

THE FIFTY-FIFTH ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

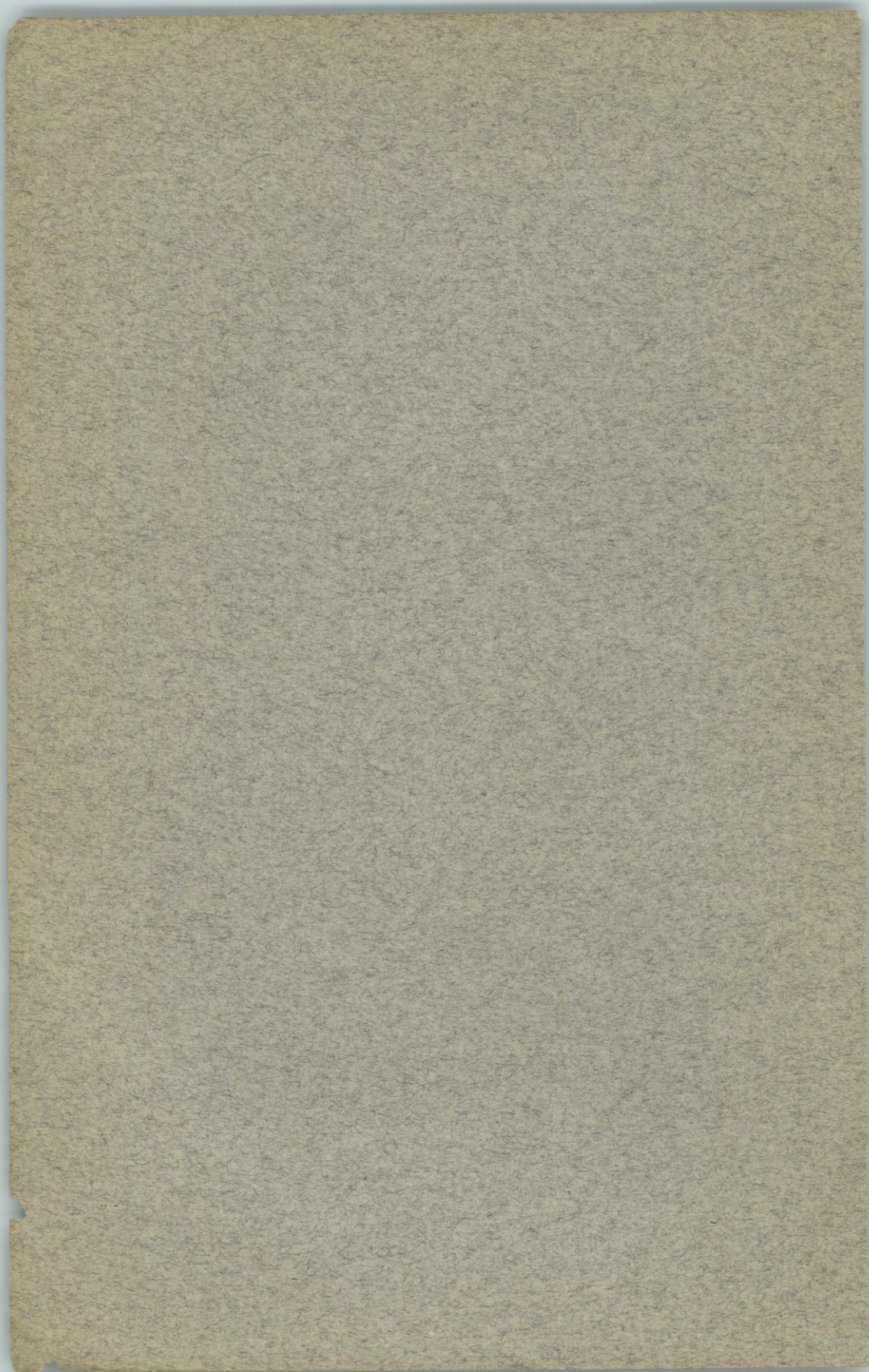
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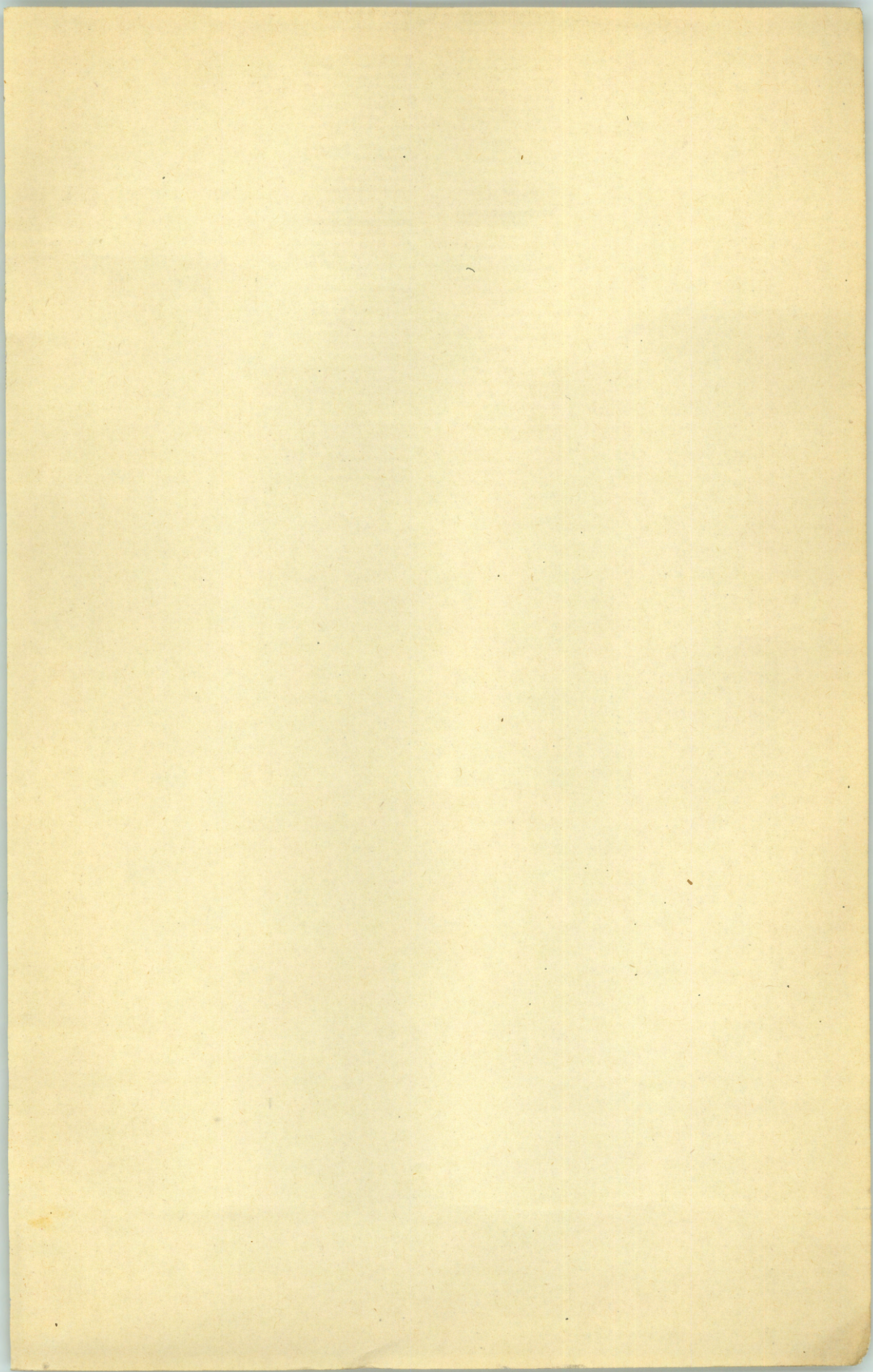
GREYSTONE PARK

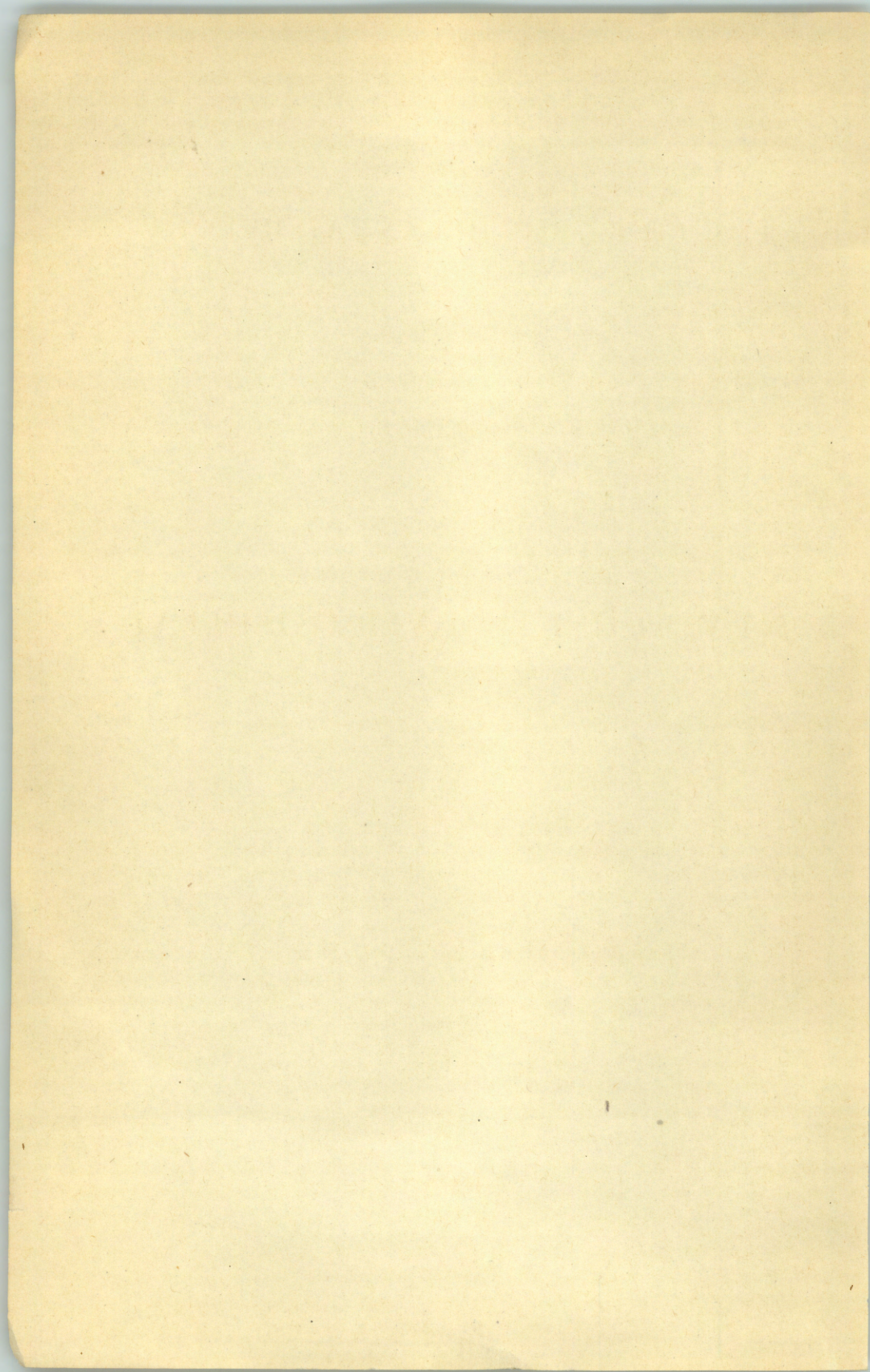
FOR THE YEAR ENDING JUNE 30th

1930

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THE FIFTY-FIFTH ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

AT

GREYSTONE PARK

FOR THE YEAR ENDING JUNE 30th

1930

Compliments
of
Dr. M. A. Curry
Superintendent

THE FIFTY-FIFTH ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

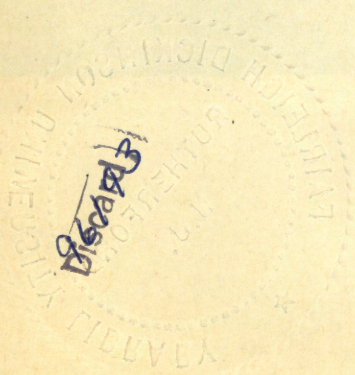
NEW JERSEY STATE HOSPITAL

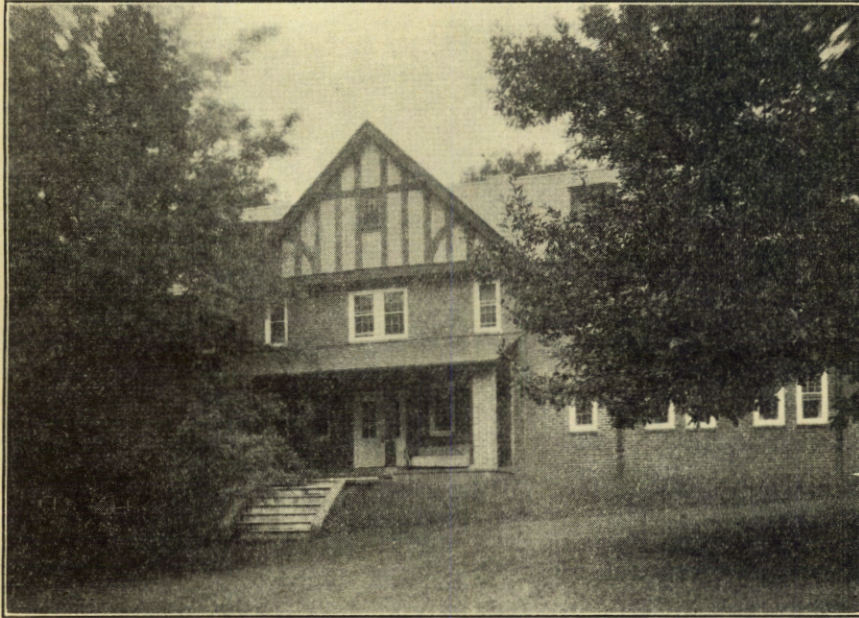
AT

GREYSTONE PARK

FOR THE YEAR ENDING JUNE 30th

1930





ONE OF THE NEW NURSES' HOMES



ONE OF THE NEW NURSES' HOMES

BOARD OF MANAGERS

PRESIDENT

DANIEL S. VOORHEES.....Morristown

VICE-PRESIDENT

AUGUSTUS S. KNIGHT, M. D.....Gladstone

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MRS. MARIAN K. GARRISON.....Llewellyn Park, Orange

RIDLEY WATTS.....Morristown

COL. FRANKLIN D'OLIER.....Morristown

GEORGE O'HANLON, M. D.Jersey City

JAMES E. LAUENSTEIN, *Secretary*

Morristown

BOARD OF MANAGERS

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DANIEL S. VORHEES
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VICE-PRESIDENT

AUGUSTUS S. KNIGHT, JR., D.
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RILEY WATTS
Mortonsville

COL. FRANKLIN D'OLIVER
Mortonsville

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Joneston, C.D.

JAMES F. LAURSTEIN, Sec'y

Middletown

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GEORGE B. MCMURRAY, M. D.....Senior Resident Physician
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WILLIAM J. LEIN, M. D.....Senior Resident Physician
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*JAMES K. POLLOCK, M. D.....Senior Resident Physician
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*PERCY L. SMITH, M. D.....Senior Resident Physician
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*GEORGE W. COMEAU, M. D.....Resident Physician
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ELSWORTH BAKER, M. D.....Resident Physician
*JACK BRENNER, M. D.....Resident Physician
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*VERNON L. ELEY M. D.....Resident Physician
*FERDINAND SCHMITTER, M. D.....Resident Physician
*THEO. B. DUNN, M. D.....Resident Physician
C. E. F. LAATSCH, M. D.....Resident Physician
THOMAS G. PEACOCK, M. D.....Resident Physician
W. H. MINFORD, M. D.....Resident Physician
LAYMAN R. HARRISON, M. D.....Resident Physician
JAMES M. LASLEY, M. D.....Resident Physician
BERNARD GLICK, M. D.....Resident Physician
EARL W. FULLER, M. D.... Director of Mental Hygiene Clinics
LINDSAY E. ROBINSON, M. D.,

Assistant to Director of Mental Hygiene Clinics

THOMAS R. PALMER, D. D. S. Resident Dentist
 HOWARD E. THOMPSON, D. D. S. Junior Resident Dentist
 *ARTHUR W. VON DEILON, D. D. S. Resident Dentist
 ANNE HOW, R. N. Superintendent of Nurses
 WILLIAM G. BEUCLER Assistant to Chief Executive Officer
 MILDRED H. HURLEY,
 Directress of Mental Hygiene Clinic Social Service
 PHYLLIS POINTON, .
 Directress of Hospital Psychiatric Social Service
 BEATRICE M. FORD Directress of Physical Training
 STELLA A. MCCLURKIN Directress of Occupational Subjects
 NATALIE L. REILLY Directress of Occupational Subjects
 PHILIP B. ROBERTS Pharmacist
 *GEORGE J. HAMBERGER Business Manager
 GEORGE J. HOLBIG Business Manager
 EDWARD I. COURSEN Assistant Business Manager
 ARTHUR J. VAN WINKLE Treasurer
 HENRY LANDESMAN, C. E. Engineer-in-Charge

**Resigned:*

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WILLIAM J. ARLITZ, M. D.....Neurologist
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WILLIAM H. LAWRENCE, Jr., M. D.....Surgeon
GEORGE P. PITKIN, M. D.....Surgeon
JOSEPH M. RECTOR, M. D.....Surgeon
LEONIDAS L. MIAL, M. D.....Eye, Ear, Nose and Throat
E. BLAIR SUTPHEN, M. D.....Eye, Ear, Nose and Throat
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B. M. JAMES, M. D.....Dermatologist
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CLARENCE O'CROWLEY, M. D.....Urologist
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Gastro-Enterologist and Proctologist
H. AUSTIN COSSETT, M. D.....Gastro-Enterologist
FRANCIS C. BARTLEMAN, D. D. S.....Dentist

BOARD OF CONSULTANTS

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DAVID A. KRAYER, M. D., F. A. C. T. Gynec-Obstetrician and Proctologist
CLARENCE O'BROWLEY, M. D. Urologist
HARRISON S. MARTLAND, M. D. Pathologist
R. M. JAMES, M. D. Dermatologist
H. J. F. WALLHAGER, M. D. Eye, Ear, Nose and Throat
E. BLAIR STUBBS, M. D. Eye, Ear, Nose and Throat
LEONARD L. MIAL, M. D. Eye, Ear, Nose and Throat
JOSEPH W. RECTOR, M. D. Surgeon
GEORGE R. PERIN, M. D. Surgeon
WILLIAM H. LAWRENCE, JR., M. D. Surgeon
FRANCIS H. GLASSBORO, M. D. Surgeon
CLYDE WILSON, M. D. Surgeon
WILLIAM J. ARLEY, M. D. Neurologist
CHRISTOPHER C. BEILING, M. D. Neurologist
GEORGE H. PATRICK, M. D. Clinical Medicine

REPORT OF THE BOARD OF MANAGERS

REPORT OF THE BOARD OF MANAGERS

NEW JERSEY STATE HOSPITAL

REPORT TO THE COMMISSIONER

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

The Board of Managers of The New Jersey State Hospital at Greystone Park herewith submits to you, as required by law, its fifty-fifth annual report of the institution. Incorporated in this is the report of the Superintendent and Chief Executive Officer for the fiscal year ending June 30, 1930.

The general condition of the institution seems to us decidedly improved over that of a year ago, when we were in the midst of checking up after the great fire on May 6, 1929, and of discussing plans for reconstruction. Work has been pushed forward vigorously throughout the year, and now more than half of the wards on the North Side of the Main Building, exclusive of the fourth floor, have been entirely reconstructed and made fireproof. These wards are now new and of the most modern type in every way, floors, plumbing, wiring, heating system and decoration. The reconstruction of the Clinic Building has been completed and work is in progress on the Dormitory Building. Under new construction, the Senile Building to house 150 patients in that classification, has been practically completed and should be occupied very shortly.

Other construction matters which have engaged the attention of the Board during the year have included the Service Building now almost completed, which is to provide headquarters for visitors to the institution; the Occupational Therapy Building for Women, which will probably not be completed for several months, but will then be quarters where this important branch of hospital activity may be carried on under ideal conditions; the final plans and contracts for the Tuberculosis Building and two single cottages for physicians, upon which work will start immediately after the opening of the coming year; and preliminary studies for attendants' housing at the Dormitory Group. Continued work has been done at the sewage disposal plant.

In order to afford fire protection pending reconstruction of the

South Side of the Main Building a sprinkler system has been installed there. In co-operation with your Department a complete study has been made of the water system of the institution as well as of the buildings with a view to deciding exactly what steps should be taken to insure the highest degree of protection to State wards and property. The results of that study have already been placed in your hands. In this connection we desire to make especial note of our satisfaction with the results obtained from the deep well in Morris Plains. Through all weather conditions this has produced an unfailing supply of excellent water to the amount of 500,000 or more gallons daily, as required. With the installation of equipment for producing alternating current from our own dynamo plant, so that we can run the pump at this well from the institution instead of purchasing current, as has been necessary up to this time, it will be used constantly rather than as an auxiliary source. We believe that a second well should be drilled in order that the entire potable supply for the institution may be obtained in this manner.

We consider that the administration of hospital affairs has been conducted in an efficient manner throughout the year. The medical and treatment services to the patients have been hampered by the very serious degree of overcrowding present. This overcrowding has been due to three factors: First, the primary overcrowding which existed prior to the time the present building program was adopted and which had never been wiped out, since the annual increase in population has approximately kept pace with the construction of new housing; second, the fire and reconstruction overcrowding, due to the fact that wards upon which work was being done had to be vacated by patients; third, the reception overcrowding, brought about by the greatly increased number of new admissions. We feel that under the circumstances, the medical and nursing staff should be congratulated upon the fine recovery rate maintained.

Certain new features have been inaugurated or developed during the year. The affiliated course of psychiatric training for student nurses in general hospital training schools, which was opened last year, has been expanded and has proved so successful

that applicants have been in excess of the facilities available. The hospital and mental hygiene clinic sections of the social service division have been entirely separated under different heads. The use of malarial treatment for paresis and spinal anesthesia in surgery have been successfully continued. The equipment for electrotherapy has been enlarged and the number and variety of treatments increased. Prophylactic work has been given more attention in the dental division with a larger staff available.

In the outside divisions of the institution, certain points are noteworthy. Mr. John J. Kelly, gardener, resigned and was succeeded by Mr. Arthur Ketch, who has made an excellent record under unfavorable weather conditions. Mr. Otto Koch was given a leave of absence in December to recoup his health and returned in condition to continue his work successfully. He has obtained very remarkable results with patient help on the hospital grounds and in grading and road construction annually saves the State thousands of dollars. Serious trouble developed at the dairy which threatened the entire herd. Acting under the advice of Mr. Houston of your Department, Dr. Dustan, the consulting veterinary, and such other experts as it was considered best to call in, Mr. Coursen, assistant business manager, who was put in charge at the dairy early in December, has brought about a remarkable improvement in conditions and now has the herd on a good basis once more.

The most important change in the officers of the institution was the resignation of Mr. George J. Hamberger on January 31 and the appointment on February 15 of Mr. George J. Holbig to the vacancy. We appreciate your generous attitude in permitting Mr. Holbig to come to us from your own Department. He has made remarkable headway in the four and a half months that he has been with us, and we feel that having him in this position is a decided advantage to the institution.

The Superintendent, Dr. Curry, has continued to devote his entire time to the affairs of the institution up to and beyond the limit of his strength. The continued strain of the burdens incident to the reconstruction, overcrowding and the myriad readjustments required in the internal affairs of the institution to meet

the various situations as they arose resulted in a general lowering of his physical condition, so that early in June he was given a five weeks' leave of absence to go abroad. The Board trusts that his health will show a gratifying improvement on his return.

This report shows that Dr. Curry has served for ten years as Superintendent of this, the largest institution in the State. In his report he has briefly indicated the amazing growth in population, plant and varieties of service to the patients which has come about during this decade. He does not mention at what cost to himself in physical, intellectual and emotional strain these results have been produced. We of the Board know that his entire life and interest have been centered in the work at Greystone Park and that he has consistently declined outside requests for his professional services on the ground that his institution needed all his time and energy. In view of the extraordinary demands made by this particular hospital, we feel that the salary paid is entirely inadequate and urge that a compensation be given more in accord with the duties required.

At the close of the year covered by this report there remained on the records of the hospital 4,236 patients—2,084 males and 2,152 females—an increase of 239 patients over the previous year. Of this total, 337 patients—163 males and 174 females—were outside the institution, but still carried on the hospital books and subject to return without legal or medical procedure. During the year there were admitted, including first admissions, readmissions and transfers from other institutions for the insane in this State, 1,082 patients—570 males and 512 females. The discharges totaled 516 patients—245 males and 271 females; 242 were discharged as recovered, 201 as improved, 44 as unimproved, 18 as without psychosis, and 11 as transferred to other hospitals for mental disease in New Jersey. The deaths during the year numbered 327—170 males and 157 females.

During the year the Board of Managers held twelve regular monthly meetings and one informal meeting. The total attendance was 64. Committee meetings, conferences, inspections and visits made up a grand total of 307 trips to the institution by the individual members of the Board. In addition to these visits,

other conferences were held at the homes and offices of different members.

As we are writing this report, word has come to us of the death of a former member, Mr. John F. Boyle, of Jersey City. Although his services on the Board were terminated many years ago, because of the press of other duties, we have always felt his friendly interest in our work, and to those of us and to the resident officers of the institution who knew him personally, his passing has brought keen regret.

In conclusion, the Board wishes to thank you personally, and through you the various members of your organization, for the unceasing devotion of your time and effort to the affairs of this hospital. We are sincerely grateful for your frank and friendly dealings with us, individually and collectively.

Very respectfully submitted,

DANIEL S. VOORHEES, President
AUGUSTUS S. KNIGHT, M. D., Vice-President
JAYNE MILLARD DOYLE
MARIAN K. GARRISON
RIDLEY WATTS
COL. FRANKLIN D'OLIER
GEORGE O'HANLON, M. D.

NEW JERSEY STATE HOSPITAL

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Very respectfully submitted,

- DANIEL S. VOORHEES, President
- AUGUSTUS S. KNIGHT, M. D., Vice-President
- JAYNE MILLARD BOYD
- MARIAN K. GARRISON
- RIDLEY WATTS
- COL. FRANKLIN DOLLER
- GEORGE O'HANLON, M. D.

TREASURER'S REPORT

THE TRESURER'S REPORT.

**TREASURER'S REPORT OF CASH RECEIPTS AND
DISBURSEMENTS FOR THE FISCAL
YEAR ENDING JUNE 30, 1930**

RECEIPTS

From Bergen County.....	\$102,168.35
" Camden County.....	85.89
" Essex County.....	33,089.62
" Hudson County.....	39,707.74
" Hunterdon County.....	200.82
" Mercer County.....	533.23
" Middlesex County.....	3,026.36
" Monmouth County.....	949.84
" Morris County.....	43,414.75
" Passaic County.....	150,878.02
" Somerset County.....	693.04
" Sussex County.....	14,178.80
" Union County.....	134,425.76
" Warren County.....	1,866.07
" Private Patients.....	162,324.90
" Individuals and Excess amounts collected by Counties for support of Indigent Patients.....	5,730.59
" Miscellaneous receipts.....	9,170.99
	\$702,444.77

DISBURSEMENTS

Amount Received for Scrap Copper Sold and Credited on Contract	\$507.50
Amount of Collections deposited with State Treasurer.....	701,937.27
	\$702,444.77

AMOUNTS RECEIVED FROM STATE TREASURER FOR PAY-ROLLS

Employees' Pay-rolls.....	\$918,923.15
Officers' Pay-rolls.....	17,573.95
	\$936,497.10

A. J. VAN WINKLE
Treasurer.

TREASURER'S REPORT OF CASH RECEIPTS AND
DISBURSEMENTS FOR THE FISCAL
YEAR ENDING JUNE 30, 1930

RECEIPTS

\$102,187.32	From Bergen County
88.30	Garfield County
33,080.62	Essex County
30,707.71	Hudson County
300.82	Hunterdon County
223.23	Monroe County
3,025.26	Middlesex County
940.84	Monmouth County
43,414.73	Morris County
150,878.02	Passaic County
607.04	Somerset County
14,128.80	Sussex County
134,422.76	Trenton County
1,806.07	Warren County
102,224.90	Private Parties
2,730.20	Individuals and excess amounts collected by Counties for support of indigent patients
0,170.00	Miscellaneous receipts
\$702,444.33	

DISBURSEMENTS

\$207.50	Amount Received for Scrap Copper Sold and Credited on Current
701,937.77	Amount of Collections deposited with State Treasurer
\$702,145.27	

\$208,523.12	Expenses - Pay roll
17,213.82	Office - Pay roll
\$225,736.94	

A. J. VAN WINKLE
Treasurer

REPORT OF THE CHIEF EXECUTIVE OFFICER

REPORT OF THE CHIEF EXECUTIVE OFFICER

REPORT OF THE CHIEF EXECUTIVE OFFICER

TO THE BOARD OF MANAGERS:

According to established custom, I herewith place before you the fifty-fifth annual report of the New Jersey State Hospital at Greystone Park for the fiscal year extending from July 1, 1929 to June 30, 1930. In this report the affairs of the whole institution have been taken up with some attention to persons and particulars, although of necessity much has been left unsaid, especially with regard to the rank and file of workers whose loyalty to the institution and devotion to the individual task has in the last analysis produced everything that has been accomplished.

The year has been a difficult one in many ways. In the medical department there has been an overcrowding of patients in excess of anything experienced since the Clinic Building was opened for service in 1923. This overcrowding was due primarily to the closing of many wards on the north side of the Main Building for the reconstruction consequent upon the great fire of last year, and secondarily to an admission list without precedent in the history of the institution. The overcrowding has brought many complications in the way of constant and repeated transfers of patients, lack of proper segregation according to mental status, taking over of recreation and sun rooms for sleeping quarters, and in the Dormitory Building of setting up of many cots each night. All of this has resulted in extra duties for the medical and nursing divisions and has greatly reduced facilities for the proper curative treatment of patients.

In the business department almost equally great difficulties have been faced. The farm and garden have had production deeply cut by prolonged drought. The dairy herd has suffered from a variety of infections frequently encountered among cows of a heavy milking type and probably even more prevalent in many commercial herds of excellent repute. Our extreme care to avoid any possibility of using unsafe milk has greatly reduced the supply while increasing the amount of labor required.

There has been one very important change in resident officers

this year. Mr. George J. Hamberger resigned as Business Manager on January 31, and on February 15, Mr. George J. Holbig succeeded to the position. Mr. Holbig came to us from the Central Office, where he had been departmental steward. Prior to that he had received unusually extensive training in institutional management both in New York and New Jersey, so that he was fully equipped to handle all phases of the work in his department.

During the short period before Mr. Holbig was able to give his full time at this institution, the necessary duties were carried by Mr. William G. Beucler, the assistant to the chief executive officer. Other changes in personnel include the expected turnover in all divisions, with a rather high proportion among the junior medical officers. Further details as to resignation and appointments will be found under the reports of the different sections.

Along the line of building and equipment, in addition to the work on the Main Building, a number of offices and treatment rooms have been furnished and occupied in the Clinic Building during the year; the Senile Building has been practically completed and one portion of it is now in use by patients; and in the Main Building Centre, the first floor rooms, occupied by the Business Manager as living quarters until the completion of his cottage at the close of last year, have been remodeled and redecorated and adapted into business offices, with also a suite consisting of conference room, dining room and pantry for use by the Managers and other official visitors to the institution. One feature of hospital equipment which has proved its value many times over during the past year is the deep well which was connected up for use about fifteen months ago. First, as I noted last year, it was a source of additional supply at the time of our great fire; then, during the dry season of 1929, when the whole hospital watershed was parched and the reservoirs greatly depleted, this continued to furnish its normal supply of water. Without it we should have been in a very serious condition and should have been obliged to close the continuous baths and put the entire institution under very rigid water restrictions. Already this season the rainfall has been below normal, but as we face the possibility of another drought our regret is not marked with that heavy sense of

dread which we have known in past years when the hospital population was much smaller and more compact, and which would be intensified many times over with our present lengthened roll of patients and widely scattered buildings.

On the whole, I feel that much has been accomplished this year, although under conditions of considerable stress for the resident officers and employees. Unfortunately this stress must continue until the reconstruction is completed before we can make full use of our existing buildings. Meantime, if our admission rate continues to rise, we must be prepared to make even more difficult adjustments until relief is afforded.

The fact that the recovery rate for patients has been held to within a fraction of that attained last year under so much more satisfactory housing conditions indicates a highly commendable quality of service. It has been a constant source of gratification to me, realizing as I did all the handicaps in the way of highest achievements, that so much has been accomplished and with so little evidence of turmoil and irritability. Despite the material difficulties of our position at the close of this year, I consider that the general spirit of the personnel is excellent and that the cooperation between all divisions is closer and the entire organization on a better working basis than has been attained heretofore.

HEALTH

We have been most fortunate in having been able to maintain a high standard of health throughout the institution this year. No serious epidemics have occurred; only forty-eight new cases of pulmonary tuberculosis were reported, and erysipelas was reduced to eight cases with three deaths. By prompt isolation and treatment of all suspected individuals, Vincent's angina was held to a low incidence. Preventative measures have been continued by means of physical examinations of all new patients, and by vaccinations and inoculations. The milk and water supplies have been constantly checked up by means of laboratory tests. Detailed accounts of the measures used in safeguarding and improving the dairy and the water systems will be found in the appropriate divisional reports.

STATISTICAL RESUME

The standard forms of record cards recommended by the National Committee for Mental Hygiene have been continued and tables made up in the usual manner from these cards will be found in the statistical appendix. In addition, at the request of the Department of Institutions and Agencies, we have added this year tables showing the state of birth for all persons born in the United States and the country of birth of all persons born outside of the United States, the length of time native-born first admissions have been in New Jersey and the length of time foreign born first admissions have been in New Jersey and in the United States. By summarizing the tables at this point in my report I can place the salient facts in a form for convenient reference.

General Data: During the year ending June 30, 1930, there were admitted 1,082 patients—570 males and 512 females. This is an increase in admissions of 193 over last year and of 172 over the previous high record established in 1928. The admissions included 893 first admissions to any hospital for the insane—474 males and 419 females; 165 readmissions—79 males and 86 females; and 24 transfers from other similar institutions in New Jersey—17 males and 7 females. The number of patients discharged, including deaths, was 843—415 males and 428 females—leaving an increase on the books of 239 patients at the close of the year.

There were under treatment during the year 5,079 patients—2,499 males and 2,580 females, which was 246 more than in the preceding year. The maximum census for the year was 4,244 attained on June 27, and the highest number actually in the hospital at any one time was 3,907, which occurred on the same date. The average daily number in the hospital was 3,748.4. At the close of the year 321 patients—148 males and 173 females—were carried on parole, and 16 patients—15 males and 1 female—were carried as escaped. This is a decrease of 14 from the number outside the institution at the close of last year, making the total increase of patients actually in the institution at the close of the year 253.

As you may recall, I stated in my report of last year that I did

not regard the slight decrease in the number of patients in the institution at the close of that year as a matter of any lasting importance, but due rather to special factors operating at that particular period. I am inclined to consider the admission rate of this institution as something of a barometer of social conditions; there appears to be a basic rate which follows a definite line of increase, but marked fluctuations above and below this line occur during periods of unusual prosperity or the reverse. The present year, with its record of business depression and industrial readjustment, is a case in point, since the admission rate is nearly one-fifth higher than any previous year in the history of the institution. Whether or not this rate will be continued during the next twelve months will depend largely upon the rapidity with which unemployment and other social problems are solved.

First Admissions: There were 540 patients of native birth, 285 males and 255 females; the foreign born numbered 343 patients—182 males and 161 females—or a trifle over 38 per cent. of the total first admissions; the birthplaces of 10 patients—7 males and 3 females—were not ascertained. Both parents of 296 native born patients were also of native birth, while in 55 cases one parent was born in this country and the other was of foreign birth. Of the foreign born patients, 61 were natives of Italy, 56 of Germany and 40 of Poland, these three countries furnishing over 45 per cent. of the foreign born first admissions. The naturalized citizens numbered 129, the aliens 132, and the citizenship of 92 was unascertained.

Table 6, Psychoses of First Admissions, shows 203 patients diagnosed as suffering from psychoses with cerebral arteriosclerosis, 187 with dementia praecox, and 151 with manic-depressive psychoses. These three groups comprised almost 66 per cent. of the total. Other psychoses showing high incidence were—general paralysis, 102; senile psychoses, 45; involution melancholia, 27, and alcoholic psychoses, 23.

In the classification according to racial origins, 89 were listed as German, 85 as Irish, 84 as Slavonic, 76 as Italian, and 51 as African, these five groups including 43 per cent. of the total. Mixed races as usual furnished the largest single group, with 333

patients; the race of 19 was unascertained.

The age tabulation reckoned in five-year groups shows that the median line for admissions fell between the ages of 40 and 44, half of the total admissions being below this age and half above it. The greatest number of admissions were listed in the three five-year periods between 30 and 45 and included 34 per cent. of the total. Under 25 years were 124 patients, and 86 were 70 years and over.

As to the degree of education, 440 patients, or over 49 per cent, has received a common school education, 68 were graduated from high school, and 23 had a collegiate education; 197 were listed as having learned to read and write, and 53 were illiterate. The education of 112 patients was not ascertained.

There were 817 patients of urban environment, or over 91 per cent. of the first admissions. The rural districts supplied 70 patients, and the environment of 6 was not learned.

The economic condition of 424 patients—about 47 per cent. of the total—was listed as marginal; 312 were dependent, 139 comfortable, and the economic condition of 18 was not ascertained.

In regard to the use of alcohol, 427 patients were described as abstinent; 192 as temperate, and 117—106 males and 11 females—as intemperate. The habits of 157 patients were not ascertained.

The marital condition of the first admissions was classified as follows: Single, 313—193 males and 120 females; married, 400—199 males and 201 females; widowed, 132—54 males and 78 females; separated, 14—7 males and 7 females; divorced, 16—9 males and 7 females. The marital condition of 18 patients was not learned.

Readmissions: The totals in this group were 165 patients—79 males and 86 females. In the classification according to psychosis, 63 were diagnosed as suffering from dementia praecox and 39 from manic-depressive insanity, over 61 per cent. of the readmissions.

Discharges: The total of those regularly discharged from the care of the institution during the year was 505 patients—242 males and 264 females. Of this number, 242 patients—112 males and 130 females—were considered to have recovered from their

psychoses. This is 27 per cent., based on the number of first admissions, and is a very creditable rate, considering the exceedingly high number of admissions. The manner of discharge of the remaining patients was as follows: Improved, 201 patients—98 males and 103 females; unimproved, 44—15 males and 29 females; without psychosis, 18—16 males and 2 females. In addition to those discharged, 11 patients—4 males and 7 females—were transferred to other institutions in New Jersey without decision as to their mental status. Of those discharged as recovered, patients suffering from manic-depressive psychoses constituted over 44 per cent., or 107 patients.

Deaths: During the year 327 patients died—170 males and 157 females. This is a rate of only about 6.2 per cent., based on the total number under treatment, and compares very favorably with that in other years. The largest single cause of death was endocarditis and myocarditis, which was certified in 152 cases, or over 46 per cent. of the total number; other diseases of the circulatory system caused 32 deaths. General paralysis of the insane was given as the cause of death in 42 cases; tuberculosis of the respiratory system in 25; nephritis in 12; and bronchopneumonia in 11. The psychoses of those who died included psychoses with cerebral arteriosclerosis, 98; dementia praecox, 58; general paralysis, 45; senile psychoses, 42; and manic-depressive psychoses, 38. The average age at death was 57.52 years.

At the time of death 152 patients, or over 46 per cent., had passed the age of 60 years; 100 patients were over 70 years of age. Of these 25 were in the 80's and 4 were 90 or over.

The tabulation of the duration of hospital life showed that 83 patients had been in the hospital less than one month; more than half of these were suffering from psychoses with cerebral arteriosclerosis or general paralysis. Twenty-nine patients had a hospital residence of over twenty years at the time of death, and of these 21 were suffering from dementia praecox.

REVIEW OF PAST TEN YEARS

As this report marks the completion of my tenth year as Superintendent, it may be fitting to summarize the more important

changes and developments in that decade. When you appointed me as your chief executive officer in 1920, the institution had been in many ways an excellent one of its type. The patients had been well looked after from the standpoint of food, clothing and general care. The "parlor" wards were comfortably furnished, and everything had been kept in a clean and orderly condition. To a limited extent, an attempt had been made to provide treatment facilities. Two small operating rooms had been equipped, one on the male service and one on the female. A few continuous bath tubs had been installed. There was a static machine and some X-ray equipment. A small building for occupational therapy had been in service for about five years and a laboratory building had recently been completed. There was one resident dentist. The training school for nurses offered a three years' course, but as it did not comply with State requirements it was not accredited. Two workers had been engaged in a form of social service, but with the general shortage of employees they had been absorbed into the office staff except for the taking of brief histories on new patients. So much for the credit side.

On the other side of the picture, the patients were all housed in the wards of the Main and Dormitory Buildings under conditions of great overcrowding. The total population was 2,713; the medical staff consisted of 9 physicians, including the Superintendent, a pathologist and an assistant pathologist; there was a total of 134 nurses and attendants, 81 men and 53 women. In other words, the ratio of ward physicians to patients was 1 to 450, and of women nurses and attendants to women patients was 1 to 26. This number had to cover all services and twenty-four hours a day, so the actual ratio at any one time was much higher.

Even for this limited force the housing was entirely inadequate. All physicians lived in quarters in the Main and Dormitory Buildings for the most part, with only one room to a family and with only two staff bathrooms to a building. The housing for attendants was even more cramped, and many had to sleep in rooms on the wards with the patients. All nurses and attendants had their meals served on the wards, usually in the dining rooms with the patients. Salaries for both officers and employees were

very low in comparison with those prevailing outside the institution. The water supply, power plant and sewage system were all inadequate and a constant source of anxiety. All patients were locked in their rooms at night.

Throughout the ten-year period improvements have been made possible by an awakened public interest in institutions. The half-mill tax for construction purposes has been the largest single factor in effecting the changes. The following housing for patients has been erected: Clinic Building, Reception Building, two Congregate Dining Halls, Senile Building, and one modern Occupational Therapy Building completed and another under construction. The housing for physicians includes three single cottages—for the Superintendent, the Clinical Director and the Pathologist, respectively—two double cottages, a staff house and remodeled quarters in the Main and Dormitory Buildings providing at least two rooms and bath for each suite. A separate cottage for the Business Manager has also been built. Housing for employees includes three nurses' cottages, the employees' residence, a nurses' dining hall and an employees' cafeteria, and an enlarging of the firehouse to provide additional quarters for fifty men.

An entire new power plant has been constructed. The water supply has been greatly improved by the drilling of a deep well to supplement the old reservoir system, this well now furnishing about half the required daily supply. The sewage system has been radically changed and is in much better condition, although still incomplete. Existing buildings have been extensively repaired and remodeled; in the Main Building and the Dormitory Building progressive reconstruction of the wards with steel and concrete fireproof materials is now being carried on. Roads have been resurfaced, a great amount of grading done, and additional equipment has been provided in all divisions, including laundry, garage, kitchen, dairy, greenhouse, and fire prevention and protection.

In the medical staff one of the first changes was reducing the number of pathologists to one, while increasing the technicians as necessary. A clinical director was appointed and placed in charge of the medical care of patients, of staff meetings, and of instruct-

ing physicians. Gradually specialists were engaged or trained to take charge of the examination and treatment in the different fields of medicine and released from ward duty to devote full time to their specialty, thus providing a high type of medical and treatment service. Complete hospital equipment was installed and rooms fitted up for all of this work. The staff of physicians now numbers twenty-four, with several recent vacancies to be refilled shortly. The dental organization consists of two dentists, two dental internes, a mechanical dentist, and a consulting dental surgeon.

For improving the care of the patients, one of the first changes was the unlocking of room doors at night. Even yet I am appalled whenever I think of what would have been the results of a fire in the Main Building with all those hundreds of people locked up, two or three to a small room. The nursing staff was completely reorganized with a registered nurse in charge, and accredited and affiliate courses in nursing have been established. Nurses who have been graduated from general hospital or State hospital schools have been put in supervisory and charge positions on the male wards as well as on the female. Social service, physical education and occupational therapy on the wards have been instituted and placed on an efficient basis of personnel and equipment. The system of extending trial visits to a year under supervision before discharge has been established, and mental hygiene clinics have been developed in all counties of the hospital district.

In the following statistics I have used the period from July 1, 1920, to June 30, 1930. Where figures for single dates are compared, these are the dates used; where two years are compared, the years are, July 1, 1920, to June 30, 1921, and July 1, 1929, to June 30, 1930. During this decade, the total number of patients under treatment in a year has increased by 55 per cent. There has been an average annual increase in admissions of 47.7 patients, an average annual increase on our books of 152.3, and an increase of patients actually in the house of about 131 each year. The number of nurses and attendants has been increased to 489, of whom 257 are women. The total number of employees has in-

creased from 340 to 918. The population has grown from 2,713 to 4,236, and the annual admissions from 663 to 1,082. The number discharged as recovered increased from 119 to 242. The valuation of the hospital plant increased from \$4,210,223.66 to \$11,548,726.40. Salaries and wages have been increased in all divisions. At the end of this period, while the institution is temporarily in a badly overcrowded condition, the type has been entirely changed from custodial care to curative treatment, the personnel and equipment have been placed on a much more adequate basis, and when work now in progress, provided for, or requested, has been completed and promised transfers have been made, the population and housing should be more nearly equal than at any time within the last twenty years.

In enumerating the changes which have been brought about, I have made no attempt to indicate their scope and importance, or the means by which they were accomplished, since this statement is intended merely as an outline of the work done. Some details have been given in the last ten Annual Reports, others are known only to those actively engaged in effecting the results. Throughout this long period of reorganization and reconstruction, the Board of Managers has devoted itself whole-heartedly to the great task, and the Department of Institutions and Agencies, especially Commissioner Ellis, has done everything possible to further the work and make New Jersey's largest institution a centre for community health and an object of pride to its citizens.

CLINICAL WORK

The position of Clinical Director was created nearly ten years ago, and after careful study had been made of the available candidates, Dr. Arthur G. Lane was appointed to the vacancy on February 15, 1921. He has carried on the work since that time without interruption, through the continued reorganization and the gradual increase in number and personnel of the medical divisions, and should be given the highest credit for his efforts to promote and improve all therapeutic measures designed to shorten the stay of the patient in the hospital. He has been in charge not only of the work of the physicians, but also of the

social service division since it was established, and he did the preparatory work for the mental hygiene clinics and was in personal charge of them until their value was recognized and a separate fund created by the Legislature for their continuance. During the past year, as usual, Dr. Lane has carried on educational work both in the institution and in the community. He delivered a course of twenty lectures in psychiatry in the winter to a group including the medical and social service staffs of the hospital and of the mental hygiene clinics, which by invitation was attended also by the Superintendent of Nurses, her executive and teaching staff, and the Director of Physical Education. The various classes of student nurses were given a total of fifty lectures by Dr. Lane. He was frequently called upon to make addresses before medical, religious, educational and social groups both in the community and when they visited at the hospital,—in the latter circumstance the address usually included also a demonstration of interesting cases of mental problems.

Dr. Lane has submitted to me the following report:

In previous years we have been calling attention to the variation in our recovery rate due to the markedly wide annual fluctuation in the figure representing first admissions, as it is upon this base that we depend in obtaining our percentage figures. This year, with its unprecedented number of admissions, we might well have had recourse to this explanation had our percentage of recoveries fallen to an appreciable extent. That this has not occurred and our percentage of recoveries is approximately the same as that of the preceding year is worthy of favorable comment.

It is only natural to expect that in this district, as in all others similarly located in a rapidly growing section of the country, there should be a gradual yearly progressive increase of individuals requiring the type of special treatment furnished by institutions of this nature. Not only is the increase of numbers in population of importance in this district, but due regard must be paid to the fact that a large proportion of this increase occurs in the numerous large industrial cities which we serve. It is a well-recognized

statistical fact that the ratio of mental disorders (particularly of the organic type) is much greater in urban than in rural communities. The recent United States census figures give the increase of population for the entire State as 27 per cent. during the last ten years. In this calculation must be considered the fact that the cities are developing much more rapidly than the rural sections, hence our hospital district being largely urban furnishes a relatively still higher percentage than does the remainder of the State. The reports indicate that certain of our cities have doubled their census in the last ten years.

The remarkable increase in admissions this year, which far exceeds that of any previous year, and which is out of proportion to the ratio of the gradual increase previously experienced, I think can be explained in a plausible manner by the financial and industrial depression which has been existing during most of the year. In studying the clinical pictures and case histories of our patients it is apparent that this factor has been an important and serious incident in directly and indirectly furnishing situations which have acted as precipitating causes for unsettling the adaptations of a large number of individuals who previously, without the stress of this factor, were making adequate social adjustments.

The increase in clinical work entailed in the actual routine procedures is in part evident in the various sectional reports found elsewhere in this volume. These figures but barely intimate the strain that has been all too apparent to the personnel who have had to labor with numbers in excess of any ever experienced. In the medical staff, the ratio to the number of patients which has been gradually adjusting itself as additional living quarters have become available has never become equal to the usual increment to our census, so that this unusual year has called for extra effort, devotion and endurance, in an attempt to approximate as nearly as possible the ideals which we have established as our goal in providing the utmost in the modern scientific care of our patients.

The present day attitude toward psychiatric problems includes two avenues of approach: First—the investigation and thorough medical treatment of physical disorders which may be of etiological significance or which may be acting as contributing complica-

tions in the mental disorder. This is, of course, of tremendous importance and requires the services of a medical and nursing staff adequate in numbers and training. Secondly--the attempt to individualize the patient by means of continuous personal contacts with a personnel trained in the sympathetic understanding of the dynamic factors involved in temperamental maladjustments and social conflicts; this is of vastly greater importance than is the consideration of the nosological form of disorder. Both of these approaches as outlined above demand as stated an adequate personnel, and they demand also sufficient opportunity for proper classification not hampered by overcrowding.

Our desire to give increasing individual attention has been considerably frustrated by the circumstances which are an aftermath of the fire last year. The concentration of medical and surgical problems in the Clinical Building with its laboratories and equipment for the various specialties is being deferred indefinitely because the loss of bed capacity in the north side of the Main Building, where reconstruction of the whole structure is in progress, has necessitated caring for this group of patients in the Clinic Building beds which were intended for the intensive medical, surgical and nursing treatments. Until this situation is corrected by the completion of the reconstruction it will be necessary to contend with the overcrowding which defeats the desire for proper classification and makes necessary the maintenance of wards on the separate services for the treatment and nursing of medical cases. Under such conditions the highest praise is due both the medical and the nursing staff for the co-operation they have shown in producing the very favorable results which have been achieved.

The extra-mural activities have shown a gratifying expansion as indicated in the mental clinic report. Such evidence can mean only one thing--that there is a very rapidly spreading interest in the mental hygiene movement in the community. The urgent demand from many localities for clinic service and the many calls for educational talks and demonstrations would indicate that the time is approaching when the public at large will have at its command much valuable information along the lines of safeguarding

mental health. When this time arrives it is safe to predict that much of the distress caused by temperamental and social maladjustments will be appreciated as largely preventable, and then ways and means will be plentifully supplied to correct many disorders in their incipiency, thus avoiding the great disasters which occur when broken adjustments lead to hospitalization.

The routine procedure at the hospital has shown little deviation from that outlined in previous years. The case history work is founded on exhaustive mental and physical examinations with recording of the efforts made to correct all therapeutic indications, and staff meetings have been held daily with the exceptions of Sunday and Wednesday. In addition to lectures given by the Clinical Director for the nurses, one of the physicians provided a lecture course in neurology for each group, and many hours of demonstration on the ward and at the bedside were provided by the senior physicians in the Reception 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.....	20
Cases transferred within the State.....	23
Cases deported.....	18
Cases repatriated.....	4
	<hr/>
Total cases handled.....	65

SURGICAL OPERATIONS, ACCIDENTS, BIRTHS, ETC.

Although conditions of overcrowding in the Clinic Building have reduced surgical work to the absolutely necessary minimum, the operating rooms themselves have been placed in excellent condition during the remodeling period. A small room from the adjacent ward was added to this suite to form a locker and dressing room for the surgeons and another room was fitted up for their use with scrubbing-up sinks, toilet and shower bath. The operating room is large enough to provide excellent space around the table. Lighting and equipment have been carefully arranged and an emergency light provided to obviate any danger of defects in plant or

wiring leaving the surgeon in darkness in the midst of an operation. As instruments and equipment have been added, stainless metals have largely taken the place of the older types.

A considerable number of major operations have been required this year and the results have been excellent with a very low mortality rate. The work has been under the immediate direction of Dr. Laurence M. Collins, who is an unusually clever diagnostician and surgeon; he has performed most of the operations himself, with Dr. Donovan and Dr. Roche as assistant and anaesthetist. Dr. Clifford Mills of Morristown has been constantly available as consultant, as has also Dr. George P. Pitkin of Bergenfield, and both have taken a keen interest in the surgical work of the institution.

Dr. Collins has submitted the following statement and tabulation of the year's work in this division: "We have been severely handicapped throughout the year by the overcrowded condition of the Clinic Building due to alterations being made at the Main Building and the resultant transfer of patients to the Clinic. In consequence I have been able to operate only on those patients who needed immediate surgical attention. There have been many cases of a minor surgical character that did not appear to be sufficiently important to warrant a classification in this report, although they are all described in the case records of the individual patients concerned. The list of operations is as follows:

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
1	Fracture of lower end of ulna, right	Fracture reduced, splint applied	Recovered
1	Fracture of ulna about 1" above styloid process, left arm	" " " "	" " " "
1	Dislocation of wrist and fracture of lower end of radius and ulna	" " " "	" " " "
1	Fracture of both bones of left wrist, lower third	" " " "	" " " "
8	Colles' fracture of left arm	" " " "	" " " "
3	Colles' fracture of right arm	" " " "	" " " "

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operations Performed</i>	<i>Result</i>
1	Fracture of lower third, left humerus.....	Fracture reduced, splint applied	Recovered
1	Fracture of neck of right humerus.....	" " " "	" "
1	Fracture of neck of left humerus.....	" " " "	" "
1	Fracture through joint, right elbow.....	" " " "	" "
1	Fracture at junction of upper and middle thirds of right radius.....	" " " "	" "
1	Fracture of first phalanx, left thumb.....	" " " "	" "
1	Fracture of 4th metacarpal bone of right hand.....	" " " "	" "
1	Fracture of middle third of right finger.....	" " " "	" "
1	Fracture of first phalanx of small finger, left hand..	" " " "	" "
1	Fracture of outer third, right clavicle.....	" " " "	" "
1	Fracture of surgical neck of left humerus and fracture of neck of left femur.....	" " " "	" "
1	Fracture of lower third of left femur.....	" " " "	" "
3	Fracture of neck of left femur.....	" " " "	" "
1	Fracture of middle third, left femur.....	" " " "	" "
4	Fracture of neck of right femur.....	" " " "	" "
1	Fracture of head tibia, left leg.....	" " " "	" "
2	Pott's fracture of left leg.....	" " " "	" "
1	Fracture of first metatarsal bones, 2nd, 3rd and 4th toes, left foot.....	" " " "	" "
1	Fracture of 9th and 10th ribs, right side.....	Chest immobilized.....	" "
1	Fracture 10th rib, left side.....	" " " "	" "

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
2	Cellulitis of scalp.....	Incised and drained.....	Recovered
7	" of arm.....	" " "	"
1	" " right leg.....	" " "	"
1	Gangrene of right arm.....	Amputation.....	"
1	Senile gangrene, large... toe, and 2nd toe, right... foot.....	"	Died
1	Gangrene right leg.....	" above knee joint.....	Recovered
1	" of left leg.....	" " " "	Died
1	Osteomyelitis of terminal phalanx, right thumb.....	" first phalanx.....	Recovered
1	Ingrown toe nail.....	Excess tissue dissected and nail removed.....	"
1	Partial amputation, traumatic, ring finger.... left hand.....	Tissue repaired, wound treated antiseptically.....	"
4	Sebaceous cyst of scalp....	Cyst extirpated.....	"
10	Lacerated wound of scalp...	Wound sutured.....	"
1	Penetrating wound, right hand.....	" treated antiseptically.....	"
1	Foreign body in hand.....	Body removed.....	"
2	" " " foot.....	" "	"
5	Carbuncle of neck.....	Incised and curretted....	"
4	Cervical abscess.....	" " drained.....	"
1	Old empyema of left plural cavity.....	Sinus curretted.....	Improved
4	Elongated prepuce.....	Circumcision.....	Recovered
4	External hemorrhoids.....	Hemorrhoidectomy.....	Recovered
1	Fistula in ano.....	Fistulous tract dissected.....	"
1	Prolapse of rectum.....	Mucous membrane cauterized....	Improved
1	Laceration of perineum....	Perineorrhaphy.....	Recovered
2	Capillary tumor of right arm.....	Tumor extirpated.....	"
1	Lipoma of right shoulder...	" "	"
1	Fibroma of right breast.....	" "	"
1	" " left "	" "	"
1	Sarcoma " " scrotum.....	Orchidectomy.....	Died
1	Post-operative hernia.....	Tissue dissected, hernial wall repaired.....	Recovered
1	Strangulated omental..... hernia.....	Gangrenous omentum resected, hernial wall closed.....	"
6	Right inguinal hernia.....	Bassinni.....	"
5	Left " "	"	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
1	Left inguinal hernia and tumor of left testicle.....	Bassinni with orchidectomy.....	Recovered
1	Double inguinal hernia.....	Double Bassinni.....	"
1	Umbilical hernia.....	Hernial sac resected, Mayo operation performed.....	"
1	Chronic sinus following pus abdomen.....	Tissue dissected, sinus curetted and walls repaired.....	"
1	Ruptured intestine.....	Gut resected.....	Died
1	Tubercular peritonitis.....	Laparotomy with exposure of intestines to air.....	Improved
28	Acute catarrhal appendicitis	Appendectomy.....	Recovered
16	Chronic catarrhal appendicitis.....	"	"
4	Acute suppurative appendicitis.....	"	with drainage..... "
4	Fibroid uterus.....	Hysterectomy.....	"
1	" " with double chronic salpingitis.....	Supravaginal hysterectomy with double salpingectomy.....	"
1	Fibroid uterus, cystic... ovaries, and chronic catarrhal appendicitis.....	Supravaginal hysterectomy, double oophorectomy and appendectomy.....	"
1	Fibroid uterus, chronic left cystic ovary, chronic salpingitis, with chronic catarrhal appendicitis.....	Supravaginal hysterectomy, left salpingo- oophorectomy, and appendectomy.....	"
1	Fibroid uterus, left cystic ovary and left chronic salpingitis.....	Supravaginal hysterectomy and left salpingo- oophorectomy.....	Recovered
2	Fibroid uterus, double chronic salpingitis and oophoritis.....	Supravaginal hysterectomy and double salpingo- oophorectomy.....	"
1	Fibroid uterus, double salpinx, and chronic catarrhal appendicitis.....	Supravaginal hysterectomy with double salpingectomy and appendectomy.....	"
1	Fibroid uterus, chronic salpingitis and oophoritis.....	Supravaginal hysterectomy and double salpingo- oophorectomy.....	"
1	Fibroid uterus, chronic right and left salpingitis, left oophoritis and chronic catarrhal appendicitis.....	Supravaginal hysterectomy, double salpingectomy, left oophorectomy and appendectomy.....	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
1	Fibroid uterus, left salpingitis, left cystic ovary.....	Supravaginal hysterectomy and left salpingo-oophorectomy.....	Recovered
1	Right ovarian fibroma.....	" with removal of ovarian fibroma and resection of adherent gut.....	Died
2	Empyema of gall bladder...	Cholecystectomy.....	Recovered
3	Acute cholelithiasis with chronic catarrhal appendicitis.....	" and appendectomy.....	"
1	Acute cholecystitis with chronic catarrhal appendicitis.....	Cholecystectomy with drainage and appendectomy.....	"
3	Chronic cholecystitis and chronic catarrhal appendicitis.....	Cholecystectomy with drainage and appendectomy.....	"
1	Chronic cholelithiasis.....	Cholecystectomy with drainage....	"

There were two births at the institution during the year:

Patient (colored) admitted January 26, 1929; male child born August 23, 1929. Child removed from hospital by husband of patient on September 10, 1929.

Patient (colored) admitted March 26, 1930. Female child born April 1, 1930. Child was illegitimate and was removed on May 9, 1930 by the Overseer of the Poor from the mother's home district.

Three patients succeeded in committing suicide during the year. On January 4, a male patient was observed by the attendant to be engaged in polishing the floor of the ward. Ten minutes later he was found dead by hanging, having fastened his coat to the window bars and around his neck. Efforts to resuscitate him were fruitless.

On January 18, two attendants had a group of male patients out walking. A heavy truck came along the road and the attendants drew their patients to the side out of danger. As the truck passed, one of the patients without warning threw himself in front of the wheel which passed over his body. The vehicle was proceeding so slowly, that it was stopped before the rear wheel reached the man. He died immediately, however, having a complete fracture of the spine and other injuries with internal hemorrhage.

On March 1, a woman patient was observed to leave the dining

room after dinner to return to the day room. Fifteen minutes later she was found dead by strangulation, having fastened a small string to the top hinge of the door between bathroom and dressing room and then around her neck. In all cases a thorough investigation of the circumstances was made by the coroner.

GYNECOLOGICAL DIVISION

In this division the same system has been followed as last year. A woman physician, Dr. Margaret Douglas, has been assigned to full time duty, with a graduate nurse as assistant. Somewhat more space for the work has been provided in the course of the remodeling of the Clinic Building. Each woman patient has been given an examination soon after admission, and any diseased condition has either been placed under local treatment or referred to the surgical division. Patients and employees have also been sent to this section by other physicians of the institution for examination and treatment. Dr. Douglas has submitted the following statement as to the work covered this year:

EXAMINATIONS

New admissions.....	512
Referred patients.....	49
Employees.....	203
Total.....	764

TREATMENTS

Total number of treatments.....	3,827
Cases referred for surgical consultation.....	89

SMEARS

Number of smears, cervical and vaginal.....	518
Number positive for Neisserian diplococci.....	5

Five patients were pregnant on admission to the hospital; of these, three were returned to their homes before delivery, and the other two gave birth to living infants, as reported in the surgical division. Of the operations listed in that section, twenty-two were recommended by the gynecologist.

EYE, EAR, NOSE AND THROAT DIVISION

Like the other medical and treatment divisions of the institution, this section has worked under a handicap during the past year. For much of the time the work was carried on in a temporary office in the basement of the Reception Building, where the surroundings were not ideal. The new quarters in the Clinic Building are now occupied and are well adapted to the work. The area is divided into small rooms by means of partitions high enough to provide privacy, but permitting a free circulation of air and also admitting light through sections of chipped glass. A special room from which light can be excluded is provided for eye examinations. There is an office for the physician, another for the nurse, a waiting room for patients, and a series of examining and treatment rooms, all well equipped with furniture, instruments and supplies.

The work has been continued as for six years past, under the competent direction of Dr. P. J. Gambill, and results have been uniformly successful. Routine examinations have been made of all newly admitted patients, and resident patients and employees have been referred to the division by other physicians. Dr. Gambill has handed me a detailed report of the year's activities in his section which I have summarized as follows:

EXAMINATIONS

Patients:	Ear	Eye	Nose	Throat	Total
Routine.....	1,082	1,082	1,082	1,082	4,328
Special.....	209	189	218	254	870
Employees:					
Special.....	45	38	29	96	208
Total.....	1,336	1,309	1,329	1,432	5,406
Eye:					
Number treated.....	426	82		508	
Number treatments.....		761	119		880
Ear:					
Number treated.....	328	51		379	
Number treatments.....		1,042	103		1,145

EXAMINATIONS (Continued)

	<i>Patients</i>	<i>Employees</i>	<i>Total</i>
Nose:			
Number treated.....	430	41	471
Number treatments.....	1,626	91	1,717
Throat:			
Number treated.....	137	79	216
Number treatments.....	377	186	563
Total:			
Number treated.....	1,321	253	1,574
Number treatments.....	3,806	499	4,305

SURGICAL OPERATIONS

Operation Performed:	<i>Patients</i>	<i>Employees</i>	<i>Total</i>
Adenoidectomies, general anesthesia.....	..	1	1
Cataract extractions.....	10	..	10
Ethmoidotomies.....	11	..	11
Enlargement naso frontal duct.....	8	..	8
Incision and drainage peritonsillar abscess.....	3	3	6
Intra nasal antrum window.....	..	2	2
Iridectomies.....	12	..	12
Mastoidectomies.....	1	..	1
Myringotomies.....	14	4	18
Radical antrum (modified).....	9	..	9
Removal aural polyps.....	11	3	14
Removal nasal polyps.....	9	3	12
Removal chalazion from eyelid.....	4	..	4
Removal lingual tonsil.....	6	..	6
Repair of broken nose, partial removal of lateral nasal bone.....	1	..	1
Sphenoidotomies.....	10	..	10
Submucous resection of septum, local anesthesia.....	2	..	2
Tonsillectomies, general anesthesia.....	44	1	45
Turbinectomies (anterior).....	8	..	8
Total operations performed.....	163	17	180

DENTAL DIVISION

In line with our program of a complete physical survey of incoming patients each individual on admission has been given a

dental examination and then a chart of all findings with recommendations for treatment has been placed in the case record. An estimate of the cost of necessary dental work has been sent to the correspondent in each case, and where payment could be made a nominal amount was collected. In case there were no relatives able or willing to pay, the work was done gratis, in order that the best interests of the patient might be served, irrespective of financial status. The amount collected this year totaled \$1,923.

The division has continued to be under the direction of Dr. T. R. Palmer, who has shown great interest in the work. In September the assistant resident dentist, Dr. Arthur W. Von Deilen, resigned and in January Dr. H. E. Thompson, who had been acting as dental interné, was appointed to the vacant position. Two other dental internes have been added to the staff during the year, Dr. Paul M. Hart in August, and Dr. John A. McCluskey in January. Mr. P. R. De Napoly has continued as mechanical dentist and a nurse has been regularly assigned to the division. Dr. F. C. Bartleman, who was resident dentist at the institution some years ago and is now a highly successful dental surgeon in Newark, has been retained on our consulting staff and has visited the institution weekly.

Dr. Palmer has submitted a detailed report of the activities in this section, which I herewith incorporate in a somewhat condensed form:

"There have been a number of changes in the Dental Division during the past year, but on the whole a very considerable increase in the amount of treatment rendered to patients. On October 13, 1929, we opened the dental offices in the Clinic Building and closed the former rooms in the Dormitory Building. The new quarters are well arranged and well lighted. There is an office, a supply room, a laboratory and an operating and treatment room large enough to permit of three chairs being constantly in use. All new equipment purchased has been of excellent quality and properly adapted to the needs of the work as conducted in an institution, and the division as a whole is in much better shape than previously. Permission to use dental in-

ternes as provided by an act of legislation has been a decided advantage to us. Two have been employed and have devoted a large part of their time to oral prophylaxis, which has made it possible to place many more mouths in a sanitary and comfortable condition. In addition to the dental care of each newly admitted patient we have nearly completed a survey of all patients resident in the institution; this has included a thorough examination, removal of all septic teeth, filling all carious teeth, oral prophylaxis, and such replacements as the physical and mental condition of the patient permitted. Each case has been taken up with the ward physician for his opinion in regard to the degree of dental treatment advisable.

The list of work accomplished shows a considerable decrease in the number of extractions as compared with last year. This is due to the fact that in 1928-1929 the entire resident population was given a dental inspection for the first time in years, and so far as possible every septic tooth was removed. Such a great proportionate number of extractions should never be required again.

On the other hand, the report for this year shows an increase in all other classes of work, especially fillings and prophylaxis.

A number of practicing dentists have visited the hospital clinic during the year, and on March 19, 1930, a meeting of the Tri-County Dental Association was held at the institution for which demonstrations were given by Dr. Bartleman, and members of the resident staff.

EXAMINATIONS

New patients.....	1,082
Survey, ward patients.....	1,563
Total.....	2,645

TREATMENTS

Dental treatments given.....	7,999
Oral prophylaxis.....	1,462
Vincent's infection.....	63
	<hr/>
	9,524

FILLINGS

Gold.....	111
Amalgam.....	1,293
Silicate enamel.....	850
Oxphosphate zinc cement.....	424
	<hr/>
	2,678

EXODONTIA AND ORAL SURGERY

Extractions.....	4,305
Impactions removed.....	147
Cysts removed.....	8
Osteoma removed.....	1
Fractured mandible, reduced and splinted.....	1
Fractured maxilla, reduced and splinted.....	1

REPLACEMENTS

Full dentures.....	127
Partial dentures.....	9
Partial dentures with gold clasps.....	51
Partial dentures with gold clasps and lingual bar.....	9
	<hr/>
Total dentures.....	196
Bridges, fixed and removable.....	22
Dentures repaired.....	99

As usual, the Dental Division has given treatment to the wards of the Morris County Children's Home during the past year. The following work has been done for these children:

Treatments.....	90
Extractions.....	40
Fillings:	
Amalgam.....	42
Cement.....	32
	<hr/>
Total fillings.....	74

PATHOLOGICAL DIVISION

Each year finds more calls made upon the pathological division until a considerable percentage of the diagnostic work and more

of the treatment prescriptions have come to depend upon the laboratory findings. Sometimes I feel that such dependence is rather bad for young physicians, since it tends to replace to a large degree the powers of observation which are most in need of cultivation, but in any case the necessity of a rapid, adequate and reliable laboratory service is paramount. Dr. Thomas B. Christian has been in charge of this division for nine years and has steadily expanded the personnel and equipment to meet the growing requirements of the institution and has also kept abreast of current developments in his speciality. He has submitted the following report of the year's activities:

"The laboratory has continued its routine work according to the same schedule as last year. This has comprised complete urinalyses, complete blood counts, complete blood chemistry, Wasserman and Hecht-Gradwohl tests, and quantitative determination of the calcium content of the blood for all newly admitted patients, with cervical and vaginal smears from female patients and urethral smears from males. Other work has been requisitioned by the physicians in charge of the patients, consisting of miscellaneous tests and repetitions of routine procedure, and still other general examinations have been made of hospital supplies, such as milk and water.

We have continued treatment of all cases in the hospital showing physical, clinical, or laboratory signs of syphilis. Wherever permission has been obtained, malarial inoculations were given; if unsuccessful in producing the characteristic symptoms of the disease after repeated inoculations, intravenous inoculations of typhoid were substituted. The drugs used in the treatment of syphilitic patients were neoarsphenamine, sulphursphenamine, intramuscular and intravenous mercury and bismuth compounds, sodium iodide and tryparsamide.

The routine of the average case of general paralysis coming to the hospital has been as follows: As soon as diagnosis was made, we immediately sent out blanks to the nearest relatives requesting permission to give malarial treatment. During the interval before the signed permit was returned, the patient was given anti-syphilitic treatment, or if his general condition was poor, re-

constructive tonics to build him up. If permission was obtained, we inoculated the patient and kept him on malarial treatment from three to eight weeks, depending upon his general condition and reactions. At the termination of the malarial treatment a complete examination of the blood and spinal fluid was made, with blood counts and urinalysis. He was then given quinine sulphate and iron and arsenic tonics. If anemic he was given intravenous injections of iron and arsenic. When his physical condition became good his treatment was resumed in the form of weekly injections of varying doses of tryparsamide. We have given from 1 to 6 grams of tryparsamide a week, depending upon the reaction of the patient, and continuing the treatment for long periods of time. With this schedule, we have had very good success; many patients have been returned to their homes on visit, others paroled about the grounds and still others are up and about the wards in good condition.

The following tabulation shows the number of treatments during the year:

	Male	Female	Total
No. of cases under treatment	103	33	136
No. doses neo-arsphenamine administered	880	358	1,238
No. doses mercury and other drugs administered	1,182	483	1,665

A free clinic for venereal diseases for those not patients in this hospital has been maintained. It has been open to all indigent persons in the hospital district and has been held every Friday from 2:00 p. m. to 4:30 p. m. The patient in order to receive treatment must have been referred by a physician and be an indigent person. All drugs used in this clinic such as neo-arsphenamine and mercury, and the apparatus have been furnished by the United States Public Health Service.

The following gives a summary of the work this year:

CASES TREATED	Male	Female	Total
Syphilis	172	91	263
Gonorrhoea	131	47	178
Chancroid	22	9	31
Total	325	147	472

In the tabulation of work done during the year, a slight reduction in the grand totals from those of last year may be noted;

most of the tests have increased in number, but last year 12,000 doses of typhoid vaccine were included since all the patients resident in the institution were given immunizing treatment at that time, while this year the number of doses of vaccine made up was only 290. The summary of the work for the year is as follows:

URINE	Male	Female	Total
Chemical and microscopical	2,777	2,494	5,271
Quantitative for albumin	694	752	1,446
Quantitative for sugar	175	623	798
Quantitative for chlorides	32	29	61
Cultures for types of bacteria	42	36	78
Microscopical examination of stained smears	64	40	104
Phenolsulphonephthalein functional tests	22	18	40
Positive casts	552	791	1,343
BLOOD:			
Enumeration of red blood cells	705	782	1,487
Enumeration of white blood cells	1,094	1,091	2,185
Estimation of hemoglobin	161	195	356
Differential leukocyte counts	1,094	1,091	2,185
Examination for plasmodium malaria	162	120	282
Widal tests	7	8	15
Cultures	7	6	13
Examination for pneumococcus	18	12	30
Determination for blood groups	210	209	419
Sugar	744	918	1,662
Non-protein nitrogen	791	890	1,681
Urea-nitrogen	803	892	1,695
Creatinine	797	887	1,684
Uric acid	21	16	37
Cholesterol	18	15	33
Chlorides	12	6	18
Total nitrogen	9	4	13
Tests for CO ₂ in the blood	6	3	9
Calciums	553	511	1,064
Wasserman tests	1,572	1,079	2,651
Hecht-Weinberg-Gradwohl tests	1,572	1,079	2,651
Estimations of coagulation time	15	18	33
Color index	27	44	71
SPINAL FLUID:			
Wasserman tests	625	178	803
Cell counts	625	178	803
Globulin	625	178	803
Protein	625	178	803
Collodial gold curve	625	178	803

SPINAL FLUID: (Continued)			
Microscopical examination of stained smears	46	27	73
Cultures	22	16	38
Quantitative sugar estimations	622	175	797
Quantitative chlorides	6	2	8
Non-protein nitrogen	4	3	7
Urea nitrogen	6	4	10
Creatinine	6	4	10
SPUTUM:			
For tubercle Bacilli	84	21	105
For bacterial flora	36	18	54
Cultures	18	12	30
For types of pneumococci	16	9	25
FECES:			
For parasitic organisms	36	27	63
For tubercle bacilli	29	19	48
For typhoid bacilli	16	14	30
For bacterial flora	34	10	44
For occult blood	61	42	103
SMEARS:			
For gonococci	772	588	1,360
For treponema pallidum	19	10	29
From diphtheriae cultures	71	64	135
From eyes	30	16	46
From pus from ears	14	11	25
From pus from wounds	22	16	38
Examinations of gums for Vincent's angina	170	19	189
Examination of throat for Vincent's angina	46	51	97
STOMACH CONTENTS:			
Total acidity	27	20	47
Free HCl	27	20	47
Combined HCl	27	20	47
Salts	27	20	47
For Oppler Boas bacillus	20	16	36
Cultures	16	14	30
Occult Blood	29	21	50
MISCELLANEOUS:			
Patients inoculated with plasmodium malaria	51	16	67
Autogenous vaccines	8	4	12
Cultures from teeth	2	2	4
Examination of granulomas	7	4	11
Basal metabolism estimations	15	28	43
Sugar tolerance tests	9	2	11
Examinations of tissues	176	289	465
Autopsies	12	18	30
Typhoid vaccine (doses)	150	140	290
Total number	20,670	17,361	38,031

WATER:	
For colon bacilli	42
For typhoid bacilli	12
Bacterial counts	42
Quantitative chlorine estimations	6
MILK:	
Specific gravity	90
Fat contents	92
Total solids	90
Proteids	60
Sugar	60
Bacterial counts	92
Total number	586
Grand Total	<u>38,617</u>

ROENTGENOLOGY AND ELECTROTHERAPEUTICS

Dr. George R. Hampton, senior physician of the hospital in length of service, has been on the staff for over twenty years and during a great part of that time has been in charge of the X-ray and electrotherapeutic work. As the equipment has been increased and new discoveries have widened the possibilities for usefulness in this field, Dr. Hampton has taken courses with leading physicians in order to familiarize himself with the requisite technique for prescribing and administering treatments and for making plates and films and interpreting them properly. The remodeling of the Clinic Building has provided this division with excellent treatment facilities. The equipment of alpine lamps and diathermy machines has been increased and a series of cubicles arranged; these are fitted with cots and are screened at the sides for privacy, so that a series of treatments can be given simultaneously under the observation of the technician and physician. The X-ray facilities have also been improved and a dark room and laboratory have been provided adjacent to the exposure room.

The work this year has progressed along lines previously laid down, but has expanded in scope and increased in amount to meet the current requirements. Dr. Hampton has submitted a brief and clear-cut report which I have incorporated verbatim:

"Last October the new electro-therapeutic room was completed

and since then has been in daily use. This was a much needed improvement, as formerly there was not sufficient room to accommodate all the patients sent for treatment and the electrical apparatus was insufficient.

During the year nearly twice the number of electrical treatments were given as compared with previous years. In most of the cases treated, satisfactory results were noted, but especially so with patients suffering from secondary anemia, who were treated by means of the ultra violet ray. A large series of patients whose blood picture showed a low calcium content, was also treated by this method. In each case a regularly weekly examination of the blood was made and a steady increase of calcium in the blood was shown, together with a corresponding improvement in the general physical health.

The X-ray room has functioned to its capacity during the last twelve months. The use of the flammable type of X-ray films has been discontinued and the old films that had accumulated for a number of years, were destroyed. At present only the safety type of films are used. The following is a list of work done during the past year:

ROENTGENOGRAPHY

Exposures:

Head.....	471
Maxilla.....	1757
Chest.....	453
Abdomen (Barium meal).....	156
Hip.....	37
Spine.....	34
Pelvis.....	3
Upper extremity.....	356
Lower extremity.....	171
Teeth (Films).....	46
Total Exposures.....	3484

Diagnoses:

Fractures—	
Skull.....	6
Mandible.....	8
Nasal Bone.....	1
Scapula.....	1

Fractures—Continued

Clavicle.....	1
Rib.....	9
Humerus.....	8
Radius.....	19
Ulna.....	7
Phalange.....	14
Pelvis.....	1
Femur.....	19
Tibia.....	6
Fibula.....	4
Metatarsal.....	2
<i>Dislocations:</i>	
Humerus.....	3
Metacarpal Bone.....	1
<i>Osteomyelitis:</i>	
Vertebra.....	1
Humerus.....	2
Mandible.....	2
Phalange.....	1
<i>Foreign Bodies:</i>	
Stomach—penny.....	2
Colon—hair pin.....	2
Trachea—peach stone.....	1
Hand—needle.....	2
<i>Chest :</i>	
Pulmonary tuberculosis (Acute).....	72
Pulmonary tuberculosis (Chronic).....	91
Bronchitis.....	6
Pleurisy with effusion.....	13
Bronchiectasis.....	2
Aortic aneurysms.....	4
Cardiac hypertrophy.....	9
Carcinoma of lung.....	1
<i>Abdomen:</i>	
Appendicitis.....	4
Duodenal adhesions.....	10
Colonic hypomotility.....	5
Elongated colon.....	8
Intestinal ptosis.....	12
Pelvic tumor.....	9
Pregnancy.....	5
Gall stones.....	4
Kidney stones.....	2
Ulcers of stomach.....	2

Teeth:

Impactions	136
Periapical abscesses	62
Septic roots	99
Pyorrhea	111
Cyst	7

Miscellaneous:

Mastoiditis.....	6
Sinusitis (Antrum)	14
Brain Tumor.....	1
Curvature of spine	8
Arthritis.....	12
Patella Bursa	2

Electro-Therapeutic and X-ray Treatments:

High frequency current	2,637
Galvanic and sinusoidal currents	90
Vacuum electrode.....	531
Ultra violet rays.....	1,016
Diathermia	292
Infra red rays	13
Static head breeze.....	254
Static spark.....	25
X-rays	28

Total treatments 4,886

OCCUPATIONAL THERAPY DIVISION

Dr. George B. McMurray, senior assistant physician, has been in charge of the work in the occupational therapy almost from its inception in this hospital, having taken over supervision of the division in 1916. Under his direction it has grown from a small experimental feature until it has become one of the outstanding sections of the institution and a prime factor in effecting the curative treatment of patients. During the past year a creditable increase has been shown, both in the number of patients under treatment and in the articles produced. Although many of the things made in this division are for sale, the primary purpose of the work is to benefit the individual patients, and for this reason we have refused all offers of contracts with dealers. We have never felt that we could guarantee for any specified time that a

certain number of patients would be in condition to receive the most good from engaging in a particular activity. In all cases, a consistent effort has been made to find a special line of work best adapted to the needs of the individual; then his reactions have been observed closely, and he has either been encouraged to continue, or else changed to some other type as might be indicated.

Dr. McMurray has submitted the following report:

"The two chief sections of the Occupational Therapy Division are the work conducted in large groups and special buildings outside the wards, and that carried on in the curative workrooms located either on or adjacent to the wards themselves. The first section is sub-divided into Men's Arts and Crafts, in the new Occupational Therapy Building; Women's Arts and Crafts and Printing and Bookbinding, in the old Industrial Building; and Concrete Block Industry, in a special building adapted for the purpose. A new occupational therapy building for women, similar in construction to the one for men, is now being erected and it is hoped that it will be completed and ready for service in the early spring. The one now in use has proved very satisfactory and has attracted the attention of people interested in this work throughout the country.

During the year exhibitions and sales were held at various places, among them one at the home of Mrs. Garrison of the Board of Managers, one on Field Day at the institution, one at the Interstate Health and Pure Food Exhibit, Trenton, one by the Women's Civic Association of Morristown, and others at the Flemington Fair, the Sussex County Fair and the Trenton State Fair. All of these were planned primarily to educate the public as to the work being done for and by the patients, although sales were made and orders taken as requested. Talks describing occupational therapy, how it is conducted, and its results have been given during the year by Dr. McMurray before a number of organizations, among which were the Chamber of Commerce, the Kiwanis Club, and the Parent-Teachers' Association of Morristown, the Kiwanis Club of Kearny, the Rotary Club of Hoboken, and the faculty and students of Upsala College.

As we have continued to grow willow for use in basket and

furniture making, the patients have been engaged in the willow holt from time to time, according to the season. The willows have been cut, stripped and stored; the holt has been replanted and extensively cultivated. This work, as well as other seasonal and minor activities, has not been included in the following list, which shows what has been done in the different sub-divisions of the Occupational Therapy Division during the past year:

MEN'S ARTS AND CRAFTS

<i>Willow—</i>	
Chairs.....	8
Settees.....	2
Fergeries.....	43
Hampers.....	61
Wash baskets.....	46
Fireside baskets.....	13
Scrap and waste baskets.....	299
Cut flower baskets.....	113
Dog and cat baskets.....	10
Total articles of willow.....	595
<i>Reed—</i>	
Flower baskets.....	947
Other fancy baskets.....	239
Sewing and work baskets.....	29
Melon baskets.....	288
Wood baskets.....	46
Bassinets.....	1
Lamp shades.....	17
Fergeries.....	55
Vases.....	145
School baskets.....	34
Total articles of reed.....	1801
<i>Toys—</i>	
Boats and automobiles.....	159
Animals and miscellaneous toys.....	391
Wheel barrows.....	7
Toy chairs, cribs, etc.....	167
Total toys.....	724
<i>Carpentry—</i>	
Tables, tip-top, radio, end, fern, etc.....	65
Hat stands, costumers.....	156
Book racks.....	9
Scrub brushes.....	787
Total carpentry articles.....	1017

Brooms—

Regular	2639
Whisk	348
Hearth	322
Total brooms	3309

Textiles—

Loom rugs	896
Loom runners	31
Tied rugs	21
Burlap rugs	2
Hooked rugs	57
Table covers	15
Cocoa fibre mats	66
Total textile articles	1088

Repairs—

Chairs caned	589
Chairs repaired	44
Total articles made and repaired	633

Total articles made and repaired 9167

WOMEN'S ARTS AND CRAFTS

Fancy Work—

Braided rugs	164
Hooked rugs	174
Crocheted rugs	4
Articles of raffia	7
Miscellaneous	1948
Total articles made	2297

Plain Sewing—

Sheets, single	4612
Sheets, double	984
Pillow cases	3866
Towels, hand	4798
Towels, dish	3935
Towels, barber and office	520
Aprons, kitchen	1212
Table cloths	172
Bureau scarfs	122
Bags, laundry and ward	380
Bags, coffee	547
Bags, tea	186
Bags, sand	12
Night dresses	3076
Night shirts	330

Plain Sewing—

Petticoats	96
Drawers	1,812
Strong dresses	144
Burial suits	613
Covered pads	679
Covers—Operating Room	12
Hamper bags	7
Slip skirts	696
Slips	504
Binders, breast	12
Caps for Operating room	22
Ether jackets	12
Laparotomy sheets	12
Draw sheets	45
Abdominal binders	84
Screen cover sets for operating room	18
Chemises	630
Outing flannel boots for operating room	20
Outing flannel petticoats	1,548
Patient's waitress aprons	36
Repair jobs, mending, marking, etc.	345
Total articles made and repaired	32,099

PRINTING AND BOOKBINDING

Ruling impressions	537,270
Printing impressions	1,301,832
Total impressions	1,839,102
Binding and stitching	10,915
Pads made up	4,365

CONCRETE BLOCK INDUSTRY

Concrete and cinder blocks have been manufactured as needed at the institution for the different buildings under construction during the year.

CURATIVE WORKROOMS

The forms of occupational therapy carried on in the wards are especially designed for patients who are not able to go to the occupational buildings, either because they have recently come to the institution and are still undergoing examinations at frequent intervals, or because their physical or mental condition is such that

they can be treated to better advantage on the wards or in near-by workrooms. During the past year this work has been under the direction of Miss Stella A. McClurkin, who was acting director at the beginning of the period and promoted to the position of director in December. Miss McClurkin has submitted the following data for this subdivision:

"The employees at the close of the year in this section were 4 trained occupational therapists and 14 partly trained assistants. The largest number of classes held per day was 38; the average enrollment of patients in all classes was 917, and the total number under treatment by prescription during the year was 1,390; of this number, 700 were new patients, sent in by their physicians. The total attendance for the year, reckoned on a monthly basis, was 11,002. The number of articles completed for sale was 1,794; certain pieces of equipment were also made for the wards, the Occupational Therapy Division, and for general hospital use, and 1,650 articles were completed for the use of patients, being made chiefly from waste material.

This sub-division co-operated in the exhibitions and sales listed above and also in two sales held by the Women's Exchange in Morristown. Additional exhibits were sent to a meeting of the New Jersey State Hospital Association and to the meetings of the State Occupational Therapy Association at Newark and Atlantic City. The curative workroom staff was represented at the quarterly and annual meetings of the New Jersey Occupational Therapy Association, and at three executive committee meetings of the Association. Christmas parties were held for all patients engaged in class work, and nurses and attendants regularly caring for these patients were also invited. Four classes of affiliate nurses were given the twenty-hour course in occupational therapy during the year."

PHYSICAL EDUCATION DIVISION

Work in the Physical Education Division has been continued throughout the year and a special effort has been made to arouse and interest those patients who were less responsive to external stimuli. In the arrangement of classes this division has endeav-

ored to co-operate with the instructors in the curative workrooms in order to provide varied activities without conflict in time. The work has been under the supervision of Miss Beatrice M. Ford, who has been in charge of the division since July, 1927.

During the year there have been six appointments and nine resignations among the assistant instructors, and the staff now consists of seven female teachers and one male, beside the director. All teachers engaged for permanent duty must be graduates of high school and also of the physical education department of an approved normal school or teachers' college. Miss Ford has submitted the following report of the year's work:

"The greater number of classes have been held in the rear wards of the Main Building, both on the North and South sides. The classes on the women's side have met for one-half hour in the morning and from one-half to three-quarters of an hour in the afternoon. They have been conducted by two teachers and included progressive instruction in marching, calisthenics, folk and social dancing, and games. On the North Side the work was new and much time had to be spent in an effort to organize classes and interest the patients. The one instructor worked with the patients in the yards, first with games and later with more formal drills.

At the Dormitory Building singing and other music, reading and story telling have been provided for the bed patients, while suitable games were arranged for those who were up and about. For the more active patients, walking parties were substituted for indoor games whenever possible. At the Clinic Building, lack of adequate space made it inadvisable to hold classes on the wards, but when the men were on the lawn the instructor led them in simple games. At the Reception Building, the women's dancing class was continued for three mornings a week throughout the summer, and a bowling class for men met once a week during the winter. Bowling has also been popular with the women patients of the different buildings and five classes were held each week during the season. Throughout July, August and September, special classes were in session in preparation for the exhibition to be given at the annual Field Day, September 21. Fifty-eight

women and sixty-two men took part in the exhibitions, which included drills and dancing in costume, with a tumbling act for men as a special feature. In the spring a group of patients were coached for a minstrel show which was given on May 23.

Parties have been arranged each month for the more orderly patients from all buildings, usually to observe some holiday. In the spring and summer these affairs were held on the lawn, while in winter the Dormitory Amusement Hall was decorated for each occasion. Refreshments were served and music was furnished by the hospital orchestra. The parties on Hallowe'en, Christmas Eve and St. Patrick's Day were especially noteworthy. Other smaller parties have been held monthly on the wards and have always been of great interest to the patients.

The statistics of attendance at the activities for patients show a daily average of 754 in all classes—194 males and 560 females. The total attendance at parties for the year was 9,499—1,848 males and 7,651 females.

Mrs. How, Superintendent of Nurses, asked that some suitable recreation be arranged for the nurses and throughout the winter a period was set aside one evening a week. Frequently the nurses met in the bowling alley, occasionally in the Amusement Hall for folk dancing. Miss Ford also conducted four courses in physical education of ten sessions each for the student and affiliate nurses. The time was divided between instruction in corrective and therapeutic gymnastics and practical work in games and dancing. At the request of Dr. McMurray, the teacher of physical education for men has taken over the management of the employees' baseball games this year. A game has been scheduled for each Saturday afternoon."

SOCIAL SERVICE DIVISION

The employees in the social service group have to meet the highest educational requirements of any in the institution excepting the physicians. They must be college graduates who have taken special work in psychology or social sciences and have had additional training along social service or institutional lines, either in a school for social workers or in some other suitable institution.

After entering the service, they attend the course of lectures given by the Clinical Director for the instruction of physicians and other members of the staff. All newcomers are carefully supervised and trained by more experienced workers and the entire division is under the immediate control of the Clinical Director. In addition to the educational qualifications, definite personality requirements must be met, for it is absolutely necessary that the psychiatric social worker possess tact, discretion, common sense, and ability to cooperate with physicians and other workers as well as with the patients and their families.

The reason for such high standards in this particular group is that upon the social service workers fall the exacting duties of assisting the patient to adjust in the community and of observing any dangerous symptoms that may arise during this period of adjustment promptly enough to institute proper measures to serve the best interests of the patient and the community. The social workers also are required to obtain for the physicians a variety of information from many sources and the authoritative value of this data necessarily is largely dependent upon the judgment and training of the person transmitting it. In the performance of their duties it is necessary for them to make many contacts with individuals and organizations in the hospital district; frequently the manner in which these contacts are made determines the reactions of that particular person or group to the state hospital and even to the state institutional service as a whole.

At the beginning of the fiscal year, the two groups of social workers in the institution were definitely separated into the parole or hospital division and the mental hygiene clinic division. Miss Mildred H. Hurley who had been in charge of all social service work since it was started in January, 1923, became director of social service for the mental hygiene clinics, and Miss Phyllis F. Pointon who had been assistant to Miss Hurley since November 1, 1923, was on July 16th appointed director of the hospital division. The work has shown no interruption from this change. Miss Pointon has submitted the following report of activities in the hospital division:

"In addition to the change in directors, there have been two

resignations and two appointments on the social service staff during the year. At the present time the personnel comprises the director, the historian and five psychiatric workers.

During this period 5181 visits were made in the community regarding patients on trial visit and in the hospital; visits to the homes of patients under consideration for trial visit were made in 297 cases for the purpose of presenting the environmental factors to the medical staff as well as to assist the family in planning for the patient's future.

Sixty-seven special investigations were made for the following reasons: 5 to obtain additional information regarding the patient's life and environment prior to admission; 6 to determine the advisability of allowing certain patients to leave the hospital; 1 to find a home for trial visit patient who could no longer live with her relatives; 5 to locate patient's property or to locate and obtain their clothing; 4 to obtain data necessary for the transfer of patients to other institutions in the state; 5 to arrange for railroad transportation of non-resident patients being transferred to other states; 6 to investigate the home situation or alleged conduct of patients on trial visit; 1 to make all arrangements for an ill employee to return to her home in the south; 2 in the local community at the request of outside and distant agencies; 1 to determine a hospital patient's legal residence; 1 to locate the relatives of patient about whom practically nothing was known; 8 to investigate the whereabouts of escaped patients and to arrange for their return to the hospital; 1 to find a home for an illegitimate baby born shortly after the mother's admission here; and 21 to find homes for recovered patients who were in need of such assistance.

The Division was instrumental in the removal of 41 recovered patients who were referred by the medical staff and who either were friendless or who had no one sufficiently interested in them to initiate proceedings for their release. Of this number boarding homes or homes with friends were found for 14; 3 were placed in the Alms houses; 3 were sent to relatives in other states and 1 through the assistance of the British Consul General was returned to his home in Newfoundland; of the remaining number,

12 were removed by friends or relatives by special arrangement; 5 who were non-resident or voluntary cases were assisted in reaching their respective destinations, and arrangements were made whereby 3 mentally defective patients who had recovered from their psychoses were transferred to the State School at Vineland. In addition to these arrangements have been made for the transfer of 11 similar cases as soon as room can be found for them in the institutions for the feeble-minded. Twenty-two patients on trial visit or members of their families were referred to outside social agencies for assistance; of these, 4 were referred for employment or financial help; 17 for medical aid and treatment; and in 1 case a child who was found in an unsuitable environment was reported to a child-caring agency.

Five hundred and sixty-two medical and social histories regarding newly admitted patients and 17 interim histories were obtained from 859 individuals. In the case of patients admitted to the hospital with a record of being friendless every effort was made to locate the family or friends. Medical and social summaries were obtained from other institutions where patients had received previous treatment.

At the request of the medical staff, 48 psychometric examinations were given to hospital patients. Office interviews to the number of 1,115 were held in regard to patients on trial visit or in the hospital; 60 were held in regard to hospital affairs; and 14 with hospital and trial visit patients. Two-hundred-sixty-five special visits were made to individual patients on the wards. The division was responsible for the arrangements made at frequent intervals for the examination of alien patients by the immigration officials from Ellis Island.

During the year Miss Pointon gave a one and one-half hour talk on the work of the social service division to each of the four group of affiliated nurses. Members of the staff attended the New Jersey State Conference of Social Work; the annual meeting of the orthopsychiatric conference, and meetings at the New York Academy of Medicine. The Director attended the First International Conference of Mental Hygiene, held at Washington in May. Representatives from other institutions in the state have

visited the division as well as college students and other persons interested in social service work.

The social service division has cooperated with outside social agencies in this and neighboring states, and in turn has received valuable assistance from these agencies and public officials. It wishes to extend its appreciation both to them and to the officers of this hospital for the many courtesies it has received.

MENTAL HYGIENE CLINICS

During the past twelve months work in the mental hygiene clinics has shown excellent progress under the direction of Dr. Earl W. Fuller, who was placed in charge near the end of the previous year. Dr. John H. Cassity, who had been assistant physician in this division, resigned on July 22, 1929. On November 1, Dr. Lindsay Robinson, who had returned in October from a leave of absence for study abroad, was made assistant to Dr. Fuller. Mr. Robert M. Beechley was appointed psychologist on October 1. In the social service section, Miss Mildred H. Hurley received the appointment of director on July 1; one worker engaged June 1, 1929, has continued in the work throughout the year and two others were appointed September and one in October. All are finely equipped by training, and temperament for this particular field.

A report sufficiently detailed to full justice to the work accomplished this year would require many pages of printed matter, so I have been obliged reluctantly to omit many interesting features from this summary of the data submitted to me by Dr. Fuller.

One new clinic has been opened this year on April 8, 1930, at the Beth Israel Hospital in Newark. As it was felt that Newark was better supplied with clinic facilities than some other districts, this was established only after many requests had been received. The clinic held at the institution was discontinued early in the year because of poor attendance, although appointments for examinations at Greystone Park have been made when it was found impossible to see the patients at one of the regular clinics or when emergencies arose. The examination of patients at Totowa has been continued, but this is no longer classed as a clinic.

The total number of clinics held during the year was 194, divided as follows: Elizabeth, 23; Franklin, 12; Greystone Park, 5; Hackensack, 24; Jersey City 24; Morristown, 18; Newark, 7; Newton, 12; Passaic, 22; Paterson, 24; Plainfield, 23. The following table shows the attendance and examinations:

	Adults		Children & Adolescents		
	Male	Female	Male	Female	Total
Number of new patients	138	214	460	253	1065
Number of return patients.....	155	268	435	176	1034
Number of patients turned away..	11	21	44	21	97
Total number of patients at clinics.....	304	503	939	450	2196
Number of psychiatric examinations.....	278	458	722	336	1794
Number of psychological examinations.....	43	84	432	227	786

Patients were referred to these clinics by a wide variety of social agencies, including charity organizations, health boards, fraternal and religious societies, local officers, courts, schools, physicians and nurses. After examination a total of 192 cases were referred to institutions and agencies, including 61 to the state school for mental defectives, 17 to special classes, 14 to state hospital, and 10 to the state village for epileptics; 625 were referred to other clinics for the examination or treatment of physical conditions; among these were 143 to eye, ear, nose, and throat; 132 to pathological laboratory; 89 to general medical; 80 to X-ray, and 60 to dental.

In addition to the patients, a total of 3158 visits to the clinics were made by other persons. These included 1699 visits by friends and relatives of patients, 726 by social workers, 168 by physicians, 94 by visiting nurses, and 89 by probation officers.

The diagnoses were exceedingly varied and tabulated under fifty or more heads; included among these were 132 morons, 62 imbeciles, and 19 idiots, all of diverse types; 50 neuroses and psychoneuroses; 23 epileptics and about 35 with psychoses sufficiently well marked to be classified as such.

The clinic physicians during the year interviewed at the clinics 1626 persons in addition to the patients, held 63 special consultations with other physicians, examined 69 cases at Totowan in 16 visits, and held 63 special interviews in the community regarding

clinic patients; they gave 28 lectures including 9 to the affiliated nurses, 2 to the Muhlenberg hospital nurses, 5 to parent teacher associations, and 2 to medical societies; and they attended 4 conferences, including the First International Congress for Mental Hygiene at Washington, and visited 6 institutions.

The clinic social workers interviewed 4291 persons at the clinics, made 3589 visits in the community, and attended 46 professional meetings and conferences of various types. All of the social service staff attended 18 meetings of clinics conducted by the Graduate Fortnightly Group at the Academy of Medicine in New York City. The social workers visited 54 institutions during the year, including several orphanages and children's homes, state institutions, general hospitals and clinics, and homes and schools for delinquents. They gave 17 lectures during the year, of which 8 were for the affiliated nurses and 3 for parent-teacher associations.

The clinic psychologist made 624 psychological examinations at the clinics, held 164 special examinations and consultations at Totowa, and gave 127 psychological interviews, besides holding 10 special consultations in the community. He attended 5 conferences and conventions, and gave 7 lectures, 6 to nurses and one to the Rahway Mothers' Club.

The clinic staff sent out during the year a total of 4599 letters and reports regarding patients and clinic matters.

A very interesting tabulation of the work by months since the establishment of the clinics has been prepared, but space does not permit its incorporation here. I have summarized a few items for comparison, however, using only the figures for the previous year, since the number of patients then most closely approximated those examined this year: adult patients coming to the clinic for the first time showed an increase of 68%, while the increase in children and adolescent patients was only 10%; adult patients returning to the clinics increased 110%, while the child group decreased by 16½%. This I consider noteworthy in view of the facts that there are many more agencies for child help than for adults, and that the hospital is primarily interested in an immediate check to its admission rate and hence in clinic guidance which will enable adults with psychotic tendencies to adjust in the community.

A study was made of the persons examined in the clinics during the four years, not including the final month of this year, since most of those patients are still under consideration. A total of 2,964 individuals were checked; of these only 190, or 6.4 per cent., were in State institutions; these were grouped as follows. 40 entered Greystone Park; 51 entered Totowa; 26 entered New Lisbon; 9 entered Woodbine; 12 entered Skillman; 20 entered Vineland State School; 1 entered Vineland Training School; 2 entered Hudson County Hospital; 25 entered the State Home for Boys; 4 entered the State Home for Girls. Dr. Fuller remarks: "It is interesting to note that only 25 of the 190 in institutions were recommended by these clinics. We have found that in some cases patients are presented to the clinic purely with the hope of having institutional placement recommended for them. Some of these cases have been committed to institutions in spite of clinic recommendations and when the clinic considered them more suitable for care in the community." An analysis of the 190 commitments showed the following percentages: feeble-minded, 56.32; psychotic, 22.10; epileptic, 6.31; delinquent, 15.27.

In closing his report, Dr. Fuller called especial attention to the comparison of clinic activities this year with previous years, to the educational talks given by members of the clinic staff, to the number of different agencies with which contacts were made by the clinics, and to the low percentage of institutional commitments shown by clinic cases. He also referred to the excellent co-operation received from local welfare agencies, hospitals, dispensaries, and individuals in the clinic district.

The work of the clinics has grown steadily since the first one was opened in February, 1926, so that the demand in the community has constantly outstripped the capacity. The number of new patients reported at the clinics each year runs as follows: 1926 - 280; 1927 - 474; 1928 - 366; 1929 - 856; 1930 - 1,065. At present it is impossible to increase further the activities of the clinic staff, since all existing clinics are filled to the limits of the personnel, and, although several requests are on file, no more clinics can be opened without increasing the staff.

WARD EMPLOYEES AND SCHOOL OF NURSING

During the past year Mrs. Anne How has been in charge of the nursing service which has consisted of all nurses and attendants engaged in the ward care and treatment of patients, including the hydrotherapy section. The constant transferring of patients due to the reconstruction in progress in the Main Building has placed heavy additional duties upon the nursing force, and those belonging to the student and graduate group have been further inconvenienced by reconstruction work in the nurses' residence. The general morale has remained good, however, and Mrs. How has continued to carry her varied responsibilities in a manner which has resulted in smooth functioning of the entire service. This is no small achievement, since there are many possible sources of friction when attendants, male and female, graduate nurses, and student nurses of two types—regular and affiliate—all work together, not only under the direction of their supervisors and instructors; but also subject to the requirements of some twenty-five resident physicians. It is doubtful if such a complication of duties falls to any executive nurse outside a large mental hospital.

Mrs. How has submitted to me a lengthy report which I have condensed as follows: "The work of the school of nursing has progressed throughout the year. At present we have 18 students, of whom 6 are now taking the affiliate course at Orange Memorial Hospital. We have found a distinct advantage in having the entrance requirement graduation from a high school of good standing. There have been various changes in the teaching personnel during the year, but at all times the requirements of an accredited school have been satisfactorily met. A full time instructor and a full time dietitian have been maintained, and in addition a ward instructor and an instructor for the affiliate nurses; further teaching has been given by several other nurses, as well as by many physicians and heads of divisions on the hospital staff.

The affiliate course established last year has worked out very well, and during the year students have been received from the following schools:

Mercer Hospital, Trenton.....	17
Mountainside Hospital, Montclair.....	9
Orange Memorial Hospital, Orange.....	2
Newark Memorial Hospital, Newark.....	3
Jersey City Hospital, Jersey City.....	3

Owing to housing conditions at the institution, we have been forced to refuse affiliation with several schools which have requested it. We feel that it would be of interest to present here an outline of the course of instruction given to the affiliate students:

Anatomy of the nervous system.....	8-10 hrs.
Mental nursing history.....	8 "
Physical education.....	10 "
Occupational therapy.....	20 "
Mental nursing.....	18-20 "
Ward clinics.....	6 "
Neurology, physician's lectures.....	6 "
Neurology, nursing classes.....	6 "
Psychiatry, physician's lectures.....	12 "
Psychiatry, nursing classes.....	10 "
Staff conferences.....	5 "
Mental hygiene.....	15 "

The course in mental hygiene has been given by the clinic staff, physicians, psychologist, and five social service workers, each taking up a different phase of the subject and including such topics as child guidance, speech disorders, mental testing, and so on. Miss Kerley, a graduate of our school in the class of 1928, has directed and carried through the course for the affiliate nurses. This year, for the second time, she is to spend six weeks at Teachers' College, Columbia. Miss Hollingsworth, also of the class of 1928, has given the class work and demonstrations in hydrotherapy, as well as supervised the treatment for the patients in the Reception Building. This summer she is taking a course along this line at Battle Creek Sanitarium.

This year graduate nurses have been secured for night duty and the continuous baths have been in use 24 hours daily since November. It is felt that the nursing care of the patients has been improved by this feature, and also by the larger student body. As yet, however, we have not been able to extend student nurse care to all services where we feel it would be beneficial.

During the year there have been a number of visits paid to the institution by nursing groups and inspectors. On July 25, twelve members from the Visiting Nurse Association at Elizabeth came to the institution, were given a talk by Dr. Collins, after which they visited the wards, where they were shown types of psychoses and curative treatments. St. Joseph's Hospital, Paterson, Muhlenberg Hospital, Plainfield, and All Souls' Hospital, Morristown, each sent a group of nurses for a clinic and visit to the wards. Dr. Lane took charge of the instruction for these groups. Student nurses from Morristown Memorial Hospital have attended this year, as for several years past, the course of lectures given by Dr. Lane for our own student and affiliate nurses. An inspection of the school was made by Miss Florence Dakin, Educational Advisor of the New Jersey Board of Nurse Examiners, on October 17, to quote from her report, "with the most satisfactory results." She goes on to say: "All students admitted are high school graduates, for it has been demonstrated that it requires the highest type of young woman to become a successful mental nurse—special attention has been paid to activities when off duty, and there is a house mother who plans for these in the interest of the student—we feel sure that this school is graduating students fully equipped for the best kind of psychiatric nursing. Greystone Park is also running an affiliated school for psychiatric nursing, giving a course of three months. We are impressed by the importance of this addition to the training of students in a general hospital, and every effort will be made to establish such affiliation with all of our schools that are giving a three-year course."

During May, Miss Anna K. McGibbon, superintendent of Nurses at Butler Hospital, Providence, R. I., spent two days inspecting the school. Miss McGibbon has been engaged for the past few months in making an inspection for the Rockefeller Foundation of schools of nursing connected with mental hospitals.

On May 16, the New Jersey League of Nursing Education held its regular meeting in the class rooms of the Nurses' Residence, with the president, Miss Eva Caddy, presiding, Dr. Curry, Dr. Lane, Dr. Collins and Dr. Palmer spoke. In the evening the

instructors' section held a meeting with Miss Mary Dixon from Teachers' College, Columbia, as speaker.

During the year Mrs. How attended various conferences, the most important being the First International Congress for Mental Hygiene in Washington, and the biennial convention of the American Nurses Association, held at Milwaukee, Wisconsin. At this latter meeting she presented a short paper on Mental Hospital Affiliations for General Hospital students.

Mrs. How gives the following figures for the number of graduate nurses and attendants in service on June 30: Graduate nurses, female 54, male 6, total 60; attendants, female 158, male 214, total 372. This is slightly lower than the numbers shown in the statistical tables, since Mrs. How reports only those engaged in ward duty and teaching and supervising positions, while the total in Table 1 includes all listed under this classification, whether assigned to ward duty or to work in the Occupational Therapy Division, in charge of patients engaged on the grounds and in other outside occupations, or in various similar positions throughout the institution.

STAFF MATTERS

The number of physicians on the medical staff is about the same as a year ago, although numerous changes have been made during the twelve month period. In October, two of the younger men, Dr. Baker and Dr. Robinson, who had been given brief leave of absence for study abroad, returned to the institution; Dr. Baker was placed on regular duty, while Dr. Robinson was made assistant in the mental hygiene clinics. There have been eight appointments and ten resignations during the year.

Two men were appointed and resigned within the period, and another resigned early in the year after having been on the staff about four months altogether. Four others who resigned had been in the service approximately a year. Two of the younger physicians, Dr. Hubert and Dr. Comeau, who had been on the staff over four years, left us to enter private practice, attractive opportunities having appeared in Morris County within a few miles of the institution. The other resignation was that of a senior

man, Dr. Pollock, who had been on our staff five years and in the state hospital service farther West prior to coming here. He decided to retire for a well-earned rest of extended duration. One promotion was made, Dr. Raymond J. Harquail being raised to the position of senior resident physician on June 16.

The twenty-four listed on the staff include the superintendent, clinical director, pathologist, surgeon, electrotherapist, gynecologist, eye, ear, nose and throat man, and two clinic physicians, none of whom carry a ward service; another senior physician, Dr. McMurray, is in charge of occupational therapy and annually appointed acting executive officer for all periods when the superintendent is absent from the institution, so he can give only a small portion of his time to ward work. This leaves fourteen physicians to carry the regular service for the entire institution and makes much too high a ratio of patients to physicians, particularly in view of the very heavy admissions this year.

There have been no changes in living conditions, but funds have been obtained for two single cottages and will become available on July 1. Undoubtedly, housing is a highly important factor in obtaining and retaining the services of desirable men, particularly those with families, and I am in favor of extending our cottage system until we can offer sufficiently attractive conditions to compete with those to be had in other comparable fields.

The general routine adopted a few years ago has been maintained. The clinical director, Dr. Lane, has been in charge of the medical staff and had general supervision over the diagnosis, care and treatment of all patients. Staff meetings have been held five days a week, at four of which patients were presented for diagnosis and discussion, while at the fifth, patients under consideration for release from the hospital were interviewed with a view to determining their fitness for making adequate adjustments in the community. Once a week the superintendent has held a conference for all physicians and the heads of other divisions in the medical service with a view to maintaining all phases of the work on an equitable and unified basis.

The staff has been represented by one or more delegates at all important medical conferences in the State and the superinten-

dent, clinical director and director of clinics attended the American Psychiatric Association meeting which was held this year in Washington in conjunction with the First International Congress for Mental Hygiene. In October, Dr. Christian, the pathologist, attended at Detroit, Mich., the International Medical Assembly combined with the Interstate Post-Graduate Medical Association. As Dr. Collins has served as president of the Morris County Medical Society this year, several meetings have been arranged at the institution in addition to the annual meeting in early autumn which has been regularly entertained here for some years. Relations with the physicians in the community have continued to be uniformly friendly. During the year many physicians have visited the hospital, including some of international reputation. Further particulars will be found under the list of distinguished visitors.

We have to record the death as this report is being written up of a member of our consulting staff, Dr. H. Austin Cossitt, of New York City. Dr. Cossitt was formerly a member of the resident staff at this institution, entering the State service about thirty years ago. He later engaged in private practice for a time in New Jersey, after which he moved to New York about twenty years ago and took up special work in diseases of the stomach. He soon became well known in this field and was made professor of gastro-enterology at the Polyclinic Hospital. He has served on our consulting staff for several years, and although not called upon frequently has always retained his interest in the institution which was the scene of his early medical experience.

PHARMACEUTICAL DIVISION

The personnel of the hospital drug division has remained unchanged this year. Mr. Philip B. Roberts, Ph. G., has continued in charge of the work and has met all requirements in a reliable and systematic manner. Mr. Louis D. Bangert as assistant pharmacist and Mr. John Hughes as drug clerk have completed the staff. On November 8, the stock was moved from the old drug room in the Main Building to new quarters in the Clinic basement in a half day, without breakage, which was something

of an achievement. The new rooms are of adequate size and supplied with suitable counters, sinks, shelving and other storage space, all of good design, and the immediate effect to a visitor is of light, cleanliness and order. Much effort has been spent by the personnel in working out the most efficient arrangement of the new quarters, and with the assistance of a clerk from the office force a new inventory and card index have been made to cover the changed conditions.

A variety of preparations have been made up in the pharmacy, and Mr. Roberts reports that he has observed this year a definite increase in the number and quantity of prescriptions which called for these standard preparations rather than similar drugs of proprietary manufacture. This change has resulted in an economy to the institution with benefit rather than detriment to the patients.

During the year Mr. Roberts has instructed two classes of student nurses in the theory and practice of drugs and solutions. With the increased space provided in the new rooms, the number of students taught at one time has been increased from three to seven, and after procuring some minor equipment it will be possible to instruct a class of fifteen without division.

PHOTOGRAPHY

For identification purposes it is customary to photograph each patient as soon after admission as conditions permit. This year the usual procedure has been followed and a full face and a profile view suitably mounted on cardboard have been placed in each case record. Certain other patients have been photographed preparatory to trial visit or discharge, and passport pictures were made for those patients who were to be deported. In addition to this work for patients, the hospital photographer, Mr. Frederick C. Wainwright, has made pictures of buildings under construction at stated intervals for recording progress to the central office, and has taken other views of institutional subjects as directed. Following is a list of the work completed this year:

Number of newly admitted patients photographed	1,073
Number of patients photographed for visit or discharge	359
Number of patients photographed for deportation	23
Progress pictures of new construction	220
Miscellaneous pictures	14
	<hr/>
	1,689

In addition to this work as photographer, which has increased this year about 20 per cent. over that of last year, Mr. Wainwright has continued to select, transport and show moving pictures for the patients' entertainment given once in two weeks during the winter. This year the number of "movies" was 27.

GREENHOUSE, GROUNDS AND GRADING

The work of the greenhouse, the landscaping of the grounds, the grading, road construction, laying of walks, and general upkeep of the lawns and recreation areas, including the golf course, have all been included in one large division under the supervision of Mr. Otto Koch, who has been employed at the institution for many years and is an unusually valuable and efficient man for the State service.

At the greenhouse a great deal of work has been carried on throughout the year, chiefly by patients under the supervision of a very few experienced employees. The number of plants and bulbs grown for flower beds and cut flowers totaled 53,769. The number of flowers cut for distribution on the wards and in the various dining rooms amounted to 65,280. Entries of flowers and plants were sent to the First Annual Flower Show of New Jersey, held at Newark, to the State Fair at Trenton, and to flower shows held at Morristown and Morris Plains. Many prizes were received and the group arranged by the patients at Newark was given a gold medal and special commendation by the Governor. A new additional greenhouse was completed this year, measuring 95x24½ feet, and connected with the office by a glass enclosed corridor. Most of the work on this was done by patients under the direction of Mr. Koch, assisted where necessary by the hospital engineer and mechanics.

A section of land lying between the Reception Building and the

Business Manager's Cottage was last year taken over as a patients' garden. Production was very good considering weather conditions. The following quantities of vegetables were sent to the Main Kitchen and the officers' cottages: 1,536 heads cabbage; 151½ bushels tomatoes; 125 heads cauliflower; 44½ bushels egg plant; 59 bushels lima beans; 5 bushels large peppers; 12 bushels string beans.

Acting in co-operation with Dr. McMurray and the Occupational Therapy Division, Mr. Koch assisted in the renovation of the hospital willow holt. All old roots were cleaned out, 744 cubic yards of soil were used for filling low spots, and 34 feet of pipe line were laid for drainage. Sprays and fertilizer were applied.

Under the advice of Mr. Brinley, landscape architect, trees were removed from other parts of the hospital property and set out around the front of the Reception Building, Employees' Residence and Cafeteria. The number and varieties were as follows: Abies fir, 10; hemlock, 6; Norway spruce, large, 2; Norway spruce, small, 3; white pine, 1; Norway maple, 12. Most of the transplanting was accomplished during the late winter and early spring, when other outdoor work was at a minimum.

Road construction and resurfacing has been a major industry in this division during the year. The sides of Central Avenue, extending 15 feet to the gutter from the new hard surface which was constructed last year under contract, were graded, 218 cubic yards of soil being removed by the gasoline shovel and the space filled and the entire surface graded with road rock and stone slag from the sewer field, using 884 cubic yards; 22 tanks of road tar were then applied and the surface properly rolled. Concrete curbing and gutters were put in under the advice of a divisional expert from the Central Office; the amount required was 6,614 feet of curbing and 7,089 feet of gutter. This was all done with materials for which money was furnished by special appropriation. An old road extending from the foot of Central Avenue to the county highway which bounds the State property on the northeast has been widened preparatory to making it into a detour route to take heavy traffic from Central Avenue. Stone and clay to the amount of 1,047 cubic yards have been placed on

this road and it has been left to settle before surfacing. Other roads on the property have been graded, properly surfaced and tarred. This is the first time that it has been possible to use tar on the hospital roads and the saving in wear with reduction in dust and mud have not only provided an economy in the amount of repair work required, but have also reduced the wear and tear on hospital vehicles. In some cases public roads which border or pass through the hospital grounds have been included in our work, as they are used very little except by institutional traffic and the communities are not disposed to maintain them in condition which will stand up under our heavy trucking.

The gasoline shovel has been in use throughout the year as weather conditions permitted. The chief points where excavating has been required were: At the rear of the Reception Building; the parking space behind the North Side Attendants' Cottage; the site of the Service Building; at the rear of the Employees' Residence; the sewer fields; and on the various roads. A total of 10,849 cubic yards of soil have been removed by this shovel during the year. The gasoline roller has been used in scarifying roads and rolling surfaces before and after the application of tar. The Fordson tractor has been in constant service, in summer rolling and mowing lawns, and in winter ploughing snow from the roads.

Grading of lawns was required around new buildings. At the Employees' Residence about 150 cubic yards of top soil were used to complete the surface and grass seed was then sown. Around the two-family cottage for physicians completed last year, filling to the amount of 2,236 cubic yards was put in and then 2,788 yards of soil were required for the finished grade, after which the lawn was seeded. The lawn at the Business Manager's cottage was seeded and all places where trees were removed from the golf course and other recreation areas for transplanting were filled in and seeded down. After the trees were set out, the Reception Building lawn was finished off and reseeded.

Repairs to gutters and catch basins were made in various places. At the Business Manager's cottage a sidewalk was put in, amounting to 723 square feet with 72 feet of protecting apron. At the

new two-family cottage 788 square feet of concrete walk were laid, and at the Clinic Building 60 square feet of sidewalk and 90 square feet of gutter were put in. The walks on both sides of Central Avenue are being reconstructed. Where the old walks were not broken they were reset to proper grade, but for the greater part of the distance new concrete walks have been laid. Up to date, 3,050 square feet of walk have been put down with 526 lengths of 4-inch pipe and 11 catch basins to provide proper drainage.

All of the work listed, with many other smaller repairs and improvements have been carried on by patients, each large group being under the supervision of one employee. A mason from the mechanical division assisted with much of the concrete. In addition to the above work, the regular upkeep of the grounds has been looked after, rubbish picked up daily, flower beds planted, weeded and watered as necessary, trees sprayed and lawns mowed. In winter the patients have worked at snow removal and at cutting trees and sawing up the wood when grading was impossible.

Mr. Koch was found to be in poor physical condition at the beginning of the winter and the Board of Managers considered it advisable for him to take a period of rest with a complete change of scene. Accordingly, he went abroad for some weeks and visited his boyhood home in Germany, as well as other places of interest. He returned in January, much improved, and has been able to carry on his numerous duties without interruption since that time.

CLERICAL DIVISION

The medical and allied offices now have a clerical and stenographic force of 31. This comprises 2 senior clerk-stenographers, 22 clerk-stenographers, 6 clerk-typists, and one senior statistical clerk. All have been under the direction of principal clerk, Mr. James E. Lauenstein, who has supervised work and directed apportionment throughout the year in an efficient and satisfactory manner. This force is distributed to furnish service in the Main Building to the superintendent's office, two units of the medical staff, the Record Room, and the office of the superintendent of nurses; in the Recep-

tion Building to the clinical director and the medical staff of that unit, the hospital social service, and the mental hygiene clinics; in the Clinic Building to the physicians of that unit and the pathological laboratories; in the Dormitory Building to the medical service there which also includes the pavilions for the tuberculous and the recently opened Senile Building.

By means of this force all histories, physical and mental examinations, clinical progress notes, and reports from the different divisions have been assembled in the case records and all data have been tabulated for the various card indexes. In the main record room, under the supervision of Mr. H. M. Prettyman, senior statistical clerk, the original case records have been kept on file for every present and past patient of the institution. Here all statistics have been compiled to meet the requirements not only of the institution itself, but of the central office of the Department of Institutions and Agencies, the National Committee for Mental Hygiene, the Federal Government, and such other bureaus and agencies as have requested data. The influx of new admissions in June made it necessary to add two clerk-stenographers to carry on the work and others will be required if the number of patients continues to increase.

There have been maintained, at the ushers' booth and at the telephone switchboard, rotary indexes which at the end of the year showed the names and locations of all patients on the hospital books. The indexes have been changed daily throughout the year and kept constantly accurate. Another similar index will be required when the Service Building is opened, and equipment has already been ordered for this.

RECREATION: AMUSEMENT, SPORTS, MUSIC, AND ENTERTAINMENT

There has been considerable interlocking between the province of this division and that of the division of Physical Education, since both aim at the betterment of the patients' health and mental status by organized exercise and recreation. Dr. McMurray has continued in charge of sports and amusements this year, as for many seasons past. He has maintained general oversight of the different activities and made arrangements with individuals and organizations

outside the institution to furnish more varied entertainment for the patients. The following report has been submitted by him:

"In recognition of the fact that amusements, well-regulated recreation, and athletic activities are of important therapeutic value, careful thought and supervision have been given them this year. During the summer months, baseball was a prominent feature; a team made up of employees representing the hospital played every Saturday afternoon on the hospital grounds, affording a great deal of pleasure to large groups of patients, male and female. At other times teams of patients from different buildings took part in games under supervision, which afforded excellent exercise for those who participated and were of genuine interest to the numerous patients who turned out as spectators.

The athletic field and track were used by large classes of patients, men and women, who under very careful direction practiced for different events. Annual Field Day was held on September 21, and all the patients who had exercised on the athletic field during the summer had an opportunity to display their skill before more than 5,000 spectators, including a great many of the high officials of the state, as well as the relatives and friends of those in the hospital. We were greatly indebted to the Shriners of Salaam Temple, Newark, who sent their patrol, band, bugle corps, and Legion of Honor drill corps to take part in the events of the day and help to make the occasion a memorable one.

The golf course attracts yearly more patients who enjoy the game and others have been interested in tennis, croquet, walking parties, and the various beneficial forms of outdoor exercise. During the winter months the bowling alleys were actively patronized by groups of patients, properly instructed and supervised. Numerous pool and billiard tables throughout the male wards of the institution have been a source of a great deal of pleasure to the patients. Other indoor games in variety have been provided for both men and women. The radios with which the hospital has been fairly well supplied, have been greatly enjoyed by the patients. It has been found, however, that these sets are a constant source of expense, since the more mischievous patients occasionally destroy parts, and frequently the equipment suffers from careless if not malicious handling. During

the reconstruction now in progress plans for a central radio station are being worked out and when this arrangement is completed, it will be impossible for either patients or employees to come into contact with the machines.

Music in other forms has also been provided. The hospital orchestra, made up of patients and attendants, has played for dances and moving picture shows and throughout the year has given concerts, in winter in the different buildings and in summer on the lawns where a larger audience could enjoy their playing. Pianos have been supplied for the better wards and have been a valuable integrating factor for patients of certain types. Victrolas and records have also been provided and have been much used by the division of Physical Education in their classes. The usual Monday afternoon dances have been held during all but the summer months and have been well attended by both male and female patients. Moving picture shows were given once a fortnight from Labor Day to the end of June.

A number of special entertainments were provided for the patients in the course of the year. The Christmas program was even more elaborate than in the past. Preparations were begun late in November, when a letter of appeal was printed and envelopes addressed to those who might be interested in helping the patients' Christmas. These were mailed on December 1, and the response was immediate and generous. As a result it was possible to provide each patient with a personal gift, wrapped and marked with his name. The program for the week was as follows:

Sunday, December 22: 8:30 a. m. Mass held by Rev. Father Dancak of St. Virgil's Church, Morris Plains.
3:00 p. m. Protestant service conducted by Rev. Wilbert Westcott of Morristown.

Monday, December 23: Parties and carol singing on wards.
2:00 p. m. Party and Christmas tree for women's industrial group.

Tuesday, December 24th: 12:30 to 4:00 p. m., visiting hours.
7:00 p. m. Carol singing around Christmas Tree.
Pageant, "The Little Princess who Traveled far to Worship the King."
Arrival of Santa Claus—Distribution of gifts.

- Wednesday: December 25th: 8:30 a. m. Mass held by Rev. Father Dancak. Distribution of presents to patients unable to attend tree exercises. Christmas Dinner. 12:30 to 4:00 p. m., visiting hours.
- Thursday: December 26: Parties on wards for curative workroom and physical education classes. 12:30 to 4:00 p. m., visiting hours. 2:00 p. m. Christmas party for men's industrial and print shop group. 7:00 p. m. Moving pictures and community singing.
- Friday: December 27th: Tea party and dance for patients, sponsored by Physical Education Division.
- Saturday: December 28th: 12:30 to 4:00 p. m., visiting hours.

On Christmas Eve at the tree exercises, there were over one thousand patients present, and the visitors included Senator Frank D. Abell and Mrs. Abell of Morristown, Mr. and Mrs. Murray Coggeshall of Morristown, and Hon. Daniel S. Voorhees, President of the Board of Managers, all of whom gave a few words of personal greeting to the patients.

On St. Patrick's Day a special dance party was held for the patients in the Amusement Hall of the Dormitory Building. The music was furnished by Victorine's orchestra of New York, secured through the efforts of Mrs. Garrison. On May 6, Miss Marie Tiffany of the Metropolitan Opera Company gave a song recital for the patients, with Mrs. Cidlova as her accompanist. Miss Tiffany was in very fine voice and exceedingly generous with her encores. She was persuaded to come to us by Mrs. Garrison and Mrs. Colgate of East Orange.

In addition to the entertainments provided for patients, some attention has been given to recreation for the officers, nurses, and other employees. The golf course has proved most valuable in this respect, affording an attractive means of outdoor exercise. Occasional dances have been given, and Father Joe Connor and other musical artists have been very generous in furnishing entertainment on several occasions for the nurses or members of the staff."

LIBRARY DIVISION

There are two principal libraries for the use of patients, the older one in the Main Building and the Coffin Library in the Clinic Building. Both have been continued this year under the supervision of Mrs. Ann M. Hopkins as librarian. The circulation of books and magazines has been as follows:

<i>Type</i>	<i>Main Building</i>	<i>Coffin</i>	<i>Total</i>
	<i>Library</i>	<i>Library</i>	
Fiction.....	5,834	3,668	9,502
Non-fiction, including magazines.....	20,815	13,033	33,848
Foreign language books.....	205	187	392
Total.....	26,854	16,888	43,742

Through the interest of Mrs. Doyle in the Patients' Library, 178 new books were purchased very economically and have been greatly appreciated by both patients and employees. There has been a demand for both fiction and non-fiction not included in the hospital libraries and Miss Edith Smith of the Morris County Free Library has been very generous in lending us books. During the year 260 volumes were borrowed.

Weekly trips have been made through the Main Building, Clinic Building, Dormitory Building and Reception Building, totaling about 2,340 visits to the different wards. In addition to these extra trips have been made with books and magazines when desired. The ward for sick employees has been visited daily with reading matter. A medical library is maintained in the Reception Building, which contains numerous professional volumes and 27 periodicals. This has been well patronized by the medical and nursing staff.

On Field Day the library division had a stall on exhibition showing the circulation in all branches of the work. Many gifts have been received by the different libraries during the year, the staff, employees and visitors all being most generous in their contributions.

RELIGIOUS SERVICES

The hospital has continued the same system of religious services this year as heretofore. There has been no resident chaplain, but ample religious contacts have been provided for all patients.

From the Catholic standpoint, the institution has always been regarded as a part of the parish of St. Virgil, Morris Plains, and one of the pastors there has paid regular visits to the hospital each Sunday morning for the purpose of conducting services and has been constantly on call to administer rites to those in need. When any patient becomes seriously ill, the routine procedure for the physicians includes ascertaining the religion and calling the priest if the patient is a Catholic. Protestant services have been held in the hospital chapel each Sunday afternoon. Clergymen from Morristown and Morris Plains officiated in rotation, and Methodist, Baptist, Episcopal and Presbyterian denominations were represented in turn. For the Jewish patients, a rabbi from Morristown arranged services each Saturday. Holy days in all the various faiths were appropriately observed and visits to the patients by their home pastors have been encouraged.

WAR RISK PATIENTS

Early last year most of our veterans were transferred to Government hospitals and the number in the institution has remained comparatively low since that time. The admissions this year were considerably less than in the past, which probably indicates that many ex-service men in need of hospitalization have been committed directly to Veterans' institutions. We have received, however, a certain number whose claims had not been allowed and we have also kept on our records as war risk patients all who are known to have been in the service, even though their claims have been disallowed, since there is always a chance that a review of the particular case or a change in the regulations will alter the classification. The following tabulation is self-explanatory:

On records July 1, 1929.....	63
Admitted during the year.....	21
	—
Total under treatment during year.....	84
Discharged during year:	
Recovered.....	6
Improved.....	4
Unimproved.....	0

Discharged during year, (*Continued*)

Transferred.....	0
Without psychosis.....	0
Died.....	1
	<hr/>
Total discharged during year.....	11
Remaining on records June 30, 1930.....	<u>73</u>

Status of patients on record:

Claims allowed.....	4
Claims pending.....	41
Claims disallowed.....	28
	<hr/>
Total.....	73

On June 30 there was the following distribution of these patients:

Resident in the hospital.....	59
Outside on visit or escape.....	14
	<hr/>
Total.....	73

FIRE PROTECTION AND FIRES

The institution has been very fortunate in the matter of fires during the past year, as there have been none serious enough to require the efforts of the fire department. Four small fires have occurred for which no alarms were sent in, as each was promptly extinguished by the means at hand. On August 27, the fire department was called to the Main Building, as the flag pole had been struck by lightning, but no duty was required. Occasional grass and rubbish fires have called for the services of men with brooms or fire extinguishers.

On April 1, employees of the County Welfare House started a fire on County property for the purpose of burning brush; this spread beyond control and at 10.30 a. m. was traveling rapidly before a high wind toward timber owned by the hospital. Fifteen hospital employees were sent out and worked from two to five hours each until the fire was extinguished. On April 16, at 5 p. m., a fire was discovered in a piece of woods at the rear of the hospital hennery, although it did not originate on hospital property. Our employees were called and extinguished it in about a half hour.

Under direction of the division head, Chief William H. Matthews, all fire fighting equipment has been tested regularly throughout the year, including the engine and trucks, hose, hydrants and extinguishers. There have been 105 three-gallon fire extinguishers placed in service, increasing the total to 395; in addition to these, 36 are being held ready to be placed in the new buildings as soon as they are completed, and 10 others are kept for special occurrences.

Since reconstruction work on the female side of the Main Building cannot be undertaken for some time, it was thought wise by the Board of Managers and the Department of Institutions and Agencies to install a sprinkler system there. This has been done at a cost of slightly less than \$15,000 for materials and labor. The system protects the entire roof area and the entire basement and provides connections for each of the floors if it should later be considered desirable to continue the piping through all wards. Over 14,000 feet of pipe were used in the work. This is the so-called "Dry Pipe System," with air in the pipes at all times; if the temperature reaches 155° the sprinkler heads go off, the air shoots through, and water follows immediately at the rate of 475 gallons per minute. Tests showed that it took only 35 seconds to fill the system with water, since accelerators are used in connection with the valves. Each of the dry pipe valves will be connected electrically with annunciators, one being installed in the fire house to notify the fire chief just where the trouble is located and the other in the engine room where an engineer is on duty twenty-four hours a day to warn him to be ready immediately with fire pumps.

At the present time a similar sprinkler system is being installed throughout the Dormitory Building. It is felt that by means of these systems a maximum of safety to life and property will be attained. It is also anticipated that they will save the cost of their installation within a period of five years through economies in the insurance premiums.

WATER SUPPLY

A great deal of attention has been given to the water supply

this year. Walter Kidde Company, working in co-operation with our own engineers, completed a map of existing water lines and a lengthy report was made recommending a number of changes in order to improve the quality of the supply for domestic service and also to insure adequate fire protection for all buildings. The upper basin beyond the ice pond had become filled with about eighteen inches of mud and its use has accordingly been discontinued. Repairs have been made to the Klondike filter and the treatment plants have been thoroughly overhauled. During the summer season of 1929, owing to the long period of dry weather, the pumping capacity was increased by using steam pumps in the old gas house; the daily average number of gallons pumped during the year was 75 per cent. higher than the previous period. The water supply from the new deep well undoubtedly saved us from a very serious shortage, since it did not appear to be materially affected by the drought. An underground power line to supply electric service to the pump at this well from the hospital plant is now being installed and should be completed early in the coming year. In connection with this work is included the installation of a new A. C. generator, transformer, etc., to supply alternating current for lighting of the Main Building and other buildings along Central Avenue.

NEW BUILDINGS AND IMPROVEMENTS

The major piece of work this year, so far as its constant effect upon the internal affairs of the institution, has been the reconstruction of the North Side of the Main Building. After the wing had been cleaned and dried out following the fire on May 6, 1929, patients were returned to eleven wards, leaving nine evacuated; these had altogether been housing over 600 patients. As soon as adjustments had been made with the insurance companies, reconstruction of the entire North Side was begun with a view to making it fireproof and up-to-date in equipment. In order to carry on this work and still maintain a maximum of patients in the building, there has been constant transferring and re-transferring throughout the year in a checkerboard system. At the end of the year eight wards were unoccupied, although three

of these were practically completed. The first reconstructed ward available for use was 3-2, which was ready on December 29, although for a time it was necessary to maintain a barricade across one end where further work was in progress. In February, 3-4 was opened up and more followed in March. As these were made ready for use, however, other wards were closed for reconstruction.

During the year all wood under-floor and floor construction in tiers 2, 3, 4 and 4-A have been replaced with steel and concrete floor slabs and sanitary cement floors and base. A new and modern heating system is being installed consisting of direct radiation and heating units with blowers. The old bathrooms have been modernized. New electric conduits, wiring and fixtures have been put in; all telephone wires have been installed in rigid conduits and telephones recessed into the wall in metal boxes. Conduits have also been installed with outlets for a call and radio system. Sanitary enamel lined clothes chutes have been put in place at tiers 2, 3 and 4-A. In connection with the other work a large room on ward 2-3 has been remodeled into a modern sanitary barber shop; all patients will be brought to this point, thus obviating the necessity of a barber chair in each clothes room on twenty wards.

Further reconstruction in progress includes remodeling of the toilet area in the Dormitory Building, which was commenced on December 10. One toilet section adjacent to the women's day rooms has been completed; the corresponding section on the male side is practically ready for use and work on the toilets connected with the women's dormitories will be undertaken next.

Work completed during the year included installation and repair of Main Building cornice, completed on August 9, 1929; remodeling of 34 toilets in Main Building, of which all have been completed, except two on wards still under reconstruction; installation of new elevators, a freight elevator in the Clinic Building and two combination passenger and freight elevators in the Dormitory Building and one in the Main Building, completed April 5; reconstruction of Clinic Building completed December 11—as this building has had to be occupied constantly since the

fire it has been impossible to carry out the redecorating in the wards and corridors—; remodeling of old Industrial Building completed December 2; and extension of tunnel to Senile Building, completed in January. The floor of the hay loft at the dairy barn has been shored up and made safe for concentrated load of 400 lbs. to the square foot. An addition has been constructed to the garage at the Business Manager's cottage. A new South Side sewer extension line has been run from a point south of the women's wing of the Main Building across the golf links to the Dormitory Building and thence to the Senile Building; this was completed on June 11 and takes care of about 90 per cent. of the Dormitory Building, the Senile Building and the proposed Tuberculosis Building. A portion of the sewage disposal plant was remodeled and a sprinkler bed system completed on January 31.

Several other large pieces of work are still in progress. The Senile Building has been under construction throughout the year and is now practically completed. On June 30, it was occupied to the extent of placing 36 women patients of a quiet type in the first floor dormitory to sleep, although they spend their days and have their meals at the Dormitory Building. The exterior is of red brick, of pleasing Georgian or Colonial style, only two stories in height; the site is at the rear of the Dormitory Building facing the public road. Inside the entrance is a hallway with an office opening off on each side, one for a physician and one for a supervisor of nurses. Beyond the entrance hall is a corridor running lengthwise of the building, with doors to the toilet and bath rooms, utility rooms, clothes rooms and nurse's office. At the end of the corridor is a day room, extending the width of the building; beyond that is a dormitory and at the end of the building, a sunroom. The arrangement is the same on each side. In the center of the building, opposite the front entrance, are a dining room and serving room with floors of quarry tile and walls tiled part way up; a similar layout of rooms occupies the second floor. Food is to be brought from the Main Kitchen in special trucks and sent up by elevator to the serving rooms. Floors in day rooms and dormitories are of linoleum over concrete, and the base is of concrete, sanitary in form. Radiators are recessed

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behind grills or protected with enclosures. The rooms are all light and well ventilated, and the entire plant is attractive and workable. The space should house 150 patients very comfortably. Mrs. Garrison and Mr. Holbig are now selecting furnishings.

An Occupational Therapy Building for Women is being constructed of a type similar to that for men opened in August, 1927. The location selected is across the road from the old Industrial Building on the area formerly used for a tennis court. Excavations were started on February 3; at the present time all foundations are in place, steel work erected, and reinforced concrete floors about to be cast. Selection of brick has been made and the brick work started.

Another much needed improvement is the Service Building, designed to be headquarters for all visitors coming to the institution; it will be provided with an ushers' desk, telephone connections, register, and rotary index of patients and will also be equipped to serve lunches as well as fruit, ice-cream, candy and tobacco. The location selected seems ideal for the purpose, as it is between the Main Building and the Clinic on the side road, with ample parking space. The design is good, the material of Belden gray brick. Excavation was started on October 3, with hospital labor; erection under contract has been in progress since January 9 and the building will probably be completed early in the coming year. Furnishings and equipment have been selected by Mrs. Doyle of the Board of Managers and are of an excellent type.

Work in connection with the erection of a cannery and scullery adjacent to the main kitchen has been in progress for the past three months. There has been some delay in securing structural steel, but it is expected that the building will be ready for use by September. Contract has been let and work begun on fencing along the public highway at the rear of the North Side sections. In all, 5,370 feet of wire mesh fence, similar to that used on other parts of the grounds, are to be put up. This fence will serve the double purpose of protecting the hospital property from trespassers and insuring the safety of patients on the lawns.

All of the work listed has been carried on under the supervision

of the Division of Architecture and Construction of the Department of Institutions and Agencies, with Mr. Robert Sturgis of Morristown as the local inspector. Other construction and reconstruction of a less important type has also been handled during the year, some of it under this department and other pieces under the direction of the hospital officers; the latter items will be found in the engineer's report. In connection with all of the major construction, especially the North Side of the Main Building and the Senile Building, Mr. Beucler has been of very valuable assistance, not only in looking after a multitude of details to increase the efficiency of the layout, but also in the Main Building in arranging the order of transfer for the patients.

OVERCROWDING

Overcrowding has been the great adverse factor in all work with the patients this year. All attempts at proper classification of various types of mental disorder, all plans for putting treatment facilities on a more centralized system, the entire medical, surgical and therapeutic work of the hospital have been radically disrupted by the inescapable obstacle of excess patients everywhere. The Reception Building, designed to provide every advantage for rapidly restoring the newly admitted patient to mental health, is overcrowded more than 40 per cent. The Clinic Building is even more congested with patients, for the wards, designed under the reconstruction program to house only medical and treatment cases, are filled with male patients from the vacated wards of the Main Building. Only the female surgical ward is occupied by women. This means that additional overcrowding in the other buildings exists among women as well as men, since all who under normal conditions should be in the Clinic are now housed elsewhere. In the Dormitory Building during much of the year nearly two hundred patients were sleeping on temporary cots set up each night.

The situation would have been bad enough if we had no overcrowding at the time when it became necessary to evacuate half the patients from the Main Building, North Side. As a matter of fact, however, we were carrying about 1,000 patients in excess of

our proper housing facilities before the fire and consequent reconstruction of the Main Building. Then, to add the final burden, we had an admission list this year over 20 per cent. higher than last year and greater by 172 patients than the previous high record. Existing conditions have placed a terrific strain upon all the officers and employees in the medical service throughout the fiscal year.

Although Commissioner Ellis and the Department of Institutions and Agencies fully appreciate our difficulties and are bending every effort to expedite reconstruction, any decided improvement cannot be anticipated for a considerable time. The opening of the Senile Building will provide about 150 additional beds and we have been promised that Hillsdale, the new state hospital under construction, will be ready to take 300 patients some time in the coming autumn. These numbers, considerable as they are, can be only a drop in the bucket as far as affording actual relief to our present situation. Until the Main Building is completely reconstructed, we shall have to continue to make the best we can of an essentially intolerable condition.

ENGINEERING DIVISION

The work of the engineering division has been carried out under the supervision of Mr. Henry Landesman, C. E. who has served the institution for five years in this capacity. Technically, this division as well as that of the greenhouse and grounds and the new buildings and improvements should be included under the report of the Business Manager, but since I have for some time followed a less exact order of topics in my report, I am continuing the same system this year.

Mr. Landesman's report as submitted, contained some 15 pages of closely typed material of such a character that it could be condensed only by omission. Consequently, I have been able to include only the larger items of the varied and important work accomplished during the year. Mr. Richard Rogers has continued as resident engineer, his practical knowledge of the plant making him invaluable.

The report from the water station showed a total of 308,233,

000 gallons consumed, which is 12,255,000 above that of last year, but 13,000,000 below the record in 1928. This is interesting in view of the fact that this year for the first time the continuous tubs in the Reception Building were in service 24 hours a day and the dry weather during the summer required the use of much water to save the trees and plants about the hospital grounds. The number of gallons pumped was 197,518,000, the highest on our records. Total tons of coal used at the power house was 24,381, with a daily average ranging from 34.6 in July to 98 in December; this is the lowest consumption in the five year period studied. Ice production amounted to 18,104 cakes during the year, with a low of 1,106 in December and a high of 2,119 in July. In the dynamo room the total kilowatt load for the year was 2,328,458 an increase of 618,952 over the previous year.

At the power house the entire plant was carefully checked and maintained at a high level of efficiency. Two new feed pumps have been installed, one of them electric type and the other steam driven; the latter is not quite ready for operation. In cooperation with the Central Office it was decided to install quick acting valves in the various steam lines for the purpose of eliminating a stand-by banked boiler during the winter months. These valves have been received and installation begun. With this system it is expected that the coming winter will show further savings in fuel. Changes were made in the operation of the soot blowers, so that during the year we did not experience any coating of tubes. A new enclosure of strong non-climbable fence was erected around the coal drag cable to prevent possible injury to patients and employees. Many other changes and repairs were carried out during the year by the hospital maintenance force.

A study of the dynamo room was made by the Central Office and consulting engineer with a view to providing current from our own plant to operate the deep well pump at Morris Plains. To accomplish this purpose a program has been mapped out which will ultimately supply the institution with alternating current instead of direct, as is now used. Drawings and specifications have been completed showing that the first part of this work will include the removal of one of the two Harrisburg engines and

the installation of a Turbo alternating current generator set, modification of switchboard, changes in steam lines, installation of new feeders, transformers, etc. The first line is intended to supply alternating current for lighting and power at the Nurse's Group, Attendants' Cottage, Main Dining Hall, Employee's Building, Officer's Cottages, Staff House, Sewage Disposal Plant, and the deep well-pump. Another line has been run up the tunnel to take care of the Senile Building and the proposed Tuberculous Building. A branch line will later be taken from this feeder to supply the Greenhouses, Farmer's and Dairyman's Cottages, and Dairy Buildings. The maintenance force has kept the plant and equipment in good condition during the year.

Condenser pipes were renewed on the main cold storage plant during the year. Machines, boxes, and pipe lines were all put into good condition so that there were no shut downs. The mechanical refrigerating plant installed at the dairy late last year has saved the transporting of 150 lbs. of ice daily, as well as made the cooling more sanitary and efficient. Contract has been let and work begun on a refrigerating plant for the storehouse which will include two boxes and take care of cereals, dried fruit, and other supplies especially liable to spoilage from mould and insects. At the dairy numerous repairs and additions to equipment were made by the maintenance force; a sheet metal ceiling was put on in the main barn to replace plaster; silos were repaired, and new roofs put on two; a kettle was installed to permit sterilizing milk for hogs; a hot water line was installed and several old water lines were replaced. Painting of all dairy barns has been begun.

Other miscellaneous construction and maintenance work include a storeroom for mechanical parts used in current repairs, to facilitate salvaging of parts left over or removed in the course of reconstruction; general painting, plumbing, electrical and masonry work in the Clinic Building after the completion of the reconstruction under contract; repairs to plaster in various buildings due to water damage from bathrooms not provided with lead pans; and construction and placing of porch screens on new

two-family cottage for physicians. The dairyman's cottage was reconstructed, old plumbing removed, partitions removed, new floor put in, and painted throughout. The former gardener's cottage was assigned to the hospital pharmacist after having been empty for some months; preparatory to re-occupancy, the plumbing was gone over and several new ceilings and walls put up. At the superintendent's cottage two bathrooms were reconstructed and new piping installed. At the South Cottage, occupied by a physician and storekeeper with families, a complete new heating system was installed and a new bathroom built and supplied with fixtures. The grandstand from which patients watch baseball games, Field Day sports and other athletic events had become unsafe. The entire structure was overhauled and rebuilt. Most of the materials were furnished by the contractor and part of the work was done under contract, but our maintenance force assisted in putting on the roof and painted the entire structure. In the Central Kitchen of the Dormitory Building the old coal range was removed and the gas range reinstalled; old electrical lines were taken out and replaced by conduit; ceilings and walls in kitchen and cook's room were taken down and replaced with metal lath.

At the storehouse an automatic Garrison Fire Detecting System was installed; the interior on the first floor was painted, and sundry repairs made. The laundry has required new machinery and equipment in order to meet the additional work imposed by the growth of the institution, and the hospital mechanics during the year have practically repiped the entire building for steam, hot and cold water, and return lines, all without shutting down operation. Several new machines were installed and almost all machinery has now been taken off the old engine-driven shaft and connected with individual electric motors. The front toilet room was entirely reconstructed with new plumbing fixtures, floors and partitions. The garage at the staff house is being enlarged by the addition of ten new stalls back to back with existing construction. The heating system, walls, roof sheathing and door jambs are now in place. After having been in service some years the Knight and Voorhees Cottages required rearrangement of the bathroom and

toilet facilities and complete change of plumbing. The Knight Cottage has been practically completed, the work having been done by the hospital maintenance force in cooperation with the Central Office, with the exception of tile setting. Two large community bathrooms, two community toilet rooms with lavatories, and three private bathrooms were installed, equipped with lead pans, brass supply lines and tiled floors and walls.

The records of the mechanics show 13,542 repairs during the year and 119 pieces of new work. Furniture repairs were most numerous, and in that group chairs led with a total of 2,805. The work of the large sterilizer is also listed in the engineering division and included 1,743 mattresses, 1,185 pillows, and 77 lots of loose hair, as well as clothing and other articles.

BUSINESS DEPARTMENT

This department has been undergoing reorganization during the latter half of the year, since the former Business Manager, Mr. George J. Hamberger, resigned on January 31 and was succeeded by Mr. George J. Holbig on February 15. As I stated at the beginning of this report, Mr. Holbig is finely equipped for this exceedingly important position, and although proceeding quietly in order not to disrupt the service, has already brought about many changes in the interest of increased efficiency. Mr. E. I. Coursen as assistant business manager and Mr. A. J. Van Winkle as treasurer have continued in their respective positions.

LAUNDRY

During the year the following pieces of equipment have been installed at the hospital laundry:

- 10 Eagle presses
- 35 Ironing boards
- 1 Cuff and collar starcher
- 1 Cuff and collar dampener
- 1 24 in. ironer
- 1 120 in., 8 roll, flat work ironer
- 1 Section dry cabinet
- 1 Starch cooker
- 1 44 x 94 tumbler
- 1 48 in. extractor

Other pieces on hand to be installed include:

- 3 Double tray wash tubs
- 1 100 in., 5 roll, flat work ironer
- 1 Shirt table
- 1 30 in. tumbler
- 1 36 x 36 washer
- 1 36 x 54 washer
- 1 42 x 84 washer
- 1 44 x 94 tumbler
- Sorting racks

Work has increased with the growth of the institution and Mr. Daniel W. Leyhan, head laundryman, reports that a total of 5,276, 439 pieces were laundered during the year, which is a considerable increase over the preceding year.

GARAGE

The hospital garage has continued to care for the variety of motor equipment required in connection with the institution. This has included passenger automobiles for the use of officers on hospital business, the transportation of patients and physicians to court, and other similar duties, and the small sedans for the use of the social service workers. In addition to the sedans, there are a bus and an ambulance for the transportation of patients, and a variety of trucks used in grading and hauling supplies. Tractors, a road roller and a gasoline shovel are also kept in repair by the hospital mechanics. During the past year the following new equipment was added: 2 Buick 7 passenger sedans; 1 Ford sedan; 2 Ford dump trucks; a $\frac{3}{4}$ ton and a 2 ton International truck. A settlement was finally made by the taxicab insurance company for the Hudson sedan which was wrecked last year in Newark by a taxi. Storage space in the garage has been entirely inadequate throughout the year, but work on a new central garage will be commenced as soon as the appropriation for the purpose becomes available at the beginning of the coming year.

FARM

Mr. William Ayers has continued in direct charge of the farm work, under the supervision of Mr. Coursen, assistant business

manager. Weather conditions have again been unfavorable for the best results in production. Drought, especially, during the summer of 1929 decreased the harvest. This year bad weather soon after planting affected the ensilage corn, but later rains improved conditions and at the end of June the outlook for a fair crop was promising. In order to offset the land taken from the garden for the Tuberculosis Building, twenty acres has been subtracted from the farm and turned over for garden use. Farm production for the year was \$12,796.27, a slight increase over that in 1929.

GARDEN

Mr. John J. Kelly, gardener at the institution for many years, resigned in the fall and was succeeded by Mr. Arthur Ketch, who had been employed for some time as assistant gardener. As Mr. Ketch has a home of his own adjacent to the hospital property he has not occupied the so-called gardener's cottage and it has been assigned to other use. Mr. Coursen has co-operated with Mr. Ketch in planning the work. During the winter two ditches were dug, totaling 140 feet in length, partly filled with stones and then recovered with soil to provide drainage and so increase the productive land area. One innovation which proved valuable this year was having the seed flats, already planted with cabbage, lettuce, egg plant, pepper, celery and tomato, kept in the greenhouse instead of in frames, thus making germination and early growth much more certain. Despite poor weather conditions, there was an increase in production over that of the previous year of about \$4,600 with a total valuation of \$28,248.98.

STABLE

At the farm stable, 22 horses were on hand at the beginning of the year. Ten new horses were delivered in August, having been purchased with money appropriated for the purpose. During the year 2 animals died and 4 were transferred to the institution at Annandale, leaving 26 remaining at the close of the year.

DAIRY

A great deal of trouble has been experienced with the dairy

this year. Difficulty with abortus bacillus has continued ever since 1928, when testing for the disease was begun; this has made a great deal of additional work owing to the necessity of segregating the positive reactors and of disposing of such cows as did not improve under treatment. Then in December the herd was found to be badly infected with mastitis, and at about the same time 24 cows showed a mild variety of cow-pox. This latter was cleared up entirely without serious after effects, but the mastitis has been a continued problem throughout the year.

After consultation with local and state authorities, sanitary regulations were drawn up covering the segregation of cows, methods of milking, and hygienic precautions. The cows whose condition was such that a return to normal milking status appeared unlikely were selected and slaughtered for beef under veterinary supervision; in December, January, February, 68 cows were thus disposed of. Upon recommendation of members of the staff of the Lederle Laboratory, who visited the institution and inspected the herd, autogenous vaccine was made up at that laboratory and administered to all the cows. This treatment was started on February 14, and there was an immediate improvement in the situation. Meantime, examination of the milk from all cows at each milking was continued, and check-ups were made at frequent intervals by the veterinary, Dr. Dustan of Morristown. Examinations of suspicious milk were constantly made at our own laboratory for the characteristic hemolytic streptococci. Any animals showing signs of infection were at once given autogenous vaccine treatment.

Since September all milk used for human consumption in the institution has been from cows free from mastitis under test and has been pasteurized. Milk from infected cows, even with a very mild form of the disease, has been sent to the piggery or given to calves, but has first been sterilized in a special kettle installed for the purpose. On March 14, the Bureau of Animal Industry completed testing the herd for tuberculosis; it was found to be entirely clean and again certified as an accredited herd.

Arrangements have been made through Mr. Houston to have young stock from this herd pastured at other institutions, and at

present 28 are at one State institution, 8 at another, and 4 at a third. Exclusive of the pastured animals the herd on June 30 consisted of 129 milk cows, 12 dry cows, 9 heifers, 33 calves and 5 bulls, a total of 188. Cows have been purchased during the year to replace those slaughtered for beef. The total valuation of products was \$76,921.27, a decrease of \$1,585.29 from last year.

At the present time the herd is in good condition. Information obtained from other dairies shows that mastitis is prevalent in all herds to a greater or less degree and it is quite probable that some of our cows will be affected from time to time. Continuous efforts will be applied to prevent spread of the disease, and it will no doubt be possible to hold the number of cases to a minimum. The same is true of abortus bacillus. Great credit for the present good condition of the herd and the dairy equipment and milk supply should go to Mr. Coursen, who since the first of December has devoted a great part of his time to the dairy. Three herdsmen have been in the employ of the institution during the year and the present incumbent is a recent appointment who will be regarded as temporary until his fitness for the position has been determined. The Department of Institutions and Agencies has been most generous in its assistance with the dairy problems this year, Mr. Houston in particular having given most freely of time and effort to the work at this institution. Dr. Dustan of Morristown has continued to act as veterinary for the institution and has taken great interest in the dairy problems.

PIGGERY

During the past winter special feed has been given to the brood sows in order to improve the vitality of the litters; prior to this time a number of the young pigs were born dead and others were weak and succumbed readily to cold and disease; a marked improvement in both brood sows and sucklings has been observed since a scientific diet was worked out. This year for the first time preventive measures were adopted before hemorrhagic septicemia appeared and 240 sucklings when three weeks old were injected with vaccine. Although there has been an occasional

death from this disease, many apparently exposed have continued thrifty. Necrotic enteritis caused the death of a number of animals in May; all young pigs were treated with a stock vaccine from the Lederle Laboratories with excellent results. No lesions of hog cholera have been found in any of the pigs that died, but 232 have been treated with a preventive serum as a precautionary measure.

On June 30 the stock inventory showed 45 brood sows, 3 boars, 126 fattening hogs and 207 shoats, a total of 381. During the year 91,050½ lbs. of pork and 70 lbs. of liver were produced for use at the institution. The value of this and the manure amounted to \$15,598.76, an increase of \$2,873.62 over last year when the previous record was obtained.

HENNERY

Production in this plant has been increased during the past year. Two colony brooder houses, each of 350 chick capacity, were built by the hospital mechanics and the old brooder house with a capacity of 1,300 chicks was put in condition for use. Two thousand day old white leghorn chicks were shipped to the institution by parcel post, arrived in good condition, and were put in the brooders on April 29. These have now reached broiler size and some of the cockerels are now being killed for institutional use. The pullets are being kept to provide increased egg production next year. The total valuation of hennery products this year was \$4,272.57, an increase of more than \$1,100 over last year.

MATTRESS SHOP

In the hospital mattress shop, under the supervision of Mr. Albert Olin, a great variety of work has been carried on. Mattresses have been made and repaired, also pillows, awnings, shades and slip covers; furniture has been upholstered, carpets made and put down, linoleum laid and shoes and harnesses repaired. Some of the items in the list of work accomplished are as follows: 224 new mattresses made and 1,860 mattresses made over; 667 new hair pillows and 118 new feather pillows were made and 997 pillows made over; 97 pieces of furniture were

upholstered; 260 shades made and 93 shades repaired; 217 pieces of harness and 1,816 pairs of shoes were repaired. A total of 3,897 pieces of new work and 7,130 repairs were completed during the year.

MISCELLANEOUS

A blueprint has been received from the Central Office, Division of Architecture and Construction, made after careful study of the bakery building, the supports and the existing strains and stresses; this specifies the storage capacity of the floor above the bakery, showing how much space can be used in each room and the height to which bags of flour can be carried. This has been of practical value since the subject had been controversial for a long time and insufficient storage here means much additional labor in handling and trucking flour.

The hospital railroad spur measures a trifle over 2.3 miles. Ties and switch timbers for replacing old and damaged stock have been purchased this year as usual and a few have been installed when time permitted. Trees cut on the hospital property over which a high-powdered electric line passes were removed by representatives of the electrical company and placed at the saw-mill and incinerator. At the saw-mill posts have been cut from this lumber and used for fencing pasture; a considerable quantity of usable material remains. The supply deposited at the incinerator was sold for \$75.00 and removed by the purchaser. During the year the revenue from ashes sold amounted to \$3,419.01. To prevent unauthorized removal of ashes from the dump near the gas plant, two gates were placed across the roads leading to this and have been kept locked at night.

INVENTORY

The annual inventory was made at the business office, using the same system as in former years. The appraised valuation was as follows:

Real estate.....	\$10,393,539.94
Personal property	1,155,186.46
Total.....	<u>\$11,548,726.40</u>

In connection with this inventory it may be observed that the valuation of personal property is slightly lower than last year, the difference amounting to \$7,388.68. This may be explained by the fact that the prices of many stock supplies have been lower this year, so articles purchased during the past twelve months to replace those acquired when higher prices prevailed have, together with normal depreciation, reduced the valuation of hospital furnishings below the figures added by such new equipment as did not come under the head of replacements. The increase in real estate valuation was \$339,937.33, which made the total increase in inventory \$332,548.65.

RECOMMENDATIONS

EMPLOYEES' HOUSING

With money already provided, it will be possible to construct the first unit of housing for the employees of the Dormitory Building group, consisting of the Dormitory Building itself, the Senile Building and the Tuberculosis Building, now under construction. In all this group will require about 125 attendants.

The first unit will give quarters for only about half of these and another unit of similar size should be added immediately in order that this large group of patients may not suffer from insufficient employees.

REMOVAL OF FARM STABLE AND SHEDS

In order to remove the nuisance of a large horse stable from the close vicinity of residential buildings, the present stables and farm sheds should be torn out and reconstructed near the dairy barns. In their present location these buildings are much too close to the large kitchens and several of the residence cottages for comfort and hygiene, and the first unit of employees' housing is designed for a location even nearer to the stables than the existing structures.

HOUSING FOR PHYSICIANS

As other state institutions are coming to realize the necessity of attractive living conditions if a sufficient staff of desirable type is to be maintained and are providing single cottages at least for men of

senior rank, we must be prepared to do as much if we are to obtain and retain physicians of the high calibre necessary to a curative hospital. Accordingly I recommend that the construction of separate cottages be continued until all of the senior physicians are provided with such quarters.

LODGE HOUSE AND GATES

While the state hospital welcomes sincerely interested visitors it cannot have its patients and employees constantly subjected to dangers and annoyance by irresponsible persons seeking a "thrill" of any type whatsoever. Many hundreds of cars pass up and down our Central Avenue whose occupants have no legitimate business upon the property. If they were quiet and orderly, there would be no objection to their presence, but they are not content to drive slowly about and then leave the grounds; they get out of their automobiles to peer through windows at the patients as if they were attending a public carnival; they picnic anywhere, on the front lawns of the officers' homes or in the patients' recreation groves, usually leaving papers, broken bottles and tin cans behind them; they carry away anything that appeals to their fancy, even digging up flower beds and shrubbery; they make insulting remarks to any women they see walking unescorted. Most annoying of all they drive at reckless speed over the hospital roads, imperiling legitimate traffic, and often constituting a very real hazard for groups of patients either working or engaged in recreation along the roadsides. We have tried to check this nuisance by having our officers patrol the grounds, and by arranging with the State Police to make frequent trips of inspection, but it would take a large force to afford adequate protection. I feel that only by erecting a lodge house and gates at the entrance to the Central Avenue and suitable gates at other entrances to the hospital property can we hope to maintain order upon our roads and grounds.

UNCLIMBABLE FENCE

Unclimbable fence has already been used with most satisfactory results around a considerable portion of the hospital boundary, especially where it lies along a public highway. This fencing should be continued each year until we are completely protected.

DEEP WELL

The deep well in Morris Plains has proved to be a complete success and has provided a good reserve of water supply through two successive dry seasons. The water is of excellent quality, and does not itself require chlorination. Unfortunately, it furnishes only about half as much as is used at the institution, and we have to depend upon the reservoir system for the balance. If we had another well equally good, the entire potable supply for the institution could be piped directly to the buildings, without passing through the reservoirs and chlorinating plant. This would not only provide much better water for domestic purposes, but would be less expensive, since the cleaning of reservoirs and filters, upkeep of purifying system, and safeguarding of the watershed are all time and labor consuming tasks. The reservoir system under this plan could be held as a reserve for fire protection and would not then require the careful inspection needed by a potable supply.

UPKEEP AND MAINTENANCE OF ROADS

In order to protect the roads, especially the new surface of Central Avenue, from the serious damage due to excessive wear, a sum of money should be set aside for materials for road surfacing and repair, so that the hospital force can give immediate attention to any worn areas. We have found this year that having the institutional roads tarred has been a protection to the roads and also a saving in the wear and tear on hospital vehicles resulting from rough and rutted thoroughfares.

PLANTS, TREES, SHRUBS, GRADING, SIDEWALKS

Each new building constructed requires grading, driveways, walks, and landscaping. This work can all be done by the institution if a sufficient sum is appropriated to provide materials. A considerable area at the rear of the Reception Building and the Employees' Residence has not yet been completed, and the vicinity of the Service Building, Senile Building, Occupational Therapy Building and two physician's cottages will also require a large amount of work. If money is available for the necessary supplies, it will be possible to continue this work without delay throughout the year, whenever weather conditions are suitable.

APPOINTMENTS AND RESIGNATIONS

Resident Physicians Appointed:

C. E. F. Laatsch, M.D.	July 1, 1929
Vernon L. Eley, M.D.	" 2, "
Thomas G. Peacock, M.D.	October 4, "
W. H. Minford, M.D.	" 7, "
Layman R. Harrison, M.D.	" 14, "
Ferdinand Schmitter, M.D.	December 15, "
James M. Lasley, M.D.	March 10, 1930
Bernard Glick, M.D.	April " "

Resident Physicians' Resignations:

Antonio Hubert, M.D.	September 3, 1929
George W. Comeau, M.D.	" 5, "
Jack Brenner, M.D.	" 14, "
David P. Young, M.D.	" 15, "
Frederick S. Lawson, M.D.	" 30, "
Theodore B. Dunn, M.D.	October 1, "
Vernon L. Eley, M.D.	November 30, "
Ferdinand Schmitter, M.D.	January 13, 1930
James K. Pollock, M.D.	June 10, "

Non-Resident Physicians' Resignations:

John H. Cassity, M.D., Assistant in Mental Hygiene Clinics	July 22, 1929
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Other Resident Officers Appointed:

Paul M. Hart, D.D.S., Dental Interne	August 22, "
John A. McCluskey, D.D.S., Dental Interne	January 20, 1930
George J. Holbig, Business Manager	February 15, "

Other Resident Officers' Resignations:

Arthur Von Deilen, D.D.S., Resident Dentist	September 27, 1929
George J. Hamberger, Business Manager	January 31, 1930

Promotions and Transfers of Physicians and Other Officers:

Mildred H. Hurley, Directress of Social Service, Mental Hygiene Clinics	July 1, 1929
Phyllis Pointon, Directress of Hospital Psychiatric Social Service	July 16, "
Lindsay Robinson, M.D., Assistant in Mental Hygiene Clinics	November 1, "
Stella McClurkin, Directress of Occupational Subjects	December 9, "
Natalie L. Reilly, Directress Occupational Subjects	" " "
Howard E. Thompson, D.D.S., Junior Resident Dentist	January 16, 1930
Raymond J. Harquail, M.D., Senior Resident Physician	June " "

LOSS OF EMPLOYEES

There have been this year four deaths among the employees of the institution. David Daniels, a carpenter having been employed since February 15, 1927, died on October 31, 1929. Hugo Huttig, a charge attendant, died on April 16, 1930, having been continuously in service on the wards since April 23, 1912. D. C. Van Syckle died on September 5, 1929. He was first employed at the institution from July 28, 1896, to March 14, 1907, as a truckman; he then returned as a mason's assistant on April 19, 1910, and remained continuously in that division until his death.

Edward Beers died on September 8, 1929, with the longest record of service of any employee of the institution. During construction work on the Main Building he was employed on the grounds by the contractors engaged in the building operations his service beginning on August 1, 1874. After the institution was opened for patients he entered the employ of the State as a team driver on March 27, 1876, and continued in that capacity until September 1, 1929, when he retired under the pension system, after more than fifty-five years of service to the institution. Shortly before his retirement he had sustained what seemed to be a very minor injury, but an infection developed and death occurred eight days after his retirement became effective.

One other employee retired on pension during the year, Miss Elizabeth G. Brennan. She entered the employ of the institution on May 12, 1891, was one of the early graduates from the old training school, and for many years was a supervisor at the Dormitory Building. Later she was in charge of the house rented in Morris Plains for women attendants, and when the new Employees' Residence was opened she became one of the matrons in charge there. Her retirement became effective on February 1, 1930, after almost thirty-nine years of service, the greater part of it spent in the active care of patients on the wards.

DISTINGUISHED VISITORS

Within the past twelve months we have been favored with even more than our average number of distinguished visitors. Several large groups have made an inspection of the institution, with par-

ticular interest in the new buildings and the treatment facilities. On January 23, Dr. R.L. Leak, Superintendent of the Connecticut State Hospital at Middletown, Mr. Walter Crabtree, Hospital Architect, and Mr. H.B. Senior, Chairman of the Building Committee of Connecticut, were visitors at this hospital. On February 20, Dr. Edwin C. Cocks, Superintendent of Western State Hospital, Bolivar, Tennessee, Capt. R.H. Lyle, Commissioner of the Department of Institutions and Agencies, Nashville and Mr. W. C. Hedrick, Architect in State Work in Tennessee, Memphis, accompanied by Dr. Sutton of Essex County Hospital at Cedar Grove, made a tour of inspection and gathered data with particular reference to the Reception Building. On May 14, this hospital was selected for a visit by several foreign physicians who had been commissioned by their governments to attend the First International Congress of Mental Hygiene at Washington, D. C. The list comprised Gustav Kolb, M. D., Director of the Hospital and Sanitarium at Erlangen, Bavaria, member of the Board of Directors of the German Psychiatric Association and the German Association for Mental Hygiene; Hermann Simon, M.D. Director of the Provincial Hospital for Mental Diseases at Gutersloh, member of the Board of Directors of the German National Committee for Psychiatry, the Society for Psychotherapy and Neurology; Hans Roemer, M.D. Medical Counsellor to the Baden Ministry of the Interior, Secretary of the German Association for Mental Hygiene, Director of the Institute for Mental Disease, Illenau, Chairman of the Baden Association for Helping Persons with Mental Diseases; J. P. Pameijer, M. D., Medical Director of the Maasoord Mental Hospital, Rotterdam, member of the Committee of the Dutch Society for Social Care of Mental Patients, member of the Dutch Association for Psychiatry, and corresponding member of the British Royal Medico-Psychological Association; Carl Hermkes, M. D., of Eikelborn, Westphalia, and Gustav Gniser of Munster, Westphalia. They were accompanied by Dr. William Van de Wall of the Bureau of Mental Health, Harrisburg, Pa. On May 21, we were favored with a visit by a group from Canada, Mr. Ross, Member of Parliament and newspaper correspondent of Ottawa, Dr. McCutcheon, Head of the Royal

Civil Service Commission of Ottawa, and W. G. Frisby, Secretary of the Royal Commission of Public Welfare of Toronto.

On January 28, the Joint Appropriations Committee paid their annual visit to this institution; beside the members of the committee, Commissioner Ellis, several other representatives of his Department, and members of our own Board of Managers, the group entertained at dinner included Mr. Earle, Chairman and Mrs. Thompson, member of the State Board of Control; Senator and Mrs. Frank D. Abell and Mr. and Mrs. Murray Coggeshall of Morristown. On March 7, a group of persons interested in tuberculosis work were entertained at lunch. Among those present were Dr. English of Glen Gardner, Dr. Douglas of the Passaic County Hospital for the Tuberculous, Dr. Elvira Dean Abell, Mrs. Thomas B. Streeter, and Freeholder Kirkpatrick of Morristown. On April 16, a meeting of the Morris County Medical Society was held at the institution at which Dr. Walter Timme of New York, President of the American Society for Research in Nervous and Mental Diseases, was principal speaker. Before the meeting Dr. Timme was entertained at a dinner at which Commissioner Ellis and Dr. Knight, Dr. O'Hanlon, and Mrs. Doyle of our Board were present.

Other visitors of note during the year include Dr. Ross M. Chapman, Superintendent of Sheppard and Enoch Pratt Hospital, Towson, Md.; Dr. and Mrs. Paul H. Salmond, of the State Institution at Mansfield, Conn.; Dr. John B. Brennan, former President of the Board of Trustees of Bellevue Hospital; Hon. Patrick Moynihan, son of the famous English surgeon, Lord Moynihan; Dr. Ambrose Dowd of Newark, Dr. and Mrs. John Nevin of Jersey City, and Dr. Thomas H. Haynes of Montclair, formerly an officer in the National Committee for Mental Hygiene. Superintendents and officers of other institutions in the State have paid us numerous visits. Among those not already mentioned were Dr. Guy Payne, Superintendent of Essex County Hospital; Dr. George W. King, Superintendent of Hudson County Hospital; Major Kimberling, Superintendent of Rahway Reformatory; Mr. Samuel Atchley, Warden, and Mr. Amberg, Assistant Warden of Trenton State Hospital; Mr. George Giger

Superintendent of Annandale Reformatory; Dr. Joseph R. Morrow, Superintendent of Bergen Pines; Dr. Dan S. Renner, Superintendent of Skillman, and Mr. A. H. Meese, Superintendent of the Training School at Totowa.

Commissioner Ellis has devoted a great deal of time to this institution and kept in close personal touch with the various phases of the work being done. The members of the Central Office who have also paid us frequent visits include Mr. Leathem, Mr. Mills, Mr. Gerry, Mr. Houston and Mr. Rockhill. Mr. E. P. Earle, Chairman of the State Board of Control, has made frequent contacts with the institution throughout the year.

The Board of Freeholders of the different Counties from which our patients are drawn have paid their usual visits of inspection. Senator Abell has been in constant touch with conditions and needs at this hospital and Senator Carhart has also shown a great deal of interest in the work being done here. Various members of the Assembly have called upon us from time to time. In fact, there has hardly been a week during the entire year when we have not entertained visitors of note, and we heartily appreciate the interest in our patients and in the efforts which the State is making on their behalf which prompts this generous expenditure of time and effort.

ACKNOWLEDGMENTS

I wish to take this opportunity to express my sincere appreciation of the kindness and generosity of those friends to the sick and the afflicted who have given of their time, their talent or their worldly goods this year in order to bring comfort and happiness to our patients. Many organizations, fraternal, patriotic, service, or religious in character have donated gifts or entertainments. Individuals in all grades of society, from great singers and brilliant composers to the humblest relatives of indigent patients have contributed according to their ability and in giving have brought happiness to those in need. We have tried to acknowledge by personal or written thanks, or by paragraphs in the *Psychogram* all of the contributions received, but many gifts and kindnesses to individual patients have doubtless been allowed to pass without

such recognition. On behalf of our sick people I hereby tender most earnest thanks to all these friends in the outside world, and also to the individual members of the Board of Managers, to the resident officers and the many employees who have gone far beyond any possible requirements of their positions in order to do just a little bit more, many many times over, because they saw a way to be of service to people who needed help.

CONCLUSION

As I come to the end of my tenth annual report, I wish to express in some slight measure my appreciation of the faithful and loyal support which has been given to the institution and to me as superintendent by the resident officers and the many employees in all grades who have done their individual work to the best of their abilities. The consultants, too, have responded willingly to all calls, and Dr. Mills, Surgeon, and Dr. Bartleman, dental surgeon, have been especially frequent visitors at the hospital. This year the institution has demanded more than its usual share of attention from Commissioner Ellis, the Central Office, and the State Board of Control, yet they have continually given advice and support to meet our every need. The members of the Board of Managers, individually and collectively, have been alert to all the interests of the hospital, have devoted unceasing effort to promoting the welfare of the patients, and have encouraged the resident officers with their enthusiasm for the work and their ready cooperation in all plans for better service. So, in closing, I am profoundly grateful to all who have helped to produce the results which have been accomplished this year, and especially to Commissioner Ellis and the members of the Board for the friendly basis upon which all our relationships have been maintained.

Respectfully submitted,

Marcus A. Curry, M.D.

Superintendent

TABLE I
GENERAL INFORMATION

Data correct at end of hospital year, June 30, 1950

1. Date of opening as a hospital for mental diseases	August 17, 1910
2. Type of hospital	State
3. Hospital plant	
4. Value of hospital property	\$10,392,530.91
5. Real estate, including buildings	1,154,150.40
6. Personal property	211,848,730.40
7. Total	
8. Total acreage in hospital property owned	67.40
9. Additional acreage rented	None
10. Total acreage under cultivation during previous year	25.57

4. OFFICERS AND EMPLOYEES
Actually in service at end of Year

11. Psychiatrists	1
12. Physicians	1
13. Surgeons	1
14. Dentists	1
15. Nurses	1
16. Hospital attendants	1
17. Other employees	1
18. Total	7

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

1. Total officers and employees	250
2. All other officers and employees	230
3. Psychiatrists	1
4. Physicians	1
5. Surgeons	1
6. Dentists	1
7. Nurses	1
8. Hospital attendants	1
9. Other employees	1
10. Total	7
11. Total officers and employees	250
12. All other officers and employees	230
13. Psychiatrists	1
14. Physicians	1
15. Surgeons	1
16. Dentists	1
17. Nurses	1
18. Hospital attendants	1
19. Other employees	1
20. Total	7

TABLE 1.

GENERAL INFORMATION

Data correct at end of hospital year, June 30, 1930

1. Date of opening as a hospital for mental diseases.....	August 17, 1876
2. Type of hospital.....	State
3. Hospital plant—	
Value of hospital property:	
Real estate, including buildings.....	\$10 393,539.94
Personal property.....	1,155,186.46
Total.....	\$11,548,726.40
Total acreage of hospital property owned.....	929.49
Additional acreage rented.....	None
Total acreage under cultivation during previous year.....	251.57

4. OFFICERS AND EMPLOYEES

Actually in Service at End of Year

	Males	Females	Total
Superintendents.....	1	..	1
Clinical directors.....	2	..	2
Assistant physicians.....	20	1	21
Pathologists.....	1	..	1
Consulting surgeons.....	1	..	1
Total physicians.....	25	1	26
Business managers.....	1	..	1
Assistant to Chief Executive Officer.....	1	..	1
Resident dentists.....	2	..	2
Consulting dentists.....	1	..	1
Pharmacists.....	2	..	2
Engineer.....	1	..	1
Graduate nurses.....	6	56	62
Superintendent of Nurses.....	..	1	1
Other nurses and attendants.....	226	200	426
Occupational therapists.....	9	22	31
Social workers.....	..	12	12
Teachers of Physical Training.....	1	8	9
All other officers and employees.....	276	93	369
Total officers and employees.....	526	392	918

TABLE I. (Continued.)

5. CENSUS OF PATIENT POPULATION AT END OF YEAR

	Actually in Hospital			Absent from Hospital but Still on Books		
	Males	Females	Total	Males	Females	Total
White—						
Insane	1,806	1,858	3,664	147	166	313
Epileptics .....	..	..	..	..	..	..
Mental defectives	11	13	24	..	..	..
Alcoholics .....	..	..	..	..	..	..
Drug addicts .....	..	..	..	..	..	..
Neurosyphilitics (without psychosis) .....	..	..	..	..	..	..
All other cases .....	..	..	..	..	..	..
Total	1,817	1,871	3,688	147	166	313
Other Races—						
Insane	104	107	211	16	8	24
Epileptics .....	..	..	..	..	..	..
Mental defectives .....	..	..	..	..	..	..
Alcoholics .....	..	..	..	..	..	..
Drug addicts .....	..	..	..	..	..	..
Neurosyphilitics (without psychosis) .....	..	..	..	..	..	..
All other cases .....	..	..	..	..	..	..
Total	104	107	211	16	8	24
Grand total	1,921	1,978	3,899	163	174	337
6. Patients under treatment in occupational therapy classes, including physical training, on date of report				362	1,489	1,851
7. Other patients employed in general work of hos- pital on date of report				897	1,109	2,006
8. Average daily number of all patients actually in hospital during year			1,839.4	1,909	3,748.4	
9. Voluntary patients admitted during year				66	49	115
10. Persons given advice or treatment in out-patient clinics during year				1,243	953	2,196

TABLE II.

FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 1930

RECEIPTS

Balance on hand from previous fiscal year.....	\$.....
Received from appropriations.....	2,347,906.71
Received from paying patients.....	162,324.90
Received from all other sources.....	727,742.65
Total receipts.....	\$3,237,974.26

DISBURSEMENTS

1. Expenditures for maintenance of patients:	
Salaries and wages.....	\$971,753.01
Provisions (food).....	382,531.64
Fuel, light and water.....	126,000.00
All other expenditures for maintenance.....	369,428.42
Total expenditures for maintenance.....	\$1,849,713.07
2. Expenditures for all purposes other than maintenance, including new buildings, other additions and permanent betterments.....	668,436.86
3. Expenditures for repayment of loans and interest on loans.....	.....
Total expenditures.....	\$2,518,149.93
Amount returned to State Treasurer.....	719,824.33
Balance on hand at close of year.....	.....
Total disbursements.....	\$3,237,974.26

TABLE III.

MOVEMENT OF INSANE PATIENT POPULATION

For year beginning July 1, 1929, and ended June 30, 1930

	Males	Females	Total
1. Insane patients on records of hospital at beginning of hospital year:			
a—In hospital.....	1,780	1,866	3,646
b—On parole or otherwise absent.....	149	202	351
Total.....	1,929	2,068	3,997
2. Admissions during year:			
a—First admissions.....	474	419	893
(Includes all patients admitted for the first time to any hospital for mental diseases, public or private, wherever situated, in or outside of State, excepting institutions for temporary care.)			
b—Readmissions.....	79	86	165
(Includes all patients admitted who have been previously under treatment in a hospital for mental diseases excepting transfers and patients who have received treatment only in institutions for temporary care.)			
c—Transfers from other hospitals for mental diseases.....	17	7	24
(Includes all patients coming directly from any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
3. Total received during year.....	570	512	1,082
(Includes total of items 2 a, b and c.)			
4. Total on books during year.....	2,499	2,580	5,079
(Includes total of items 1 and 3.)			

TABLE III. (Continued.)

5. Discharged from books during year:			
(Does not include patients away from hospital on parole, on visit, or on other temporary leave from hospital.)			
a—As recovered.....	112	130	242
b—As improved.....	98	103	201
(Does not include transfers.)			
c—As unimproved.....	15	29	44
(Includes all patients discharged not benefited by treatment, exclusive of transfers.)			
d—As without psychosis.....	16	2	18
(Includes all discharged patients who are found to have had no psychosis.)			
e—Transferred to other hospitals for mental diseases.....	4	7	11
(Includes all patients sent directly to any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
f—Died during year.....	170	157	327
6. Total discharged, transferred and died during year.....	415	428	843
(Includes total of items 5 a, b, c, d, e and f.)			
7. Insane patients remaining on books of hospital at end of hospital year:			
a—In hospital.....	1,921	1,978	3,899
b—On parole or otherwise absent.....	163	174	337
Total.....	2,084	2,152	4,236

TABLE IV.

NATIVITY OF FIRST ADMISSIONS AND OF PARENTS OF FIRST ADMISSIONS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Males	Females	Total	Fathers	Mothers	Both Parents	Fathers	Mothers	Both Parents
United States....	285	255	540	167	177	161	145	158	135
Africa.....	..	..	..	..	..	..	..	..	..
*Asia.....	..	..	..	..	..	..	..	..	..
Australia.....	..	..	..	1	1	1	..	..	..
Austria.....	10	19	29	17	18	17	21	22	20
Belgium.....	..	1	1	..	..	..	2	2	2
†Canada.....	2	4	6	1	2	1	3	3	2
Central America..	..	..	..	..	..	..	..	..	..
China.....	..	..	..	..	..	..	..	..	..
Czecho-Slovakia..	7	1	8	4	4	4	2	2	2
Cuba.....	..	..	..	..	..	..	..	..	..
Denmark.....	3	1	4	3	3	3	2	1	1
England.....	4	14	18	12	15	11	17	18	14
*Europe.....	..	..	..	2	2	2	1	1	1
Finland.....	2	..	2	2	2	2	..	..	..
France.....	1	2	3	2	..	..	6	5	5
Germany.....	34	22	56	60	51	49	48	41	36
Greece.....	1	1	2	3	3	3	2	2	2
Holland.....	2	6	8	4	5	3	7	7	7
Hungary.....	8	4	12	10	9	9	8	7	7
India.....	..	..	..	..	..	..	..	..	..
Ireland.....	18	19	37	44	43	41	51	50	45
Italy.....	39	22	61	47	46	46	29	28	28
Japan.....	..	..	..	..	..	..	..	..	..
Jugo-Slavia.....	..	..	..	1	..	..	..	..	..
Mexico.....	1	..	1	1	1	1	..	..	..
Norway.....	1	..	1	2	1	1	1	1	1
Philippine Islands	..	..	..	..	..	..	..	..	..
Poland.....	21	19	40	23	23	23	24	23	23
Porto Rico.....	..	..	..	..	..	..	..	..	..
Portugal.....	4	..	4	4	4	4	..	..	..
Roumania.....	1	1	2	2	2	2	1	1	1
Russia.....	11	10	21	17	17	17	13	12	12
Scotland.....	4	2	6	11	8	8	3	1	1
South America...	2	1	3	1	1	1	1	1	1
Spain.....	..	1	1	..	..	..	1	1	1
Sweden.....	3	3	6	4	4	4	4	2	2
Switzerland.....	..	1	1	..	1	..	2	3	1
Turkey-in-Asia..	..	..	..	..	..	..	..	..	..
Turkey-in-Europe	1	1	2	2	2	2	..	..	..
Wales.....	..	..	..	..	..	..	..	..	..
†West Indies....	2	..	2	3	3	3	..	..	..
Other countries...	..	6	6	3	3	3	7	6	6
Unascertained....	7	3	10	21	23	21	18	21	15
Total.....	474	419	893	474	474	443	419	419	371

*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	Aggregate			NATIVE BORN												FOREIGN BORN												Nativity unascertained																	
				Total			PARENTAGE												Total			TIME IN UNITED STATES BEFORE ADMISSION																							
	Native						Foreign			Mixed			Unascertained			Under 5 years						5-9 years			10-14 years			15 years and over			Unascertained														
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.												
Under 15 years ..	2	..	2	2	..	2	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15-19 years	24	18	42	22	16	38	9	5	14	9	9	18	4	2	6	..	..	..	2	2	4	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20-24 years	46	34	80	38	26	64	17	12	29	15	9	24	4	5	9	2	..	2	8	8	16	2	4	6	..	1	1	2	1	3	2	1	3	2	1	3			
25-29 years	41	32	73	27	20	47	18	13	31	7	5	12	2	1	3	..	1	1	14	11	25	5	..	5	1	6	7	2	2	4	3	2	5	3	1	4			
30-34 years	63	47	110	39	23	62	19	13	32	15	4	19	2	5	7	3	1	4	24	23	47	3	1	4	3	3	6	2	1	3	10	15	25	6	3	9
35-39 years	52	49	101	28	32	60	18	16	34	5	7	12	4	8	12	1	1	2	23	16	39	..	1	1	2	..	2	1	1	2	11	11	22	9	2	11	1	1	2
40-44 years	59	45	104	28	30	58	17	16	33	6	5	11	3	9	12	2	..	2	30	15	45	1	..	1	2	2	4	1	..	1	19	12	31	7	1	8	1	1	2
45-49 years	39	38	77	21	20	41	12	8	20	5	6	11	2	5	7	2	1	3	16	18	34	..	1	1	..	1	1	1	1	2	8	12	20	7	3	10	2	..	2
50-54 years	31	34	65	18	22	40	11	15	26	4	5	9	2	1	3	1	1	2	13	12	25	1	..	1	2	..	2	7	11	18	3	1	4
55-59 years	38	29	67	22	16	38	14	7	21	4	5	9	3	3	6	1	1	2	16	13	29	..	2	2	11	7	18	4	2	6
60-64 years	23	25	48	12	16	28	6	9	15	5	6	11	1	..	1	..	1	1	11	9	20	7	7	14	4	1	5
65-69 years	16	15	31	10	5	15	4	1	5	5	3	8	5	10	15	4	9	13	1	1	2
70 years and over	37	49	86	17	26	43	12	18	30	5	6	11	..	2	2	19	23	42	12	14	26	7	8	15	1	..	1
Unascertained....	3	4	7	1	3	4	1	2	3	1	1	1	1	2	1	..	1	1	..	1			
Total.....	474	419	893	285	255	540	160	135	295	85	70	155	27	41	68	13	9	22	182	161	343	12	9	21	9	13	22	11	10	21	95	102	197	55	27	82	7	3	—	—	—	—			

TABLE V.

CITIZENSHIP OF FIRST ADMISSIONS

	Males	Females	Total.
Citizens by birth.....	285	255	540
Citizens by naturalization.....	66	63	129
Aliens.....	60	72	132
Citizenship unascertained.....	63	29	92
Total.....	474	419	893

TABLE VI.

PSYCHOSES OF FIRST ADMISSIONS

<i>Psychoses</i>	M.	F.	T.	M.	F.	T.
1. TRAUMATIC PSYCHOSES.....	..	..	..	6	1	7
2. SENILE PSYCHOSES.....	..	..	..	16	29	45
3. PSYCHOSES WITH CEREBRAL ARTERIOSCLEROSIS.....	..	..	..	97	106	203
4. GENERAL PARALYSIS.....	..	..	..	82	20	102
5. PSYCHOSES WITH CEREBRAL SYPHILIS.....	..	..	..	3	3	6
6. PSYCHOSES WITH HUNTINGTON'S CHOREA.....	..	..	..	..	..	..
7. PSYCHOSES WITH BRAIN TUMOR.....	..	..	..	..	..	..
8. PSYCHOSES WITH OTHER BRAIN OR NERVOUS DISEASES, total.....	..	..	..	7	3	10
a. Cerebral embolism.....	..	..	..	..	..	..
b. Paralysis agitans.....	..	..	..	..	..	..
c. Meningitis, tubercular or other forms.....	..	..	..	..	..	..
d. Multiple sclerosis.....	1	..	1	..	..	..
e. Tabes dorsalis.....	..	..	..	..	..	..
f. Acute chorea.....	..	..	..	..	..	..
g. Other diseases.....	6	3	9	..	..	..
9. ALCOHOLIC PSYCHOSES, total.....	..	..	..	22	1	23
a. Delirium tremens.....	11	1	12	..	..	..
b. Korsakow's psychosis.....	1	..	1	..	..	..
c. Acute hallucinosis.....	8	..	8	..	..	..
d. Other types, acute or chronic.....	2	..	2	..	..	..
	M.	F.	T.	M.	F.	T.
10. PSYCHOSES DUE TO DRUGS AND OTHER EXOGENOUS TOXINS, total.....	..	..	..	2	..	2
a. Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined.....	2	..	2	..	..	..
b. Metals, as lead, arsenic, etc.....	..	..	..	..	..	..
c. Gases.....	..	..	..	..	..	..
d. Other exogenous toxins.....	..	..	..	..	..	..
11. PSYCHOSES WITH PELLAGRA.....	..	..	..	1	..	1

TABLE VI. (Continued.)

12. PSYCHOSES WITH OTHER SOMATIC DISEASES, total.....	..	..	..	10	5	15
a. Delirium with infectious diseases...	..	..	..	..	..	..
b. Post-infectious psychosis.....	1	..	1	..	..	..
c. Exhaustion delirium.....	..	..	..	..	..	..
d. Delirium of unknown origin.....	..	..	..	..	..	..
e. Cardio-renal diseases.....	1	..	1	..	..	..
f. Diseases of the ductless glands.....	..	..	..	..	..	..
g. Other diseases or conditions.....	8	5	13	..	..	..
13. MANIC-DEPRESSIVE PSYCHOSES, total.....	..	..	..	57	94	151
a. Manic type.....	24	34	58	..	..	..
b. Depressive type.....	19	26	45	..	..	..
c. Other types.....	14	34	48	..	..	..
14. INVOLUTION MELANCHOLIA.....	..	..	..	7	20	27
15. DEMENTIA PRÆCOX (schizophrenia)..	..	..	..	106	81	187
16. PARANOIA AND PARANOID CONDITIONS.....	..	..	..	8	7	15
17. EPILEPTIC PSYCHOSES.....	..	..	..	4	5	9
18. PSYCHONEUROSES AND NEUROSES, total.....	..	..	..	7	12	19
a. Hysterical type.....	1	2	3	..	..	..
b. Psychasthenic type (anxiety and obsessive forms).....	3	5	8	..	..	..
c. Neurasthenic type.....	3	5	8	..	..	..
d. Other types.....	..	..	..	..	..	..
	M.	F.	T.	M.	F.	T.
19. PSYCHOSES WITH PSYCHOPATHIC PERSONALITY.....	..	..	..	7	4	11
20. PSYCHOSES WITH MENTAL DEFICIENCY.....	..	..	..	7	15	22
21. UNDIAGNOSED PSYCHOSES.....	..	..	..	7	8	15
22. WITHOUT PSYCHOSIS, total.....	..	..	..	18	5	23
a. Epilepsy without psychosis.....	..	..	..	..	..	..
b. Alcoholism without psychosis.....	6	..	6	..	..	..
c. Drug addiction without psychosis...	1	1	2	..	..	..
d. Psychopathic personality without psychosis.....	7	..	7	..	..	..
e. Mental deficiency without psychosis.....	3	2	5	..	..	..
f. Others.....	1	2	3	..	..	..
Total.....	..	..	..	474	419	893

TABLE IX.

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

PSYCHOSES	Total			Illiterate			Reads and writes*			Common school			High school			College			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	6	1	7	1		1	1		1	3	1	4	1		1				6	12	18
2. Senile.....	16	29	45		5	5		1	1	9	11	20									
3. With cerebral arteriosclerosis....	97	106	203	6	12	18	26	10	36	49	48	97	3	4	7	1	1	2	12	31	43
4. General paralysis....	82	20	102	3	2	5	21	9	30	37	5	42	5		5	2		2	14	4	18
5. With cerebral syphilis.....	3	3	6				1		1	2	2	4								1	1
6. With Huntington's chorea.....																					
7. With brain tumor...																					
8. With other brain or nervous diseases..	7	3	10							4	2	6	2		2			1	1	1	1
9. Alcoholic.....	22	1	23	3		3	7		7	10		10							2	1	3
10. Due to drugs & other exogenous toxins.	2		2							1		1	1		1						
11. With pellagra.....	1		1																		
12. With other somatic diseases.....	10	5	15				3	2	5	6	3	9							1		1
13. Manic-depressive...	57	94	151	2	4	6	8	26	34	36	46	82	7	12	19	2	2	4	2	4	6
14. Involution melancholia.....	7	20	27		1	1		3	3	6	16	22							1		1
15. Dementia præcox...	106	81	187	2	2	4	26	19	45	57	43	100	7	12	19	5	1	6	9	4	13
16. Paranoia or paranoid conditions...	8	7	15				1	1	2	4	6	10				2		2	1		1
17. Epileptic psychoses.	4	5	9				2	2	4	2	3	5									
18. Psychoneuroses and neuroses.....	7	12	19				1	1	2	3	7	10	2	4	6	1		1			
19. With psychopathic personality.....	7	4	11				1		1	5	2	7	1	2	3						
20. With mental deficiency.....	7	15	22	1	4	5	4	7	11	1	3	4							1	1	2
21. Undiagnosed psychoses.....	7	8	15	2	1	2	5	4	9	3	3	3								1	1
22. Without psychosis..	18	5	23	2	1	3	3	2	5	3	1	4	4	1	5	4		4	2		2
Total.....	474	419	893	22	31	53	110	87	197	238	202	440	33	35	68	18	5	23	53	59	112

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

TABLE X.

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Urban			Rural			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	6	1	7	6	1	7						
2. Senile.....	16	29	45	16	24	40		4	4		1	1
3. With cerebral arteriosclerosis...	97	106	203	89	97	186	8	8	16		1	1
4. General paralysis...	82	20	102	80	20	100	1		1	1		1
5. With cerebral syphilis.....	3	3	6	3	3	6						
6. With Huntington's chorea.....												
7. With brain tumor...												
8. With other brain or nervous diseases..	7	3	10	6	2	8	1	1	2			
9. Alcoholic.....	22	1	23	20	1	21	2		2			
10. Due to drugs & other exogenous toxins.	2		2	2		2						
11. With pellagra.....	1		1	1		1						
12. With other somatic diseases.....	10	5	15	9	5	14	1		1			
13. Manic-depressive...	57	94	151	52	86	138	5	7	12		1	1
14. Involution melan- cholia.....	7	20	27	6	18	24	1	2	3			
15. Dementia præcox...	106	81	187	102	71	173	3	10	13	1		1
16. Paranoia or para- noid conditions...	8	7	15	8	6	14		1	1			
17. Epileptic psychoses.	4	5	9	4	4	8		1	1			
18. Psychoneuroses and neuroses.....	7	12	19	6	10	16	1	2	3			
19. With psychopathic personality.....	7	4	11	6	3	9	1	1	2			
20. With mental deficiency.....	7	15	22	6	11	17	1	4	5			
21. Undiagnosed psychoses.....	7	8	15	6	8	14	1		1			
22. Without psychosis...	18	5	23	14	5	19	3		3	1		1
Total.....	474	419	893	442	375	817	29	41	70	3	3	6

TABLE XI.

ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Dependent			Marginal			Comfortable			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	6	1	7	2	1	3	3		3	1		1			
2. Senile.....	16	29	45	5	19	24	9	5	14	1	3	4	1	2	3
3. With cerebral arteriosclerosis...	97	106	203	35	66	101	47	26	73	10	12	22	5	2	7
4. General paralysis...	82	20	102	22	14	36	47	6	53	11		11	2		2
5. With cerebral syphilis.....	3	3	6	2	1	3	1	2	3						
6. With Huntington's chorea.....															
7. With brain tumor...															
8. With other brain or nervous diseases..	7	3	10	4	1	5	3	2	5						
9. Alcoholic.....	22	1	23	4	1	5	13		13	4		4	1		1
10. Due to drugs & other exogenous toxins..	2		2	1		1	1		1						
11. With pellagra.....	1		1	1		1									
12. With other somatic diseases.....	10	5	15		2	2	10	3	13						
13. Manic-depressive...	57	94	151	5	35	40	35	44	79	15	15	30	2		2
14. Involution melan- cholia.....	7	20	27	1	4	5	5	11	16	1	5	6			
15. Dementia præcox...	106	81	187	31	24	55	52	47	99	22	9	31	1	1	2
16. Paranoia or para- noid conditions...	8	7	15		2	2	3	2	5	5	3	8			
17. Epileptic psychoses.	4	5	9	1	3	4	3	2	5						
18. Psychoneuroses and neuroses.....	7	12	19	1	2	3	2	3	5	4	6	10		1	1
19. With psychopathic personality.....	7	4	11		1	1	6	1	7	1	2	3			
20. With mental deficiency.....	7	15	22	2	6	8	5	9	14						
21. Undiagnosed psychoses.....	7	8	15	3	4	7	3	4	7	1		1			
22. Without psychosis...	18	5	23	4	2	6	7	2	9	7	1	8			
Total.....	474	419	893	124	188	312	255	169	424	83	56	139	12	6	18

TABLE XII.

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

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	6	1	7	3		3	1	1	2	1		1	1		1
2. Senile.....	16	29	45	5	15	20	2		2	4		4	5	14	19
3. With cerebral arteriosclerosis....	97	106	203	18	65	83	31	11	42	18	6	24	30	24	54
4. General paralysis...	82	20	102	14	11	25	26	6	32	16		16	26	3	29
5. With cerebral syphilis.....	3	3	6		2	2	1	1	2	1		1	1		1
6. With Huntington's chorea.....															
7. With brain tumor...															
8. With other brain or nervous diseases..	7	3	10	3	3	6	2		2				2		2
9. Alcoholic.....	22	1	23				1		1	21	1	22			
10. Due to drugs & other exogenous toxins..	2		2								1		1		1
11. With pellagra.....	1		1										1		1
12. With other somatic diseases.....	10	5	15	5	4	9	4	1	5	1		1			
13. Manic-depressive...	57	94	151	28	70	98	17	13	30	7	1	8	5	10	15
14. Involution melan- cholia.....	7	20	27	5	14	19	1	3	4		1	1	1	2	3
15. Dementia præcox...	106	81	187	39	61	100	35	10	45	18	2	20	14	8	22
16. Paranoia or paranoid conditions.....	8	7	15	2	7	9	5		5	1		1			
17. Epileptic psychoses..	4	5	9	2	3	5	2	2	4						
18. Psychoneuroses and neuroses.....	7	12	19	4	11	15	2	1	3	1		1			
19. With psychopathic personality.....	7	4	11	1	2	3	2	2	4	3		3	1		1
20. With mental deficiency.....	7	1	22	3	11	14	2	1	3	1		1	1	3	4
21. Undiagnosed psychoses.....	7	8	15	2	6	8				4		4	1	2	3
22. Without psychosis..	18	5	23	3	5	8	6		6	8		8	1		1
Total.....	474	419	893	137	290	427	140	52	192	106	11	117	91	66	157

TABLE XIII.

MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	6	1	7	1		1	3	1	4	1		1							1		1
2. Senile.....	16	29	45	2	5	7	5	3	8	5	20	25				1	1	2	3		3
3. With cerebral arteriosclerosis....	97	106	203	23	26	49	42	35	77	25	38	63	1	3	4	1		1	5	4	9
4. General paralysis....	82	20	102	16	1	17	50	15	65	14	2	16	1	2	3				1		1
5. With cerebral syphilis.....	3	3	6				1	1	2	1	2	3				1		1			
6. With Huntington's chorea.....																					
7. With brain tumor...																					
8. With other brain or nervous diseases...	7	3	10	4	3	7	1		1				1		1				1		1
9. Alcoholic.....	22	1	23	8		8	12	1	13	1		1	1		1						
10. Due to drugs & other exogenous toxins..	2		2				2		2												
11. With pellagra.....	1		1							1		1									
12. With other somatic diseases.....	10	5	15	3		3	5	5	10				1		1	1		1			
13. Manic-depressive...	57	94	151	24	20	44	31	63	94		8	8				2	2	4		1	1
14. Involution melan- cholia.....	7	20	27	2	3	5	5	14	19		1	1					2	2			
15. Dementia præcox...	106	81	187	82	35	117	21	39	60	2	5	7	1	1	2					1	1
16. Paranoia or paranoid conditions.....	8	7	15	1	1	2	6	5	11	1		1					1	1			
17. Epileptic psychoses.	4	5	9	1	4	5	3	1	4												
18. Psychoneuroses and neuroses.....	7	12	19	4	3	7	2	7	9		1	1	1	1	2						
19. With psychopathic personality.....	7	4	11	6	2	8	1	2	3												
20. With mental deficiency.....	7	15	22	6	13	19		2	2	1		1									
21. Undiagnosed psychoses.....	7	8	15		1	1	4	5	9	2	1	3						1	1	1	1
22. Without psychosis..	18	5	23	10	3	13	5	2	7							3		3			
Total.....	474	419	893	193	120	313	199	201	400	54	78	132	7	7	14	9	7	16	12	6	18

TABLE XIV.

PSYCHOSES OF READMISSIONS

PSYCHOSES	Males	Females	Total
1. Traumatic psychoses.....			
2. Senile psychoses.....		1	1
3. Psychoses with cerebral arteriosclerosis.....	10	8	18
4. General paralysis.....	6	3	9
5. Psychoses with cerebral syphilis.....	2	2	4
6. Psychoses with Huntington's chorea.....			
7. Psychoses with brain tumor.....			
8. Psychoses with other brain or nervous diseases.....	2		2
9. Alcoholic psychoses.....	3		3
10. Psychoses due to drugs and other exogenous toxins.....			
11. Psychoses with pellagra.....			
12. Psychoses with other somatic diseases.....		1	1
13. Manic-depressive psychoses.....	16	23	39
14. Involution melancholia.....		2	2
15. Dementia præcox.....	30	33	63
16. Paranoia and paranoid conditions.....			
17. Epileptic psychoses.....	1	2	3
18. Psychoneuroses and neuroses.....	1	2	3
19. Psychoses with psychopathic personality.....	4	5	9
20. Psychoses with mental deficiency.....	1	3	4
21. Undiagnosed psychoses.....		1	1
22. Without psychosis.....	3		3
Total.....	79	86	165

TABLE XV.

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

PSYCHOSES	Total			Recovered			Improved			Unimproved		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	7	1	8	3		3	4	1	5			
2. Senile	2	1	3					1	1	2		2
3. With cerebral arteriosclerosis....	28	29	57	19	16	35	6	8	14	3	5	8
4. General paralysis....	19	8	27	6	2	8	12	5	17	1	1	2
5. With cerebral syphilis.....	6	4	10	5	1		1	3	4			
6. With Huntington's chorea.....												
7. With brain tumor....												
8. With other brain or nervous diseases...	4	8	12	2	7	9	2		2		1	1
9. Alcoholic.....	16	2	18	15	2	17	1		1			
10. Due to drugs & other exogenous toxins..	1	2	3	1	2	3						
11. With pellagra.....												
12. With other somatic diseases.....	7	11	18	7	10	17					1	1
13. Manic-depressive....	47	98	145	37	70	107	10	23	33		5	5
14. Involution melan- cholia.....	3	13	16	2	6	8	1	5	6	6	2	2
15. Dementia præcox....	57	53	110				51	45	96		8	14
16. Paranoia or paranoid conditions.....	2	2	4				1	1	2	1	1	2
17. Epileptic psychoses..	6	7	13	1	2	3	3	3	6	2	2	4
18. Psychoneuroses and neuroses.....	7	11	18	5	3	8	2	6	8		2	2
19. With psychopathic personality.....	9	5	14	8	4	12	1	1	2			
20. With mental deficiency.....		4	4		4	4						
21. Undiagnosed psychoses.....	4	3	7	1	1	2	3	1	4		1	1
22. Without psychosis...	16	2	18									
Total.....	241	264	505	112	130	242	98	103	201	15	29	44

TABLE XVI.

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Causes of death	Total			Senile			With cerebral arterio-sclerosis			General paralysis			Alcoholic			Manic-depressive			Involution melancholia			Dementia præcox			Paranoia and paranoid conditions			Epileptic psychoses			Psycho-neuroses and neuroses			With psychopathic personality			With mental deficiency			*All other psychoses		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
I. EPIDEMIC, ENDEMIC AND INFECTIOUS DISEASES:																																										
Typhoid and paratyphoid fever.....																																										
Measles.....																																										
Scarlet fever.....																																										
Diphtheria.....																																										
Influenza.....																																										
Dysentery.....																																										
Erysipelas.....	1	2	3	1	1	1	1	2																																		
Lethargic encephalitis.....																																										
Tuberculosis of the respiratory system.....	10	16	26				1	1	2																																	
Tuberculosis of other organs.....		2	2																																							
Syphilis (non-nervous forms).....																																										
Purulent infection, septicæmia.....																																										
Other infectious diseases.....																																										
II. GENERAL DISEASES NOT INCLUDED IN CLASS I:																																										
Cancer and other malignant tumors.....																																										
Tumor (non-cancerous).....																																										
Rheumatism.....																																										
Pellagra.....																																										
Diabetes.....																																										
Alcoholism (acute or chronic).....																																										
Other general diseases.....	3	2	5										1	1																							2	1	3			
III. DISEASES OF THE NERVOUS SYSTEM:																																										
Meningitis (non-epidemic).....																																										
Tabes dorsalis (locomotor ataxia).....																																										
Other diseases of spinal cord.....																																										
Cerebral hemorrhage (apoplexy).....	2	6	8	1	1	2	3	5																																		
General paralysis of insane.....	39	3	42							39	3	42																														
Other forms of mental disease.....																																										
Epilepsy.....																																										
Chorea.....																																										
Other diseases of nervous system.....																																										
IV. DISEASES OF THE CIRCULATORY SYSTEM:																																										
Pericarditis.....																																										
Endocarditis and myocarditis.....	83	69	152	18	18	36	40	31	71																																	
Angina pectoris.....	1	1	2																																							
Other diseases of the heart.....	9	20	29	1	1	2	1	3																																		
Arteriosclerosis.....		2	2																																							
Other diseases of the arteries.....																																										
Other diseases of the circulatory system.....																																										
V. DISEASES OF THE RESPIRATORY SYSTEM:																																										
Bronchitis.....	3	5	8																																							
Bronchopneumonia.....	6	5	11																																							
Lobar pneumonia.....	3	1	4																																							
Pleurisy.....																																										
Asthma.....		1	1																																							
Other diseases of the respiratory system (tuberculosis excepted).....	1		1							1		1																														
VI. DISEASES OF THE DIGESTIVE SYSTEM:																																										
Diseases of pharynx and tonsils.....																																										
Ulcer of stomach and duodenum.....																																										
Other diseases of stomach (cancer excepted).....																																										
Diarrhea and enteritis.....		2	2																																							
Appendicitis and typhlitis.....																																										
Hernia and intestinal obstruction.....	2		2							1		1																														
Other diseases of intestines.....		1	1																																							
Cirrhosis of liver.....		1	1																																							
Biliary calculi.....																																										
Other diseases of liver.....																																										
Other diseases of digestive system (cancer and tuberculosis excepted).....		1	1																																							
VII. NON-VENEREAL DISEASES OF GENITO-URINARY SYSTEM AND ANNEXA:																																										
Nephritis.....	3	9	12	1	1	3	1	4		1	1																															
Other diseases of kidneys and annexa.....																																										
Diseases of bladder.....																																										
Diseases of prostate.....																																										
Benign tumors of uterus.....	4	4					1	1																																		
Other diseases of genital organs.....	2	2					1	1																																		
Other diseases of genito-urinary system.....																																										
VIII. DISEASES OF THE SKIN AND CELLULAR TISSUE:																																										
Gangrene.....	2		2																																							
Other diseases of skin and annexa.....																																										
IX. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION (tuberculosis and rheumatism excepted):																																										

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	21	
1 year less than 2	13	13
2 years less than 3	16	16
3 years less than 4	20	20
4 years less than 5	10	10
5 years less than 10	44	44
10 years and over	368	368
Not stated	48	
TOTAL	540	471

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	20		9
1 year less than 2	20		9
2 years less than 3	8		5
3 years less than 4	19		13
4 years less than 5	8		6
5 years less than 10	47	47	47
10 years and over	175	175	175
Not stated	56		37
TOTAL	353	222	301

COUNTY OF LEGAL RESIDENCE OF FIRST ADMISSIONS AND MANNER OF SUPPORT

	Total	State Indigent	County Indigent	Private	Un- classified
Bergen	156		146	10	
Camden	1		1		
Essex	139		124	15	
Hudson	134		104	30	
Hunterdon	1		1		
Morris	90		80	10	
Middlesex	3			3	
Passaic	155		144	11	
Somerset	5		1	4	
Sussex	24		23	1	
Union	182		168	14	
Warren	1			1	
New York	2			2	
TOTAL	893		792	101	

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
Arkansas	1	1		England	18	18	
California	1	1		Scotland	6	6	
Connecticut	4	4		Ireland	37	37	
Delaware	1	1		Norway	1	1	
District of Columbia	1		1	Sweden	6	6	
Florida	1		1	Denmark	4	4	
Georgia	8	1	7	Netherlands	8	8	
Iowa	1	1		Belgium & Luxemburg	1	1	
Kentucky	1	1		Switzerland	1	1	
Maine	2	2		France	3	3	
Maryland	4	3	1	Germany	56	56	
Massachusetts	2	2		CENTRAL EUROPE			
Michigan	1	1		Poland	40	40	
Mississippi	1		1	Czechoslovakia	8	8	
New Hampshire	1	1		Austria	29	29	
New Jersey	186	182	4	Hungary	12	12	
New York	78	78		EASTERN EUROPE			
North Carolina	6	2	4	Russia	21	21	
Ohio	6	6		Lithuania	4	4	
Oregon	1	1		Finland	2	2	
Pennsylvania	19	18	1	Rumania	2	2	
Rhode Island	2	2		SOUTHERN EUROPE			
South Carolina	10	2	8	Greece	2	2	
Tennessee	1	1		Italy	61	61	
Texas	3	1	2	Spain	1	1	
Virginia	10	3	7	Portugal	4	4	
West Virginia	2	2		OTHER EUROPE			
Indiana	1	1		Canada	6	6	
Missouri	1	1		All OTHER COUNTRIES			
United States	184	174	10	Mexico	1	1	
				Syria	1	1	
				All Other	18	14	4
TOTAL	540	493	47		353	349	4

APPENDIX TO BUSINESS DEPARTMENT REPORT

APPENDIX TO BUSINESS DEPARTMENT REPORT

AGRICULTURAL PRODUCTS

FARM

13.32 tons alfalfa	\$ 346.32
6.86 tons timothy hay	156.40
68.82 tons mixed hay	1,555.66
901 tons ensilage	8,109.00
111.75 tons manure to garden	223.50
92.72 tons mangel beets	927.50
76 baskets apples	76.00
113.69 tons green grass	723.74
250 bus. wheat	362.50
6 tons wheat straw ..	84.00
2.96 tons green eye	29.60
23.17 tons, green oats	202.05

\$12,796.27

DAIRY

1,403,194.47 lbs. milk	\$63,324.14
994 lbs. veal	198.88
1,773 lbs. beef liver	205.62
48,993 lbs. beef	7,023.70
2,720.75 tons manure	5,441.50
17 calves sold	164.00
754 feed bags sold ..	18.08
13 lbs. calf liver	6.50
Hides and offal sold	538.85

\$76,921.27

HENNERY

9,800 doz. eggs	\$ 3,898.80
314 lbs. fowl	86.16
778.25 lbs. broilers	278.13
4.74 tons manure	9.48

\$ 4,272.57

PIGGERY

91,050.1-2 lbs. pork	\$15,131.96
230.25 tons manure	460.50
70 lbs. liver	6.30

\$15,598.76

GARDEN

397 baskets beans, lima	375.16
1,018 baskets beans, string	1,058.26
325 bunches beets	11.28
4,096 baskets beets	2,139.86
166,728 lbs. cabbage	3,643.77
306 bunches carrots	40.88
1,193 baskets carrots	738.90
6,993 heads cauliflower	1,181.63
1,520 bunches celery	1,116.11
47 quarts cherries	8.46
85,502 ears corn, sweet	2,890.94
49 baskets cucumbers	54.27
167 qts. currants	29.10
369 baskets egg plant	218.91
47,193 hds. lettuce	2,642.14
21,253 bunches leeks	640.68
137 bbls. kale	534.59
103 baskets grapes	93.15
149 bun. endive	10.43
1,022 baskets onions	754.12
33,350 bunches onions	997.97
12,221 bunches parsley	371.35
456 baskets peas	551.01
622 baskets peppers	351.74
5,330 lbs. pumpkins	110.99
5,224 bunches radishes	128.23
19,636 bunches rhubarb	661.81
2,122 baskets spinach	621.48
170 baskets squash	89.12
257 lbs. squash	5.14
5,717 qts. strawberries	1,184.85
6-16 basket kohlrabi	.15
4,965 baskets tomatoes ripe	3,969.13
29 baskets tomatoes, green	14.75
782 baskets turnips	395.96
203 baskets ruta бага	162.80
1,030 pts. raspberries	198.34
8.92 tons corn stalks	53.52
22 tons ensilage	198.00
	<hr/>
	28,248.98

SUMMARY

Farm	\$12,796.27
Piggery	15,598.76
Hennery	4,272.57
Dairy	76,921.27
Garden	28,248.98
	<hr/>
	\$ 137,837.85

FLORIST'S REPORT

RECORD OF CUT FLOWERS

Roses.....	11,761
Carnations.....	5,667
Chrysanthemums, large.....	2,152
Chrysanthemums, small.....	3,619
Dahlias.....	6,925
Snapdragon.....	19,193
Lillies calla.....	785
Narcissus, paper white.....	1,002
Narcissus, double.....	2,117
Sprengeri, strings.....	412
Pansies, bunch.....	100
Golden glow.....	2,400
Hyacinths.....	123
Zinnia.....	2,738
Lillies, easter.....	3,640
Lily of the valley.....	300
Delphinium.....	2,346
Total	65,280

PLANTS AND BULBS GROWN FOR FLOWER BEDS AND CUT FLOWERS

Pansies.....	1,196
Geraniums.....	2,245
Coleus.....	2,028
Petunia.....	1,535
Salvia.....	1,034
Vinca.....	1,239
Vinca, vine.....	168
Chrysanthemums.....	2,000
Dahlia.....	6,925
Cannas.....	1,618
Snapdragon.....	4,125
Tulips.....	3,500
Gladiolus.....	10,000
Roses.....	1,500
Carnations.....	1,400
Begonias.....	848
Begonias Rex.....	51
Amorellis.....	1
Verbena.....	1,273
Ageratum.....	246
Scalpiglossis.....	130
Ferns.....	164
Rambler rose.....	12

Hyacinths.....	424
Easter lilies.....	536
Golden privet.....	86
Spirea.....	363
Delphinium.....	1,350
Scabiosa.....	490
Krotons.....	6
Heliotrope.....	56
Fuchsia.....	307
Lillies (calla).....	48
Palms.....	33
Sweet William.....	800
Sweet alyssum.....	633
Violas.....	111
Caladium.....	4
Cleveland cherries.....	5,284
	Total 53,769

2,738
 3,640
 300
 2,346
 Total 53,769

PLANTS AND BUDS GROWN FOR BLOWERS BEDS AND
OUT FLOWERS

1,100	French
2,345	Geraniums
2,028	Colours
1,332	Ferns
1,034	Salvia
1,230	Vines
100	Vines, fine
2,000	Chrysanthemums
6,925	Dahlias
1,618	Cannas
4,125	Shrubbery
1,500	Tulips
10,000	Gladioli
1,500	Roses
1,400	Carnations
248	Helonias
21	Helonias Red
1	Amorpha
1,223	Verbena
246	Agapanth
130	Scabiosa
164	Petas
12	Ranunculus

TABLE SHOWING IN DETAIL MANNER OF SUPPORT

JUNE 30, 1930.

COUNTY	INDIGENT			ST. INDIGENT			PRIVATE			CONVICT			CRIMINAL			TOTAL		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Bergen.....	241	253	494	79	66	145	27	45	72	..	..	..	1	..	1	348	364	712
Camden.....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Essex.....	90	96	186	218	207	425	24	54	78	..	..	..	2	..	2	334	357	691
Hudson.....	111	116	227	174	144	318	38	77	115	1	..	1	..	1	1	324	338	662
Hunterdon.....	..	1	1	2	1	3	..	3	3	..	..	..	..	..	..	2	5	7
Mercer.....	1	1	2	1	..	1	..	1	1	..	..	..	..	..	..	2	2	4
Middlesex.....	4	6	10	2	1	3	2	3	5	1	..	1	..	..	..	9	10	19
Monmouth.....	1	4	5	..	1	1	1	4	5	..	..	..	..	..	..	2	9	11
Morris.....	119	102	221	41	22	63	7	25	32	1	..	1	..	1	1	168	150	318
Ocean.....	..	..	..	..	1	1	1	2	3	..	..	..	..	..	..	1	3	4
Passaic.....	349	345	694	75	49	124	25	32	57	..	..	..	..	..	..	449	426	875
Somerset.....	..	4	4	2	3	5	1	6	7	..	..	..	..	..	..	3	13	16
Sussex.....	39	38	77	9	6	15	2	7	9	1	..	1	..	..	..	51	51	102
Union.....	285	316	601	69	62	131	22	35	57	1	..	1	..	..	..	377	413	790
Warren.....	8	1	9	4	1	5	..	4	4	1	..	1	..	..	..	13	6	19
New York.....	..	..	..	..	..	..	1	4	5	..	..	..	..	..	..	1	4	5
Total.....	1248	1284	2532	676	564	1240	151	302	453	6	..	6	3	2	5	2084	2152	4236

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.

[This report was printed by the patients of The New Jersey State Hospital at the Occupational Therapy Department of the Hospital.]

