

ADMINISTRATION PART OF MAIN BUILDING

THIRTY-SECOND ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

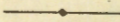
New Jersey State Hospital

AT

MORRIS PLAINS

*For the Year Ending October 31st*

1907



TRENTON, N. J. :

The John L. Murphy Publishing Company, Printers.

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MANAGERS AND OFFICERS

New Jersey State Hospital

MORRIS PLAINS

For the Year Ending October 31st

1907

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NEW JERSEY STATE HOSPITAL

## MANAGERS.

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PRESIDENT.

JOHN C. EISELE.....Newark.

VICE PRESIDENT.

JAMES M. BUCKLEY, D.D.....Morristown.

JOHN A. McBRIDE.....Deckertown.

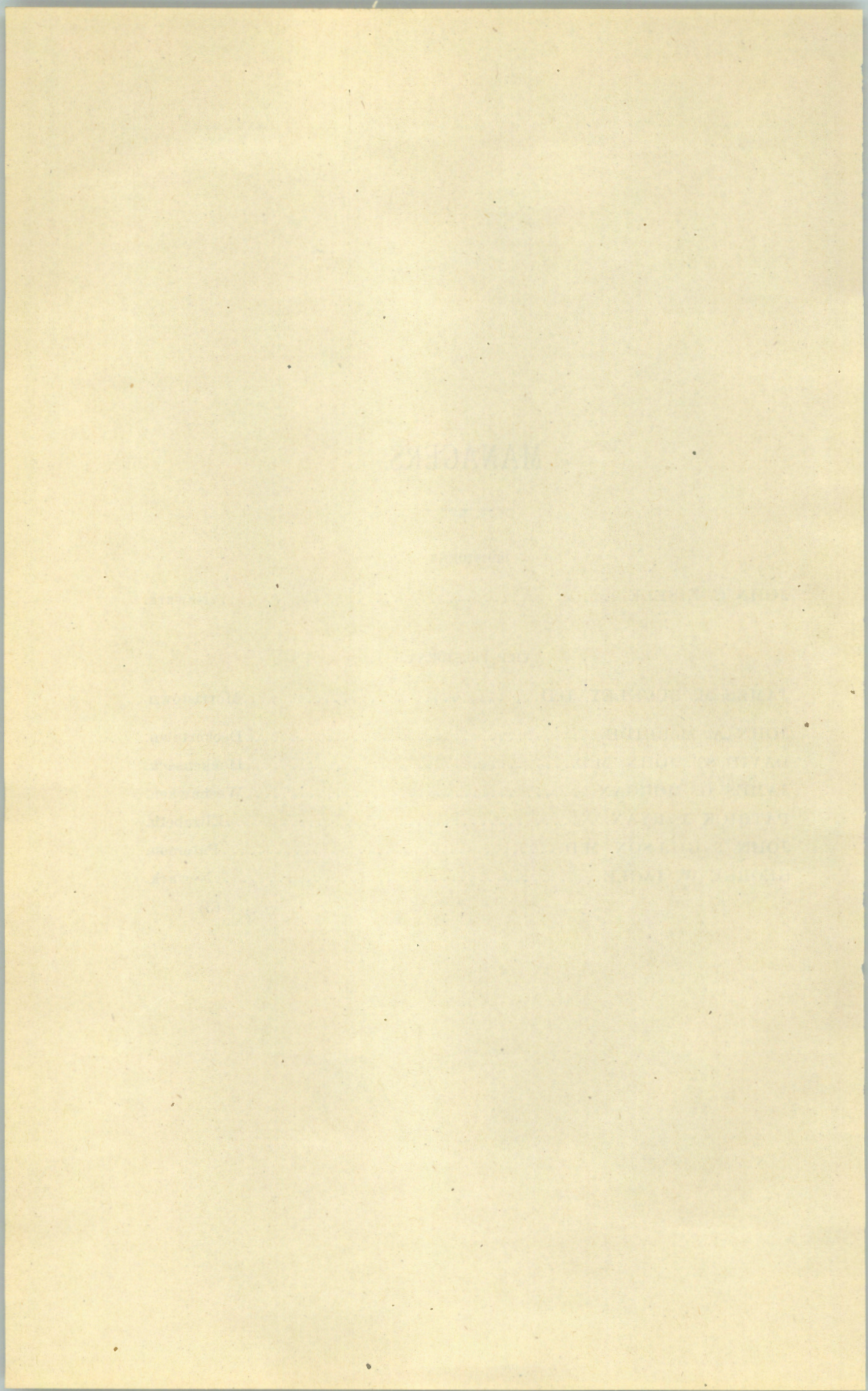
DAVID ST. JOHN, M.D.....Hackensack.

JAMES G. MORGAN.....Weehawken.

PATRICK J. RYAN.....Elizabeth.

JOHN T. GILLSON, M.D.....Paterson.

GEORGE W. JAGLE.....Newark.



## OFFICERS.

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### MEDICAL DEPARTMENT.

BRITTON D. EVANS, M.D..... Medical Director.  
PETER S. MALLON, M.D..... First Assistant Physician.  
H. AUSTIN COSSITT, M.D.... Second Assistant Physician and Pathologist.  
FREDERICK C. HORSFORD, M.D..... Third Assistant Physician.  
ALEXANDER J. CARROLL, M.D..... Fourth Assistant Physician.  
E. MOORE FISHER, M.D..... Fifth Assistant Physician.  
LOUIS K. HENSCHER, M.D..... Sixth Assistant Physician.

L. L. MIAL, M.D.,

Visiting and Consulting Member on Diseases of the Eye, Ear, Nose and Throat.

### BUSINESS DEPARTMENT.

MOSES K. EVERITT..... Warden.  
HARRISON P. LINDABERRY..... Treasurer.  
HARRY A. VAN GILDER..... Secretary.



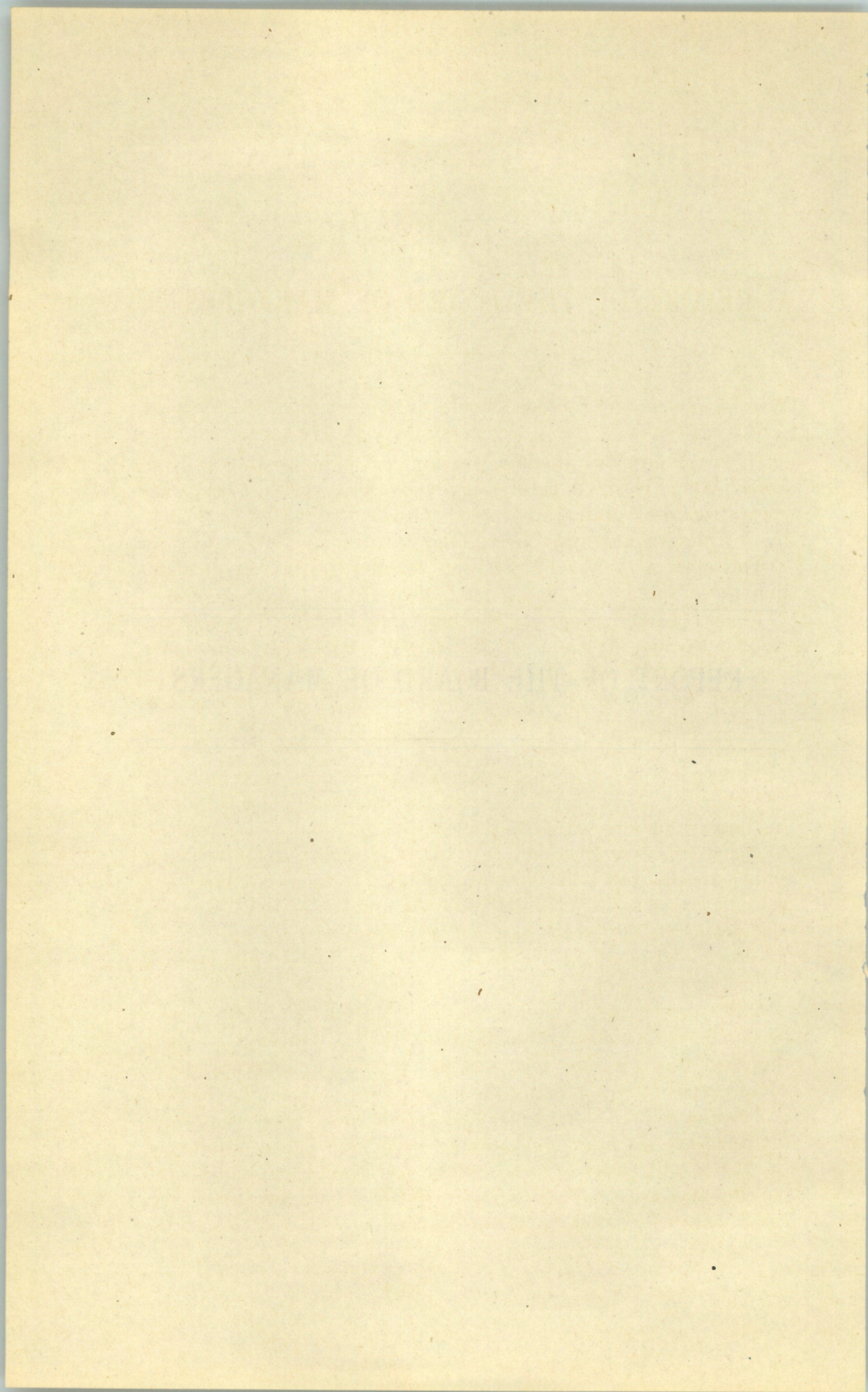
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REPORT OF THE BOARD OF MANAGERS.

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## REPORT OF THE BOARD OF MANAGERS.

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*To His Excellency Edward C. Stokes, Governor of the State of New Jersey:*

In compliance with the law, the Board of Managers of the New Jersey State Hospital at Morris Plains respectfully submits its report for the hospital year ending October 31st, 1907, which is the thirty-second annual report of the institution.

The Medical Director's statistics covered by this report show that the hospital year closed with 1,824 patients in the house—917 men and 907 women. The highest census for the year was 1,832. Because of deaths, discharges and admissions, the number in the Hospital changes from day to day, and, while at the close of the year there were 1,824 patients remaining in the Hospital, the records show that 2,196 persons were under treatment during a part or the whole of the year.

During the past year there were 417 admissions—229 men and 188 women. Notwithstanding that the number of men admitted in the year now closed is considerably larger than of women, the comparison between the number of men and women in the Hospital emphasizes the fact that, like the population of the State, there is a permanent approximate equality in the number of the two sexes. The death rate during the past year was about 8.06 per cent. of the whole population of the Hospital, the number being 177—90 men and 87 women.

Other particulars, some highly significant and instructive, may be found in the elaborate report of the Medical Director. This is the case, also, with the report of the Warden, whose department comprehends more especially the material needs of the institution.

The Record Book of regular and special meetings of the Board of Managers shows a large average attendance. The minutes of the Board will reveal to those entitled to inspect them that all important measures and all expenditures of money have been canvassed carefully before being voted upon, and that the laws of the

State have been scrupulously complied with in every case where the co-operation of the Legislature and the counties have made it possible.

As on former occasions, we find it necessary to draw the attention of your Excellency to two facts that constrain our action. These are that the Hospital, under the present statutory provisions, cannot command an amount of money adequate to secure the benefits of purchasing supplies for cash, and that some of the counties frequently delay for a considerable time the payment of the money due for the support of the patients who have been legally committed to the Hospital from the said counties.

The State Hospitals are required by law to purchase supplies for cash. This method is desirable by reason of the discounts which may generally be secured on cash transactions. To comply with the law, and also to secure this discount, which amounts to a substantial sum in the course of a year, it is necessary that this Board have available funds.

One source of income from which the obligations of the institution are met are the moneys received from the counties for care of indigent patients. In many instances these moneys are not only not paid promptly when due, but payment is delayed to suit the convenience of the county authorities, and the institution is deprived of the benefit of these funds in discounting bills.

As a remedy it is suggested that an interest charge of, say 10 per cent., be imposed on all accounts due the institution not paid within ten days after the same shall become due and payable and an account thereof rendered, and that suitable legislation to secure this end be enacted.

The routine business, which in the end is the most important entrusted to the care of the Managers, and by them to the Medical Director and the Warden, and in turn to the various officers and employes of the Hospital, we have given our closest attention. The reports made to the Board by the chief officers have been carefully considered, and are herewith presented for your consideration.

## THE COUNTY ASYLUMS.

We beg leave to suggest to your Excellency the propriety and wisdom of making the business of visiting and inquiring into the condition and management of the county institutions part of the duty of the Commissioner of Charities and Corrections. We do this not because of any unwillingness to comply with the instructions or to bear the responsibilities imposed by the Legislature, but because from the nature of the case our inspections cannot be so thorough as to be of use to the institutions, or the report of such examinations of much value in aiding the Governor and Legislature in forming an estimate of the condition and needs of these institutions.

To take care of and closely inspect this great institution with a daily average of about 1,824 patients and about 400 employes; to be at the call of the chief officers in any emergency, by day or night; to attend the monthly and special meetings of the Board; to make other visits, and to be ready at all times to investigate any complaint by patients able to formulate a complaint or inattention or neglect of duty on the part of the attendants, occupies in the course of the year much time—not, however, more than the Managers are willing to devote, with no other compensation than the consciousness of a duty faithfully done to the State and to the most unfortunate class of human beings. But the necessity of investigating the county institutions seems outside of the normal responsibility of the Managers. A formal visit once a year, even if made as thoroughly as time will allow, the fact that the Managers have no power whatever to conduct a thorough investigation or order what shall be done in any given case, have made it increasingly obvious that the inspection of county institutions should be made one of the duties of the Commissioner of Charities and Corrections, and that he should make a detailed and impartial report to the Governor, and, through him, to the Legislature.

It should be borne in mind that the county institutions draw from the State Treasury the same amount per capita for the support of their patients as do the State Hospitals. They are therefore under the same obligations from a legal standpoint and a sociological view as are the State Hospitals, and should be sub-

jected to the same order of inspections and be required to keep up a high standard of management.

An inquiry into the amount of money drawn from the State Treasury for the support of patients in county institutions will make it clear that such institutions should be subjected to rigid and frequent inspections by State officials, and that the State should exercise a more vigilant oversight in the manner of their administration and what is done in return for the financial support they receive.

PASSAIC COUNTY HOSPITAL FOR THE INSANE.

The Board of Managers, through a committee of its members, visited the Passaic County Almshouse. The great majority of all the insane in that county have been sent to the State Hospital, but for a long time such as can be adequately cared for in the almshouse have been placed there under a contract between the authorities of Passaic county and the city of Paterson. Our committee found, upon close inspection, the health conditions to be good; the patients were cleanly and neatly dressed, and under such conditions as prevailed it is believed that the personal care and hygienic treatment in the institution is up to the average of its class. At the time of our committee's visit there were twenty-eight female and ten male inmates. This class consists of persons supposed to be incurable and harmless, requiring little restraint and making comparatively little trouble.

ESSEX COUNTY HOSPITAL FOR THE INSANE.

The provisions for the insane in Essex county we found worthy of our commendation. In this county the insane are principally cared for in the old hospital on South Orange avenue, Newark, and at the newer hospital at Overbrook, about eight miles from the city of Newark. The care of all the insane of the county is under one management. The whole number of patients at the time of our visit in the older or parent hospital on South Orange avenue, Newark, added to those at Overbrook, where the new institution is in process of construction, makes a total of 1,251 insane persons being cared for by the county of Essex.

Upon the completion of the new buildings at Overbrook, all the insane of Essex county will be transferred to and cared for in the new institution. The group of buildings at Overbrook, now being completed, give evidence that Essex county is giving much care and liberally and generously providing for its insane population.

#### HUDSON COUNTY HOSPITAL FOR THE INSANE.

We are pleased to report much improvement in the Hudson County Asylum. In former years we were obliged to criticise many of the conditions we found. The Superintendent, Dr. George W. King, has been, in our judgment, at no time blame-worthy; he has been hampered for want of proper supplies and sufficient authority, and by what may be properly called outside interference with the administration. For some time past earnest attention seems to have been given by the managing authorities, and the good results appear on every hand. There is no reason why Hudson county should not do as well as any other county, proportionately to its population and means and to the number of patients which the county must under the law take into its custody and care. As reported to us, it has 348 women and 263 men, a total of 611 patients. Its working force consists of the Medical Superintendent and one Assistant Physician, a Warden, a Matron, 2 cooks, 16 male attendants, 17 female attendants, 3 engineers, 1 foreman, 1 farmer, 1 laundryman, 1 laundress and 1 waitress. It is not to be supposed that it has as yet reached the ideal condition, but when true progress once begins it has a way of perpetuating itself. The citizens of Hudson county should take especial interest in this institution and encourage all such progressive methods as are calculated to make it second to no county hospital for the insane in the State. It is a charity worthy of such interest.

The institution in Hudson county, like most others of its kind, suffers from overcrowding, but the county authorities have already taken steps to relieve this congestion by repairing and occupying a building adjoining their hospital for the insane.

## NEEDS OF THE STATE HOSPITAL AT MORRIS PLAINS.

The Managers deem it their duty to ask the Legislature for what the institution really needs; nothing *more*, but nothing *less*. A pernicious error exists in the minds of a large part of the population of the State, which is that the indigent insane should be treated as inexpensively as *possible*. It is supposed by many that once insane a person never wholly recovers; that the insane all need severe restraint; that they cannot appreciate the comforts of life, and that many of them are insensible to what would produce discomfort, and even intense pain, to persons in the possession of reason. While a part of the insane population answer to that description, they are still human beings, and whether the State or the individual treats human beings carelessly or brutally, those who do so are themselves demoralized by the process.

Great is the difference between having members of one's family *insane* or having them sick with ordinary disease. The consequence is that in the former case many who have income enough to support their families if receiving the contributions of all in work or earnings, would be pauperized by having one of the members insane if they were compelled to care for him or her *at home*. Their contributions to the family would be lost as well as the time and energy necessary to restrain and care for them. To send such persons to a gloomy, wretched place, such as existed in this State and in most of the States of the Union sixty years ago, would be barbarous.

It is also a grievous error to assume that persons once insane can *never* recover. Such a theory, if accepted, would have people hurled from positions high in State and church, positions requiring the greatest intellect or the most complete control of one's faculties, for in the aggregate a large number of positions of such a nature are well filled by persons who, from accidents or the effects of various diseases, have been temporarily deranged in mind.

The system of classification employed in this Hospital, when it is not overcrowded, meets these difficulties, and by rewarding the insane with better quarters as they improve, leads them to take astonishing pains to control themselves.

During the past year 109 patients have been discharged as *cured*, 58 men and 51 women; 78 patients were discharged as

*improved*, 30 men and 48 women, and 6 men and 2 women were discharged as unimproved. Those who are discharged improved frequently recover, and some discharged cured and others discharged improved return. The proportion of these your Excellency can ascertain by consulting the statistics appended to this report.

We are well aware that if any accident occurs in an institution of this kind the Managers are liable to be severely criticised, and they should be when it can be demonstrated that, having the means, they refused to apply them to the prevention of any cause of accident or failed to provide means for limiting the effect of any probable calamity, but they are not to be condemned if year after year they ask for what is *necessary* and the Legislature declines to grant it. This Board, long ago, determined not to ask for *many* things in the hope of getting *some*. We therefore direct your attention to what we need.

The Managers of this Hospital desire to present the following needs of the institution. These items for which we request appropriations and to which we direct your attention and ask your approval, have been given careful consideration. They are set forth in detail in the attached reports of the Medical Director and the Warden:

Seven (7) fire-escapes, such as, in the event of fire, will reasonably guarantee the safety of persons deprived of their reason; the estimated cost of these is \$1,250 each, making for this item a total of .....	\$8,750 00
Water main and fire hydrants .....	1,500 00
Fire alarm system .....	5,000 00
Small plant for further employment of patients .....	2,500 00
Plumbing in main building .....	6,000 00
Nurses' cottage for men .....	35,000 00
Storehouse .....	15,000 00
Cold storage plant .....	15,000 00
Clothing for State indigent patients, as per deficit shown in the Warden's report .....	20,617 52
Dairy stables .....	8,000 00
Kitchen .....	28,000 00

Fire-escapes should be provided for the whole institution, and these must be of a special type, for it is obvious that such as are used in hotels and institutions containing persons capable of self-control would not go far toward providing safety in a hospital for the insane.

Almost equal is the need for a fire alarm system. More immediate needs have prevented our appealing for funds to equip the buildings with these essentials of safety. We are compelled to officially impress upon your Excellency that unless additional protection against fire is speedily made, a holocaust with its calamitous results is clearly a possibility.

We have in this report presented to your Excellency in plain terms the conditions of this Hospital, its needs and our reasons for appealing to you, and through you to the Legislature, for appropriations necessary for the further equipment of this great public charitable institution.

We have given these matters much thought and attention and we feel that our responsibility relating to them ceases after they have been officially so presented to you and the Legislature.

Respectfully submitted,

JOHN C. EISELE, *President.*

JAMES M. BUCKLEY, *Vice President.*

JOHN A. McBRIDE,

DAVID ST. JOHN,

JAMES G. MORGAN,

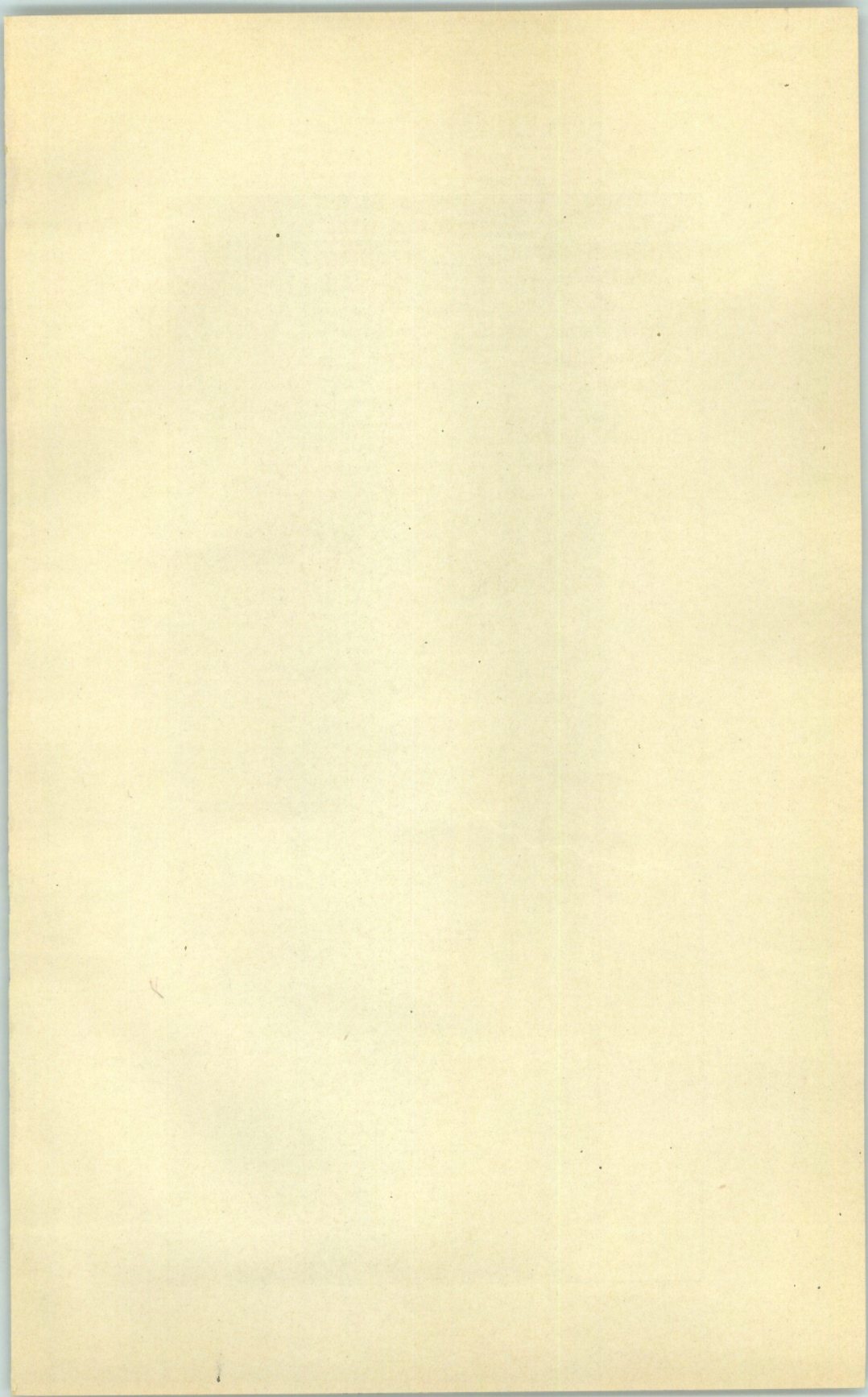
PATRICK J. RYAN,

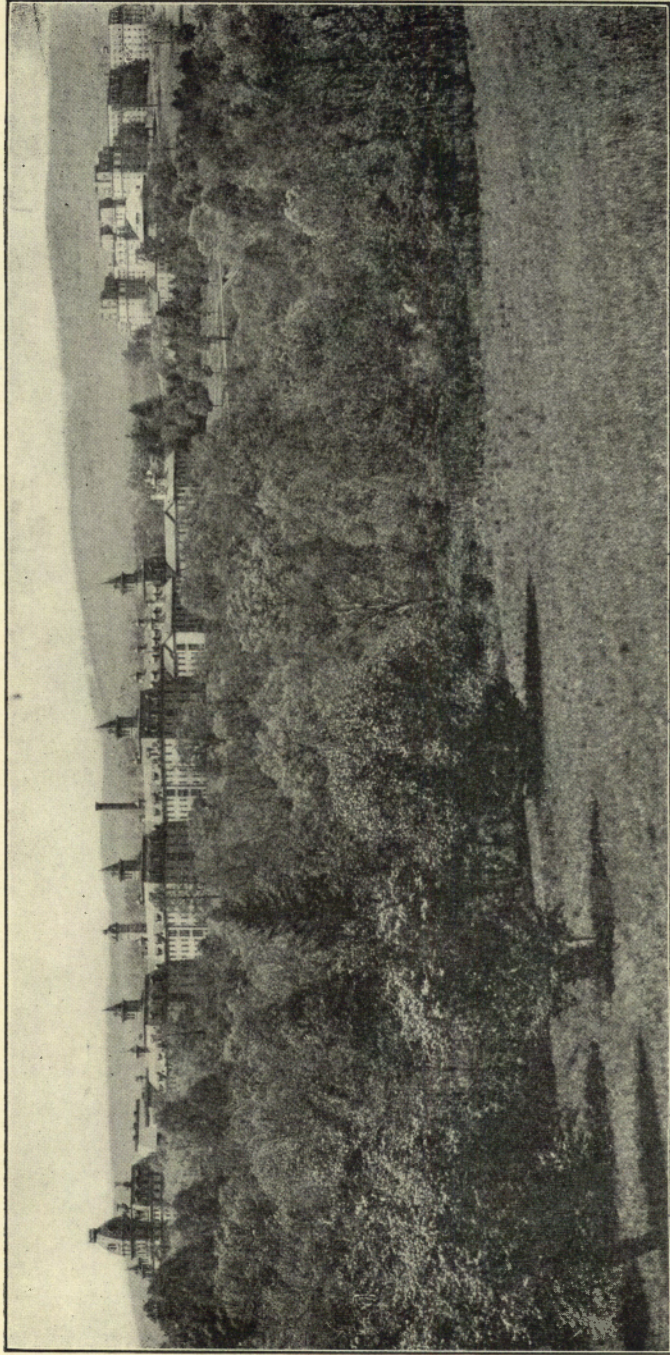
JOHN T. GILLSON,

GEORGE W. JAGLE,

*Managers.*

October 31st, 1907.





VIEW OF HOSPITAL BUILDINGS

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REPORT OF THE MEDICAL DIRECTOR.

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REPORT OF THE MEDICAL DIRECTOR

## REPORT OF THE MEDICAL DIRECTOR.

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*To the Board of Managers:*

GENTLEMEN—The thirty-second annual report of the Medical Department of the New Jersey State Hospital at Morris Plains is herewith respectfully submitted. This report covers the hospital year beginning November 1st, 1906, and ending October 31st, 1907.

The work of this department has been progressive and has, with the facilities at our command, given satisfactory results. We are subjected to some conditions which, from a modern standpoint, are not ideal. The increase in population has been rapid and has forced upon us the necessity of crowding together patients to the point of ignoring the acknowledged principles of classification. The judicious grouping or classifying of patients is admitted to be of the highest importance. There should be some statutory limitation to the capacity of our State Hospitals; this would protect the best interests of the sick and serve as an index to the public and our law-making bodies as to the nature of the problem of caring for the increasing number of insane persons of the State.

Except some limit to the capacity of the State Hospitals for the Insane be fixed by law, how can proper management be assured? The Commissioner of Charities could inspect, determine and advise the Governor and Legislature with definiteness as to such matters.

To facilitate a more ready comprehension of some of the data given in the tabulated part of this report, the following resumé and summary is presented:

At the close of the year the number of patients under our care was 1,824, of whom 917 were men and 907 women. The admissions for the year were 417; of these 229 were men and 188 women. Those admitted for the first time numbered 368, the same as was recorded last year. The total is thirteen less than during the year covered by the report of 1906, and twenty-seven

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more than in 1905. The number of admissions forcefully emphasizes the State's need for building a new hospital for the insane.

On October 24th and on October 26th there were under treatment 1,832 patients, the highest census of the year. The 1,824 patients remaining at the end of the year were classified as follows: Indigent, 1,558; private or pay patients, 168; criminals, 37, and convicts, 61. There has been a falling off in the number of pay patients and a corresponding increase in the number maintained at public expense. Of the 417 admissions, 196 are classed as county indigent, 145 as State indigent and 76 as private.

According to Table V., which sets forth the nativity of those admitted, 173 of the patients admitted during the year were of foreign birth, and this again leads me to lay stress on the advisability and demand for some legislation for reducing this increasing burden upon our taxpayers.

The table devoted to the form of mental disease of those admitted shows that in the class "Acute Mania" there were 109; of these forty-three were of toxic origin. The toxic insanities were more common among men than women, the proportion being thirty-one to twelve. Forty-two men and two women were afflicted with Paretic Dementia, a progressive and incurable form of disease, confined in the large majority of cases to men. Among both men and women the insanity of adolescence (*Dementia Præcox*) was prominent. Forty-seven men and twenty-seven women were found to be suffering from this mental disorder. In 1900, with 323 admissions, only fifteen patients were diagnosed as having adolescent insanity.

Arterio-sclerosis was found to be a complication in forty-three patients; chronic nephritis in twenty-two and organic heart disease in twenty-seven.

The most common "alleged exciting cause" of mental disease given in the certificates for admission was "intemperance and other excesses." In 11.9 per cent. of the admissions these were given as the chief factors.

With regard to heredity as a cause of mental disease, we found that seventy-seven, or about 18 per cent., of these patients gave a direct history of insanity in the family. This is a considerably larger percentage than was recorded in last year's report, doubtless due to more careful inquiry, and bears out a well-founded convic-

tion that heredity is the most important predisposing cause of insanity.

One hundred and seventy-seven patients died during the year—90 men and 87 women. The death rate for the year was 8.06 per cent., and is computed upon the total number under treatment, which was 2,196. Ninety-two and three-tenths per cent. of the deaths occurred in persons more than fifty years old, and 36.7 per cent. in patients more than sixty years of age. Twenty-four per cent. of the deaths was among patients suffering from the dementia of old age, and 29.3 per cent. among patients suffering from dementia other than the senile and parietic types, but in persons of advanced years. Parietic dementia caused 15.35 per cent. of the deaths. This disease was commonly terminated by exhaustion.

Associated with mental disease in causing death, tuberculosis was presented in 15.3 per cent., chronic nephritis in 22 per cent., and some form of cardio-vascular inflammation in 17.4 per cent. Pneumonia as a terminal infection was the immediate cause of death in 15.2 per cent. of the persons who died during the year.

Careful observation shows an increase in the number of deaths from tubercular disease, and a review of our reports for a number of years impels me to again bring to your attention the need for a suitably equipped isolation building where tubercular and other forms of infectious diseases may be cared for with safety.

In the annual report of 1902 the number of deaths due to tubercular diseases was given as four, a percentage for that year of 2.9. From 1902 up to and including 1907 the progressive increase is clearly shown by the following figures: In 1902 there were four deaths; in 1903, twelve; in 1904, fourteen; in 1905, sixteen; in 1906, twenty-one, and in 1907, twenty-seven. The records this year show that a percentage of 15.3 of the deaths in the Hospital were caused by tubercular disease. This increase in the percentage due to tuberculosis, in face of the knowledge of its known infectious character, at once presents to us our responsibility in the matter of proper isolation.

The total number of discharges for the year was 195—94 men and 101 women. Of these, 58 men and 51 women were discharged as recovered; 30 men and 48 women were discharged as improved; 6 men and 2 women, unimproved. The percentage of recoveries, computed on the number admitted during the year, is 26.13.

## CLASSIFICATION OF MENTAL DISEASES.

Of late years much has been written and said about the classification of mental disorders. Nearly every writer seems to feel it incumbent upon him to get up a new classification, or materially modify someone else's. Little, if any, good has resulted from this popular mania for new classifications.

In the preparation of the tabulated portion of this report I have deemed it wise to adhere to the classification which has been used in the Hospital for more than ten years. It is not weighed down with unmeaning complexities and technicalities, and so simplifies our statistics than an extensive text is made unnecessary.

## IDIOTIC AND IMBECILIC CHILDREN.

The steadily increasing number of children coming into the care and custody of this Hospital is a matter of much concern. With our present facilities we are unable to properly classify and segregate them so that due regard may be given to their individual claims and the comfort and well being of other patients. These children necessarily have to be assigned to such locations in the Hospital as the character of our equipment and accommodations permit.

Without desire to avoid the responsibility incident to caring for this class of patients, I advise strongly against making hospitals for the insane the custodial homes of children under sixteen years of age. A law should be enacted making such a course impossible. There are in this Hospital thirteen children, eight of whom are epileptics. These epileptic children—boys and girls of about seven years—are cared for on the same wards and under the same conditions as are the epileptic women. They are frequently a source of annoyance and irritation to the adult patients, and their presence among persons of pronounced irresponsibility often gives rise to sudden outbursts of violence and fury.

This is an unsatisfactory mingling of children and adults. The difference in their ages, the very nature of their mental disabilities, unfit them from the standpoint of science, discipline and the principles of classification to be grouped together. The presence of

idiotic and imbecilic children in the wards of a hospital for the care and treatment of insane persons is unwise in principle and is always a source of worry, anxiety and danger.

A State with the population and wealth of New Jersey should have an institution under its absolute control in which idiotic and imbecilic children can be cared for, treated, and, when of sufficient mentality, be given a course of teaching or training such as is given in well-regulated training schools for feeble-minded or defective children. This State has no such institution; every other progressive State in the Union has. There is at Vineland a Home for Feeble-Minded Women. No boys are received and girls under sixteen years of age are not admitted to this institution. There is a well-regulated and ably conducted institution for feeble-minded children at Vineland, but it is known as a "training school," and it is not under State control. This institution receives indigent children, but reserves the right to say whether the children who apply for admission are acceptable or not. The management of this Vineland institution naturally prefers to admit persons who are capable of being improved in mind by careful training. A low grade of imbeciles and idiots are clearly not desirable and are rejected.

In the last report of the Department of Charities and Corrections, it was recorded that three boys were being maintained in the Pennsylvania Training School for Feeble-Minded, at Media, Pa., at the expense of the State of New Jersey.

Under the laws of New Jersey (Chapter 69, Article 47, Laws of 1893), the State Hospitals are not compelled to receive idiots. The proposition is, then, clearly placed before us, What is to become of these indigent children who are so defective in mind that they are not acceptable to the management of the training school at Vineland, are too young to be admitted to the Institution for Feeble-Minded Women at Vineland and are rejected by the State Hospitals?

This is not an unsolvable problem. It is clearly evident that the State should provide an institution under separate and distinct management for the care of this class of defectives, or it should erect cottages upon the grounds of the Home for Feeble-Minded Women or at the Epileptic Village in which to house and care for them. My reason for mentioning the Epileptic Village is based

upon the fact that a large percentage of the imbecilic and idiotic children are epileptics.

The State of New Jersey, like other States, is responsible for the care and maintenance of its indigent defectives. I place before you this problem somewhat in detail, so that in this official report the matter, with all its responsibilities, will come before the Governor and the Legislature.

#### CONVICT AND CRIMINAL INSANE.

Again, I desire to make official record relative to the pernicious effect of housing the convict and criminal insane in the State Hospitals. I have in former reports dealt with this subject at length. Everyone who has made a studious or intelligent inquiry into this question has become convinced that the convict insane should be segregated. I desire to suggest that you recommend to the Governor and the Legislature the erection of a suitable building nearby or on the State Prison grounds, to which this class of patients may be transferred and cared for. Their removal from this Hospital would relieve the congestion here and promote the general welfare, discipline and safety of this institution.

#### TRAINING SCHOOL FOR NURSES.

The Training School for Nurses entered upon its thirteenth session October 24th, 1906. Lectures were delivered regularly throughout the session of nearly nine months. The schedule of lectures published in the report for 1906 was followed. Thirteen candidates for graduation, all women, passed successful examinations and were awarded diplomas.

One hundred and forty-five persons have graduated from this school since its organization in 1894. In former reports I have called your attention to the valuable results arising out of the maintenance of the Training School. In the evolution of society the faithful and efficient nurse of the sick has become an important factor. An ignorant nurse cannot be expected to render an intelligent service at the bedside of the sick, nor can training school instruction make an unreliable person a faithful and reliable nurse.

Trustworthiness, kindheartedness and sincerity of purpose form the basis from which the reliable and faithful nurse evolves. Education and training rarely ever transform indifferent and inhumane persons into conscientious and faithful nurses. It is fortunate for our public charities that among the large number of applicants we find a fair percentage of persons who desire to render a faithful service and make more comfortable and happy the sick with whom they come in contact.

The schedule of Training School lectures for 1907-1908 is herewith submitted to you:

## LECTURE SCHEDULE, 1907-1908.

## JUNIOR CLASS.

October 30th,	Dr. Evans,	Ethics of Nursing.
November 1st,	Dr. Mallon,	Symptomatology.
November 6th,	Dr. Cossitt,	Practice of Medicine.
November 8th,	Dr. Horsford,	Anatomy.
November 13th,	Dr. Carroll,	Physics.
November 15th,	Dr. Fisher,	Hygiene.
November 20th,	Dr. Henschel,	Physiology.
November 22d,	Dr. Evans,	Insanity.
November 27th,	Dr. Mallon,	Symptomatology.
November 29th,	Dr. Cossitt,	Fevers.
December 4th,	Dr. Horsford,	Anatomy.
December 6th,	Dr. Carroll,	Chemistry.
December 11th,	Dr. Fisher,	Hygiene.
December 13th,	Dr. Henschel,	Physiology.
December 18th,	Dr. Evans,	Insanity.
December 20th,	Dr. Mallon,	Materia Medica.
January 8th,	Dr. Cossitt,	Eruptive Fevers.
January 10th,	Dr. Horsford,	Anatomy.
January 15th,	Dr. Carroll,	Chemistry.
January 17th,	Dr. Fisher,	Hygiene.
January 22d,	Dr. Henschel,	Physiology.
January 24th,	Dr. Evans,	Insanity.
January 29th,	Dr. Mallon,	Materia Medica.
January 31st,	Dr. Cossitt,	Practice of Medicine.
February 5th,	Dr. Horsford,	Anatomy.
February 7th,	Dr. Carroll,	Urinalysis.
February 12th,	Dr. Fisher,	Hygiene.
February 14th,	Dr. Henschel,	Physiology.
February 19th,	Dr. Evans,	Insanity.
February 21st,	Dr. Mallon,	Therapeutics.
February 26th,	Dr. Cossitt,	Practice of Medicine.
February 28th,	Dr. Horsford,	Anatomy.
March 4th,	Dr. Carroll,	Urinalysis.
March 6th,	Dr. Fisher,	Hygiene.
March 11th,	Dr. Henschel,	Physiology.

March	13th,	Dr. Cossitt,	Practice of Medicine.
March	18th,	Dr. Horsford,	Anatomy.
March	20th,	Dr. Fisher,	Hydrotherapy.
March	25th,	Dr. Mallon,	Quiz.
March	27th,	Dr. Cossitt,	Quiz.
April	1st,	Dr. Horsford,	Quiz.
April	3d,	Dr. Carroll,	Quiz.
April	8th,	Dr. Fisher,	Quiz.
April	10th,	Dr. Henschel,	Quiz.
April	15th,	Dr. Evans,	Quiz.
April	17th,	Dr. Mallon,	Quiz.
April	22d,	Dr. Cossitt,	Quiz.
April	24th,	Dr. Horsford,	Quiz.
April	28th,	Dr. Carroll,	Quiz.
May	1st,	Dr. Fisher,	Quiz.
May	6th,	Dr. Henschel,	Quiz.
May	8th,	Dr. Evans,	Quiz.
May	13th,	Dr. Mallon,	Examination.
May	15th,	Dr. Cossitt,	Examination.
May	20th,	Dr. Horsford,	Examination.
May	22d,	Dr. Carroll,	Examination.
May	27th,	Dr. Fisher,	Examination.
May	29th,	Dr. Henschel,	Examination.
June	4th,	Dr. Evans,	Examination.

July 14th, 1908, Commencement.

#### LECTURE SCHEDULE, 1907-1908.

##### SENIOR CLASS.

October	30th,	Dr. Evans,	Ethics of Nursing.
November	1st,	Dr. Mallon,	Symptomatology.
November	6th,	Dr. Cossitt,	Practice of Medicine.
November	8th,	Dr. Horsford,	Surgery.
November	13th,	Dr. Carroll,	Inflammation.
November	15th,	Dr. Fisher,	Hydrotherapy.
November	20th,	Dr. Henschel,	Dietetics.
November	22d,	Dr. Evans,	Insanity.
November	27th,	Dr. Mallon,	Symptomatology.
November	29th,	Dr. Cossitt,	Practice of Medicine.
December	4th,	Dr. Horsford,	Fevers.
December	6th,	Dr. Carroll,	Pathology.
December	11th,	Dr. Fisher,	Obstetrics.
December	13th,	Dr. Henschel,	Dietetics.
December	18th,	Dr. Evans,	Insanity.
December	20th,	Dr. Mallon,	Materia Medica.
January	8th,	Dr. Cossitt,	Practice of Medicine.
January	10th,	Dr. Horsford,	Anatomy.
January	15th,	Dr. Carroll,	Bacteriology.
January	17th,	Dr. Fisher,	Obstetrics.
January	22d,	Dr. Henschel,	Dietetics.

January	24th,	Dr. Evans,	Insanity.
January	29th,	Dr. Mallon,	Materia Medica.
January	31st,	Dr. Cossitt,	Practice of Medicine.
February	5th,	Dr. Horsford,	Anesthesia.
February	7th,	Dr. Carroll,	Toxicology.
February	12th,	Dr. Fisher,	Obstetrics.
February	14th,	Dr. Henschel,	Dietetics.
February	19th,	Dr. Evans,	Insanity.
February	21st,	Dr. Mallon,	Therapeutics.
February	26th,	Dr. Cossitt,	Infectious Diseases.
February	28th,	Dr. Horsford,	Surgery; Emergencies.
March	4th,	Dr. Carroll,	Toxicology.
March	6th,	Dr. Fisher,	Gynecology.
March	11th,	Dr. Henschel,	Dietetics.
March	13th,	Dr. Cossitt,	Practice of Medicine.
March	18th,	Dr. Horsford,	Surgery.
March	20th,	Dr. Fisher,	Genito-Urinary Diseases.
March	25th,	Dr. Mallon,	Quiz.
March	27th,	Dr. Cossitt,	Quiz.
April	1st,	Dr. Horsford,	Quiz.
April	3d,	Dr. Carroll,	Quiz.
April	8th,	Dr. Fisher,	Quiz.
April	10th,	Dr. Henschel,	Quiz.
April	15th,	Dr. Evans,	Quiz.
April	19th,	Dr. Mallon,	Quiz.
April	22d,	Dr. Cossitt,	Quiz.
April	24th,	Dr. Horsford,	Quiz.
April	28th,	Dr. Carroll,	Quiz.
May	1st,	Dr. Fisher,	Quiz.
May	6th,	Dr. Henschel,	Quiz.
May	8th,	Dr. Evans,	Quiz.
May	13th,	Dr. Mallon,	Examination.
May	15th,	Dr. Cossitt,	Examination.
May	20th,	Dr. Horsford,	Examination.
May	22d,	Dr. Carroll,	Examination.
May	27th,	Dr. Fisher,	Examination.
May	29th,	Dr. Henschel,	Examination.
June	4th,	Dr. Evans,	Examination.

July 14th, 1908, Commencement.

#### GENERAL OUTLINE OF LECTURES, 1907-1908.

##### JUNIOR CLASS.

DR. BRITTON D. EVANS.

October	30th—	Ethics of Nursing.
November	22d—	Classification of Mental Diseases.
December	18th—	Management of Acute Insanity.
January	24th—	Relation of Age and Occupation to Mental Disease.
February	19th—	Nursing and Ward Work.

## DR. PETER S. MALLON.

November 1st—Classification of Symptoms of Disease.  
 November 27th—Symptomatology.  
 December 20th—Forms and Methods of Administering Medicines.  
 January 29th—Systemic Remedies.  
 February 21st—Therapeutics.

## DR. H. AUSTIN COSSITT.

November 6th—Practice of Medicine.  
 November 29th—Fever.  
 January 8th—Eruptive Fevers.  
 January 31st—Diseases of the Respiratory System.  
 February 26th—Diseases of the Digestive System.  
 March 13th—Practice of Medicine.

## DR. FREDERICK C. HORSFORD.

November 8th—Bones, Joints, Muscles, Fasciae and Skin.  
 December 4th—Thoracic Viscera.  
 January 10th—Abdominal Viscera.  
 February 5th—Arteries, Veins and Lymphatics.  
 February 28th—Brain; Nervous System.  
 March 18th—Organs of Special Sense.

## DR. ALEXANDER J. CARROLL.

November 13th—States of Matter and Laws Governing Them.  
 December 6th—Mechanical Mixtures and Chemical Compounds.  
 January 15th—Oxygen, Hydrogen, Chlorine and Nitrogen.  
 February 7th—Constituents of Normal Urine. Tests.  
 March 4th—Tests for Abnormal Constituents. Tests for Poisons.

## DR. E. MOORE FISHER.

November 15th—General Hygienic Considerations.  
 December 11th—Personal Hygiene.  
 January 17th—Air, Water and Ventilation.  
 February 2d—Ward Hygiene.  
 March 6th—Prevention of Disease.  
 March 20th—Hydrotherapy.

## DR. LOUIS K. HENSCHEL.

November 20th—General Composition of the Human Body.  
 December 13th—Mechanism and Functions of the Respiratory Organs.  
 January 22d—Heart, Blood and Circulatory System.  
 February 14th—Brain, Spinal Cord and Nerves.  
 March 11th—Digestion, Assimilation, Secretion and Excretion.

## GENERAL OUTLINE OF LECTURES, 1907-1908.

## SENIOR CLASS.

DR. BRITTON D. EVANS.

- October 30th—Ethics of Nursing.  
November 22d—Classification of Mental Diseases.  
December 18th—Management of Acute Insanity.  
January 24th—Relation of Age and Occupation to Mental Disease.  
February 19th—Nursing and Ward Work.

DR. PETER S. MALLON.

- November 1st—Classification of Symptoms of Disease.  
November 27th—Systemic and Local Remedies.  
January 29th—Emetics, Cathartics, Diuretics, Expectorants.  
February 21st—Demulcents, Emollients, Protectives, Digestants.

DR. H. AUSTIN COSSITT.

- November 6th—Diseases of the Digestive System and Kidneys.  
November 29th—Diseases of the Circulatory System.  
January 8th—Diseases of the Respiratory System.  
January 31st—Fever, Typhoid Fever, Malarial Fevers.  
February 26th—Rubeola, Variola, Varicella, Scarletina, Diphtheria.  
March 13th—Constitutional, Nervous and Children's Diseases.

DR. FREDERICK C. HORSFORD.

- November 8th—Inflammation, Asepsis, Antisepsis.  
December 4th—Surgical Fevers, Contusions, Wounds.  
January 10th—Fractures, Dislocations, New Growths.  
February 5th—Sterilization, Anaesthesia.  
February 28th—Preparation for Operation. Emergencies.  
March 18th—Minor and Major Surgery.

DR. ALEXANDER J. CARROLL.

- November 13th—Inflammation; Causes and Effect.  
December 6th—Forms of Inflammation. Methods of Repair.  
January 15th—The More Common Forms of Micro-Organisms.  
February 7th—Poisons and Their Antidotes.  
March 4th—Poisons and Their Antidotes.

## DR. E. MOORE FISHER.

November 15th—Hydrotherapy.  
 December 11th—Organs of Reproduction; Pregnancy.  
 January 17th—Parturition.  
 February 12th—Obstetrical Nursing.  
 March 6th—Diseases of Women.  
 March 20th—Genito-Urinary Diseases.

## DR. LOUIS K. HENSCHEL.

November 20th—General Dietetic Considerations.  
 December 13th—Food and Food Preparations.  
 January 22d—Food in Health.  
 February 14th—Food in Disease.  
 March 11th—Methods of Feeding and Artificial Feeding.

## SPECIAL WARD WORK.

## 2-2 NORTH.

Thomas J. Gillian .....January 1st to January 14th, 1908.  
 Patrick Hehir .....January 14th to January 28th, 1908.  
 David P. Nolan .....January 28th to February 11th, 1908.  
 Vernon G. Rand .....February 11th to February 27th, 1908.  
 Leland C. Roberts .....February 27th to March 11th, 1908.  
 M. T. Sloan .....March 11th to March 25th, 1908.

## 2-2 SOUTH.

Miss Cecelia Doran .....November 14th to November 28th, 1907.  
 Miss Lillian Halpin .....November 28th to December 12th, 1907.  
 Miss Mary Kearney .....December 12th to December 26th, 1907.  
 Miss Margaret Kinney .....December 26th, 1907, to January 7th, 1908.  
 Miss Mary C. Mills .....January 7th to January 21st, 1908.  
 Miss Catherine O'Brien .....January 21st to February 5th, 1908.  
 Miss Mary Quinn .....February 5th to February 19th, 1908.  
 Miss Mary Richter .....February 19th to March 5th, 1908.  
 Miss Mary Ryan .....March 5th to March 19th, 1908.  
 Miss Theresa Richter .....March 19th to April 2d, 1908.

During the term, Miss Mary R. Keegan, Miss Phoebe J. Northwood and Miss Margaret Barrett will give practical instruction in bandaging, massage and the keeping of temperature and other charts, Female Department.

Mr. Henry Cook will instruct in the same subjects in the Male Department.

## TEXT-BOOKS.

Members of both classes are requested to provide themselves with the necessary books before the session beginning October 30th, 1907. The text-books used may be selected from the following list:

## JUNIOR YEAR.

American Pocket Medical Dictionary .....	Dorland.
Anatomy and Physiology for Nurses .....	Leroy Lewis.
Fever Nursing .....	Wilson.
Immediate Care of the Injured .....	Morrow.
Manual for Nursing .....	Humphry.
Manual of Personal Hygiene .....	Pyle.
Materia Medica for Nurses .....	Stoney.
Outlines of Obstetrics .....	Jewett.
Practical Points in Nursing .....	Stoney.
Reference Handbook for Nurses .....	Amanda Beck.

## SENIOR YEAR.

Bacteriology and Surgical Technic for Nurses ....	Stoney.
Bandaging .....	Davis.
Dietetics for Nurses .....	Friedenwald and Ruhrah.
How to Cook for Sick and Convalescent .....	Sachs.
General Nursing .....	Weeks.
Massage .....	Ostrom.
Nursing Ethics .....	Robb.
Nursing in the Acute Infectious Fevers .....	Paul.
Reference Handbook of Obstetric Nursing .....	Wilson.
Obstetric and Gynecologic Nursing .....	Davis.
Obstetrics for Nurses .....	De Lee.
Primer of Psychology .....	Burr.
Principles of Hygiene .....	Bergey.
Sickness and Accidents .....	Curran.
Surgical Nursing and Bandaging .....	Voswinkle.
Text-Book of Mechano-Therapy (Massage and Medical Gymnastics) .....	Grafstrom.
The Operating Room and the Patient .....	Russell S. Fowler.

Lectures will be delivered to the Senior Class at 2 P. M. and to the Junior Class at 6:30 P. M., on Wednesdays and Friday throughout the session.

The classes will meet for instruction in bandaging, massage and laboratory work at such times as the instructors may designate.

## ELECTROTHERAPEUTIC DEPARTMENT.

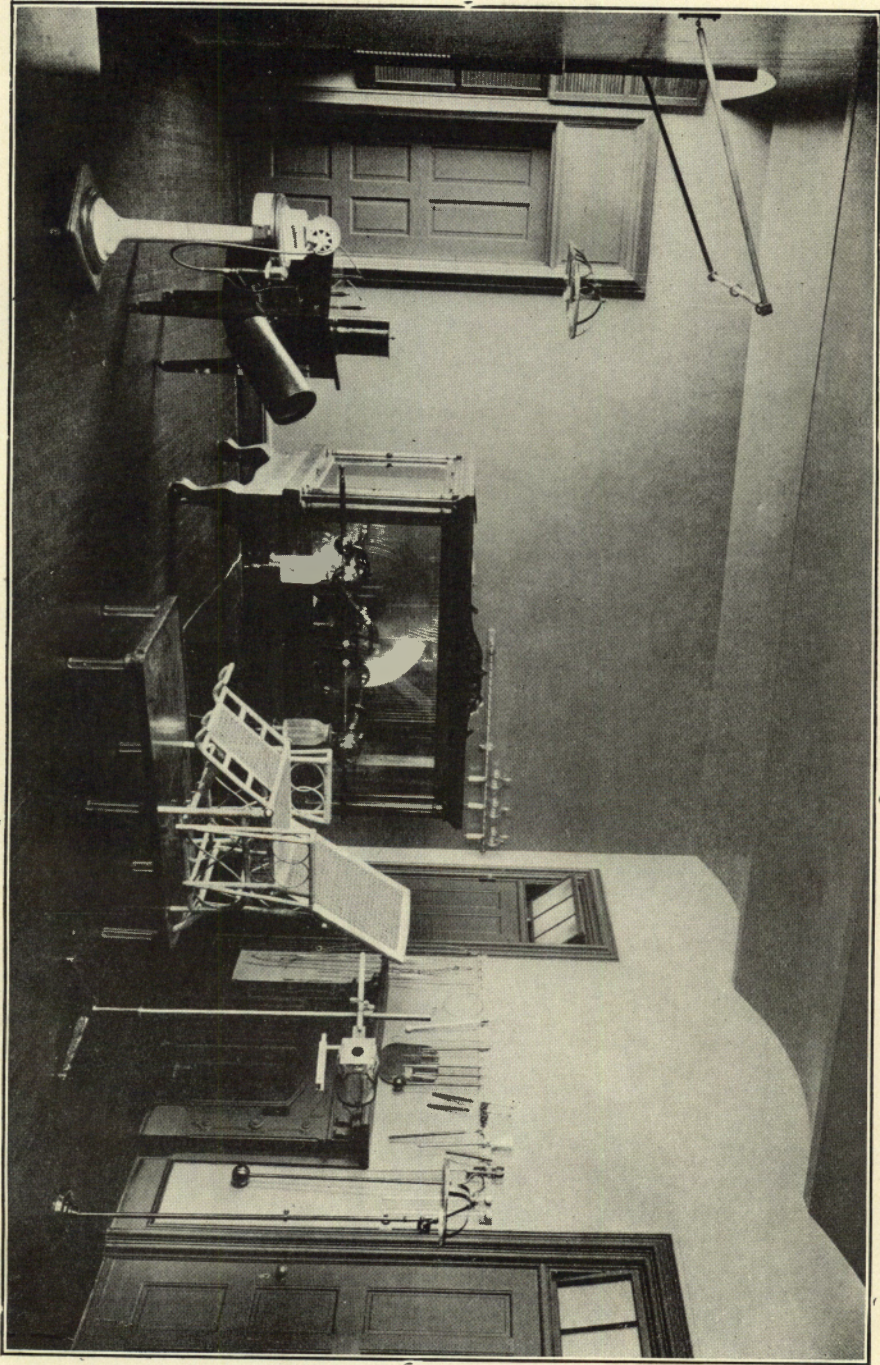
The installation of an up-to-date electrotherapeutic apparatus has given the Hospital an additional equipment for the treatment of mental and nervous derangements. The work in this department is conducted under the direction of members of the Medical Staff. The physicians prescribe and send their patients to the electrical room, and their directions are carried into effect by a skilled operator, after the manner of the pharmacist filling prescriptions given to him by the physicians of the Hospital.

The electrotherapeutic results so far are highly gratifying. It is a field which is of intense interest from the physician's viewpoint. I submit to you herewith a record of the treatments given and recorded:

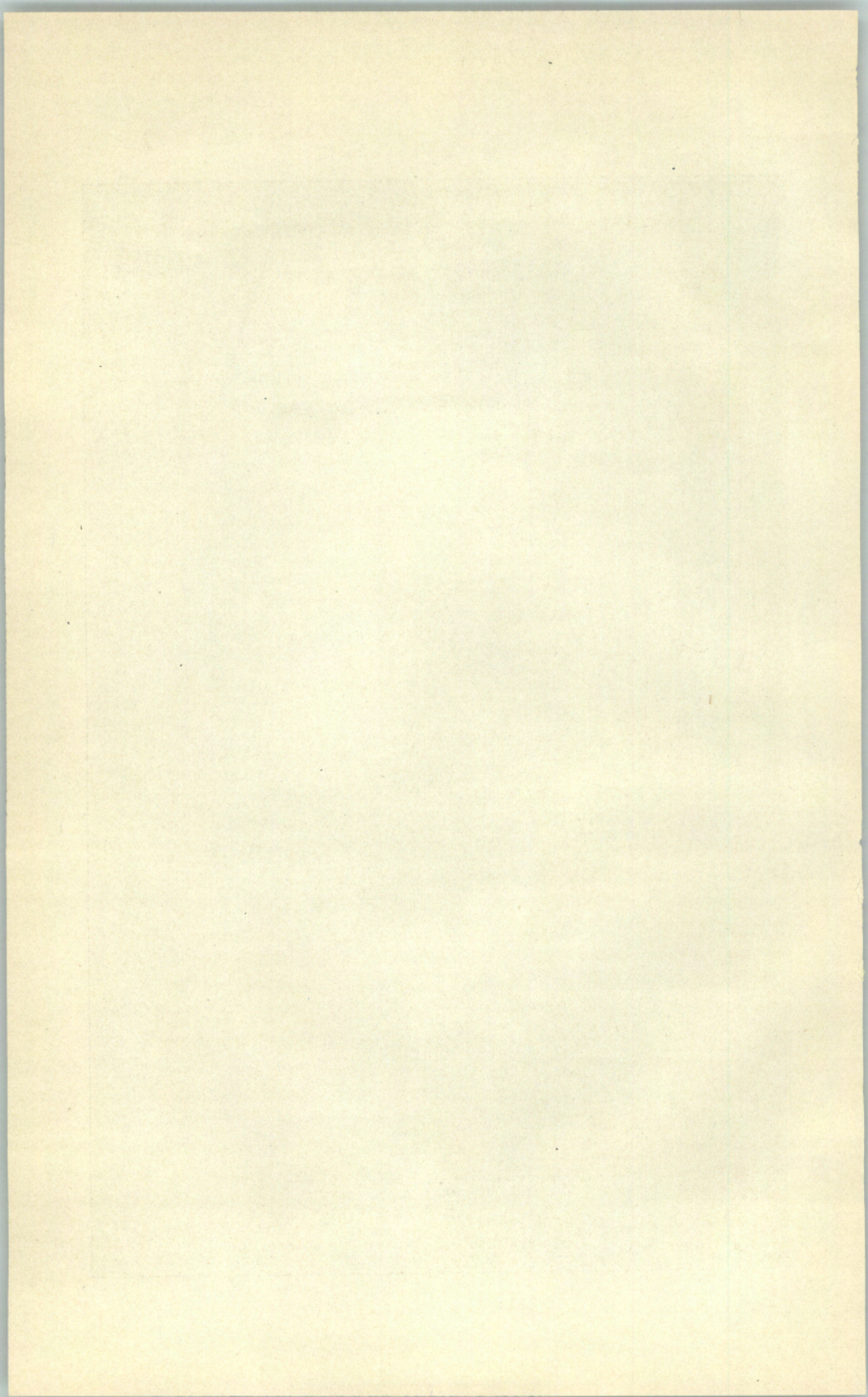
Faradic current .....	147
Galvanic current .....	118
Oudin current .....	130
D'Arsonval current .....	42
Static breeze .....	339
Static wave .....	44
Static spark .....	57
X-Ray examinations .....	33
Tests for muscular reaction .....	24
Vibratory treatments .....	161
Treatments with oscillator .....	119
Skiagraphs made .....	4
<b>Total .....</b>	<b>1,218</b>

## HYDROTHERAPEUTIC DEPARTMENT.

In my last report I made mention of the installation of a new Hydrotherapeutic Department, consisting of most of the modern approved appliances for the scientific application of water as a means for the treatment of disease. I stated that such addition to our therapeutic armamentarium "promised to be a valuable adjunct" in the treatment of our patients. This equipment was installed on the south side of the main building and is only available to the female sex. After nearly a year of practical experience with this apparatus I desire to subscribe to its usefulness in the treatment of mental and nervous conditions. It is a matter of con-



ELECTROTHERAPEUTIC ROOM



gratulation that our last Legislature, in view of our approval and recommendation, appropriated the necessary funds for a practical duplication of this Hydrotherapeutic Department in that part of the main building set apart for the care and treatment of men.

For the past few months permanent and accurate records have been made, setting forth the character of the results which we have obtained by the application of water to the surface of the skin, with the ingestion of water and the stimulation of the sweat glands. In the nine months that we have been making use of this special apparatus, fifty patients have been treated and about 1,000 baths given. I am gratified to affirm that our records show instructive and satisfactory results.

An appropriation of \$3,200 was granted by the last Legislature for the purpose of installing hydrotherapeutic rooms in the Men's Department of the main building. The contract has been awarded to the Hydrotherapeutic Apparatus Company, of New York City, and the work will be completed in February, 1908.

#### AMUSEMENTS.

A large proportion of the patients who come to the Hospital for treatment are either brooding over imaginary ills and troubles or have an abnormally exaggerated sense of their importance. They are pathologically introspective or egocentric.

One form of treatment which I believe to be always opportune and beneficial for such patients is found in affording them means of amusement and employment. We have availed ourselves of such resources as were at our command in entertaining, amusing and employing our patients so as to divert them from their vagaries and awaken in them an appreciation of the normal or healthful side of life.

The usual weekly dances have been given throughout the year. The patients who take part in these dances look forward to them and speak of them as a weekly treat which they very much appreciate. Many who do not dance find pleasure and diversion in watching those who do, and in listening to the music furnished by the Hospital orchestra.

During the summer months the Hospital band gave frequent rehearsals in front of the main building. A large number of patients

enjoy these concerts and occupy the numerous seats provided for them upon the lawn. Those who, because of the character of their mental disorder, or by reason of poor physical health, are unable to go out upon the lawns, gather about the open windows in the front of the house.

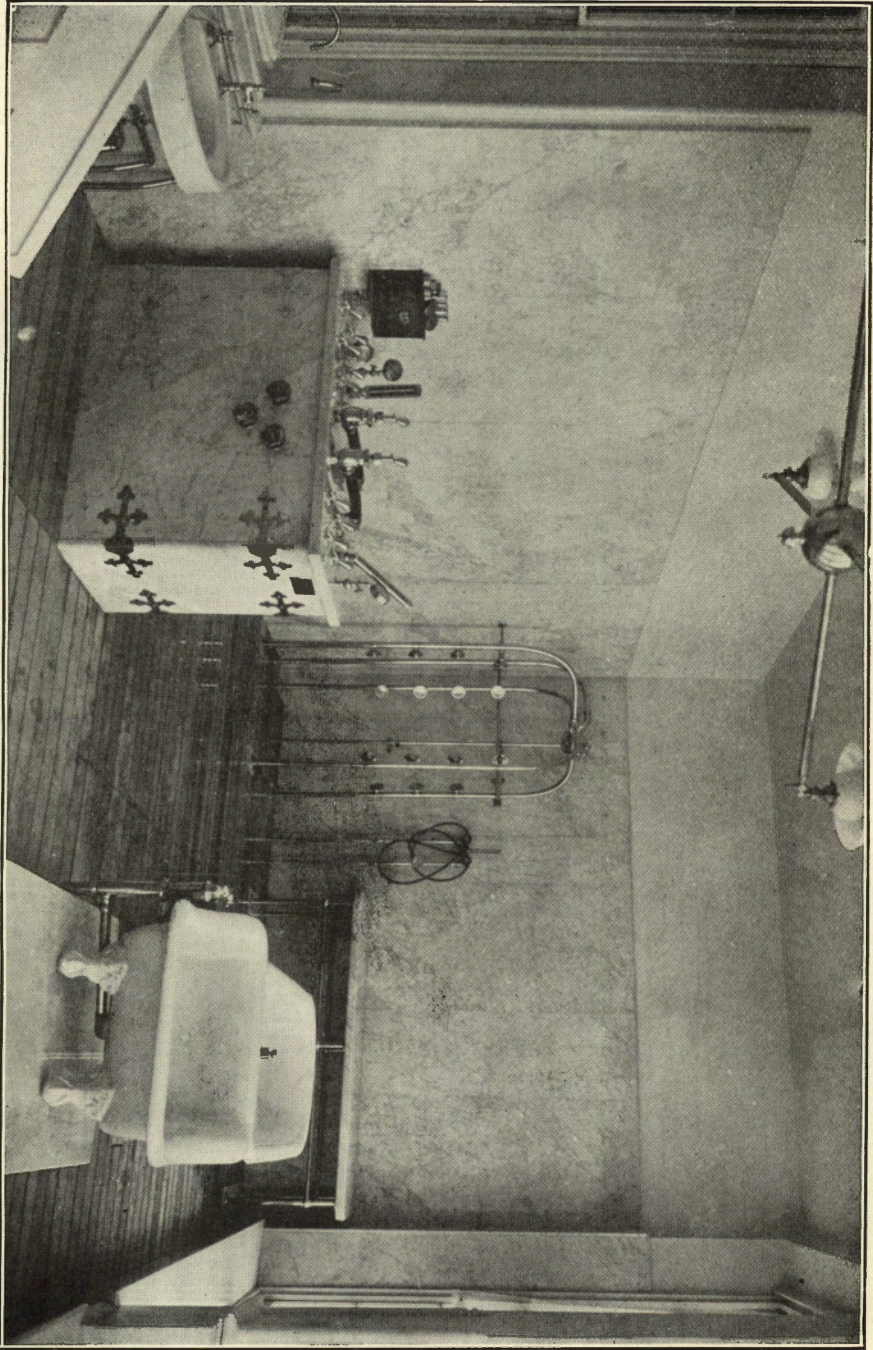
The graphophones have been a source of much indoor pleasure to the patients. From these instruments they hear the popular airs of the day and frequently manifest much enthusiasm about them.

In years past baseball was one of the chief outdoor amusements provided for the patients. They took much interest in it and attended the games in large numbers. The grandstand was usually filled to its entire capacity. The difficulty presented in finding good, reliable attendants with baseball qualifications was so great that the maintenance of a regular baseball team became impracticable. We have good baseball grounds and a commodious grandstand, and I beg to suggest that there might be a revival of this interesting sport by offering inducements to visiting teams. My observation of the appreciation manifested by the patients for this sport has been such that I feel sure that a reasonable amount of money invested in this form of entertainment would be a commendable outlay.

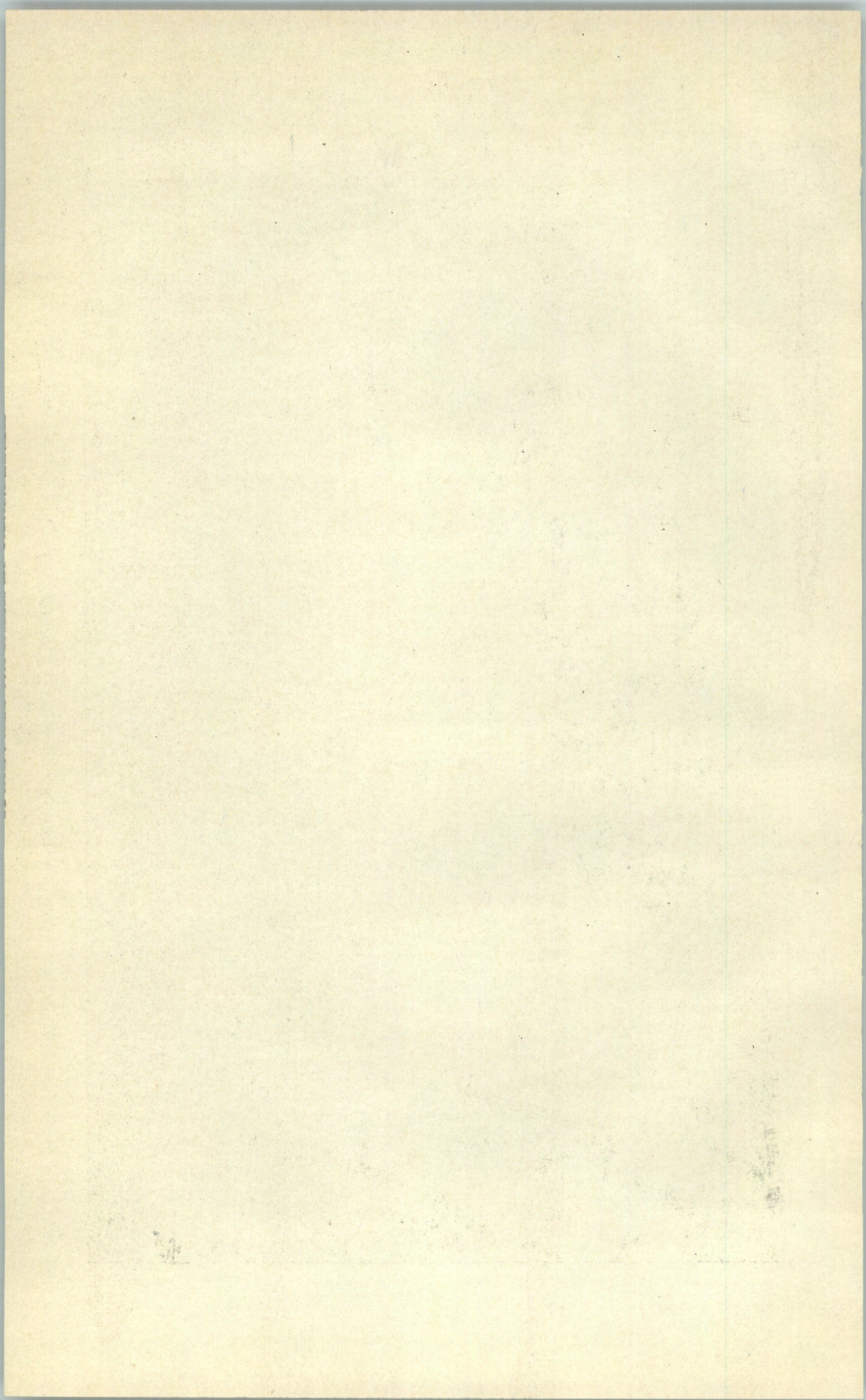
The pool and billiard tables, the bowling alleys, golf grounds and tennis courts have been in regular use and have afforded pleasurable exercise and recreation for the patients, nurses and officers. I have, during the year, been able to provide a number of dramatic entertainments. These entertainments were received by the patients with evidence of much appreciation. I heartily approve of all legitimate amusements and look upon them as forms of treatment. A number of State Hospitals for the Insane have a regular appropriation known as the "Amusement Fund." I desire to suggest that if such a fund be placed at the command of the Medical Director it would enable him to make definite provision throughout the year for suitable entertainments and amusements.

#### INDUSTRIES AND EMPLOYMENTS.

I am of the opinion that there should be provided for the patients of this Hospital a wider range of employment. It has long been recognized that persons disturbed in mind may be benefited



HYDROTHERAPEUTIC ROOM



by being given suitable employment. Not only does judicious selection of physical exercise work for the betterment of the mental condition, but it also operates to improve the general health. At a Hospital like this, with about nine hundred acres of land, with a farm and gardens and the industries necessary to the maintenance of such an institution, there is necessarily an opportunity to offer employment, such as work in the fields, the cultivation and gathering of vegetables and fruit, helping in the laundry and upholstering departments, assisting in grading, the harvesting of hay and ice, &c., to a large number of patients.

In practically every well equipped hospital for the insane, such forms of employment, properly regulated, bring beneficial results to a large percentage of patients, but it is of great importance that all classes of patients who are capable of being interested should in some way be given legitimate employment. The lawyer, the physician, the clergyman, the newspaper man and the high grade mechanic, for example, may decline to work upon the farm, to help in the laundry or in the gardens, but if encouraged to take part in a form of employment not calculated to degrade or depress, he would be helped in mind and body and his restoration to health be promoted.

A properly equipped State institution for the insane should be supplied with a variety of industries calculated to employ every class of patients which such institution receives and treats. The installation of such industries as I especially refer to would not be a serious tax upon the State, and their maintenance would be helpful to the patients and a matter of economy to the institution.

Numerous hospitals throughout this country have in them printing and bookbinding departments, in which the work is done almost exclusively by patients, and with a decided saving to the institution treasury. The manufacture of brushes, brooms and combs affords another form of employment which a certain class of patients would willingly become interested in, and in whom such employment would cause no feeling of degradation.

I desire to commend to your consideration the matter of asking the Legislature to give this Hospital an appropriation to place the amusements upon a fixed and substantial basis and for the installation of further means of employment for our patients.

The following tables show the sort of employment now given to our patients and the amount of work done by them during the year covered by this report:

TABLE I.

NUMBER OF DAYS' WORK DONE BY PATIENTS IN THE INDUSTRIAL DEPARTMENT.

DATE.	LAUNDRY.			Kitchen.	Farm and Grounds.	Bakery.	Shops.	Sewing.	Miscellaneous Work.	Total.
	Men.	Women.	Total.							
1906.										
November.....	439	460	899	320	1,719	91	359	1,909	376	5,673
December.....	505	483	988	362	1,569	99	354	2,156	353	5,881
1907.										
January.....	365	492	857	397	1,504	92	359	1,883	322	5,414
February.....	374	434	808	265	1,343	85	330	1,783	217	4,831
March.....	395	474	869	376	1,515	96	240	1,853	282	5,231
April.....	374	447	821	287	1,412	90	339	1,942	201	5,092
May.....	404	442	846	267	1,511	82	301	1,830	150	4,987
June.....	360	419	779	235	1,640	85	273	1,815	93	4,920
July.....	310	559	869	284	1,987	87	266	1,816	222	5,531
August.....	318	567	885	269	1,983	98	273	1,844	323	5,675
September.....	358	590	948	310	1,667	90	194	1,836	321	5,366
October.....	372	584	956	263	1,898	99	289	1,829	381	5,715
Totals.....	4,574	5,951	10,525	3,635	19,748	1,094	3,577	22,496	3,241	64,316

TABLE II.

NUMBER OF DAYS' WORK DONE BY PATIENTS ON THE WARDS.

	Men.	Women.	Total.
1906.			
November.....	6,949	6,673	13,622
December.....	7,204	6,905	14,109
1907.			
January.....	7,194	7,142	14,336
February.....	6,420	6,423	12,843
March.....	8,009	7,371	15,380
April.....	7,325	6,895	14,220
May.....	7,271	7,273	14,544
June.....	6,370	7,038	13,408
July.....	6,406	7,210	13,616
August.....	8,187	7,115	15,302
September.....	8,709	7,001	15,710
October.....	8,982	7,333	16,315
Totals.....	89,026	84,379	173,405

## CHAPEL SERVICES.

The following clergymen conducted religious services in the chapel according to the schedule, and to them or their successors a similar schedule will be sent, so that the religious services will be provided for officially:

Rev. Edward J. Ellard, Roman Catholic, Morris Plains.  
 Rev. Dr. Ralph B. Urmy, Methodist, Morristown.  
 Rev. Dr. William H. Hughes, Episcopalian, Morristown.  
 Rev. Oliver C. Horsman, Baptist, Morristown.  
 Rev. W. W. Hammond, Presbyterian, Morris Plains.

## SCHEDULE OF CHAPEL SERVICES FROM NOVEMBER 3d, 1907.

November	3d.—Episcopal.	May	3d.—Presbyterian.
"	10th.—Presbyterian.	"	10th.—Roman Catholic.
"	17th.—Roman Catholic.	"	17th.—Methodist.
"	24th.—Methodist.	"	24th.—Baptist.
December	1st.—Baptist.	"	31st.—Episcopal.
"	8th.—Episcopal.	June	7th.—Presbyterian.
"	15th.—Presbyterian.	"	14th.—Roman Catholic.
"	22d.—Roman Catholic.	"	21st.—Methodist.
"	29th.—Methodist.	"	28th.—Baptist.
January	5th.—Baptist.	July	5th.—Episcopal.
"	12th.—Episcopal.	"	12th.—Presbyterian.
"	19th.—Presbyterian.	"	19th.—Roman Catholic.
"	26th.—Roman Catholic.	"	26th.—Methodist.
February	2d.—Methodist.	August	2d.—Baptist.
"	9th.—Baptist.	"	9th.—Episcopal.
"	16th.—Episcopal.	"	16th.—Presbyterian.
"	23d.—Presbyterian.	"	23d.—Roman Catholic.
March	1st.—Roman Catholic.	"	30th.—Methodist.
"	8th.—Methodist.	September	6th.—Baptist.
"	15th.—Baptist.	"	13th.—Episcopal.
"	22d.—Episcopal.	"	20th.—Presbyterian.
"	29th.—Presbyterian.	"	27th.—Roman Catholic.
April	5th.—Roman Catholic.	October	4th.—Methodist.
"	12th.—Methodist.	"	11th.—Baptist.
"	19th.—Baptist.	"	18th.—Episcopal.
"	26th.—Episcopal.	"	25th.—Presbyterian.

"Each clergyman has an equal representation and is responsible for the services on the date set apart for him. If, for any reason, he is unable to attend, it is understood that he will provide a substitute, with whom he is to arrange, so that the account of the Hos-

pital can be kept with the clergyman responsible for the date, not with the substitute."

Adopted by the Board of Managers at a regular meeting, September 1st, 1896.

#### COTTAGE FOR MEN NURSES.

I beg to recommend to you the building of a cottage for the men nurses. It is not necessary for me to deal at length with the advantages of offering our help comfortable living quarters, or emphasize the matter of the long hours and onerous duties of our nurses. The State demands of them an industrious and faithful application to the duties of their posts. I am of the opinion that, in turn, a proper recognition of their services should be exhibited and an effort made to give them comfortable living quarters. I suggest that the Legislature be asked for an appropriation of \$35,000 for the purpose of building a cottage for the nurses in the Men's Department.

#### FIRE-ESCAPES.

I feel it incumbent upon me to make official record of this Hospital's need of adequate fire-escapes. Every large institution should be amply provided with them. To properly supply this large Hospital with suitable fire-escapes will call for a considerable appropriation, but in the event of fire and the loss of human lives the Hospital management would be held responsible if it had not placed the responsibility where it rightfully belongs. I therefore advise you to ask of the Legislature an appropriation sufficient to properly equip this institution with fire-escapes.

The equipment ordinarily provided for hotels and other large buildings would be of poor service to an institution for the insane. Some device must be supplied which will enable the officers and nurses to readily put demented patients out of danger without depending upon such patients exercising judgment or discretion in the manner of their escape.

This will call for an expensive equipment, but where human lives are at stake the demand is urgent and fully warranted.

## CLOTHING CHUTES, DUST FLUES AND DUMB-WAITER SHAFTS.

After much thought as to the danger of fire, I am convinced that it would be wise to line the clothing chutes, dust flues and dumb-waiter shafts with asbestos board; then, if by any means a fire should start at the base of one of these shafts, it could not very easily spread to the building. Our floors are soaked in oil. Should fire once attack them it would extend rapidly on the interior of the building. The ushering of insane or demented patients to safety in a moment of excitement is not an easy or simple problem. I believe it would be wisdom to invest in every reasonable protection against fire. For this reason I bring this matter to your attention.

## HOSPITAL POST-OFFICE.

I am of the opinion that the large amount of mail matter daily coming into and going out of this Hospital calls for the establishment of a post-office in the institution. Other large State Hospitals throughout the country have asked for and been granted post-offices. Under our present system the expense of carrying the mail bag to and from the Morris Plains post-office falls upon the Hospital, and frequently the irregularity of the hack-drivers who are employed to carry the mail for the institution occasions much annoyance and inconvenience.

Should we be granted a post-office the government would bear the expense of carrying the mail to and from the railroad station, and the party who was given the contract would be held strictly responsible for its delivery. At present we have two mail deliveries daily. With the establishment of a post-office in the Hospital, we would have five or more. The sending out of special deliveries, registered letters and money orders could be conveniently looked after, whereas under present conditions it is often attended with much trouble, annoyance and inconvenience. I beg to suggest that the government be asked to establish a post-office at this Hospital.

## FLAGGING OR CONCRETE WALK FOR CENTER DRIVE.

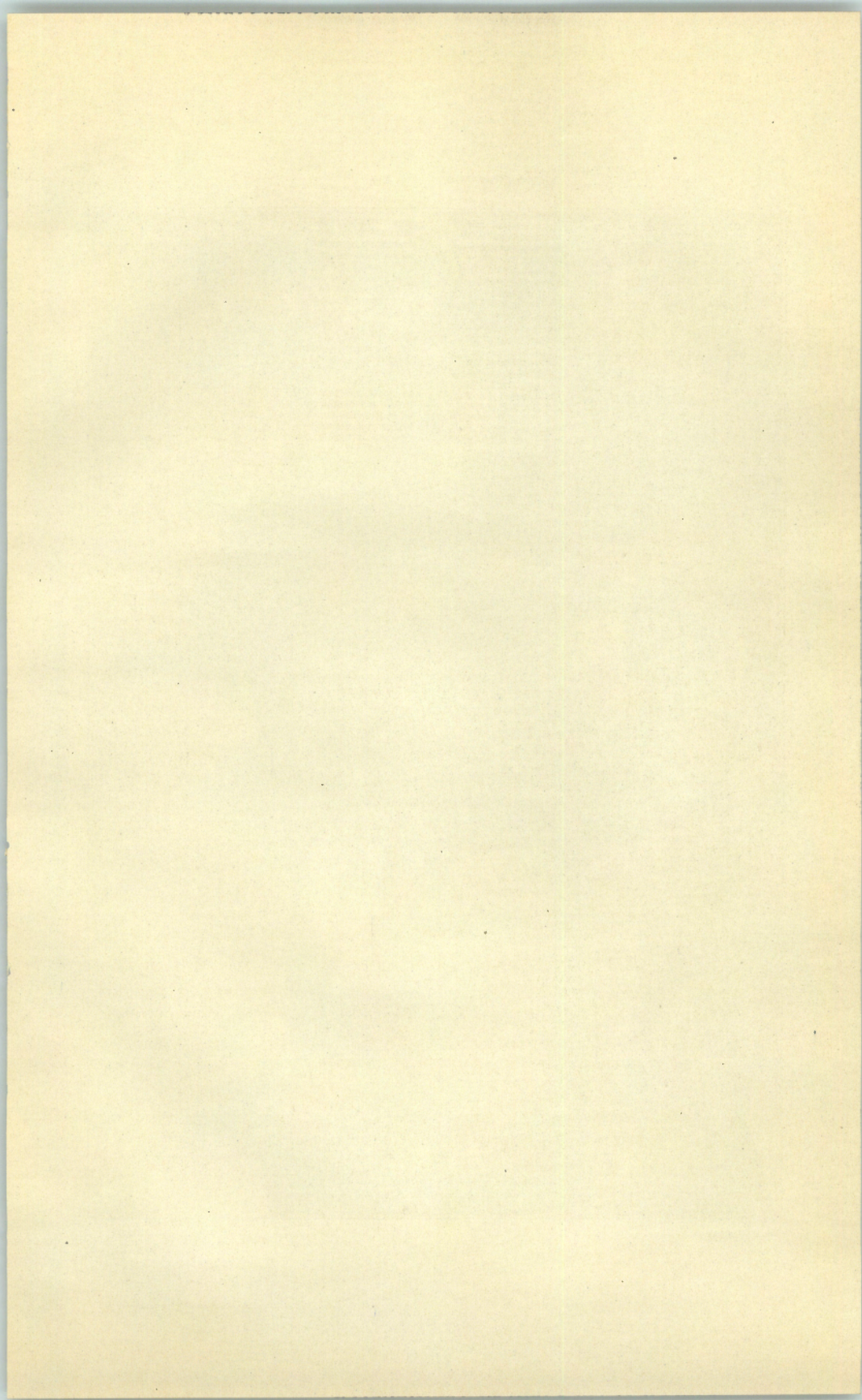
Since outdoor exercise is essential to the health of our patients and an important factor in their treatment, the Hospital should be provided with facilities and surrounded by conditions which will enable us to give the patients such exercise. In perfectly clear and favorable weather the capacious grounds of this institution are adequate, but in muddy weather we are confronted with a serious difficulty. I advise the finishing of the sidewalks down the center drive, so that they may be available to the patients for the purpose of exercise in muddy weather; so that nurses, attendants and employes may have a suitable walk in going to church on Sunday and to and from the depot. The completing of these walks would not be attended with a great expense and I recommend their completion.

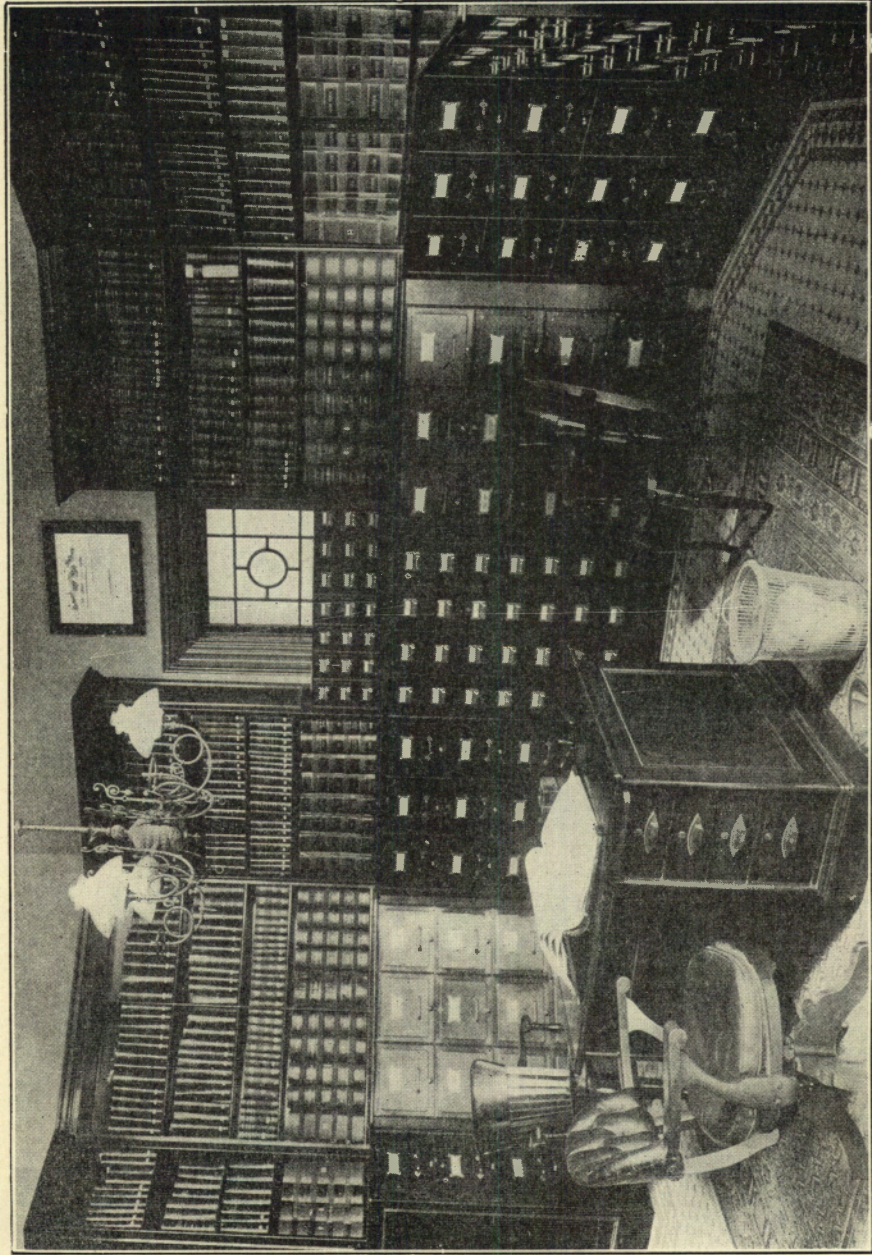
## CHANGES IN THE MEDICAL STAFF.

Dr. Christopher C. Beling, who was elected as a member of the Medical Staff of this Hospital and assumed the duties of his post in September, 1901, resigned from the service on July 1st, 1907, to enter private practice.

Dr. Frederick C. Horsford was promoted to Third Assistant Physician, Dr. Alexander J. Carroll to Fourth Assistant Physician and Dr. E. Moore Fisher to Fifth Assistant Physician. Dr. Louis K. Henschel was elected Sixth Assistant Physician to fill the vacancy occasioned by the resignation of Dr. Beling.

The recent election of Dr. L. L. Mial as a visiting and consulting member of the staff should be attended with practical results. Dr. Mial was at one time a member of the resident staff of this Hospital. He resigned to devote himself to the special practice of treating the eye, ear, nose and throat, and has spent many years in this work. He has been on the staff of the Manhattan Eye, Ear and Throat Hospital, of New York City, and has offices in New York City and Morristown, and this institution is fortunate to be able to command his services in the special line of medical work to which he devotes himself.





RECORD ROOM

## PATHOLOGICAL LABORATORY.

I append the Resident Pathologist's condensed written statement of the year's work done in the Pathological Laboratory. Such annual reports are made to me that I may readily set forth in a systematic manner the character and scope of the scientific work done in this important department. I beg to direct your attention to Dr. Cossitt's brief but comprehensive tables, and assure you that his suggestions as to further equipments meet with my hearty approval.

## CONCLUSION.

I desire to make acknowledgment of your prompt responses to my requests for counsel, advice and direction. With a sincere appreciation of your uniform support in all matters looking to the promotion of the Hospital's best interests, this thirty-second annual report is respectfully submitted.

BRITTON D. EVANS,  
*Medical Director.*

October 31st, 1907.

THE HISTORY OF THE

REIGN OF

CHARLES THE FIRST

BY

JOHN BURNET

1679

LONDON

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STATISTICAL APPENDIX TO THE MEDICAL  
DIRECTOR'S REPORT.

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(43)

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STATISTICAL APPENDIX TO THE MEDICAL  
DIRECTOR'S REPORT

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## STATISTICAL APPENDIX TO THE MEDICAL DIRECTOR'S REPORT.

TABLE I.

SHOWING THE ADMISSIONS, DISCHARGES AND DEATHS DURING THE YEAR ENDING  
OCTOBER 31ST, 1907.

	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
In the Hospital October 31st, 1906 .....	872	907	1,779
Patients admitted—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
First admissions .....	214	154	368
Readmissions .....	15	34	49
Total .....	229	188	417
Total number under treatment during the year .....	1,101	1,095	2,196
Patients discharged—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Recovered .....	58	51	109
Improved .....	30	48	78
Unimproved .....	6	2	8
Died .....	90	87	177
Total .....	184	188	372
Remaining in Hospital .....	917	907	1,824
Of this number are—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Public .....	839	817	1,656
Private .....	78	90	168
Total .....	917	907	1,824
Whole number admitted from August 17th, 1876, to October 31st, 1907 .....	4,357	4,101	8,458
Whole number discharged during the same period of time—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Recovered .....	1,021	1,022	2,043
Improved .....	629	696	1,325
Unimproved .....	262	310	572
Died .....	1,497	1,166	2,663
Eloped .....	31	....	31
Total .....	3,440	3,194	6,634
Remaining October 31st, 1907 .....	917	907	1,824

TABLE II.

MONTHLY ADMISSIONS, DISCHARGES AND AVERAGES.

	ADMISSIONS.			DISCHARGES AND DEATHS.			DAILY AVERAGES.		
	Men.	Women.	Total.	Men.	Women.	Total.	Men.	Women.	Total.
1906.									
November.....	23	12	35	15	13	28	874.20	903.92	1,778.12
December.....	21	13	34	14	11	25	882.27	905.08	1,787.36
1907.									
January.....	21	13	34	15	17	32	892.32	903.56	1,795.80
February.....	14	10	24	6	31	37	896.86	888.84	1,785.70
March.....	13	5	18	15	17	32	900.05	874.19	1,774.24
April.....	21	22	43	16	11	27	901.93	874.52	1,776.45
May.....	18	13	31	15	11	26	904.13	879.61	1,783.74
June.....	21	25	46	19	6	25	905.77	892.75	1,798.52
July.....	27	17	44	21	16	37	911.21	904.02	1,815.23
August.....	13	17	30	18	15	33	910.37	905.30	1,815.67
September.....	17	19	36	14	20	34	906.02	905.86	1,811.88
October.....	20	17	37	16	20	36	916.37	907.28	1,823.65
Total.....	229	188	417	184	188	372			
For the year.....							900.12	895.41	1,795.53

TABLE III.

NUMBER OF ATTACKS OF THOSE ADMITTED.

Attack—	Men.	Women.	Total.
First .....	183	132	315
Second .....	24	22	46
Third .....	5	5	10
Fourth .....	4	5	9
Fifth and over .....	2	9	11
Unascertained .....	11	15	26
Total .....	229	188	417

TABLE IV.

AGE WHEN ATTACKED OF THOSE ADMITTED.

<i>Age—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under fifteen years .....	4	4	8
Fifteen to twenty years .....	17	13	30
Twenty to twenty-five years .....	22	26	48
Twenty-five to thirty years .....	26	24	50
Thirty to thirty-five years .....	25	21	46
Thirty-five to forty years .....	26	26	52
Forty to forty-five years .....	25	13	38
Forty-five to fifty years .....	14	18	32
Fifty to sixty years .....	31	13	44
Sixty to seventy years .....	12	12	24
Seventy to eighty years .....	7	6	13
Eighty years and over .....	6	4	10
Unascertained .....	14	8	22
Total .....	229	188	417

TABLE V.

NATIVITY OF THOSE ADMITTED.

<i>Nativity—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Connecticut .....	1	3	4
Illinois .....	..	1	1
Indiana .....	1	1	2
Kentucky .....	..	1	1
Maine .....	1	..	1
Maryland .....	..	1	1
Massachusetts .....	..	3	3
New Jersey .....	33	36	69
New York .....	11	27	38
North Carolina .....	1	2	3
Ohio .....	1	2	3
Pennsylvania .....	3	7	10
Virginia .....	2	4	6
United States .....	75	21	96
Asia Minor .....	1	..	1
Austria .....	9	5	14
Barbadoes .....	..	1	1
Bavaria .....	1	..	1
Canada .....	5	1	6
England .....	13	6	19
Finland .....	2	1	3
Germany .....	19	15	34
Holland .....	4	2	6
Hungary .....	4	4	8
Ireland .....	11	18	29

Italy .....	10	6	16
Norway .....	..	1	1
Poland .....	2	1	3
Russia .....	7	6	13
Scotland .....	4	5	9
Sweden .....	2	1	3
Switzerland .....	1	4	5
Wales .....	1	..	1
Unascertained .....	4	2	6
Total .....	229	188	417

TABLE VI.

## RESIDENCE OF THOSE ADMITTED.

<i>Counties—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Bergen .....	35	31	66
Essex .....	44	35	79
Hudson .....	18	10	28
Hunterdon .....	..	1	1
Mercer .....	1	1	2
Middlesex .....	3	1	4
Monmouth .....	..	2	2
Morris .....	19	15	34
Passaic .....	41	37	78
Somerset .....	1	..	1
Sussex .....	7	2	9
Union .....	44	41	85
Warren .....	13	10	23
Indiana .....	1	..	1
Maryland .....	..	1	1
New York .....	1	1	2
Pennsylvania .....	1	..	1
Total .....	229	188	417

TABLE VII.

## CIVIL CONDITION OF THOSE ADMITTED.

<i>Civil Condition—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Single .....	95	49	144
Married .....	110	109	219
Widowed .....	20	27	47
Divorced .....	2	2	4
Unascertained .....	2	1	3
Total .....	229	188	417

TABLE VIII.

OCCUPATION OF THOSE ADMITTED.

<i>Occupation—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Accountants .....	1	..	1
Agents .....	4	..	4
Artisans .....	6	..	6
Artists .....	2	..	2
Bakers .....	2	..	2
Bankers .....	1	..	1
Bartenders .....	1	..	1
Blacksmiths .....	3	..	3
Bookkeepers .....	2	..	2
Brass finishers .....	1	..	1
Butchers .....	2	..	2
Butlers .....	2	..	2
Carpenters .....	3	..	3
Chemists .....	1	..	1
Cigarmakers .....	1	..	1
Civil Engineers .....	1	..	1
Clergymen .....	1	..	1
Clerks .....	12	..	12
Coachmen .....	2	..	2
Contractors .....	1	..	1
Domestics .....	..	37	37
Draughtsmen .....	1	..	1
Druggists .....	3	..	3
Dyers .....	2	..	2
Dyers' helpers .....	1	..	1
Engineers .....	2	..	2
Farmers .....	9	..	9
Gardeners .....	2	..	2
Gatetenders .....	1	..	1
Horsemen .....	2	..	2
Housekeepers .....	..	3	3
Housewives .....	..	105	105
Inventors .....	1	..	1
Ironworkers .....	1	..	1
Laborers .....	38	..	38
Lawyers .....	1	..	1
Life-savers .....	1	..	1
Lithographers .....	1	..	1
Liverymen .....	1	..	1
Machine inspectors .....	1	..	1
Machinists .....	7	..	7
Managers .....	1	..	1
Masons .....	6	..	6
Manufacturers .....	1	..	1
Merchants .....	4	..	4
Mill hands .....	2	2	4
Miners .....	1	..	1

Motormen .....	2	..	2
Moulders .....	1	..	1
Musicians .....	1	..	1
Nurses .....	..	1	1
Oilers .....	1	..	1
Oystermen .....	1	..	1
Painters .....	5	..	5
Peddlers .....	2	..	2
Photographers .....	3	..	3
Physicians .....	2	..	2
Plumbers .....	3	..	3
Policemen .....	1	..	1
Printers .....	2	..	2
Publishers .....	1	..	1
Salesmen .....	7	..	7
Saloonkeepers .....	4	..	4
Seamstresses .....	..	3	3
Shop girls .....	..	1	1
Shoemakers .....	4	..	4
Shopworkers .....	2	..	2
Silkworkers .....	1	3	4
Stenographers .....	1	1	2
Stock brokers .....	2	..	2
Students .....	2	1	3
Superintendents .....	1	..	1
Tailors .....	2	..	2
Tanners .....	1	..	1
Teachers .....	1	2	3
Teamsters .....	7	..	7
Telegraphers .....	1	..	1
Treasurers .....	1	..	1
Trust officers .....	1	..	1
Waiters .....	1	..	1
Weavers .....	4	..	4
No occupation .....	18	28	46
Unascertained .....	4	1	5
Total .....	229	188	417

TABLE IX.

## MENTAL DISEASE OF THOSE ADMITTED.

<i>Mental Disease—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Mania, acute .....	23	43	66
Mania, chronic .....	2	2	4
Mania, epileptic .....	..	5	5
Mania, puerperal .....	..	1	1
Mania, recurrent .....	4	3	7
Mania, toxic .....	31	12	43
Melancholia, acute .....	17	38	55
Melancholia, agitata .....	5	..	5
Melancholia, chronic .....	1	2	3
Melancholia, recurrent .....	..	6	6
Dementia, epileptic .....	3	1	4
Dementia, organic .....	6	4	10
Dementia, parietic .....	42	2	44
Dementia, senile .....	21	22	43
Dementia, terminal .....	3	..	3
Imbecility .....	4	1	5
Imbecility, with mania .....	..	3	3
Imbecility, with epilepsy .....	..	1	1
Insanity, adolescent .....	40	27	67
Paranoia .....	27	15	42
Total .....	229	188	417

TABLE X.

## MANNER OF SUPPORT OF THOSE ADMITTED.

<i>How Supported—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
State .....	75	70	145
County .....	109	87	196
Private .....	45	31	76
Total .....	229	188	417

TABLE XI.

ALLEGED CAUSES OF INSANITY OF THOSE ADMITTED.

<i>Causes—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
<b>Physical:</b>			
Cerebral hemorrhage .....	1	..	1
Childbirth .....	..	6	6
Chronic constipation .....	1	..	1
Climacteric .....	..	15	15
Congenital .....	1	..	1
Diabetes .....	..	1	1
Epilepsy .....	3	2	5
Exposure .....	1	..	1
Fever .....	1	..	1
General ill health .....	3	3	6
Heredity .....	13	10	23
Intemperance and other excesses .....	40	10	50
La Grippe .....	1	..	1
Locomotor ataxia .....	1	..	1
Masturbation .....	14	..	14
Overwork .....	11	6	17
Paralysis .....	2	..	2
Predisposition .....	3	4	7
Pregnancy .....	..	1	1
Puerperium .....	..	2	2
Senility .....	15	15	30
Sunstroke .....	2	1	3
Syphilis .....	7	..	7
Traumatism .....	8	3	11
Total .....	128	79	207
<b>Moral:</b>			
Disappointed affections .....	1	2	3
Domestic troubles .....	1	8	9
Financial reverses .....	6	1	7
Grief .....	4	4	8
Religious excitement .....	2	7	9
Shock .....	1	2	3
Worry .....	16	21	37
Total .....	31	45	76
Total physical .....	128	79	207
Total moral .....	31	45	76
Unassigned .....	70	64	134
Total .....	229	188	417

TABLE XII.

## COMPLICATIONS OF THOSE ADMITTED.

<i>Complications—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Abscess ..	1	1	1
Acne ..	2	2	2
Amputations ..	3	..	3
Anemia ..	1	4	5
Aneurism ..	..	2	2
Apoplexy ..	1	..	1
Arterio-sclerosis ..	29	14	43
Asthma ..	..	1	1
Blind ..	1	..	1
Bronchitis ..	..	4	4
Carcinoma ..	..	1	1
Cardiac arrhythmia ..	2	..	2
Cataract, double ..	1	..	1
Cellulitis ..	..	1	1
Cholelithiasis ..	..	1	1
Cystitis ..	2	..	2
Deafness ..	..	1	1
Decubitus acute ..	1	..	1
Dermographia ..	..	3	3
Diabetes ..	..	1	1
Diplegia ..	2	..	2
Emphysema ..	..	2	2
Enteritis ..	..	1	1
Entero-colitis ..	..	1	1
Epilepsy ..	1	7	8
Fracture ..	2	1	3
Graves disease ..	..	3	3
Hemiplegia ..	2	1	3
Hemorrhoids ..	1	3	4
Hernia ..	7	1	8
Hydrocele ..	2	..	2
Leucorrhoea ..	..	1	1
Locomotor ataxia ..	4	..	4
Myopia ..	1	..	1
Nephritis ..	9	13	22
Organic heart disease ..	9	18	27
Otitis ..	..	1	1
Pharyngitis ..	..	2	2
Pleurisy ..	..	1	1
Pregnancy ..	..	3	3
Presbyopia ..	..	7	7
Prolapsus of ovary ..	..	1	1
Prolapsus uteri ..	..	1	1
Pseudo angina pectoris ..	..	1	1
Rheumatism ..	1	1	2
Sebaceous cyst ..	..	1	1

Self-inflicted wound of throat .....	1	..	1
Spondylitis .....	..	1	1
Strabismus .....	1	..	1
Stricture .....	1	..	1
Syphilis .....	4	..	4
Tuberculosis .....	..	1	1
Urethritis .....	1	..	1
Varicocele .....	1	..	1
Homicidal tendencies .....	35	32	67
Suicidal tendencies .....	35	41	76
Without complications .....	152	112	264

In this table patients who had a number of complications have been noted more than once; therefore, the total would have no significance.

TABLE XIII.

## HEREDITY OF THOSE ADMITTED.

<i>Heredity—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Insanity in family .....	44	33	77
Hereditary taint denied .....	100	43	143
Hereditary history unobtainable .....	85	112	197
Total .....	229	188	417

TABLE XIV.

## DURATION OF DISEASE BEFORE ADMISSION.

<i>Duration—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under one month .....	61	62	123
One to three months .....	47	29	76
Three to six months .....	28	22	50
Six to twelve months .....	24	11	35
One to two years .....	22	13	35
Two to three years .....	4	15	19
Three to four years .....	4	6	10
Four to five years .....	6	8	14
Five to ten years .....	10	9	19
Ten to twenty years .....	4	4	8
Over twenty years .....	..	2	2
Unascertained .....	19	7	26
Total .....	229	188	417

TABLE XV.

AGE WHEN ATTACKED OF THOSE RESTORED.

<i>Age—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under fifteen years .....	..	2	2
Fifteen to twenty years .....	7	4	11
Twenty to twenty-five years .....	6	9	15
Twenty-five to thirty years .....	5	8	13
Thirty to thirty-five years .....	8	8	16
Thirty-five to forty years .....	9	8	17
Forty to forty-five years .....	4	..	4
Forty-five to fifty years .....	7	6	13
Fifty to sixty years .....	6	4	10
Sixty to seventy years .....	1	2	3
Unascertained .....	5	..	5
Total .....	58	51	109

TABLE XVI.

DURATION BEFORE ADMISSION OF THOSE RESTORED.

<i>Duration—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under one month .....	13	25	38
One to three months .....	17	7	24
Three to six months .....	9	7	16
Six to twelve months .....	7	4	11
One to two years .....	4	3	7
Over two years .....	1	3	4
Unascertained .....	7	2	9
Total .....	58	51	109

TABLE XVII.

## DURATION OF TREATMENT OF THOSE RESTORED.

<i>Duration—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under one month .....	2	2	4
One to two months .....	9	3	12
Two to three months .....	9	5	14
Three to four months .....	5	4	9
Four to five months .....	7	6	13
Five to six months .....	2	5	7
Six to nine months .....	3	11	14
Nine to twelve months .....	10	2	12
Twelve to eighteen months .....	4	8	12
Eighteen to twenty-four months .....	3	3	6
Over two years .....	4	2	6
Total .....	58	51	109

TABLE XVIII.

## MENTAL DISEASE OF THOSE RESTORED.

<i>Mental Disease—</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Mania, acute .....	11	9	20
Mania, puerperal .....	..	2	2
Mania, recurrent .....	3	3	6
Mania, toxic .....	18	6	24
Melancholia, acute .....	11	14	25
Melancholia, agitata .....	2	1	3
Melancholia, recurrent .....	1	5	6
Insanity, adolescent .....	12	11	23
Total .....	58	51	109

TABLE XIX.

Age—	AGE AT DEATH.		
	Men.	Women.	Total
Ten to twenty years .....	1	1	2
Twenty to twenty-five years .....	2	1	3
Twenty-five to thirty years .....	7	10	17
Thirty to thirty-five years .....	6	3	9
Thirty-five to forty years .....	11	2	13
Forty to forty-five years .....	10	3	13
Forty-five to fifty years .....	10	2	12
Fifty to sixty years .....	18	25	43
Sixty to seventy years .....	12	12	24
Seventy to eighty years .....	7	15	22
Eighty to ninety years .....	6	12	18
Over ninety years .....	..	1	1
Total .....	90	87	177

TABLE XX.

## MENTAL DISEASES OF THOSE WHO DIED.

Mental Disease—	MENTAL DISEASES OF THOSE WHO DIED.		
	Men.	Women.	Total
Mania, acute .....	4	6	10
Mania, chronic .....	1	1	2
Mania, epileptic .....	2	..	2
Mania, toxic .....	2	..	2
Melancholia, acute .....	5	9	14
Melancholia, agitata .....	1	2	3
Melancholia, chronic .....	2	..	2
Melancholia, recurrent .....	..	1	1
Dementia, epileptic .....	4	4	8
Dementia, organic .....	3	2	5
Dementia, parietic .....	23	3	26
Dementia, senile .....	14	30	44
Dementia, terminal .....	20	19	39
Imbecility .....	2	1	3
Imbecility, with epilepsy .....	..	2	2
Insanity, adolescent .....	4	4	8
Paranoia .....	2	2	4
Idiocy .....	1	1	2
Total .....	90	87	177

TABLE XXI.

CAUSES OF DEATH.		Men.	Women.	Total.
<i>Causes—</i>				
<b>Mania:</b>				
Acute, with carcinoma ..		1		1
Acute, with exhaustion ..	2	3		5
Acute, with locomotor ataxia ..	1	..		1
Acute, with nephritis ..	2	1		3
Acute, with tubercular enteritis ..	..	1		1
Chronic, with cerebral hemorrhage ..	1	..		1
Epileptic, with convulsions ..	2	..		2
Recurrent, with nephritis ..	..	1		1
Toxic, with chronic nephritis ..	1	..		1
<b>Melancholia:</b>				
Acute, with diabetes mellitus ..	..	1		1
Acute, with endocarditis ..	..	4		4
Acute, with entero-colitis ..	..	1		1
Acute, with fracture of skull ..	1	..		1
Acute, with inanition ..	1	..		1
Acute, with insolation ..	1	..		1
Acute, with nephritis ..	..	2		2
*Acute, with tuberculosis ..	1	1		2
Agitata, with chronic nephritis ..	..	1		1
Agitata, with exhaustion ..	1	1		2
Chronic, with cerebral hemorrhage ..	1	..		1
Chronic, with chronic nephritis ..	1	1		2
Stuperous, with pneumonia ..	1	..		1
<b>Dementia:</b>				
Epileptic, with acute pulmonary œdema ..	1	..		1
Epileptic, with arterio-sclerosis ..	1	..		1
Epileptic, with chronic endocarditis ..	..	1		1
Epileptic, with convulsions ..	1	..		1
Epileptic, with exhaustion ..	1	..		1
Epileptic, with pneumonia ..	1	2		3
Epileptic, with status epilepticus ..	..	1		1
Organic, with cerebral hemorrhage ..	1	..		1
Organic, with erysipelas ..	..	1		1
Organic, with exhaustion ..	1	..		1
Organic, with nephritis ..	1	..		1
Organic, with pneumonia ..	..	1		1
Paretic, with chronic endocarditis ..	..	2		2
Paretic, with chronic nephritis ..	1	..		1
Paretic, with convulsions ..	1	..		1
Paretic, with exhaustion ..	10	2		12
Paretic, with hypostatic pneumonia ..	8	..		8
Paretic, with intestinal obstruction ..	1	..		1
Paretic, with pulmonary œdema ..	2	..		2
Senile, with acute enteritis ..	..	1		1
Senile, with arterio-sclerosis ..	1	2		3
Senile, with arteritis ..	1	..		1
Senile, with bronchitis ..	..	1		1

\* With pulmonary tuberculosis.

Senile, with carcinoma ..	1	1	
Senile, with cerebral hemorrhage ..	2	2	
Senile, with dysentery ..	1	1	
Senile, with endocarditis ..	1	9	10
Senile, with exhaustion ..	5	2	7
Senile, with hypostatic pneumonia ..	1	4	5
Senile, with myocarditis ..	..	1	1
Senile, with nephritis ..	3	2	5
Senile, with pneumonia ..	1	3	4
Senile, with pulmonary œdema ..	1	..	1
Senile, with tuberculosis ..	..	1	1
Terminal, with arterio-sclerosis ..	2	1	3
Terminal, with cerebral hemorrhage ..	2	1	3
Terminal, with chronic nephritis ..	3	3	6
Terminal, with colitis ..	1	1	2
Terminal, with endocarditis ..	..	2	2
Terminal, with entero-colitis ..	1	..	1
Terminal, with exhaustion ..	..	2	2
Terminal, with hypostatic pneumonia ..	2	1	3
Terminal, with inanition ..	..	1	1
Terminal, with intestinal obstruction ..	1	..	1
Terminal, with pneumonia ..	..	2	2
Terminal, with tubercular enteritis ..	..	1	1
Terminal, with tubercular laryngitis ..	1	..	1
*Terminal, with tuberculosis ..	6	3	9
Paranoia:			
With chronic nephritis ..	..	1	1
With mitral regurgitation ..	1	..	1
*With tuberculosis ..	1	1	2
Idiocy:			
With status epilepticus ..	1	..	1
*With tuberculosis ..	..	1	1
Imbecility:			
With organic heart disease ..	1	..	1
With pulmonary œdema ..	..	1	1
*With tuberculosis ..	1	..	1
Imbecility with Epilepsy:			
With convulsions ..	..	1	1
*With tuberculosis ..	..	1	1
Insanity of Adolescence:			
With acute pulmonary œdema ..	1	..	1
With chronic tubercular peritonitis ..	1	..	1
*With tuberculosis ..	2	4	6
Total .....	90	87	177

\*With pulmonary tuberculosis.

TABLE XXII.

SHOWING YEARLY INCREASE OF POPULATION SINCE OPENING OF INSTITUTION.

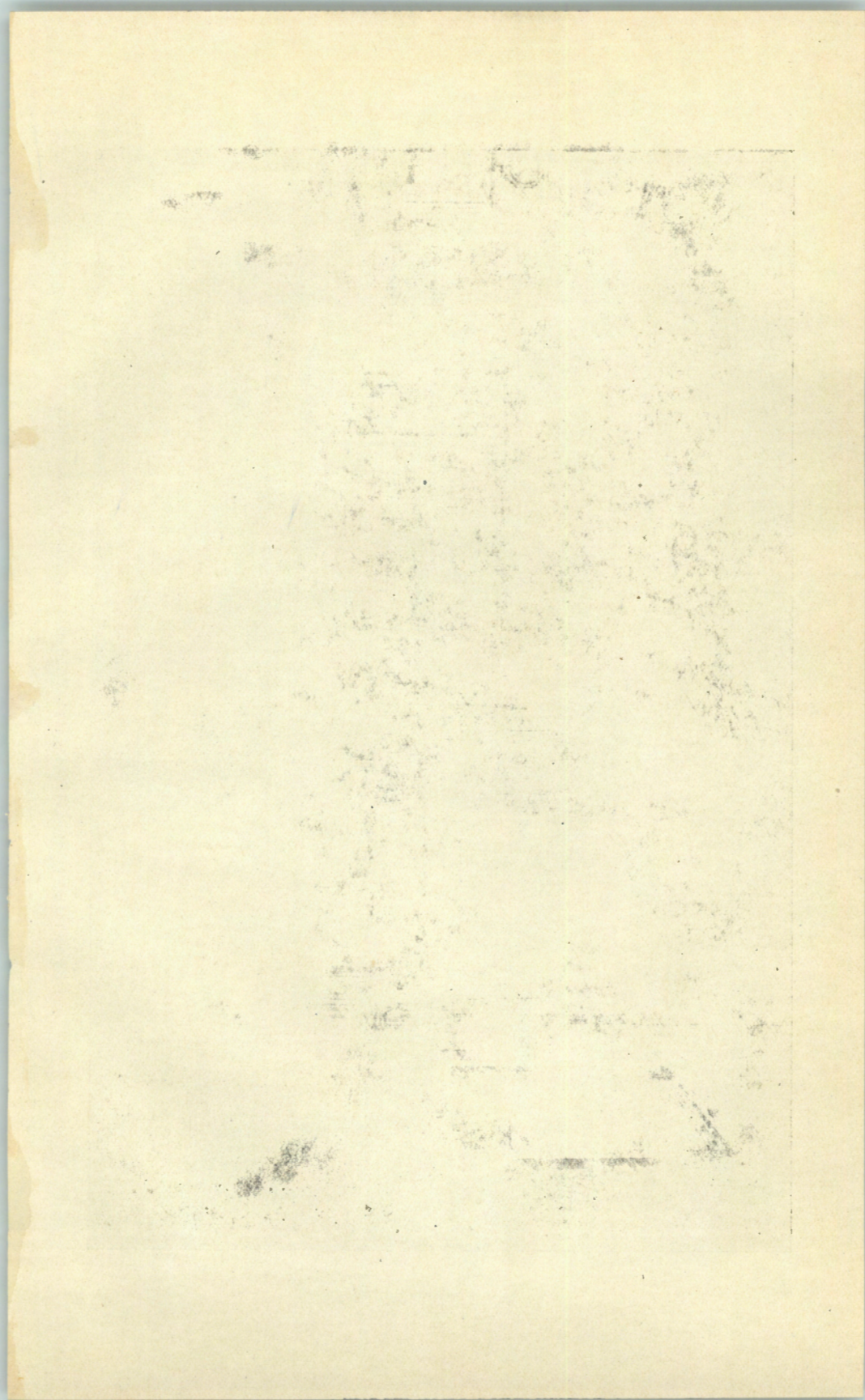
<i>Year.</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>	<i>Increase.</i>
October 31st, 1876 .....	159	183	342	...
October 31st, 1877 .....	216	229	445	103
October 31st, 1878 .....	227	253	480	35
October 31st, 1879 .....	248	279	527	47
October 31st, 1880 .....	277	309	586	59
October 31st, 1881 .....	310	331	641	55
October 31st, 1882 .....	321	346	667	26
October 31st, 1883 .....	330	377	707	40
October 31st, 1884 .....	371	374	745	38
October 31st, 1885 .....	415	414	829	84
October 31st, 1886 .....	415	441	856	27
October 31st, 1887 .....	434	439	873	17
October 31st, 1888 .....	463	441	904	31
October 31st, 1889 .....	427	430	*857	...
October 31st, 1890 .....	450	436	886	29
October 31st, 1891 .....	455	443	898	12
October 31st, 1892 .....	471	478	949	51
October 31st, 1893 .....	509	500	1,009	60
October 31st, 1894 .....	520	530	1,050	41
October 31st, 1895 .....	541	575	1,116	66
October 31st, 1896 .....	538	550	†1,088	...
October 31st, 1897 .....	593	584	1,177	89
October 31st, 1898 .....	618	618	1,236	59
October 31st, 1899 .....	658	644	1,302	66
October 31st, 1900 .....	696	693	1,389	87
October 31st, 1901 .....	707	683	†1,390	1
October 31st, 1902 .....	729	732	1,461	71
October 31st, 1903 .....	744	761	§1,505	44
October 31st, 1904 .....	789	812	1,601	96
October 31st, 1905 .....	834	840	1,674	73
October 31st, 1906 .....	872	907	1,779	105
October 31st, 1907 .....	917	907	1,824	45

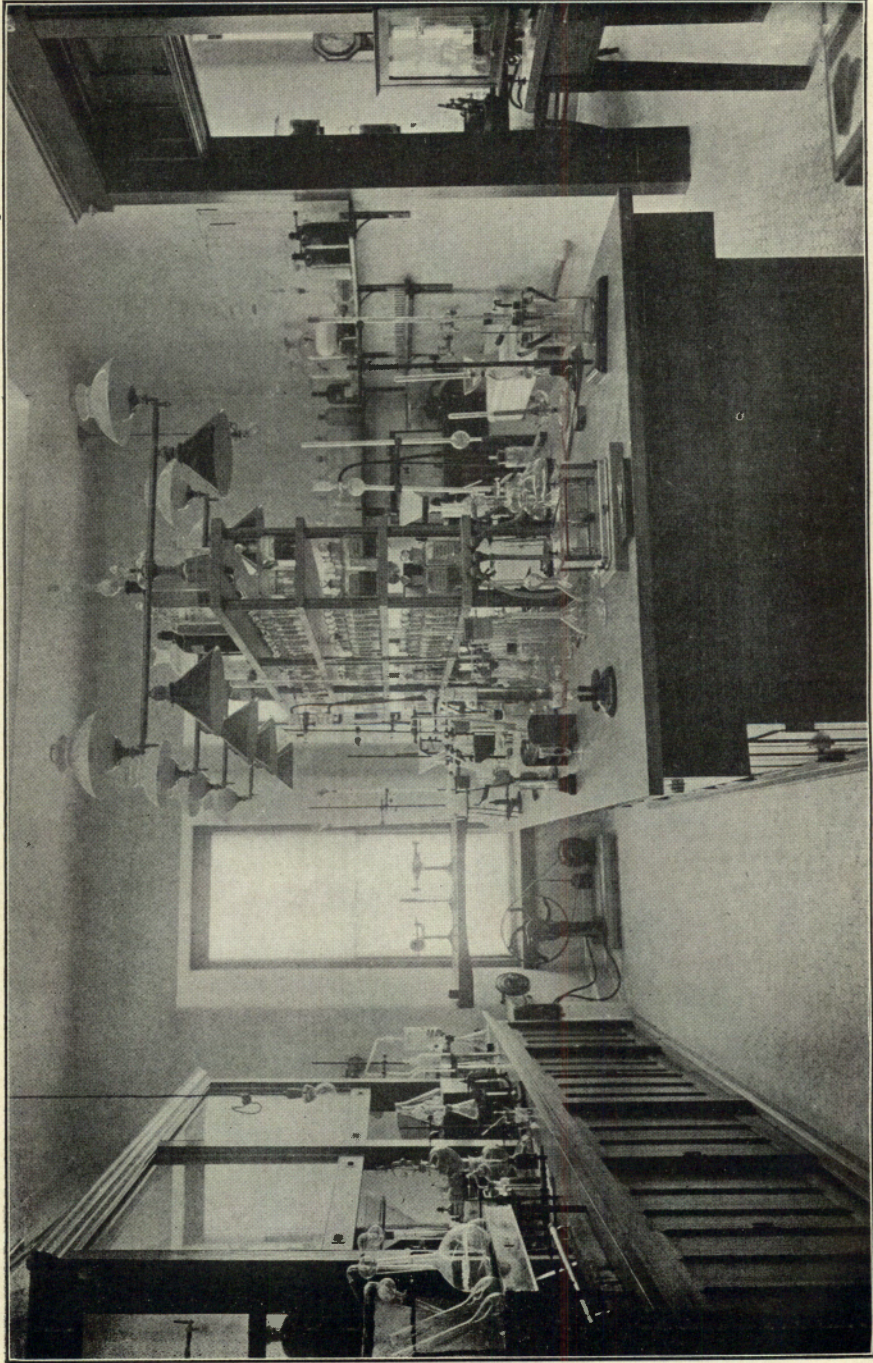
\* One hundred patients transferred to Essex County Hospital.

† Eighty-five patients transferred to Hudson County Hospital.

‡ Twenty-five patients removed by Hudson and Passaic Counties.

§ Nineteen private patients removed to Sailors' Snug Harbor, N. Y.





DEPARTMENT OF CHEMISTRY—PATHOLOGICAL LABORATORY

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REPORT OF H. AUSTIN COSSITT, M.D.,  
PATHOLOGIST.

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REPORT OF H. ARSTIN-COSZITZ, M.D.  
PATHOLOGIST

## REPORT IN PATHOLOGY.

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*To the Medical Director:*

I herewith beg to submit a brief report of the Pathological Department of this Hospital, covering the year ending October 31st, 1907.

During the year eighteen autopsies were performed, nine males and nine females. Of the eighteen post-mortem examinations, seventeen were of adults and one of a child nine months old, that was born in the Hospital and subsequently died of cholera infantum.

The average age at death was 50.1 years. The average duration of mental disease was 9.1 years.

As regards color, fifteen were white, one yellow (Japanese) and two colored.

The nature of the mental disease in the seventeen adults which came to autopsy was as follows:

Melancholia, acute .....	2
Mania, chronic .....	1
Paranoia .....	1
Dementia, præcox .....	2
Dementia, paretic .....	1
Dementia, terminal .....	7
Dementia, senile .....	2
Dementia, epileptic .....	1
Total .....	17

Adding the above case of paresis to our previous records, we have to date the autopsy findings of twenty-three paretics. In these, widespread arterio-sclerosis has been the most common lesion presented, and 91 per cent. have also had some form of nephritis.

A few cases which have come to autopsy deserve special mention:

Autopsy No. 349.—Female, age 51; presented a large encysted gall stone and fatty degeneration of the liver.

Autopsy No. 351.—Male, white, age 30; dementia præcox of three years' duration; presented a lateral sinus thrombosis, following an otitis media, and extending into the mastoid cells; an extensive miliary tuberculosis was also found.

Autopsy No. 352.—Female, white, age 51; dementia parietic of four years' duration; exhibited the following: Chronic meningo-encephalitis with general cerebral softening; general arterio-sclerosis; chronic endocarditis with cardiac atrophy; chronic interstitial nephritis and right middle ear disease.

Autopsy No. 356.—Female, white; presented a pulmonary tuberculosis and coloptosis.

Autopsy No. 360.—Male, colored, age 47; mania chronic of eight years' duration; presented an extensive cerebral infarct involving the area upon the right hemisphere from the fissure of Rolando forward, and upon the superior frontal lobe, also along superior longitudinal fissure, also extensive general arterio-sclerosis.

Autopsy No. 361.—Male, white, aged 59; dementia terminal, following manic-depressive insanity of thirty-seven years' duration; presented an area of cystic degeneration of temporo-sphenoidal, posterior third of middle and inferior frontal convolutions, and extending along the distribution of the middle cerebral artery; also extensive general arterio-sclerosis.

Autopsy No. 362.—Male, white, age 55; dementia terminal, following mania chronic; exhibited an extensive cerebral hemorrhage of right temporal region, involving mostly the inferior and middle temporal lobe; also a general arterio-sclerosis.

Autopsy No. 364.—Female, white, age 60; dementia senile of two years' duration; had a sub-dural hemorrhage, cerebral atrophy and a general arterio-sclerosis.

Autopsy No. 366.—Male, Japanese, age 24; dementia præcox of one and one-half years' duration; exhibited a general miliary tuberculosis which also involved the brain.

Of the seventeen autopsies of adults, five had gall stones, varying in number from one to sixty-six; five women and eight men presented well-marked arterio-sclerosis.

## CLINICAL LABORATORY WORK.

Investigations have been conducted along practically the same lines as during the previous year, consisting of general chemical, microscopical, bacteriological examinations of blood, gastric contents, sputum, urine, throat swabs, exudates, transudates, Widal's reaction for typhoid fever, pathological tissues, &c., all as an aid in the diagnosis and treatment of the patients in the Hospital.

## URINALYSIS.

Number of complete urinalyses .....	663
For tubercle bacilli .....	57
For gonococci .....	2
For malignancy and melanin .....	16
Total number examined .....	738

## BLOOD EXAMINATIONS.

Complete .....	27
Differential counts .....	18
Plasmodium malarie .....	37
Widal's reaction for typhoid fever .....	32
Iodine-reaction .....	25
Spirochæta pallida .....	2
Blood cultures .....	7
Total .....	148

## SPUTUM EXAMINATIONS.

For tubercle bacilli .....	104
For pneumococci .....	40
For Pfeiffer's bacillus .....	4
For echinococci .....	2
Total sputum examinations .....	150

## THROAT EXAMINATIONS.

For Klebs-Loeffler bacillus, swab cultures .....	38
For tubercle bacilli, swabs .....	6
For Frankel's pneumococcus .....	4
To determine etiological factor .....	20
Total throat examinations .....	68

## EYE EXAMINATIONS.

For gonococci .....	1
To determine etiological factor .....	1
	<hr/>
Total eye examinations .....	2

## EXAMINATIONS OF PUS.

From male uretha, for gonococci .....	3
Vaginal discharges, for gonococci .....	2
Uterine discharges, for gonococci .....	4
Vaginal discharges, for tubercle bacilli .....	4
Uterine discharges, for tubercle bacilli .....	2
From abscess, for tubercle bacilli .....	6
To determine etiological factor .....	7
From ear, for tubercle bacilli .....	2
From ear, to determine etiological factor .....	1
From eye .....	1
For glanders .....	2
	<hr/>
Total .....	34

## EXAMINATIONS OF FLUIDS.

Pleural, chemical and microscopical examination .....	14
Pleural, for tubercle bacilli .....	14
Pleural, for pneumococci .....	14
Abdominal fluid, chemical and microscopical examination .....	2
Abdominal fluid, for tubercle bacilli .....	2
Cystic, chemical and microscopical examination .....	1
Hydrocele .....	1
Cerebro-spinal fluid .....	2
Spermatic fluid .....	1
	<hr/>
Total examination of fluids .....	51

## PATHOLOGICAL TISSUE.

Removed at operation, for diagnosis .....	11
From animals .....	2
Tumors .....	4
Autopsies .....	2
Tissue, for tubercle bacilli .....	4
Uterine scrapings .....	1
Gall stones .....	5
	<hr/>
Total number of examinations of pathological tissues .....	29

## CYTODIAGNOSIS.

Fluid from pleural cavity .....	14
Fluid from abdominal cavity .....	2
Cerebro-spinal fluid .....	2
Other fluids .....	2
Total .....	20

## EXAMINATIONS FOR TUBERCLE BACILLI.

Urine .....	57
Sputum .....	104
Pus from abscesses .....	6
Pus from ear .....	3
Throat .....	6
Vaginal discharge .....	4
Uterine discharge .....	2
Pleural fluid .....	14
Abdominal fluid .....	2
Tissue, for tubercle bacillus .....	6
Uterine scrapings .....	1
Other fluids .....	2
Total examinations for tubercle bacilli .....	197

## MISCELLANEOUS EXAMINATIONS.

Stomach contents and vomit .....	21
Feces .....	4
Toxicological examinations .....	4
Water .....	24
Milk .....	14
Placentæ .....	5
Drugs .....	2
Total .....	74

## IMPROVEMENTS IN THE LABORATORY.

The equipment during the year of the Laboratory with a new chemical table, having an alberene stone top, shelving, sink and gutters, and supplied with gas, hot and cold water, electricity, vacuum water pumps, compressed air which can be regulated from one to twenty-five pounds pressure, and an automatic vacuum outfit, have supplied the Laboratory with a want long and much needed.

From the last appropriation for the Laboratory, the following equipment has also been added: Water and milk analysis apparatus, large electric centrifuge, automatic electric compressed air and vacuum outfit with blast lamp, Beckmann's freezing apparatus, Zeiss lense, Zeiss refractometer, platinum dishes and volumeteric apparatus.

During the year the Laboratory Library has been increased by the addition of some of the latest editions of pathological books, and is also supplied with the following journals: "The American Journal of Physiology," "The Journal of Biological Chemistry," "The Journal of Medical Research," "The Journal of Experimental Medicine" and the "Journal of Pathology and Bacteriology," all of which are a source of much gratification.

## LABORATORY REQUIREMENTS.

The Pathological Department is very much in need of a modern autopsy set of instruments, a photographic outfit for photographing gross lesions found at autopsy, additional platinum ware, a large water still and the addition to the present equipment of some new apparatus for blood examination and chemical work, all of which could be obtained for the sum of \$600.

In conclusion, I wish to again thank you for your continued support and encouragement, and to acknowledge my indebtedness to the other members of the Medical Staff, and I also wish to acknowledge the faithful and efficient work of Mr. Frode Heiman, the Laboratory Assistant.

Respectfully submitted,

H. AUSTIN COSSITT,

*Pathologist.*

## DONATIONS.

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The following donations have been received and grateful acknowledgment is hereby made of them. Periodicals, illustrated magazines, books and newspapers are always welcomed by the patients and much appreciated.

Mr. Robert F. Fenno, Plainfield, N. J.....	Books
Mrs. George S. Allan, Erwin Park, Montclair, N. J.....	Magazines
Church Periodical Club of Christ Church, East Orange, N. J.....	Magazines
St. James' Church, Maplewood, N. J.....	Magazines
St. Paul's Episcopal Church, East Orange, N. J.....	Magazines
The Observer .....	Hoboken
The Railroad Employe .....	Hoboken
The Evening Journal .....	Jersey City
The New Jersey Staats Zeitung .....	Jersey City
The Bayonne Times .....	Bayonne
Hudson County Review .....	Town of Union
The Kearney Observer .....	Kearney and Arlington
Hunterdon County Democrat .....	Flemington
Hunterdon Republican .....	Flemington
Hunterdon Independent .....	Frenchtown
The Clinton Democrat .....	Clinton
The Lambertville Record .....	Lambertville
The Newark Sunday Call .....	Newark
Town Talk .....	Newark
New Jersey Trade Review .....	Newark
New Jersey Deutsche Zeitung .....	Newark
South Orange Bulletin .....	South Orange
Union Democrat .....	Rahway
The New Jersey Advocate .....	Rahway
Evening Record .....	Hackensack
The Hackensack Republican .....	Hackensack
The Bergen County Index .....	Hackensack
The Bloomfield Record .....	Bloomfield
The Bloomfield Citizen .....	Bloomfield
The Orange Journal .....	Orange
The Short Hills Item .....	Short Hills
Paterson Volksfreund .....	Paterson
De Telegraaf .....	Paterson
Paterson Evening News .....	Paterson
The Morning Call .....	Paterson

The Paterson Daily Press .....	Paterson
Paterson Daily Guardian .....	Paterson
Passaic Daily News .....	Passaic
Passaic City Record .....	Passaic
The Constitutionalist .....	Plainfield
The Daily Press .....	Plainfield
The Summit Herald .....	Summit
The Summit Record .....	Summit
Elizabeth Daily Journal .....	Elizabeth
Union County Record .....	Elizabeth
Bergen County Herald .....	Rutherford
Carlstadt Freie Press .....	Carlstadt
The Morris County Chronicle .....	Morristown
The True Democrat Banner .....	Morristown
The Evening Express .....	Morristown
The Jerseyman .....	Morristown
The Iron Era .....	Dover
The Dover Index .....	Dover
The Madison Eagle .....	Madison
The Rockaway Record .....	Rockaway
The Boonton Weekly Journal .....	Boonton
The New Jersey Herald .....	Newton
The Warren Democrat .....	Phillipsburg
The Warren Republican .....	Hackettstown
The Warren Journal .....	Belvidere
The Warren Tidings .....	Washington
The Washington Star .....	Washington

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TREASURER'S REPORT.

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THE TREASURER'S REPORT

## TREASURER'S REPORT.

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*To the Managers of the New Jersey State Hospital at Morris Plains, New Jersey:*

GENTLEMEN—The Treasurer of the New Jersey State Hospital at Morris Plains, N. J., respectfully submits the following abstract of the receipts and disbursements from November 1st, 1906, to October 31st, 1907, inclusive:

### RECEIPTS.

Balance on hand November 1st, 1906 .....		\$12,427 68
From State Treasurer, for convict patients .....	\$16,020 71	
From State Treasurer, for county patients .....	123,873 13	
From State Treasurer, for State indigent patients ..	74,708 26	
From sundry counties for maintenance of county patients .....	138,701 78.	
From private patients .....	65,684 98	
From hides, tallow, &c. ....	13,137 70	
From First National Bank, Morristown, N. J., for interest on deposit .....	102 38	
	432,228 94	
		\$444,656 62

### DISBURSEMENTS.

By orders of Warden .....	\$442,217 99	
By balance in Treasurer's hands .....	2,438 63	
	\$444,656 62	

Respectfully submitted,  
G. C. HINCHMAN,  
*Treasurer.*

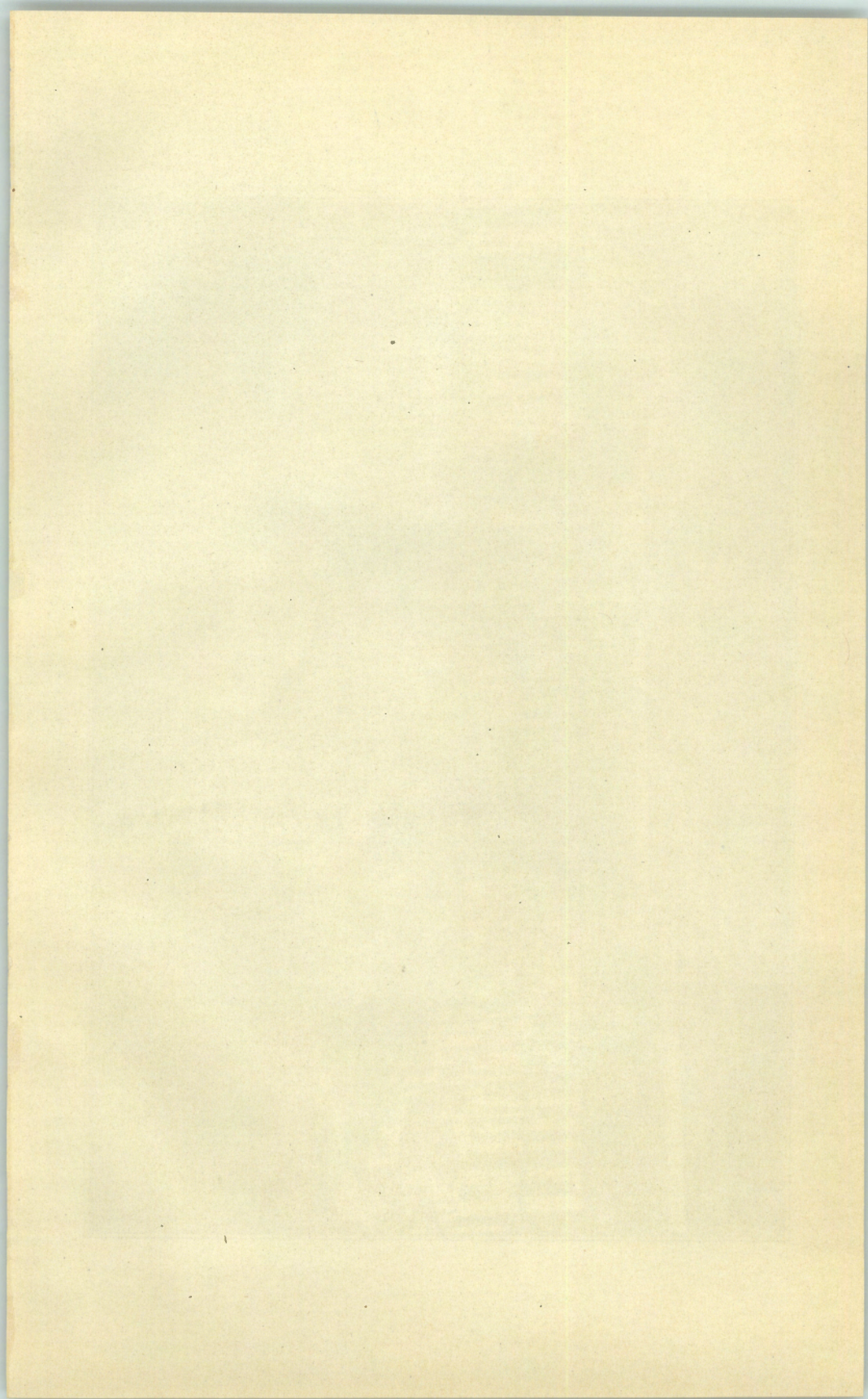
THE NEW JERSEY STATE HOSPITAL AT MORRIS PLAINS, N. J.  
November 14th, 1907.

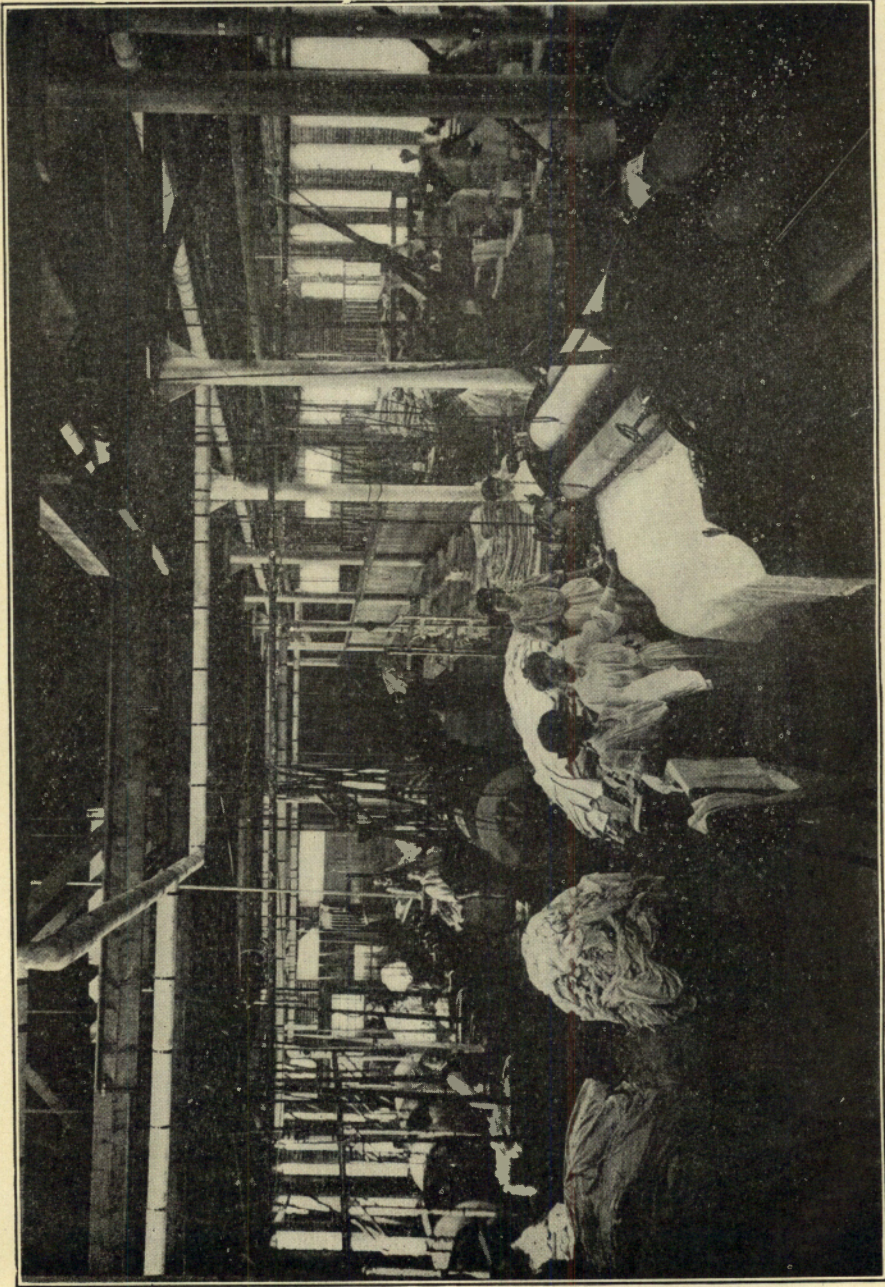
We hereby certify that we have examined the Treasurer's accounts, and compared the same with his books and vouchers, and find them in accordance with the above statement and correctly stated and balanced.

P. J. RYAN,  
J. A. McBRIDE,  
GEORGE W. JAGLE,  
*Auditing Committee.*

## RECAPITULATION.

State Treasurer—Convict Patients—		
First quarter .....	\$3,965 00	
Second quarter .....	3,965 00	
Third quarter .....	4,030 00	
Fourth quarter .....	4,060 71	
		\$16,020 71
State Treasurer—County Patients—		
First quarter .....	\$31,101 14	
Second quarter .....	31,062 00	
Third quarter .....	30,771 14	
Fourth quarter .....	30,938 85	
		123,873 13
State Treasurer—Indigent Patients—		
Second quarter .....	\$17,945 14	
Third quarter .....	\$17,808 72	
	18,791 57	
	36,600 29	
Fourth quarter .....	20,162 83	
		74,708 26
County Collectors—		
First quarter .....	\$31,684 31	
Second quarter .....	42,440 12	
Third quarter .....	34,229 37	
Fourth quarter .....	30,347 98	
		138,701 78
Private Patients—		
First quarter .....	\$17,309 51	
Second quarter .....	15,934 67	
Third quarter .....	16,281 60	
Fourth quarter .....	16,159 20	
		65,684 98
Hides, Tallow, &c.—		
First quarter .....	\$2,266 92	
Second quarter .....	3,158 92	
Third quarter .....	4,454 61	
Fourth quarter .....	3,257 25	
		13,137 70
Interest from First National Bank, Morristown, N. J.—		
Six months' interest to January 1st, 1907.....	\$51 76	
Six months' interest to July 1st, 1907.....	50 62	
		102 38
		\$432,228 94
Orders paid—		
First quarter .....	\$91,739 77	
Second quarter .....	118,991 47	
Third quarter .....	109,568 54	
Fourth quarter .....	121,918 21	
		\$442,217 99





LAUNDRY

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WARDEN'S REPORT.

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WARDEN'S REPORT

## WARDEN'S REPORT.

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*To the Board of Managers of the New Jersey State Hospital at Morris Plains, N. J.:*

GENTLEMEN—I have the honor to present to you the annual report of the business department for the fiscal year ending October 31st, 1907, together with a statement of resources and liabilities and abstract of accounts. Reports are appended showing in detail the products of the farm and garden, also reports of the several mechanical departments.

The financial statement shows a balance of resources above liabilities of \$1,532.56. The advance in cost of everything entering into the maintenance of the institution necessitated the expenditure of the income.

The necessary improvements and repairs to buildings, renewal and repairs to plumbing, have been carried on during the year. The products of the farm, dairy, garden, &c., exceed in quantity and value those of any previous year.

For a number of years such improvements as were needed have been enumerated and reasons given why they were necessary. Appropriations have been made for a number of the items, but there yet remains for consideration and addition to the dairy barn, improvements to the gas plant, installation of a cold-storage plant, storeroom for supplies, enlarging one of the reservoirs, and sewage disposal. In order that these matters are not overlooked and that they be brought to the attention of the Legislature, they are again taken up in detail.

In addition to the above, attention is directed to the lack of proper room and facilities for preparing and cooking food for the occupants of the main building, also to the fact that payment for clothing furnished the State indigent and convict patients, covering a period of three years, has not been allowed.

## DAIRY.

In my report of last year I recommended that an addition of fifty feet be built to the dairy barn. I renew this recommendation, feeling that the Legislature should give this matter consideration.

The amount of milk required from the dairy is over 1,000 quarts per day. To go into the market and purchase the necessary quantity of milk would cost the Hospital over \$22,000 per year. We need and should have, in order that the dairy be conducted properly, ample room for housing the cows, and appliances for the general care of the milk, which would include a dairy building with proper facilities for cooling and bottling the milk.

There is nothing that enters into the food products that requires more care to prevent disease germs from being taken into the system than milk. This is so well known that it does not require any argument to convince even a layman of the importance of providing the best sanitary appliances for its production and care. The product of the Hospital dairy is a milk of high grade. Samples have been taken by inspectors sent out by the State Board of Health, analysis made and the reports show that it is of high standard and above that required by law.

## GAS PLANT.

I would like to see an up-to-date electric plant of sufficient capacity to do all lighting and run many parts of the machinery. The gas plant could be relied on in emergencies and gas utilized for cooking purposes. Gas as a fuel is more desirable than coal. Unless an electric plant is installed and the main building equipped for being lighted by electricity it will be necessary to expend money at the gas-house in enlarging the purifying system and constructing a holder with a capacity of 80,000 to 100,000 cubic feet of gas.

## WATER-SUPPLY.

During the past year, for a short period of time, a severe drouth was prevalent. The dangerous conditions that would have arisen if the drouth had commenced earlier in the season or had continued for a few weeks longer were apparent. Copious rains fell in time to relieve the situation. It is important that provision be made for greater storage capacity and the matter should be promptly dealt with. This matter is of such a serious nature I feel that I would be neglecting my duty if I did not again bring it to your attention.

## SEWAGE DISPOSAL SYSTEM.

Last year attention was directed to the necessity of enlarging and extending the sewage disposal plant. The demands upon the system are constantly increasing, and although fair results are being obtained the disposal beds are being overworked. Some action should be taken, and without delay, with a view of increasing the efficiency of the system, as it will require time to make necessary additions and improvements.

## STOREHOUSE.

In constructing the main Hospital building, no provision was made for storing supplies. We are now, for storeroom purposes, occupying rooms intended for other important uses, and totally unfit for storing and distributing the supplies of the institution. We should have a storehouse independent of the main building, located in the rear of the boiler-house, so that all the supplies for both the main and dormitory building can be unloaded direct from the cars into such storerooms; they would then be at a central point for distribution and under closer supervision of the Storekeeper. This would save the cost of handling freight and carting it to the present elevator, which is some distance from the track.

## COLD STORAGE.

The recommendation and request for a cold storage plant, as contained in the report of last year, set forth the reasons why it is necessary. The room that is well adapted to this purpose is situated in the basement, underneath the bakery plant. The present system of cold storage is limited and unsatisfactory, making it impossible to purchase, on account of lack of room, but a week's supply of meat. A plant of sufficient capacity would make it possible to purchase meat in carload lots and at less cost.

## KITCHEN.

A most important and necessary improvement to be considered is that of providing ample room, proper conditions and facilities for preparing and cooking the food served to the occupants of the main building. The kitchens, main and special diet, together with the rooms in which the kitchen utensils are washed, are located in the basement.

The rooms used for these purposes are small and were intended to provide for about one-half the present population.

The kitchens are too small, are poorly lighted and lack means for proper ventilation. Owing to the intense heat and poor ventilation the conditions to which the employes are subjected, especially during the warm season, are almost unbearable. I suggest and recommend that a one-story building of sufficient height and floor space be built in the rear of and between the main building and the building formerly occupied by the bakery plant. For a kitchen this location is an ideal one and good service would be insured. The estimated cost of this building and necessary equipment is \$28,000.

## CLOTHING FURNISHED STATE INDIGENT AND CONVICT PATIENTS.

A law was enacted in 1895 which provided that a patient in indigent circumstances, who has no legal settlement in this State, shall be supported at the expense of the State. At the close of the

year 1895 the State indigent patients in this institution numbered five. The increase in number has been rapid, as shown by the following statement: The number of State indigent patients at the close of the fiscal year 1895 was 5; 1896, 19; 1897, 41; 1898, 77; 1899, 90; 1900, 116; 1901, 144; 1902, 172; 1903, 199; 1904, 229; 1905, 271; 1906, 312; 1907, 390.

Prior to November 1st, 1904, an appropriation was made each year covering the charges for clothing furnished these patients. For the charges each fiscal year; from that date, no appropriations have been made. The Hospital has furnished the State indigent and convict patients with clothing to the value of \$20,617.52, for which there has been no appropriation. If the Legislature should appropriate the amount as referred to above and should continue to appropriate each year sufficient to cover the cost of clothing furnished the State indigent and convict patients, the condition of the institution financially would be improved.

#### PLUMBING.

The greater part of the plumbing originally installed in the main building has been *replaced* with plumbing of modern pattern; there still remains a portion of the old plumbing which is unsatisfactory owing to the fact that it is past repair and unsanitary. I consider it of the utmost importance that this matter receive consideration and that an appropriation be made to install new, up-to-date, sanitary plumbing. An approximate estimate of the cost is \$6,000.

#### GRADING—LAYING WALKS.

The work of grading around the dormitory building, planting trees, constructing walks and macadamizing the road leading to the building has been carried forward, the work being done by the Hospital employes and patients assigned by the Medical Director. It is desirable to continue and complete the walks on either side of the driveway leading up to the main building. This improvement was commenced a number of years ago, but we have been unable to complete it. Twenty-five hundred feet of walk on each side will be required to complete it to the entrance to the Hospital

property. If contracted for, this will cost about ninety cents per lineal foot. If the work of excavating for the foundations, filling with ashes (of which we have a sufficient quantity for the purpose) and constructing the walks is done by the Hospital employes and patients, the cost will be fifty-four cents per lineal foot.

#### NEW BAKERY AND LAUNDRY.

As stated in the report of last year, the contracts were awarded for the installation and equipment of the laundry and bakery. The machinery and appliances were installed in accordance with the contracts, and both plants are in every particular satisfactory.

#### FIRE-ESCAPES.

Equipping the several buildings with fire-escapes has been spoken of frequently. There are a number of fire-escape appliances and devices, many of which would not be practical for use by patients. The Medical Director has some data on this subject. During the past year fire-escapes have been erected at the State Hospital at Trenton, for which the Legislature appropriated \$12,500.

#### FIRE ALARM SYSTEM.

The present system for sending in an alarm of fire is unsatisfactory. A proper fire alarm equipment should be installed. Under the present system a call is sent on the 'phone to the fireman in charge at the boiler-room and the location of the fire given, and he, in turn, sounds the alarm on the whistle. Delay at the 'phone switchboard or in answering the 'phone in the boiler-room, or a mistake in sending or receiving the message, would result seriously. With an automatic system the transmission of the alarm would be instantaneous and the alarm on the whistle automatically sounded as well as on gongs located at various points, and the number of the box from which the alarm was sent recorded on the recording apparatus in the fire-house and at such other points as deemed

advisable. The proper number of fire alarm boxes should be provided to adequately cover the property to be protected, so placed as to be easy of access.

#### WATER MAIN AND FIRE HYDRANTS.

To provide for a supply of water for the dormitory building, a reservoir was constructed at an elevation of 255 feet above the hydrants at the main building. It was deemed wise to continue the line at the dormitory building to the rear of and around the main building. The new main was laid along the rear and around the ends of the building and connected with the old pipe line (from the low service reservoir), at points in front of the building 1,600 feet distant from each other, consequently the new line is incomplete. I recommend that the 1,600 feet of old pipe be replaced with new and heavier pipe; also that six hydrants be purchased to replace a like number of old hydrants now in use. When that is done the new line will be completed and all hydrants connected with the high service reservoir will be of modern pattern. If a break should occur in the old main during the progress of a fire the results would be serious.

#### ANNUAL APPRAISEMENT.

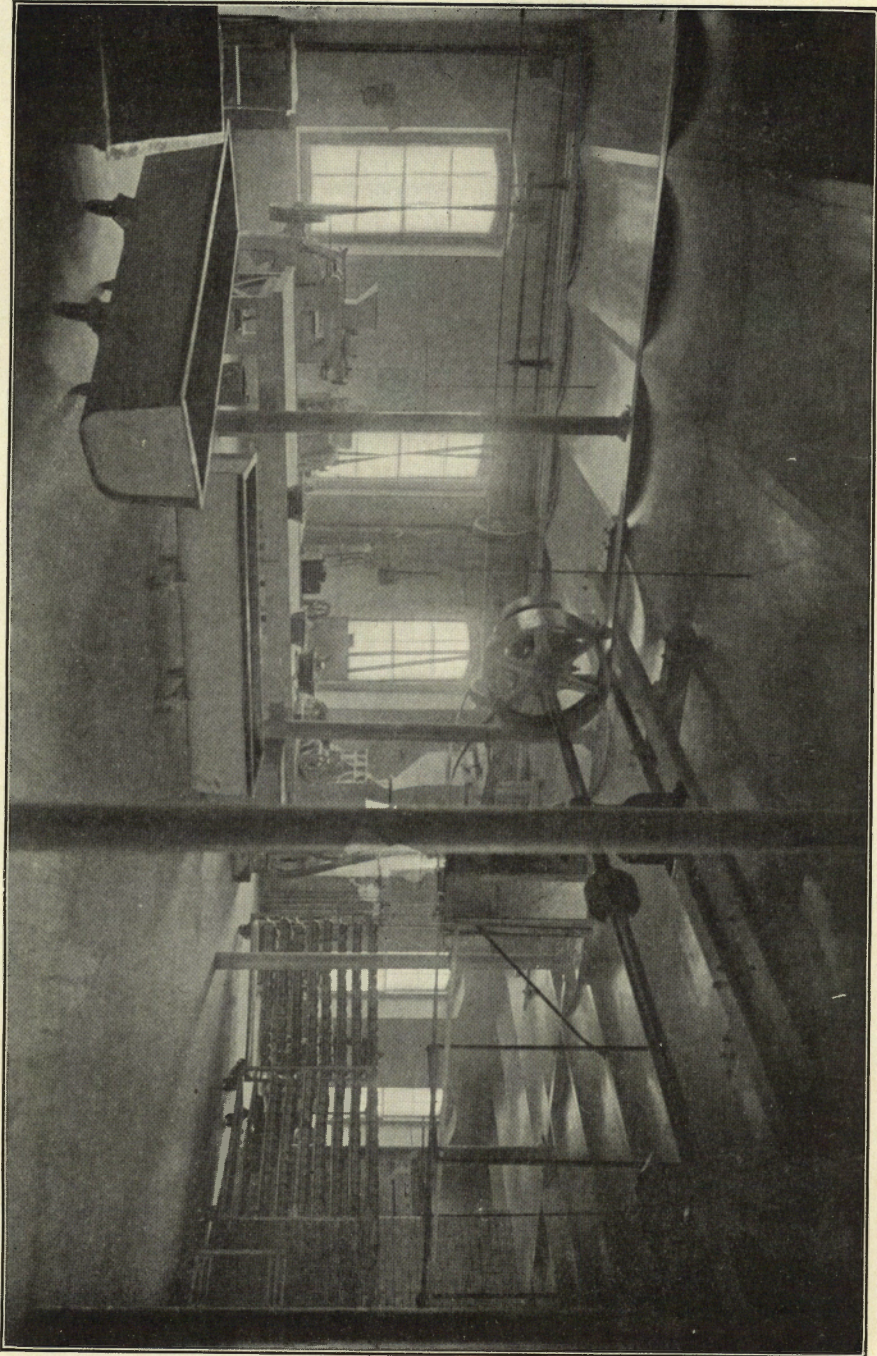
Mr. John Naughton and Mr. Charles W. Ennis, of Morristown, assisted in the appraisement of the personal property as listed in the inventory. The services rendered by these gentlemen were efficient and highly satisfactory. The increase in valuation over that of 1906 is due to the installation and equipping of the hydrotherapeutic room and electrotherapeutic room, an eye, ear, nose and throat operating and examination room; also laundry and bakery plants, increase in farm and garden products, housefurnishings and stock in all departments. The value of the property as appraised amounts to \$294,709.62.

REQUIREMENTS.

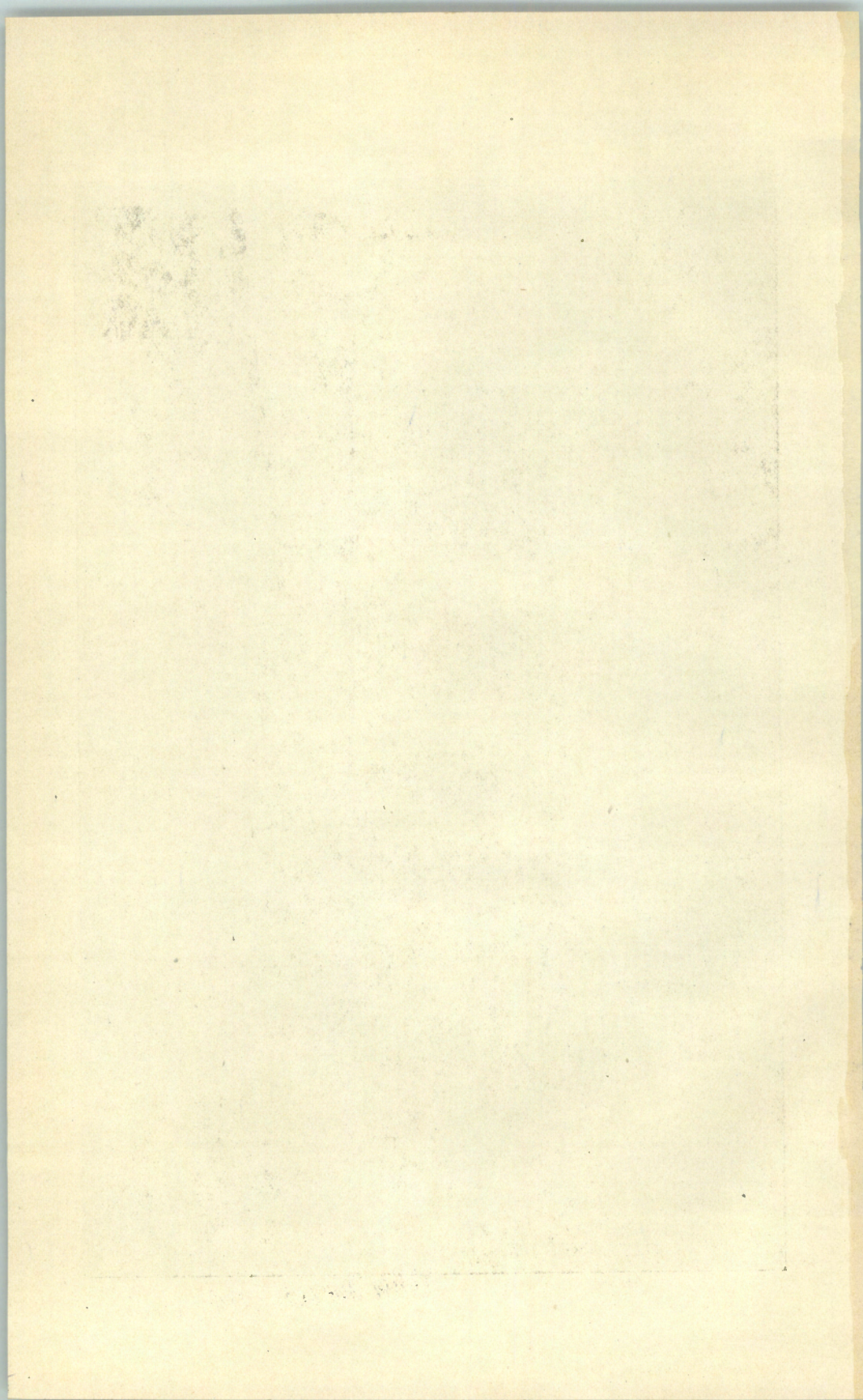
For the annual appraisal .....		\$75 00
For the salaries of resident officers .....		16,050 00
For the maintenance of county patients, based on an average of 1,250 patients for the year .....		130,000 00
For the maintenance of convict patients, based on an average of 70 for the year .....	\$18,200 00	
For clothing of convict patients .....	1,050 00	
		<hr/> 19,250 00
For the maintenance of State indigent patients, based on an average of 550 patients for the year..	114,400 00	
For clothing for State indigent patients .....	9,900 00	
		<hr/> 124,300 00
		<hr/> \$289,675 00
Deficiency officers' salaries, 1908 .....		\$500 00
For clothing furnished State indigent and convict patients covering a period of three years for which payment has not been allowed,		20,617 52

Respectfully submitted,  
M. K. EVERITT,  
*Warden.*

The New Jersey State Hospital at Morris Plains, October 31st,  
1907.



BAKERY



## RESOURCES.

Balance in hands of Treasurer .....	\$2,438 63	
Due from Hudson county, as per bills rendered .....	690 26	
Due from Hunterdon county, as per bills rendered...	1,519 84	
Due from Morris county, as per bills rendered .....	5,169 85	
Due from Mercer county, as per bills rendered .....	32 00	
Due from Passaic county, as per bills rendered .....	10,104 60	
Due from Warren county, as per bills rendered .....	2,460 82	
Due from State Treasurer for support of county patients .....	10,812 95	
Due from State Treasurer for support of State indigent patients .....	7,204 10	
Due from State Treasurer for support of convict patients .....	1,353 57	
Due from private patients, as per bills rendered .....	6,586 15	
Due for clothing furnished patients since bills were rendered .....	4,289 03	
Clothing carried in stock in storeroom .....	8,108 94	
Due for hay, hides, grease, &c., &c. ....	558 03	
Petty expense account .....	265 57	
Hay and hogs sold (not delivered) .....	2,700 00	
		\$63,794 34

## LIABILITIES.

Bills payable .....	\$34,453 73	
Payroll for October .....	11,790 17	
Private patients' accounts paid beyond October 31st,	7,456 72	
County patients' accounts paid beyond October 31st,	2,297 71	
Amount of bills rendered counties, unearned .....	2,836 19	
Amount of bills rendered private patients, unearned..	2,998 67	
Unclaimed wages, patients' moneys and vouchers on which payment was stopped .....	428 59	
Excess resources above liabilities .....	1,532 56	
		\$63,794 34

New Jersey State Library



## ABSTRACT OF ACCOUNTS.

FOR THE FISCAL YEAR ENDING OCTOBER 31ST, 1907.

G. C. HINCHMAN,

*Treasurer.*

*Dr.*

To balance, October 31st, 1906 .....	\$12,427 68
To amount received for board, clothing and incidental expenses of county patients .....	\$138,701 78
To amount received for board, clothing and incidental expenses of private patients .....	65,684 98
To amount received from State Treasurer for county patients .....	123,873 13
To amount received from State Treasurer for board of convict patients .....	16,020 71
To amount received from State Treasurer for board of State indigent patients .....	74,708 26
To amount received for hides, fat, grease and bones..	4,558 46
To amount received for hogs .....	5,417 74
To amount received for hay .....	1,385 66
To amount received for gas tar .....	426 25
To amount received for rags .....	165 23
To amount received for scrap iron .....	376 29
To amount received for incidentals .....	808 07
To amount received for interest .....	102 38
	432,228 94

432,228 94

\$444,656 62

*Cr.*

### DISBURSEMENTS.

Amusements .....	\$513 44
Beef .....	23,875 32
Books, stationery, printing and office supplies .....	1,563 20
Bedding, linen, &c. ....	16,005 46
Clothing (suits, dresses, underwear, shoes) .....	19,988 09
Coach stable .....	2,203 49
Crockery and cutlery .....	1,956 33
Clerical services .....	408 50
Dairy (includes stock, feed, labor) .....	16,963 83
Electrical (wages and supplies) .....	1,738 12

(87)

Farm (wages, tools, fertilizer, seeds, &c.)	\$11,628 83	
Furniture and carpets	5,092 78	
Fuel	32,106 09	
Flour	12,272 15	
Freight and train service	7,994 58	
Fruit	4,480 13	
Garden	5,942 96	
Gas fixtures, plumbing and plumbers' supplies	3,680 43	
Greenhouse	1,810 11	
Gas plant	8,958 94	
Grounds	1,599 64	
Grading, Annex building	3,468 13	
Household goods	7,111 10	
Heating and power plant	11,916 09	
Hogs (includes wages and cost of pigs)	2,593 35	
Insurance	3,030 78	
Ice	1,848 06	
Improvement of buildings	572 65	
Improvement of farm lands	216 38	
Laundry (wages and supplies)	10,877 81	
Medical supplies	4,125 73	
Miscellaneous expenses	2,057 86	
Medical library	806 95	
Newspapers	151 72	
Oil	1,152 53	
Pathological laboratory (wages and supplies)	927 35	
Postage	764 10	
Provisions and groceries	105,192 32	
Repairs to buildings	13,170 84	
Railroad repairs	989 18	
Refunding for unexpired time (of private patients discharged)	2,366 23	
Repairs to nurses' cottage	58 25	
Smith and wheelwright	1,924 95	
Sewer pipe	742 05	
Sewers	1,406 88	
Snow	225 88	
Tinware	1,430 57	
Telephone rental and tolls	1,064 50	
Telegrams	162 83	
Teaming	1,310 38	
Undertaker's charges	2,007 00	
Vegetables	4,376 80	
Ward supplies	2,313 93	
Water supply	2,018 82	
Wages	69,053 57	
		442,217 99
Balance in hands of Treasurer, October 31st, 1907		\$2,438 63

## APPENDIX TO WARDEN'S REPORT.

### DAIRY, FARM AND GARDEN PRODUCTS.

361,636	Quarts milk (average number of cows milked, 97.39; average per cow, 10.17 quarts per day) .....	@ \$0 06	\$21,698 16
3,490 <sup>2</sup> / <sub>12</sub>	Dozen eggs .....	" 26	907 44
770 <sup>1</sup> / <sub>2</sub>	Pounds broilers .....	" 30	231 15
1,177	Pounds roasters and fowls .....	" 17	200 09
260	Tons hay .....	" 15 00	3,900 00
15	Tons rye-straw .....	" 15 00	225 00
18	Tons wheat-straw .....	" 10 00	180 00
175	Bushels rye .....	" 70	122 50
400	Bushels wheat .....	" 90	360 00
310	Bushels hand-picked apples .....	" 75	232 50
160	Bushels wind-fall apples .....	" 50	80 00
15	Bushels crab apples .....	" 75	11 25
13,950	Bundles fodder corn .....	" 03	418 50
1,385	Bushels shelled corn .....	" 60	831 00
450	Tons manure .....	" 2 00	900 00
			\$30,297 59

### STOCK.

6,555	Pounds veal (46 calves) .....	@ \$0 12 <sup>1</sup> / <sub>2</sub>	\$819 38
86	Cows slaughtered; dressed, 57,340 pounds, Amount received for hides, &c., from slaughtered cows .....	" 08 <sup>1</sup> / <sub>2</sub>	4,873 90
			1,495 62
			\$7,188 90

### GARDEN.

4,300	Bushels potatoes .....	@ \$0 80	\$3,440 00
2,800	Bushels tomatoes .....	" 60	1,680 00
500	Bushels carrots .....	" 60	300 00
700	Bushels parsnips .....	" 60	420 00
750	Bushels beets .....	" 60	450 00
500	Bushels white turnips .....	" 35	175 00
600	Bushels rutabaga turnips .....	" 50	300 00
275	Bushels onions .....	" 80	220 00
75	Bushels spinach .....	" 60	45 00
350	Bushels kale .....	" 30	105 00
700	Bushels bush beans .....	" 75	525 00
195	Bushels lima beans .....	" 1 10	214 50
285	Bushels peas .....	" 1 00	285 00

## NEW JERSEY STATE HOSPITAL.

105	Bushels cucumbers .....	@ \$0 50	\$52 50
11	Bushels cucumber pickles .....	" 1 25	13 75
50	Bushels horse radish .....	" 1 50	75 00
25,000	Heads celery .....	" 03	750 00
37,000	Heads cabbage .....	" 06	2,220 00
26,000	Heads lettuce .....	" 05	1,300 00
70,000	Bunches green onions .....	" 02	1,400 00
60,000	Bunches radishes .....	" 02½	1,500 00
1,100	Bunches celery for soup .....	" 04	44 00
13,000	Bunches asparagus .....	" 15	1,950 00
24,500	Bunches rhubarb .....	" 05	1,225 00
3,500	Bunches parsley .....	" 05	175 00
2,000	Bunches leeks .....	" 05	100 00
1,100	Bunches herbs .....	" 05	55 00
150	Baskets grapes .....	" 60	90 00
52,000	Ears sweet corn .....	" 01	520 00
3,000	Bundles cornstalks .....	" 02	60 00
300	Cheese pumpkins .....	" 10	30 00
300	Hubbard squash .....	" 05	15 00
2,000	Eggplants .....	" 05	100 00
1,500	Peppers .....	" 01	15 00
400	Quarts strawberries .....	" 12½	50 00
250	Quarts raspberries .....	" 12½	31 25
			\$19,931 00

REPORT OF WORK DONE IN UPHOLSTERER'S DEPARTMENT FOR THE FISCAL YEAR  
ENDING OCTOBER 31ST, 1907.

Single hair mattresses made, new .....	224
Double hair mattresses made, new .....	5
Single hair mattresses made over .....	1,020
Double hair mattresses made over .....	4
Hair pillows made, new .....	509
Hair pillows made over .....	2,508
Feather pillows made .....	56
Single mattress ticks made .....	253
Double mattress ticks made .....	5
Pillow ticks made .....	565
Sofa pillows made .....	43
Pieces of furniture upholstered .....	244
Hall carpets made, new .....	3
Hall carpets made over .....	1
Alcove carpets made .....	2
Corridor carpets made .....	5
Parlor carpets made .....	1
Room carpets made, new .....	33
Room carpets made over .....	143
Carpets taken up .....	120
Carpets laid .....	114
Carpets repaired .....	89
Rooms laid with linoleum .....	10
Yards carpet bound or hemmed .....	331

NEW JERSEY STATE HOSPITAL.

91

Bed protectors made .....	1,172
Bed protetctors repaired .....	72
Holland shades made .....	415
Shades repaired .....	457
Pairs curtains hung .....	71
Chairs caned .....	227
Settees caned .....	9
Hassocks made .....	13
Mattress ticks repaired .....	276
Pairs ticking mits made .....	70
Pieces of harness made .....	65
Pieces of harness repaired .....	197
Horse blankets repaired .....	15
Chair cushions made .....	3
Awnings made .....	37
Awnings put up .....	39
Awnings taken down .....	39
Flag, 10 x 18 ft., made .....	1
Leather mail bag made .....	1
Canvas mail bags made .....	3
Pairs boots, shoes and slippers repaired .....	1,151

REPORT OF WORK DONE IN SEWING ROOM FOR THE FISCAL YEAR ENDING OCTOBER  
31st, 1907

Sheets (single) .....	3,402
Sheets (double) .....	37
Pillow cases .....	4,392
Bolster cases .....	12
Hand towels .....	5,429
Dish towels .....	3,064
Roller towels .....	1,416
Glass towels .....	233
Table clothes hemmed .....	457
Napkins hemmed .....	704
Side board covers .....	14
Drawers .....	2,249
Chemise .....	1,065
Petticoats .....	2,172
Night dresses .....	544
Laboratory gowns .....	12
Chef aprons .....	12
Infirmary aprons .....	36
Waiter aprons .....	180
Curtains .....	314
Curtain bands .....	328
Blankets hemmed .....	200
Clothes bags .....	424
Shirts altered .....	3
Burial robes .....	76
Burial chemise .....	76
Burial skirts .....	76
Burial sheets .....	76

Dresses (regulation) .....	1,416
Dresses (strong) .....	44
Shirt waist suits .....	546
Shirt waists made .....	7
Wrappers .....	24
Nurses' uniform dresses .....	28
Nurses' uniform aprons .....	28
Nurses' uniform straps .....	19
Shirt waist suits (goods furnished) .....	24
Skirts made (goods furnished) .....	2
Skirts altered .....	9
Waists altered .....	5
	29,155

REPORT OF NEW WORK AND REPAIRS, TINSMITH'S DEPARTMENT, FISCAL YEAR  
ENDING OCTOBER 31ST, 1907.

*New Work.*

Drinking cups .....	613
Diet cups .....	320
Diet cup covers .....	89
Special flats .....	224
Potato steamers .....	12
Fruit steamers .....	24
Large steamers .....	9
Bread boxes .....	12
Grease cans .....	18
Butter boxes .....	60
Butter-box covers .....	114
Scrap pans .....	12
Milk pitchers .....	12
Rice and bean pans .....	126
Tin pails .....	25
Meat pans .....	25
Wire hooks .....	68
Sprinkling pots .....	6
Tea and coffee pots .....	8
Mush pans .....	24
Tin box covers .....	33
Iron shelves .....	20
Iron sleeves .....	44
Wire rods .....	350
Bung covers .....	250
Feet leaders and gutters .....	207
Square feet slate roof laid .....	450
Other pieces as needed .....	533
Fruit cans sealed .....	4,753

*Repairs.*

Pieces tinware repaired .....	1,975
Locks repaired .....	1,046
Keys fitted .....	219
Knives and scissors sharpened .....	291
Repairs to gutters, leaders, slate and tin roofs, ice boxes, speaking tubes, &c.	

CUT FLOWERS AND POTTED PLANTS GROWN AT GREENHOUSE DURING FISCAL YEAR  
ENDING OCTOBER 31ST, 1907.*Out Flowers.*

Roses .....	18,924
Carnations .....	3,276
Chrysanthemums .....	934
Bunches violets .....	124
Bunches sweet peas .....	65
Roman hyacinths .....	1,285
Dahlias .....	2,676
German grasses .....	1,400
Peonies .....	326
Strings smilax .....	85
Strings asparagus .....	12
Hardy pinks .....	824
Rambler roses .....	1,724
Daffodils .....	550
Celosea .....	2,685
Vinca .....	1,420
Zinnia .....	5,385

*Potted Plants.*

Caladiums .....	250
Crotons .....	155
Begonias .....	850
Hyacinths .....	250
Daffodils .....	550
Geraniums .....	2,500
Colius .....	6,325
Single petunias .....	600
Violet plants .....	384
Pansy plants .....	1,040
Salvia plants .....	1,400
Canna plants .....	1,200
Abutilon plants .....	500
Celosia plants .....	800
Vinca plants .....	600
Zinnia .....	800
Easter lilies .....	65
Spireas .....	100

REPORT OF WORK DONE BY PAINTERS DURING THE FISCAL YEAR ENDING  
OCTOBER 31ST, 1907.

Third floor, centre hall, kalsomined, varnished and painted.....	3 coats.
North and south stairways, centre, bronzed and varnished.....	....
Picture moulding stained, varnished and put up (850 feet).....	....
Drug room enameled.....	4 coats.
Bedrooms (9) and hall, R. C., first floor, varnished and painted.....	....
Large kitchen painted.....	2 coats.
Kitchen, laundry and dining-room painted.....	2 "
Centre kitchen and storerooms painted.....	2 "
Special diet and panrooms painted.....	2 "
Rear centre and kitchen toilet-rooms painted.....	3 "
Food elevators (20), basement painted.....	1 coat.
Tailor shop painted.....	1 "
Mattress hall, toilet-rooms painted.....	1 "
New bakery painted.....	3 coats.
Infirmery, 2-2 South, enameled.....	2 "
Operating-room, 2-1 South, enameled.....	4 "
Bedrooms, 2-2 South, painted and enameled.....	1 coat.
South (16) window guards stained and varnished.....	3 coats.
South (46) beds enameled.....	2 "
South (20) dining-rooms painted and varnished.....	1 coat.
South (8) dining-rooms, screens stained and varnished.....	3 coats.
South, fourth floor radiators bronzed.....	....
North, 3/1 special dining-room and halls, floors varnished.....	2 coats.
North, 3/1 billiard-room floor varnished.....	2 "
North, 2/1 poolroom floor varnished.....	2 "
North, 1-4B hall and bedrooms painted and varnished.....	1 coat.
North, dining-rooms painted and varnished.....	1 "
Ten toilet-rooms painted and varnished.....	1 "
Four stairways.....	1 "
Floors, nurses' cottage, varnished.....	3 coats.
N. cottage painted and varnished.....	3 "
Farmer's cottage painted.....	1 coat.
Baker's cottage painted.....	1 "
Sashes of farm barn reputtied and painted.....	....
Dairy barn basement painted.....	1 coat.
Cow sheds, inside, painted.....	2 coats.
New hay shed painted.....	2 "
Garden truck wagon painted.....	....
Roofs of Administration Building, annex, painted.....	1 coat.
Laboratory floor varnished.....	2 coats.
Drugroom, annex, floor varnished.....	2 "
Centre, annex, window screens painted.....	2 "
New tailor shop kalsomined and painted.....	2 "
Annex porches painted.....	2 "
Annex, A. D. R. window screens painted.....	2 "
Annex, transom screens stained and varnished.....	17
North and south, section-yard sheds painted.....	2 coats.
Wallpaper hung.....	70 rolls.
Figure for fountain enameled.....	4 coats.
Holder at gashouse painted.....	4 "

Greenhouse and garden hot-bed sash repaired.....	.....
Signs painted.....	14
Screen doors stained and varnished.....	8
Panes of glass put in.....	1,706
Pieces of furniture enameled.....	76
Pieces of furniture varnished.....	1,299
Trap covers varnished (24) .....	3 coats.
Clothes bags marked.....	324
Also the usual repairs to sinks, traps, greenhouses, &c.....	.....

REPORT OF WORK DONE IN CARPENTER SHOP DURING THE FISCAL YEAR ENDING  
OCTOBER 31ST, 1907.

*Repairs.*

Furniture (pieces) .....	1,714
Sash cords .....	717
Doors .....	558
Trap seats .....	98
Window frames .....	128
Transoms .....	68
Window sash .....	194
Waiter ropes .....	25
Settees .....	163
Square feet flooring .....	4,810
Locks .....	162
Waiters (food and clothes) .....	92
Drain boards .....	45
Towel rollers .....	35
Drawers .....	65
Ladders .....	27
Wire window screens .....	210
Laundry horses .....	10
Stair rails .....	15
Food cars .....	31
Square feet walk .....	494
Nets and sash put in .....	1,974
Nets and sash taken out .....	1,974
Turn stiles .....	4
Feet of base board .....	808
Feet of fence .....	1,066
Mirror and picture frames .....	311
Closets .....	27
Tanks .....	13
Paper cabinets .....	22
Steps .....	114
Feet of chute (ice, clothes, feed) .....	425
Window blinds .....	73
Feet of partition .....	1,072
Laundry boxes .....	18
Knives ground .....	66
Clothes dryers .....	6
Roofs .....	16

Benches .....	20
Crutches (pair) .....	1
Feet of trough .....	120
Dish crates .....	13
Bridges .....	5
Cues tipped .....	174
Number of repairs .....	8,085
General repairs to greenhouses .....	....
General repairs to hennery .....	....
General repairs to summer houses .....	....

*New Work.*

Locks put on .....	128
Boxes and crates .....	184
Ladders .....	1
Wire screens .....	191
Feet of clothes hooks .....	324
Feet of shelving .....	369
Feet of weather strip .....	2,002
Doors .....	25
Closets .....	9
Surveying stakes .....	910
Wall blocks .....	121
Feet of telephone moulding .....	456
Mirror and picture frames .....	53
Stall, floor racks .....	6
Stirring paddles .....	53
Electric fan shelves .....	20
Cutting boards .....	63
Curtain poles .....	151
Square feet basket racks .....	468
Snow scrapers .....	8
Tables .....	11
Clothes boxes .....	27
Leveling boards .....	6
Feet of cement mould .....	1,382
Towel rollers .....	3
Laundry cars .....	2
Arch centres .....	11
Trap seats .....	68
Railroad track ties .....	102
Chests .....	7
Sheave blocks .....	60
Feet of hot-bed bars .....	220
Polishing blocks .....	24
Benches .....	47
Dirt tampers .....	3
Covers for steam pipe, manholes, &c. ....	96
Sash .....	1
Sleeve boards .....	2
Hose racks .....	3
Feet of flower sticks .....	1,600

96181

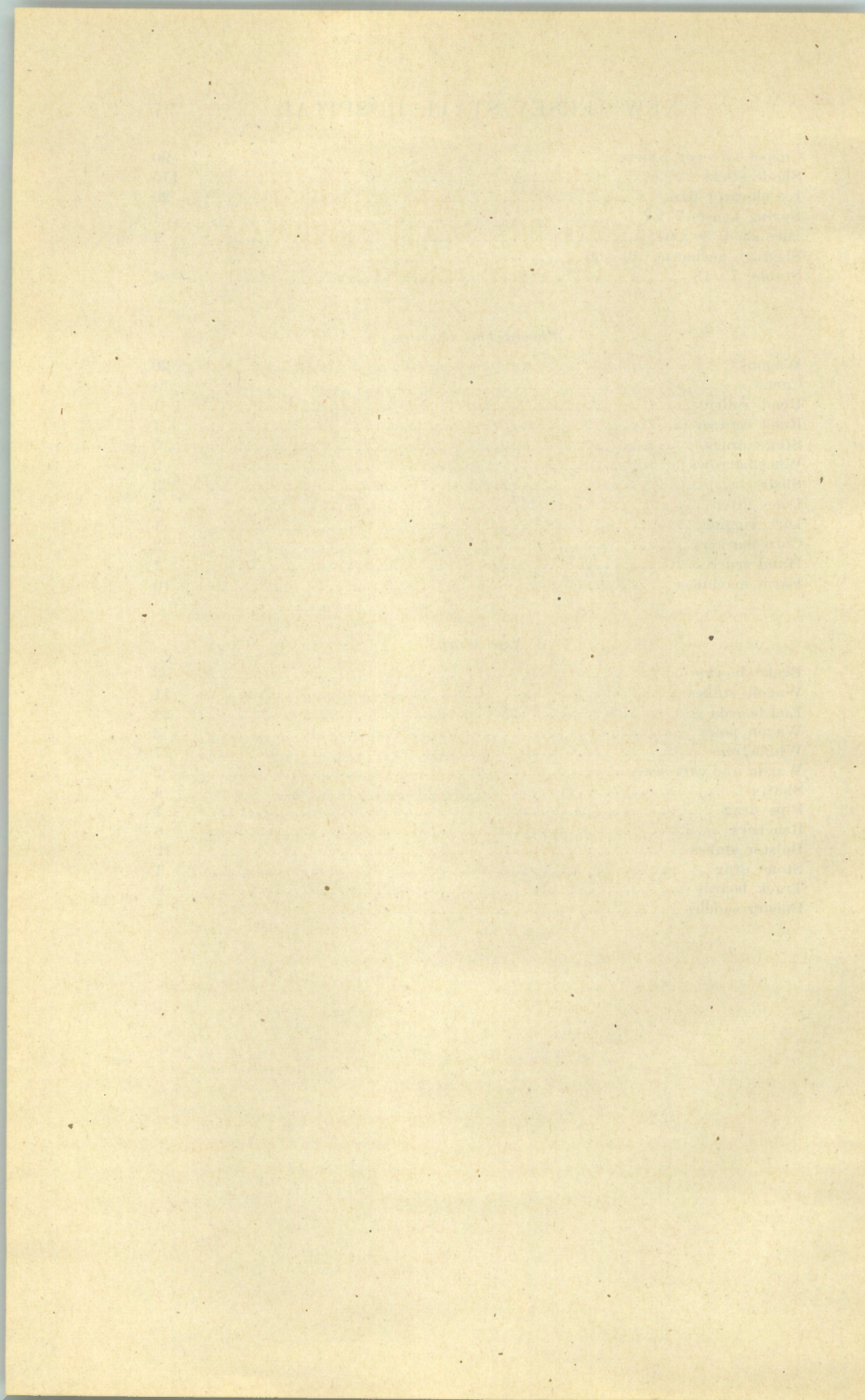
Carpet sweeper rollers .....	90
Shade sticks .....	115
Ice elevator bars .....	20
Spring house, 7' x 7' .....	1
Hay shed, 30 x 64 .....	1
Shed at gashouse, 19 x 30 .....	1
Stable, 7 x 18 .....	1

*Wheelwright Repairs.*

Wagons .....	20
Carts .....	14
Road roller .....	1
Road scraper .....	1
Stone drags .....	5
Wheelbarrows .....	2
Sleds .....	3
Poles fitted .....	2
Dirt rigging .....	1
Corn markers .....	2
Hand truck .....	1
Farm machines .....	10

*New Work.*

Brake blocks .....	53
Wagon stakes .....	11
End boards .....	24
Wagon poles .....	3
Whiffletrees .....	27
Wagon and cart seats .....	2
Shafts .....	4
Pipe drag .....	1
Reachers .....	6
Bolster stakes .....	12
Stone drag .....	1
Track boards .....	6
Bolster saddles .....	5



## REQUIREMENTS FOR THE ADMISSION OF PATIENTS TO THE STATE HOSPITALS OF NEW JERSEY.

### PRIVATE PATIENTS.

The admission of a private or pay patient requires a written request for admission, signed by a near relative or the guardian of the patient, the certificates of two physicians who have been in practice for at least five years and are permanent residents of the State of New Jersey; said request and certificates must be made on the forms approved by the Managers of the State Hospitals, and the certificates must be sworn to before a notary public or other proper officer of the law.

The certifying physicians must state in the body of their certificates the date on which the examination of the patient was made, and the patient must be delivered to the Hospital named in the certificates within six days after said examination, otherwise the request and certificates become invalid.

The making of the request must not be more than six days prior to the sending of the patient to the institution.

A surety company bond or one signed by two responsible property owners, one of whom (preferably both) must be a resident of, and own property in the State of New Jersey.

(See forms appended.)

Thirteen (13) weeks' board and medical attendance must be paid for at the time of the admission of the patient, and quarterly in advance thereafter.

The above requirements are regulated by statute and the Board of Managers, and the resident officers have no authority to modify them in any particular.

The rates range from seven dollars (\$7) to fifty dollars (\$50) per week, and include medical attendance, board, room and washing. No private patients are admitted for less than seven dollars (\$7) per week. No patient not a resident of the State of New Jersey will be admitted for less than ten dollars (\$10) per week.

## INDIGENT PATIENTS.

For the admission of indigent patients a request and the certificates of two physicians are required, as in the admission of private patients, the papers differing in that the indigent papers must have the word "indigent" in them, showing that the person whose admission is requested is believed to be without means of support and unable to pay for maintenance in the Hospital.

## HABITUAL DRUNKARDS.

The General Statutes of New Jersey, Vol. 2, page 1708, and Pamph. L. 1881, page 236, provide for the commitment of habitual drunkards to a State Hospital by proceedings before the Court of Chancery.

## GENERAL RULES.

No visiting is allowed on Sunday. Visiting is limited to Tuesdays, Thursdays and Saturdays, from 12:30 to 4:30 P. M., and legal holidays, from 1 to 4 P. M.

The Medical Director will supply blank commitment papers in response to application for them.

The person writing for papers should always mention the sex of the patient to be committed and whether such patient is in indigent circumstances or able to pay for maintenance.

Communications and inquiries relative to patients should be addressed to the Medical Director.

When practicable, a visit to the institution and a personal interview with its officers previous to completing arrangements is advised.

FORMS.

STATE OF NEW JERSEY.

Request for Private Patient's Commitment to State Hospital for the Insane.

To the Medical Director of the New Jersey State Hospital at Morris Plains:

The undersigned, of ... in the county of ... and State of ... being desirous of having ... an insane person of the county of ... and State of ... committed to and confined as a patient in the New Jersey State Hospital at Morris Plains, hereby requests the admission therein of the said ... for the purpose aforesaid. Said

... was born at ... on ... resides at ... and is a ... The next of kin of the said ... is ... The undersigned is a ... of the said ... other circumstances of connection between patient and person making request.

Dated ... 19... Name of person making request ... Street and number ... Town or City ... County ... State ... Telephone number ... Telegraphic address

**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I, ....., of ....., in the county of ....., and State of New Jersey, do hereby certify that I am a graduate of ..... and a permanent resident of the State of New Jersey, and have been in actual practice as a physician for at least five years; that I have on the ..... day of ....., 19.... (State specifically the date upon which examination was made), made a personal examination of ....., alleged to be insane and whose admission into the New Jersey State Hospital at Morris Plains has been requested by ....., of ....., and I am of the opinion that the said ..... is insane, and a proper person to be committed to and confined in said Hospital; that I am not the superintendent, proprietor or an officer, or a regular professional attendant, or financially interested in said Hospital, nor am I a near relative either by blood or marriage, or guardian or trustee of the said.....

The following are the facts I have been able to ascertain concerning the hereditary taint, previous attack and serious nervous disorder of the said ..... and is a thorough description and identification of the said .....

1. Patient resides at ....., county of .....; age, .... years; nativity (If foreign, how long in U. S.).....; sex, .....; color .....; occupation .....; single, married, widowed, divorced (Strike out words not required); religion .....

2. Name and birthplace of father .....; maiden name and birthplace of mother .....

3. Number of previous attacks.....; age at first attack .....; present attack began ....., 19.... (If patient has ever been an inmate of an institution for the insane, state when and where.) .....

4. Was the present attack gradual or rapid in its onset? .....

5. If the patient is afflicted with any infirmity or disease other than insanity, state it and describe it. ....

6. Is the patient cleanly or uncleanly in personal habits? (*If uncleanly, state in what particular.*)

7. If the patient exhibits or has exhibited violence, destructiveness, excitability, depression, homicidal, suicidal or dangerous tendencies, state all such symptoms in detail.

8. What in your opinion is the cause of the insanity of the patient? (*Give both predisposing and exciting causes.*)

9. Is there any history of insanity in the patient's family? (*If so, state the exact relationship of the patient to the insane relative.*)

10. Does the patient use beer, liquor, tobacco, opium, cocaine or any other drugs; if so, to what extent?

11. State any irregularities of sleep, appetite or other bodily functions.

The following are the prominent symptoms upon which my diagnosis of the insanity of the said ..... is based:

The patient said in my presence (*Give patient's exact words. If the patient maintains a persistent silence, so state.*)

The patient's behavior was as follows: (*State here manner, actions and demeanor.*)

The patient's general appearance at the time of my examination was (*State here condition of clothing, whether patient was tidy or untidy, orderly, cleanly or otherwise.*)

The following facts indicating insanity have been communicated to me by the persons hereinafter mentioned: (*State here names of informants and what, if any, important change has been observed in the patient's disposition, social habits, physical health and ability to follow usual avocation.*)

I am of the opinion that the aforesaid .....  
is insane and a proper person to be committed to an institution for  
the care and treatment of such patients, and this opinion is based  
upon all the foregoing facts.

.....  
*Physician.*

AFFIDAVIT.

State of New Jersey, county of ....., ss.— .....,  
being duly sworn, according to law, on his oath says, that he is  
the physician named in and who made and subscribed the fore-  
going certificate; that he has read the same and knows the con-  
tents thereof, and that the facts, matters and things therein set  
forth are true, to the best of his knowledge, information and belief;  
and that the examination upon which the foregoing certificate is  
based was made on the ..... day of ....., 19....  
.....M.D.

Sworn to and subscribed before me this.....day of.....,  
19....  
.....

**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I, ....., of ....., in the county of ....., and State of  
New Jersey, do hereby certify that I am a graduate of .....  
and a permanent resident of the State of New Jersey, and have  
been in actual practice as a physician for at least five years; that  
I have on the ..... day of ....., 19....  
(*State specifically the date upon which examination was made*),  
made a personal examination of ....., alleged to be  
insane and whose admission into the New Jersey State Hospital  
at Morris Plains has been requested by ....., of .....,  
and I am of the opinion that the said .....  
is insane, and a proper person to be committed to and confined in  
said Hospital; that I am not the superintendent, proprietor or an  
officer, or a regular professional attendant, or financially inter-  
ested in said Hospital, nor am I a near relative either by blood or  
marriage, or guardian or trustee of the said .....

The following are the facts I have been able to ascertain concerning the hereditary taint, previous attack and serious nervous disorder of the said ..... and is a thorough description and identification of the said .....

1. Patient resides at ....., county of .....; age, .... years; nativity (*If foreign, how long in U. S.*).....; sex, .....; color, .....; occupation .....; single, married, widowed, divorced (*Strike out words not required*); religion, .....

2. Name and birthplace of father .....; maiden name and birthplace of mother .....

3. Number of previous attacks .....; age at first attack .....; present attack began ....., 19.... (*If patient has ever been an inmate of an institution for the insane, state when and where.*) .....

4. Was the present attack gradual or rapid in its onset? .....

5. If the patient is afflicted with any infirmity or disease other than insanity, state it and describe it. ....

6. Is the patient cleanly or uncleanly in personal habits? (*If uncleanly, state in what particular.*) .....

7. If the patient exhibits or has exhibited violence, destructiveness, excitability, depression, homicidal, suicidal or dangerous tendencies, state all such symptoms in detail. ....

8. What in your opinion is the cause of the insanity of the patient? (*Give both predisposing and exciting causes.*) .....

9. Is there any history of insanity in the patient's family? (*If so, state the exact relationship of the patient to the insane relative.*) .....

10. Does the patient use beer, liquor, tobacco, opium, cocaine or any other drugs; if so, to what extent? .....

11. State any irregularities of sleep, appetite or other bodily functions. ....

The following are the prominent symptoms upon which my diagnosis of the insanity of the said ..... is based:

.....  
The patient said in my presence (*Give patient's exact words. If the patient maintains a persistent silence, so state.*)

.....  
The patient's behavior was as follows: (*State here manner, actions and demeanor.*)

.....  
The patient's general appearance at the time of my examination was (*State here condition of clothing, whether patient was tidy or untidy, orderly, cleanly or otherwise.*)

.....  
The following facts indicating insanity have been communicated to me by the persons hereinafter mentioned: (*State here names of informants and what, if any, important change has been observed in the patient's disposition, social habits, physical health and ability to follow usual avocation.*)

.....  
I am of the opinion that the aforesaid ..... is insane and a proper person to be committed to an institution for the care and treatment of such patients, and this opinion is based upon all the foregoing facts.

.....  
*Physician.*

AFFIDAVIT.

State of New Jersey, county of ....., ss.— .....  
being duly sworn, according to law, on his oath says, that he is the physician named in and who made and subscribed the foregoing certificate; that he has read the same and knows the contents thereof, and that the facts, matters and things therein set forth are true, to the best of his knowledge, information and belief; and that the examination upon which the foregoing certificate is based was made on the.....day of....., 19....  
.....M.D.

Sworn to and subscribed before me this.....day of....., 19,....

.....

STATE OF NEW JERSEY.

Request for Indigent Patient's Commitment to State Hospital for the Insane.

To the Medical Director of the New Jersey State Hospital at Morris Plains:

The undersigned, of ..., in the county of ..., and State of ..., being desirous of having ..., an insane person of the county of ..., and State of ..., committed to and confined as an indigent patient in the New Jersey State Hospital at Morris Plains, hereby requests the admission therein of the said ..., for the purpose aforesaid. Said ... was born at ..., on ..., resides at ..., and is a ..., and is a ... The next of kin of the said ... is ..., who resides at ... The undersigned is a ... of the said ...

Dated ..., 19... Name of person making request ... Street and number ... Town or City ... County ... State ... Telephone number ... Telegraphic address ...

**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I, ....., of ....., in the county of ....., and State of New Jersey, do hereby certify that I am a graduate of..... and a permanent resident of the State of New Jersey, and have been in actual practice as a physician for at least five years; that I have on the ..... day of ....., 19.... (*State specifically the date upon which examination was made*), made a personal examination of ....., alleged to be insane and whose admission into the New Jersey State Hospital at Morris Plains has been requested by ....., of ....., and I am of the opinion that the said ..... is insane, and a proper person to be committed to and confined in said Hospital; that I am not the superintendent, proprietor or an officer, or a regular professional attendant, or financially interested in said Hospital, nor am I a near relative either by blood or marriage, or guardian or trustee of the said .....

The following are the facts I have been able to ascertain concerning the hereditary taint, previous attack and serious nervous disorder of the said ..... and is a thorough description and identification of the said.....

1. Patient resides at ....., county of .....; age, .... years; nativity (*If foreign, how long in U. S.*).....; sex, .....; color, .....; occupation .....; single, married, widowed, divorced (*Strike out words not required*); religion .....

2. Name and birthplace of father .....; maiden name and birthplace of mother .....

3. Number of previous attacks .....; age at first attack .....; present attack began ....., 19.... (*If patient has ever been an inmate of an institution for the insane, state when and where.*) .....

4. Was the present attack gradual or rapid in its onset? .....

5. If the patient is afflicted with any infirmity or disease other than insanity, state it and describe it. ....

6. Is the patient cleanly or uncleanly in personal habits? (*If uncleanly, state in what particular.*)

7. If the patient exhibits or has exhibited violence, destructiveness, excitability, depression, homicidal, suicidal or dangerous tendencies, state all such symptoms in detail.

8. What in your opinion is the cause of the insanity of the patient? (*Give both predisposing and exciting causes.*)

9. Is there any history of insanity in the patient's family? (*If so, state the exact relationship of the patient to the insane relative.*)

10. Does the patient use beer, liquor, tobacco, opium, cocaine or any other drugs; if so, to what extent?

11. State any irregularities of sleep, appetite or other bodily functions.

The following are the prominent symptoms upon which my diagnosis of the insanity of the said ..... is based:

The patient said in my presence (*Give patient's exact words. If the patient maintains a persistent silence, so state.*)

The patient's behavior was as follows: (*State here manner, actions and demeanor.*)

The patient's general appearance at the time of my examination was (*State here condition of clothing, whether patient was tidy or untidy, orderly, cleanly or otherwise.*)

The following facts indicating insanity have been communicated to me by the persons hereinafter mentioned: (*State here names of informants and what, if any, important change has been observed in the patient's disposition, social habits, physical health and ability to follow usual avocation.*)

I am of the opinion that the aforesaid .....  
is insane and a proper person to be committed to an institution for  
the care and treatment of such patients, and this opinion is based  
upon all the foregoing facts.

.....  
*Physician.*

AFFIDAVIT.

State of New Jersey, county of ....., ss.— .....  
being duly sworn, according to law, on his oath says, that he is  
the physician named in and who made and subscribed the fore-  
going certificate; that he has read the same and knows the con-  
tents thereof, and that the facts, matters and things therein set  
forth are true, to the best of his knowledge, information and belief;  
and that the examination upon which the foregoing certificate is  
based was made on the.....day of....., 19....  
.....M.D.

Sworn to and subscribed before me this.....day of.....,  
19....

—————  
**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I, ....., of ....., in the county of ....., and State of  
New Jersey, do hereby certify that I am a graduate of .....  
and a permanent resident of the State of New Jersey, and have  
been in actual practice as a physician for at least five years; that  
I have on the ..... day of ....., 19....  
(*State specifically the date upon which examination was made*),  
made a personal examination of ....., alleged to be  
insane and whose admission into the New Jersey State Hospital  
at Morris Plains has been requested by ....., of .....,  
and I am of the opinion that the said .....  
is insane, and a proper person to be committed to and confined in  
said Hospital; that I am not the superintendent, proprietor or an  
officer, or a regular professional attendant, or financially inter-  
ested in said Hospital, nor am I a near relative either by blood or  
marriage, or guardian or trustee of the said .....

The following are the facts I have been able to ascertain concerning the hereditary taint, previous attack and serious nervous disorder of the said ..... and is a thorough description and identification of the said .....

1. Patient resides at ....., county of .....; age, ..... years; nativity (*If foreign, how long in U. S.*) .....; sex, .....; color, .....; occupation .....; single, married, widowed, divorced (*Strike out words not required*); religion .....

2. Name and birthplace of father .....; maiden name and birthplace of mother .....

3. Number of previous attacks .....; age at first attack .....; present attack began ....., 19.... (*If patient has ever been an inmate of an institution for the insane, state when and where.*) .....

4. Was the present attack gradual or rapid in its onset? .....

5. If the patient is afflicted with any infirmity or disease other than insanity, state it and describe it. ....

6. Is the patient cleanly or uncleanly in personal habits? (*If uncleanly, state in what particular.*) .....

7. If the patient exhibits or has exhibited violence, destructiveness, excitability, depression, homicidal, suicidal or dangerous tendencies, state all such symptoms in detail. ....

8. What in your opinion is the cause of the insanity of the patient? (*Give both predisposing and exciting causes.*) .....

9. Is there any history of insanity in the patient's family? (*If so, state the exact relationship of the patient to the insane relative.*) .....

10. Does the patient use beer, liquor, tobacco, opium, cocaine or any other drugs; if so, to what extent? .....

11. State any irregularities of sleep, appetite or other bodily functions. ....

The following are the prominent symptoms upon which my diagnosis of the insanity of the said ..... is based:

The patient said in my presence (*Give patient's exact words. If the patient maintains a persistent silence, so state.*)

The patient's behavior was as follows: (*State here manner, actions and demeanor.*)

The patient's general appearance at the time of my examination was (*State here condition of clothing, whether patient was tidy or untidy, orderly, cleanly or otherwise.*)

The following facts indicating insanity have been communicated to me by the persons hereinafter mentioned: (*State here names of informants and what, if any, important change has been observed in the patient's disposition, social habits, physical health and ability to follow usual avocation.*)

I am of the opinion that the aforesaid ..... is insane and a proper person to be committed to an institution for the care and treatment of such patients, and this opinion is based upon all the foregoing facts.

.....  
*Physician.*

AFFIDAVIT.

State of New Jersey, county of ....., ss.— ..... being duly sworn, according to law, on his oath says, that he is the physician named in and who made and subscribed the foregoing certificate; that he has read the same and knows the contents thereof, and that the facts, matters and things therein set forth are true, to the best of his knowledge, information and belief; and that the examination upon which the foregoing certificate is based was made on the .....day of....., 19....  
.....M.D.

Sworn to and subscribed before me this.....day of....., 19....

.....

**Maintenance Bond.**

Whereas . . . . ., of . . . . ., an insane person, has been admitted as a patient into the New Jersey State Hospital at Morris Plains, N. J.:

Now, therefore, we, the undersigned, in consideration thereof, jointly and severally bind ourselves to Guido C. Hinchman, Treasurer of said Hospital, to pay to him, and his successors in office, the sum of . . . . . dollars . . . . . cents per week, for the care and board of said insane person as long as . . . shall continue in said Hospital, with such extra charges as may be occasioned by . . . requiring more than ordinary care and attention; and also to provide . . . with suitable clothing, and pay for all such necessary articles of clothing as shall be procured for . . . . . by the Warden of the Hospital; and to remove . . . . . from the Hospital whenever the room occupied by . . . . . shall be required for a class of patients having preference by law, or whenever . . . . . shall be required to be removed by the Managers or Warden; and also to pay all expenses incurred by the Managers or Warden in sending said patient to . . . friends in case one or either of us shall fail to remove said patient when required to do so as aforesaid; and if . . . shall be removed, at the request of . . . friends before the expiration of six calendar months after reception, then to pay board for twenty-six weeks, unless . . . shall be sooner cured, and also to pay, not exceeding fifty dollars, for all damages . . . may do to the furniture or other property of said Hospital, and for reasonable charges in case of elopement, and funeral charges in case of death; such payments for board and clothing to be made quarterly in advance from date of admission, and at the time of removal, with interest on each bill from and after the time it becomes due.

In Witness Whereof, We have hereunto set our names this . . . . . day of . . . . ., in the year 19 . . . . .

(Name) . . . . . [L. s.]

(Residence) . . . . .

(P. O. Address) . . . . .

(Name) . . . . . [L. s.]

(Residence) . . . . .

(P. O. Address) . . . . .

Signed and sealed in the presence of . . . . .

**Removal Bond.**

Know all men by these presents, that ..... held and firmly bound unto the State of New Jersey in the penal sum of ..... dollars, lawful money of the United States, to be paid to the said the State of New Jersey, or its assigns; to which payment well and truly to be made, we do bind ourselves, jointly and severally, one and each of our heirs, executors and administrators, firmly by these presents. Sealed with our seals, and dated this ..... day of ....., in the year of our Lord one thousand nine hundred and .....

Whereas ..... of the county of ..... hath heretofore been, and still is, confined in the New Jersey State Hospital at .....; and whereas, said Hospital is now full, and the Medical Director hath certified to the Managers that said ..... is manifestly ....., and can probably be rendered comfortable at ....., and said Managers are willing to discharge said ..... and to deliver ..... to ..... relatives or friends, upon receiving satisfactory security for ..... peaceable behavior, safe custody and comfortable maintenance without further public charge;

Now, therefore, the condition of the above bond or obligation is such that if the said ....., or their heirs, executors or administrators, do and shall, from and after the date hereof, secure the peaceable behavior and safe custody of said ....., and provide for ..... a comfortable maintenance, so that ..... shall not be a charge on the public, then said bond or obligation to be void, otherwise to continue in full force and virtue.

..... [L. S.]  
..... [L. S.]

Sealed and delivered in the presence of .....