of other items required constant trucking service. Express had to be brought to the institution from the stations at Morris Plains and Morristown, as well as such freight as was not shipped direct on the spur railroad. Many long distance hauls were also required for bringing hay and other feed for the live stock and for exchanging goods between this institution and others in the state. The total truck mileage for hauls off the hospital property amounted to 23,918. This is a considerable reduction over the previous year, and 291 trips were listed as compared with 368 last year.

Exterminator: The force of exterminators have done effective work under the direction of Mr. Frank Roberts. Roaches, flies, rats and mice have demanded continual attention. Dairy buildings, piggery, poultry plant and storehouse have been treated and kept in good condition, though not continually free. Gas was used for rats and mice in the farm buildings, traps in most other areas. All complaints were promptly investigated. Beetles, flour moths, bed bugs, silver fish and various types of ants were treated, and even skunks and ground hogs were given attention.

Railroad: The spur line of track to the institution has been kept free of weeds in the summer season, and ice in the switches in winter. A delivery of 250 ties was received this year, but they have not yet been put into service, owing to the small number of workers available.

Coal and Ashes: The coal used at the institution has been brought in by railroad cars and then has had to be unloaded by hand to provide a reserve supply. The quantity received during the year was over 36,000 tons. Ashes and carbon have been utilized at various places on the grounds. Over 9,000 cubic yards of cinders were given to the State

Highway Department and to local communities and Morris County without charge for use in highways and other public works. A total of 4,040 cubic yards were sold to private individuals and the money turned over to the State.

Drinking Water: During the year a total of 61,597 bottle deliveries were made from the bottling room to the points of use and empty bottles were returned. Most of the bottles were 3-gallon size. Breakage was not excessive.

Patients: The groups of working patients employed in these various outside activities have been under the general supervision of Mr. Coursen, who has directed that every care should be taken of their health and comfort. It has been increasingly difficult to obtain the requisite number of able-bodied and willing workers, because of factors affecting admissions and resident population.

Mr. E. I. Coursen: Assistant Business Manager, on January 16, 1946, completed fifty years of consecutive service at the institution. A luncheon was given him ten days later at which were present, in addition to resident officers of the hospital, Dr. Knight and Senator Abell of the Board of Managers, and Deputy Commissioner Gerry and Commissioner Bates of the Department of Institutions and Agencies. His loyal and efficient service over the half century was praised in many speeches which recognized the inestimable value to an institution of such steady and devoted interest, and he was presented with a gold wrist watch as a memento of the occassion.

Recommendations

So much construction and replacement are desperately needed that it is hard to pick out for especial mention any items more worthy of attention than all the others. Some situations are awaiting further study before any recommendations can be made, others have been considered and their urgency recognized to the extent of appropriating funds for their correction, only to have the building cost make it impossible to do the work:

Addition to the Tuberculosis Building

Funds to the amount of $500,000 were appropriated for the construction of an addition to the Tuberculosis building; plans and specifications were prepared by the Division of Architecture and Construction, and the

lowest bid obtained was $330,000. From the original appropriation it was necessary to deduct $12,000 to cover the work done by the Division of Architecture and Construction. Beside the addition as planned, a suitable kitchen should be provided as requested last year, equipped to serve the special diets which are mandatory in treating this disease, and provided with a dining room for ambulatory patients and space for preparing and setting up trays in large numbers.

Kitchen, Dormitory Building

The present food preparation set-up requires that cooking be done in the Main kitchen for the entire Dormitory group and the food transported in 14 steel food cars and 6 additional food car boxes to the 14 dining rooms in the Dormitory area, all of which are located at a considerable distance from the Main kitchen. A former kitchen area exists at the Dormitory building. The re-equipment of this kitchen and its restoration to service would greatly relieve the overcrowding in the Main kitchen and would make it possible to serve more appetizing and palatable food to the many hundred patients in this group.

Infirmary Building

This year the median age for admissions passed into the 50-54 age group, in 1940 it was ten years younger, in the 40-44 age group. If the state hospital is to continue accepting all the old people that the communities of its district care to send, further provision must be made for infirmary areas. Approximately 37 per cent. of the first admissions were suffering from psychoses of the arteriosclerotic or senile types; many such patients are bedfast, few are able to protect themselves from falls and injuries if kept on wards with young and active patients. An infirmary building should be constructed to provide at least 200 beds for this type of patients.

Isolation Building

As I pointed out in my introduction to this report, a hospital of this size should have an isolation pavilion to care for any cases of contagious diseases without exposing the general hospital population. For more than two years, we have been maintaining 14 typhoid carriers on a ward area in the Main building south, which is neither designed nor suitable for such patients. In many instances patients or personnel ill with some contagious disease have had to be cared for on the regular wards. Fortunately, we have had no serious spread of infection, but the danger is always present.

Employees' Housing

Before the war emergency reduced abruptly the number of attendants, housing was decidedly inadequate; some of the men were obliged to sleep in dormitory areas and many single rooms had two occupants. In 1940 I urged the construction of additional housing for employees; we now have more than 300 additional patients, we are attempting to work on a 48 hour week, which demands more ward employees for constant coverage, and we have not yet received additional buildings for employees. At present we have on hand a number of Federal Government 'huts' which when set up are expected to provide temporary quarters for a comparatively small number of war veterans. At best these are not likely to offer much attraction and I feel that an immediate beginning should be made for constructing a permanent residence for employees. This vicinity, unfortunately, offers no low cost living quarters available for rent by our employees as an alternative to living on the hospital grounds.

Cottages for Physicians

I feel that cottages for physicians, perhaps two each year, should be a part of the regular building program until adequate housing is provided for all the staff.

Recreation Building

For many years the hospital has felt the need of a separate gymnasium and recreation building where activities for patients could be arranged and the physical education teachers could carry on their important work under satisfactory conditions. At the present time all recreation halls are located on upper floors and the gymnasium rooms are small and low ceilinged, situated in a half-basement area. Some years ago the grandstand burned and has not been replaced. This was near the baseball diamond and was regularly filled with patients for Saturday afternoon ball games and other spectacles. Since it was lost only patients having parole are able to attend the games.

Fire Protection

A number of requests have been made by the Fire Chief for additional equipment and replacements. One is for the extension of the fire alarm system by providing suitable wiring for one loop which is still carried on a temporary wire leased from the telephone company.

Electric Generating Equipment

Since after careful study it seems most wise for the present for the

institution to continue producing its own electric current, rather than to buy it from a large power company, certain additional equipment has been recommended as necessary to take care of the needs of the various buildings and divisions.

Mental Hygiene Clinics

The value of the Mental Hygiene Clinics operating from this hospital has been amply demonstrated. I earnestly recommend that a sufficient sum be appropriated to permit the expansion of these clinic facilities until they approximate public demand.

Thompson's Pond

This area is unsightly and a breeding place for insects. I feel that a sum should be appropriated for clearing it of sediment and refuse, repairing the dam, and making this the attractive entrance to the grounds which it should be, perhaps even with gates attended by a watchman.

Automobiles, Trucks and Farm Machinery

Practically all automotive equipment is in a deteriorated condition and maintained in service only by frequent and expensive repairs. It is becoming increasingly difficult to obtain spare parts for replacements in these antiquated machines, so that any break means a long period out of service. In addition to replacements, additional new cars should be provided for the social workers of the mental hygiene clinics and of the hospital social service, since both these organizations are recommended for increased personnel.

Loss of Employees by Retirement or Death

Miss Ellen Logan retired on pension, October 1, 1945, having entered the employ of the institution July 16, 1893. Miss Logan belonged to a family long resident in this vicinity which has provided many good employees to the state service, but none have worked so long and faithfully as she. First as an attendant, then in the supervisor's office she served for many years. More recently she was an usher, receiving visitors and directing them to the proper building and ward. Having completed more than fifty-two years of service and becoming the oldest employee of the hospital in point of years on duty, she finally decided to retire and enjoy the pension to which she was so much entitled.

Five deaths were recorded this year, as follows:

David Alexander, greenhouse employee, died on July 17, 1945, on the Public Service bus while on his way to work in the morning. He

was 73 years of age and the cause of death was coronary thrombosis. He had been in the employ of the institution since March 8, 1934.

William J. Dore, charge attendant in the Main and Dormitory buildings for many years, died on Ward M-3, October 25, 1945, from adeno-carcinoma of the liver. He was 67 years of age. He entered the service of the hospital first April 14, 1916, resigned August 24, 1922 and returned on December 6, 1922, remaining until his death.

Frank Murphy, night watchman, died on Ward M-3, December 19, 1945, at the age of 69 from chronic myocarditis and general arterio-sclerosis. He had been in the employ of the institution since September 13, 1944.

Peter J. Galvin, aged 69, attendant in the Dormitory building and detail worker, died on January 21, 1946 on Ward M-3 of adeno-carcinoma of the tongue. He entered the employ of the institution February 16, 1939.

Michael O'Rourke, power plant employee, died suddenly at his home on February 7, 1946, after having been on duty a few hours before. He entered the service of the institution on June 25, 1943.

I feel that this report should not omit some reference to the death on October 31, 1945, at Haddonfield, New Jersey, of Mr. Orlando Bowen who resigned his position at this institution on June 30, 1926, after having served as "Warden" for seventeen years. He was appointed when the system of dual management was in force, with the medical and business departments under separate heads of equal rank, and continued to serve for many years after the present system was put in effect. His long service to the institution is well remembered by many patients, employees and officers to whom Warden Bowen represented a definite period in the history of the hospital.

Distinguished Visitors

As in previous years, the hospital continued to receive and welcome a variety of visitors, many from distant states. Dr. Walter J. Urban, Director of Mental Hygiene, State Department of Public Welfare and Mr. Raymond Kirchoof, State Architect, came here from Wisconsin for possible ideas in planning their post-war building program. Visitors from Kentucky, Tennessee, Kansas and Indiana were also listed. Dr. Samuel Hamilton of the mental hygiene section of the Public Health Service came from Washington, D. C., to inspect and advise, and Miss Mary Corcoran, R. N., of the same office visited our nursing division more than once during the year.

The Mental Hygiene Clinics continued to attract visitors from distant points as well as many from clinics and schools of social service in New York and Massachusetts. Visitors to the nursing division were numerous and frequent, as has already been mentioned. Mr. Koehler of the Division of Education received many students and teachers, professors and clergymen from near-by schools and colleges and theological seminaries. Occasionally visitors from more distant points found their way to this division for information. Social service workers, church groups, and those interested in personnel work in industry were frequently received.

Visitors from the Central Office continued to give much time to ascertaining the needs of this institution and making consistent efforts to provide for those most urgent. Among them were Mr. Gerry, Dr. Fisher, Mr. Hankin, Mr. Klein, Mr. Spencer Smith, Mr. Wood, Mr. Rockhill and many others. Mr. Reeve Schley of the State Board of Control was kind enough to visit this hospital on more than one occasion, and Dr. Cotton has made several visits and inspections with recommendations since his appointment to the Department. Dr. Carpenter and Mr. Male visited in the interests of reclassification work. Visitors from the various departments of other mental institutions in the state were welcomed often, including those from the Veterans Hospital at Lyons, as well as from Trenton and Marlboro State Hospitals and the several county institutions.

Members of the local Board of Managers have been faithful in their attendance at regular meetings, committee meetings and special occasions at the institution. Dr. O'Hanlon and Mrs. Doyle have been at the hospital a number of times for special conferences and committee meetings; Mrs. Garrison's frequent visits to the nursing and other services have been most welcome and the many patients with whom she comes in contact have recognized in her a good friend; Dr. Knight and Senator Abell have given most freely of their time and advice, both in person and by telephone, almost daily throughout the year.

Commissioner Bates has devoted much time and thought to the program at this institution, has made many personal visits, and has consistently endeavored to understand and help in every way possible.

Acknowledgments

Throughout the year a consistent effort has been made to acknowledge all gifts as they were received, either through a personal letter to

the giver or through the columns of *The Psychogram*. Those most frequently mentioned have been magazines and books, cigarettes and tobacco, food delicacies, clothing, and scrap material for use in the occupational therapy shops. Articles have often been brought to individual patients or to whole wards or groups, of which no notice was given at the office and so no acknowledgment was made.

In these pages I wish to thank all the givers who have tried to make our patients happier and more comfortable. That includes the visitors who came with their arms filled with packages, and it also includes the hospital personnel who day after day from their own pockets supplied gifts and delicacies to reward and encourage the patients under their immediate care. It also includes the many patients who have generously helped those of their fellows who were in greater need, and who have shared their own possessions freely with others. It too includes the members of the Board, the State Officials and all others who have given in so many ways to bring cheer and pleasure to those within these walls.

Appointments and Resignations

Resident Physicians Appointed:

Jerome McSweeney, M. D.	July 24, 1945
Percy R. Crane, M. D.	October 15, 1945
Samuel L. Pollock, M. D.	October 15, 1945
Robert P. F. Fitzgerald, M. D.	October 20, 1945
Joseph Zigarelli, M. D.	November 1, 1945
Kenneth Bremer, M. D.	January 22, 1946

Resident Physicians Returned from Military Leave:

Jack Oatman, M. D.	December 4, 1945
Amedeo Naclerio, M. D.	December 12, 1945
William H. Longley, Jr., M. D.	December 17, 1945
Archie Sofman, M. D.	January 11, 1946
Archie Crandell, M. D., Assistant Clinical Director	January 23, 1946

Non-Resident Physician Returned from Military Leave:

Theodore Gebirtig, M. D., Assistant Director of Mental Hygiene Clinic	November 1, 1945

Resident Physicians' Resignations:

Samuel L. Pollock, M. D.	October 17, 1945
Jerome McSweeney, M. D.	November 22, 1945

Promotions, Medical Staff:

Resident Physician to Senior Resident Physician:

Stuart N. Cahoon, M. D.	July 1, 1945
Jack Oatman, M. D.	December 4, 1945

Amedeo Naclerio, M. D.	December 12, 1945
William H. Longley, Jr., M. D.	December 17, 1945
Archie Sofman, M. D.	January 11, 1946

Other Officers Returned from Military Leave:

James R. Mentel, D. D. S., Senior Resident Dentist	January 28, 1946
William G. Beucler, Administrative Assistant to Chief Executive Officer	February 8, 1946

Other Appointments:

Roy C. Strickler, Resident Dentist	March 16, 1946
Mrs. Agnes Alvord, Director of Social Service	February 1, 1946

Other Resignations:

Joseph Y. Bloom, D. D. S., Resident Dentist	February 3, 1946
Edwin E. Saunders, D. D. S., Senior Resident Dentist	June 30, 1946
Miss Margaret Carlin, Director Social Service	January 31, 1946

Conclusion

As clearly shown in this report, the year which brought the end of the war did not bring the end of war induced problems. General unrest, decreased food supply, decreased purchasing power of the dollar, continued or greater shortages in many necessities, all made themselves felt in the institution. The hoped-for increase in personnel did not come, nor were worn out clothing and equipment replaced. Many services continued to deteriorate. All of this placed a severe stress upon the officers and personnel, already overstrained by war time burdens and anxieties. Slowly and gradually, however, improvements began to appear. The medical staff was replenished by returning veterans. The reclassification was completed and most employees found themselves on a more satisfactory financial basis. The merit rating system was introduced in an effort to provide the faithful and efficient employee with definite recognition for his efforts. Finally, in April the 48 hour week became a fact for all employees. All of these improvements began to show effect by the end of the year, leading to a hope that we had touched bottom and all further change would be favorable.

In view of the conditions enumerated, it is impossible for me to express adequately my appreciation of all those officers and employees who worked their hardest throughout the dark period when efforts seemed most hopeless. It is due to them that the institution continued to function as a curative hospital. The constant help and encouragement given by you of the Board of Managers has meant more to me and to

the other resident officers and to personnel and patients than you can possibly know. You never stopped seeking a way to improve conditions, and in this Commissioner Bates most earnestly agreed and offered all the support of his position.

Respectfully submitted,

MARCUS A. CURRY, M. D.,

Medical Superintendent

and Chief Executive Officer

STATISTICAL APPENDIX TO CHIEF EXECUTIVE OFFICERS REPORT

TABLE I.

GENERAL INFORMATION

1. Date of opening as a hospital for mental diseases..... August 17, 1876

2. Normal capacity..... 4,170

3. Value of hospital property—Total..... $13,815,588.52
   Real estate, including buildings..... 12,192,151.05
   Personal property..... 1,623,437.47
   Total acreage of hospital property owned (Includes grounds, farms and gardens, and sites occupied by buildings.) 1,178.00
   Additional acreage rented.....
   Total acreage under cultivation during previous year..... 295.11

4. CENSUS OF PATIENT POPULATION AT END OF YEAR

	Resident population			Non-resident population		
	Total	Men	Women	Total	Men	Women
WHITE—Total	5,422	2,607	2,815	864	321	543
Insane	5,095	2,443	2,652	847	310	537
Epileptics	....	....	....	..	..	..
Mental defectives	327	164	163	27	11	16
Alcoholics	....	....	....	..	..	..
Drug addicts	....	....	....	..	..	..
Neurosyphilitics	....	....	....	..	..	..
All other cases	....	....	....	..	..	..
COLORED—Total	309	146	163	66	30	36
Insane	294	140	154	64	30	34
Epileptics	....	....	....	..	..	..
Mental defectives	15	6	9	2	..	2
Alcoholics	....	....	....	..	..	..
Drug addicts	....	....	....	..	..	..
Neurosyphilitics	....	....	....	..	..	..
All other cases	....	....	....	..	..	..
GRAND TOTAL	5,731	2,753	2,978	930	351	579

	Total	Men	Women
5. Patients employed in industrial classes or in general hospital work on date of report	2,674	1,237	1,437
6. Voluntary patients admitted during year	246	134	112
7. Total different persons given advice or treatment in out-patient clinics during year	846	561	285

TABLE I.—(Continued.)

ADMINISTRATIVE STAFF IN SERVICE AT END OF YEAR

	Full Time - Part Time			
	M.	W.	M.	W.
Grand Total	550	323	2	
MEDICAL ADMINISTRATION—Total	241	235	2	
1. Superintendent and Chief Executive Officer	1			
2. Assistant Superintendent and Chief Executive Officer	1			
3. Clinical Director	1			
4. Assistant Clinieal Director	1			
.5 Other Physicians—Total	*21	2	2	
a. Ward duty—direct care of in-patients	15	1		
b. Specialists (cardiologists, roentgenologists, etc.) not on ward duty	5	1	2	
c. Pathologists	1			
6. Dentists	3			
7. Dental Internes	1			
8. Pharmacists	3			
9. Graduate Nurses	3	**52		
a. Supervisory or administrative duty		21		
b. Ward duty—direct care of in-patients	2	27		
c. Special duty (X-Ray, hydrotherapy, physiotherapy, laboratory, etc.)	1	4		
10. Other nurses and attendants (excluding occupational therapists and 83 affiliate nurses)	***160	106		
a. Ward duty	136	86		
b. Special duty	24	20		
11. Occupational Therapists and Assistants	8	16		
a. Professional	6	15		
b. Attendants assigned to Special Service	2	1		
12. Physical education directors and teachers		3		
13. Medical Clerks	6	33		
14. Other Employees	*31	16		
15. Hospital Social Service - Parole Division - Total	1	7		
a. Director		1		
b. Social Workers	1	6		

TABLE I—(Continued.)

ADMINISTRATIVE STAFF IN SERVICE AT END OF YEAR

	Full Time - Part Time			
	M.	W.	M.	W.
BUSINESS ADMINISTRATION—Total	306	71		
16. Business Manager	†1			
17. Assistant Business Manager	1			
18. Clerical Employees including Stenographers and Bookkeepers	21	10		
19. Dietitian		1		
20. Housekeeping Employees	1	31		
21. Farm Employees (excluding attendants)	7			
22. Other Employees	****275	29		
MENTAL HYGIENE CLINIC—Total	3	17		
a. Physicians	2			
1. Director	1			
2. Assistant Director	1			
b. Director Clinic Social Workers		1		
c. Assistant Psychologists	1			
d. Social Workers		8		
e. Clerical Employees		8		

* Includes one employee on military leave.

** Includes seven employees on military leave.

*** Includes six employees on military leave.

**** Includes ten employees on military leave.

† Includes one employee on sick leave.

TABLE II.

FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 1945

RECEIPTS			
1.	Balance on hand from previous fiscal year		$ 00.00
2.	Received from appropriations		2,493,092.29
3.	Received from paying patients		
	(a) Devoted to hospital use		
	(b) Paid into State general fund	$ 257,950.79	257,950.79
4.	Received from other government sources		
	(a) Federal	$	
	(b) State		
	(c) County (paid into State general fund)	1,000,318.92	
	(d) City		1,000,318.92
5.	Received from all other sources		
	(a) Devoted to hospital use	7,209.26	
	(b) Paid into the State general fund	4,565.28	11,774.54
6.	TOTAL receipts (Sum of Items 1, 2, 3, 4, and 5)		$3,763,136.54
DISBURSEMENTS			
	Expenditures for maintenance:		
7.	Salaries and wages	$1,300,173.82	
8.	Provisions (food)	578,404.21	
9.	Fuel, light and water	191,782.81	
10.	All other expenditures for maintenance	409,586.38	
11.	TOTAL expenditures for maintenance (Sum of items 7, 8, 9, and 10)		$2,479,947.22
12.	Expenditures for improvements, including new buildings, additions, permanent betterments, etc.		5,000.00
13.	Expenditures for other purposes (specify)		3,741.82
14.	TOTAL expenditures (Sum of items 11, 12, and 13)		$2,488,689.04
15.	Amount returned to State treasurer or other officials		1,274,447.50
16.	Balance on hand at close of year		0.00
17.	TOTAL disbursements (Sum of items 14, 15, and 16; also equal to item 6)		$3,763,136.54
18.	Estimated value of consumed food raised on hospital farm		159,274.26
19.	Do amounts reported above (items 8 and 18) include meals fed to staff and their families and other employees?		Yes ✓ No__
	(a) If so, how many individual meals were fed to staff, etc., during year?		925,519
	(b) If so, how many individual meals were fed to patients during year?		6,224,637

TABLE III.

MOVEMENT OF PATIENT POPULATION

		Total	Men	Women
1.	Patients on books first day of year—Total*	6,500	3,042	3,458
	a. Resident	5,610	2,670	2,940
	b. In family care			
	c. On parole	788	324	464
	d. On temporary visit	79	28	51
	e. On escape	23	20	3
2.	Admissions during year—Total*	1,626	759	867
	a. First admissions	1,247	580	667
	b. Readmissions	357	172	185
	c. Transfers from other hospitals for mental diseases	22	7	15
3.	Total on books during year*	8,126	3,801	4,325
4.	Discharged during year*	818	392	426
	a. As recovered	366	164	202
	b. As improved	374	177	197
	c. As unimproved	17	4	13
	d. As without psychosis	61	47	14
5.	Transferred to other hospitals for mental diseases*	23	16	7
6.	Died during year*	627	289	338
7.	Total discharged, transferred and died during year*	1,468	697	771
8.	Patients on books last day of year*	6,658	3,104	3,554
	a. Resident	5,729	2,753	2,976
	b. In family care			
	c. On parole	852	306	546
	d. On temporary visit	52	24	28
	e. On escape	25	21	4
9.	Average daily resident population*	5,684.6	2,715.4	2,969.2
10.	Average daily population on books*	6,609	3,081.8	3,527.2
11.	Patients placed on parole, visit or other absent status, but still retained on books* (count the total number of times patients were transferred from resident to absent status)	2,916	1,494	1,422
12.	Patients returned to hospital from parole, visit, escape, etc., status*	2,313	1,265	1,048

TABLE III. (Continued.)

MOVEMENT OF PATIENT POPULATION

	Total	Men	Women
4 (Supplement)			
a. Discharged directly from institution...	254	142	112
b. Discharged while on parole or otherwise absent (excluding deaths)	545	241	304
c. Deaths on parole or while otherwise absent from hospital	19	9	10

*Excluding patients transferred from other state institutions to receive special surgical or medical care of a general hospital nature. These are recorded below:

	Total	Men	Women
Receiving special care beginning of year	7		7
Admitted for special care	9	3	6
Discharged from special care	13	3	10
Transferred to regular mental population			
On temporary visit	1		1
Receiving special care end of year	2		2

TABLE IV.

NATIVITY OF FIRST ADMISSIONS AND OF PARENTS OF FIRST ADMISSIONS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Total	Men	Women	Both Parents	Fathers	Mothers	Both Parents	Fathers	Mothers
Africa									
*Asia									
Australia									
Austria	15	7	8	12	14	16	15	17	17
Belgium	1	1			1	1			1
†Canada	7	3	4	5	7	7	4	5	5
Central America									
China	1	1							
Czecho-Slovakia	14	5	9	8	8	8	13	13	13
Cuba									
Denmark				3	3	3			
England	26	9	17	9	15	11	27	33	32
Europe									
Finland	2		2				2	2	2
France	6	1	5	3	6	5	6	9	6
Germany	51	23	28	39	46	45	58	68	65
Greece	1		1				1	3	1
Holland	3	2	1	6	9	7	2	2	3
Hungary	10	8	2	10	11	11	9	10	10
India									
Ireland	35	14	21	32	42	42	45	54	52
Italy	73	44	29	70	74	72	51	54	54
Japan							1	1	1
Jugo-Slavia								1	
Lithunia				4	4	4			
Mexico	2	2		2	2	2			
Norway	4		4	1	1	2	4	4	5
Philippine Islands									
Poland	44	23	21	31	34	34	41	43	43
Portugal	2	2		2	2	2			
Roumania	2	1	1	1	1	1	2	4	2
Russia	24	12	12	18	22	19	23	28	26
Scotland	13	4	9	6	10	6	9	12	10
South America	1	1		1	1	1			
Spain	1		1				1	1	1
Sweden	3	3		4	4	5			
Switzerland	6	3	3	4	4	4	3	5	3
Turkey-in-Asia									
Turkey-in-Europe	5	2	3	5	5	5	4	4	4
*United States	889	404	485	235	248	262	280	292	309
Wales	1	1		1	1	1			
‡West Indies	5	4	1	4	5	4	2	2	2
Other countries									
Unascertained									
Total	1247	580	667	516	580	580	603	667	667

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

TABLE IV. A

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO NATIVITY AND LENGTH OF RESIDENCE IN THE UNITED STATES OF THE FOREIGN BORN

Age Groups	Total			Native Born Parentage									Foreign Born Time in United States Before Admission										Nativity Unascertained	
				Total			Native		Foreign		Mixed		Total			Under 5 years		5–9 years		10–14 years		15 years and over			
	T.	M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total	1247	580	667	889	404	485	234	279	130	166	40	40	358	176	182	6	..	1	5	6	5	163	172	..	..
Under 15 years	1	..	1	1	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15—19 years	34	15	19	34	15	19	8	14	4	3	3	2	..	..	..	..	..	..	..	..	..	..	..	..	..
20—24 years	76	36	40	75	35	40	15	19	15	14	5	7	1	1	..	..	..	1	..	..	..	..	..	..	..
25—29 years	97	37	60	90	33	57	21	29	10	27	2	1	7	4	3	4	..	..	..	..	..	..	3	..	..
30—34 years	89	35	54	85	34	51	18	29	13	19	3	3	4	1	3	..	..	..	..	..	..	1	3	..	..
35—39 years	117	51	66	104	43	61	25	29	11	24	7	8	13	8	5	..	..	..	..	1	1	7	4	..	..
40—44 years	91	50	41	77	44	33	24	15	16	17	4	1	14	6	8	..	..	..	..	..	..	6	8	..	..
45—49 years	103	48	55	75	35	40	23	26	9	11	3	3	28	13	15	..	..	..	1	..	..	13	14	..	..
50—54 years	93	43	50	58	28	30	11	19	15	9	2	2	35	15	20	..	..	..	1	1	1	14	18	..	..
55—59 years	102	63	39	61	37	24	27	17	7	5	3	2	41	26	15	..	..	..	..	..	1	26	14	..	..
60—64 years	99	52	47	41	19	22	13	13	5	4	1	5	58	33	25	2	..	..	1	2	..	29	24	..	..
65—69 years	80	34	46	37	18	19	12	13	4	5	2	1	43	16	27	..	..	..	..	..	..	16	27	..	..
70 years and over	265	116	149	151	63	88	37	55	21	28	5	5	114	53	61	..	..	..	2	2	2	51	57	..	..
Unascertained	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

TABLE V.

CITIZENSHIP OF FIRST ADMISSIONS

	Total	Men	Women
Citizens by birth	889	404	485
Citizens by naturalization	236	112	124
Aliens	122	64	58
Citizenship unascertained			
Total	1,247	580	667

TABLE VI

PSYCHOSES OF FIRST ADMISSIONS

Psychoses	Total	M.	W.
TOTAL	1,247	580	667
1. With syphilitic-meningo-encephalitis	43	34	9
2. With other forms syphilis of central nervous system	25	19	6
a. Meningo-vascular type (cerebral syphilis)	25	19	6
b. With intracranial gumma			
c. Other types (to be specified) Tabes Dorsalis			
3. With epidemic encephalitis	4	1	3
4. With other infectious diseases	1	1	
a. With tuberculosis meningitis			
b. With meningitis (Unspecified)	1	1	
c. With acute chorea (Sydenham's)			
d. With other infectious diseases (to be specified)			
e. Post-infectious psychoses			
5. Alcoholic	49	39	10
a. Pathological intoxication			
b. Delirium tremens	19	17	2
c. Korsakow's psychosis	16	13	3
d. Acute hallucinosis	12	9	3
e. Other types (to be specified) Paranoid Type	2		2
6. Due to drugs or other exogenous poisons	6	1	5
a. Due to metals (to be specified)			
b. Due to gases (to be specified)			
c. Due to opium and derivatives			
d. Due to other drugs (to be specified) Morphine	6	1	5
7. Traumatic	5	4	1
a. Traumatic delirium			
b. Post-traumatic personality disorders	1	1	
c. Post-traumatic mental deterioration	3	3	
d. Other types (to be specified) Subdural Hematoma	1		1
8. With cerebral arteriosclerosis	365	179	186
9. With other disturbances of circulation	15	7	8
a. With cerebral embolism	1	1	
b. With cardio-renal disease	12	6	6
c. Other types (tobe specified) Malignant Hypertension	2		2

TABLE VI. (Continued.)

PSYCHOSES OF FIRST ADMISSIONS

Psychoses	Total	M.	W.
10. With convulsive disorders (epilepsy)	12	8	4
a. Epileptic deterioration			
b. Epileptic clouded states	12	8	4
c. Other epileptic types			
11. Senile	95	39	56
a. Simple deterioration	91	37	54
b. Presbyophrenic type			
c. Delirious and confused types			
d. Depressed and agitated types	1		1
e. Paranoid types	3	2	1
12. Involutional	101	19	82
a. Melancholia	37	10	27
b. Paranoid types	17	2	15
c. Other types (to be specified) Mixed	47	7	40
13. Due to other metabolic, etc., diseases	6	1	5
a. With diseases of the endocrine glands	4	1	3
b. Exhaustion delirium			
c. Alzheimer's disease	1		1
d. With pellagra			
e. Other somatic diseases (to be specified) post partum	1		1
14. Due to new growth	5	4	1
a. With intracranial neoplasms	4	3	1
b. With other neoplasims (to be specified) Carcinoma	1	1	
15. With organic changes of the nervous system	3	1	2
a. With multiple sclerosis	1		1
b. With paralysis agitans			
c. With Huntington's chorea			
d. With other brain or nervous diseases	2	1	1
16. Psychoneuroses	31	11	20
a. Hysteria	2		2
b. Psychasthenia or compulsive states	4		4
c. Neurasthenia	1		1
d. Hypochondriasis			
e. Reactive depression	7	2	5
f. Anxiety state	1	1	
g. Mixed Psychoneurosis	16	8	8

TABLE VI. (Continued.)

PSYCHOSES OF FIRST ADMISSIONS

Psychoses	Total	M.	W.
17. Manic-depressive	100	28	72
a. Manic type	37	14	23
b. Depressive type	24	8	16
c. Circular type			
d. Mixed type	36	6	30
e. Perplexed type			
f. Stuporous type	3		3
g. Other types			
18. Dementia Præcox	215	93	122
a. Simple type	3	1	2
b. Hebephrenic type	80	43	37
c. Catatonic type	50	22	28
d. Paranoid type	67	25	42
e. Mixed types	2		2
f. Type not specified	13	2	11
19. Paranoia and Paranoid conditions	27	11	16
a. Paranoia			
b. Paranoid conditions	27	11	16
20. With psychopathic personality	35	21	14
21. With mental deficiency	29	12	17
22. Undiagnosed	39	19	20
23. Without psychoses	36	28	8
a. Epilepsy			
b. Alcoholism	19	18	1
c. Drug addiction			
d. Mental deficiency	1		1
e. Personality disorders due to epidemic encephalitis	1	1	
f. Psychopathic personality	6	3	3
g. Syphilitic meningo-encelphalitis	5	4	1
h. Other forms of Syphilis of central nervous system	3	1	2
i. Arteriosclerosis	1	1	

TABLE VII. and VII. a

COLOR OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Psychoses	Total			White			Black			Japanese & Chinese		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W
Total	1247	580	667	1117	514	603	128	65	63	2	1	1
Total With Psychoses	1211	552	659	1082	487	595	127	64	63	2	1	1
1. With syphilitic meningo-encephalitis	43	34	9	30	24	6	13	10	3			
2. With other forms syphilis C.N.S.	25	19	6	12	10	2	13	9	4			
3. With epidemic encephalitis	4	1	3	4	1	3						
4. With other infectious diseases	1	1		1	1							
5. Alcoholic	49	39	10	38	31	7	11	8	3			
6. Due to drugs and exogenous poisons	6	1	5	6	1	5						
7. Traumatic	5	4	1	5	4	1						
8. With cerebral arteriosclerosis	365	179	186	330	162	168	35	17	18			
9. With other disturbances of circulation	15	7	8	13	7	6	2		2			
10. With convulsive disorders	12	8	4	10	6	4	2	2				
11. Senile	95	39	56	93	38	55	2	1	1			
12. Involutional	101	19	82	97	19	78	4		4			
13. Due to other metabolic, etc., diseases	6	1	5	6	1	5						
14. Due to new growth	5	4	1	5	4	1						
15. With organic changes of nerv. sys.	3	1	2	3	1	2						
16. Psychoneuroses	31	11	20	30	11	19	1		1			
17. Manic-depressive	100	28	72	90	25	65	9	3	6	1		1
18. Dementia Praecox	215	93	122	186	84	102	29	9	20			
19. Paranoia & paranoid conditions	27	11	16	25	9	16	2	2				
20. With psychopathic personality	35	21	14	35	21	14						
21. With mental deficiency	29	12	17	29	12	17						
22. Undiagnosed	39	19	20	34	15	19	4	3	1	1	1	
23. Total without psychoses	36	28	8	35	27	8	1	1				
Total Without Psychoses	36	28	8	35	27	8	1	1				
1. Epilepsy												
2. Mental deficiency	1		1	1		1						
3. Alcoholism	19	18	1	19	18	1						
4. Syphilis of Central Nervous System	3	1	2	3	1	2						
5. Personality disorders due to epidemic encephalitis	1	1		1	1							
6. Psychopathic personality	6	3	3	6	3	3						
7 Arteriosclerosis	1	1		1	1							
8. With syphilitic meningo-encephalitis	5	4	1	4	3	1	1	1				

TABLE VIII.

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Psychoses	Total			Under 15 years		15—19 years		20—24 years		25—29 years		30—34 years		35—39 years		40—44 years		45—49 years		50—54 years		55—59 years		60—64 years		65—69 years		70 years and over		Unascertained	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total	1247	580	667		1	15	19	36	40	37	60	35	54	51	66	50	41	48	55	43	50	63	39	52	47	34	46	116	149		
Total With Psychoses	1211	552	659		1	15	18	35	40	36	59	32	53	42	62	45	41	44	55	42	50	60	39	52	47	34	46	115	148		
1. With syphilitic meningo-encephalitis	43	34	9							1		4		4	1	9	2	5	1	4	2	2	3	4		1					
2. With other forms of syphilis of the central nervous system	25	19	6					1	1	1	1			2	2	2		3		3		3	1	1	1	1		2			
3. With epidemic encephalitis	4	1	3								2				1							1									
4. With other infectious diseases	1	1																		1											
5. Alcoholic	49	39	10					1		1	2	1	1	7	1	8	1	6	2	7	2	6		2	1						
6. Due to drugs and exogenous poisons	6	1	5								1		1				1		1			1			1						
7. Traumatic	5	4	1					1		1						1		1	1												
8. With cerebral arteriosclerosis	365	179	186													2		1	1	4	2	26	11	40	34	29	45	77	93		
9. With other disturbances of circulation	15	7	8							1							1	1	4	1	2	2	1	1		1					
10. With convulsive disorders	12	8	4					1		2	1	1		2		1		1			2				1						
11. Senile	95	39	56																					1		2	1	36	55		
12. Involutional	101	19	82										1		3		13	2	23	8	28	9	11		3						
13. Due to other metabolic, etc., diseases	6	1	5										2		1	1			1		1										
14. Due to new growth	5	4	1								1					1		2				1									
15. Associated with organic changes of the nervous system	3	1	2																2			1									
16. Psychoneuroses	31	11	20					2	4	2	4	1	2	2	5	1	2	1	1	2	1		1								
17. Manic-depressive	100	28	72				7		9	2	18	6	14	6	8	5	3	3	3	2	1	3	7	1	2						
18. Dementia præcox	215	93	122		1	10	9	23	23	20	24	12	24	13	17	4	12	7	7	2	2	1	2	1	1						
19. Paranoia and paranoid conditions	27	11	16							1	2		2	2	3	2	3	3	3	2	1	1			2						
20. With psychopathic personality	35	21	14			1	1	2	1	2		2	3	2	4	3	1	4	2	4	1	1	1								
21. With mental deficiency	29	12	17			4	1	3	2	1	3	1	1	1	8	1	1	1			1										
22. Undiagnosed psychoses	39	19	20					1		1		4	2	1	8	4	1	3	3	2	4	2	1	1	1						
23. Total Without Psychoses	36	28	8				1	1		1	1	3	1	9	4	5		4		1		3						1	1		
24. Primary Behavior Disorders																															

FIRST ADMISSIONS WITHOUT PSYCHOSES BY AGE

(Supplement to Table 8)

Diagnosis	Total			Under 15 years		15—19 years		20—24 years		25—29 years		30—34 years		35—39 years		40—44 years		45—49 years		50—54 years		55—59 years		60—64 years		65—69 years		70 years and over	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total Without Psychoses	36	28	8				1	1		1	1	3	1	9	4	5		4		1		3						1	1
Epilepsy																													
Mental deficiency	1		1				1																						
Alcoholism	19	18	1									1		7	1	5		2		1		2							
Syphilis of the central nervous system	3	1	2										1	1															1
Personality disorders due to epidemic encephalitis	1	1																1											
Psychopathic personality	6	3	3							1	1	2			2														
Arteriosclerosis	1	1																										1	
Syphilitic meningo-encephalitis	5	4	1					1						1	1			1				1							

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		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.
Total	1247	580	667	25	12	13	126	71	55	713	342	371	314	127	187	69	28	41			
Total With Psychoses	1211	552	659	25	12	13	124	71	53	693	325	368	302	117	185	67	27	40			
1. With syphilitic meningo-encephalitis	43	34	9				6	6		25	19	6	10	7	3	2	2				
2. With other forms of syphilis of the central nervous system	25	19	6				1	1		17	13	4	7	5	2						
3. With epidemic encephalitis	4	1	3				1	1		1		1	2		2						
4. With other infectious diseases	1	1								1	1										
5. Alcoholic	49	39	10	1	1		9	8	1	30	24	6	6	4	2	3	2	1			
6. Due to drugs or other exogenous poisons	6	1	5							3	1	2	3		3						
7. Traumatic	5	4	1							3	3		1	1		1		1			
8. With cerebral arteriosclerosis	365	179	186	10	6	4	56	33	23	249	116	133	35	17	18	15	7	8			
9. With other disturbances of circulation	15	7	8				1	1		10	5	5	3		3	1	1				
10. With convulsive disorders	12	8	4				2	1	1	7	5	2	3	2	1						
11. Senile	95	39	56	4	1	3	17	7	10	64	27	37	9	4	5	1		1			
12. Involutional	101	19	82	3		3	10	2	8	60	12	48	20	4	16	8	1	7			
13. Due to other metabolic, etc., diseases	6	1	5							2		2	4	1	3						
14. Due to new growth	5	4	1	1	1		1	1		1	1		2	1	1						
15. With organic changes of the nervous system	3	1	2							1	1					2		2			
16. Psychoneuroses	31	11	20				3	2	1	14	4	10	14	5	9						
17. Manic-depressive	100	28	72				3	1	2	38	13	25	47	7	40	12	7	5			
18. Dementia Præcox	215	93	122	2	2		5	3	2	89	39	50	103	45	58	16	4	12			
19. Paranoia and paranoid cond.	27	11	16				1		1	17	7	10	9	4	5						
20. With psychopathic personality	35	21	14				2	1	1	21	14	7	9	5	4	3	1	2			
21. With mental deficiency	29	12	17	4	1	3	5	2	3	20	9	11									
22. Undiagnosed	39	19	20				1	1		20	11	9	15	5	10	3	2	1			
23. Total Without Psychoses	36	28	8				2		2	20	17	3	12	10	2	2	1	1			
24. Primary Behavior Disorders																					

*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		
	T.	M.	T.	T.	M.	W.	T.	M.	W.	T.	M.	W.
TOTAL	1247	580	667	1160	538	622	87	42	45			
TOTAL WITH PSYCHOSES	1211	552	659	1127	513	614	84	39	45			
1. With syphilitic meningo-encephalitis	43	34	9	42	33	9	1	1				
2. With other forms of syphilis of the central nervous system	25	19	6	25	19	6						
3. With epidemic encephalitis	4	1	3	4	1	3						
4. With other infectious diseases	1	1		1	1							
5. Alcoholic	49	39	10	45	37	8	4	2	2			
6. Due to drugs or other exogenous poisons	6	1	5	6	1	5						
7. Traumatic	5	4	1	5	4	1						
8. With cerebral arteriosclerosis	365	179	186	329	166	163	36	13	23			
9. With other disturbances of circulation	15	7	8	14	7	7	1		1			
10. With convulsive disorders	12	8	4	12	8	4						
11. Senile	95	39	56	86	34	52	9	5	4			
12. Involutional	101	19	82	97	17	80	4	2	2			
13. Due to other metabolic, etc., diseases	6	1	5	6	1	5						
14. Due to new growth	5	4	1	4	4		1		1			
15. With organic changes of nervous system	3	1	2	2		2	1	1				
16. Psychoneuroses	31	11	20	27	8	19	4	3	1			
17. Manic-depressive	100	28	72	95	27	68	5	1	4			
18. Dementia præcox (schizophrenia)	215	93	122	207	88	119	8	5	3			
19. Paranoia and paranoid conditions	27	11	16	27	11	16						
20. With psychopathic personality	35	21	14	33	20	13	2	1	1			
21. With mental deficiency	29	12	17	26	9	17	3	3				
22. Undiagnosed	39	19	20	34	17	17	5	2	3			
23. TOTAL WITHOUT PSYCHOSES	36	28	8	33	25	8	3	3				
24. PRIMARY BEHAVOIR DISORDERS												

TABLE XI.

ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Psychoses	Total			Dependent			Marginal			Comfortable			Unascertained		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.
Total	1247	580	667	227	106	121	981	456	525	39	18	21			
Total With Psychoses	1211	552	659	224	104	120	948	430	518	39	18	21			
1. With syphilitic meningo-encephalitis	43	34	9	1	1		40	31	9	2	2				
2. With other forms of syphilis of the central nervous system	25	19	6	3	1	2	22	18	4						
3. With epidemic encephalitis	4	1	3	1		1	3	1	2						
4. With other infectious diseases	1	1					1	1							
5. Alcoholic	49	39	10	3	3		45	35	10	1	1				
6. Due to drugs or other exogenous poisons.	6	1	5				6	1	5						
7. Traumatic	5	4	1	2	2		3	2	1						
8. With cerebral arteriosclerosis	365	179	186	112	42	70	245	132	113	8	5	3			
9. With other disturbances of circulation	15	7	8	1	1		13	6	7	1		1			
10. With convulsive disorders	12	8	4	2	2		10	6	4						
11. Senile psychoses	95	39	56	40	16	24	55	23	32						
12. Involutional psychoses	101	19	82	5		5	85	18	67	11	1	10			
13. Due to other metabolic, etc., diseases	6	1	5				5	1	4	1		1			
14. Due to new growth	5	4	1	1	1		3	2	1	1	1				
15. Associated with organic changes of the nervous system	3	1	2	1	1		2		2						
16. Psychoneuroses	31	11	20	1		1	28	11	17	2		2			
17. Manic-depressive	100	28	72	6	2	4	86	21	65	8	5	3			
18. Dementia Praecox	215	93	122	23	19	4	190	72	118	2	2				
19. Paranoia and paranoid conditions	27	11	16				27	11	16						
20. With psychopathic personality	35	21	14	5	5		28	15	13	2	1	1			
21. With mental deficiency	29	12	17	13	7	6	16	5	11						
22. Undiagnosed	39	19	20	4	1	3	35	18	17						
23. Total Without Psychoses	36	28	8	3	2	1	33	26	7						
24. Primary Behavior Disorders															

TABLE XII.

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

Psychoses	Total			Abstinent			Temperate			Intemperate			Unascertained		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.
TOTAL	1247	580	667	467	152	315	601	297	304	179	131	48			
TOTAL WITH PSYCHOSES	1211	552	659	462	149	313	594	292	302	155	111	44			
1. With syphilitic meningo-encephalitis	43	34	9	4	2	2	29	24	5	10	8	2			
2. With other forms of syphilis of the central nervous system	25	19	6	8	6	2	15	12	3	2	1	1			
3. With epidemic encephalitis	4	1	3	3	1	2	1		1						
4. With other infectious diseases	1	1		1	1										
5. Alcoholic	49	39	10							49	39	10			
6. Due to drugs or other exogenous poisons	6	1	5	2		2	2	1	1	2		2			
7. Traumatic	5	4	1	2	2		2	1	1	1	1				
8. With cerebral arteriosclerosis	365	179	186	174	57	117	164	100	64	27	22	5			
9. With other disturbances of circulation	15	7	8	5	3	2	7	3	4	3	1	2			
10. With convulsive disorders	12	8	4	2	2		9	5	4	1	1				
11. Senile	95	39	56	60	21	39	32	16	16	3	2	1			
12. Involutional	101	19	82	41	5	36	55	14	41	5		5			
13. Due to other metabolic, etc., diseases	6	1	5				5	1	4	1		1			
14. Due to new growth	5	4	1				4	3	1	1	1				
15. Associated with organic changes of the nervous system	3	1	2	1	1		2		2						
16. Psychoneuroses	31	11	20	10	4	6	17	5	12	4	2	2			
17. Manic-depressive	100	28	72	28	8	20	67	16	51	5	4	1			
18. Dementia Præcox	215	93	122	85	27	58	119	60	59	11	6	5			
19. Paranoia and paranoid conditions	27	11	16	10	1	9	12	5	7	5	5				
20. With psychopathic personality	35	21	14	2		2	13	7	6	20	14	6			
21. With mental deficiency	29	12	17	16	8	8	12	3	9	1	1				
22. Undiagnosed	39	19	20	8		8	27	16	11	4	3	1			
23. TOTAL WITHOUT PHYCHOSES	36	28	8	5	3	2	7	5	2	24	20	4			
24. Primary Behavior Disorders															

TABLE XIII.

MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERNCE TO PRINCIPAL PSYCHOSES

Psychoses	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.
Total	1247	580	667	351	193	158	534	246	288	274	94	180	54	31	23	34	16	18			
Total With Psychoses	1211	552	659	345	189	156	516	232	284	271	91	180	48	27	21	31	13	18			
1. With syphilitic meningo-encephalitis	43	34	9	14	14		21	12	9	5	5		2	2		1	1				
2. With other forms of syphilis of the central nervous system	25	19	6	6	5	1	13	11	2	3	1	2	2	1	1	1	1				
3. With epidemic encephalitis	4	1	3	2		2	2	1	1												
4. With other infectious diseases	1	1		1	1																
5. Alcoholic	49	39	10	16	16		19	14	5	6	4	2	6	4	2	2	1	1			
6. Due to drugs or other exogenous poisons	6	1	5	1		1	2		2	1		1	1	1		1		1			
7. Traumatic	5	4	1	4	3	1							1	1							
8. With cerebral arteriosclerosis	365	179	186	57	30	27	128	77	51	163	61	102	10	7	3	7	4	3			
9. With other disturbances of circulation	15	7	8	2	2		11	5	6	2		2									
10. With convulsive disorders (epilepsy)	12	8	4	5	5		4	2	2	1		1	1	1		1		1			
11. Senile	95	39	56	23	10	13	17	15	2	54	13	41				1	1				
12. Involutional	101	19	82	5		5	68	15	53	16	1	15	7	1	6	5	2	3			
13. Due to other metabolic, etc., diseases	6	1	5	2	1	1	4		4												
14. Due to new growth	5	4	1	2	2		3	2	1												
15. Associated with organic changes of the nervous system	3	1	2	1	1		2		2												
16. Psychoneuroses	31	11	20	9	2	7	20	7	13	1	1		1	1							
17. Manic-depressive	100	28	72	20	1	19	67	21	46	5	2	3	7	3	4	1	1				
18. Dementia Præcox (schizophrenia)	215	93	122	121	68	53	76	21	55	6	1	5	5	3	2	7		7			
19. Paranoia and paranoid conditions	27	11	16	7	3	4	19	8	11	1		1									
20. With psychopathic personality	35	21	14	14	10	4	13	7	6	2	1	1	4	2	2	2	1	1			
21. With mental deficiency	29	12	17	23	12	11	5		5	1		1									
22. Undiagnosed	39	19	20	10	3	7	22	14	8	4	1	3	1		1	2	1	1			
23. Total Without Psychoses	36	28	8	6	4	2	18	14	4	3	3		6	4	2	3	3				
24. Primary behavior disorders																					

TABLE XIV.

AGE OF READMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Psychoses	Total			Under 15 years		15—19 years		20—24 years		25—29 years		30—34 years		35—39 years		40—44 years		45—49 years		50—54 years		55—59 years		60—64 years		65—69 years		70 years and over		Unascertained	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total	357	172	185			2	2	17	12	17	25	21	23	22	26	22	19	19	20	18	15	6	19	10	8	9	5	9	11		
Total With Psychoses	335	153	182			2	2	17	12	17	22	20	23	22	26	14	19	16	20	14	15	6	19	8	8	9	5	8	11		
1. With syphilitic meningo-encephalitis	6	6														2		2		1		1									
2. With other forms of syphilis of the central nervous system	4	2	2										1						1			1		1							
3. With epidemic encephalitis																															
4. With other infectious diseases																															
5. Alcoholic	6	6										2		1				2		1											
6. Due to drugs and exogenous poisons																															
7. Traumatic	1	1						1																							
8. With cerebral arteriosclerosis	33	17	16																				1	3	3	7	3	7	9		
9. With other disturbances of circulation																															
10. With convulsive disorders	3	1	2								1					1											1				
11. Senile	1		1																										1		
12. Involutional	24	4	20													1	1		6	2	4	1	8						1		
13. Due to other metabolic, etc., diseases																															
14. Due to new growth																															
15. Associated with organic changes of the nervous system																															
16. Psychoneuroses	14	7	7					1		1		1		2	1				3	1	1		1	1		1					
17. Manic-depressive	69	18	51						1	2	6		5	4	15	2	6	3	4	3	5	2	4	2	4		1				
18. Dementia præcox	136	64	72			1	1	12	11	10	13	12	15	15	9	5	8	5	6	2	3	1	5		1	1					
19. Paranoia and paranoid conditions	5	3	2												1		1	1		1							1				
20. With psychopathic personality	18	15	3				1	1		3	1	3	1			2		3		3											
21. With mental deficiency	10	6	4			1		2		2			1			1	3														
22. Undiagnosed psychoses	5	3	2									2									2			1							
23. Total Without Psychoses	22	19	3								3	1				8		3		4				2				1			
24. Primary Behavior Disorders																															

READMISSIONS WITHOUT PSYCHOSIS BY AGE

(Supplement to Table 14)

Psychoses	Total			Under 15 years		15—19 years		20—24 years		25—29 years		30—34 years		35—39 years		40—44 years		45—49 years		50—54 years		55—59 years		60—64 years		65—69 years		70 years and over	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total Without Psychosis ..	22	19	3								3	1				8		3		4				2				1	
Epilepsy.....																													
Mental deficency.....	1		1								1																		
Alcoholism	15	14	1								1	1				6		2		3				1				1	
Drug addiction.....																													
Personality disorders due to epidemic encephalitis.....																													
Psychopathic Personality.....	6	5	1								1					2		1		1				1					
Primary behavior disorders.....																													
Unclassified Without Psychosis.																													

TABLE XV.

DISCHARGES BY PSYCHOSIS AND CONDITION ON DISCHARGE

Psychoses	Total			Recovered			Improved			Unimproved		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M	W.
Total	818	392	426									
Total With Psychoses	757	345	412	366	164	202	374	177	197	17	4	13
1. With syphilitic meningo-encephalitis	24	14	10	16	9	7	8	5	3			
2. With other forms of syphilis of the central nervous system	15	11	4	8	8		7	3	4			
3. With epidemic encephalitis	2	1	1	2	1	1						
4. With other infectious diseases	2	1	1	2	1	1						
5. Alcoholic	33	24	9	32	24	8	1		1			
6. Due to drugs or other exogenous poisons	1	1		1	1							
7. Traumatic	6	4	2	2	1	1	4	3	1			
8. With cerebral arteriosclerosis	78	36	42	36	19	17	40	17	23	2		2
9. With other disturbances of circulation	3	1	2	2	1	1	1		1			
10. With convulsive disorders	9	4	5	7	4	3	2		2			
11. Senile	2		2				2		2			
12. Involutional	79	11	68	55	7	48	24	4	20			
13. Due to other metabolic, etc., diseases	7	2	5	6	1	5	1	1				
14. Due to new growth	1	1					1	1				
15. With organic changes of the nervous system	2	1	1				2	1	1			
16. Psychoneuroses	34	18	16	19	9	10	15	9	6			
17. Manic-depressive	157	51	106	121	43	78	33	7	26	3	1	2
18. Dementia Praecox	198	101	97				190	100	90	8	1	7
19. Paranoia and paranoid conditions	40	25	15	9	7	2	30	17	13	1	1	
20. With psychopathic personality	41	21	20	35	19	16	4	2	2	2		2
21. With mental deficiency	17	13	4	10	8	2	6	4	2	1	1	
22. Undiagnosed	6	4	2	3	1	2	3	3				
23. Total Without Psychoses	61	47	14									
Syphilis of central nervous system		11	3									
Mental deficiency			2									
Alcoholism		24	2									
With syphilitic meningo-encephalitis		3	1									
Psychopathic personality		9	6									
Epilepsy												
Drug addiction												
With organic changes												
Involutional												
No evidence of mental disturbance												
With other disturbance of circulation												
24. Primary Behavior Disorders												

PATIENTS DISCHARGED BY DEATH WHILE ABSENT FROM HOSPITAL BY PSYCHOSIS

(Supplement to Table 15)

Psychoses	Total			Recovered			Improved			Unimproved		
	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.
Total	19	9	10	2	1	1	11	7	4	6	1	5
Total With Psychoses	19	9	10	2	1	1	11	7	4	6	1	5
1. With syphilitic meningo-encephalitis	1		1				1		1			
2. With other forms of syphilis of the central nervous system												
3. With epidemic encephalitis												
4. With other infectious diseases												
5. Alcoholic	1		1	1		1						
6. Due to drugs or other exogenous poisons												
7. Traumatic												
8. With cerebral arteriosclerosis	7	4	3				5	4	1	2		2
9. With other disturbances of circulation												
10. With convulsive disorders												
11. Senile	1		1				1		1			
12. Involutional												
13. Due to other metabolic, etc., diseases												
14. Due to new growth												
15. With organic changes of the nervous system												
16. Psychoneuroses												
17. Manic-depressive	4	2	2				1	1		3	1	2
18. Dementia Praecox	4	2	2				3	2	1	1		1
19. Paranoia and paranoid conditions												
20. With psychopathic personality												
21. With mental deficiency	1	1		1	1							
22. Undiagnosed												
23. Total Without Psychoses												
Epilepsy												
Psychoneuroses												
Alcoholism												
Drug addiction												
With organic changes												
Psychopathic personality												
Involutional												
Syphilis of central nervous system												
With syphilitic meningo-encephalitis												
No evidence of mental disturbance												
With other disturbance of circulation												
24. Primary Behavior Disorders												

TABLE XV a.

DURATION OF HOSPITAL LIFE ON PRESENT ADMISSION OF PATIENTS DISCHARGED ALIVE BY PSYCHOSES

Psychoses	Total			Under 6 mos.			6 – 11 mos.			1 year			2 years			3 years			4 years			5 – 9 years			10 yrs. & over		
	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re
Total Discharged	799	597	202	552	411	141	108	82	26	55	37	18	22	18	4	12	10	2	16	12	4	26	19	7	8	8	
Total With Psychoses	738	553	185	496	371	125	104	79	25	54	36	18	22	18	4	12	10	2	16	12	4	26	19	7	8	8	
1. With syphilitic meningo-encephalitis	23	20	3	11	8	3	6	6		1	1		2	2		1	1		1	1		1	1				
2. Other forms of syphilis of the C.N.S.	15	14	1	8	8					4	3	1	1	1					1	1		1	1				
3. Epidemic encephalitis	2	2		1	1		1	1																			
4. Other infectious diseases	2	2		1	1		1	1																			
5. Alcoholic	32	28	4	24	23	1	3	3		3	1	2				1	1		1		1						
6. Due to drugs and exogenous poisons	1	1		1	1																						
7. Traumatic	6	6		4	4														1	1		1	1				
8. Cerebral arteriosclerosis	71	57	14	46	39	7	12	9	3	4	3	1	4	3	1				1		1	3	2	1	1	1	
9. Other disturbances of circulation	3	3		3	3																						
10. With convulsive disorders	9	5	4	3	2	1				4	2	2				2	1	1									
11. Senile	1	1		1	1																						
12. Involutional	79	67	12	61	51	10	10	10		3	2	1							2	2		3	2	1			
13. Due to other metabolic, etc., diseases	7	6	1	4	3	1				2	2								1	1							
14. Due to new growth	1		1																1		1						
15. With organic changes of nervous system	2	2		1	1		1	1																			
16. Psychoneuroses	34	22	12	26	18	8	4	3	1	2		2	1	1					1		1						
17. Manic-depressive	153	99	54	121	82	39	17	8	9	5	3	2	5	2	3				2	2		2	1	1	1	1	
18. Dementia praecox	194	137	57	117	76	41	30	22	8	16	12	4	8	8		4	3	1	3	3		11	8	3	5	5	
19. Paranoia and paranoid conditions	40	36	4	24	22	2	7	7		3	2	1				2	2					3	2	1	1	1	
20. Psychopathic personality	41	26	15	26	17	9	8	4	4	4	2	2				1	1		1	1		1	1				
21. With mental deficiency	16	13	3	10	7	3	2	2		2	2		1	1		1	1										
22. Undiagnosed	6	6		3	3		2	2		1	1																
Total Without Psychoses	61	44	17	56	40	16	4	3	1	1	1																

TABLE XV b.

DURATION OF HOSPITAL LIFE ON PRESENT ADMISSION OF PATIENTS DISCHARGED ALIVE BY AGE ON ADMISSION

Age on Admission	Total			Under 6 mos.			6—11 mos.			1 year			2 years			3 years			4 years			5—9 years			10 yrs. & over		
	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re	T	1st	Re
Total discharged ..	799	597	202	552	411	141	108	82	26	55	37	18	22	18	4	12	10	2	16	12	4	26	19	7	8	8	
Under 15 years..																											
5— 9 years.....																											
10—14 years	2	2		1	1														1	1							
15—19 years	41	33	8	21	16	5	5	4	1	3	2	1	3	3		5	4	1	1	1		2	2		1	1	
20—24 years	74	60	14	54	44	10	10	7	3	5	5		2	2					1	1		1		1	1	1	
25—29 years	99	70	29	70	50	20	18	13	5	5	3	2	1		1	1		1				1	1		3	3	
30—34 years	100	69	31	72	53	19	9	5	4	6	3	3	2		2	1	1		5	3	2	5	4	1			
35—39 years	109	78	31	84	57	27	9	8	1	6	4	2	4	4					3	3		3	2	1			
40—44 years	87	62	25	55	38	17	13	9	4	8	6	2	3	3		1	1		2	2		5	3	2			
45—49 years	96	77	19	63	51	12	15	13	2	10	6	4	2	2		1	1		1	1		3	2	1	1	1	
50—54 years	74	52	22	51	35	16	10	7	3	6	4	2	2	2					1		1	2	2		2	2	
55—59 years	48	39	9	32	25	7	8	7	1	3	3		1	1		1	1		1		1	2	2				
60—64 years	32	26	6	21	17	4	6	6		1	1		1		1	1	1					2	1	1			
65—69 years	17	13	4	15	11	4							1	1		1	1										
70 years and over	20	16	4	13	13		5	3	2	2		2															
Not stated.																											

TABLE XV c.

DURATION OF HOSPITAL LIFE ON PRESENT ADMISSION OF PATIENTS DISCHARGED ALIVE BY CONDITION ON DISCHARGE

Duration of Hospital Life	Total Discharged Alive					
	Total	Total with condition	Recovered	Improved	Un-improved	Without psychoses
Total	799	738	364	363	11	61
1st admission	597	553	278	267	8	44
Readmission	202	185	86	96	3	17
Under 6 months						
1st admission	411	370	211	154	6	40
Readmission	141	123	63	60	2	16
6 – 11 months						
1st admission	82	79	30	48	1	3
Readmission	26	27	9	15	1	1
1 year						
1st admission	37	36	12	23	1	1
Readmission	18	18	7	11		
2 years						
1st admission	18	18	8	10		
Readmission	4	4	3	1		
3 years						
1st admission	10	10	2	8		
Readmission	2	2	1	1		
4 years						
1st admission	12	12	6	6		
Readmission	4	4	2	2		
5 to 9 years						
1st admission	19	19	7	12		
Readmission	7	7	1	6		
10 years and over						
1st admission	8	8	2	6		
Readmission						

TABLE XV d

DURATION OF HOSPITAL LIFE OF PATIENTS DISCHARGED

DURATION OF HOSPITAL LIFE	TOTAL	MALE	FEMALE
TOTAL DISCHARGED	818	392	426
Less than one month	77	41	36
1 month	113	53	60
2 months	114	43	71
3 months	59	25	34
4 months	52	28	24
5 months	52	23	29
6 months	44	18	26
7 months	36	16	20
8 months	29	18	11
9 months	14	5	9
10 months	15	9	6
11 months	16	6	10
12 months (One year)	81	43	38
2 years	39	19	20
3 years	15	12	3
4 years	24	10	14
5 years	11	6	5
6 years	9	4	5
7 years	4	2	2
8 years	2	2	
9 years	4	3	1
10 - 14 years	7	5	2
15 - 19 years	1	1	
20 - 24 years			
25 - 29 years			
30 - 34 years			

TABLE XV e.

DISCHARGES ALIVE BY PSYCHOSIS AND AGE AT DISCHARGE

Psychoses	Total	Under 15 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60-64 years	65-69 years	70 years and over
Total	799	1	21	68	100	85	123	78	97	86	52	36	28	24
With psychosis	738	1	20	66	93	77	112	68	88	81	48	33	28	23
Without psychosis	61		1	2	7	8	11	10	9	5	4	3		1
Male—Total	383		11	30	41	40	60	44	49	42	23	17	16	10
With psychosis	336		11	28	38	35	53	34	40	38	19	14	16	10
Without psychosis	47			2	3	5	7	10	9	4	4	3		
Female—Total	416	1	10	38	59	45	63	34	48	44	29	19	12	14
With psychosis	402	1	9	38	55	42	59	34	48	43	29	19	12	13
Without psychosis	14		1		4	3	4			1				1

TABLE XVI.

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Causes of Death	Total			General Paresis		Alcoholic		With cerebral arterio-sclerosis		Convulsive disorders		Senile		Involutional		Psychoneuroses		Manic-depressive		Dementia præcox		Paranoia and paranoid conditions		With psychopathic personality		With mental deficiency		All others with and without psychoses	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
ALL DISEASES	627	289	338	28	9	4		121	176	1	1	35	48	8	12		1	12	19	42	49	2	4	2	1	1	6	33	12
1. Infectious and Parasitic Diseases	4	2	2					9	10				1	3	3		1	4	2 1	20	27	2	1			1	1	2 7	
Tuberculosis—all forms	97	50	47	2	2	2																						3	
Syphilis	17	11	6	8	6			2	5		1			2				1		4	2				1			4	
2. Cancer and Other Tumors	22	13	9																									1	
3. Rheumatic, Nutritional, Endocrine and Other General Diseases	1	1																											
4. Diseases of Blood and Blood Making Organs																													
5. Chronic Poisoning and Intoxication																													
6. Diseases of Nervous System and of Organs of Special Sense	14	3	11							1					1				2		2		1				1	2	4
Cerebral hemorrhage	66	36	30	2	1			28	18			2	3		1				2		2							4	3
Mental diseases and Deficiency								2																					
Diseases of organs of special sense	2	2						9	1									1		5									
7. Diseases of the Circulatory System	16	15	1					28	81			9	25	3	5			2	7	3	11		1				4	5	3
Heart Diseases—total	196	59	137	9				26	55			23	19						2	1	3								
Arteriosclerosis	130	51	79	1				1											1										
8. Diseases of the Respiratory System	2	1	1					3	2						1			1			1							2	
Bronchopneumonia	12	8	4	1		1		5	3			1						1		2			1					1	
Lobar pneumonia	14	11	3	1				3							1			1		3		1	1						
9. Diseases of the Digestive System	14	12	2	3		1												1											
10. Diseases of the Genito-Urinary System	3	3		1				1												1	1							1	2
Nephritis	8	5	3					3																					
11. Diseases of Pregnancy, Child-Birth and Puerperal State																													
12. Diseases of Skin and Cellular Tissue																													
13. Diseases of the Bones and Organs of Locomotion																													
14 Congenital Malformations																													
15. Diseases of Early Infancy																													
16. Senility																													
17. Violent and Accidental Deaths (Suicide)	9	6	3					1	1									1	2	3								1	
18. Ill-Defined Causes																													

TABLE XVII.

AGE OF PATIENTS AT TIME OF DEATH

Psychoses	Total	Under 15 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60-64 years	65-69 years	70 years and over
Total	627			4	10	14	21	24	33	44	50	65	80	282
With psychosis	625			4	10	14	21	24	33	44	48	65	80	282
Without psychosis	2										2			
Male—Total	289			2	6	7	11	10	17	22	26	42	36	110
With psychosis	287			2	6	7	11	10	17	22	24	42	36	110
Without psychosis	2										2			
Female—Total	338			2	4	7	10	14	16	22	24	23	44	172
With psychosis	338			2	4	7	10	14	16	22	24	23	44	172
Without psychosis														

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—6 months		7—11 months		1 year		2 years		3—4 years		5—9 years		10—19 years		20 years and over	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total	627	289	338	59	65	36	59	21	24	17	33	28	36	8	18	26	18	34	34	34	32	26	19
Total With Psychoses	625	287	338	59	65	36	59	21	24	16	33	28	36	8	18	26	18	34	34	33	32	26	19
1. With syphilitic meningo-encephalitis.	37	28	9	4	4	5		1			2	2	2	1		2		6	1	6		1	
2. With other forms of syphilis of the central nervous system	13	10	3	2	1	1		2				1				3	1		1	1			
3. With epidemic encephalitis	5	5								1								3		1			
4. With other infectious diseases	3	3		2								1											
5. Alcoholic	4	4		1						1		1										1	
6. Due to drugs or other exogenous poisons	1		1																1				
7 Traumatic	1	1																1					
8. With cerebral arteriosclerosis	297	121	176	29	27	20	41	11	17	8	21	17	26	6	11	10	13	14	10	5	10	1	
9. With other disturbances of circulation	10	4	6	3	4		1			1			1										
10. With convulsive disorders	2	1	1	1	1																		
11. Senile	83	35	48	13	18	7	10	4	4	3	8	5	3		3	2	1		1	1			
12. Involutional	20	8	12		3		1	1	1	1	1		2			2	1	1		3	2		1
13. Due to other metablic, etc., diseases	1	1																				1	
14. Due to new growth	3	3				3																	
15. Associated with organic changes of the nervous system	5	3	2	1			2									1				1			
16. Psychoneuroses	1		1										1										
17. Manic-depressive	31	12	19	2	5		3	1		1	1				1		1	3	1	3	2	2	5
18. Dementia præcox	91	42	49		1				1			1	1	1	2	6	1	5	13	10	17	19	13
19. Paranoia and paranoid conditions	6	2	4		1														3	1		1	
20. With psychopathic personality	3	2	1					1												1	1		
21. With mental deficiency	7	1	6				1		1						1			1	3				
22. Undiagnosed psychoses	1	1		1																			
Total Without Psychoses	2	2								1										1			

DEATHS IN HOSPITAL BY TOTAL DURATION OF HOSPITAL LIFE OF CASES WITHOUT PSYCHOSES

(Supplement to Table 18)

Diagnosis	Total			Less than 1 month		1—3 months		4—6 months		7—11 months		1 year		2 years		3—4 years		5—9 years		10-19 years	
	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Total Without Psychoses	2	2																			
Epilepsy																					
Mental deficiency																					
Alcoholism																					
Syphilitic meningo-enceph	1	1								1											
Personality dis. due to epidemic enceph.																					
Multiple sclerosis	1	1																		1	
Primary behavior disorders																					
Unclassified without psychosis																					

TABLE XIX

AGE ON FIRST ADMISSION

County	Total	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–74	75–79	80–84	85–89	90-over
Bergen	239			3	9	17	18	22	21	15	28	28	23	14	14	15	7	1	4
Essex	455		1	14	28	29	29	50	31	38	26	34	34	34	33	35	24	12	3
Hudson	175			8	24	18	21	12	15	16	11	13	12	9	3	5	2	3	3
Middlesex	2			1				1											
Monmouth	3								1			1				1			
Morris	140			3	6	13	8	13	8	18	8	13	8	4	12	11	8	5	2
Passaic	184			2	7	16	8	14	11	14	18	12	18	15	8	16	16	5	4
Somerset	8			1	1	1		2		1				1			1		
Sussex	22			1		1	2	3	2	1	1	1	3	1	1	3	1	1	
Union	18			1	1	1	3		2		1		1	2	2	2	1	1	
Warren	1					1													
Total	1247		1	34	76	97	89	117	91	103	93	102	99	80	73	88	60	28	16

AGE ON READMISSIONS

Bergen	66			1	8	12	5	8	9	5	5	8	2	2		1			
Essex	109			1	5	6	10	19	17	15	8	7	7	6	6	2			
Hudson	57			1	5	11	15	7	6	5	3	1	1	1	1				
Monmouth	47				2	4	3	3	5	5	8	2	4	4	3	1	2	1	
Morris	61			1	7	8	8	8	4	6	6	7	2	1	2		1		
Passaic	2							1		1									
Somerset	9				1	1	1			1	3		2						
Sussex	5				1		2	1		1									
Union	1							1											
New York State																			
Total	357			4	29	42	44	48	41	39	33	25	18	14	12	4	3	1	

CITY* OR STATE OF RESIDENCE OF RESIDENT POPULATION—JUNE 30, 1946

CITY	TOTAL	WHITE	NEGRO
TOTAL	5731	5422	309
TOTAL NEW JERSEY	5730	5421	309
Asbury Park			
Atlantic City			
Bayonne	76	74	2
Belleville	14	12	2
Bergenfield	21	20	1
Bloomfield	30	30	
Burlington			
Camden			
Carteret	1	1	
Cliffside Park	7	7	
Clifton	135	135	
Collingswood			
Cranford	3	3	
Dover	54	54	
East Orange	62	58	4
Elizabeth	63	58	5
Englewood	49	41	8
Garfield	114	114	
Gloucester			
Hackensack	101	91	10
Harrison	13	13	
Hawthorne	17	17	
Hillside	6	6	
Hoboken	73	72	1
Irvington	31	31	
Jersey City	367	358	9
Kearny	27	27	
Linden	10	10	
Lodi	38	37	1
Long Branch	1	1	
Lyndhurst	51	51	
Maplewood	11	11	
Millburn	6	6	
Montclair	29	22	7
Morristown	95	85	10
Neptune			
Newark	1434	1258	176
New Brunswick			
North Bergen	38	38	
North Plainfied	2	2	
Nutley	10	10	
Orange	25	21	4
Passaic	302	297	5
Paterson	675	651	24
Perth Amboy	1	1	
Phillipsburg	2	2	
Plainfield	14	14	
Pleasantville			
Rahway	6	6	
Red Bank			
Ridgefield Park	25	25	
Ridgewood	33	32	1
Roselle	5	5	
Rutherford	42	41	1
South Orange	16	14	2
South River			
Summit	14	14	
Teaneck	40	38	2
Trenton			
Union City	58	58	
Union (Twp)	1	1	
Weehawken	17	17	
Westfield	8	7	1
West New York	28	28	
West Orange	18	17	1
Woodbridge	2	2	
OTHER N. J. COMMUNITIES	1409	1377	32
OUT OF STATE - TOTAL	1	1	
Delaware			
Maryland			
New York	1	1	
Pennsylvania			
Massachusetts			
Texas			
Georgia			

*Cities of 10,000 population or more. 1940 Census. Total number from other Essex County communities....26. List number and color in these communities on reverse side.

CITY	TOTAL	WHITE	NEGRO
Caldwell	5	5	
Cedar Grove	5	5	
Glen Ridge	3	3	
Livingston	4	4	
Roseland	1	1	
Short Hills	3	3	
Verona	5	4	1
	26	25	1

CITY* OR STATE OF RESIDENCE OF FIRST ADMISSIONS—JUNE 30, 1946

CITY	TOTAL	WHITE	NEGRO
TOTAL	1247	1119	128
TOTAL NEW JERSEY	1247	1119	128
Asbury Park			
Atlantic City			
Bayonne	19	18	1
Belleville	3	3	
Bergenfield	3	3	
Bloomfield	7	7	
Burlington			
Camden			
Carteret			
Cliffside Park	6	6	
Clifton	17	16	1
Collingswood			
Cranford			
Dover	16	16	
East Orange	18	16	2
Elizabeth	5	5	
Englewood	16	12	4
Garfield	14	14	
Gloucester			
Hackensack	16	12	4
Harrison	2	2	
Hawthorne	6	6	
Hillside	2	2	
Hoboken	14	14	
Irvington	8	8	
Jersey City	91	87	4
Kearny	12	12	
Linden	3	3	
Lodi	7	7	
Long Branch			
Lyndhurst	10	10	
Maplewood	4	4	
Millburn	1	1	
Montclair	11	6	5
Morristown	35	29	6
Neptune			
Newark	364	284	80
New Brunswick	1	1	
North Bergen	6	6	
North Plainfied			
Nutley	1	1	
Orange	12	9	3
Passaic	43	42	1
Paterson	93	86	7
Perth Amboy			
Phillipsburg			
Plainfield			
Pleasantville			
Rahway			
Red Bank			
Ridgefield Park	6	6	
Ridgewood	3	3	
Roselle			
Rutherford	5	5	
South Orange	5	4	1
South River			
Summit	6	6	
Teaneck	9	8	1
Trenton			
Union City	18	18	
Union (Twp)	3	3	
Weehawken	4	4	
Westfield	1	1	
West New York	4	4	
West Orange	5	5	
Woodbridge			
OTHER N. J. COMMUNITIES	312	304	8
OUT OF STATE - TOTAL			
Delaware			
Maryland			
New York			
Pennsylvania			
Massachusetts			
Texas			
Georgia			

*Cities of 10,000 population or more. 1940 Census. Total number from other Essex County communities....26. List number and color in these communities on reverse side

CITY	TOTAL	WHITE	NEGRO
Caldwell	2	2	
Glen Ridge	1	1	
Livingston	1	1	
Short Hills	2	2	
Verona	4	4	
	10	10	0

CITY* OR STATE OF RESIDENCE OF READMISSIONS—JUNE 30, 1946

CITY	TOTAL	WHITE	NEGRO
TOTAL	357	336	21
TOTAL NEW JERSEY	356	335	21
Asbury Park			
Atlantic City			
Bayonne	6	6	
Belleville	1	1	
Bergenfield	1	1	
Bloomfield	2	2	
Burlington			
Camden			
Carteret			
Cliffside Park	3	3	
Clifton	5	5	
Collingswood			
Cranford			
Dover			
East Orange	6	6	
Elizabeth	2	2	
Englewood	7	6	1
Garfield	2	2	
Gloucester			
Hackensack	9	9	
Harrison	1	1	
Hawthorne	2	2	
Hillside			
Hoboken	7	7	
Irvington	5	5	
Jersey City	28	27	1
Kearny	3	3	
Linden			
Lodi	3	3	
Long Branch			
Lyndhurst	2	2	
Maplewood	1	1	
Millburn	3	3	
Montclair	4	1	3
Morristown	14	14	
Neptune			
Newark	75	63	12
New Brunswick			
North Bergen	1	1	
North Plainfied			
Nutley	1	1	
Orange	2	1	1
Passaic	12	12	
Paterson	34	34	
Perth Amboy			
Phillipsburg			
Plainfield			
Pleasantville			
Rahway			
Red Bank			
Ridgefield Park	1	1	
Ridgewood	1	1	
Roselle			
Rutherford	2	2	
South Orange	2	2	
South River			
Summit	1	1	
Teaneck	4	4	
Trenton			
Union City	5	5	
Union (Twp)	2	1	1
Weehawken	3	3	
Westfield			
West New York	3	3	
West Orange	1	1	
Woodbridge			
OTHER N. J. COMMUNITIES	89	87	2
OUT OF STATE - TOTAL	1	1	
Delaware			
Maryland			
New York	1	1	
Pennsylvania			
Massachusetts			
Texas			
Georgia			

*Cities of 10,000 population or more. 1940 Census. Total number from other Essex County communities....26. List number and color in these communities on reverse side

CITY	TOTAL	WHITE	NEGRO
Caldwell	3	3	
Cedar Grove	1	1	
Glen Ridge	1	1	
Livingston	1	1	
	6	6	0

County and Color of Population and Admissions

County	Resident population June 30			Non-resident population June 30			First admissions during year			Readmissions during year		
	T.	W.	N.	T.	W.	N.	T.	W.	N.	T.	W.	N.
Total	5731	5422	309	930	864	66	1247	1119	128	357	336	21
Atlantic	1	1										
Bergen	1129	1097	32	217	209	8	239	228	11	66	64	2
Burlington	1	1		1	1							
Camden												
Cape May												
Cumberland	1	1		1	1							
Essex	1747	1550	197	291	245	46	455	363	92	109	93	16
Gloucester												
Hudson	776	758	18	139	136	3	175	170	5	57	56	1
Hunterdon	8	8										
Mercer	4	4										
Middlesex	10	10		2	2		2	2				
Monmouth	13	12	1	2	2		3	3				
Morris	494	473	21	80	75	5	140	131	9	47	46	1
Ocean	4	4										
Passaic	1244	1214	30	163	160	3	184	175	9	61	61	
Salem	1	1										
Somerset	21	21		2	2		8	7	1	2	2	
Sussex	112	112		15	15		22	22		9	9	
Union	155	145	10	16	15	1	18	17	1	5	4	1
Warren	7	7					1	1				
Special cases	2	2		1	1							
New York State	1	1								1	1	
City												
Atlantic City												
Camden												
Elizabeth	63	58	5	5	5		5	5		2	2	
Jersey City	367	358	9	66	63	3	91	87	4	28	27	1
Newark	1434	1258	176	248	209	39	364	284	80	75	63	12
New Brunswick							1	1				
Paterson	675	651	24	79	77	2	93	86	7	34	34	
Trenton												

COUNTRY OF BIRTH OF FIRST ADMISSIONS BY COLOR

State of Birth of Native Born	Total	White	Negro	Country of Birth of Foreign Born	Total	White	Negro
Alabama	6		6	NORTHERN EUROPE			
Arkansas	1		1	Finland	2	2	
Connecticut	7	7		Norway	4	4	
Delaware	1		1	Sweden	3	3	
District of Columbia	4	3	1	SOUTHERN EUROPE			
Florida	6	1	5	Italy	73	73	
Georgia	29	2	27	Portugal	2	2	
Illinois	4	3	1	Spain	1	1	
Indiana	4	3	1	EASTERN EUROPE			
Kansas	1	1		Russia	24	24	
Kentucky	3	2	1	WESTERN EUROPE			
Louisiana	5	4	1	England	26	26	
Maryland	5	3	2	France	6	6	
Massachusetts	15	14	1	Ireland	35	35	
Michigan	2	2		Scotland	13	13	
Minnesota	1	1		Wales	1	1	
Mississippi	2	2		CENTRAL EUROPE			
Missouri	3	2	1	Austria	15	15	
New Hampshire	1	1		Czecho-Slovakia	14	14	
New Jersey	489	475	14	Germany	51	51	
New York	168	166	2	Holland	3	3	
North Carolina	18	1	17	Hungary	10	10	
Ohio	7	7		Poland	44	44	
Pennsylvania	53	52	1	Roumania	2	2	
Rhode Island	2	2		Switzerland	6	6	
South Carolina	19	1	18	OTHER COUNTRIES			
Tennesse	2	1	1	Belgium	1	1	
Texas	2	1	1	Brazil	1	1	
Utah	2	2		Canada	7	7	
Vermont	2	2		China	1	1	
Virginia	24	4	20	Greece	1	1	
Washington	1	1		Turkey	5	5	
				British West Indies	5		5
				Mexico	2	2	
TOTAL	889	766	123		358	353	5

LENGTH OF TIME IN NEW JERSEY OF NATIVE BORN FIRST ADMISSIONS PRIOR TO ADMISSION

Length of Time	Total	First admissions who spent specified time in N. J.
Less than 1 year	40	
1 year less than 2	16	16
2 years less than 3	17	17
3 years less than 4	13	13
4 years less than 5	16	16
5 years less than 10	74	74
10 years and over	713	713
Not stated		
TOTAL	889	849

LENGTH OF TIME IN NEW JERSEY AND IN UNITED STATES OF FOREIGN BORN FIRST ADMISSIONS PRIOR TO ADMISSION

Length of Time	Total	Who spent spec. time in New Jersey	Who spent spec. time in U.S.
Less than 1 year	11		6
1 year less than 2	2		2
2 years less than 3	9		8
3 years less than 4	5		5
4 years less than 5	6		6
5 years less than 10	26	26	26
10 years and over	299	299	299
Not stated			
TOTAL	358	325	352

COUNTRY OF BIRTH OF FIRST ADMISSIONS UNASCERTAINED

TABLE SHOWING IN DETAIL MANNER OF SUPPORT

June 30, 1946

County	INDIGENT			ST. INDIGENT			PRIVATE			CONVICT			CRIMINAL			TOTAL		
	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total
Atlantic								1	1								1	1
Bergen	400	512	912	76	79	155	26	36	62							502	627	1129
Burlington		1	1														1	1
Cumberland	1		1													1		1
Essex	650	654	1304	158	162	320	44	78	122				1		1	853	894	1747
Hudson	246	234	480	143	99	242	18	35	53					1	1	407	369	776
Hunterdon	2	4	6		1	1	1		1							3	5	8
Mercer	2	1	3					1	1							2	2	4
Middlesex	3	4	7		1	1		2	2							3	7	10
Monmouth	5	4	9				1	3	4							6	7	13
Morris	184	189	373	40	28	68	14	38	52					1	1	238	256	494
Ocean	2		2													2		2
Passaic	515	539	1054	75	64	139	22	29	51							612	632	1244
Salem		1	1														1	1
Somerset		7	8	1		1	5	7	12							7	14	21
Sussex	47	41	88	5	6	11	7	6	13							59	53	112
Union	42	76	118	8	11	19	4	14	18							54	101	155
Warren	4	3	7													4	3	7
Special cases		2	2					1	1								2	2
N. Y. State																	1	1
Total	2104	2274	4378	506	451	957	142	251	393				1	2	3	2753	2978	5731

NOTE--In all indigent 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.

APPENDIX TO BUSINESS DEPARTMENT REPORT

AGRICULTURAL PRODUCTS

FARM

39.5075 tons mixed hay	948.18
950.11 tons ensilage corn	6,650.78
17.315 tons cornstalks	121.21
156.0525 tons green alfalfa	1,092.37
48.53 tons grass	339.71
28.6125 tons green oats	143.06
16,625 ears sweet corn	498.75
1,174 baskets turnips	763.10
610 tons manure	1,220.00
	$11,777.16

DAIRY

799,292 quarts milk	79,929.25
31,115½ lbs. beef	6,845.42
2,551½ lbs veal	618.68
Hides	562.62
5,568 tons manure	11,136.00
	$99,091.97

POULTRY

15,702¾ dozen eggs	6,171.01
4,040½ pounds fowl	1,385.09
1,334¾ pounds broilers	552.77
189 tons manure	945.00
	$9,053.87

PIGGERY

109,875 pounds pork	21,481.98
729 tons manure	2,187.00
	$23,668.98

GARDEN

2,163 bunches asparagus	698.69
21 7-16 baskets lima beans	35.22
900 pounds lima beans (shelled)	90.00
841 7-16 baskets string beans	937.86
7,660 2-16 baskets beets	3,784.77
470 bunches broccoli	47.00
64,778 pounds white cabbage	1,729.99
1,829 pounds red cabbage	45.46
5,430 stalks Chinese cabbage	217.20
10,066 2-16 baskets carrots	6,759.13

442 heads cauliflower	49.22
23,886 stalks celery	1,192.80
6,285 ears sweet corn	185.94
120 14-16 baskets cucumbers	146.77
509 7-16 baskets egg plant	305.16
452 heads endive	18.08
11 baskets kale	6.65
389 bunches kohlrabi	19.45
18,354 bunches leek	550.62
59,452 heads lettuce	4,628.64
3,757 12-16 baskets onions	4,473.86
3,811 bunches green onions	119.33
7,185 bunches parsley	168.33
632 10-16 baskets peas	817.32
57 4-16 basket peaches	100.19
2,386 baskets peppers	1,426.15
9 baskets Cayenne peppers	5.40
13,649 pounds pumpkin	283.99
8,525 bunches radishes	291.52
22,818 bunches rhubarb	1,089.77
3,910 6-16 baskets spinach	2,400.91
331 7-16 baskets summer squash	233.27
14 pounds late squash	.37
10,594 6-16 baskets Swiss chard	5,349.19
4,138 11-16 baskets red tomatoes	4,410.91
383 baskets green tomatoes	348.50
2,775 7-16 baskets turnips	1,627.55
	$44,595.21

GREEN GRAIN

3,743 tons green clover	26.20
24.9975 tons green rye	124.99
.9250 tons green wheat	4.63
2.1250 tons rye straw	31.88
4.70 tons ensilage corn	32.90
126 baskets onion sets	630.00
	$850.60

SUMMARY

Farm	$ 11,777.16
Dairy	99,091.97
Poultry	9,053.87
Piggery	23,668.98
Garden	44,595.21
	$188,187.19

FLORIST'S REPORT

PLANTS AND BULBS GROWN FOR FLOWER BEDS AND CUT FLOWERS

Asters	3,000
Aceranthus	600
Ageratum	500
Begonias	2,000
Cannas	1,500
Canterbury Bells	120
Carnations	2,000
Chrysanthemums	3,500
Coleus	3,000
Crotons	50
Delphiniums	750
Ferns	560
Fuchsias	260
Geraniums	2,700
Gladiolus	8,000
Heliotrope	330
Lantana	130
Lilies, Calla	250
Lillies Regale	300
Morning Glories	42
Narcissus	3,920
Pansy	576
Petunias	3,000
Poinsettias	45
Roses	1,186
Salvias	2,000
Snapdragons	10,000
Sprengeri strings (Asparagus)	30
Sweet alyssum	750
Torenia	650
Tulips	2,200
Verbena	500
Vinca vine	150
Vinca	1,100
Zinnias	3,000
Total	58,699

Asters	694
Carnations	13,575
Canterbury Bell	102
Chrysanthemums (large)	496
Chrysanthemums (medium)	1,774
Chrysanthemums (sprays)	7,615
Columbine	624
Delphiniums	1,274
Fern leaves	372
Gladiolus	16,453
Gypsophila (Baby's breath)	135
Lilies, Calla	822
Lilies, Regale	1,489
Narcissus	5,247
Roses	27,509
Shasta Daisies	1,331
Stevia	112
Snapdragons	43,703
Sprengeri strings (Asparagus)	1,704
Zinnias	19,023
Total	144,054