

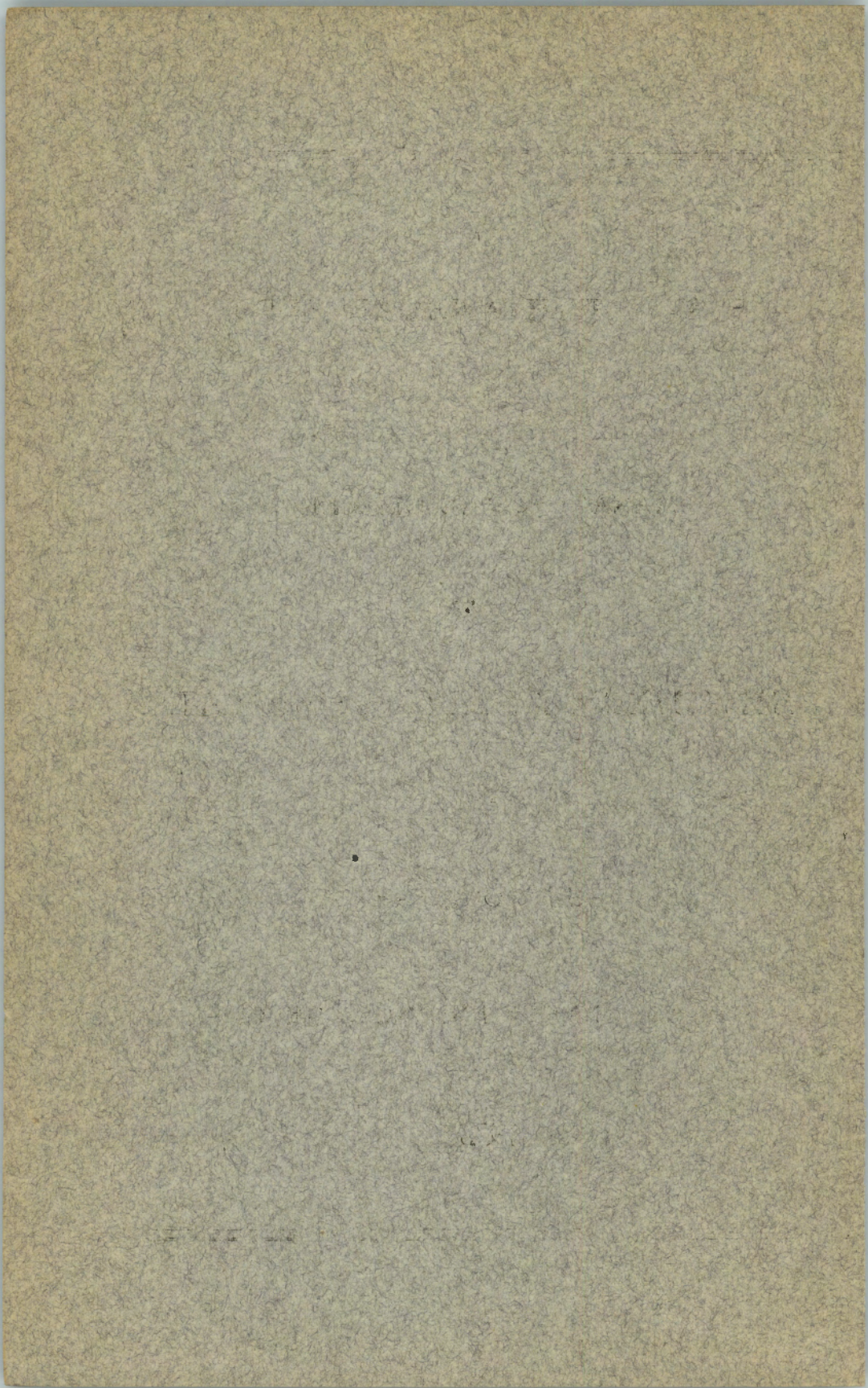
DUPLICATE

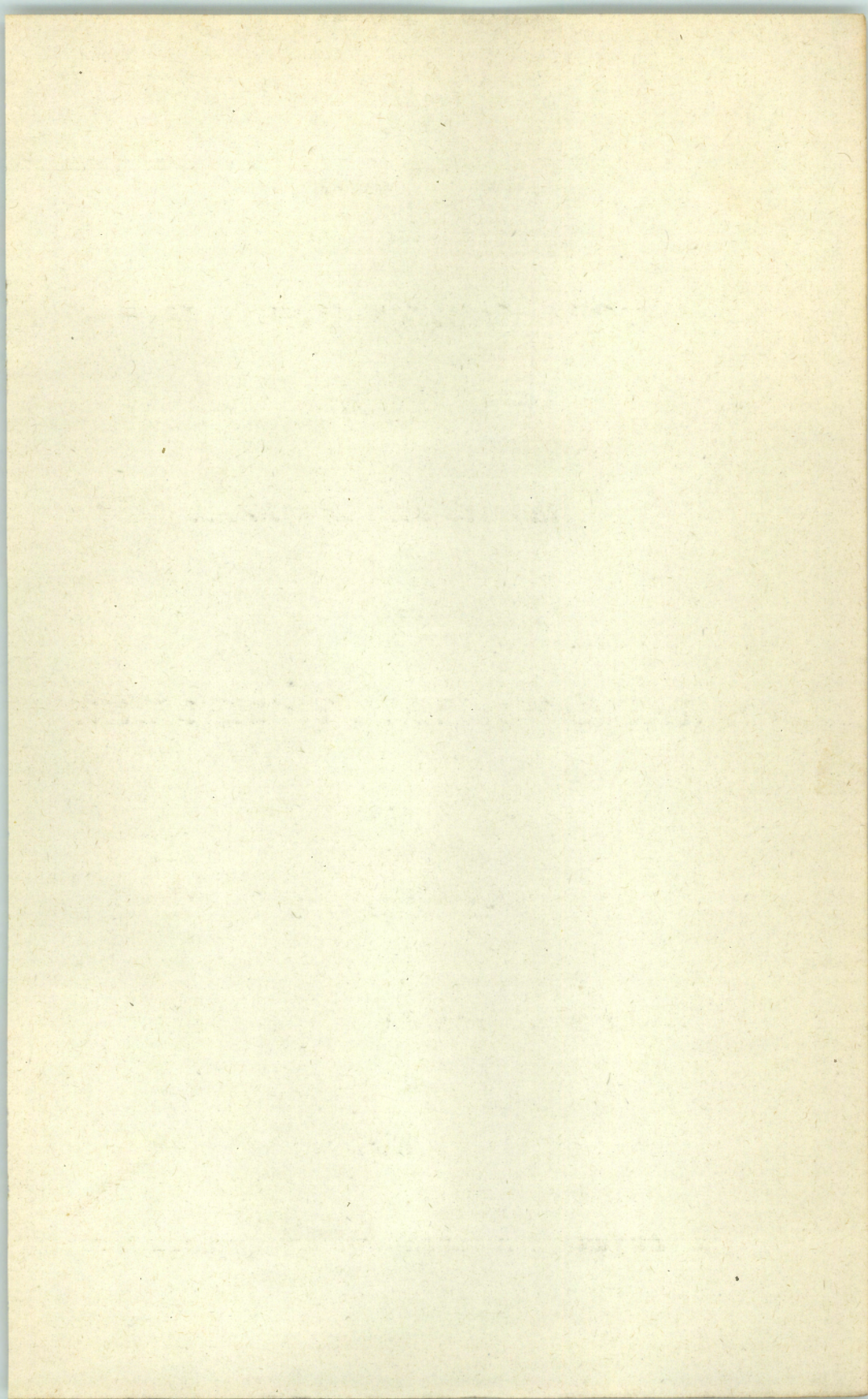
JUL - - 1943

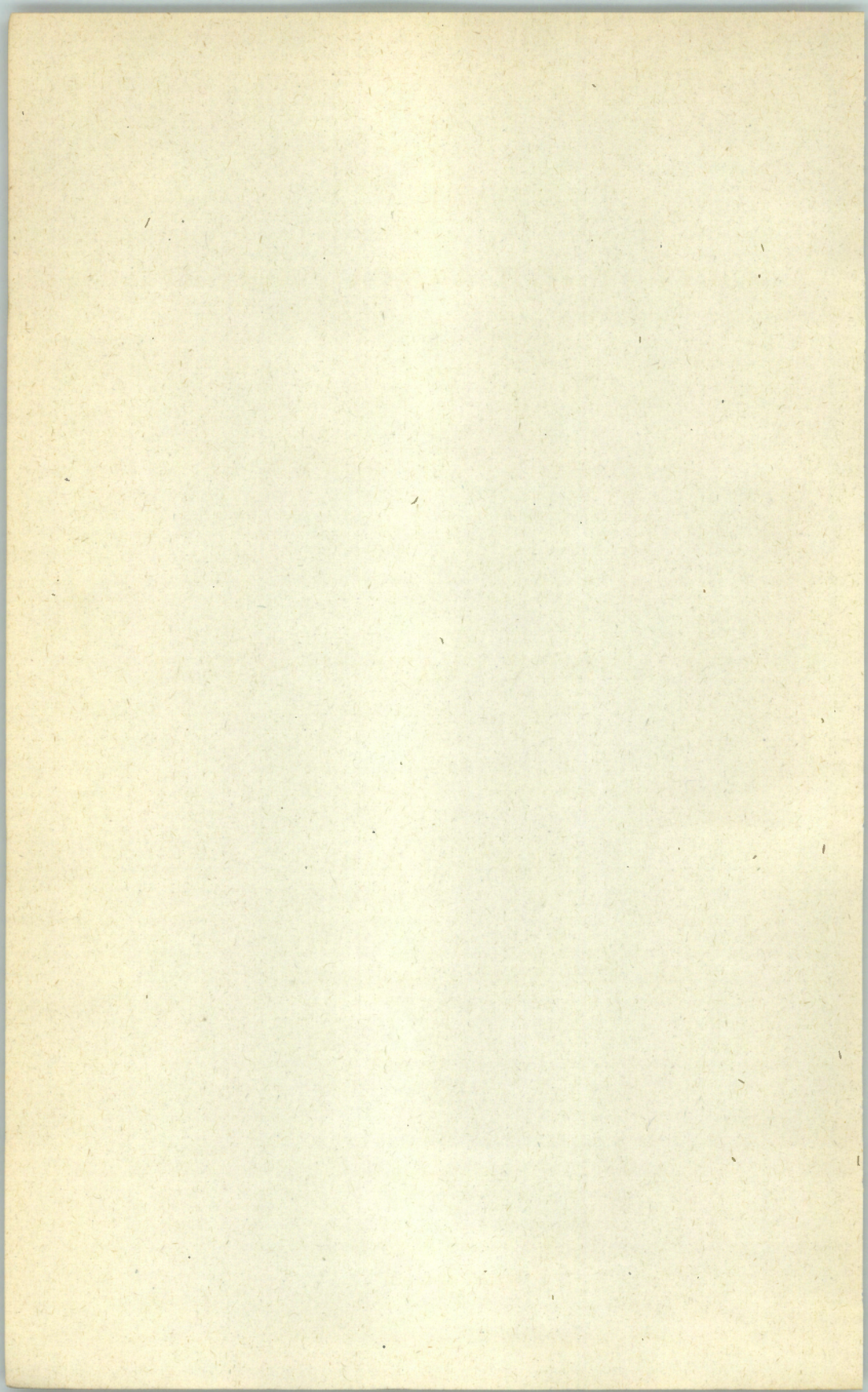
GOV. DOCS!

THE
FIFTY-EIGHTH ANNUAL REPORT
OF THE
MANAGERS AND OFFICERS
OF THE
NEW JERSEY STATE HOSPITAL
AT
GREYSTONE PARK
FOR THE YEAR ENDING JUNE 30
1933

New Jersey State Library







THE
FIFTY-EIGHTH ANNUAL REPORT
OF THE
MANAGERS AND OFFICERS
OF THE
NEW JERSEY STATE HOSPITAL
AT
GREYSTONE PARK
FOR THE YEAR ENDING JUNE 30

1933

Compliments
of
Dr. Marcus A. Curry
Superintendent

THE

NEW YORK HOSPITAL

MANAGER AND EDITOR

OF THE

NEW YORK HOSPITAL

CHURCHMAN PARK

FOR THE YEAR ENDING MARCH 31

1922

Board of Managers

PRESIDENT

AUGUSTUS S. KNIGHT, M. D. Gladstone

CHAIRMAN

DANIEL S. VOORHEES Morristown

VICE-PRESIDENT

GEORGE O'HANLON, M. D. Jersey City

MRS. JAYNE MILLARD DOYLE Newton

MRS. MARIAN K. GARRISON Llewellyn Park, Orange

RIDLEY WATTS Morristown

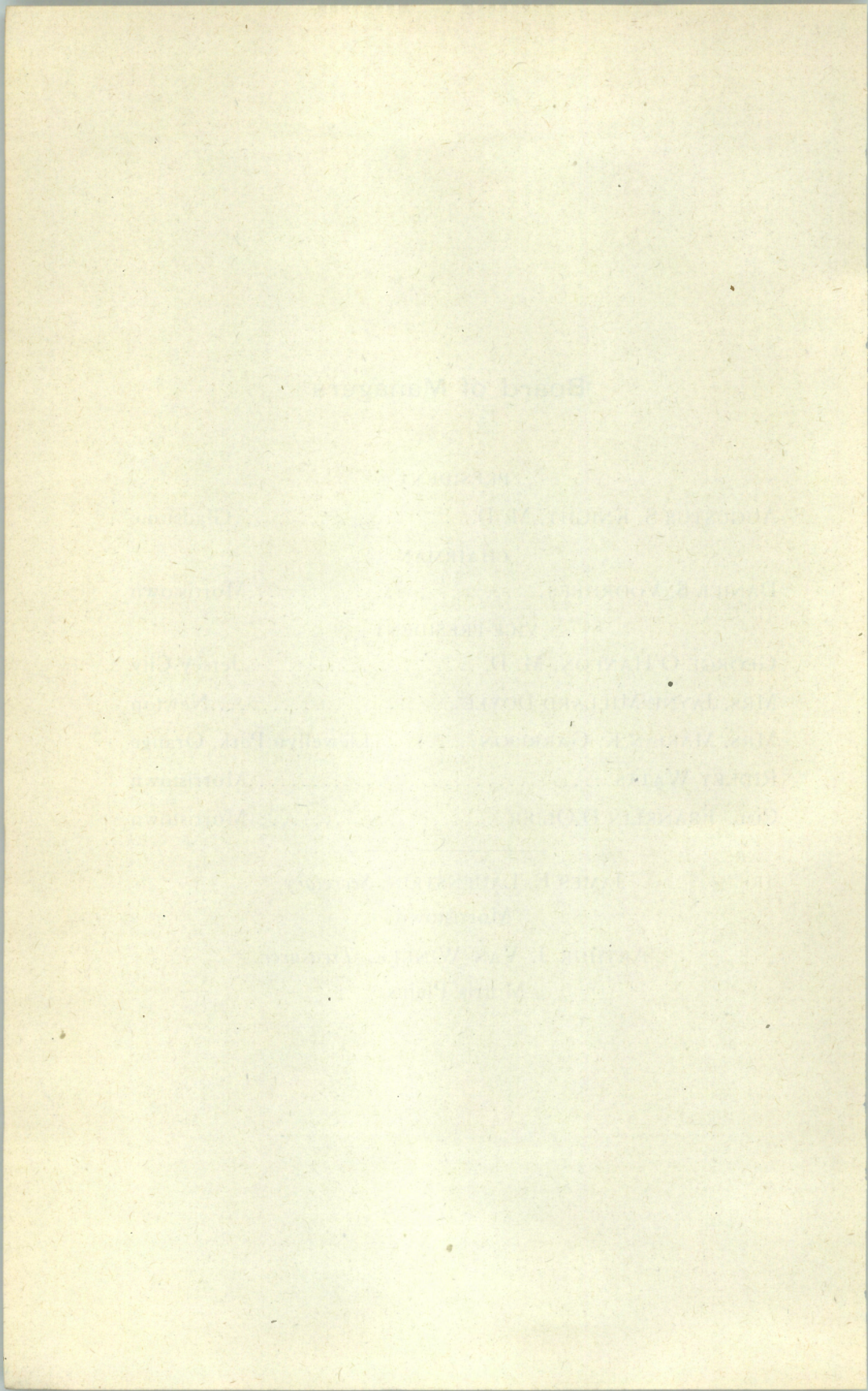
COL. FRANKLIN D'OLIER Morristown

JAMES E. LAUENSTEIN, *Secretary*

Morristown

ARTHUR J. VAN WINKLE, *Treasurer*

Morris Plains



Officers

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

GEORGE J. HOLBIG
Business Manager

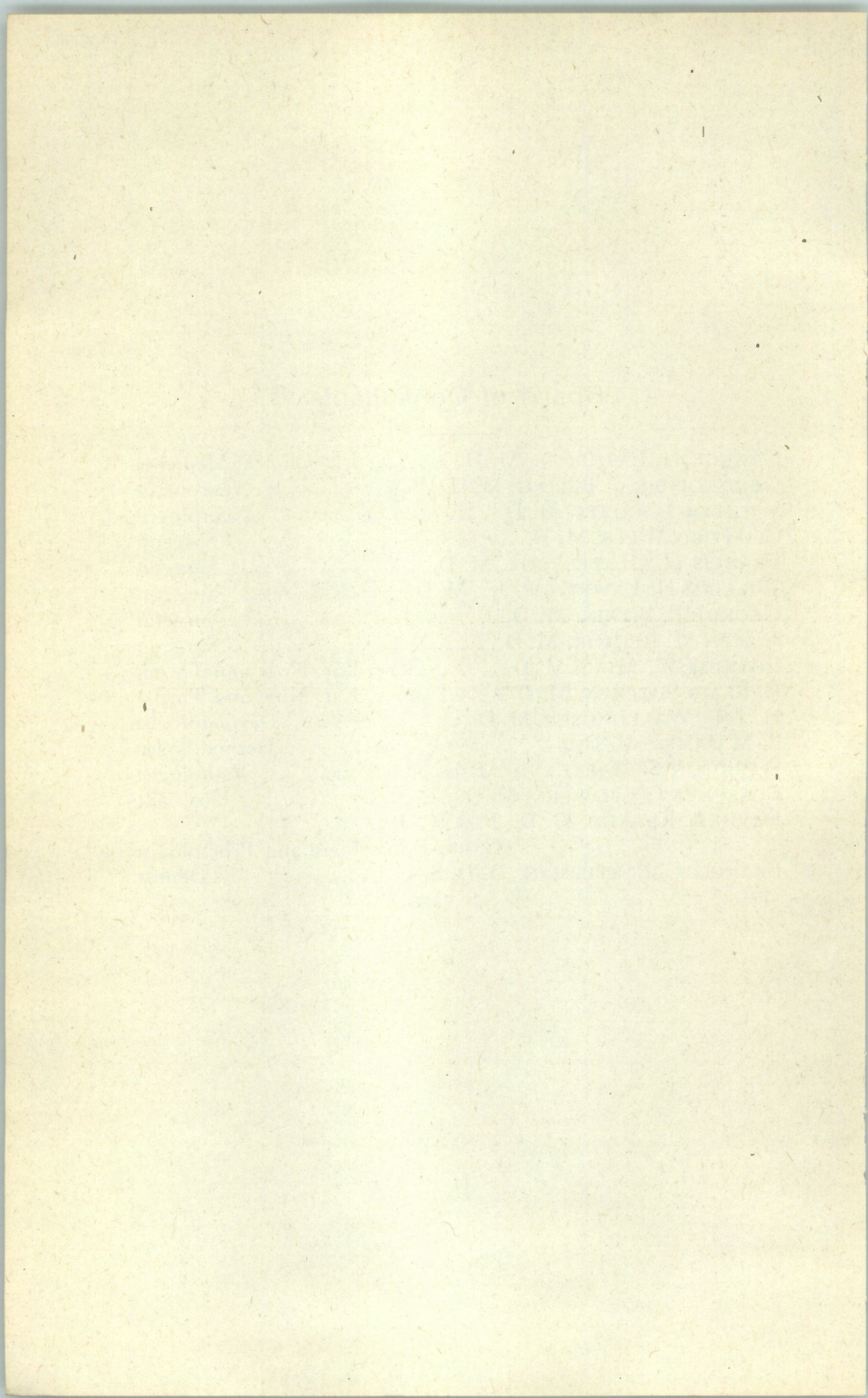
ARTHUR G. LANE, M. D.....Clinical Director
GEORGE B. McMURRAY, M. D.....Senior Resident Physician
GEORGE R. HAMPTON, M. D.....Senior Resident Physician
LAURENCE M. COLLINS, M. D.....Senior Resident Physician
WILLIAM J. LEIN, M. D.....Senior Resident Physician
PHILIP C. WASHBURN, M. D.....Senior Resident Physician
JOSEPH DONOVAN, M. D.....Senior Resident Physician
PERRY J. GAMBILL, M. D.....Senior Resident Physician
RAYMOND J. HARQUAIL, M. D.....Senior Resident Physician
THEODORE GEBIRTIG, M. D.....Senior Resident Physician
THOMAS B. CHRISTIAN, M. D.....Pathologist
MARGARET DOUGLAS, 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
ARCHIE CRANDELL, M. D.....Resident Physician
MARSHALL D. HOGAN, M. D.....Resident Physician
HERBERT HYATT, M. D.....Resident Physician
DANIEL GEORGE MELVIN, M. D.....Resident Physician
*CONRAD O. RANGER, M. D.....Resident Physician
HARRY A. MOSCOE, M. D.....Resident Physician
GEORGE B. COON, M. D.....Resident Physician
WILBUR M. JUDD, M. D.....Resident Physician
MALCOLM M. TAYLOR, M. D.....Resident Physician
EDWARD KESSLER, M. D.....Resident Physician
THEODORE F. LINDBERG, M. D.....Resident Physician
GEORGE LORIMER NICOLL, M. D.....Resident Physician

JOHN KINLEY, M. D..... Resident Physician
DAVID SCHLEIN, M. D..... Medical Interne
HAROLD S. HATCH, M. D. [part time].... Tuberculosis Specialist
EARL W. FULLER, M. D.... Director of Mental Hygiene Clinics
LINDSAÏ E. ROBINSON, M. D.,
 Assistant to Director of Mental Hygiene Clinics
THOMAS R. PALMER, D. D. S. Senior Resident Dentist
JOHN MCCLUSKEY, D. D. S..... Resident Dentist
ANNE HOW, R. N..... Superintendent of Nurses
WILLIAM G. BEUCLER..... Assistant to Chief Executive Officer
MILDRED H. HURLEY,
 Director of Mental Hygiene Clinic Social Service
PHYLLIS F. POINTON,
 Director of Hospital Psychiatric Social Service
STELLA A. MCCLURKIN..... Director of Occupational Therapy
DOROTHY E. JOHNSON
 Director of Physical Education and Training
PHILIP B. ROBERTS, Ph. G..... Pharmacist
EDWARD I. COURSEN..... Assistant Business Manager
HENRY LANDESMAN, M. E. Engineer-in-Charge

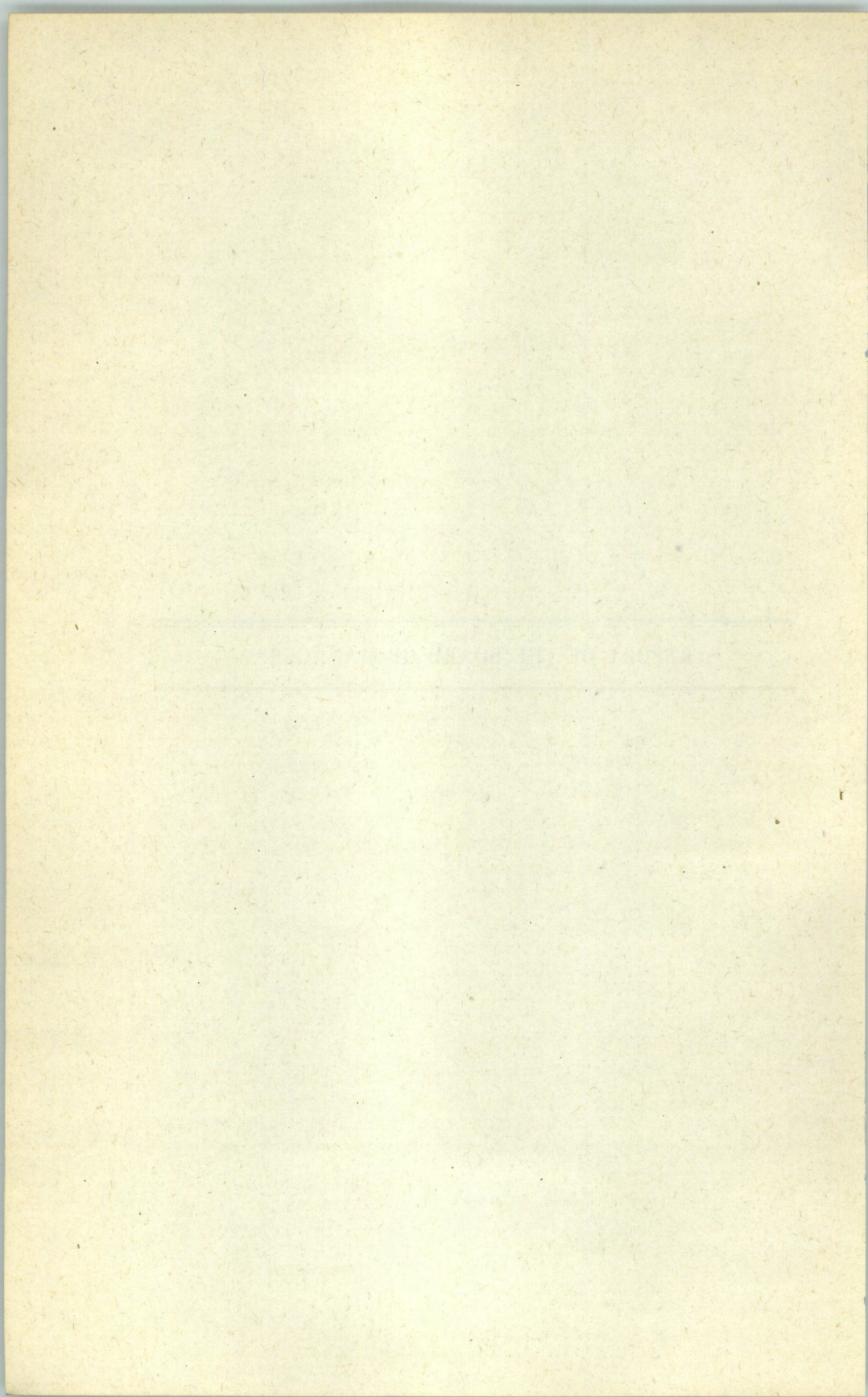
**Resigned.*

Board of Consultants

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



REPORT OF THE BOARD OF MANAGERS



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 present to you herewith their fifty-eighth annual report of the affairs of that institution covering the fiscal year which ended June 30, 1933. We have included the report of Dr. Marcus A. Curry, the Superintendent and Chief Executive Officer, as submitted to us.

Construction during the year has been at lowest ebb, owing to the pressing necessity for economy, and lack of appropriations. The reconstruction of the Administration building was completed early in the year, the apartments were furnished, and reoccupied by social service workers and physicians. The Attendants' building was also completed and furnished and is now fully occupied. The new deep well was completed and placed in service and we have now an adequate supply of good water, even in driest periods. In May, work was begun on the reconstruction of the fourth floor of the north side, Main building. This will include remodeling and fireproofing the wards and the roof as well as making the top floor fit to house patients, and thus will give us much needed additional room for this purpose.

Mr. Voorhees, Chairman of the Board, has visited the institution at least once each week and signed up plans, specifications, contracts, change orders and certificates for payments; schedules of these have been presented and ratified by the Board at each succeeding meeting. In this way there has been no delay in carrying on such construction work as we have had.

Throughout the year the Sewage Disposal System has required and has been given careful attention by the members of this Board, by the Commissioner and his assistants, by Prof. Rudolfs and his assistants in the capacity of Consulting Specialists to the Central Board, and by the local Engineering Division of the hospital. Methods of purification have been carefully determined and

rigidly required. Bacteriological and chemical tests of outflow and of adjacent streams have been made with regular frequency and the instructions have been so faithfully followed that in spite of the loading to capacity, the plant has yet been made to function properly and to send an outflow down stream that is free from contamination, and so of no danger to others.

However, the system must be enlarged to make it safe in case of breakdown of any part of the now over or fully extended plant and to prepare for increased numbers of patients. Plans for it have been prepared, requisition has been made by this Board and approved by the Central Board; and the State Board of Health has not only approved but has ordered that the enlargement shall be made within a prescribed limit of time. Thus this item must be included in the appropriations asked for next year.

Mrs. Garrison, as Chairman of the Committee on Furnishings, has given much time and most competent service in the selection of the necessary and appropriate furniture for the remodeled apartments in the Administration building and for the Attendants' building. The expenditures for those furnishings have been held to a minimum and have been made or authorized in every instance by the State Purchasing Department.

Mrs. Doyle and Mr. Watts, of the grounds and buildings committee, have made many visits to the hospital and have given generously of their time and judgments in studies of numerous building, roadway and sidewalk construction problems.

Other committees of the Board have carried on through the year the duties assigned to them.

Dr. Curry and all his subordinates of the hospital have given very close attention to the economic management and have succeeded in effecting many economies. The number of employees has been reduced without entirely doing away with any divisions. Savings have been made in almost every division of the hospital in this way. Wherever possible, patient help has been used in place of hired employees with particular successes in the dairy, laundry, garden, culinary, farm and maintenance departments.

The Chief Executive Officer and practically all of his assistants throughout the hospital have worked to the limits of their ability and at all times to do all that they can for the comfort, care and proper treatment of the poor sick patients; and to keep costs within budget allotments. Their faithfulness, their loyalty and their de-

votion to the health-restoring work to which they have dedicated their lives, do not appear as yet to have been permanently injured by such conditions as that their wages and allowances for food and housing have been and are still being severely cut down, and that so many of them have to work hard for 12 hours per day in trying surroundings (two shifts covering each 24 hours); while in this same period, Federal, State and Municipal authorities throughout the country are urging and insisting that hours of work be limited to 30 or 40 hours per week and rates of wages shall be increased. Surely these people need periods of rest and recreation and sufficient self-supporting wages just as do those in other occupations, and their spending moneys if they had them would likewise promote recoveries from depression. None of us wish to be wasteful nor extravagant and we do wish to bring down taxes in all reasonable ways; but for many years now we have been trying by comfortable housing, reasonable wages and sensibly attractive living conditions, to get competent, honest and faithful workers to enter and permanently to stay in the hospital community life work. Thus we hope with confidence that the curative arrangements already established in this and in other institutions of the State may be continued and that the present hardships may be only temporary. We want to discharge as cured or decidedly improved more and more of the patients and it appears to us that this can be accomplished best by constantly improving the attending personnel and by the most competent treatments and cares of the patients.

Mr. Otto Koch was placed in charge of the main garden at the close of the 1932 growing season and has carried on well in spite of the handicap imposed by greatly reduced forces. The valuation of garden produce was \$3,667.24 less than the previous year, partly because of lower prices allowed and partly because of drought conditions.

The animal industries and farm under Mr. Coursen, assistant business manager, have continued to give good products. The valuation of dairy products was \$14,108.07 lower than last year, but the reduction was chiefly in lower prices; milk production was decreased by 16,401 quarts of which the transfer of 16 milking heifers to Marlboro was the principal cause. The poultry plant also showed a decrease from last year of \$1,696.88, about two-thirds of which was due to lower prices allowed; the remainder

was ascribed to the purchase of one lot of inferior chicks bought in good faith by the Purchasing Department but which proved to be inferior and not only brought disease into the flock, but materially reduced the number of laying pullets for the season.

In the engineering and maintenance division, repair and construction work has been held to the lowest level consistent with preservation of equipment. The number of mechanics was not reduced, but the days per week were cut to five with corresponding reductions in wages and a stagger system introduced so that all the shops were constantly covered. Mr. Landesman has given special attention to these changes and to the maintenance of the sewage disposal system at its highest point of efficiency.

Important changes have been made in the food service by centralizing and consolidating several dining rooms and by reducing employees accordingly. The quality of food has remained good, remarkably so in view of the low cost per meal, and the patients appear well nourished. We feel that Mr. George Holbig as Business Manager has done excellent work in effecting the savings which have been made in his department this year.

In the medical service overcrowding has been a major problem. No new bed space for patients has been obtained this year, while the number in the hospital has increased by 170. An abnormally high admission rate has now continued for four consecutive years and has placed a heavy burden on the medical and nursing services. The number of physicians on the staff remains the same as last year, while the number of examinations and treatments has been increased to meet the additional demands. Every effort has been made to hold the work to its former standards of excellence so that the institution would continue to function as a high type of curative mental hospital.

The social service work has been carried on very well and the number on parole increased, although conditions in the communities have made the placing of patients a difficult problem and the division has been limited in its activities by a reduced allowance for traveling expenses.

In the nursing division Mrs. How has kept the work up to its high standard and has continued all branches of the school of nursing. The number of graduate nurses and attendants has been somewhat reduced this year, while the number of affiliate students, to whom no salary is paid, has been increased. Special diets

for patients have been continued and increased in number and variety.

The mental hygiene clinics have done constructive work throughout the year. The demand for their services has been increased by the general situation which has rendered more difficult than usual the satisfactory adjustments of the individual to community requirements. The work has had to be reduced rather than expanded, however, because of the financial limitations placed by a cut in appropriations amounting to \$5,000.00. We hope very much that this important work may be extended in future years with the ultimate expectation that local communities will support them after they become sufficiently instructed and experienced.

We feel that in view of the reduced appropriations made this year, the hospital did remarkably well to turn back to the State Treasury the sum of \$140,000 at the end of the year. This should clearly be recognized as a special saving accomplished for a definite emergency; it should not and could not be continued for any extended period.

At the close of the year covered by this report there remained on the records of the hospital, 4,672 patients—2,285 males and 2,387 females—an increase of 174 patients over the previous year. Of this total, 430 patients—184 males and 246 females—were outside of the institution on trial visit or parole but still carried on the hospital books and subject to return without medical or legal procedure. During the year there were admitted, including first admissions, re-admissions, and transfers from other institutions for the insane in this State, 1,441 patients—736 males and 705 females; the discharges totaled 831—483 males and 348 females—of which 258 were discharged as recovered, 208 as improved, 36 as unimproved, 28 as without psychosis, and 301 were transferred to other institutions in the same State without statement as to change in mental condition. The deaths during the year numbered 436 patients—226 males and 210 females.

During the year the Board of Managers held eleven regular monthly meetings with an attendance of 58. Committee meetings, conferences, inspections, and calls at the hospital by individual members numbered 216, making a total of 274 visits to the institution, beside various conferences and meetings held away from the hospital.

You and your assistants of the Central Office have been most patient and diligent with our Board and with Doctor Curry while we all have been trying so hard to meet and solve the difficult problems that have arisen and you have our deepest gratitude and confidence.

Respectfully submitted,

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

TREASURER'S REPORT

BRITISH MUSEUM

**Treasurer's Report of Cash Receipts and
Disbursements for the Fiscal Year
Ending June 30, 1933**

RECEIPTS

From Bergen County	\$ 73,945.14
" Essex County.....	80,392.70
" Hudson County.....	29,186.44
" Hunterdon County.....	226.02
" Morris County.....	50,289.87
" Mercer County.....	634.85
" Middlesex County.....	1,378.61
" Sussex County.....	16,216.81
" Somerset County.....	999.34
" Union County.....	73,004.55
" Warren County.....	1,517.74
" Private Patients.....	124,584.93
" Individuals and Excess amounts collected by Counties for support of Indigent Patients.....	11,594.66
" Interest on Deposits	425.99
" Miscellaneous Receipts.....	2,705.01
	\$467,102.66

DISBURSEMENTS

Amount of Collections deposited with State Treasurer.....\$467,102.66

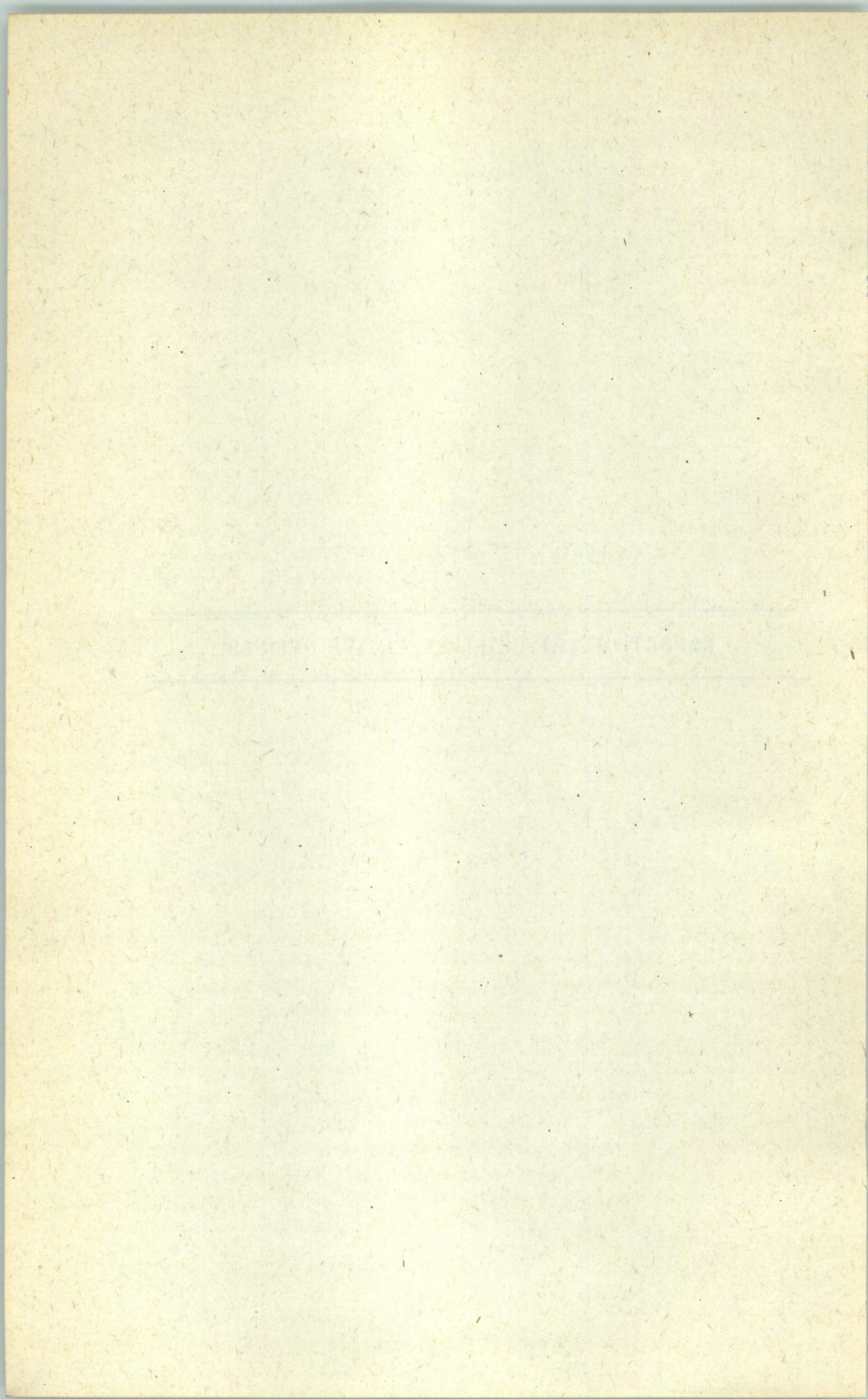
AMOUNTS RECEIVED FROM STATE TREASURER FOR PAY-ROLLS

Employees' Pay-rolls.....	\$849,527.60
Officers' Pay-rolls.....	12,525.57
	\$862,053.17

A. J. VAN WINKLE
Treasurer.

President's Report of Cash Receipts and
Disbursements for the Fiscal Year
Ending June 30, 1883

REPORT OF THE CHIEF EXECUTIVE OFFICER



Report Of The Chief Executive Officer

To the Board of Managers:

In accord with established custom and the statutes of this State, I submit to you herewith a statement of the condition and progress of The New Jersey State Hospital at Greystone Park for the fiscal year ending June 30, 1933. This is the fifty-eighth report of the institution and my thirteenth as Medical Superintendant and Chief Executive Officer. Included in it, more or less modified, are summaries of the work done in all divisions and departments of the hospital as handed to me by the various heads, with brief statements regarding prevailing conditions and recommendations for future improvements.

Almost without exception, the officers and senior employees of the institution have responded heroically to the unusual demands of the past year and have made every effort to cooperate in measures for drastic economy. Their success in effecting reduction in costs is indicated in the financial statements, where expenditures for the maintenance of patients show a decrease of \$363,000 over those of last year; falling prices and increased purchasing power of the dollar helped to make this saving possible without as yet seriously impairing the plant and equipment or the safety and health of the patients. The percentage cuts in wages and salaries, with additional deductions for maintenance, enacted last year as a means of obtaining funds for unemployment relief have been in force throughout the year and expenses have been further reduced by decreasing the total number of employees about seven per cent. and by establishing a stagger system in certain divisions by which the number of day's work has been reduced without actually discharging any workers.

It would be futile to assert that this enforced economy has not had any adverse effect upon the patients, the employees, the condition of the plant, and the whole organization of the institution. Our object has been to mitigate the evils just as far as we could and such measure of success as has been reached has been due to the study and planning and unremitting efforts of the entire

group of officers and personnel, under the advice and direction of the Board of Managers and the Commissioner and his assistants in the Central Office.

We have been further handicapped in that our admission rate has continued to be phenomenally high, reaching a total of 1,441, which is only 24 less than last year when all previous records were exceeded by more than 240 patients. In other words, we have had to admit within the last two years a number of patients approximately equal to the entire census of the hospital ten years earlier; these patients have had to be cared for under conditions of serious overcrowding and by a personnel reduced to the number employed three years ago, when the daily average number of patients in the hospital was 400 less.

Although appropriations were made this year on a reduced basis with economy constantly in mind and with 3,900 patients estimated as the average number in the hospital buildings, we have succeeded during the year in caring for a daily average number of 4,150.7—250 more than for whom provision was made—and have not only kept within our appropriations, but have turned back to the State Treasury the sum of \$140,000. This has been saved by unremitting care and watchfulness and by a number of innovations, such as discontinuing two special dining rooms adjacent to the main kitchen and discontinuing food service for employees in the Dormitory building and also the preparation and cooking of food in the main kitchen for employees on night duty—all of which has been accomplished by further extension of the food service in the cafeteria—by reducing the number of employees in each division so far as possible without discontinuing the key positions or eliminating any essential service; by keeping repairs and replacements to a minimum both in the medical and business departments, and by constantly scrutinizing each expenditure for possible economy. It is an achievement of which I feel we have every reason to be proud.

In the winter the National Committee for Mental Hygiene called together a committee of hospital superintendants from all over the country to discuss matters of general interest. "Taking cuts" proved to be a vital topic and a sub-committee, of which I had the honor to be a member, was formed to study the subject in detail. On February 16, Dr. Hincks, accompanied by Dr. Hamilton, Col. Bullis, and Mr. Komora, officers of the National

Committee, came to this institution to investigate our methods as an initial step in the study. They met here with Commissioner Ellis and Mr. Gerry from the Central Office, Dr. Knight of the Board of Managers and the resident officers of the hospital. After going over our records in detail they were so much impressed by the manner in which large economies had been effected without doing away with any of the essential features of a high type curative hospital that the recommendations submitted to the sub-committee were largely based on methods already put in practice by the Department of Institutions and Agencies of New Jersey.

Modern authorities in psychiatry agree that careful segregation and individual attention afford the best opportunity for recovery in mental disease. On overcrowded wards, mingling with patients of more disturbed types and objectionable personal habits, cared for by overworked and hurried nurses and doctors, many patients, particularly those of sensitive natures, cannot improve but are driven back still further into the unreal world of delusion with the consequence that the acute attack of mental disorder becomes chronic and the patient a permanent loss to his home and family and a lifelong charge on the State. How far is the public justified in insisting that the taxpayers' money be saved in some particular year of stress at such ultimate cost? Necessary economies can sometimes be effected in food and clothing and in the organization of maintenance and service work, but in housing space and in professional personnel the undue restriction of appropriations means reduced recovery rate with all that it implies in wasted lives and years of dependency instead of production.

The depression has taught us many things in the way of economy which have been extremely valuable, but there is a point beyond which attempted saving ceases to be economy and becomes the most extravagant kind of wastefulness, when a great mental hospital ceases to be a curative hospital and slips back into a custodial institution of the old type. This year we have done everything in our power to prevent this, to maintain our former standards of professional care and treatment; possibly we can carry on for another year, but after that unless more money is available, not only will the buildings erected and equipped at so much expense begin to deteriorate, but the whole system of

modern curative service to the patients built up with infinite care and effort during the past twelve years will begin to disintegrate.

Health

General health conditions have been fair for the past year. During the winter there was a rather serious epidemic of influenza followed in a number of cases by pneumonia which resulted fatally. Deaths from pulmonary tuberculosis were increased from 24 last year to 45, and from pneumonia were increased from 11 to 48 this year. In March two cases of scarlet fever appeared among the patients and an epidemic was feared, but prompt measures resulted in checking all further spread of the infection. The source was not discovered, but as the disease was prevalent in the district at that time, it may well have been brought to the ward by visitors or even by employees. Three cases of chicken pox were reported during the spring, one a patient, one a nurse, and one a physician. Fifteen cases of erysipelas occurred, with no deaths. Routine health measures have been maintained as heretofore, with periodic examination of milk and water, general checking up of patients and employees, and vaccinations against small pox and typhoid fever.

Statistical Resume

All records are kept under the system adopted some years ago by the National Committee for Mental Hygiene, and tables compiled according to the accepted forms are printed in the statistical appendix to this report. A summary to these tables has been made up by Mr. Harold M. Prettyman, record clerk and statistician, and I have incorporated it at this point for convenient reference. Mr. Prettyman deserves much credit for the accuracy with which the records have been kept and for the promptness with which information has been made available whenever needed.

General Data: During the year ending June 30, 1933, there were admitted 1,441 patients—736 males and 705 females. This is a decrease in admission of 24 over last year. The admissions included 1,134 first admissions to any hospital for the insane—592 males and 542 females; 280 readmissions—129 males and 151 females and 27 transfers from other similar institutions in New Jersey—15 males and 12 females. The number of patients discharged, including deaths, was 1,267—709 males and 558 females

—leaving an increase on the books of 174 patients at the close of the year.

There were under treatment during the year 5,939 patients—2,994 males and 2,945 females, which was 130 more than the preceding year. The maximum census for the year was 4,672 obtained on June 30, and the highest number actually in the hospital at any one time was 4,242, which occurred on the same date. The average daily number in the hospital was 4,150.7. At the close of the year 395 patients—152 males and 243 females—were carried on visit or parole, and 35 patients—32 males and 3 females—were carried as escaped. This is an increase of 4 over 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 170.

First Admissions: There were 745 patients of native birth, 381 males and 364 females; the foreign born number 389 patients—211 males and 178 females—or 34 per cent. of the total first admissions. Both parents of 404 native born patients were also of native birth, while in 71 cases one parent was born in this country and the other was of foreign birth. Of the foreign born patients, 71 were natives of Italy, 48 of Germany, 52 of Poland and 38 of Ireland, these four countries furnishing 54 per cent. of the foreign born first admissions. The naturalized citizens numbered 203 and the aliens 186.

Table 6, psychosis of first admissions shows 271 patients diagnosed as suffering from psychosis with cerebral arteriosclerosis, 278 with dementia precox and 151 with manic depressive psychosis. These three groups comprised 62 per cent. of the total. Other psychoses showing high incidence were general paralysis, 93; senile, 54; psychosis with other somatic diseases, 39; involution melancholia 38; and alcoholic psychosis, 30.

In the classification according to racial origins, 102 were listed as German, 88 as Irish, 113 as Slavonic, 121 as Italian and 128 as African, these five groups including 49 per cent. of the total. The mixed race furnished the largest single group, with 397 patients.

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 two five-year periods between 25 and 35 and included 23 per cent. of the total.

Under 25 years there were 136 patients and 127 were 70 years and over.

As to the degree of education, 633 patients or 56 per cent. had received a common school education, 142 were graduated from high school and 34 had collegiate education; 223 were listed as having learned to read and write and 102 were illiterate.

There were 1,045 patients of urban environment, or 92 per cent. of first admissions. The rural districts supplied 89 patients.

The economic condition of 841 patients or 74 per cent. of the total was listed as marginal; 106 were dependent and 187 comfortable.

In regard to the use of alcohol, 674 patients were described as abstinent, 309 as temperate and 151—120 males and 31 females—as intemperate.

The marital condition of the first admissions was classified as follows: single, 362—221 males and 141 females; married, 506—259 males and 247 females; widowed, 173—68 males and 105 females; separated, 72—34 males and 38 females; divorced, 21—10 males and 11 females.

Readmissions: The totals in this group were 280 patients—129 males and 151 females. In the classification according to psychosis, 79 were diagnosed as suffering from dementia precox and 90 from manic depressive insanity or 60 per cent. of the readmissions.

Discharges: The total of those regularly discharged from the care of the institution during the year was 530 patients—268 males and 262 females. Of this number, 258 patients—121 males and 137 females—were considered to have recovered from their psychosis. This is 23 per cent. based on the number of first admissions, and is a very creditable rate, considering the exceedingly high number of admissions: 208 patients—113 males and 95 females—were discharged as improved or 18 per cent. based on the number of first admissions. The manner of discharge of the remaining patients was as follows: unimproved, 36—12 males and 24 females; without psychosis, 28—22 males and 6 females. In addition to those discharged, 301 patients—215 males and 86 females—were transferred to other similar institutions in New Jersey. Of those transferred, 279 patients—197 males and 82 females—went to The New Jersey State Hospital at Marlboro. Of those discharged as recovered, patients suffering from manic depressive psychosis constituted 40 per cent. or 105 patients.

Deaths: During the year 436 patients died—226 males and 210

females. This is a rate of 7.3 per cent. based on the total number under treatment, and is slightly higher than last year.

In accounting for the increase in the death rate this year, I find that a study of the statistical tables reveals that the number of deaths exceeded last year by 41. But an analysis of the mortality table shows an increase of deaths from diseases affecting the respiratory organs of 58 which more than accounts for the .5 per cent. increase based on the number of patients treated. The marked difference in the deaths from this cause is entirely accounted for by the epidemic of the past winter.

The largest single cause of death was endocarditis and myocarditis, which was certified in 192 cases or 44 per cent. of the total number; other diseases of the circulatory system caused 48 deaths. General paralysis of the insane was given as the cause of death in 36 cases; tuberculosis of the respiratory system in 45; nephritis 5; lobar pneumonia 18; and broncho pneumonia in 30. The psychoses of those who died included psychosis with cerebral arteriosclerosis, 157; dementia precox, 69; general paralysis, 45; senile psychosis, 67; and manic depressive psychosis, 29. The average age at death was 60.87 years.

At the time of death 242 patients, or 56 per cent. had passed the age of 60 years; 146 patients were over 70 years of age. Of these 23 were in the 80's and 2 in the 90's.

The tabulation of the duration of hospital life showed that 88 patients had been in the hospital less than one month; more than half of these were suffering from psychosis with cerebral arteriosclerosis or general paralysis; 31 patients had a hospital residence of 20 years and over at the time of death, and of these 24 were suffering from dementia precox.

Clinical Work

Dr. Arthur G. Lane as Clinical Director has continued to supervise the medical and treatment program of the hospital throughout the past year. His work has been rendered even more difficult than usual by the general conditions, and by his health, which was impaired during the winter. He has continued, however, to give faithful, competent, and devoted service with a view to obtaining the best results possible under the circumstances. He has conducted staff meetings, arranged the working schedules of the various physicians, coordinated the efforts of the various units, and given

lectures and clinics on numerous occasions for the instruction of medical, nursing and social service groups, of the hospital, and for college classes and other outside organizations. He has submitted the following report:

"During the previous three years your Director has stressed the apparent clinical significance of the coincidence of the rapidly mounting admission rate at this hospital with the sociological factors involved in the rapidly deepening business depression.

A study extending over a number of years preceding this last depression had served to emphasize the apparent correlation of community prosperity and adversity on the one hand and our admission rate on the other.

Just what significance, if any, this year's figures may demonstrate only the succeeding months will reveal. The fact is, that for the first time during the depression, we find, instead of the marked increases, that there has been a halt at approximately last year's total. One thousand one hundred and forty-one admissions for the present year are actually 24 less than the previous year. The years 1930—1931—1932 had shown yearly increases of 193—142 and 241 respectively.

During the past few months, the quite noticeable brightening of the horizon in the business world must have brought some more optimistic visions. Should these visions contain the implied sociological and psychological factors, we may be justified in calling attention to the fact that halting of the admission rate again coincides with the progressing business recovery. It may be of importance to again bring forward, from an earlier observation, the sex factor as it pertains to admission figures for this hospital district even though the implications are not readily apparent. The slight numerical reduction of admissions this year has occurred solely with the male patients which is found to correspond with the trend of the times as previously observed. There was an increase of three female patients over the preceding year thus raising the percentage from 48 in 1932 to 49 in 1933 with of course a corresponding percentage drop for male admissions. There would seem to be a barometric import in all the preceding.

During the nine years preceding the beginning of the depression in the late months of 1929, our lowest admission rate for any year was 658 in 1923 and our highest was 910 in 1928—a variation of 252. Our building program which was planned to care for this

gradually increasing activity having been complicated by several disastrous fires was not nearly completed nor had we been able to sufficiently augment our personnel to adequately care for the burden of those days when we were called upon to stretch the then definitely inadequate facilities over the admission rates of the depression period. Sixty-four per cent. increase last year and sixty-two per cent. increase this year over the admissions of the last so called normal year find us attempting to carry on with relatively less ward capacity and with actual reduction of personnel as compared with that period. The disadvantages involved in this emergency fall upon the patient body. The best clinical results are obtained when there is adequate ward capacity for satisfactory classification and sufficient professional workers to provide individuals with personal study and treatment. There are measurable and immeasurable benefits accruing to each patient when these factors are found approaching the ideal. The measurable benefits can, to a certain extent, be demonstrated by the recovery rate. This year 258 patients were discharged as recovered and 208 as improved or a percentage of 22.7 and 18.3 respectively. Last year these figures were recovered 244 or 21.1 per cent. and 194 or 16.7 per cent. These figures at first appear to indicate that the recovery rate has shown improvement in spite of our handicaps. On more careful analysis, however, it can be shown that there has been practically no change compared with last year, in the number of patients out of the hospital on parole. The inference must be that, for some reason, those having shown sufficient improvement to warrant their return to the community, have made more satisfactory adjustments in less disturbing environments. This reason seems to be fairly evident and can be read in the reports made on individual patients by the social service workers at the time of their frequent visits in these homes. The reports speak of the increased confidence in the future, the return to remunerative employment by patient or those responsible for him, the release of the grip of poverty and its consequent charity involvements; complications which formerly may have been instrumental in sending him to the hospital and which also may have served to discourage the patient and unsettle the adjustment he was attempting to make during parole and only too frequently necessitating his return to the hospital.

During the mid-winter period the hospital was visited by an

epidemic of respiratory disorders which resembled influenza in many of its manifestations. It became quite general among patients and employees. At the height of its visitation the number of officers and employees incapacitated produced a rather serious emergency in the attempt to care for the large number of patients who were ill at the same time. Fortunately it did not run a very virulent course and the death rate was low as compared with the number of those afflicted. Among the aged and infirm including those with pulmonary tuberculosis it found less resistance and caused a higher mortality. The mortality rate from all causes was somewhat higher this year but the deaths from respiratory disorders incident to the epidemic more than accounted for this increase.

A curious situation developed during the month of March when two male patients on the same ward developed scarlet fever within the same week. One of these patients had been in the hospital nearly five years; the other nearly a year. Neither of these patients had been recently visited. Careful investigation among ward employees failed to reveal that they had been in contact with the disease outside of the hospital though it was prevalent in several areas in our district. During the same month a case of chicken pox developed on another ward in a patient who had been in the hospital over three years. In this case, as well, we were unable to find the communication with the source of infection. A student nurse developed chicken pox a few days after entering the service in April and a physician the same disease in May, neither of these had been in contact with the patient above cited. A female patient showed the symptoms of measles within a few hours after admission. We derive considerable satisfaction from the fact that prompt diagnosis and measures of isolation prevented a spread of any of these diseases.

That the clinical routine has been carried out conscientiously throughout the year is well apparent from a study and comparison with previous years of the individual reports of the various specialties and departments. These figures indicate the amount of detail that has been provided for our study, care and treatment of patients. They, as well, speak eloquently of the almost tireless energy used by a personnel which in most instances is considerably reduced from that of former years.

This briefly summarizes, in general expressions, the problems with which we have labored and the results which have been

obtained. A more detailed report covering many pages would present the trials and obstacles which have to be met in each separate department. The courage and loyalty shown in doing, as well as has been done, the vast amount of work, which if done completely and with entire satisfaction would require many more hands, presents a picture that is I believe to be commended.

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 of the state.....	30
Cases transferred to Mental Hospitals within the State.....	22
Cases transferred to Village for Epilepsy and Mental Defective Schools.	13
Cases deported	19
Cases transferred to Holmdel	279
Seventeen cases were handled and reported who were removed by relatives, discharged from trial visit, discharged recovered or died."	

Surgical Operations, Accidents, Births, Etc.

Surgical and diagnostic work in an institution of this type is much more exacting than in general practice, since the patients in many instances are incapable of describing their sensations and the surgeon must depend entirely upon his own observation of symptoms. Dr. Laurence M. Collins has continued during the past year to give the same high type of service to the hospital as formerly in this division. He combines in an unusual degree the two specialties of surgery and psychiatry, substitutes for the clinical director when required, and has responded creditably to calls as an expert witness on numerous occasions. His surgical work has been characterized by a remarkably high percentage of recoveries. Dr. Clifford Mills of Morristown has been retained as a consultant in this division during the year, has been very helpful with advice in difficult cases and has occasionally assisted or operated as requested. Dr. Collins has submitted his report for the year as follows:

"As in the past, only those cases have been operated upon in which there have been some definitely clear underlying pathological defect so that hopes were entertained not only to improve the physical condition of the patient but also to aid in the mental recovery.

There have been a great number of hernia operations performed on aged people; several of them have been confined to their bed because of this defect but under spinal anesthesia, the hernial

conditions have been repaired and the patient has returned to a fairly normal existence. Many of these patients were in a disturbed condition at the time of operation but there have only been one or two instances of a post-operative infection which speaks very highly of the nursing attention that they have received post-operatively.

A large number of employees suffering from acute surgical conditions have received attention at the Clinic building during the past year and a great number suffering from minor surgical ailments have not been tabulated in this report but have been recorded and filed in the case record at the Clinic building.

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Results</i>
19	Acute catarrhal appendicitis.....	Appendectomy.....	Recovered
6	Acute suppurative appendicitis.....	Appendectomy with drainage.....	"
32	Chronic catarrhal appendicitis.....	Appendectomy.....	"
1	Spoon in pyloric end of stomach with screw at the ileocecal valve....	Gastrotomy and enterotomy.....	"
1	Intestinal obstruction due to bands of adhesions.....	Obstruction relieved.....	"
1	Intestinal obstruction due to foreign body in gut.....	Enterotomy.....	"
1	Carcinoma of stomach.....	Exploratory.....	Died
1	Carcinoma of left breast.....	Radical amputation.....	Improved
1	Carcinoma of cervix.....	High amputation of cervix.....	Recovered
1	Tuberculosis of left kidney.....	Left nephrectomy.....	"
6	Tuberculosis of lungs.....	Phrenicotomy.....	Improved
1	Tuberculosis of right testicle.....	Right orchidectomy.....	Recovered
5	Tubercular adenitis of neck.....	Adenectomy.....	"
6	Chronic cholecystitis.....	Cholecystectomy.....	"
2	Acute suppurative cholecystitis.....	Cholecystectomy.....	"
10	Left inguinal hernia.....	Bassini.....	"
2	Umbilical hernia.....	Mayo.....	"
14	Double inguinal hernia.....	Bassini.....	"
8	Right inguinal hernia.....	Bassini.....	"
1	Strangulated right inguinal hernia...	Bassini.....	"
1	Strangulated left inguinal hernia....	Bassini.....	"
1	Left incarcerated inguinal hernia....	Bassini.....	"
1	Right incarcerated inguinal hernia...	Bassini.....	"
3	Right femoral hernia.....	Sac dissected and walls repaired.....	"
1	Left femoral hernia.....	Sac ligated and walls repaired.....	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Results</i>
1	Strangulated right femoral hernia ...	Hernia repaired with an anastomosis because of gangrenous gut.....	Died
1	Incarcerated right femoral hernia ...	Sac ligated and walls repaired	Recovered
2	Ventral hernia	Tissue dissected and walls repaired.....	"
1	Cyst in the canal of nuck	Cyst extirpated.....	"
1	Bartholin cyst.....	Cyst extirpated.....	"
2	Tumor of the right testicle	Orchidectomy.....	"
1	Tumor of the left testicle.....	Orchidectomy.....	"
3	Tumor mass of right breast.....	Mastectomy.....	"
2	Tumor mass of left breast.....	Mastectomy.....	"
2	Tumor of left testicle (Teratoma)...	Orchidectomy	"
1	Prolapsed cystic ovary (right).....	Right oophorectomy.....	"
2	Cystic left ovary	Left oophorectomy	"
11	Cystic ovaries, double salpingitis and chronic catarrhal appendicitis ..	Salpingo-oophorectomy and appendectomy.....	"
1	Left ovarian cyst and left pyosalpinx	Left salpingo-oophorectomy.....	"
1	Chronic cystic right ovary	Right oophorectomy.....	"
1	Fibroid uterus with chronic cystic ovaries	Supravaginal hysterectomy and double oophorectomy....	"
14	Fibroid uterus, chronic cystic ovaries, chronic catarrhal appendicitis.....	Supravaginal hysterectomy, double oophorectomy and appendectomy.....	"
2	Fibroid uterus, right cystic ovary right salpingitis, chronic catarrhal appendicitis.....	Supravaginal hysterectomy right salpingo-oophorectomy and appendectomy	"
1	Left cystic ovary, left salpingitis and chronic catarrhal appendicitis ..	Left salpingo-oophorectomy and appendectomy	"
1	Double cystic ovaries, double salpingitis and chronic catarrhal appendicitis.....	Double salpingo-oophorectomy and appendectomy.....	"
1	Fibroid uterus, chronic cystic ovaries, chronic salpingitis.....	Supravaginal hysterectomy, double salpingo-oophorectomy ..	"
1	Fibroid uterus	Supravaginal hysterectomy.....	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Results</i>
1	Prolapsed right cystic ovary, right salpingitis and chronic catarrhal appendicitis.....	Right salpingo-oophorectomy and appendectomy.....	Recovered
1	Fibroid uterus, cystic left ovary, left salpingitis.....	Supravaginal hysterectomy, left salpingo-oophorectomy ..	"
1	Fibroid uterus, left hydrosalpinx, left cystic ovary, right cystic ovary, right salpingitis and chronic catarrhal appendicitis	Supravaginal hysterectomy double salpingo-oophorectomy and appendectomy	"
1	Fibroid uterus, left fibrotic ovary, left salpingitis, right ovarian cyst right salpingitis and chronic catarrhal appendicitis.....	Supravaginal hysterectomy with double salpingo-oophorectomy and appendectomy.....	"
1	Fracture of left clavicle with dislocation of left shoulder.....	Dislocation reduced, arm immobilized	"
2	Subclavicular dislocation of right shoulder.....	Kocher method	"
1	Anterior dislocation of right shoulder.....	Dislocation reduced.....	"
1	Anterior dislocation of left shoulder.	Dislocation reduced.....	"
11	Intracapsular fracture of neck of right femur.....	Fracture reduced	"
1	Compound fracture of left thumb...	Fracture reduced	"
2	Fracture of neck of left humerus....	Fracture reduced	"
4	Colles fracture of right arm.....	Fracture reduced	"
3	Colles fracture of left arm.....	Fracture reduced	"
1	Fracture of 5th metacarpal bone, right hand	Fracture reduced	"
2	Fracture of surgical neck of right humerus.....	Fracture reduced	"
1	Linear fracture of left radius.....	Fracture reduced	"
1	Fracture of the right Os Calcis....	Fracture reduced.....	"
1	Fracture of the distal end of right radius.....	Fracture reduced.....	"
1	Fracture of the distal end of the left radius.....	Fracture reduced.....	"
1	Fracture of the right humerus, upper 3rd.....	Fracture reduced.....	"
4	Fracture of the middle 3rd of right ulna.....	Fracture reduced.....	"
1	Fracture of the lower 3rd of right ulna.....	Fracture reduced.....	"
10	Fracture of the neck of left femur...	Fracture reduced.....	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
1	Fracture of distal phalanges of the 1st and 2nd toes, left foot	Fracture reduced	Recovered "
1	Fracture of great trochanter, left hip	Leg immobilized	"
1	Fracture of lower 3rd, left radius ..	Fracture reduced	"
1	Fracture of terminal phalanx large toe, right foot	Fracture reduced	"
1	Fracture of the upper end of ulna two inches below elbow joint	Fracture reduced	"
1	Fracture of the right radius	Fracture reduced	"
1	Fracture of left humerus, middle 3rd	Fracture reduced	"
1	Fracture of lower end of radius	Fracture reduced	"
1	Fracture of left ulna, distal end	Fracture reduced	"
1	Fracture of right tibia and fibula ...	Fracture reduced	"
1	Laceration of tendons of right arm ..	Tendons sutured	"
1	Osteomyelitis right thumb	Amputation at metacar- pophalangeal articulation	"
1	Osteomyelitis of right index finger ..	Amputation at metacar- pophalangeal articulation	"
1	Osteomyelitis with gangrene of low- er extremity, right leg	Amputation above knee joint	"
1	Transverse fracture of neck of left radius	Fracture reduced	"
1	Undescended right testicle	Cord lengthened	"
2	Varicocele	Veins ligated	"
4	Hydrocele	Bottle operation	"
3	Elongated prepuce	Circumcision	"
5	Mucous polyp of cervix	Polyp extirpated	"
1	Pregnancy, 8th month (Eclampsia)	Cæsarian section	"
1	Ranula of mouth	Cyst extirpated	"
2	Empyema of pleural cavity	Rib resection with drain- age	"
10	Lacerated wounds of scalp	Wounds sutured	"
5	Sebaceous cyst of scalp	Cyst extirpated	"
4	Carbuncle of neck	Carbuncle curretted	"
5	Cellulitis of right arm	Incised and drained	"
7	Cellulitis of leg	Incision and drainage ...	"
1	Cellulitis of scalp	Incision and drainage ...	"
1	Lypoma of abdominal wall	Lobectomy	"
1	Epitheloma of 2nd finger, right hand	Amputation at metacarpal phalangeal articulation ..	"
2	Gluteal abscess	Incised and drained	"
1	Ischiorectal abscess	Incised and drained	"

<i>No. of Cases</i>	<i>Diagnosis</i>	<i>Operation Performed</i>	<i>Result</i>
1	Lypoma of right axilla	Lobectomy	"
1	Palmer abscess	Incised and drained	"

The number of fractures and other injuries to patients of a non-fatal character continued high this year as a result of the greatly overcrowded condition of the wards and the impossibility of proper classification and segregation. Fortunately there were no accidents sufficiently serious to cause death. One patient who was working on the grounds died after a fall, but an autopsy showed that death was due to a cerebral hemorrhage which evidently caused the fall rather than to any effects of the fall itself; the patient was suffering from general paralysis. Two patients, one male and one female, succeeded in committing suicide during the year by hanging with some article of wearing apparel.

The births during the year was as follows:

Patient admitted April 25, 1932; female child born August 24, 1932. The child was illegitimate and was removed to the State School at Vineland on May 15, 1933.

Patient (colored) admitted October 28, 1932; male child born January 23, 1933. The child was illegitimate and was removed by the State Board of Children's Guardians to be placed in a foster home in Newark on March 20.

Patient admitted June 28, 1933; female child born June 30. The child was legitimate, and was still resident in the hospital at the date of this report.

Division of Proctology and Colonic Therapy

This division of diagnostic and treatment service was opened two and one-half years ago and has proved very much worth while in its results. Dr. Marshall D. Hogan, a specialist in this line of work, has given close and interested application throughout the year and has been able to increase the number of examinations, treatments, and operations to meet the growing requirements. He has submitted a detailed report in which he discusses the type of treatments, the equipment used, and other interesting features, which I have felt obliged to omit for the sake of brevity. He also especially commends the work of the two technicians, Mr. Jack I. Taylor, R. N., and Miss Evelyn Soper, R. N. The summary of the year's activity is as follows:

COLONIC THERAPY

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Number of irrigations.....	6,224	6,078	12,302
Number of patients treated.....	402	468	870
Number of patients completed.....	394	385	779
Average number of irrigations per patient	15	13	

PROCTOLOGY

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Number of rectal examinations.....	704	351	1,055
Consultations with examination.....	156	104	260
Operations:			
Hemorrhoidectomy.....	49	27	76
Fistula in ano.....	3		3
Fisture in ano with rectal stricture,.....		1	1
Ulcers.....	5	1	6
Carcinoma of anus.....		1	1
Biopsy of inguinal glands.....		1	1
Anal skin tags.....	3		3
Rectal stricture.....	1		1
Total number of operations.....	61	31	92

From January 1 to June 30, Dr. Hogan was on part time duty at Newark City Hospital as resident urologist under Dr. O'Crowley. He has continued his work at this hospital, on part time with corresponding salary reduction. I feel that the Doctor's experience in this specialty will be of great value to this hospital, since we have many patients with physical complications involving the urinary tract.

Gynecological Division

The gynecological work of the hospital consists of routine examinations of all women patients on admission, treatments as required, consultations on those in which surgery seems indicated, and special examinations of resident patients or employees at the request of other members of the staff. Dr. Margaret Douglas has carried this division throughout the year, although suffering at times from poor health. Her report is as follows:

EXAMINATIONS

New patients.....	705
Referred patients.....	167
Employees.....	112
Total.....	984

TREATMENTS

Number of patients treated.....	1,902
Number of endocrine treatments.....	1,800
Number of Elliott treatments.....	567
Number of surgical consultations.....	108
Number of treatments for employees.....	380

SMEARS

Number of smears.....	705
Number of smears positive.....	25

Three births and forty-eight gynecological operations in which this division was interested have been listed already under the surgical work of the institution.

Eye, Ear, Nose and Throat

The work in this specialty has been continued as for a number of years past under Dr. P. J. Gambill. As reported last year, Dr. Gambill became ill following an attack of influenza and has continued partially incapacitated up to the present time, although showing gradual improvement. He has submitted a rather detailed statement for the twelve month period which I have condensed somewhat:

In addition to routine examinations of each patient soon after admission, special examinations have been made as requested.

EXAMINATIONS

	<i>Eye</i>	<i>Ear</i>	<i>Nose</i>	<i>Throat</i>	<i>Total</i>
Patients, special.....	414	534	378	768	2,114
Employees, special.....	101	124	115	150	490
Total.....	515	658	513	918	2,604

TREATMENTS

	<i>Eye</i>	<i>Ear</i>	<i>Nose</i>	<i>Throat</i>	<i>Total</i>
Patients:					
No. treated.....	591	364	289	118	1,432
No. treatments.....	865	1,144	925	381	3,315
Employees:					
No. treated.....	151	110	141	176	578
No. treatments.....	178	167	234	300	890

SURGICAL OPERATIONS

Operations Performed:	<i>Patients</i>	<i>Employees</i>	<i>Total</i>
Adnoidectomies.....	10		10
Antrotomies.....	22		22

	<i>Patients</i>	<i>Employees</i>	<i>Total</i>
Brain abscess (drainage)	2		2
Cauterization anterior part of nose (electric cautery)	16		16
Cauterization corneal ulcers.....	12		12
Cauterization inferior turbinate.....	3		3
Curettement middle ear	34		34
Drainage abscess of mastoid.....	2		2
Dilation eustachian tubes	8		8
Dilation lacrymal duct.....	4	1	5
Dilation naso-frontal duct.....	33	16	49
Direct laryngoscopy	7		7
Ethmoidotomy	35	22	57
Incision and drainage abscess of external ear	6		6
Incision and drainage abscess of orbit	8	4	12
Incision and drainage abscess of face and orbit ..	12		12
Incision and drainage abscess of eyelid	21		21
Incision and drainage abscess of septum	9	6	15
Incision and drainage of lacrymal gland	1		1
Incision and drainage peritonsillar abscess	10	16	26
Intra-nasal window into antrum	11		11
Iridectomies.....	4		4
Mastoidectomies	4		4
Myringotomies		26	26
Paracentesis of ear drums	18		18
Partial submucous resection of septum	8		8
Plastic repair of eyelid	6		6
Post-operative curettement of mastoid.....	2		2
Radical antrum (modified).....		2	2
Removal of foreign body from eye.....	28	18	46
Removal of foreign body from ear	10		10
Removal of foreign body from œsophagus	2		2
Removal open safety-pin from œsophagus	1		1
Removal aural polyps	22	2	24
Removal nasal polyps.....	12	1	13
Removal chalazion from eyelid	2		2
Removal of lingual tonsil	2	2	4
Repair of injured nose with partial removal of lateral nasal bones		1	1
Setting fractured nose	14		14
Sphenoidotomies.....	10	2	12
Submucous resection of septum, local anesthesia.		1	1
Suturing partially enucleated eyeball in socket, plastic repair	1		1
Tonsillectomies	47	1	48
Turbinectomies, anterior	10	6	16
Total.....	469	127	596

Dental Division

The previous program of dental service has been continued this year. All new patients have been given a dental examination soon after admission, with x-ray films whenever indicated, a chart made of the findings, and necessary work given attention. Dental examinations have also been given to the resident patient population as time permitted, with the filling of carious teeth and the extraction of those in septic condition. After examination of each patient, a statement has been sent to the correspondent with an estimate of the cost of repair and replacement; this year the receipts amounted to \$736.00, which is only about 38 per cent. of that collected in 1930. Although in the interests of the State, this effort is made to obtain funds for covering expenses, all work necessary for the health and comfort of the patients has been done irrespective of the family's ability to pay.

Dr. T. R. Palmer has continued in charge of the division and has cheerfully made every effort to meet all requirements. He has submitted the following report for the year:

"Dr. J. F. McCluskey has continued as junior resident dentist, Mr. P. R. DeNapoly as mechanical dentist, and Dr. F. C. Bartleman as consulting oral surgeon. Drs. D. J. Galdieri and G. DePalma, completed their terms as dental internes, left to enter private practice, and their places were taken by Dr. N. J. Sauer and Dr. Edward T. Piatt, recent graduates of the University of Pennsylvania and Temple University, respectively.

EXAMINATIONS

New patients.....	1,441
Ward patients.....	2,479
Total.....	3,920

X-RAY

Intra-oral X-ray examinations in dental division.....	1,464
---	-------

TREATMENTS

Dental treatments given.....	9,765
Oral prophylaxis.....	5,371
Vincent's infection treatments.....	94
Total.....	15,230

ORAL SURGERY

Buried impacted roots removed.....	33
Impacted teeth removed.....	300
Cysts removed.....	36

Surgical removal of teeth	375
Cellulitis opened and drained.....	29
Alveolectomies	170
Osteomyelitis	5
Fibroma.....	1
Fractured mandible reduced and wired.....	2
Fractured mandible reduced and splinted.....	1
Total.....	952

EXODONTIA

Septic teeth removed	6,196
----------------------------	-------

FILLINGS

Gold	127
Amalgam	2,435
Silicate enamel.....	1,673
Cement.....	933
Total.....	5,168

REPLACEMENTS

Full dentures made and inserted.....	130
Partial dentures with gold clasps.....	53
Partial dentures with lingual bar and clasps	35
Total.....	218

BRIDGES

Fixed and removable.....	8
--------------------------	---

REPAIRS

Dentures repaired.....	129
Inter-dental splint, vulcanite	1

Dental care of the wards of the Morris County Children's Home has been continued and throughout the year necessary dental treatment has also been given at our clinic to the wards of the State Board of Children's Guardians in this territory.

WARDS OF MORRIS COUNTY CHILDREN'S HOME

Extractions	129
Oral prophylaxis	141
Fillings:	
Amalgam	105
Silicate	61
Cement	30
Gold	2
Total fillings.....	198

WARDS OF STATE BOARD OF CHILDREN'S GUARDIANS

Extractions	29
Oral prophylaxis	12
Fillings:	
Amalgam	10
Silicate	17
Cement	12
Total fillings	39

It will be noted that the amount of work done shows an increase over that accomplished last year in all subdivisions, which speaks well for the energy and efficiency of the service.

In October Dr. Palmer was elected President of the Tri-County Dental Association.

Pathological Division

Dr. Thomas B. Christian has continued in charge of the pathological laboratory of the hospital and has given the same high type of work as in preceding years. He has kept abreast of progress in his specialty, has made some original investigations along various lines, and has been called upon from time to time by the county authorities and by the courts to assist in certain cases. He has submitted the following statement of the year's work:

"The pathological division has continued its routine studies on all patients admitted to the institution, as in previous years, with the addition of several new tests. The following examinations have been made on all newly admitted patients: urinalysis (chemical and microscopical); blood counts (red, white, differential, hemoglobin and blood pictures); blood chemistry, consisting of urea, non-protein, creatinine, sugar and calcium determination, Wasserman and Hecht-Gradwohl tests; cervical and vaginal smears on all female patients and urethral smears on male patients; and spinal fluid examinations. All repetitions of laboratory work and additional examinations have been performed at the request of the physicians in charge of the patients and were used for a more accurate diagnosis and follow up in the treatment of cases. Patients with general paralysis, cerebral syphilis, or tabes dorsalis have been put on the malaria plasmodium treatment. The length of treatment and the number of paroxysms have varied according to the physical condition of the patient and the

observation of reactions. All cases of neurosyphilis that were apparently immune to the malaria plasmodium and who had little reaction or none at all were given the foreign protein intravenous treatment, such as the mixed typhoid vaccine. All cases of neurosyphilis, after the malarial treatment was terminated, were given intravenous tryparsamide; in most instances this will be continued for a period of several years; all neurosyphilitics leaving the institution were advised to continue their treatment in their home town or requested to return to this hospital clinic for treatment and periodic examination of blood and spinal fluid. All cases in this institution with laboratory or clinical evidence of general systemic syphilis in any stage were given routine anti-syphilitic treatment. The drugs used for this were neo-bismuth compounds and sodium iodide. Our basal metabolism tests have been increased in number and in accuracy and have proved very useful among co-operative psychotic patients. We are proud to include in this report a very large increase in the number of autopsies, from 14 last year to 75 this year.

The following table shows the regular treatment for syphilis:

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. of cases under treatment.....	143	42	185
No. of doses neo-arsphenamine.....	422	255	677
No. of doses mercury and other drugs.....	3,321	701	4,022

The venereal disease clinic for indigent patients of Morris County has continued in operation. The patients for treatment must be referred by a physician, must be indigent, and according to the regulations from the Venereal Disease Clinic Headquarters, they must give name and source of their infection. All drugs used in the clinics have been furnished by the United States Public Health Clinic, Venereal Disease Section. These drugs are sent to the clinic in return for submitting to them the name of the patient and the source of infection. We have included in our venereal disease clinic all parole patients of this institution who are in need of anti-syphilitic treatment. The hours are, every Friday afternoon between 2:00 and 4:30.

<i>Cases Treated:</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Syphilis.....	221	114	335
Gonorrhoea.....	139	58	197
Chancroid.....	19	12	31
Total.....	379	184	563

SUMMARY OF THE WORK OF THE
PATHOLOGICAL LABORATORY

<i>Urine:</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Chemical and microscopical	2,331	3,660	5,991
Quantitative for albumin	822	1,467	2,289
Quantitative for sugar	141	390	531
Quantitative for chlorides	19	12	31
Cultures for types of bacteria	39	20	59
Microscopical examinations of stained smears	25	10	35
Phenolsulphonephthalein functional tests	12	16	28
Positive casts	557	500	1,057
<i>Blood:</i>			
Enumeration of red blood cells	1,123	1,263	2,386
Enumeration of white blood cells	1,324	1,308	2,632
Estimation of hemoglobin	180	444	624
Differential leukocyte counts	1,324	1,308	2,632
Examination for plasmodium malaria	27	18	45
Widals	9	12	21
Cultures	7	5	12
Examination for pneumococcus	21	30	51
Determination for blood groups	38	25	63
Color index	114	160	274
Bleeding time	23	27	50
Platelets	14	24	38
Estimations of coagulation time	33	46	79
Blood picture	40	135	175
Enumeration of reticulated red blood cells	5	7	12
Sedimentation rates	12	44	56
Fragility tests	6	4	10
Vandenberg tests	15	24	39
Sugar	1,049	1,086	2,135
Non-protein nitrogen	926	957	1,883
Urea nitrogen	1,017	1,051	2,068
Creatinine	983	961	1,944
Uric acid	26	34	60
Cholesterol	19	22	41
Calcium	668	651	1,319
Chlorides	24	19	43
Icterus index	5	5	10
Total nitrogen	12	8	20
Tests for CO ₂ in the blood	6	9	15
Wassermann tests	1,218	1,033	2,251
Hecht-Weinberg-Gradwohl tests	1,210	1,024	2,234
<i>Spinal:</i>			
Wassermann tests	952	280	1,232
Cell counts	900	220	1,120
Globulin	952	280	1,232

	<i>Male</i>	<i>Female</i>	<i>Total</i>
<i>Spinal: (Continued)</i>			
Protein.....	900	220	1,120
Colloidal gold curve.....	952	280	1,232
Microscopical examination of stained smears.....	125	80	205
Cultures.....	20	8	28
Quantitative sugar estimations.....	952	280	1,232
Quantitative chlorides.....	350	90	440
Non-protein nitrogen.....	25	10	35
Creatinine.....	25	10	35
<i>Sputum:</i>			
For tubercle bacilli.....	38	25	63
For bacterial flora.....	14	8	22
Cultures.....	37	25	62
For types of pneumococci.....	42	25	67
<i>Feces:</i>			
For parasitic organisms.....	225	304	529
For tubercle bacilli.....	15	24	39
For typhoid bacilli.....	19	6	25
For bacterial flora.....	225	304	529
For occult blood.....	23	18	41
<i>Smears:</i>			
For gonococci.....	110	686	796
For treponema pallidum.....	16	8	24
From diphtheriae cultures.....	30	16	46
From eyes.....	5	2	7
From pus from ears.....	27	8	35
From pus from wounds.....	20	10	30
Examinations of gums for Vincent's angina.....	12	27	39
Examination of throat for Vincent's angina.....	34	50	84
<i>Stomach Contents:</i>			
Total acidity.....	17	9	26
Free HCl.....	17	9	26
Combined HCl.....	17	9	26
Salts.....	5	4	9
For Oppler Boas bacillus.....	14	8	22
Cultures.....	5	3	8
Occult blood.....	17	9	26
<i>Miscellaneous:</i>			
Patients inoculated with malaria.....	73	25	98
Autogenous vaccines.....	32	20	52
Cultures from teeth.....	20	14	34
Examination of granulomas.....	5	35	40
Basal metabolism estimations.....	8	37	45
Sugar tolerance tests.....	8	20	28
Examinations of tissues.....	46	96	142
Autopsies.....	44	31	75
Typhoid vaccine (doses).....	2,395	2,390	4,785
Aschheim-Zondek test.....		16	16
Total number.....	25,192	23,858	49,050

<i>Water:</i>	
For colon bacilli	78
For typhoid bacilli	17
Bacterial counts	78
Quantitative chlorine estimations	12
<i>Milk:</i>	
Specific gravity	63
Fat contents	63
Total solids	63
Proteids	63
Sugar	63
Bacterial counts	78
Smears for pus and blood	305
Miscellaneous Chemical Tests (Organic and inorganic)	124
Total number	1,007
Grand Total	50,057

Roentgenology and Electrotherapeutics

The X-ray serves a highly important function in the diagnosis of many surgical conditions, but to be of the greatest service exposures must be skillfully made and the findings wisely interpreted. For a number of years past Dr George R. Hampton has been in charge of this work and his accuracy and experience have made the division invaluable. The report for this year shows over a 10 per cent. increase in the amount of work done.

The electrotherapeutic section affords important treatment facilities for a variety of physical complications and is sometimes used with good results in mental depressions. Since new equipment and increased space was provided for this work three years ago there has been a marked expansion in its activity. Several new treatments are listed this year and most of those formerly used have been increased in number, the diathermia in particular showing an increase of over 78 per cent.

ROENTGENOGRAPHY

<i>Exposures:</i>	
Head	591
Maxilla	2,206
Chest	656
Abdomen (Barium meal)	165
Kidney	57
Gall-bladder	35
Hip	81
Pelvis	16

Exposures: (Continued)

Upper extremity.....	381
Lower extremity.....	246
Spine.....	43
Teeth.....	175
Total exposures.....	4,652

Fractures:

Skull.....	7
Mandible.....	4
Clavicle.....	1
Rib.....	7
Humerus.....	14
Radius.....	23
Ulna.....	8
Metacarpal.....	11
Phalange.....	12
Femur.....	22
Tibia.....	2
Fibula.....	1
Metatarsal.....	1
Nasal bone.....	4
Pubic bone.....	2
Os Calcis.....	4

Dislocations:

Humerus.....	3
Phalange.....	2
Hip.....	1

Osteomyelitis:

Femur.....	6
Mandible.....	3
Tibia.....	2
Phalange.....	2

Foreign Bodies:

Hand—bullet.....	2
Aesophagus—safety pin.....	1
Skull—bullet.....	1
Stomach—pins.....	4

Chest:

Pulmonary tuberculosis (acute).....	152
Pulmonary tuberculosis (chronic).....	131
Bronchitis.....	8
Pleurisy with effusion.....	12
Aortic aneurism.....	3
Cardiac hypertrophy.....	6
Thickened pleura.....	14

Abdomen:

Appendicitis—chronic.....	4
---------------------------	---

Abdomen: (Continued)

Colonic hypomotility.....	5
Intestinal ptosis.....	6
Gall stones.....	5
Ulcer of stomach.....	3
Collitis.....	4
Abdominal tumor.....	6
Kidney stones.....	4

Teeth:

Impactions.....	146
Periapical abscess.....	110
Septic roots.....	144
Pyorrhea.....	168
Cyst.....	14

Miscellaneous:

Mastoiditis.....	13
Sinusitis.....	4
Curvature of spine.....	8
Arthritis.....	2
Ankylosis.....	4
Brain tumor.....	2

ELECTRO-THERAPEUTIC AND X-RAY TREATMENTS

High frequency current.....	1,781
Galvanic and sinusoidal currents.....	127
Vacuum electrode.....	760
Ultra violet rays.....	653
Diathermia.....	1,175
Infra red rays.....	270
Static head breeze.....	174
Static spark.....	54
Electrolysis.....	89
Morse wave.....	135
Fulguration.....	15
Electrical vibration.....	65
X-rays.....	163
Total treatments.....	5,461

Tuberculosis

With the opening of the tuberculosis building in August, 1931 special work for those patients suffering from this physical complication was begun. Dr. Harold S. Hatch, Superintendent of the Morris County Sanatorium for the Tuberculous, was engaged as a part time consultant, and Dr. D. G. Melvin of the resident staff was assigned to full time duty at the new building. The work has been continued this year with the same personnel, and

the results have been highly gratifying. Dr. Hatch has submitted a somewhat detailed report of the purpose and method of the work, which I have omitted for want of space, and of the examinations made, which I am including as follows:

<i>Diagnosis</i>	<i>No. Examined</i>
Active pulmonary tuberculosis	158*
Pleurisy with effusion	4
Tuberculous orchitis	1
Tuberculous cervical adenitis	1
Inactive pulmonary tuberculosis	153
Chronic bronchitis	20
Tuberculosis suspects	17
Bronchiectasis	4
Chronic adhesive pleuritis	3
Emphysema	20
Lung tumor	2
Bronchial asthma	3
Aortic aneurism	1
Empyema	2
Lobar pneumonia	1
Pneumonitis	5
Failing compensation	2
Lung abscess	3
Negative for chest disease.....	437
Total number examined	837

* Of the active cases of pulmonary tuberculosis examined, 60 were new cases and 98 were re-examinations of known cases.

During the year 375 artificial pneumothorax treatments were given and a number of phrenicotomies were performed in consultation with the surgical division. Two series of lectures and demonstrations were given to student nurses.

Occupational Therapy Division

In the occupational therapy division there has been some slight curtailment of the work for reasons of economy, but every effort has been made to maintain or improve the value of the activities to the patients, even when some decrease in production became necessary. Emphasis has been placed on those things which were needed in the institution and a very large number of articles such as dresses and other clothing, sheets, pillow cases, brooms, rugs, and so on have been made and put to immediate use. Dr. George B. McMurray has continued in charge of the entire occupational therapy division and has spared no effort to make

it a success in every way. He has submitted the following report:

"During the year the two occupational therapy buildings have been visited by many, both men and women, interested in this type of work including a number of hospital superintendents from various parts of the United States and Canada. Exhibits of the work done have been held in different parts of New Jersey, including the Trenton State Fair, Flemington Fair, and Sussex Fair. Very close supervision has been given all of the activities this year, with the most strict economy in mind. There is no doubt that the division has been of great therapeutic value and also a definite means of saving for the institution.

The occupational therapy division is subdivided into Men's Arts and Crafts, Women's Arts and Crafts, Plain Sewing, Printing and Bookbinding, Concrete Block Industry, and Willow Industry,—all of which are carried on in the different industrial buildings or in other special quarters,—and curative workrooms, in which classes are held either on or adjacent to the day wards. Besides those patients employed in the occupational therapy division, many others have been usefully engaged about the institution, so that about 60 per cent. worked at least part of each day. On June 30, 78 were employed in the kitchens and bakery, 96 in the laundry, 73 on the grounds, and grading, 163 in the farm and garden, 35 in the shops as assistants to the mechanics, 31 at the dairy barns, 66 in detail work, 77 in miscellaneous jobs, 305 in the cafeteria and dining rooms, and about 550 on the wards and in the dormitories.

The following is a tabulation of the work done in the different sections of the occupational therapy division:

MEN'S ARTS AND CRAFTS

Willow:

Chairs	35
Chaise longue	1
Fern stands	4
Hampers	26
Wash baskets	61
Fire side baskets	31
Scrap baskets	32
Dog baskets	9
Miscellaneous baskets	193
Repairs to willow furniture	24
Total articles of willow	416

<i>Reed:</i>	
Flower and other fancy baskets	741
Sewing baskets	20
Melon baskets	122
Sandwich tray baskets	20
Repairs to reed and fibre cord furniture	60
Total articles of reed	963
<i>Toys:</i>	
Row boats	3
Wagons and carts	11
Wheelbarrows	8
Child's chairs, "Cat" chairs, etc.	123
Table and chair sets	20
Unclassified toys	35
Total toys	200
<i>Broom:</i>	
Regular brooms	2,040
Whisk brooms	348
Hearth brooms	40
Scrub brushes	382
Total brooms	2,810
<i>Chair recaning:</i>	
Chairs recaned	630
Chair seats of flat reed	100
Total	730
<i>Carpentry:</i>	
Wall book racks	12
Adirondack chairs	16
Adirondack settees	4
Adirondack settees, child's size	4
Bird houses	13
Magazine racks	2
Foot stools	34
Tables, tip top and glass top	3
Hook rug frames	24
Dye cabinet, large	1
Warp cabinet, large	1
Rag bins	10
Collapsible tables	10
Chairs repaired	100
Total	234
<i>Textiles:</i>	
Loom rugs	281
Hooked rugs	55

Textiles: (Continued)

Tied rugs.....	5
Cocoa fibre mats.....	53
Total	394
Total articles made and repaired in this section.....	5,747

In addition to the above, 500 lbs. of material was dyed for use in other divisions. From this section of the occupational therapy division the following articles were sent to the Storehouse to be distributed for hospital use.

Brooms	1,596
Whisk brooms	144
Scrub brushes.....	288
Cocoa fibre mats.....	96
Scrap baskets	2
Rugs.....	102
Hampers	1
Adirondack chairs.....	3
Willow chairs.....	37
Baskets.....	15
Fergeries.....	2
Total articles.....	2,286

WOMEN'S ARTS AND CRAFTS

Rugs:

Braided rugs.....	291
Hooked rugs.....	84
Hooked rug seats	104
Woven rugs.....	40
Loom rugs.....	97
Total rugs	616

Fancy Work:

Baskets.....	157
Bunnies, rag dolls, stocking dolls, etc.....	107
Doilies, center pieces, runners, spreads, towels, etc.....	624
Total fancy articles	883
Total articles made in this section.....	1,504

PLAIN SEWING

Gingham dresses	3,854
Night dresses and night shirts.....	4,356
Petticoats	318
Petticoat slips.....	3,052
Strong dresses.....	104

Burial suits.....	250
Doctors' and nurses' gowns.....	96
Nurses' aprons.....	157
Barber aprons.....	48
Hand towels.....	8,904
Hand towels made from sugar bags.....	571
Napkins.....	216
Laundry bags.....	737
Coffee bags.....	60
Sheets.....	7,770
Pillow cases.....	6,632
Drawers.....	687
Diapers.....	48
Total articles.....	37,860

PRINTING AND BOOKBINDING

Ruling impressions.....	804,542
Printing impressions.....	1,682,966
Total.....	2,487,508
Padding jobs.....	11,755
Binding jobs.....	7,447
Total.....	19,202

CINDER BLOCKS

In this industry, blocks have been made up as required for use in construction work at the institution.

WILLOWS

The hospital maintains its own willow holt and seasonal work has been carried on there as usual. The occupational therapy division cooperated with the grounds division in caring for the growing willows during the summer; the shoots were cut and stacked at the end of the growing season, and in the spring, after proper soaking in a small pond, they were stripped, sorted and dried for use in making and repairing willow furniture.

CURATIVE WORKROOMS

Occupational therapy on the wards is designed to provide interesting work for those patients who, either because they have recently come to the hospital or because of their physical or mental condition, are unable to go to the occupational buildings. Close personal attention is given and a constant effort made to interest the patients in some form of creative activity, to foster

concentration, and so to divert attention from internal to external channels. This section has continued its valuable service throughout the year under the competent and experienced direction of Miss Stella McClurkin, who has submitted the following report:

"In October five positions on the staff were discontinued for reasons of economy, four classes were discontinued and two were shortened to one and one-half hours per day. There are now three trained occupational therapists and eight partially trained assistants; 30 classes are held daily with an average monthly enrollment of 819. The total number of individual patients treated on prescription during the year was 2,134, of whom 1,327 were newly prescribed by the physicians.

During the year a total of 1,565 articles were completed for sale; 1,533 articles were made for the use of patients, largely from waste material, and 65 dresses were made for patients; material was woven to reupholster the cushions on seats and chairs in the visiting rooms of the Reception building; 10 slipper frames were built for use in the division, and one small table was rebuilt. Exhibitions and sales during the year included one held in the section office, Clinic building, November 16-18; one at the annual meeting of the New Jersey State Occupational Therapy Association at Asbury Park in May, several at different fairs, and articles sent to the Women's Work and Art Exchange in Morristown. Three groups of post-graduate nurses, four groups of affiliate nurses and three groups of Greystone Park student nurses completed the course in occupational therapy in the twelve months period."

Physical Education Division

One of the major problems in the care of the mentally ill is to provide interesting physical activity for all types. Among the women patients, particularly those who have been resident in an institution for a considerable time, there is always a tendency either to sit about the wards all day doing practically nothing, or to engage constantly in annoying or destructive expressions of their restlessness. The division of physical education was organized to provide stimulating and coordinated exercise for all patients, especially those on the "back wards" of the older residence buildings. This year the work has been continued under the same director as last year, Mrs. Dorothy Driscoll Johnson, who

has been very successful in carrying on the largest possible number of classes. Her report I have summarized as follows:

"There have been no promotions, salary increases, or appointments on the teaching staff during the year. One teacher resigned in September and her place was not filled, while the position of male instructor was abolished in October, further to reduce expenses. Two years ago the staff consisted of four senior teachers, five junior teachers and a vacation assistant, in addition to the director; now we have one senior teacher and five junior teachers, or a total staff of seven.

For a time work on the male wards was discontinued and then it was resumed for Reception building patients in the gymnasium under the instruction of the senior teacher with a male attendant on duty with the group. Average attendance has been 15 patients and indoor exercises have been varied by outdoor classes in baseball and volley ball. In the Main building, south, classes have met daily covering eleven wards, with a twelfth included in out of door work. The schedule provides one-half hour in the morning and one-half to three-quarters of an hour in the afternoon for each class, with two teachers in attendance and progressive instruction in marching, calisthenics, folk and social dancing, games, and singing; whenever weather permitted, classes were held out of doors. Afternoon classes were held for three wards of the Dormitory building south side daily, with one instructor, assisted by an attendant when it could be arranged to have classes out of doors. Classes for women in the Reception building have been held daily either in the gymnasium or outside on the lawn; general and corrective exercises have been given when prescribed by the physicians. Morning classes in bowling have been held for groups of women from the Senile, Dormitory and Main buildings, ending with a bowling tournament on June 21, and two special classes of women from the Main building have been taken once a week to the Reception building gymnasium where they have been instructed in the use of apparatus. A ping pong tournament was held June 27 among six sets of women patients from the gymnasium classes.

The teachers of this division regularly attend the Monday evening dance at the Dormitory building for all orderly patients of the hospital. A baseball schedule has been arranged for the summer months, and many patients go to the games regularly

each Saturday afternoon. Ward parties for patients participating in physical education were held once a month during the year. The usual program included games, dancing and singing, with simple refreshments at the end. Large parties were given each month also, for the more orderly patients from all buildings, in the winter in one or the other of the amusement halls, in the summer on the lawn or in the grove; music was provided by the hospital orchestra and refreshments were served, usually consisting of iced tea, cookies, candy and cigarettes. The Hallowe'en, Valentine, and St. Patrick's Day parties were all very successful, with special decorations in the halls, and appropriate games and feats. The May parties also had an attractive program concluding with a grand march at the end of which each patient received a May basket of peanuts and candy.

As usual, a great deal of time was devoted to planning the Christmas party for the patients. The Dormitory building amusement hall was decorated with gold star shades on the lights, red streamers, and two large and beautifully trimmed Christmas trees. The program opened with carol singing by all the patients, followed by the play "Why the Chimes Rang." The characters were: Holger, a peasant boy; Steen, his younger brother; Bertel, their uncle; an Old Woman; Lord, Ladies, Chorus, etc. The costumes were prepared with the assistance of the division of occupational therapy. All parts were taken by patients, and as there were speeches of considerable length by the characters, it was distinct advance upon the plays of tableau type heretofore attempted.

The director of the division has conducted six courses of twelve sessions each during the year for the instruction of students and affiliating nurses. Members of the staff attended two exhibitions in the spring, one at the New Jersey College for Women, and one at the Panzer College of Physical Education.

Records of attendance at all activities of the division have been kept as usual. The average daily attendance at classes was 588—549 women and 39 men; the total attendance at parties was 10,071—7,742 women and 2,329 men. Reports on all patients taking class work have been sent to the physicians in charge during the year.

Social Service Division

In view of the value to the institution and to the community of

a competent social service division, which has been demonstrated over a number of years of excellent service. every effort has been made to spare this division from serious impairment in the general drive for economy. It has been possible to retain the existing staff, but the curtailment of traveling expenses has decreased somewhat the number of visits in the communities. No work has been done by train or bus and it has been necessary to apportion three automobiles among five workers; futhermore, since these cars all have been in service a long time they have had to be laid up frequently for repairs, which has limited still further the amount of work and territory which could be covered. That under such conditions the division has functioned as well as the records indicate is due to the careful planning and close supervision given by Miss Phyllis Pointon who has been director of the division for four years.

Her report is as follows:

"During the year there were no changes in the personnel of the social service division, which consists of five field workers, two historians, and a director. Regarding patients on parole and in the hospital, 5,629 visits were made in the communities. In the cases of patients under consideration for parole, 422 preparole investigations were made of the homes. Special investigations were made in 202 instances for the following reasons: 100 to obtain further information regarding hospital patients, investigate legal matters and questions of property, locate relatives, and so on; 16 to obtain clothing and personal property of hospital patients; 1 to obtain a surgical appliance for a hospital patient; 1 to take a hospital patient to the city and assist her in making purchases for herself to the amount of \$40.00; 3 to assist the relatives of hospital patients; 13 to assist parole patients; 2 to assist relatives of parole patients; 14 to arrange the return or investigate the conduct of parole patients; 10 to arrange for the establishment and removal from the hospital of survey* patients; 2 to aid the removal of recovered patients from the hospital and their proper placement; 8 to assist discharged patients or advise with their relatives or others; 3 to return patients from escape; 13 to arrange railroad transportation for inter-state transfer cases; 1 to obtain information regarding charitable rates of Travelers' Aid Society; 1 to return to proper owner a key which patient had brought to

(*Survey patients are those found upon survey of the hospital to be recovered.)

hospital; 2 to obtain signatures of relatives on responsibility blanks; 1 to investigate alleged arrangements made by family for care of tuberculous patient; 2 to determine attitude of petitioners toward release of patients from the hospital; 1 to discuss home situation of returned patient with school nurse interested in patient's children; 1 to arrange removal of recovered patient previously sentenced to term in county jail; 1 to obtain data relative to the transfer of a child from this hospital to a school for problem children; 1 to complete papers for commitment of mentally defective patient to another institution; 1 to arrange for the return of a patient who overstayed a three weeks' visit; 1 to transfer to another institution an illegitimate baby born in this hospital; 1 to investigate the condition of a child whose admission to this hospital was under consideration; 1 to investigate the complaints of friends that a patient was being held in hospital unjustly; 1 to find a boarding home for the child of a hospital employee.

In addition to the survey patients mentioned above, the division was instrumental in the removal of four others who had been referred by the medical staff as having recovered from their psychoses. Three of these were released in their own custody and the other was taken out by her employer. One patient who had been diagnosed "without psychosis, mental deficiency" and who had no residence in this State was discharged in the care of her sister. Two other patients with the same diagnosis were transferred to the State School at Vineland, and one mental defective who had recovered from her psychosis was transferred to the North Jersey Training School at Totowa. Six other mental defectives were referred to the Division of Classification for transfer and are now awaiting vacancies in other institutions.

Two illegitimate babies were born in the hospital during the year and were referred to this division for placement. One of these, a colored baby, was committed to the State Board of Children's Guardians and was removed by them to be placed in a foster home. The other was a child of a non-resident mother about whom little could be learned and as no private agency would undertake the support of the child she was eventually transferred to the State School at Vineland. A third child, legitimate, was born in the hospital on June 30, too late for arrangements to be made for placement prior to the writing of this report.

During the year 1,182 medical and social histories were obtain-

ed regarding recently admitted patients and 44 interim histories were obtained on patients with previous residences in this hospital. Of the 1,182 anamneses, 1,124 were obtained in the office and 58 in the community. To procure this information 1,998 persons were interviewed. In each anamnesis information was obtained from as many sources as possible and every effort was made to locate relatives or friends of patients admitted to the hospital without correspondents. Abstracts numbering 488 were received regarding patients with previous residences in other hospitals and a total of 6,407 letters were sent out on matters pertaining to the business of the division.

At the request of the medical staff, 48 psychometric examinations were given to hospital patients. Office interviews were held to the number of 1,266 with and in regard to patients on parole and in the hospital, and 717 were held in regard to divisional affairs. Special visits to individual patients on the wards numbered 466.

The division continued its contact with social agencies in the State and with the various confidential social service exchanges throughout the hospital district. This service was considerably increased and more information than ever before was received through this medium. Thirty-eight patients on parole or families of patients were referred to outside social agencies for assistance. Of these, 15 were referred for medical treatment, 6 for financial aid, and 17 were taken to clinics for medical treatment and advice. During the year the number of patients on visit, parole, and escape ranged from 405 to 484, with an average of 426; on June 30, the number was 430. In April a change in phraseology was made in respect to the terms used to designate the status of patients leaving the hospital. The term "trial visit" was replaced by "visit" and "parole"—the former being used to designate patients leaving for a limited time and the latter to designate patients being released for a period of one year with the expectation of being discharged at the end of that time.

Members of the division attended the annual meeting of the New Jersey Conference of Social Work and also the annual meeting of the Social Service Bureau of Newark. Representatives of other agencies and of institutions from several States have visited the division, as well as college students, research workers and other persons interested in social service.

Northern New Jersey Mental Hygiene Clinics

As an introduction to this subject, I feel that I cannot do better than quote verbatim from the recommendations made in the "Report on a Survey" by Princeton University. "Preventive work of the mental hospitals should be expanded. The importance of the mental hygiene clinics and the social service departments of the mental hospitals can hardly be over-estimated. They are at present saving the State very large sums by giving treatment to patients who would otherwise have to be committed to hospitals and by continuing the supervision of patients out on parole who could not otherwise be released. . . . Only by expanding the work of the mental hygiene clinics and the hospitals' social service work can the State combat the rising tide of mental disorders. . . . Whatever economies may be necessary, the mental hygiene clinics and the hospital social service departments should be enlarged. . . . The continuation and expansion of the work of the mental hygiene clinics should be guaranteed. This is one form of preventive work which leads to genuine economy. . . The cost of the clinics is surprisingly small compared with the permanent value of the services they render."

The work of the Mental Hygiene Clinics has been continued with much the same personnel as last year: Dr. Earl W. Fuller, Director, assisted by Dr. Lindsay Robinson, and with Miss Mildred Hurley as chief social worker. Early in July, Dr. Lloyd Yepsen, resigned his position as psychologist with the clinic, and as there were not sufficient funds to warrant a successor, the work has been continued by two volunteer workers who served without pay during the summer months, by Miss Sylvia Frumkin of Summit, who continued the volunteer service from October with no pay and only reimbursement for actual expenses, and by psychological service borrowed from the North Jersey Training School for 32 days during the year. As the fund for salaries was low, Miss Anna Lee Smyth, an excellent and experienced social worker, took a year's leave of absence for further study, beginning October 1, and definitely resigned to accept another position on May 15. It has not been possible to afford a successor for Miss Smyth. The clerical and stenographic force was also reduced, with resultant delays and omissions in reports, and the necessity in many instances of the examiners writing out in longhand their notes for the case

records. Reductions in traveling expenses and the delay in replacing a worn out automobile cut down not only the number of visits to patients by the social workers, but also the amount of overtime which the clinic staff could put in at the clinics. After making allowance for these various handicaps due to the demands for economy, the work accomplished by the clinics during the year seems even more than usually creditable. Dr. Fuller has submitted a detailed report, much of which I have been obliged to summarize or omit, but the following speaks for itself:

"During the past fiscal year the only change in the location of clinic activities has been the removal of the Morristown clinic from Memorial Hospital to the Municipal building. This move was made because of over-crowded conditions in Memorial Hospital and the Municipal building location was accepted on the invitation of the Mayor. In view of our limited traveling facilities, the motor car corps of the Morristown Women's Club contributed a car and driver for one day of each week during a period of several months, thus securing for their community one more day of social work than it would have been possible to arrange otherwise.

On September 15, four students from the Smith College Graduate School for Social Work were assigned to the clinic for a nine months period of training; one of these students was compelled to return to her home because of ill health but the other three completed their course on June 15. One student from the New York School of Social Work was assigned to the clinic for a three months period of training, March 10 to June 10. The cooperation of the leading State and private social service agencies has been of definite help to the clinic in solving problems. Several of these agencies have been very cooperative in assisting the clinic in the training of social work students by permitting them to attend their staff conferences and lectures. The Gertrude Butts Memorial Home Association of the Episcopal Diocese, the Bonnie Brae Farm for Boys, and the Franklin School in Philadelphia have been especially cooperative in accepting children for summer camps and permanent placements.

The demands for clinic attention have not lessened and at the present time appointments for non-emergency cases are being made three and four months in advance. This fact and the impossibility of providing adequate after-clinic contacts by the

social workers have been the cause of much regret in the various communities. The educational work done by the clinic staff has continued throughout the year, and much time has been contributed by the different members to such engagements, usually in the evenings. Four outstanding pieces of group education work have been carried on: One of the social workers gave a series of weekly lectures to a group of graduate students in the Theological Seminary at Drew University; a series of six lectures was given to the Parent-Teacher Association of the Morris Township Schools; several weekly talks were given to the probation officers of Passaic County; and the entire clinic staff took part in the mental hygiene instruction of the student nurses at Greystone Park.

The list of visitors to the clinics is a long one and includes many prominent in the professions and in the community. A few who may be mentioned are: Dr. Bruce Robinson, Director of the Newark School Clinics; Monsignor Dauenhauer of Madison; Fathers Burke and Sheehan of Morris Plains; Miss Henriette Hart of the Newark Maternal Health Center; Father Weitekamp of Madison; Drs. McCarthy and Dunlap of Fordham University; Miss Root, Psychiatric Social Worker of the Franklin School, Philadelphia; the Reverend L. G. Dsang, President of the West China Union University; Dr. George Stevenson of the National Committee for Mental Hygiene; Judge Zimmerman of the Bergen County Juvenile Court; Dr. Sanger Brown II, Assistant Commissioner of the New York State Department of Mental Hygiene; Miss Sarah Ivins of the New York School of Social Work; Miss Bertha Reynolds of Smith College School for Social Work; Miss Emily Dinwiddie of the Public Welfare Department of Virginia; the sociology class of the Centenary Institute of Hackettstown, and the graduate psychology group of Drew University. Other visitors included 111 physicians, 541 social workers, and 248 school representatives.

During the year a survey of the clinics' activities, including not only an inspection of records and methods, but a survey of the counties in which the clinics have functioned, was made by Miss Dorothy Brinker of the National Committee for Mental Hygiene. Close contact with clinic procedures has been maintained by the Smith College School for Social Work and by the New York School of Social Work.

The number of clinics held during the year was 183, as follows:

Englewood, 21; Franklin, 10; Hackensack, 24; Jersey City, 24; Morristown, 25; Newark, 22; Newton, 11; Passaic, 22; Paterson, 24. The attendance and examinations may be briefly tabulated as follows:

	Adults		Children & Adolescent		Total
	Male	Female	Male	Female	
No. of individuals examined at clinics.....	160	261	404	264	1,089
No. turned away.....	31	37	33	21	122
No. of new patients' visits to clinics.....	118	175	295	197	785
No. of return " " " ".....	156	342	312	179	989
No. of patients' visits to clinic.....	274	517	607	376	1,774
No. of psychiatric examinations.....	254	474	362	230	1,320
No. of psychological examinations.....	26	60	327	212	625
Total number of examinations.....	280	534	689	442	1,945

Of the new cases, 226 were referred by social agencies, 114 by physicians, 165 by schools, 71 by general hospitals, 56 by relatives and friends, 24 by other mental hygiene clinic patients, 41 by public health nurses, and the remainder by various other sources including 5 by the Department of Institutions and Agencies and 5 who came of their own initiative. A total of 3,162 visits were made to the clinics by non-patients. In the diagnosis of new cases, child guidance problems comprised 286; mental deficiency, 208; psychoneuroses and neuroses, 52; psychoses, 29; social adjustment problems, 30; and organic disease, 26. The diagnosis was deferred in 110 cases.

The clinic physicians interviewed 1,002 persons at the clinics, held 56 special consultations with other physicians, examined 17 cases at the North Jersey Training School and 8 special cases in the community, as well as 41 special out patient cases at the Greystone Park office. They also gave a total of 20 lectures, and attended various meetings and conferences.

The clinic social workers obtained 4,538 interviews at the clinics, made 479 anamneses at the clinics, and 68 special sociological histories in the community, paid 1,090 visits to clinic patients in the community and made 3,672 visits regarding such patients, and held 1,009 office interviews. They visited 17 institutions investigated camps, foster homes, schools and other environmental conditions, attended numerous conferences and gave a total of 72 lectures. They instructed and used 18 volunteer workers for 30 clinic patients.

Only thirty-six patients are known to have been admitted to state institutions on clinic recommendations. Of these, fourteen were admitted to Greystone Park, and eighteen to state institutions for the feeble-minded. The figures seem to indicate that the number of adults examined this year was greater than last year in proportion to the number of children. There also seems to have been an increase in the number of mentally deficient individuals given clinic examinations, which apparently is largely due to the fact that at the present time the financial depression and lack of work has necessitated the parents or guardians seeking institutional care for these non-producing members of their households, and it is evidently in the hope that such institutional placement will be arranged that they come to the clinics.

In addition to the usual routine, the director of clinic social service has been chairman of two committees of the American Association of Psychiatric Social Workers, and has been assisted in committee work by members of her staff. Special study meetings for the presentation of cases by students have been conducted as a valuable project in their training.

Letters and reports regarding patients and clinic matters sent out by the clinic staff numbered 5,217.

School of Nursing and General Nursing Service

This has been a difficult and busy year in the nursing service of the hospital. The physical problems incident to the reception, examination, and nursing care of 1,441 new patients on our already overcrowded wards can hardly be over estimated. Arranging for beds and food, looking after clothing, seeing that each patient is taken to the proper medical or treatment office at the appointed time, making out reports—all of this requires much time and effort, in addition to the essential nursing care of physical ailments and the individual contacts which are of major importance in breaking the shock of admission and helping the patient to adjust in such a way that the therapeutic measures may be most beneficial. That all of this detail, along with the routine care of resident patients, has been accomplished with a minimum of friction and with a decreased number of personnel speaks very highly for the nursing organization as a whole and particularly for Mrs. Anne How, who, as Superintendent of Nurses, has been in direct charge of the entire nursing and attendant service. Mrs. How has not only handled

her division extremely well, but has been able to maintain contacts with other professional and maintenance divisions of the hospital on a cordial basis. In the work of the School of Nursing she has been ably assisted by Miss Mary E. Corcoran, Educational Director and Assistant Superintendent, who is thoroughly equipped for her complex duties.

Mrs. How has submitted a valuable and comprehensive report, which I regret cannot be incorporated quite in full, but which runs largely as follows:

The year ends with the following staff on duty:

Superintendent of Nurses	1
Assistants to Superintendent of Nurses	3
General Night Supervisor	1
Supervising Nurses	11
Assistant Supervisors	7
Operating Room Supervisor	1
Graduate Nurses in Charge Eye, Ear, Nose and Throat Service	1
Graduate Nurses in Charge of Wards	28
Graduate Nurses in Charge Colonic Irrigations	{ Male..... 1
	{ Female..... 1
	<u>Total</u> 2

Instructors	{	Science of Nursing	1
		Nursing Technique	1
		Mental Nursing	1
		Hydrotherapy and Massage	1
		Dietetics and Chemistry	1
		<u>Total Instructors</u>	5

Total Graduate Nurses 60

The teaching staff has remained the same as the previous year.

Resident Student Nurses	{	Class of 1933	9
		Class of 1934	14
		Class of 1935	9
		Class of 1936	7
		<u>Total</u>	39

Student Nurses, Affiliate	46
Student Nurses, Post Graduate	5

Total Student Nurses 90

Attendants on Duty June 30	{	Women	157
		Men	207
		<u>Total Attendants</u>	364

A class of 14 students entered the School on September 1, 1932. Of this group, 6 completed the preliminary course and were given their caps on January 26, 1933. Commissioner Ellis and Mr. Charles Messick, Secretary of the Civil Service Commission, were present and welcomed the newly capped students into the school.

On February 1, 1933, 10 students entered the School. Of this group, 6 completed the preliminary course and were given their caps and accepted into the School on June 22, 1933.

The affiliation of Greystone students at Orange Memorial Hospital and Essex County Isolation Hospital still continues and is most satisfactory. Our students are well liked at these Hospitals and are happy in their work and are gaining valuable experience which they put in use on their return to us.

The first group of students to affiliate here for Mental Nursing come to us September 15, 1928 from Mercer Hospital, Trenton, N. J. To date, June 30, 1933, 400 students from 14 schools have completed the 3 months course. We feel that this is a real contribution to Community Mental Hygiene.

Three new affiliations have been established this year with: St. Joseph's Hospital, Paterson, N. J.; Burlington County Hospital, Camden, N. J.; Muhlenberg Hospital, Plainfield, N. J.

At present we have 46 affiliating students. Fourteen Post Graduate students have been admitted during the year, of these 3 received certificates and 5 will finish the course August 15th.

Graduation exercises for Greystone students were held in the Chapel on Wednesday, May 17. Fourteen members of the class of 1933 and 2 members of the class of 1932 received diplomas and school pins. Those receiving diplomas were:

CLASS OF 1933

February Section	{	Cobb, Thelma Inez	Daggett, Ruth Marie
		Jennings, Mary	McClary, R. Marie
		Showalter, Elizabeth H.	
September Section	{	Chambers, Mary Aileen	Cohen, Rena
		Cowart, Mattie Lou	Dawson, Annie Elizabeth
		Dick, Mildred Rosalie	Haney, Ruth Lucille
		Hanson, Laura Christine	Lindsey, Sara Catherine
		Wilson, Nellie L.	

CLASS OF 1932

Fallon, Virginia

Lausch, Frances

A brief introductory history of nursing training in this hospital was given by Dr. Curry, after which Dr. Arthur H. Ruggles, Superintendent of Butler Hospital, Providence, R. I., gave the address. Dr. Ruggles stressed the responsibility the nurses graduating from this school have in interpreting to the people of the communities the need of mental hygiene.

Commissioner William J. Ellis emphasized the importance of preventive work.

Dr. Augustus S. Knight presented the diplomas and the class pins were pinned in place by Mrs. Anne How, R. N., Superintendent of Nurses.

The annual meeting of the National League of Nursing Education was held in Chicago from June 12 to June 16 inclusive, and an entire session was given over to Nursing Needs in State Mental Hospitals. Your Superintendent of nurses presented a paper on this subject. This convention was attended by Mrs. How and Miss Corcoran, at their own expenses, and Miss Kerley, class of '28 went as a delegate from the Alumnae Association. The Alumnae have 24 members in good standing and this is the first time they have sent a delegate to a convention.

A Mental Hygiene Section in the New Jersey State Nurses Association has been established with Miss Mary E. Corcoran, R. N. as chairman. Much interest has been exhibited by the nurses of New Jersey, and Miss Corcoran presented a paper "Objectives of a Mental Hygiene Section" at the Annual meeting held in Camden, N. J. April 19, 1933.

Miss Helene Bossle has carried on the diet therapy section in the same acceptable manner as last year. The special tube feedings have been carried as last year and this service has been extended to the Main building south and is available for any service where needed. Miss Bossle's report for the year follows:

Types of Disturbances and Diets Prescribed	No. Each	Total
1. Diets for Cardio-Vascular Renal Disturbances		5,218
(a) Karel Diets	77	
(b) Salt-free, Low Protein Diets	2,182	
(c) Basic or Alkaline-ash Diets	996	
(d) Non-roughage, Non-stimulating—salt-poor— Low Protein.....	1,900	
(e) San sun, Salt-free.....	63	

Types of Disturbance and Diets Prescribed (Continued)		Number Each	Total
2.	Diets for Diseases of the Blood.....		3,524
	(a) High Protein Diets.....	1,005	
	(b) Anemia (special orders) Diets.....	2,519	
3.	Diets for Deficiency Diseases.....		6,885
	(a) High Vitamin Diets.....	63	
	(b) High caloric Diets.....	5,631	
	(c) High Vitamin B. High Caloric Diets.....	945	
	(d) Low Protein, High Vitamin B. Diets.....	36	
	(e) High Mineral Diets.....	210	
4.	Diabetic Diets.....		9,630
	(a) Weighed Diets.....	8,888	
	(d) Low Carbohydrate Diets.....	642	
5.	Diets in Gastric Disturbances.....		3,602
	(a) Sippy Diets.....	1,502	
	(b) Bland Diets.....	1,306	
	(c) Mayo Brothers Diet for Gastritis.....	30	
	(d) Friedenwald's Diet for Hyperacidity.....	764	
6.	Diets for Tube Fed Patients.....		916
	(a) High Caloric Fluids.....	916	
7.	Diets in Disease of the Biliary System.....		199
	(a) Low Fat Diets.....	199	
8.	Diets in Diseases of the Intestinal Tract.....		1,888
	(a) Low Residue Diets.....	120	
	(b) High Residue Diets.....	1,722	
	(c) Non-putrefactive Diets.....	46	
9.	Pediatric Diets.....		2,844
	(a) Infant Feedings (Individual).....	2,129	
	(b) Diet for a 4 year old child.....	715	
10.	Diets in Arthritis.....		838
	(a) Pemberton Diets.....	838	
11.	Diets in Rheumatism.....		42
	(a) Alkaline-ash Diet.....	42	
12.	Diets in Epilepsy.....		
	(a) Ketogenic Diets (4:1).....	529	
	Total Number Special Diets.....		35,909
Routine Diets:			
	(1) Regular Diets.....	14,311	
	(2) Light Diets.....	446	
	(3) Soft Diets.....	5,826	
	(4) Semi-solid Diets.....	565	
	(5) Liquid Diets.....	3,192	
	Total Number Routine Diets.....		24,347
Miscellaneous:			
	(1) Nourishments.....	10,698	
	Grand Total.....		70,947

Graduate Nurse meetings were held about once a month for the purpose of discussing administrative problems, educational programs and other items of professional interest.

A series of extra curricular activities were conducted:

1. A series of 3 lectures were given by members of the New Jersey Board of Health on "Social and Public Health Aspects of Venereal Diseases." The speakers were William Simpson on November 3 and Annabelle Cadwalader, December 6 and 16, 1932.

2. Parke, Davis Company gave an interesting moving picture demonstration and talk on the production and development of Biological Products.

3. Members of the Senior Class attended a Child Guidance Clinic at the Child Guidance Headquarters in New York City. This was part of Social Service Student Program and was presented by Dr. Lowrie and the invitation to attend was extended by Dr. George K. Pratt.

4. Greystone Park students visited Becton-Dickinson of Rutherford, makers of surgical supplies, and Johnson & Johnson of New Brunswick.

During the year the Nurse Instructors and several of the Graduate Nurse Staff attended University Extension courses as follows:

Miss Corcoran	}	"Modern History" by Professor Townsend in Newark, from October to February, Y. W. C. A.
Miss McConkey		
Miss Corcoran	}	"Teaching Opportunities in Wards" Miss Dunbar from Teacher's College at Newark City Hospital.
Miss McConkey		
Mrs. Anderson		
Miss Fallon		
Miss R. Peeler		
Miss L. Scully		
Miss Greene		
Miss Chamberlain		
Miss F. Wilson	}	Science Courses at Columbia University.
Miss Kerley		
Miss Hornickel		

In the Spring term, Miss Corcoran and Miss Kerley continued with courses in Psychology at Columbia. This work was carried on in addition to their work here at their own expense and in their free time.

A meeting of the Superintendent of Nurses from the Schools of Nursing maintaining affiliation here was held here on October 5 to discuss problems and to promote a better understanding.

Meetings of New Jersey nursing organizations were attended by Mrs. How and different members of her staff, several of whom hold responsible offices in the various groups. Visits have also been made to other hospitals and educational centres, while the list of visitors to this division is a long one and includes many important in nursing circles, among them Miss Zella Franklin, Superintendent of Nurses at Toledo State Hospital, Toledo, Ohio, and Miss Anna K. McGibbon, Superintendent of Nurses at Butler Hospital, Providence, R. I.

During the spring Miss Corcoran met three high school groups in order to discuss the opportunities at present in the field of mental nursing.

The turn over in the various sections of the nursing service has been recorded and amounted to 35 per cent. among the graduate nurses, 50 per cent. among the male attendants, and 61 per cent. among the women attendants. This is a low percentage in comparison with years when more positions were available in other fields. On the whole the attendant group has rendered very good service and some have shown commendable loyalty.

Mrs. How expresses sincere appreciation of the time and effort given by the medical staff to teaching the student nurses, and also for the valuable medical and surgical attention which they have received during the year, particularly from Dr. Collins, Dr. Donovan and Dr. Kessler. During the year four students had appendectomies performed and made uneventful recoveries, one had a very serious infection which would probably have resulted fatally without excellent surgical attention, and one graduate nurse had a nephrectomy performed.

Staff Matters

Conditions on the medical staff have shown little change during the year. There were two resignations, Dr. C. E. F. Laatsch on October 31, who left to take another position, and Dr. Conrad O. Ranger, who was obliged to resign because of poor health. Dr. Albert V. Roache had been given leave of absence for a year and his leave terminated on March 16, without his returning to duty. Two appointments were made, Dr. George Lorimer

Nichol, on November 28, and Dr. John Kinley on April 12. The number of regular physicians on the staff has accordingly remained unchanged since the last report, although on June 12, a medical interne was added, Dr. David Schlein.

The doctors listed at the close of the year numbered thirty-three; of these, two were consultant, one on part time and the other only called in occasionally; two were giving full time to the mental hygiene clinics, leaving twenty-nine resident physicians. Eight have not been assigned to ward duty, as follows: The superintendent, clinical director, pathologist, surgeon, electro-therapist, gynecologist, proctologist, and eye, ear, nose and throat specialist. Dr. McMurray has been in charge of the occupational therapy division and the recreational program, and has acted as executive officer in the absence of the superintendent, in addition to directing his regular service. This leaves twenty men for full time ward duty, including the examination, care and treatment of 5,939 patients during the year, an increase of 130 over the number under care during the previous year.

Housing conditions for the staff have been improved during the year by the completion and refurnishing of the apartment in the Administration building which were unoccupied since the destructive fire of November, 1930. The Medical officers had been provided with living quarters in the hospital, but their rooms were for the most part cramped and undesirable, while most of the social service workers had been obliged to live outside the institution. The remodeling of the apartments was completed in February, and since that time the former occupants have been moved back, or, in case they had left the service in the interim, their successors have been given the rooms.

Staff meetings have been held five days each week, under charge of the clinical director, Dr. Lane; four of these meetings have been for the examination and diagnosis of newly admitted patients and the fifth for the consideration of cases for parole or discharge. These meetings have been attended by the entire staff and the social service workers, except those in the field at the time. Each case has been assigned to some member of the staff for presentation and the specialists have been called upon for this work as regularly as the ward physicians, in order that all might be familiar with psychiatric procedure and with the individual patients. In the absence of Dr. Lane, Dr. Collins has regularly

conducted staff meetings and taken over the other necessary duties of the clinical director. Once a week the superintendent has held a conference with the heads of all divisions of the medical service which was also attended by all the doctors.

There have been a number of illnesses necessitating absence from duty during the year, including Dr. Robinson of the mental hygiene clinic staff, appendectomy with drainage; Dr. Lane, Bassinni operation; Dr. Donovan, varicella; Dr. Ranger, acute illness followed by continued poor health; Dr. Douglas, severe attacks of arthritis; Dr. Gambill, physical impairments throughout the year, diagnosed as sequelae of influenza; and Dr. Lein various complications which necessitated his being treated in the hospital for a time. There have also been a number of cases of influenza and similar infections.

As mentioned in the section on proctology, Dr. Hogan was on part time duty much of the year, with reduced salary, in order to carry on advanced work in urology at Newark City Hospital under Dr. O'Crowley. Dr. Gebirtig has continued to attend Dr. Timme's clinic on endocrinology in New York on his days off duty, at his own expense.

A number of meetings and conventions were attended by different members of the staff during the year, but the total was undoubtedly reduced by the inability of the state to allow traveling expenses, together with the general salary reductions which made it necessary for all to keep down their personal expenses to a minimum. Dr. Christian and Dr. Curry attended the annual meeting of the American Psychiatric Association held in Boston in June, at which Dr. Christian presented a paper, and Dr. Curry was made a member of the Council. Relations with the communities in our territory and with the members of the medical profession have continued most cordial. Nearly all of the meetings of the Morris County Medical Society have been held at this institution in the past year.

Pharmaceutical Division

Work in the pharmaceutical division of the institution has progressed in the usual satisfactory manner throughout the past year. The same men have continued to carry on the drug room, with Mr. Philip B. Roberts, Ph. G. in charge of the service and Mr. Louis Bangert, Ph. G. as assistant pharmacist. The amount

of work has increased in proportion to the greater number of patients under care during the year. Mr. Roberts has submitted to me a detailed list of the drugs handled, which I have condensed as follows:

"Prescriptions filled, 13,888; bottles of stock solution put up and labeled, 7,780. Among these the greatest numbers were: tincture of green soap, 1,809 pints; liquor antisepticus, N. F., 829 pints; and bathing solution, 845 pints. The manufacture of drugs and solutions was continued and standard preparations substituted whenever possible for proprietary remedies. This has not only insured for the patients the use of freshly prepared medication of known quality, but has also been a source of great economy, since the cost of ingredients and manufacturing is much lower than the purchase price of the drugs and solutions in the open market. Over 100 different preparations have been made up in quantities varying from 1,000 c.c. to hundreds of gallons. Among the more important not listed above were: elixir aromatic, U. S. P. 112,000 c.c.; elixir iron, quinine, and strychnine, N. F., 160,000 c.c.; and syrup simple, U. S. P., 172,000 c.c.

The practice of ordering, checking, and dispensing all surgical and medical supplies through the drug room has been continued this year, as it is a type of work which can be handled to much better advantage by a division in the professional group than by the regular storehouse force.

Photography

The hospital studio has been continued as for many years past under the direction of Frederick C. Wainwright, who is thoroughly familiar with the type of photographs required and also has had long experience in handling patients. Full face and profile views have been made of each patient on admission and prints mounted on cardboard and sent to the office for filing in the case record. Photographs also have been made of patients leaving the hospital on visit and of those to be deported by the Federal government. On the request of hospital authorities outside photographs have been taken of buildings, construction work, and so on, to provide a permanent record.

In addition to his duties at the studio, Mr. Wainwright has continued in charge of the selection, transportation and showing of all moving pictures during the year, including the running of

the machines for sight and sound films. He has also attended six medical meetings at this institution for the purpose of showing slides and motion pictures. His report of the work is as follows:

Number new patients photographed	1,426
Number trial visit patients photographed	367
Number duplicate prints of escaped patients	24
Number patients photographed for deportation	18
Number photographs of buildings, etc.	54
Total	1,889

Motion pictures from Labor Day to the end of the fiscal year numbered thirty-one.

Executive Assistant to the Superintendent

This office was created several years ago and since that time has been successfully filled by Mr. William G. Beucler. The duties are miscellaneous and cover both the medical and business departments. Among them are inspections of construction work from the standpoint of practical use, assisting the Board committee on furnishing, salvaging everything possible in the way of equipment, looking after the moving of furniture and personal effects, and assisting the nursing division with transfers of patients and handling the manifold situations arising from necessary overcrowding. He has also been in charge of the service unit, and has checked up on the purchases, personnel, and running expenses. His work consists primarily in relieving the Superintendent of a mass of detail, but in so doing, he has cooperated with almost every division and officer in the institution.

Greenhouse, Grounds and Grading

The work of the greenhouse, grounds, and grading division has been continued this year as formerly under the direction of Mr. Otto Koch. In December we added to this already extensive program, the supervision of the main garden. With hired employees reduced to a minimum, it has been exceedingly difficult to carry on the necessary work in these divisions, and great credit is due Mr. Koch for the amount he has been able to accomplish under the hard conditions imposed.

There have been many visitors to the greenhouse during the past year, including, on April 3, four students from the New Jersey State Agricultural College accompanied by Prof. H. M.

Biekart, and on May 26, twenty-two members of the Teaneck Garden Club, accompanied by Mrs. C. J. Fleischman. All expressed themselves as deeply interested in the high type of work being done.

Mr. Koch has submitted to me a detailed report which I have condensed as follows:

"At the greenhouse patients have been employed for the major part of the work as usual. Flowers have been raised both under glass and in the cutting gardens surrounding the greenhouse. The total of cut flowers produced for the year was 235,020, most of which were distributed to the wards and dining rooms by truck, although at times groups of patients came to visit the greenhouse and carry back armfuls of flowers to use in decorating their wards. Plants were grown for cut flowers and for flower beds on the grounds, the total of plants and bulbs amounting to 69,782. A detailed report of these is included in the statistical appendix. During the year seed testing for the garden was carried on at the greenhouse and plants were started to be transplanted outside as soon as spring conditions permitted. In all, 1,358 flats of seed and seedling plants for the garden were taken care of in the greenhouse, including watering and shading. Other work, done chiefly by patients, comprised the making of 350 flats, chiefly from waste lumber collected about the grounds, repairing and painting of hot bed sashes and covers, painting trucks and implements used in greenhouse and garden, including gasoline shovel and roller, trucks, cultivators, plows, etc. The greenhouses were also given two coats of paint. During the winter the rose house suffered severely in a heavy storm, 100 panes of glass being broken. This was repaired in eight hours with patient help. Special floral decorations were arranged in the hospital Chapel for different occasions, such as Christmas, Easter, and the Nurses' Graduation. A rock garden was made for the State Fair at Trenton and cared for from August 30 to September 12. Plants to the number of 1,927 were used with 250 square feet of sod.

The garden for male patients, south of the Reception building, was maintained for its fifth season under Mr. Koch and the grounds personnel. From it the following vegetables were sent to the main kitchen: 2,437 bunches of beets; 10,539 lbs. of cabbage; 859 bunches of carrots; 985 bunches of kohlrabi; 266 bu. of tomatoes; 98 bu. of lima beans; 24 bu. of peppers; 11,731 bunch-

es of onions; 200 bu. of egg plant; 658 heads of cauliflower; 13 bu. of leek; 1 bu. of brussels sprouts; 5,550 stalks of celery; and 1,725 lbs. of sauerkraut. Vegetables in the following quantities were delivered to the cottages: 196 bu. beets and 22 baskets of young beets and tops; 66 lbs. of cabbage; 2,877 bunches of young onions and 71 bu. of grown onions; 27 bunches of parsley; 28 bunches kohlrabi; 1 bu. tomatoes; 16 qts. of peppers; 13 heads of cauliflower; 3 stalks of leek; 1,650 stalks of celery; 32 bu. of peas; and 62 lbs. of sauerkraut.

A garden for women patients was also maintained this year. It was arranged by Mrs. How in order to provide interesting and healthful occupation for a group of women patients, directed by a young woman graduate of the School of Horticulture at Ambler, Pa. The grounds division assisted with the heavier work and supplied plants. The cut flowers produced and delivered numbered 12,002, and there were also 1,500 lettuce and 3,880 radishes. The women patients assisted at harvest time in gathering some of the crops in the other garden.

As in former years, work at the willow holt was carried on in cooperation with Dr. McMurray and the occupational therapy division. To overcome insect pests, 190 gallons of spray were used and the soil was improved by adding 140 bags of hydrated lime; 30 tons of sand were placed in the willow pond to keep the ends of the cut shoots clean and healthy. The grove between the willow pond and holt was also kept in good condition for the patients to hold picnics.

The grounds were cared for throughout the year. Nine bushels of grass seed and about 128 square feet of sod were used to repair the lawns. Thirteen dead trees were cut down and made into firewood for the cottages. The tractor was used $17\frac{1}{2}$ days cutting grass with gang mowers and $6\frac{1}{2}$ days rolling lawns; the Coldwell motor mower was used 7 days in cutting grass. Most of the mowing was done by gangs of patients with hand machines. The Mack truck was used with the snow plow 4 days and on December 17 worked until 10:00 p.m. to keep the roads open.

The roads about the the grounds were maintained in as good condition as possible with the sum available for surface treating. The road from the front entrance of the Main building to the Service building was widened and the hard surface in front of the Main building was continued on the south side to include

the full circle. Roads in the main garden were put in condition for use by teams and trucks, using 781 cu. yards of trap rock, 401 cu. yards of field stone, and 230 cu. yards of ashes.

New concrete sidewalks were laid around the Attendants' building and old walks were replaced around the cafeteria, Reception building, and nurses' home, the total walks laid amounting to 9,073 square feet, and 182½ cubic yards of ashes being used.

The gasoline shovel was used at the Tuberculosis building, horse barn, Attendants' building, and the rear of the cafeteria and service buildings. A total of 4,558 cubic yards of soil were removed, of which 1,070 were used on the roads and 1,546 for filling on the grounds. The gasoline roller was used on the roads for a total of 36½ days during the year.

Clerical Division

The clerical work of the medical department has been carried on under the direction of James E. Lauenstein, principal clerk, for some years past. The division is very well organized and the work adjusted in such a manner that responsibility for every given detail is readily placed. In each group, one individual has been selected to cooperate with the principal clerk in the assignment of duties and handling of problems, so that all work has been competently supervised and even with the extra demands of the past year, no serious piling up has occurred. Mr. Lauenstein has submitted the following report:

"The clerical, stenographic and typing service of the medical and allied units comprise a personnel of 35; classified as 1 principal clerk, 1 senior clerk-stenographer, 1 senior statistical clerk, 25 clerk-stenographers and 7 clerk-typists. Of these 3 clerk-stenographers and 1 clerk-typist are assigned to the hospital social service and 4 clerk-stenographers to the officers of the Mental Hygiene Clinics.

The principal-clerk feels that outstanding recognition should be given to the senior statistical clerk, Harold M. Prettyman, for the competent handling of the highly technical details of the main record room with the assistance and full cooperation of three clerk-typists; their task being no small one as the main record room is the point of convergence of all fundamental papers and records incident to commitments. In addition to preparing the case records for every patient this unit prepares copies of all commitment papers which have to be certified and sent to the various county

adjusters for final hearing on commitment and receives the court orders for noting and filing in the respective cases; also the various statistical tables and information are here prepared for routine reporting to State Departments and special tables as required either by Federal, State or other agencies, including the tables appended to the annual report; all the foregoing in addition to the enormous volume of orderly filing of reports and correspondence in reference to each individual case and the copying of commitment papers and court orders for transfers of patients to other New Jersey institutions, as well as for guardianship proceedings taken through the Attorney General's office and notifications to various county and state officials in the case of county or state indigents in which funds come to light that may be taken over for reimbursement for maintenance.

The increase of admissions reflects itself in additional duties but notwithstanding that there has been no increase of personnel to meet the increased demands, the situation has been met by closer application and there has been no serious slowing up in the handling of a very great volume of correspondence concerning patients, practically all of which goes through the office of the principal-clerk with the cooperation of a clerk-stenographer, and the various routine mental and physical examinations and the reports of the various specialties have been recorded by the personnel in the various units of the medical service and without any serious disturbance to efficient procedure."

Recreation: Amusements, Sports, Music and Entertainments

The recreation of the hospital is considered highly important to the welfare of the patients and for a number of years has been under the direction of an experienced senior physician, Dr. George B. McMurray; close cooperation has been maintained between recreation and the work of the division of physical education; most of the sports have been under the supervision of that division, and they have provided many of the entertainments and assisted in arranging for most of the others. Dr. McMurray has submitted the following report, from which, however, I have felt obliged to omit many interesting details.

"During the past fiscal year, the usual careful attention has been shown in conducting the recreations and amusements at this hospital, with the therapeutic value kept always in mind as the

objective. Because of economic conditions, very careful consideration has been given expenditures and there have been some curtailments. Nevertheless, a satisfactory program has been carried out which has tended to raise the morale of patients and employees, causing them to forget, for the time at least, their anxieties and troubles.

The field day was omitted this year, but field activities and track exercises were enjoyed by many patients. During the summer months, baseball teams of patients from different buildings had exciting mid-week contests, while for Saturday afternoons and holidays games were arranged between a nine made up from the hospital employees and teams from nearby towns. The golf course was popular throughout the playing season, and was used by patients, employees and officers, with beneficial effects to all. When weather permitted picnics were frequently enjoyed in the various groves, and many informal games were held on the lawns. All through the year, walking parties were taken out almost daily to give as many as possible the benefits of out of door exercise and sunlight.

Moving picture entertainments were given twice a month and on holidays throughout the year, except for July and August. Since the sound reproducing machine was installed in April, 1932, it has been necessary to hold the shows both afternoon and evening to accommodate all the patients who wish to attend. The usual program has consisted of a feature picture, a comedy, a news reel, and an organlog. During the cool months dances have been held weekly for all patients who could be accommodated in the amusement hall, both men and women. The music has been provided by the hospital orchestra, which has also played for the various entertainments, and has held concerts on the wards from time to time.

Radios, pianos, and victrolas on the wards have provided music and entertainment throughout the year. Cards and other games have been played by many of the patients, and the pool tables and bowling alleys have been very popular, particularly during the winter.

Among the special entertainments during the year, several may be described briefly. On January 20 an educational lecture was presented by Mr. H. T. Strong with colored slides showing the polarization of light and the fluorescence of minerals with beautiful

effects. The Junior O. U. A. M. of Morris Plains presented a minstrel show which the patients keenly enjoyed. On May 19, another minstrel show was given through the courtesy of the Reverend Father Thomas F. Burke of St. Virgil's Church, Morris Plains.

Particular effort was made to have the Christmas season a happy one for all the patients. Weeks before, letters of appeal were sent out to a number of friends of the hospital or of individual patients, telling of the plans which were being made and the ways in which help could be given. In spite of the general economic stress, the response was very generous, and it was possible to provide every patient with a personal, wrapped gift, selected with that individual in mind. The program for the week was as follows:

December 23: 7:30 p. m., Christmas Tree party in the large amusement hall. Singing of Christmas carols, the presentation of a play "Why the Chimes Rang" under the direction of the division of physical education. The arrival of Dr. Curry as Santa Claus; brief greetings from guests, among them Commissioner Ellis—who was present with his wife and two little daughters—Senator Frank Abell and Mrs. Abell; Mrs. Garrison, Mrs. Doyle and Mr. Watts of the Board of Managers, Father Burke, Father Brady, Judge Holland, and others. Gifts were then distributed from the two Christmas Trees to the patients present.

December 24: Visiting hours from 12:30 to 4:30 p.m. Ward distribution of gifts. Christmas parties and carol singing arranged for the different wards.

December 25: 8:30 a.m., Mass by Rev. T. F. Burke of Morris Plains; 3:30 p.m., Protestant services by Rev. L. C. Hofer of Morristown. Special Christmas dinner served and dining room visited by Dr. Curry and his staff. Visiting hours in the afternoon.

December 26: Completion of gift distribution throughout the institution. Visiting hours in the afternoon. Special holiday dance for patients in the evening.

An Easter Dance, sponsored by Mrs. Garrison of the Board of Managers, was held in April. Advance notice of the event was given the patients and they were eagerly anticipating it for days, having had previous experience of Mrs. Garrison's parties. Men and women from all buildings were escorted to the Dormitory amusement hall at 1:30 p.m. and found it had been beautifully decorated by the staff of the physical education division, with the

ceiling lights surrounded by egg-shaped shades of yellow, blue and purple, from which hung gay streamers, while crepe paper ropes between the lights held many little Easter eggs suspended and the windows, doors and stage were decorated with yellow ducks and rabbits. After Mrs. Garrison had made a brief speech of welcome, Paul Victorin's orchestra started its dance program; the grand march was led by Mr. Haskins, Master of Ceremonies. Then there was singing in which all joined, a game of "Grasshopper" for the men, followed by an egg rolling contest, divided into heats, in which many patients participated. Prizes for the men were cigarettes and chocolate rabbits and eggs, while the women received tiny Easter eggs holding trinkets, such as earrings, bracelets, etc. Mrs. Garrison then introduced Miss Genevieve Butler, a singer celebrated among the Radio-Keith-Orpheum artists, and her lovely soprano voice was greatly enjoyed. Dancing continued until four o'clock, after which lemonade and cookies were served, and the party was over. Among the guests were Commissioner Ellis, Mrs. Thompson of the State Board of Control, Mrs. Doyle, Mr. Watts and daughter, Dr. Knight, Dr. O'Hanlon and Hon. Daniel S. Voorhees.

Library Division

The system of work in the library division has continued unchanged. Two large libraries for the use of patients and hospital personnel have given excellent services, the original library in the Main building, and the Flora Coffin Library in the Clinic building. Mrs. Ann M. Hopkins has remained in charge of both libraries this year and has handed me the following statement:

"It is with much pleasure that I submit the following report for the year. The circulation of the libraries shows a great increase over the previous year, while the traveling library has been very well patronized. There is, however, a decided call for up to date books, both in fiction and non-fiction; given this advantage, the library would double in value. Mrs. Doyle of the Board of Managers has continued her interest in the library and has purchased 45 books very economically; three other new sets have been added. The demand for more modern books, particularly by patients who have been here for a number of years, has necessitated continued borrowing from the Morris County Free Library. Miss E. L. Smith, County Librarian, has been very kind in

responding to our requests for books. We have also borrowed 315 scientific books for the study and reading courses of the staff and the nurses' training classes.

Routine weekly visits to the different wards have been made with the book cart, totaling 2,388 during the year. Extra trips have also been made to the wards and daily visits to the ward for sick employees. The patients from the Main building, North and South, visit the library on Thursdays and Fridays, and patients from the Reception building on Monday and Thursday; these opportunities to make their own selections of reading matter are looked forward to with much pleasure by the patients.

No new books have been added to the Medical Library in the Reception building this year, but the circulation has been greatly increased. Gifts to the libraries by members of the Board, the staff, and employees and friends have been numerous throughout the year, and have been very gratefully accepted and acknowledged personally and through the columns of *The Psychogram*.

CIRCULATION OF BOOKS FOR THE YEAR:

	<i>Main Building Library</i>	<i>Coffin Library</i>	<i>Total</i>
Fiction.	9,457	7,592	17,049
Non-fiction, including magazines.....	54,829	52,812	107,641
Foreign language publications.....	98	114	212
Total....	64,384	60,518	124,902

Religious Services

According to the system developed in previous years, a variety of religious services have been held in order to provide as many patients as possible with spiritual advice and consultation. The priests from St. Virgil's church, Morris Plains, have held mass at the local chapel on Sundays, have visited the sick and dying of their faith, and have arranged suitable observances for holy days. Protestant services have been conducted in the chapel each Sunday afternoon, clergymen from the Methodist, Baptist, Episcopal, and Presbyterian churches of Morris Plains or Morristown acting in rotation. Once a week the representatives of the nearest Christian Science church have held meetings at the institution and on Saturdays Jewish services have been arranged. Special meetings have been planned on appropriate occasions by leaders of the different faiths. On the afternoon of April 10, the Ladies' Auxiliary of the Morristown Synagogue arranged a Passover Sedar service for the Hebrew patients.

War Risk Patients

During the past year the number of ex-service men admitted to the institution has not shown its former rapid increase. This may be attributed to the fact that the Government mental hospital at Lyons, New Jersey, is accepting patients who have a definite service connection and is treating them at the expense of the Federal Government. The hospital at Lyons has authorized the transfer of 12 patients, whose disability was definitely established as due to service, from this institution to Lyons. There are no patients under our care whose maintenance is being paid for by the Veterans' Bureau.

There are 53 ex-service patients on record at the time of this report, a decrease of 12 patients based on the census at the beginning of the year. The majority of the claims of those patients now confined have been disallowed and they are classified as ex-service men only for convenience in case of further adjustments.

Fire Protection and Fires

Mr. Louis Kiseljack has continued as fire chief of the local organization throughout the year. Routine duties have consisted of inspection of equipment, including fire escapes, hose, hydrants, engine, and hook and ladder truck; training and drilling the men in the proper methods of attacking various types of fires; and examining the hospital plant for fire hazards and reporting any discovered. The fire alarm system now in use is inadequate and unsatisfactory and should be replaced as soon as financial conditions will possibly permit. The engineering division reports that fire pumps are greatly needed to insure the proper pressure in the sprinkler system in the event of a serious fire.

During the year there was a total of fourteen alarms; 11 still, 2 sprinklers, and one bell. Both of the sprinkler alarms were false, due to unqualified persons turning the valves. Several of the still alarms were due to overheated equipment of one type or another and the fires resulted in no damage. There was one chimney fire in the Reception building, in which no damage was sustained; and on June 17, the Clinic building was struck by lightning with slight damage and with no call for the Fire Department, except inspection by the fire chief.

In March there was a series of four fires in the Main building,

south; through the alertness of the employees, all were extinguished without serious damage being done. They were finally traced to a colored woman patient, although her condition was such that she did not make coherent replies to questions on the subject, and she was never seen actually setting fires. With the present overcrowded condition of the wards and with the number of employees on duty reduced to a minimum, danger from fires set in some manner by patients is necessarily increased. The entire institution remains in an exaggerated condition of fire consciousness, which has been reflected in several unnecessary calls to the fire chief during the year, but which is also shown in the promptness with which all fires have been located, so that the total amount of damage sustained during the year was about \$45.00.

Water Supply

During the summer, drought conditions in the vicinity of the institution were most serious. The amount of water pumped was only slightly below the amount consumed in July and was greater than the amount consumed during August, September and October, due to leakage, loss by evaporation from the reservoirs, and similar conditions. The gas house pumps were operated by steam for a time at an approximate cost for fuel and labor of \$1,000 a month. Then an electric turbine pump was installed with an electric line from the Clinic building to the gas house and the cost of pumping was reduced to about \$100 a month. Every effort was made to keep the per capita consumption of water down to a minimum; a constant inspection for leaks was maintained, economy in the use of water was insisted upon, and finally it became necessary to shut off the continuous baths and all sill cocks; consumption was reduced to 184 gallons daily per capita, or a decrease of about 136,000 gallons daily. Plentiful rains occurred in November and the amount of water pumped was reduced to 40 per cent. and in February the use of the deep well pumps was discontinued and very little pumping was required for the balance of the year. Without the deep well, I do not see how the institution could possibly have been maintained last year. The spring water supply for drinking purposes was also affected by the drought and it was necessary for the first time to install a pump in order to fill the bottles. It was possible to discontinue the use of this pump after November 1.

The second deep well was placed in service after all work was completed on it in December. It has given more than the estimated supply from early tests and the two wells are now furnishing about 850,000 gallons daily. Our present system of pumping from the deep wells in Morris Plains to the Klondike reservoir on the mountain back of the institution is not economical either in power or water. We have frequently discussed the construction of a loop in front of the Main building by which water could be fed directly from the wells into the mains for general consumption while the reservoirs were kept for fire and emergency supplies, but as yet it has been impossible to obtain funds to make this change.

New Buildings and Improvements

The total new construction was greatly reduced this year, amounting only to about 4 per cent. of that in 1932. Most of the items were the completion or continuation of projects already started before the beginning of this fiscal year. Mr. Wm. C. Mitchell, Superintendent of Construction, has submitted to me an outline of the year's work at this institution. As in previous years this activity has been under the supervision of the Central Department of Institutions and Agencies, but its local construction office has been very cooperative with the resident officers and has maintained mutually helpful relations with the engineering division of the hospital.

On December 15 work at the second deep well was completed—pump house, and pipe lines.

The reconstruction of the Administration building was finished on February 11, including the offices on the 2nd floor and the apartments on the 3rd, 4th, and 5th floors. This was very seriously damaged by fire in November, 1930, and reconstruction was begun in May, 1931.

On March 15, the demolition of sheds at the site of the former farm buildings was completed and the good lumber saved to use in the new sheds. On March 15, the new attendants' building near the site of the old farm stables was completed.

Lean-to type sheds with open fronts were constructed adjacent to the new horse barn to shelter farm equipment and were completed on April 5. On the same date the new blacksmith shop was finished, equipment installed and a new forge built. It was

made of concrete blocks with wood roof covered with Ready roofing. The horse barn was finished on April 26. The construction around the animals is fireproof, with walls of concrete blocks, floors and ceilings of concrete, and all equipment of steel; the hay loft is of wood with asbestos shingles.

Alterations to the nurses' dining hall and kitchen are in progress. In the kitchen the work consisted of removing wood floors and partitions, putting in new lath and plaster and new electric conduits and piping, with installation of structural concrete slab and quarry tile floors and base. Several new pieces of equipment have been put in and the balance of the old equipment reset; work on the kitchen should be completed this month with the installation of dish closets. Work on the addition to the dining hall will be under way shortly.

The rear corridor of the first floor, Main building, adjacent to the "double doors" had a badly worn wood floor. This has been removed and a cinder fill and cement top laid. Walls and ceilings have been repainted and new linoleum is to be laid in the corridor and barber shop.

On May 1, 1933, the only important new building project of the year was started, the reconstruction of the 4th floor, North side, Main building. This has been under discussion for some time by State authorities and hospital officials, the problem being whether a new 4th floor and roof should be built, or whether a roof should be placed above the reconstructed 3rd floor. The continued increase in population of the hospital, despite the transfer of patients to Marlboro as fast as the completion of buildings there permitted, finally made it evident that either these additional 4th floor wards must be placed in condition for service, or else it would be necessary to erect another new building immediately. The project calls for the entire removal of the walls and roof of the 4th floor, excluding the tower sections of tiers 1, 2 and 3. New exterior walls of ashlar block will be erected with new windows and guards. A steel frame roof with wood sheathing and slate covering will be put on; the interior will have concealed heat, new plaster, and cement floors covered with linoleum. Work on tier 4 is progressing. Window sills, frames and a good supply of stone have been delivered; contracts for steel, cement, window frames and wood sheathing have been let. Approximately 20 feet of tier 4 have been removed and

temporary roof erected, while outside walls are up to sill height.

The new Attendants' building was placed in service as soon as it was completed and furnished, and is now fully occupied. It has quarters for fourteen married couples, with bedroom, sitting room and bath, and rooms for forty-six single persons, or seventy-four in all. The majority of those now occupying the rooms are attendants on duty at the Dormitory group, but several from other divisions, including occupational therapy, laundry, and farm, also live in this building, and in a number of instances the husband is employed in one branch of service and the wife in another. A married couple are in charge of the building, and the entire group housed there is exceptionally neat and well behaved.

Overcrowding

This year we have increased the number of patients actually in the hospital by 170 persons without any additional space being provided. This is a number considerably greater than the total capacity of either the Senile or the Tuberculosis building, the last two buildings erected for the use of patients. Overcrowding has become so serious that it has been with difficulty that we kept enough beds unoccupied to receive each day's admissions. Constant daily transfers have been necessary so that whenever space became available on any ward—through death, discharge or transfer—another patient was promptly moved in. Every effort has been made to hold to the principle of classification according to mental condition, but overcrowding always renders this increasingly hard or quite impossible.

At the Tuberculosis building, the majority of inclosed porches have been kept filled with beds, thus increasing the capacity of the building from 126 to 148, but decreasing the advantages to the patients. The capacity of the Senile building has been increased by 4, to 160 beds, by regularly occupying four small rooms planned for isolation purposes; at present this building is used only for women patients of good type.

The annexes connected with the Dormitory building now holds 65 or more patients each; the Parole building, included in this service, has beds for 40 male patients; the Dormitory building itself is seriously overcrowded with nearly 1,000 patients, male and female, when its original capacity rating was 600. This building has not yet been remodeled and is felt to be a potential

fire hazard, yet it is necessary to keep cots permanently in the cross halls.

In the Main building, north side, a serious effort was made to keep down the overcrowding because of damage to the newly remodeled and redecorated wards, but during the past two months this became impossible; there are now 200 cots set up in the four "section" wards in addition to beds in all the rooms at the rate of two for single rooms, three for double rooms, and all that can be crowded in for the dormitories. Since these patients are of the more disturbed types, the wear and tear on furnishing and equipment is at a maximum, the new walls and floors are already damaged, and the patients themselves are subjected to much stress from contacts with so many others in a noisy and excited condition. On the south side of the Main building, overcrowding is present also to a serious degree, probably with an excess of at least 75 per cent. over normal capacity. This part of the building has not yet been made fireproof, so the danger in such a degree of overcrowding is obvious.

The Clinic building has been kept filled to capacity, chiefly with patients of a type which would be cared for in the Main building if space permitted. Five of the wards are used for male patients and only one for female, since the loss of the fourth floor wards in the Main building on the north side has made the capacity of that building less for men patients than for women. When the Clinic was remodeled it was planned to use it for a hospital and treatment building entirely, but as yet this has been out of the question.

In the Reception building where proper segregation is most important overcrowding is about 40 per cent. running above 60 per cent. on some wards, where five beds are set up in cubicles intended for three. The effects upon the patients of this overcrowding are so harmful that the doctors, nurses, and other treatment groups often feel that most of their efforts are rendered sterile by the impossibility of providing suitable surroundings on the wards.

The condition which I mentioned last year of the high proportion of old people among the patients admitted continues to exist, and has been in fact increased; last year we admitted 117 patients over 70 years of age, this year 127, although our total admissions were slightly lower. Since most of our transfers are in the

younger age groups, the age of our resident population has increased to a disproportionate extent, and our death rate has been adversely affected. For instance, in 1924, ten years ago, 18.3 per cent. of the patients who died were over 70 years of age; this year, 33.4 per cent. of those who died were in that age group. These same factors also reduce the percentage of recoveries, since these are comparatively infrequent in persons past the age of 70.

The transfer of 279 patients to the new hospital at Marlboro during the year reduced our burden to a marked degree; the total transferred to that institution in the past three years amounts to 982 patients, yet we now have in the house 343 more patients than at the time the transfers were begun. We anticipate some future relief in the fact that the fourth floor wards of the Main building, north side, are now being reconstructed, but with the present excess population and the constantly increased admissions any relief is bound to be inadequate unless it takes the form of extensive building somewhere.

Business Department

Mr. George J. Holbig, Business Manager, has completed his third year of excellent service to the institution. The past twelve months have been an especially difficult period for him, since the need for maximum economy brought heavy pressure on each division under his care. He is to be commended for the ways in which savings have been effected, particularly by the new arrangements for meals which made it possible to discontinue three units of kitchen and dining room service for employees and to incorporate them all with the existing cafeteria. Although many individuals and agencies combined in effecting the saving to the State Treasury of \$140,000 from our appropriations this year, no small portion of the credit is due to Mr. Holbig and his efficient management of his department.

Mr. Henry Landesman has continued in charge of the engineering division of the hospital and of the maintenance force and has cooperated successfully in bringing about economy, particularly by putting in operation a stagger system of work for the mechanics. Mr. E. I. Coursen, assistant business manager, has devoted close personal attention to the supervision of the farm and animal industries and at the dairy has reduced expenses to a marked degree. Mr. A. J. VanWinkle, chief clerk and

treasurer, has been in charge of the office work of the business department, with a force of clerks, stenographers, and bookkeepers, and has kept close and accurate check on all supplies ordered and received, the whole payroll of the institution, and the status of every appropriation and account. This year so many individuals and counties have been slow in their payments for patients that the burden of duties falling upon the treasurer have been more than usually exacting. Certain other divisions of the business department have reported directly to Mr. Holbig through the individual heads; among these are: the kitchens, storehouse, bakery, laundry, garage, service unit and upholstery shop.

Engineering Division

Mr. Henry Landesman, C. E., engineer-in-charge, now lives in Morris Plains near the hospital. Mr. Richard Rogers, resident engineer, has quarters at the institution, so night and Sunday duties have been divided between these two officers and the service plants have been under constant supervision. In October Mr. Landesman received a license to operate the sewage disposal plant from the State Board of Health after passing an examination for sanitary engineer. He has submitted to me a detailed report, which I have condensed as follows:

"In order to economize on the payroll of this division, it was first planned to lay off several men, but in view of the general conditions of unemployment prevailing, it was finally decided to adopt a stagger system, keeping all men employed, but giving them five day's work per week. This has been rather difficult at times, particularly when rush jobs had to be handled, but the men have cooperated willingly and we have had practically no labor turnover. The current repair account has been carefully watched; tool costs have been cut to a minimum and mechanics are supplying most of their own small tools; light bulbs as a rule have been replaced by mechanics, rather than given out in quantity; motors have been inspected daily and repaired in the shops where possible.

The water report shows a total of 306,797,000 gallons consumed, a decrease of 27,088,000 over last year, due to conservation of supply during the drought. The total pumped was 158,252,000 gallons, a decrease of 86,987,000 gallons, the large quantities required during July, August, September, and October being off

set by the reduced demands for the remainder of the year, with no pumping at all during March and April. At the power house the daily average coal consumption was 79 tons, with a total of 28,821 for the year. July was a low month, with a daily average of 50 tons, and January high with 105. In the dynamo room the total kilowatt load was 2,473,245, with a maximum daily load in November of 402, and a minimum in May of 69. Ice production amounted to 20,199 cakes, with a monthly average of 1,682. At the sewage disposal plant the average daily flow was 778,700 gallons, with a high in April of 846,200 and a low in October of 715,500 gallons.

At the power house, all four boilers were thoroughly reconditioned during the summer, two boilers were relined and a new feed pump was installed to replace one worn out by twenty years of service. Coal supplied during the year was a source of trouble; some cars were rejected and others accepted only after a price adjustment. During the year a special study was made on the possibility of equipping our boilers with mechanism to burn pulverized fuel. Studies on scale elimination and prevention were made and in March, in cooperation with a State chemist from the Agricultural Experiment Station, a small testing laboratory was installed and studies made on the use of soda ash; since that time by making daily tests ourselves we have been able to maintain a proper ratio for keeping the boilers free from scale. In March one of the feed lines to the boilers blew out and after constructing scaffolding and procuring parts the repairs were made during the night. This was the first occasion since the power plant was built that we have been without steam and power for any length of time.

In the dynamo room certain small changes were made so that in an emergency alternating current may be utilized from the Jersey Central Power and Light Company. Under terms of the contract with the company, no charge will be made until the current has actually been used, so as yet no expense has been incurred. The alternating current unit is single and has been in constant operation day and night; the direct current units were loaded to capacity throughout the season when the pumps were in continuous operation.

The sewage disposal plant has received much attention during the year. Dr. Knight has devoted a great deal of time and study

to its various problems and the Board has had the subject under constant consideration. Professor Rudolfs and his assistants have given valuable advice and the engineer connected with the Experiment Station at Rutgers has visited the plant about once a month during the year. Pathological tests have been made of the untreated sewage, chlorinated outfall, final effluent, and of samples of water from the Whippany river to keep careful check on any contamination. During the summer, chlorinating was continued through the night hours and the sprinkler beds were flooded weekly to guard against the propagation of flies. Jaqui Pond was treated with copper sulphate to keep down the growth of algae. Mosquito extermination authorities for the district cooperating with the hospital have cleared the banks of the pond of wild growth and treated the water. Reports have been rendered monthly to the State Board of Health as required by law and the Central Office has been kept informed as to conditions.

Comparative graphs of sewage outflow and of water consumption showed considerable storm water infiltration; new storm lines have been laid around all the buildings at the dairy and have materially curtailed the excess of sewage flow during storm periods. At the suggestion of Professor Rudolfs the brook entering Jaqui Pond was diverted by institutional labor. The plant is now operating to full capacity and should be enlarged."

In March Mr. Landesman attended for two days at his own expense a convention of sewage operators and engineers in Trenton.

Cold storage units about the institution have been kept in repair. There are machines located in the dairy, storehouse, clinic, reception, and main buildings, as well as a number of individual boxes. The demands upon the ice making plant were very heavy in June of this year, reaching a maximum of about seven tons a day.

The maintenance division has been kept busy with repairs of all buildings and equipment. I am mentioning only a few of these as any detailed list of the work would require several printed pages. There have been many leaks due to pipe corrosion and in a number of buildings old piping has been replaced by new brass pipe. Heating systems have required radical changes in the Senile and Attendants' buildings, while increased radiation has been installed in several other sections. In a number of instances, the lack of funds in the Construction Office made it necessary for

the local forces to complete jobs planned and begun by that division. Many screens were made and installed, including complete screening of the last single cottage for physician and of the Administration building. Painting of the interior of the Clinic building has been completed and work begun in the Reception building, the first floor and part of the second being now finished. A spraying machine was found to do satisfactory work with about one-sixth of the expense of hand brushing, so a second machine was obtained. An entirely new tailor shop has been built in the quarters formerly occupied by womens' classes in occupational therapy. The work included plumbing, steam fitting, electric work, carpentry, and painting; new machines were also installed.

Routine inspections have been maintained. Continuous bath mixers and clocks have been inspected daily, also pumps and cold storage machines; fire sprinklers have been inspected every other day, elevators weekly, bake ovens and attics monthly. At the laundry a daily inspection of all equipment has been made by a machinist; and an electrician has been kept on duty to maintain motors and other electrical appliances in proper condition. During the canning season a mechanic was assigned to full time duty at the cannery. All of the cottages have been kept in repair throughout the year and necessary work has been given attention.

The reports from the mechanics show a total of 16,117 repairs and 34 pieces of new work during the year; furniture repairs numbered 4,808 with chairs comprising 2,734. At the large sterilizer the work done included 736 mattresses, 369 pillows and a number of miscellaneous articles.

Laundry

Mr. Daniel W. Leyhan has continued in charge of the laundry throughout the year and has done excellent service under steadily increasing demands. The type of work done has been good and losses have been held to a minimum. Mr. Leyhan has submitted the following reports:

"The equipment in the laundry remains the same as last year, no additional machinery having been installed, nor any replacements made. Equipment has been kept in first class operating condition by the engineering division. In October in order to reduce operating expenses, three female employees and one male employee were laid off and the patient help was increased

by seven. One employee resigned and one died during the year and the vacancies were filled by re-employing two who were laid off in October. In the ordinary routine work of the laundry 5,827,356 pieces were laundered, an average of 485,613 monthly, which is an increase of 52,969 pieces over last year. In addition to the regular laundry work and not included in the above figures, from November to the end of June, 930 lace curtains were washed, starched and put on stretchers; and from December 10 to June 30, 1761 other curtains were washed and ironed.

New wall radiators were installed, improving the heating in the laundry, and some new coils were constructed and installed in the drying cabinets by the maintenance forces. Every effort has been made to maintain economy in the use of laundry supplies. On February 2, a special luncheon was served to the patient help and was greatly appreciated.

Bakery

At the hospital bakery, bread and pastry for the entire institution, patients, officers, and employees, has been made. The production for the year was as follows:

Bread, 2 lb. loaf.....	617,726
Cake, plain, 5 lb.	4,081
Cake, molasses, 5 lb.	7,229
Cake, raisin, 6 lb.	3,992
Cake, coffee, 1 lb.	6,882
Cookies.....	32,280
Pies, 8 lb.	2,303
Pies, 3 lb.	50
Jelly roll, 5 lb.	225
Muffins	30,772
Macaroons	300
Buns.....	64,749
Biscuits.....	96
Rolls.....	1,154
Lady fingers.....	300
Total.....	772,139

Food Service

During the year further economies in food service were obtained by extending the cafeteria service to include three additional groups of employees, those formerly served at the Dormitory building, the non-ward employees who formerly were

fed in two special dining rooms adjacent to the Main kitchen, and the night employees for whom food had previously been prepared and cooked in the Main kitchen. A special dining room for members of the staff is under construction as an addition to the nurses' dining hall and will be provided with cubicles to insure a degree of privacy for each family group; this will provide pleasant eating arrangements for those living in the Main building, and the discontinuance of the staff dining room there has given us another residence apartment. Whenever dining room and kitchen service is consolidated it is possible to do away with various positions and it also makes for economy in food stuffs.

The same general method of supervision has been retained. Mr. William Walton has continued in charge of the kitchens, of the employees and patients assigned to duty in that division, and of the ordering and checking of food supplies, including the work of the butcher shop. Although his duties are highly complex and have been rendered more difficult this year by decreased food appropriations and fewer paid assistants, together with constant pressure for economy, he has maintained his division up to a high standard of efficiency and it is believed that the food served has not fallen below the quality of other years. An experienced woman assistant in each kitchen has been responsible for sanitary conditions.

Cannery

During the season 37,948 gallons of tomatoes were canned. This quantity was sufficient to serve the entire population canned tomatoes and tomato juice several times a week throughout the year and a surplus sufficient to carry us through to the next canning season.

Service Building

This combination registration office and lunch room has continued popular with patients, employees, and visitors, showing that it fills a genuine need of the institution. Visitors register at the information desk and are given directions and an admission card for finding the patient whom they wish to see. Light meals are served and there is a convenient waiting room. Articles made in the occupational therapy division are displayed for sale. During the year, the approach to the building was improved by

widening the roadway. The management has remained the same, with Mr. Beucler in charge, subject to the advice of Mr. Holbig, and the routine has been arranged in a very satisfactory manner.

Garage

There has been one major problem in the garage this year, how to keep worn-out cars and trucks in running condition. Most of the automotive equipment of the institution has passed the age when it can be maintained economically, so the cost of repairs in labor and parts has been high. One of the passenger automobiles has been driven more than 120,000 miles; others will reach the 100,000 mile mark before they can be replaced; all but one of the Fords used by the social service workers have gone between 50,000 and 60,000 miles. A number of trucks are in bad condition and there have been no replacements made since September, 1931. All of this equipment was purchased because it was needed and it has been kept in service because the essential work of the institution cannot be done without it. Ordinarily there have been a number of replacements of cars and trucks each year, because the State has found it more economical to trade in after three years of regular service than to try to maintain longer; this year the only vehicle received was a Buick model 67-32, delivered May 6, 1933, to replace a worn-out Buick used by the mental hygiene clinic staff which we had been obliged to take off the road some months before because it was absolutely unsafe to drive.

Mr. John Murphy has remained in charge of the garage. He has checked carefully all supplies, has kept record of the driver and destination of each vehicle sent out, and has arranged to have the required duties covered at all times.

Upholstery Division

There has been no change this year in the organization of the upholstery shop. Mr. Albert Olin has continued in charge and has carried on his usual high type of work for the institution; he has been assisted by Mr. John Macauley who has also had years of experience in the division. The work has consisted of making and repairing mattresses and pillows, putting on and taking down awnings, and making and repairing them as required, making, repairing and putting down carpets and other floor coverings making slip covers, upholstering furniture, and repairing harnesses and shoes. The detailed list follows:

NEW WORK

Double mattresses made.....	20
Single mattresses.....	369
Hair pillows.....	419
Feather pillows.....	120
Double mattress ticks.....	15
Single mattress ticks.....	199
Pillow ticks.....	460
Pieces furniture upholstered.....	72
Chair cushions made.....	63
Runners.....	5
Protectors made.....	236
Linoleum laid.....	20
Curtains made, pairs.....	59
Curtains hung, pairs.....	68
Shades made.....	249
Slip covers made.....	12
Sofa pillows made.....	19
Ticking mits made, pairs.....	65
Awnings made.....	2
Pieces of harness made.....	81
Miscellaneous work.....	175
Total pieces new work.....	2,728

REPAIRS

Double mattresses made over.....	13
Single mattresses.....	888
Hair pillows.....	398
Carpets repaired.....	68
Carpets taken up.....	19
Shades repaired.....	92
Chairs.....	41
Mattress ticks repaired.....	350
Awnings taken down.....	395
Awnings hung.....	465
Horse blankets repaired.....	40
Pieces of harness repaired.....	224
Shoes repaired, pairs.....	2,191
Miscellaneous.....	226
Total repairs.....	5,410
Total pieces of work done.....	8,138

Farm

The farm work has been continued under the general supervision of Mr. Coursen, with a head farmer in direct charge of

the work. The reduced number of employees has delayed some of the work at times. The drought of last year decreased the amount of harvest, particularly of beets. However, from the standpoint of both quantities and values, the production exceeded expectations, the value was materially increased by the largest apple crop in the history of the farm. A detailed list of the produce will be found in the statistical appendix. The total valuation was \$14,588.65, an increase of \$2,657.72 over last year.

Mr. William Ayers was employed on the institution farm for 46 years, and for 30 years was a foreman. The latter part of December he contracted a severe cold, but continued at work until January 2, when he was confined to his home. His condition became worse, and on the 6th he was removed to the Clinic building, where he died from pneumonia two days later. He was succeeded as head farmer on March 14 by P. F. Havens.

Garden

The garden suffered severely because of the drought conditions during much of the growing season last year. The soil became bone dry to a depth of five or six inches, and some of the crops were burned up and the others did not produce a normal yield. The exhibits taken to the institutional section of the State Fair at Trenton were not regarded as up to our usual standards, but in all twenty-eight prizes were won, of which eight were firsts. The total valuation of the crops amounted to \$10,696.66 or \$3,667.24 less than in the previous year. Part of this loss was due to low prevailing prices, but weather conditions remained the chief factor.

Mr. Arthur Ketch, who had been in charge of the garden for several years, resigned at the end of the season, and Mr. Otto Koch was given the duties of head gardner in addition to his numerous other duties. He has been considerably hampered by the reduction in employees in this division, necessitated by the drive for economy, but at present the prospects look fairly good for the 1933 yield.

In addition to raising sufficient seedling plants for the stock needed in all of our gardens, Mr. Koch supplied the following to other institutions: Annandale, 18,000 tomato, 1,000 lettuce, 1,000 egg plant; Marlboro, 5,000 tomato; Clinton, 3,400 tomato; Totowa, 10,000 tomato, 1,000 lettuce.

Stable

On March 20 the horses and equipment were transferred to the new unit of farm buildings. As yet there has not been an opportunity to complete the grading and arrange the tools and machinery systematically, owing to the pressure of spring work. During the year it was necessary to destroy one horse, past twenty years of age, which had become incapacitated from neuritis and rheumatism, was suffering, and appeared to show no prospects of recovery. There are now 19 horses in the farm stable.

Dairy

Mr. Coursen has continued to devote a major portion of his time to the work of the dairy, and Mr. L. E. Palmer, herdsman, is deeply interested, competent, and efficient. The dairy has had to contend with greatly reduced appropriations this year. It became necessary to lay off a number of hired milkers and substitute patients for them, beginning in October. At first this work was very difficult for the inexperienced patients, the working hours were unusual, and the cows reacted to the change with decreased production. Gradually the work has been organized; the patients have been served their meals at the dairy, and have been assigned to the parole building where they rest, read, and enjoy the excellent radio obtained for them by Mrs. Doyle of the Board of Managers. At the end of the year a daily average of 14 patients were milking 74 cows, with an average production of 11.5 quarts per cow.

The milk production for the year was 16,401 quarts less than in 1932. This is accounted for by the fact that replacements have been young stock and heifers and these do not reach full production until their third calf or later. Also, our estimated number of milkers was reduced by the assignment of 16 heifers which had been boarded at Marlboro permanently to that herd in November when the remainder of the boarded stock was returned to this institution.

The herd has continued to show a number of animals which give positive reactions to tests for infectious abortion. These have been kept in a separate barn from the remainder of the herd and every effort has been made to prevent spread of infection. There were 39 such animals at the beginning of the year, ten more were reported positive or highly suspicious during the year, and

ten positive animals were slaughtered. As most of these animals are heavy milkers, they have been retained, but all milk from the entire herd has been pasteurized before being distributed for use. Unfortunately, our present pasteurizing machine is of only 800 quart capacity, so three lots of milk have to be run through daily. Another unit is badly needed, both to speed up the routine and also to forestall the danger of the institution being left with only raw milk should the present unit become disabled for any reason.

Mastitis has been held to a minimum this year. The strip cup has been used daily on each cow prior to milking to ascertain if any flakes were present; where any were found, the bromol test and pathological laboratory examinations were utilized and animals with positive or highly suspicious reactions were treated with autogenous vaccine; the results of this were almost always excellent, but a few cows in which the condition was chronic were slaughtered. Milk of a suspicious or positive nature was not used for human consumption but fed to calves and hogs. During the year, 29 cows were slaughtered, examined by Dr. Dustan, and passed for food; bull calves were vealed at the age of four weeks. Four cows died or were slaughtered because of incurable disease and seventeen calves died, of which nine were under four weeks of age. The carcasses of these animals were destroyed at the incinerator. Although no evidences of hemorrhagic septicemia were discovered, as a preventive measure all calves were injected with vaccine in December and in May. A young bull bred at Overbrook Hospital was obtained during the year. Three exercise yards for bulls, 12' x 48' were constructed during the year by hospital mechanics, so the animals now have access to sunshine and exercise which was heretofore impossible. Sixteen milking heifers were turned over to the State Hospital at Marlboro in November in payment for pasturage and care of young stock there. In the spring, five heifer calves were transferred to the herd at Annandale.

The tabulated report for the dairy production given in the statistical appendix shows increased quantities listed of all except milk and manure. Lower prices were allowed which decreased the valuation considerably, and in milk amounted to \$11,520.03, while the decrease in production was only 16,401 quarts, which at present rates would amount to \$1,312.08. The herd census is as follows:

JULY 1, 1932

Milking cows	138	
Dry cows	8	146
	<u> </u>	
Heifers	50	
Heifer calves	59	109
	<u> </u>	
Bull calves	5	
Bulls	4	9
	<u> </u>	
Total herd		264
Calves born	123	
Bull purchased	1	124
	<u> </u>	
		388
Slaughtered for food:		
Cows	29	
Bull	1	
Calves	75	105
	<u> </u>	
Died or destroyed:		
Cows	4	
Calves	17	21
	<u> </u>	
Transferred to other institutions:		
Heifers to Marlboro	16	
Heifer calves to Annandale	5	21
	<u> </u>	
		147

JUNE 30, 1933

Remainder on June 30, 1933		241
Milking cows	139	
Dry cows	18	157
	<u> </u>	
Heifers	22	
Heifer calves	52	74
	<u> </u>	
Bull calves	6	
Bulls	4	10
	<u> </u>	
		241

Piggery

At the hospital piggery this year the losses have been rather high. Hemorrhagic septicemia affected principally the young pigs, and the mortality was high, although vaccine injections were given as

a preventive and also as a treatment. Deaths before the age of weaning have also been numerous, and constant studies have been made to prevent these. Anemia is frequently present at this period and increases the susceptibility to certain diseases. During the spring, grass sod has been placed daily in the pens occupied by young litters with encouraging results. Some of the litters have been weak, and 94 pigs have been born dead. To increase the strength of the young pigs at birth, lime phosphate is now being fed to the breeding sows. Death from gastritis have occurred, due to the presence of an irritant poison in the food. In the effort to prevent this, the use of lye in the institution has been discontinued and all patent preparations for the destruction of roaches and water bugs have also been forbidden.

During the year a Duroc herd sire was purchased from the State Hospital at Trenton. The quantity of pork could have been readily increased by retaining the animals until they reached greater weight, but the average dressed weight of 316 lbs. furnished pork of a quality preferable for food, and could be produced economically. The average price allowed was \$.066 per lb., the lowest in a long period, so the total valuation of products was only \$7,300.31, which was, however, an increase of \$624.50 over last year. The piggery census is as follows:

JULY 1, 1932	
Boars.....	4
Sows.....	39
Young pigs.....	28
Fattening pigs.....	249
	320
Purchased.....	1
Born living.....	647
	648
	968
Slaughtered for pork.....	327
Died, small pigs.....	274
Killed by sows.....	5
Sick, destroyed.....	4
	610
JUNE 30, 1933	
Remainder, June 30, 1933.....	358
Boars.....	4
Sows.....	48
Young pigs.....	18
Fattening pigs.....	288
	358

Hennery

The incidence of disease at the poultry plant was higher than normal this year. Of the new chicks purchased in the spring of 1932, 500 delivered on May 12 appeared to lack vitality. They were from a dealer whose stock we had not used previously. Mortality was above the average, and in September several had fowl paralysis, which is believed to be transmitted through the egg. Leukemia also developed, and 202 pullets died. The young stock was moved to new ground and the remnant of the flock saved. Owing to the high losses among pullets, hens which we had planned to dispose of were retained for egg production, but were not as profitable as pullets would have been. Average daily eggs production was reduced from 54.7 in 1932 to 49.6 this year, and the number of broilers was also decreased. The value of products at the hennery this year was \$5,000.58, a decrease of \$1,696.88, of which lower prices account for \$1,111.38, and the balance is due to decreased production. The census of the poultry plant is as follows:

JULY 1, 1932		
Hens	495	
Pullets	934	
Cockerels	3	
Chicks	1491	
Purchased day old chicks	2923	
	2100	
	5023	
Killed for food	1061	
Chicks killed by rats	33	
Hens died	281	
Pullets died	282	
Chicks died	495	
	2152	
JUNE 30, 1933		
Remainder, June 30, 1933.....	2871	
Hens	831	
Pullets	549	
Cockerels	7	
Young stock	1484	
	2871	

Miscellaneous

On July 14, an experienced man was placed in charge of the extermination work of the institution, including rats, mice, roaches, ants, and other insects. Within a few weeks a marked improvement

was noted, rats and mice decreased, and roaches and water bugs were well under control. The position has been made a permanent one.

The usual variety of duties have been carried on this year by gangs of patients under supervision. They consist in excavating for new pipes or repairs, unloading freight cars, handling coal, ashes, and manure, miscellaneous trucking, care of the spur railroad track, farm work, and general cleaning up. Their work is included in the outside divisions under the supervision of Mr. Coursen.

Our grateful appreciation is due to Dr. J. H. McNeil of the Bureau of Animal Industry, the officers of the Lederle Laboratories, and Mr. W. A. Houston, Farm Supervisor from the Central Office, for their assistance with the dairy, piggery, and poultry. We also appreciate the manner in which Dr. Dustan, veterinary surgeon of Morristown, has looked after our stock and responded to our many calls for advice and treatment.

Inventory

The annual inventory was made as usual in the Business Office. The appraised valuation of the hospital plant and property is as follows:

Real estate including buildings.....	\$11,313,697.02
Personal property.....	1,132,803.67
	<u>\$12,446,500.69</u>

This is an increase in real estate of \$20,500.00 and a decrease in personal property of \$37,346.33, or a decrease in the total valuation of \$16,846.33.

Recommendations

Mental Hygiene Clinics

The work of the Mental Hygiene Clinics has been limited throughout the past year by the cut of \$5,000 from the sum allowed in 1931—32. This decreased the personnel and made it impossible to make as many appointments at the clinics or see as many individuals in field work. Much regret was expressed in the communities that appointments had to be made months in advance and that the amount of follow up work was reduced with consequent loss in the constructive values. The Princeton Survey Report states: "The department last year requested \$40,000 from the North Jersey Clinics." This item was "scaled

down in the appropriation bill to \$30,000. This was a false economy which will cost the State many times the sum saved.— The appropriations for 1933—34 should carry increases to provide \$40,000 for the North Jersey Clinics." "The additional" \$10,000 "spent at this time will save the people of New Jersey many times this amount in the costs of custodial care in the immediate future." When it is recalled that this Survey made a feature of economy and that increases for social service and mental hygiene were practically the only ones advocated in the entire report, the importance given to this work by those men is evident.

Reconstruction and Fireproofing Main and Dormitory Buildings

We have had sufficient experience, I hope, in the fire hazard existing in the Main building to make further discussion of the importance of safe reconstruction unnecessary. The fire hazard in the Dormitory building is felt by the resident officers to be even greater, and under our present condition of overcrowding is a constant source of anxiety. I trust that it will not require another fire, perhaps one with extensive loss of life, to impress this necessity sufficiently upon the public to insure adequate funds for safe housing of these helpless patients.

Roads, Grading, Walks, Landscaping, Etc.

The amount of money allotted for the maintenance of roads on the hospital property has not been sufficient to enable us to keep the surfaces in good condition. On Central Avenue, especially, wear is showing considerably and money for repairs now will save many times the amount which will be required for complete reconstruction if deterioration is allowed to progress. Grading, landscaping, rebuilding concrete walks and similar work can be carried on at odd times by hospital forces if a sum sufficient for supplies is appropriated.

Loop on Domestic Water Supply

Necessary storage facilities, pumps, motors, pipe lines and so on, to enable water to be fed into the main in front of the Main building directly from the deep wells instead of through the reservoir system would reduce water waste in summer, would keep a fire supply of water independent of the domestic supply, would cut down the cost of pumping water, and would save the chlorinating of all tap water. It would also, after the installation

of sanitary drinking fountains throughout the institution, enable us to eliminate the expense of bottling and transporting spring water, supplying sanitary paper cups, icing bottle coolers, and so on, all of which amount to a considerable item each year.

New Steam Line to Employees' Group

At present a steam line from the boiler plant through the north side of the Main building goes underground to the Clinic building and thence to the Cafeteria and Reception building. From the Clinic building a steam and return line runs across Central Avenue to feed the Employees' building and on to the doctors' housing group. Should any break or leak occur in any of the piping in winter, we would face a freeze up in several buildings. It is suggested that a new steam line be run from the Main building on the south side of Central Avenue with take-off connections for the various buildings, forming a loop with the present system. In this way we would feed steam two ways. The Clinic line is approximately twelve years old, is not in a tunnel but laid in split tile and if it should spring a bad leak it might take two days or more to locate the break, dig up the line and make repairs, during which time a large group of buildings would go without heat.

Fire Pumps

On account of lack of pressure available on the sprinkler system it is recommended that duplicate automatic fire pumps be installed to maintain proper pressure. These pumps are required by the insurance company to give us full credit on rate reduction.

Improvements to Service Plants

A number of changes and replacements are needed in the water piping of the different buildings which cannot be handled by the appropriation for current repairs. Because of additional buildings and increased steam and electrical requirements, certain changes should be made in the power plant. One boiler exploded in February, 1931, and the insurance company protested payment for the type of accident. Studies have been made of the changes required and reports are on file at the Central Office. These much needed improvements should be provided for by appropriations.

Additional A. C. Unit

We have only one alternating current machine installed here.

The Main, Dormitory, Senile, and Tuberculosis buildings are all supplied with current and power from this one unit as are also the sewage plant, deep well pumps, and a number of cottages. The unit has been running day and night for about two and one-half years. Should it be necessary to make a shut down for a few days the only current available for these buildings would be a partial supply from the breakdown system. This would be costly, since according to our contract we would be required thereafter to pay a monthly stand-by charge. It is not consistent with sound practice to continue to operate with only one unit and I accordingly recommend that an appropriation be made for a second unit.

Relocking Main and Dormitory Buildings

The bitt key system is in use in these buildings, the doors are not self-locking, and can be opened rather easily with improvised keys. Many of the keys are badly worn and occasionally locks are broken beyond repair. An inquiry among lock manufacturers shows that this bitt lock pass key system is no longer being made. It is recommended that these locks be replaced with modern cylinder locks which would tie in with our group system of master and grand master keys.

Laundry

To finish the program outlined for equipping the laundry, the following machines are needed:

- 2 Eagle presses
- 1 soap tank
- 1 motor-driven shakeout tumbler

Sewage Disposal

Plans for extending the plant have been recommended by Prof. Rudolfs and approved by the Board of Managers, the Central Office, and the State Board of Health. These plans are on file at the Central Office. It is recommended as a pressing necessity that a sufficient sum be appropriated to carry out the work.

Automobiles and Trucks

As stated in the section treating of the hospital garage, the condition of our automotive equipment is bad. The most recently purchased trucks have had two years of service, and the others have all been running for three or more years. Some of them

can no longer even make short trips around the grounds of the institution with supplies without requiring repairs, and most of them are unfit for the heavy duty for which they are needed. The passenger cars have been driven for several years; most of those of larger type have passed or are approaching their 100,000 miles; the Fords used by the social service workers have gone between 50,000 and 60,000 miles. The amount of repair work demanded by these old cars and trucks is entirely out of proportion to normal requirements. The cost of parts is high. We are deprived of their services very frequently while they are laid up for repairs, causing delay and confusion in the routine work and necessitating shifting and reassigning the drivers, helpers, social workers, and others, who should be carrying out duties connected with the disabled vehicles. Worst of all, some of these machines are in such condition that they are a menace, not only to those who must use them, but to the other travelers on the public highways. If the necessary work of the hospital is to be carried on, it is absolutely essential that these worn out trucks and automobiles be replaced.

Loss of Employees

During the past year there have been nine employees of the institution whose services were terminated by death. A number of these had been in the employ of the institution only a few years; pneumonia was the most frequent cause of death.

John Haiduk, driver and stableman, a faithful employee, who had been in the service of the institution since May 15, 1919, died August 4, 1932, of heart failure.

William Ayers, head farmer, had spent practically his entire life in the service of the institution. He was first employed on September 14, 1887, and had worked here continuously for more than forty-five years, during thirty of which he was in charge of the farm. He was a competent and steady worker, always obliging, faithful to his duties and seldom away even for a vacation. He died on January 8, 1933, of pneumonia.

William Murphy, fireman and helper, always a loyal employee, had been employed at the institution since September 17, 1893. He had been considering retirement, but died of heart failure on June 26, 1933, before arrangements for his retirement had been completed.

Three employees retired on pension during the year, as follows:

Patrick McGiveny, charge attendant, service commenced March 3, 1919, retired on January 1, 1933.

Jennie G. Bradley, charge attendant, service commenced December 17, 1914, retired March 1, 1933.

Eugene Leek, head painter, service commenced November 1, 1894, retired May 1, 1933. Mr. Leek was one of the diminishing group of old employees who had spent almost a life-time in the Service of the State; he had a keen personal pride in his work, and a devotion to the institution seldom found among the younger workmen; although his health had failed for several years he delayed his retirement until the age limit was reached.

Distinguished Visitors

We are deeply appreciative of the continued interest in the work at this institution which has been shown by the many visits paid to the hospital, both by New Jersey people and by those from other States and Countries. In the final analysis all success and advancement in State hospital work is directly dependent on alert and intelligent public interest, so we welcome and encourage visitors who come in a spirit of sincere desire to learn or to help. It would be impossible even to list the names of all who have taken time during the year to go through some divisions of the hospital or to seek information as to the best ways in which they could assist in the work or contribute to the happiness of the patients, but I am mentioning a few as typical of the whole group.

Visitors from outside the State included Dr. Paul Popence, General Director of the Institute of Family Relations, who made an inspection on July 16, accompanied by Dr. Fuller of the Mental Hygiene Clinics; Dr. Clarence M. Hincks, General Director of The National Committee for Mental Hygiene, accompanied by Dr. Hamilton, Col. Bullis, and Mr. Komora, officers of the Committee, who spent the day here on February 16; Dr. Douglas Quick of Memorial Hospital, New York City, who visited the hospital as guest speaker of the Morris County Medical Society on February 16; Rev. Doctor Lincoln L. G. Dsang, President of West China Union University, who made an inspection of the institution on January 6; Miss Emily Mayland Dinwiddie of the Virginia State Department of Public Welfare, who visited the hospital on May 3 and was

particularly interested in the Reception building; Dr. Arthur G. Ruggles, Superintendent of Butler Hospital, Providence, R. I., who inspected the hospital on May 17, and was chief speaker at the Nurses' Commencement in the evening; Dr. J. Leonard Byrnes of Hudson Falls, New York, who accompanied by Mrs. Byrnes made a tour of the different buildings on October 18; and Dr. Scott and Mr. Benjamin Franklin, State Business Manager, State House, Topeka, Kansas, who visited the institution in June, were especially interested in the Mental Hygiene Clinics, and were kind enough to say that they felt that their visit would help them in improving the method of handling the work in Kansas.

New Jersey visitors were even more numerous, and only a few can be listed: Professors Carpenter and Stafford of the School of Public and International Affairs of Princeton University visited the hospital on November 17 and on other occasions while engaged in making a survey at the request of Governor Moore on the Administration and Expenditures of the State Government of New Jersey with recommendations of economies for the fiscal year 1933—1934; Miss Dorothy Brinker of the National Committee for Mental Hygiene spent some time at the hospital while engaged on a survey of the mental hygiene clinics and the counties in which they were functioning; Mr. Lozier, Superintendent of Schools, City of Trenton, accompanied Commissioner Ellis to the hospital on January 6; the West Orange High School sociology class visited the hospital on February 23, accompanied by Mr. Paul S. Weston; classes from the New Jersey State Agricultural College at New Brunswick visited the greenhouse and grounds division; a class in mental hygiene and a class in psychology from Rutgers University, accompanied by M. Sidney Sanderson, Ph. D. and E. C. Sherbo, B. Sc., inspected the hospital on May 12; interest has also been shown in the hospital work and visits paid by representatives of Drew University, Madison, and Dana College, Newark. The State Freeholders' Association met at the institution on June 12; other guests who joined them were: Captain Giger, Dr. Morrow, Superintendent of Bergen Pines, and Col. Head, Superintendent of the Veterans' Hospital at Millington. Dr. and Mrs. Norman L. Murray of Shannon Lodee Sanatorium, Bernardsville, visited the hospital on January 11. Mr. C. W. Bleeker and G. S. Allen of the New Jersey Rehabilitation Committee of Newark inspected the hospital on February 16; Mr. Harry Behrman, Freeholder of

Passaic County, Mr. Joseph Greene, Passaic County Adjuster, Dr. C. K. Marcus and Mr. Morris Schlenger visited the institution on March 24.

The annual visit of the Joint Appropriations Committee of the Legislature was made on January 19; in addition to the members of the Committee there were present Commissioner Ellis, with Mr. Gerry and other officers of the Central Department, Mr. E. P. Earle, President of the State Board of Control, Mr. Stanton, member of that Board, Mr. Bertram Mott, Clerk of Morris County, Ex-Senator Frank D. Abell and Mrs. Abell, Senator David Young, Jr., of Morris County, the members of our Board of Managers, and others interested in this institution.

Occasional visits have been made during the year by members of the State Board of Control, with frequent calls by its President, Mr. E. P. Earle, by Commissioner Ellis, and by the various divisional heads connected with the Central Office, including Dr. Potter, Mr. Gerry, Mr. O'Connor, Mr. Houston, Dr. Frankel, Miss Lucas, Dr. Bixby, Mr. Fitch, Mr. Rockhill, Mr. Leathem, and others. Officers of other institutions in the State have also called at this hospital frequently,—Dr. S. B. English, Superintendent of the State Sanatorium for Tuberculous Diseases; Dr. D. S. Renner, Superintendent of the State Village for Epileptics; Dr. J. B. Gordon, Medical Director of the State Hospital at Marlboro; Dr. Robert G. Stone, Medical Director of the State Hospital at Trenton; Mr. A. H. Meese, Superintendent of the North Jersey Training School at Totowa; Mrs. Murray H. Coggeshall, President of the Board of Managers of the Women's Reformatory at Clinton; Mrs. Frank D. Abell, of the Board of Managers of the North Jersey Training School at Totowa and Mrs. Thomas W. Streeter, of the State Board of Childrens' Guardians. Local organizations have maintained their interest in the hospital and have brought their friends to see what is being done here. Mrs. George R. Woods as Chairman of the Institutional Cooperation Committee of the Morristown Women's Club has not only done a great deal to extend information regarding the work and needs of the hospital, but has also assisted the mental hygiene clinics by giving her time and her automobile one day a week to transport a social worker on field visits in the district. The political representatives of this district have shown continued interest in the affairs of the hospital, including Senator David Young, Jr., Assemblywoman Dr. Julia

Mutchler, Assemblyman, Elmer King, Jr., the members of the various Boards of Freeholders and other officials.

Appointments and Resignations

Resident Physicians Appointed:

George Lorimer Nicoll, M.D. November 28, 1932
John Kinley, M.D. April 12, 1933

Resident Physicians' Resignations:

C. E. F. Laatsch, M.D. October 31, 1932
Conrad O. Ranger, M.D. February 28, 1933
Albert V. Roche, M.D. (Year's leave of absence terminated.) March 16, 1933

Other Staff Appointments:

David Schlein, M.D., Medical Intern June 12, 1933
N. T. Sauer, D.D.S., Dental Intern August 1, 1932
Edward T. Piatt, D.D.S., Dental Intern August 1, 1932

Other Staff Resignations:

Lloyd Nicoli Yepsen, Ph. D., Psychologist July 16, 1932
Dominic Galdieri, D.D.S., Dental Intern July 30, 1932
Germano DePalma, D.D.S., Dental Intern July 31, 1932
N. T. Sauer, D.D.S., Dental Intern June 18, 1933

Acknowledgments

Anything like a detailed acknowledgment of gifts and favors to the patients and to the institution as a whole is impossible. So many individuals and so many groups have contributed during the year that one or more columns of *The Psychogram* have been devoted each month to listing the donors and donations even though many contributions have been made privately and acknowledged only with personal thanks. The gifts have included books and magazines, clothing, cigarettes, fruit, candy and food delicacies, jig-saw puzzles, musical instruments, radios, tools and silk stockings for the use of the occupational therapy division, and many other articles which have brought pleasure to our wards. At Christmas time all varieties of gifts were sent in and contributions of money were made in considerable amounts to assist in providing suitable presents for everyone. In the list of recreations offered this year were a number of entertainments provided by interested groups for the amusement of the patients. To bring these to the hospital many persons contributed time and effort, as well as the expense of transportation. Besides the many

kindnesses done by those not connected with the institution, all of the resident officers and employees have given not only extra time and sympathetic attention to the patients with whom they were in contact, but also have contributed innumerable gifts to promote their happiness and comfort.

Even legacies have been added to the other evidences of good will toward the hospital and its work. These have been small and for the most part unconditional, but one will not yet settled leaves a sum to the institution the income of which is to be applied to the Christmas Fund for patients each year. While such recognitions of private institutions are customary, we feel that when a large State Hospital is so remembered it has not become a mechanized organization, but is filling a definite personal place in the service of the community.

Conclusion

In concluding my thirteenth annual report, my chief emotion is a deep appreciation of the efforts made by the resident officers and employees to meet the requirements of rigid economy without permitting themselves to drop back from their previous high record of service to the patients. I realize that it has been a supreme effort, the sort of thing that cannot be long continued without overstrain and consequent discouragement and weakening of morale, as well as a deterioration of the physical plant of the institution, yet it has been successful this year to a degree which none of us would have believed possible and I wish to give full measure of credit to each and every one who by doing his part so well made even the depression yield something of achievement.

I wish to express to the members of the Board of Managers my gratitude for their constant help throughout the year. As individuals and as a Board they have cooperated in every possible way to meet the needs of the institution and have not only handled many internal problems through their committees, but have responded vigorously and effectively whenever the interests of the hospital could be served by conference with outside groups or State officials. Dr. Knight, especially, as President of the Board, has been a tower of strength at all times.

The State Board of Control, especially Mr. Earle, and the assistants in the Central Office have been untiring in their support

of this institution and by frequent personal visits and conferences with the resident officers have kept thoroughly informed on all phases of the work done here. The Commissioner, overworked and harassed in a year of problems and stress without precedent in his Department, has yet maintained the sincere personal relationships with the officers of this organization so as continually to hold our efforts on a basis of loyal cooperation from within rather than a forced pressure from without. His devotion and his accomplishments have in truth been remarkable.

Respectfully submitted,

MARCUS A. CURRY

*Medical Superintendent
and Chief Executive Officer.*

STATISTICAL APPENDIX TO CHIEF EXECUTIVE OFFICER'S
REPORT

TABLE 1.

GENERAL INFORMATION

Data correct at end of hospital year, June 30, 1933

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.....	\$11,313,697.02
Personal property	1,132,803.67
Total.....	\$12,446,500.69
Total acreage of hospital property owned.....	929.49
Additional acreage rented	25.00
Total acreage under cultivation during previous year	240.00

4. OFFICERS AND EMPLOYEES

Actually in Service at End of Year

	Males	Females	Total
Superintendents.....	1	..	1
Clinical directors.....	1	..	1
Assistant physicians.....	25	1	26
Pathologists.....	1	..	1
Consulting specialists.....	2	..	2
	—	—	—
Total physicians	30	1	31
Business managers.....	1	..	1
Assistant to Chief Executive Officer.....	1	..	1
Resident dentists	2	..	2
Pharmacists.....	2	..	2
Engineer.....	1	..	1
Graduate nurses.....	5	54	59
Superintendent of Nurses.....	..	1	1
Other nurses and attendants	222	215	437
Occupational therapists.....	6	6	12
Social workers .....	..	12	12
Teachers of Physical Training.....	..	7	7
All other officers and employees.....	270	93	363
	—	—	—
Total officers and employees.....	508	388	896

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.....	1,920	1,974	3,894	172	216	388
Epileptics.....	.....	.....	.....	..	..	..
Mental defectives.....	78	62	140	3	2	5
Alcoholics.....	.....	.....	.....	..	..	..
Drug addicts.....	.....	.....	.....	..	..	..
Neurosyphilitics (without psychosis).....	.....	.....	.....	..	..	..
All other cases.....	.....	.....	.....	..	..	..
Total.....	1,998	2,036	4,034	175	218	393
Other Races—						
Insane.....	103	103	206	9	28	37
Epileptics.....	.....	.....	.....	..	..	..
Mental defectives.....	.....	2	2	..	..	..
Alcoholics.....	.....	.....	.....	..	..	..
Drug addicts.....	.....	.....	.....	..	..	..
Neurosyphilitics (without psychosis).....	.....	.....	.....	..	..	..
All other cases.....	.....	.....	.....	..	..	..
Total.....	103	105	208	9	28	37
Grand Total.....	2,101	2,141	4,242	184	246	430
6. Patients under treatment in occupational therapy classes, including physical training, on date of report.....				440	1,905	2,345
7. Other patients employed in general work of hos- pital on date of report.....				941	576	1,517
8. Average daily number of all patients actually in hospital during year.....				2,053.4	2,097.3	4,150.7
9. Voluntary patients admitted during year.....				97	75	172
10. Persons given advice or treatment in out-patient clinics during year.....				881	893	1,774

TABLE II.

FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 1933

RECEIPTS

Balance on hand from previous fiscal year	
Received from appropriations	1,634,514.62
Received from paying patients	124,584.93
Received from all other sources	342,517.73
Total receipts.....	<u>\$2,101,617.28</u>

DISBURSEMENTS

1. Expenditures for maintenance of patients:	
Salaries and wages.....	\$925,163.89
Provisions (food).....	226,204.97
Fuel, light and water.....	118,169.33
All other expenditures for maintenance	200,945.76
Total expenditures for maintenance	<u>\$1,470,483.95</u>
2. Expenditures for all purposes other than maintenance, including new buildings, other additions and permanent betterments.....	29,880.95
3. Expenditures for repayment of loans and interest on loans.....	.....
Total expenditures.....	<u>\$1,500,364.90</u>
Amount returned to State Treasurer	601,252.38
Balance on hand at close of year.....	.....
Total disbursements	<u>\$2,101,617.28</u>

TABLE III.

MOVEMENT OF INSANE PATIENT POPULATION

For year beginning July 1, 1932, and ended June 30, 1933

	Males	Females	Total
1. Insane patients on records of hospital at beginning of hospital year:			
a—In hospital.....	2,052	2,020	4,072
b—On parole or otherwise absent.....	206	220	426
Total.....	2,258	2,240	4,498
2. Admissions during year:			
a—First admissions.....	592	542	1,134
(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.....	129	151	280
(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.....	15	12	27
(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.....	736	705	1,441
(Includes total of items 2 a, b and c.)			
4. Total on books during year.....	2,994	2,945	5,939
(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.....	121	137	258
b—As improved	113	95	208
(Does not include transfers.)			
c—As unimproved.....	12	24	36
(Includes all patients discharged not benefited by treatment, exclusive of transfers.)			
d—As without psychosis.....	22	6	28
(Includes all discharged patients who are found to have had no psychosis.)			
e—Transferred to other hospitals for mental diseases.....	215	86	301
(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.....	226	210	436
6. Total discharged, transferred and died during year	709	558	1,267
(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.....	2,101	2,141	4,242
b—On parole or otherwise absent.....	184	246	430
Total.....	2,285	2,387	4,672

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.....	381	364	745	218	232	204	212	217	200
Africa.....	..	..	..	..	..	..	..	..	..
*Asia.....	1	..	1	1	1	1	..	..	..
Australia.....	1	..	1	1	1	1	..	..	..
Austria.....	10	8	18	12	12	11	13	13	11
Belgium.....	..	..	..	..	..	..	..	..	..
†Canada.....	6	4	10	5	6	3	6	7	4
Central America.....	..	..	..	..	..	..	..	..	..
China.....	1	..	1	1	1	1	..	..	..
Czecho-Slovakia.....	10	7	17	14	13	13	9	9	9
Cuba.....	..	..	..	..	..	..	..	..	..
Denmark.....	..	1	1	2	2	1	1	1	1
England.....	8	12	20	25	20	18	22	19	14
*Europe.....	7	4	11	8	8	8	6	7	6
Finland.....	1	..	1	1	1	1	..	..	..
France.....	1	3	4	3	2	2	5	4	4
Germany.....	23	25	48	56	53	46	63	68	53
Greece.....	1	1	2	2	2	2	1	1	1
Holland.....	7	3	10	11	9	9	8	6	6
Hungary.....	5	6	11	11	11	11	7	6	6
India.....	1	..	1	1	1	1	..	..	..
Ireland.....	20	18	38	57	57	46	49	57	42
Italy.....	40	31	71	67	65	65	55	54	54
Japan.....	..	1	1	..	..	..	1	1	1
Jugo-Slavia.....	1	2	3	1	1	1	3	2	2
Mexico.....	..	..	..	..	..	..	..	..	..
Norway.....	3	2	5	3	4	3	2	2	2
Philippine Islands.....	..	..	..	..	..	..	..	..	..
Poland.....	29	23	52	42	41	41	34	35	34
Porto Rico.....	..	..	..	..	..	..	1	..	..
Portugal.....	1	2	3	1	1	1	2	2	2
Roumania.....	2	1	3	2	2	2	1	1	1
Russia.....	16	9	25	28	26	25	17	17	17
Scotland.....	8	3	11	11	11	10	8	7	5
South America.....	1	1	2	1	1	1	1	1	1
Spain.....	1	2	3	1	1	1	2	2	2
Sweden.....	1	1	2	1	1	1	3	3	2
Switzerland.....	3	3	6	3	4	3	6	7	4
Turkey-in-Asia.....	1	2	3	1	1	1	2	2	2
Turkey-in-Europe.....	..	1	1	..	..	..	..	..	..
Wales.....	..	1	1	..	..	..	1	..	..
†West Indies.....	1	1	2	1	1	1	1	1	1
Other countries.....	..	..	..	..	..	..	..	..	..
Unascertained.....	..	..	..	..	..	..	..	..	..
Total.....	592	542	1,134	592	592	535	542	542	487

*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													
				PARENTAGE													TIME IN UNITED STATES BEFORE ADMISSION																												
	Total			Native			Foreign			Mixed			Unascertained			Total			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.	M.	F.	T.									
Under 15 years ..	3	4	7	3	4	7	1	4	5	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15-19 years	31	30	61	29	26	55	10	6	16	16	14	30	3	6	9	2	4	6	..	2	2	..	1	1	..	1	1	..	1	1	2	..	2			
20-24 years	28	40	68	27	33	60	11	15	26	13	13	26	3	5	8	1	7	8	1	1	2	..	1	1			
25-29 years	69	64	133	55	56	111	27	30	57	23	19	42	5	7	12	14	8	22	2	2	4	1	1	2	3	2	5	8	3	11
30-34 years	61	62	123	46	46	92	26	29	55	15	11	26	5	6	11	15	16	31	4	..	4	1	3	4	5	5	10	5	8	13
35-39 years	43	71	114	21	38	59	12	16	28	6	10	16	3	12	15	22	33	55	4	3	7	3	3	6	3	7	10	11	20	31
40-44 years	50	43	93	31	26	57	16	14	30	8	9	17	7	3	10	19	17	36	..	2	2	2	..	2	3	..	3	14	15	29	1	..	1
45-49 years	73	45	118	40	26	66	24	14	38	8	8	16	8	4	12	33	19	52	1	1	2	1	..	1	3	3	6	28	15	43
50-54 years	54	37	91	33	20	53	22	16	38	7	4	11	4	..	4	21	17	38	..	1	1	2	1	3	19	15	34
55-59 years	39	32	71	19	20	39	8	10	18	8	9	17	3	1	4	20	12	32	1	1	2	19	11	30
60-64 years	42	27	69	22	21	43	14	10	24	6	7	13	2	4	6	20	6	26	2	..	2	1	..	1	17	6	23
65-69 years	33	26	59	16	12	28	12	5	17	6	6	6	4	1	5	17	14	31	..	1	1	..	1	1	17	12	29
70 years and over	66	61	127	39	36	75	22	29	51	10	3	13	7	4	11	27	25	52	27	25	52
Unascertained....			
Total.....	592	542	1134	381	364	745	205	198	403	121	113	234	55	53	108	211	178	389	12	13	25	12	11	23	19	19	38	167	135	302	1	..	1			

TABLE V.

CITIZENSHIP OF FIRST ADMISSIONS

	Males	Females	Total
Citizens by birth.....	381	364	745
Citizens by naturalization.....	116	87	203
Aliens.....	95	91	186
Citizenship unascertained.....	..	..	..
Total.....	<u>592</u>	<u>542</u>	<u>1,134</u>

TABLE VI.

PSYCHOSES OF FIRST ADMISSIONS

<i>Psychoses</i>	M.	F.	T.	M.	F.	T.
1. TRAUMATIC PSYCHOSES.....	5	..	5
2. SENILE PSYCHOSES.....	21	33	54
3. PSYCHOSES WITH CEREBRAL ARTERIOSCLEROSIS.....	151	120	271
4. GENERAL PARALYSIS.....	71	22	93
5. PSYCHOSES WITH CEREBRAL SYPHILIS.....	4	5	9
6. PSYCHOSES WITH HUNTINGTON'S CHOREA.....	2	2
7. PSYCHOSES WITH BRAIN TUMOR.....	1	2	3
8. PSYCHOSES WITH OTHER BRAIN OR NERVOUS DISEASES, total.....	14	10	24
a. Cerebral embolism.....
b. Paralysis agitans.....	..	1	1	..	..	..
c. Meningitis, tubercular or other forms.....
d. Multiple sclerosis.....	..	1	1	..	..	..
e. Tabes dorsalis.....	3	..	3	..	..	..
f. Acute chorea.....
g. Other diseases.....	11	8	19	..	..	..
9. ALCOHOLIC PSYCHOSES, total.....	21	9	30
a. Delirium tremens.....	8	5	13	..	..	..
b. Korsakow's psychosis.....	..	1	1	..	..	..
c. Acute hallucinosis.....	11	2	13	..	..	..
d. Other types, acute or chronic.....	2	1	3	..	..	..
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.)

	M.	F.	T.	M.	F.	T.
12. PSYCHOSES WITH OTHER SOMATIC DISEASES, total				16	23	39
a. Delirium with infectious diseases...	4	2	6	..	..	..
b. Post-infectious psychosis	2	2	4	..	..	..
c. Exhaustion delirium.....	..	1	1	..	..	..
d. Delirium of unknown origin.....	..	..	..	..	..	..
e. Cardio-renal diseases.....	6	5	11	..	..	..
f. Diseases of the ductless glands.....	..	..	..	..	..	..
g. Other diseases or conditions	4	13	7	..	..	..
13. MANIC-DEPRESSIVE PSYCHOSES, total.				63	88	151
a. Manic type	20	23	43	..	..	..
b. Depressive type.....	22	24	46	..	..	..
c. Other types.....	21	41	62	..	..	..
14. INVOLUTION MELANCHOLIA.....	..	..	..	15	23	38
15. DEMENTIA PRÆCOX (schizophrenia).. .. .	..	..	..	132	146	278
16. PARANOIA AND PARANOID CONDITIONS.....	..	..	..	10	8	18
17. EPILEPTIC PSYCHOSES .....	..	..	..	3	2	5
18. PSYCHONEUROSES AND NEUROSES, total.....	..	..	..	8	13	21
a. Hysterical type.....	2	2	4	..	..	..
b. Psychasthenic type (anxiety and obsessive forms).....	3	8	11	..	..	..
c. Neurasthenic type.....	3	3	6	..	..	..
d. Other types.....	..	..	..	..	..	..
19. PSYCHOSES WITH PSYCHOPATHIC PERSONALITY .....	..	..	..	11	11	22
20. PSYCHOSES WITH MENTAL DEFICIENCY.....	..	..	..	13	5	18
21. UNDIAGNOSED PSYCHOSES.....	..	..	..	16	11	27
22. WITHOUT PSYCHOSIS, total. ....	..	..	..	17	6	23
a. Epilepsy without psychosis.....	1	..	1	..	..	..
b. Alcoholism without psychosis.....	4	1	5	..	..	..
c. Drug addiction without psychosis...	3	..	3	..	..	..
d. Psychopathic personality without psychosis.....	2	..	2	..	..	..
e. Mental deficiency without psychosis.....	1	5	6	..	..	..
f. Others.....	6	..	6	..	..	..
Total.....	---	---	---	592	542	1134

TABLE VII.

RACE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

RACE	Total			Traumatic			Senile			With cerebral arterio-sclerosis			General paralysis			With cerebral syphilis			With Huntington's chorea			With brain tumor			With other brain or nervous diseases			Alcoholic			Due to drugs and other exogenous toxins			With pellagra			With other somatic diseases			Manic-depressive			Involution melancholia			Dementia præcox			Paranoia and paranoid conditions			Epileptic psychoses			Psycho-neuroses and neuroses			With psychopathic personality					
	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.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
African (black).....	67	61	128	1		1		2	2	11	7	18	19	4	23	1	2	3				1		1		1	1		1	1	3	5	8							7	4	11	5	15	20				15	14	29												
American Indian.....																																																															
Armenian.....	1		1																																																												
Bulgarian.....																																																															
Chinese.....	1		1																																																												
Cuban.....																																																															
Dutch and Flemish..	9	6	15				1	1	2	3		3	1		1																																																
East Indian.....																																																															
English.....	18	14	32					3	3	10	3	13														1	1																																				
Finnish.....	1		1																																																												
French.....	2	4	6																																																												
German.....	46	56	102	1		1	5	4	9	17	25	42	7		7				1	1								1		1																																	
Greek.....	5	1	6																																																												
Hebrew.....	37	25	62					1	1	10	5	15	2		2																																																
Irish.....	46	42	88	2		2	4	3	7	22	19	41	2		2	1		1																																													
Italian*.....	66	55	121				2		2	11	9	20	8		8	5		5				1	1		2	1	3	1		1				1	1																												
Japanese.....	1	1	2																																																												
Lithuanian.....	7	4	11					1	1	2	2	4	1		1																																																
Magyar.....	8	6	14										1		1																																																
Mexican.....																																																															
Pacific Islander.....																																																															
Portuguese.....	1	2	3																																																												
Roumanian.....	1		1																																																												
Scandinavian †.....	5	5	10							2	2	4	1		1																																																
Scotch.....	10	5	15				1	1	2	4	4	8	2		2																																																
Slavonic ‡.....	59	54	113							13	6	19	2		2																																																
Spanish.....	1	2	3					1	1		1	1																																																			
Spanish-American...		2	2																																																												
Syrian.....		1	1																																																												
Turkish.....																																																															
Welsh.....																																																															
West Indian §.....																																																															
Other specific races..																																																															
Mixed.....	201	196	397	1		1	8	16	24	45	41	86	23	8	31	3	3	6		2	2							6	6	12	5	1	6																														
Race unascertained..																																																															
Total.....	592	542	1134	5		5	21	33	54	151	120	271	71	22	93	4	5	9		2	2	1	2	3	14	10	24	21	9	30		2	2				1	1		16	23	39	63	88	151	15	23	38	132	146	278	10	8	18	3	2	5	8	13	21	11	11	22

*Includes "North" and "South." †Norwegians, Danes and Swedes. ‡Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian. §Except Cuban.

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.....	5		5				1		1	2		2	2		2							
2. Senile.....	21	33	54	5	5	10	4	7	11	11	16	27		5	5	1			1			
3. With cerebral arteriosclerosis....	151	120	271	21	19	40	34	28	62	75	60	135	12	13	25	9			9			
4. General paralysis....	71	22	93	6	6	12	16	4	20	42	9	51	5	2	7	2	1		3			
5. With cerebral syphilis.....	4	5	9				1	1	2	2	3	5		1	1	1			1			
6. With Huntington's chorea.....		2	2								1	1		1	1							
7. With brain tumor...	1	2	3							1	1	2							1	1		
8. With other brain or nervous diseases..	14	10	24		2	2	1	2	3	11	5	16	2	1	3							
9. Alcoholic.....	21	9	30	1	1	2	9	5	14	9	3	12	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.....	16	23	39	2		2	6	3	9	8	14	22		5	5				1	1		
13. Manic-depressive...	63	88	151	2	3	5	8	12	20	35	63	98	16	7	23	2	3		5			
14. Involution melancholia.....	15	23	38		1	1	1	4	5	13	11	24		6	6	1	1		2			
15. Dementia præcox...	132	146	278	6	8	14	28	26	54	75	90	165	20	18	38	3	4		7			
16. Paranoia or paranoid conditions...	10	8	18	1		1	2	2	4	5	4	9	2	2	4							
17. Epileptic psychoses.	3	2	5							3	2	5										
18. Psychoneuroses and neuroses.....	8	13	21					1	1	4	8	12	4	4	8							
19. With psychopathic personality.....	11	11	22				2	1	3	8	8	16	1	2	3							
20. With mental deficiency.....	13	5	18	4	2	6	4	2	6	5	1	6										
21. Undiagnosed psychoses.....	16	11	27	2	1	3	5	2	7	6	5	11	3	3	6							
22. Without psychosis..	17	6	23		4	4	1		1	11	2	13	2		2	3			3			3
Total.....	592	542	1134	50	52	102	123	100	223	326	307	633	70	72	142	23	11		34			

*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.....	5		5	5		5						
2. Senile	21	33	54	19	30	49	2	3	5			
3. With cerebral arteriosclerosis ...	151	120	271	138	107	245	13	13	26			
4. General paralysis ...	71	22	93	69	21	90	2	1	3			
5. With cerebral syphilis	4	5	9	4	5	9						
6. With Huntington's chorea		2	2					2	2			
7. With brain tumor...	1	2	3	1	2	3						
8. With other brain or nervous diseases..	14	10	24	12	8	20	2	2	4			
9. Alcoholic	21	9	30	19	8	27	2	1	3			
10. Due to drugs & other exogenous toxins.		2	2		2	2						
11. With pellagra.....		1	1		1	1						
12. With other somatic diseases	16	23	39	15	23	38	1		1			
13. Manic-depressive ...	63	98	151	59	80	139	4	8	12			
14. Involution melan- cholia	15	23	38	14	21	35	1	2	3			
15. Dementia præcox...	132	146	278	128	136	264	4	10	14			
16. Paranoia or para- noid conditions...	10	8	18	9	8	17	1		1			
17. Epileptic psychoses.	3	2	5	3	2	5						
18. Psychoneuroses and neuroses	8	13	21	7	11	18	1	2	3			
19. With psychopathic personality	11	11	22	10	10	20	1	1	2			
20. With mental deficiency.....	13	5	18	11	5	16	2		2			
21. Undiagnosed psychoses	16	11	27	12	10	22	4	1	5			
22. Without psychosis...	17	6	23	14	6	20	3		3			
Total.....	592	542	1134	549	496	1045	43	46	89			

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.....	5	..	5	..	..	..	4	..	4	1	..	1	..	..	..
2. Senile.....	21	33	54	3	2	5	13	20	33	5	11	16	..	..	..
3. With cerebral arteriosclerosis...	151	120	271	16	12	28	105	82	187	30	26	56	..	..	..
4. General paralysis...	71	22	93	9	4	13	53	18	71	9	..	9	..	..	..
5. With cerebral syphilis.....	4	5	9	..	2	2	4	3	7	..	..	..	..	..	..
6. With Huntington's chorea.....	..	2	2	..	..	..	..	2	2	..	..	..	..	..	..
7. With brain tumor...	1	2	3	..	..	..	1	1	2	..	1	1	..	..	..
8. With other brain or nervous diseases..	14	10	24	..	1	1	8	8	16	6	1	7	..	..	..
9. Alcoholic.....	21	9	30	1	1	2	19	6	25	1	2	3	..	..	..
10. Due to drugs & other exogenous toxins..	..	2	2	..	..	..	..	2	2	..	..	..	..	..	..
11. With pellagra.....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
12. With other somatic diseases.....	16	23	39	6	3	9	10	20	30	..	..	..	..	..	..
13. Manic-depressive...	63	88	151	4	5	9	52	64	116	7	19	26	..	..	..
14. Involution melan- cholia.....	15	23	38	1	1	2	11	17	28	3	5	8	..	..	..
15. Dementia præcox...	132	146	278	7	12	19	105	117	222	20	17	37	..	..	..
16. Paranoia or para- noid conditions...	10	8	18	3	1	4	5	6	11	2	1	3	..	..	..
17. Epileptic psychoses.	3	2	5	1	..	1	1	2	3	1	..	1	..	..	..
18. Psychoneuroses and neuroses.....	8	13	21	..	..	..	6	10	16	2	3	5	..	..	..
19. With psychopathic personality.....	11	11	22	..	1	1	8	8	16	3	2	5	..	..	..
20. With mental deficiency.....	13	5	18	2	..	2	10	5	15	1	..	1	..	..	..
21. Undiagnosed psychoses.....	16	11	27	2	1	3	11	8	19	3	2	5	..	..	..
22. Without psychosis...	17	6	23	2	3	5	12	3	15	3	..	3	..	..	..
Total.....	592	542	1134	57	49	106	438	403	841	97	90	187	..	..	..

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.....	5		5	3		3	2		2						
2. Senile.....	21	33	54	15	29	44	4	3	7	2	1	3			
3. With cerebral arteriosclerosis....	151	120	271	80	95	175	47	18	65	24	7	31			
4. General paralysis...	71	22	93	26	14	40	37	7	44	8	1	9			
5. With cerebral syphilis.....	4	5	9	2	4	6	2	1	3						
6. With Huntington's chorea.....		2	2		1	1		1	1						
7. With brain tumor...	1	2	3		2	2				1		1			
8. With other brain or nervous diseases..	14	10	24	10	8	18	1		1	3	2	5			
9. Alcoholic.....	21	9	30							21	9	30			
10. Due to drugs & other exogenous toxins..		2	2		2	2									
11. With pellagra.....		1	1		1	1									
12. With other somatic diseases.....	16	23	39	5	18	23	4	4	8	7	1	8			
13. Manic-depressive...	63	88	151	28	61	89	25	24	49	10	3	13			
14. Involution melan- cholia.....	15	23	38	10	17	27	3	6	9	2		2			
15. Dementia præcox...	132	146	278	63	106	169	46	36	82	23	4	27			
16. Paranoia or paranoid conditions.....	10	8	18	3	6	9	4	2	6	3		3			
17. Epileptic psychoses..	3	2	5	2	2	4	1		1						
18. Psychoneuroses and neuroses.....	8	13	21	4	7	11	4	6	10						
19. With psychopathic personality.....	11	11	22	6	7	13	1	2	3	4	2	6			
20. With mental deficiency.....	13	5	18	8	5	13	3		3	2		2			
21. Undiagnosed psychoses.....	16	11	27	6	9	15	8	2	10	2		2			
22. Without psychosis..	17	6	23	4	5	9	5		5	8	1	9			
Total.....	592	542	1134	275	399	674	197	112	309	120	31	151			

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	5		5	2		2	3		3													
2. Senile.....	21	33	54	3	3	6	6	4	10	10	25	35	1	1	2	1			1			
3. With cerebral arteriosclerosis....	151	120	271	24	12	36	79	44	123	39	53	92	7	9	16	2	2	4				
4. General paralysis....	71	22	93	15	1	16	38	17	55	5	4	9	12		12	1		1				
5. With cerebral syphilis	4	5	9	1	1	2	3	2	5					2	2							
6. With Huntington's chorea		2	2		1	1		1	1													
7. With brain tumor...	1	2	3		2	2	1		1													
8. With other brain or nervous diseases ..	14	10	24	8	5	13	6	3	9		1	1		1	1							
9. Alcoholic	21	9	30	9	1	10	6	4	10	3	2	5	2	2	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.....	16	23	39	6	6	12	7	12	19	3	1	4		3	3			1	1			
13. Manic-depressive ...	63	88	151	25	26	51	31	50	81	1	6	7	4	5	9	2	1	3				
14. Involution melan- cholia	15	23	38	1	5	6	14	13	27		4	4						1	1			
15. Dementia præcox...	132	146	278	92	56	148	31	72	103	2	4	6	6	11	17	1	3	4				
16. Paranoia or paranoid conditions	10	8	18	2	1	3	6	6	12	2		2						1	1			
17. Epileptic psychoses.	3	2	5	2	1	3	1		1									1	1			
18. Psychoneuroses and neuroses.....	8	13	21	2	2	4	6	8	14		3	3										
19. With psychopathic personality.....	11	11	22	5	8	13	4	3	7				1		1	1			1			
20. With mental deficiency.....	13	5	18	12	3	15	1	1	2					1	1							
21. Undiagnosed psychoses	16	11	27	8	2	10	7	5	12	1	2	3		2	2							
22. Without psychosis..	17	6	23	4	5	9	9		9	2		2	1	1	2	1			1			
Total	592	542	1134	221	141	362	259	247	506	68	105	173	34	38	72	10	11	21				

TABLE XIV.

PSYCHOSES OF READMISSIONS

PSYCHOSES	Males	Females	Total
1. Traumatic psychoses.....	1	3	4
2. Senile psychoses.....	1	1	2
3. Psychoses with cerebral arteriosclerosis.....	13	16	29
4. General paralysis.....	9	3	12
5. Psychoses with cerebral syphilis.....			
6. Psychoses with Huntington's chorea..		1	1
7. Psychoses with brain tumor.....			
8. Psychoses with other brain or nervous diseases..	1	2	3
9. Alcoholic psychoses.....	3	1	4
10. Psychoses due to drugs and other exogenous toxins	1		1
11. Psychoses with pellagra.....			
12. Psychoses with other somatic diseases.....	1		1
13. Manic-depressive psychoses.....	34	56	90
14. Involution melancholia.....	1	5	6
15. Dementia præcox.....	39	40	79
16. Paranoia and paranoid conditions.....	2	4	6
17. Epileptic psychoses.....	3		3
18. Psychoneuroses and neuroses.....	2	7	9
19. Psychoses with psychopathic personality.....	10	3	13
20. Psychoses with mental deficiency.....	2	4	6
21. Undiagnosed psychoses.....	3		3
22. Without psychosis.....	3	5	8
Total.....	129	151	280

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	2	1	3	1	1	2	1		1			
2. Senile	1	1	2				1	1	2			
3. With cerebral arteriosclerosis....	24	31	55	12	16	28	12	11	23		4	4
4. General paralysis....	25	14	39	14	9	23	10	5	15	1		1
5. With cerebral syphilis.....		2	2		1	1		1	1			
6. With Huntington's chorea.....												
7. With brain tumor....												
8. With other brain or nervous diseases...	2	6	8	1	4	5	1	2	3			
9. Alcoholic.....	24	3	27	23	3	26	1		1			
10. Due to drugs & other exogenous toxins..		3	3		3	3						
11. With pellagra.....												
12. With other somatic diseases	4	10	14	4	7	11		3	3			
13. Manic-depressive....	55	75	130	43	62	105	11	12	23	1	1	2
14. Involution melan- cholia.....	10	21	31	7	11	18	2	8	10	1	2	3
15. Dementia præcox....	60	44	104				56	36	92	4	8	12
16. Paranoia or paranoid conditions	6		6	1		1	3		3	2		2
17. Epileptic psychoses..	6	8	14		4	4	5	3	8	1	1	2
18. Psychoneuroses and neuroses.....	9	18	27	4	6	10	4	8	12	1	4	5
19. With psychopathic personality.....	12	8	20	8	5	13	4	3	7			
20. With mental deficiency	4	3	7	3	3	6	1		1			
21. Undiagnosed psychoses.....	2	8	10		2	2	1	2	3	1	4	5
22. Without psychosis...	22	6	28									
Total.....	268	262	530	121	137	258	113	95	208	12	24	36

TABLE XVIII.

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

PSYCHOSES	TOTAL			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1. Traumatic.....	1	1	2		1	1																																							
2. Senile.....	26	41	67	8	6	14	7	14	21	3	4	7		5	5	6	7	13		1	1		1	1		1	1	1	1	2											1	1	1		1
3. With Cerebral arteriosclerosis....	89	68	157	24	14	38	13	8	21	11	12	23	10	5	15	19	19	38	4	4	8	3	2	5	1	3	4	1		1	1									2	1	3			
4. General paralysis....	38	7	45	7		7	9	3	12	3	3	6	2		2	7		7	7	1	8	2		2	1		1																		
5. With Cerebral syphilis.....	6	3	9	1		1	2	1	3										1		1	1	2	3	1		1																		
6. With Huntington's chorea.....																																													
7. With brain tumor....		1	1								1	1																																	
8. With other brain or nervous diseases....	5	2	7	1		1	1	1	2				1		1	1		1							1		1								1	1									
9. Alcoholic.....	3	1	4	1		1	2	1	3																																				
10. Due to drugs and other exogenous toxins....																																													
11. With pellagra.....																																													
12. With other somatic diseases.....	7	8	15	5	4	9	1	1	2		1	1				1	1	2								1	1					1	1								1	1			1
13. Manic-depressive....	10	19	29	2	12	14	3		3		1	1	1		1	2	3	5	2		2					1	1											1	1			1			
14. Involution melancholia.....	4	4	8	1		1		1	1	2	1	3																																	
15. Dementia præcox....	29	40	69				1	1					1	1		5	5	10	2	2	4	2	3	5	1	1	2	1	3	4	2	4	6	1	1	2	3	7	10	12	12	24			
16. Paranoia or paranoid conditions.....	3	4	7													1		1				2	1	3					1	1		2	2												
17. Epileptic psychoses....	1	1	2										1		1																														
18. Psychoneuroses and neuroses.....	2		2	1		1	1		1																																				
19. With Psychopathic personality.....	1	2	3				1		1											1	1																								
20. With mental deficiency.....	1	3	4														2	2																											
21. Undiagnosed psychoses.....		3	3					2	2								1	1																											
22. Without psychosis....		2	2					2	2																																				
Total.....	226	210	436	51	37	88	40	35	75	19	23	42	15	11	26	43	39	82	18	10	28	8	8	16	5	6	11	3	5	8	3	7	10	1	2	3	5	11	16	15	16	31			

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	22	
1 year less than 2	10	10
2 years less than 3	13	13
3 years less than 4	21	21
4 years less than 5	21	21
5 years less than 10	80	80
10 years and over	572	572
Not stated	6	
TOTAL	745	717

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	23		11
1 year less than 2	12		9
2 years less than 3	8		6
3 years less than 4	15		9
4 years less than 5	9		8
5 years less than 10	48	48	48
10 years and over	266	266	266
Not stated	8		
TOTAL	389	314	357

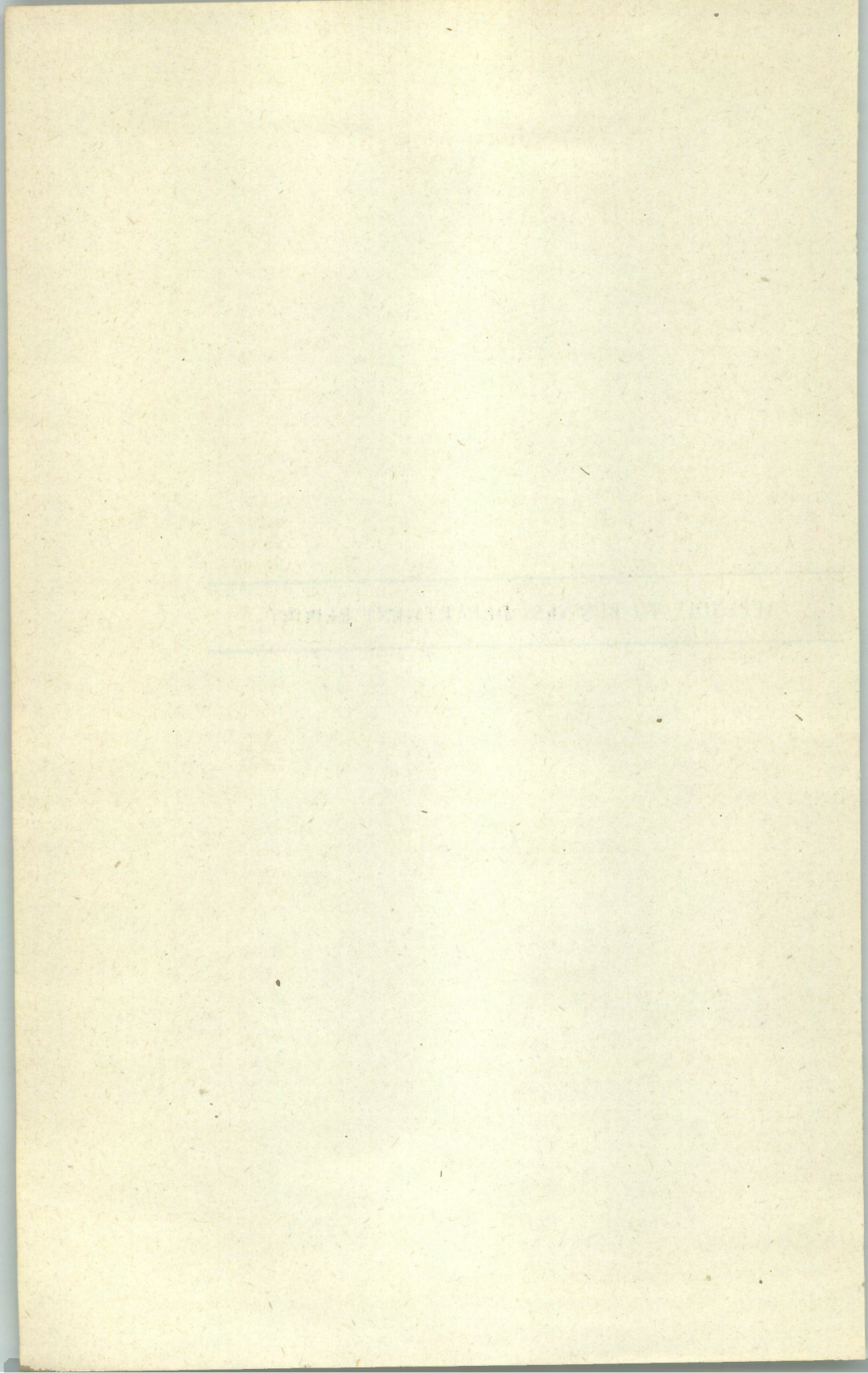
COUNTY OF LEGAL RESIDENCE OF FIRST ADMISSIONS AND MANNER OF SUPPORT

	Total	State Indigent	County Indigent	Private	Un- classified
Bergen	202		199	3	
Essex	346		341	5	
Hudson	148		138	10	
Hunterdon	1		1		
Middlesex	3		3		
Monmouth	1			1	
Morris	89		79	10	
Ocean .....	..			
Passaic	149		143	6	
Somerset	8		3	5	
Sussex	16		13	3	
Union	167		162	5	
Warren	4		1	3	
Pennsylvania .....	..			
TOTAL	1,134	..	1,083	51	

COUNTRY OF BIRTH OF FIRST ADMISSIONS BY COLOR

State of Birth of Native Born	Total	White	Negro	Country of Birth of Foreign Born	Total	White	Negro
Alabama	13		13	England	20	20	
California				Scotland	11	11	
Colorado				Ireland	38	38	
Connecticut	10	9	1	Norway	5	5	
Delaware				Sweden	2	2	
District of Columbia ..				Denmark	1	1	
Florida	2	1	1	Netherlands	10	10	
Georgia	16	1	15	Switzerland	6	6	
Illinois	8	8		France	4	4	
Indiana	2	2		Germany	48	48	
Iowa	1		1	CENTRAL EUROPE			
Kentucky	2	1	1	Poland	52	52	
Louisiana	2		2	Czechoslovakia	17	17	
Maine	5	5		Austria	18	18	
Maryland	4	2	2	Hungary	11	11	
Massachusetts	14	12	2	EASTERN EUROPE			
Michigan	3	3		Russia	25	25	
Minnesota	1		1	Lithuania	10	10	
Missouri	2	2		Finland	1	1	
Mississippi	1		1	Roumania	3	3	
New Jersey	379	362	17	SOUTHERN EUROPE			
New Mexico	1	1		Greece	2	2	
New York	141	138	3	Italy	71	71	
North Carolina	16	1	15	Jugo-Slavia	3	3	
Ohio	8	8		Malta	1	1	
Oklahoma	1	1		Spain	3	2	1
West Virginia	4	3	1	Portugal	3	3	
Pennsylvania	34	33	1	OTHER EUROPE			
Rhode Island	2	2		Turkey	1	1	
South Carolina	21	2	19	OTHER COUNTRIES			
South Dakota	1	1		Mexico			
Texas	2	1	1	Asia	5	4	1
Vermont	4	4		Canada	10	10	
Virginia	28	6	22	All Others	8	5	3
Wisconsin	2	2					
United States	15	11	4				
TOTAL	745	622	123		389	384	5

APPENDIX TO BUSINESS DEPARTMENT REPORT



AGRICULTURAL PRODUCTS

Farm

4,798 16 qt. baskets apples.....	\$ 1,693.90
1,000 gallons cider.....	210.00
981½ tons ensilage.....	8,835.75
192.2650 tons mangle beets.....	1,922.66
39.4075 tons turnips.....	394.08
32.40 tons green rye.....	259.20
27.815 tons green oats.....	222.52
137.5775 tons green grass.....	926.54
62 tons manure.....	124.00
	\$14,586.65

Dairy

743,228 qts. milk.....	59,458.24
5,552 lbs. veal.....	506.22
347½ lbs calf liver, heart, tongue.....	39.75
18,799 lbs. beef.....	1,802.71
695 lbs. beef liver, heart, tongue.....	68.44
1629.20 tons manure.....	3,258.40
Lot hides and offal leather.....	174.55
1,150 empty bags.....	25.50
	\$ 65,333.81

Hennery

2,000½ lbs. broilers.....	390.55
1,145½ lbs. roasters.....	167.90
18,139 11-12 doz. eggs.....	4,382.13
12 tons manure.....	60.00
	5,000.58

Piggery

68,882 lbs. pork.....	\$4,583.89
1,782 lbs. pig liver, heart, tongue.....	116.51
199.97 tons manure.....	599.91
	\$5,300.31

Garden

690½ baskets apples.....	\$ 256.89
425½ bkts. lima beans.....	267.43
905 bkts. string beans.....	428.21
3,294 bkts. beets.....	938.86
578 bunches beets.....	11.09
106,003½ lbs. cabbage.....	1,051.71
1,379½ bkts. carrots.....	448.47

50 bunches carrots .....	.86
2,373 hds. cauliflower.....	157.57
1,229 $\frac{1}{2}$ bkts. string beans, wax	900.81
864 $\frac{1}{2}$ bunches celery	243.58
30,045 ears corn, sweet	442.20
203 $\frac{1}{2}$ bkts. cucumbers	93.49
546 qts. currants	40.72
581 $\frac{1}{2}$ bkts. eggplant	195.26
7,253 hds. lettuce	269.07
3,043 $\frac{1}{2}$ bunches leek	66.33
70 $\frac{1}{2}$ bkts. grapes	35.24
747 bkts. onions	258.99
765 bunches onions	12.42
2,224 bunches parsley.....	36.89
88 $\frac{3}{4}$ bkts. peas	66.28
1,053 $\frac{1}{2}$ bkts. peppers	312.56
4,928 $\frac{1}{2}$ lbs. pumpkins	49.54
6,484 $\frac{1}{2}$ bunches radishes.....	85.37
1,093 $\frac{1}{2}$ qts. raspberries	179.28
29,768 bunches rhubarb.....	644.72
286 $\frac{1}{2}$ bkts. spinach.....	95.20
115 $\frac{1}{2}$ bkts. squash	43.57
100 $\frac{1}{2}$ lbs. squash,	1.21
554 $\frac{1}{2}$ bkts. swiss chard, 16 qt. bkts.....	149.18
4,447 $\frac{1}{2}$ bkts. tomatoes, ripe.....	1,863.19
5 $\frac{1}{4}$ bkts. tomatoes, green.....	1.79
2,361 $\frac{1}{2}$ bkts. turnips.....	688.50
167 $\frac{1}{2}$ bkts. rutabagas	55.35
402 $\frac{1}{2}$ qts. blackberries.....	59.54
24 qts. gooseberries.....	2.40
487 lbs. sauerkraut.....	10.36
12 $\frac{1}{2}$ tons cow beets	123.70
33,600 tomato plants	100.80
2,000 lettuce plants	4.00
1,000 eggplants	4.00
	<u>\$10,696.66</u>

Summary

Farm.....	\$ 14,588.65
Dairy	65,333.81
Hennery.....	5,000.58
Piggery.....	5,300.31
Garden.....	10,696.66
	<u>\$100,920.01</u>

FLORIST'S REPORT

PLANTS AND BULBS GROWN FOR FLOWER BEDS AND CUT FLOWERS

Geraniums.....	3,800
Easter lilies.....	800
Hyacinths.....	500
Spirea.....	200
Calla lilies.....	136
Vincas, vine.....	400
Gladiolus.....	11,000
Dahlias.....	890
Snapdragon.....	7,800
Roses.....	1,341
Carnations.....	500
Ageranthus.....	700
Narcissus, double.....	2,000
Delphinium.....	1,300
Chrysanthemums.....	9,680
Sprengeri.....	154
Cannas.....	1,864
Ferns.....	428
Begonias.....	2,580
Begonias, Rex.....	116
Coleus.....	3,895
Abutilons.....	575
Salpiglossis.....	898
Verbenas.....	1,200
Vincas.....	2,800
Zinnias.....	2,000
Scabiosas.....	1,000
Helichrysums.....	400
Salvias.....	2,000
Petunias.....	5,000
Violas.....	100
Ageratums.....	1,000
Marigolds.....	1,400
Pansies.....	900
Heliotropes.....	125
Sweet alyssums.....	300

Total 69,782

CUT FLOWERS

Roses	16,823
Carnations	7,309
Scabiosa	33,164
Snapdragons	37,268
Delphiniums	4,421
Easter, lilies	3,469
Narcissus, double	838
Sprengeri Strings	2,130
Calla lilies	617
Fern leaves	979
Dahlias	14,635
Zinnias	14,491
Chrysanthemums, large	3,675
Chrysanthemums, medium	1,421
Chrysanthemums, sprays	4,232
Marigolds	88,952
Salpiglossis	494
Peonies,	102

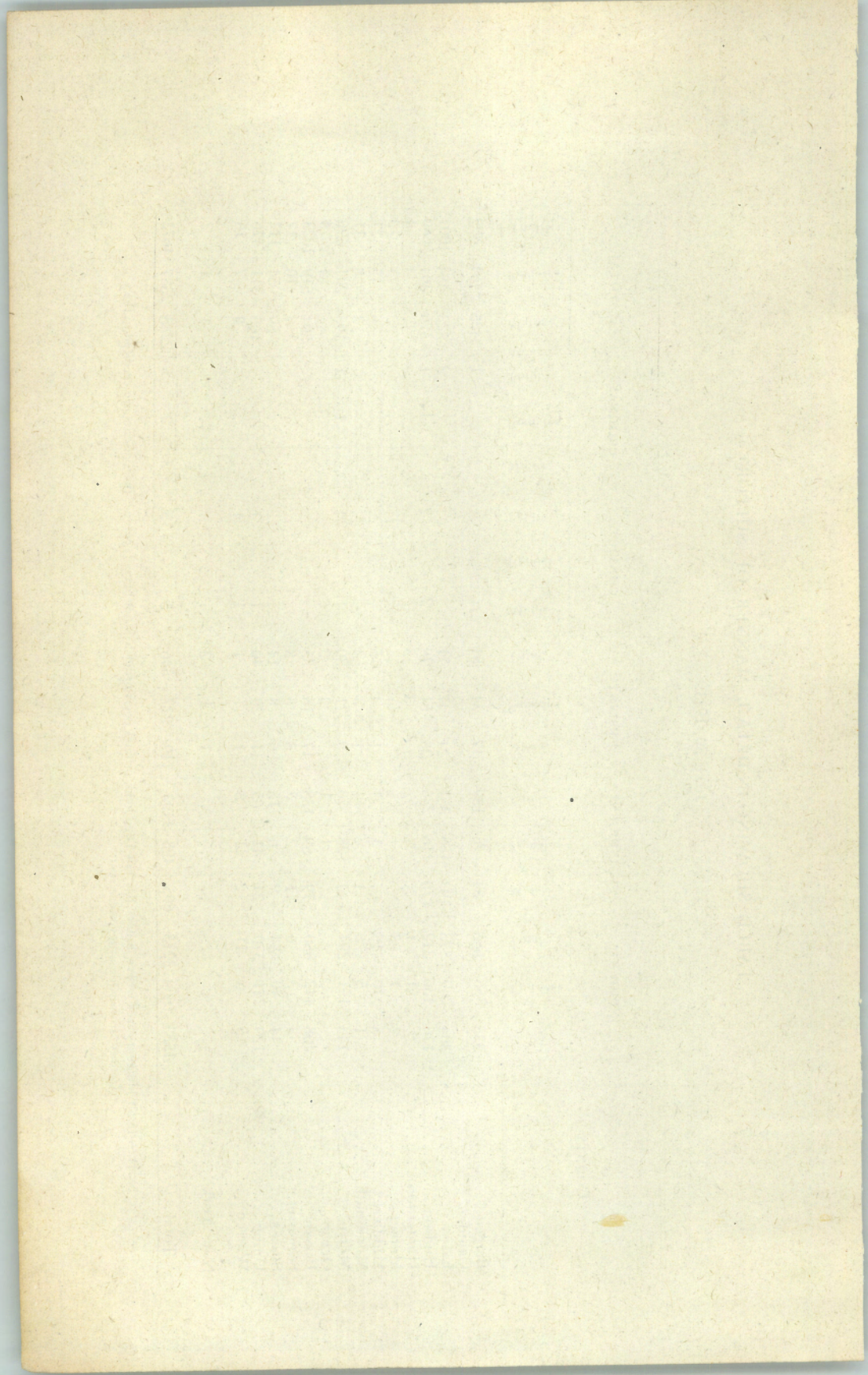
Total 235,020

TABLE SHOWING IN DETAIL MANNER OF SUPPORT

JUNE 30, 1933.

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.....	333	355	688	84	75	159	17	34	51	..	..	..	1	..	1	435	464	899
Camden.....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Essex.....	304	269	573	193	168	361	24	47	71	..	..	..	2	..	2	523	484	1007
Hudson.....	176	136	312	170	116	286	28	51	79	2	..	2	..	1	1	376	304	680
Hunterdon.....	..	1	1	..	..	..	..	3	3	..	..	..	..	..	..	..	4	4
Mercer.....	2	1	3	..	..	..	..	..	..	..	..	..	..	..	..	2	1	3
Middlesex.....	5	10	15	..	1	1	1	4	5	..	..	..	..	..	..	6	15	21
Monmouth.....	1	5	6	1	..	1	1	3	4	..	..	..	..	..	..	3	8	11
Morris.....	143	151	294	42	28	70	9	21	30	1	..	1	..	1	1	195	201	396
Ocean.....	..	..	..	..	1	1	..	3	3	..	..	..	..	..	..	..	4	4
Passaic.....	408	442	850	79	59	138	17	18	35	..	..	..	..	..	..	504	519	1023
Somerset.....	3	3	6	1	2	3	3	5	8	..	..	..	..	..	..	7	10	17
Sussex.....	44	40	84	9	6	15	6	8	14	..	..	..	..	..	..	59	54	113
Union.....	129	241	370	24	41	65	11	29	40	1	..	1	..	..	..	165	311	476
Warren.....	5	6	11	2	1	3	1	..	1	1	..	1	..	..	..	9	7	16
New York.....	..	..	..	..	..	..	1	1	2	..	..	..	..	..	..	1	1	2
Total.....	1553	1660	3213	605	498	1103	119	227	346	5	..	5	3	2	5	2285	2387	4672

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.]

