

THE FIFTY-THIRD ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

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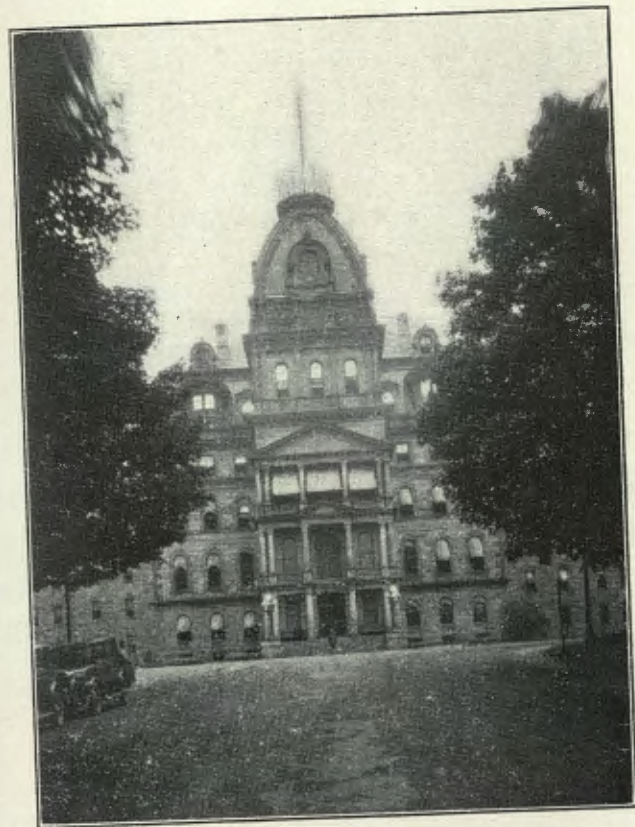
GREYSTONE PARK

FOR THE YEAR ENDING JUNE 30th

1928

HOSPITAL PRINT

1928



ADMINISTRATION BUILDING



ADMINISTRATIVE BUILDING

MANAGERS

PRESIDENT

DANIEL S. VOORHEES, MORRISTOWN

VICE-PRESIDENT

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AUGUSTUS S. KNIGHT, M. D., GLADSTONE

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MRS. MARIAN K. GARRISON, LLEWELLYN PARK, ORANGE

GEORGE W. KING, M. D., SECAUCUS

RIDLEY WATTS, MORRISTOWN

JAMES E. LAUENSTEIN, Secretary

OFFICERS

MARCUS A. CURRY, M. D.	
Medical Superintendent and Chief Executive Officer	
ARTHUR G. LANE, M. D.	Clinical Director
GEORGE R. HAMPTON, M. D.	Senior Asst. Physician
GEORGE B. McMURRAY, M. D.	Senior Asst. Physician
LAURENCE M. COLLINS, M. D.	Senior Asst. Physician
WILLIAM J. LEIN, M. D.	Senior Asst. Physician
PHILIP C. WASHBURN, M. D.	Senior Asst. Physician
JAMES K. POLLOCK, M. D.	Senior Asst. Physician
JOSEPH DONOVAN, M. D.	Senior Asst. Physician
PERRY J. GAMBILL, M. D.	Senior Asst. Physician
THOMAS B. CHRISTIAN, M. D.	Pathologist
ALBERT V. ROCHE, M. D.	Asst. Physician
PERCY L. SMITH, M. D.	Asst. Physician
ANTONIO HUBERT, M. D.	Asst. Physician
RAYMOND J. HARQUAIL, M. D.	Asst. Physician
MARGARET DOUGLAS, M. D.	Asst. Physician
GEORGE W. COMEAU, M. D.	Asst. Physician
CHARLES WYATT HUTCHINGS, M. D.	Asst. Physician
KENNETH Y. SINCLAIR, M. D.	Asst. Physician
LINDSAY E. ROBINSON, M. D.	Asst. Physician
JOHN DUNCAN McCALLUM, M. D.	Asst. Physician
CHARLES BEATTY KENNEY, M. D.	Asst. Physician
J. E. PICKERING, M. D.	Asst. Physician
THEODORE GEBIRTIG, M. D.	Asst. Physician
W. W. SENN, M. D.	Asst. Physician
EDMUND S. BURWELL, M. D.	Asst. Physician
DAVID P. YOUNG, M. D.	Asst. Physician
PHILIP J. TRENTZSCH, M. D.	Director Community Clinics
THOMAS R. PALMER, D. D. S.	Resident Dentist
JACKSON F. HENNINGSEN, D. D. S.	Resident Dentist
CATHERINE F. WHEELER, R. N.	Superintendent of Nurses
ANNE HOW, R. N.	Superintendent of Nurses
WILLIAM G. BEUCLER	Asst. to Chief Executive Officer
MILDRED H. HURLEY	Dir. of Psychiatric Social Service Dept.
REBECCA A. ADAMS	Directress of Ward Occupational Therapy
EDITH S. MOODIE	Directress of Physical Training
BEATRICE M. FORD	Acting Directress of Physical Training
PHILIP B. ROBERTS	Pharmacist
GEORGE J. HAMBERGER	Business Manager
EDWARD I. COURSEN	Asst. Business Manager
ARTHUR J. VANWINKLE	Treasurer
HENRY LANDESMAN, C. E.	Engineer-in-Charge

BOARD OF CONSULTANTS

GEORGE H. LATHROPE, M. D.,	CLINICAL MEDICINE
CHRISTOPHER C. BELING, M. D.,	NEUROLOGIST
WILLIAM J. ARLITZ, M. D.,	NEUROLOGIST
CLIFFORD MILLS, M. D.,	SURGEON
FRANCIS H. GLAZEBROOK, M. D.,	SURGEON
WILLIAM H. LAWRENCE, JR., M. D.,	SURGEON
GEORGE P. PITKIN, M. D.,	SURGEON
JOSEPH M. RECTOR, M. D.,	SURGEON
LEONIDAS L. MIAL, M. D.,	EYE, EAR, NOSE & THROAT
E. BLAIR SUTPHEN, M. D.,	EYE, EAR, NOSE & THROAT
H. J. F. WALLHAUSER, M. D.,	DERMATOLOGIST
HARRISON S. MARTLAND, M. D.,	PATHOLOGIST
CLARENCE O'CROWLEY, M. D.,	UROLOGIST
DAVID A. KRAKER, M. D., F. A. C. P.	GASTRO-ENTEROLOGIST & PROCTOLOGIST
H. AUSTIN COSSITT, M. D.,	GASTRO-ENTEROLOGIST
FRANCIS C. BARTLEMAN, D. D. S.,	DENTIST

REPORT OF
THE BOARD OF MANAGERS

REPORT TO THE COMMISSIONER

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

The Board of Managers of The New Jersey State Hospital at Greystone Park, as required by law, herewith submits to you its annual report together with the annual report of the Superintendent and Chief Executive Officer, for the fiscal year ending June 30, 1928.

We feel that this report shows excellent progress along most lines and that the condition of the institution as a whole is satisfactory with certain notable exceptions: Eight years ago when an active construction program was instituted at Greystone Park, there was an excess of more than 1,000 patients over the rated capacity. Although the percentage of patients discharged as recovered and improved during this eight year period seems to us very creditable under the existing conditions, and although an increasing number are being removed from the hospital on trial visit under the supervision of the social service workers, yet so rapid has been the increase in admissions--from 605 in 1920 to 910 in 1928--that the building program has hardly kept pace with the residual population, and the numerical overcrowding is now practically what it was at the beginning. We believe that if the number of patients could closely approximate the official bed capacity of the institution, the proportion of recoveries and paroles could be decidedly increased and the percentage of cases from each year's admissions who required continued treatment would be lowered, thus affecting a saving in the additional housing required. Otherwise, should the present admission rate continue, it would be necessary to provide annually additional housing for from 175 to 200 patients, with the officers and employees needed for their care. Should the number of admissions continue to rise beyond that reached this year, and unless there is some radical change in the method of care of the insane in New Jersey, there is every reason to anticipate such a rise, the additional building requirements will increase proportionately. We think that this institution should not be permitted to become unwieldy in size, but that the third hospital for which provision was made by the last Legislature in cooperation with the State Board of Control should be pushed to completion as rapidly as possible.

Beside the matter of overcrowding of patients, the condition of the hospital in regard to the housing of employees has been unsatisfactory throughout the past year. A measure of relief was obtained early in the period by placing in service an addition to the firehouse giving rooms for fifty men employed in the outside divisions, and just at the close of the year in occupying the new cottage for student and graduate nurses, which will house sixty women. Before many months elapse we expect to see the employees' building ready for use and then, with the quarters for 250 attendants which that will supply, the housing for employees will become adequate for present needs. We consider, however, that further increase in the accommodations for officers is desirable, with particular reference to the erecting of more cottages for married physicians.

During the year the Board has given much of its time to construction matters and the study of questions arising out of appropriation already made for specific housing and also of the remaining requirements which should be met by requests for further appropriations. The committee on furniture, with Mrs. Garrison at its head, has done a great deal of work during the year in selecting the furnishings for the nurses' home and for the employees' building. Furniture was also chosen and installed for the employees' room which was finished off over the cafeteria. In all of this detail respecting construction and equipment we have met with excellent cooperation, not only from the members of your Department--including Mr. Rockhill of the State Use who has rendered excellent help--but also from the other State departments and officers involved, including the State Purchasing.

Construction work completed and put in service during the year includes the Reception Building, the Occupational Therapy Building, the addition to the firehouse, the nurses' home, the root cellar, the outside lighting system, and the North Side sewer. Work has been in progress on the employees' building throughout the year, on the remodeling of the Clinic Building during the greater part of the year, and has been recently started on the two-family house for physicians and on the cottage for the business manager. Interior reconstruction work has been carried on at the Dormitory Building and at the Main Building, and will be continued next year. Contracts have also been let for the rebuilding of the Center Road

and plans and specifications for the Senile Building have been thoroughly discussed.

The Board has kept in close touch with the internal affairs of the hospital during the past year. In the medical department the amount and quality of work accomplished has been highly gratifying, although the condition of insufficient ward employees has been a serious handicap. It is impossible for us to enumerate the many heads of divisions and the results which they have achieved without unduly lengthening this report, in view of the fact that the details are set forth in the Superintendent's report to the Board. We wish, however, to note our appreciation of the sincerity of the work and the unbiased and professional attitude shown by the physicians in charge of the different specialties.

We are glad to state that there has been little change in the higher officers during the past year. Miss Catherine F. Wheeler, Superintendent of Nurses, resigned but her position was immediately filled by the appointment of Mrs. Anne How, and there was no perceptible break in the work of this highly important division. For some time the members of the Board have felt that the amount of detail handled by the Superintendent was far more than any one man ought to attempt to carry and that he should have some special officer who would relieve him of the unnecessary burden. Accordingly the position of assistant to the executive officer was created and was very satisfactorily filled by the appointment of Mr. William G. Beucler.

A little over two years ago when, after taking up the matter with the Superintendent--and too much can not be said of the work of Doctor Curry in this particular--this Board advocated the opening of Mental Hygiene Clinics in connection with the hospital at Greystone Park, it felt that if they were utilized as actively as there seemed every reason to expect, the work could be expanded later. Since they were patronized to more than capacity from the start, a special appropriation was requested in order to permit of increasing the number to an extent not possible if they were manned by the regular hospital staff. The request having been granted, the chairman of the medical committee of the Board, Doctor Knight, with Doctor Curry and yourself, took up the possible applicants for

the position of Director, and Dr. Philip J. Trentzsch was selected. Under his management as full-time psychiatrist in charge, the clinics have been increased from three to eight, and we feel that the work has been a decided credit to this institution.

In the business department the organization has functioned well under the direction of Mr. George J. Hamberger, Business Manager. His second year in this position finds an increase of production in the farm, hennery, and piggery, and a very marked improvement in the dairy, where, with no more stock, the amount of milk has been increased to meet the full requirements of the institution, and the methods of handling and delivering have been put on an up-to-date, efficient basis. The hospital herd is now an excellent one, with a considerable percentage of thoroughbred cows by raising promising calves, Mr. Hamberger expects gradually to eliminate all grade cows, leaving only thoroughbred animals in the herd. We consider that our Business Manager is to be commended on his achievements.

Again this year the hospital gardener, John J. Kelly, and the florist, Otto Koch, received highest prizes for their exhibits at the Morris County Flower Show. Since competition is keen at this event and this County has a wide reputation for its gardens and greenhouses, we feel that their success reflects credit on the institution as well as speaking for their own skill and efficiency. In addition to his work as florist, Mr. Koch has again been in charge of the grading this year and has accomplished fine results at a comparatively small expense to the State through his skillful use of patient labor.

In all our satisfaction with the internal administration of the hospital affairs, we appreciate the fact that to a very great extent the attitude of the workers and the successful inter-relations between the numerous divisions and departments has been dependent upon the personality of the Superintendent and his unremitting efforts to maintain a smooth and harmonious functioning of the entire organization. As in previous years, Doctor Curry has carried not only the heavy responsibilities inseparable from his position, but also an additional multitude of problems arising from circumstances and personal equations. In matters connected with the welfare of the in-

stitution and the patients, he has never spared himself but has given his personal attention to so many people and so much detail that at times the members of the Board have feared for his health under the constant strain. In Doctor Curry's personality and his utter devotion to the interests of the hospital without self-seeking, we feel that Greystone Park has too valuable an executive officer to risk, and accordingly we have tried and shall continue to try in the future to release him from such portions of the work as can be handled by his assistants.

At the close of the year covered by this report there remained on the records of the hospital 3,964 patients--1,992 males and 1,972 females--an increase of 181 patients over the previous year. Of this number 305 patients--145 males and 160 females--were outside of the institution but still carried on the hospital records and subject to return without legal or medical procedure. During the year there were admitted, including first admissions, readmissions, and transfers from other institutions for the insane in this State, 910 patients--475 males and 435 females. The discharges totaled 422--220 males and 202 females; 190 were recorded as recovered, 191 as improved, 13 as unimproved, 17 as without psychosis, and 11 as transferred to other hospitals for mental disease in New Jersey. The deaths during the year numbered 307--168 males and 139 females.

At the opening of the fiscal year covered by this report, the terms of Dr. Augustus S. Knight and Mr. George Richter expired. Doctor Knight was reappointed, and Mr. Ridley Watts of Morristown was appointed to succeed Mr. Richter. During the year the Board of Managers held eleven regular and one informal meetings. The total attendance was 68. Visits, conferences, inspections, etc., made a grand total of 367 trips to the hospital by the individual members of the Board. In addition to these listed visits, many conferences were held at the homes or offices of the different managers.

In conclusion, this Board wishes to record its gratitude for the continued cooperation of the various members of your Depart-

ment during the past year, and its sincere appreciation of the manner in which you have constantly striven to promote the highest welfare of the institution in which we are so deeply concerned.

Respectfully submitted,

DANIEL S. VOORHEES, President

W. L. R. LYND, Vice-President

AUGUSTUS S. KNIGHT

JAYNE MILLARD DOYLE

MARIAN K. GARRISON

GEORGE W. KING

RIDLEY WATTS

June 30, 1928.

TREASURER'S REPORT

**TREASURER'S REPORT OF CASH RECEIPTS AND
DISBURSEMENTS FOR THE FISCAL
YEAR ENDING JUNE 30, 1928.**

RECEIPTS

From Bergen County.....	\$ 74,789.98
" Essex County.....	18,977.50
" Cumberland County.....	104.03
" Hudson County.....	28,906.61
" Hunterdon County.....	321.82
" Mercer County.....	221.43
" Middlesex County.....	507.31
" Monmouth County.....	795.66
" Morris County.....	43,133.38
" Passaic County.....	131,982.61
" Somerset County.....	1,240.43
" Sussex County.....	12,414.56
" Union County.....	105,292.67
" Warren County.....	2,149.79
" Private Patients.....	260,182.30
" Individuals and Excess amounts collected by Counties for support of Indigent Patients.....	7,413.83
" Miscellaneous receipts.....	8,146.72
	\$696,580.63

DISBURSEMENTS

Amount of Collections deposited with State Treasurer.....\$696,580.63

AMOUNTS RECEIVED FROM STATE TREASURER FOR PAY-ROLLS

Employees' Pay-rolls.....	\$836,029.82
Officers' Pay-rolls.....	17,529.36
Assistant Director Research Salary.....	106.66
	\$853,665.84

A. J. VAN WINKLE
Treasurer.

THE STATE OF CALIFORNIA
COMMISSIONER OF THE GENERAL LAND OFFICE
REPORT OF THE CHIEF EXECUTIVE OFFICER
FOR THE YEAR ENDING MARCH 31, 1922

REPORT OF THE CHIEF EXECUTIVE OFFICER

REPORT OF THE CHIEF EXECUTIVE OFFICER

TO THE BOARD OF MANAGERS:

In compliance with the statutes of the State, I am submitting to you the fifty-third annual report of The New Jersey State Hospital at Greystone Park, which covers the twelve months from July 1, 1927 to June 30, 1928. In the report of the Medical Superintendent and Chief Executive Officer have been included the reports of all heads of divisions in the medical department, and also the report of the business manager, with the engineering division and other sections having to do with the maintenance and general activities of the institution.

It is impossible to summarize at this point with any degree of fairness the wide range of activities covered in the following pages. I may say, however, that I feel that the year has been one of progress and achievement in practically all divisions and that the different reports, condensed as they necessarily are, will bring before you not only an outline of the work which has been accomplished and some of the more urgent needs which must be met if further advance is to be made, but also a very definite impression of the individual pride in work and loyalty to the institution which lie behind the mere statistics and have made possible the highly creditable results accomplished under numerous handicaps.

As in previous years, the greatest obstacles to the attainment of the ideal of service to the patients have been overcrowding and undermanning, both due to the fact that building is considerably behind the requirements for adequate housing. During the past eight years, a constant effort has been made to increase the capacity of the hospital plant sufficiently to meet the needs of the population, but as yet it has been impossible to make up the enormous deficiency which existed at the close of the World War. Early in the present year a measure of relief for housing conditions of employees in the outside divisions was obtained through the placing in service of the newly completed addition to the firehouse which provided rooms for fifty men. We have now ready for use a new home for nurses which has comfortable living quarters for sixty, and will make possible a much needed increase in our corps of graduate and student nurses. The employees' building with rooms

for two hundred fifty ward employees, men and women, is nearing completion, and when furnished and occupied should enable us to bring our corps of attendants up to requirements. But little relief for the overcrowding of patients was obtained during the year, although the new Reception Building was opened in July and with its thoroughly modern facilities is proving highly satisfactory. As yet, however, two of its wards are used for housing attendants while awaiting the completion of the employees' building, and since the opening of the rest of this building for patients, the wards of the Clinic Building have been closed for remodeling with the exception of the fourth floor operating rooms and quarters for sick and operative cases.

In general there has been little change in the officers of the hospital during the past year, with the exception of the junior physicians among whom there has been more than the usual instability. In July, however, the head of the division of physical education, Miss Edith S. Moodie, resigned and the position has been filled temporarily by making her first assistant, Miss Beatrice M. Ford, acting directress of the division. In March Miss Catherine F. Wheeler, R. N., superintendent of nurses, resigned to become superintendent of nurses at the Polyclinic Hospital in New York City. For two years and four months she served this institution faithfully in an extremely difficult position and kept steadily to her high ideals of professional duty. On April 1st, Mrs. Anne How, R. N., reported for duty as superintendent of nurses. She came to us with the highest personal and professional recommendations and in the three months she has been on duty has shown a fine grasp of the many problems peculiar to state hospital service.

Two new offices were created during the year. The position of director of mental hygiene clinics was established, and was filled in December by the appointment of Dr. Philip J. Trentzsch, a psychiatrist of experience and success along mental hygiene lines. With a full-time director at the head of this division it has been possible to increase the number of clinics and develop a more finished program for the work. The second new position created this year was that of assistant to the execu-

tive officer. This was filled in December by the appointment of Mr. William G. Beucler, who was a resident of New Jersey and had been engaged in the public health service. On account of his excellent institutional training he was able immediately to fit himself to the requirements of the position, has made several surveys of importance, and has been of great assistance by relieving the executive officer of a mass of detail.

HEALTH

The general health of both patients and employees has continued good throughout the year. In September a mild case of smallpox was detected in a man employed in outside work and he was immediately sent to an isolation hospital. All employees who had rooms with this man in the firehouse were vaccinated and placed under quarantine, and all other employees and members of employees' families living on the hospital grounds were required to report for vaccination. Within a few days, however, the son of an employee developed the disease and was sent to the isolation hospital. Later the mother and two sisters of this boy also had smallpox. There were no further cases after these five, and all who had the disease showed it in a very mild form.

All suspects were immediately examined by a physician of the State Board of Health and the hospital authorities and the Board of Health were in constant consultation as to the program followed. Dr. Dowd of the State Board of Control was extremely helpful in arranging with the authorities of the Soho Isolation Hospital in Essex County for the care of the sick. I feel that we were indeed fortunate in that the disease did not reach any patient and was so limited in its spread among employees.

Throughout the year the procedure of inoculating newly admitted patients against smallpox and typhoid fever has been continued. Although a routine vaccination of all patients on the wards had been made within a period recent enough to afford presumable protection, another vaccination was made this year as a precautionary measure. A routine physical examination and vaccination of all new employees has been carried out since September.

The milk and water supplies have been frequently tested and have kept to a good standard of purity. The incidence of pulmonary tuberculosis among the hospital population continues rather high; 131 cases were reported during the year. Erysipelas was reduced to 12 cases with no fatalities. Measles appeared sporadically among the children of officers and employees, evidently contracted outside the institution. In each case there was no further spread of the disease on the hospital grounds.

STATISTICAL RESUME

As in previous years, complete statistical data has been tabulated according to the forms prescribed by the National Committee for Mental Hygiene. These will be found appended to this report. A summary of the tables has been made up by Mr. William J. Littell, senior clerk and statistician, and is here incorporated for convenient reference. The decided increase in admissions noted last year has continued at practically the same rate. The number of men admitted is considerably higher than of women, but the difference is not quite so marked as last year. I am still at a loss to explain this abrupt rise in the admission rate, but it is making itself felt not only in the Reception Building, but throughout the entire institution to which patients have to be transferred in order to make room for the new entrants. Even with a larger parole list, the increase of patients actually in the hospital was 168 for the year. The number of patients admitted on voluntary commitment papers was 85 this year, as against 70 for the preceding year. The resume runs as follows:

General data: During the year ending June 30, 1928, 910 patients were admitted—475 males and 435 females—the highest number for a year in the history of the hospital, and an increase of 83 patients over the admissions of the preceding year when the previous high record was attained. The admissions comprised 757 first admissions to any hospital for the insane -- 394 males and 363 females; 138 readmissions -- 72 males and 66 females, and 15 transfers from other similar institutions in New Jersey. The number of patients discharged was 729 -- 388 males and 341

females, making an increase of 181 patients over the population at the close of the preceding year.

There were under treatment during the year 4,693 patients -- 2,380 males and 2,313 females, nearly 300 more than in the previous year. The maximum census for the year was 3,964, on June 30th, and the highest number actually in the hospital at any one time was 3,659, attained on the same date.

At the close of the year 285 patients -- 125 males and 160 females -- were carried on parole and 20 male patients were carried as escaped.

First admissions: Patients of native birth numbered 443 -- 221 males and 222 females -- and of foreign birth 314 -- 173 males and 141 females -- the latter comprising over 41 percent of the total first admissions and showing a proportionate increase over the previous year. Both parents of 242 native born patients were also of native birth, while in 151 cases they were foreign born, in 40 of mixed races and in 10 cases the birthplace of parents could not be ascertained.

Concerning the foreign born, 50 were natives of Germany, 54 of Italy and 40 of Poland, nearly 46 percent of foreign born admissions. The naturalized foreign born numbered 119, the aliens 123 and the citizenship of 67 was unascertainable.

Of the principle psychosis 149 patients were diagnosed as suffering from psychosis with cerebral arteriosclerosis, 143 with manic depressive psychosis and 182 with dementia precox. These three psychoses comprised nearly 60 percent of all first admissions. Other psychoses, in point of number, were general paralysis in 78 cases, alcoholic psychosis in 34, senile psychosis in 24 and psychosis with psychopathic personality in 23 cases.

Relative to race, 77 were classified as African, 97 as German, 80 as Irish, 72 as Italian and 67 as Slavonic, nearly 57 percent of all specified races. Recorded as of mixed races were 223 patients, while data as to the race of 14 patients could not be obtained.

Over 47 percent or (357) of the patients were between the ages of 25 and 45 years at time of admission. Eighty-nine patients were under 25 years of age. More than half of the patients (nearly 53 percent) were in excess of 40 years at time of admission and

69 had passed the age of 70 years.

As to the degree of education 423 patients (nearly 56 percent) had acquired a common school education. Sixty-three were graduates of a high school and 27 had attained a collegiate education. Those with ability to only read and write numbered 94 and 29 were illiterate. No information was obtainable regarding the education of 121 patients.

Patients of urban environment numbered 675. This is slightly in excess of 89 per cent of the first admissions. Seventy-eight patients were of rural residence and that of 4 patients was unascertainable.

The table of Economic Condition records 554 (over 73 per cent) as marginal, 117 as comfortable and 80 as dependent. The economic condition of 6 patients was unobtainable.

Relative to the use of alcohol 395 patients were alleged to be abstinent, 165 temperate in its use and in 95 cases information was unavailable. The patients recorded as intemperate numbered 102.

In Table 13 the marital condition of the patients is given as follows: Single, 254 -- 149 males and 105 females (over 33.5 per cent); married, 369 -- 184 males and 185 females (over 48 per cent); widowed, 107; separated, 14; divorced, 9 and unascertainable, 4.

Readmissions: Of the readmissions during the year patients suffering from manic depressive psychosis and dementia precox constituted, as usual, the greater proportion of the total. There were 38 cases of manic depressive psychosis and 58 of dementia precox, over 69 percent of this group.

Discharges: The number of patients discharged during the year was 422 -- 220 males and 202 females. Of these 190 patients -- 99 males and 91 females -- were discharged as recovered. This is slightly in excess of 25 percent, based on the number of first admissions and a gain of approximately 3 percent over the previous year. The condition on discharge of the remaining patients was as follows: Improved, 191; unimproved 13; without psychosis, 17; and transferred to other hospitals for mental disease in New Jersey, 11. The greater number of those discharged as recovered were diagnosed as afflicted with manic depressive psy-

chosis and comprised 80 patients, or slightly in excess of 42 percent. Others discharged as recovered were, in order of number, alcoholic psychosis, 24; psychosis with cerebral arteriosclerosis, 19, and with psychosis with psychopathic personality, 15.

Deaths: During the year 307 patients died -- 168 males and 139 females. This is a percentage of slightly over 6.5, based on the total number under treatment, and is an increase over the preceding year. The average age at death was 56.76 years.

The principle causes of death were diseases of the circulatory system which existed in 158 cases and comprised over 51 percent. Other prominent causes of death were general paralysis, 45; pulmonary tuberculosis, 38, and nephritis, in 14 cases.

Relative to the psychosis of those who died 87 (over 28 percent) were diagnosed as suffering from psychosis with cerebral arteriosclerosis. Dementia precox was the diagnosis in 69 cases, general paralysis in 45 and senile psychosis and manic depressive psychosis in 27 each.

At the time of death 138 patients (nearly 45 percent) had passed the age of 60 years. Seventy-five patients were over 70 years of age; of these, 26 were over 75, 15 over 80 and 12 over 85 years of age.

The total duration of hospital life of those who died was in excess of 25 years in 22 cases. In this group 14 had been under treatment over 30 years and 8 over 35 years. One patient had been an inmate of this institution since its opening in August, 1876, being transferred from the Trenton State Hospital where she was admitted in May 1866, with a duration of "several years." Prior to this she had been in two New York institutions, twice in each. The entire duration of hospital residence of this patient was upwards of 61 years.

CLINICAL WORK

Under the supervision of the Clinical Director come the medical examinations, care and treatment of patients, the organization of the medical staff, the division of social service, and the instruction in psychiatry and psychiatric methods given to physicians of the staff and to various outside groups who are desirous of

obtaining information along these lines. He is in frequent consultation with the superintendent on general hospital matters and also is called upon for opinion and advice in planning and equipping new buildings. For the past seven years, this exacting position has been filled by Dr. Arthur G. Lane, who is a thoroughly equipped psychiatrist, an enthusiastic student, and an inspiring teacher. He has submitted a report for the year which I have included in detail as follows:

Of foremost importance in the clinical work was the opening of our new Reception Building shortly after the beginning of the fiscal year. This unit which, ultimately will function with the Clinic Building in forming a diagnostic treatment group, is being found all that could be expected from a reception diagnostic viewpoint.

In these days of rapid advancement in medical science it has become apparent that mental diseases are not the enigmas which they formerly were considered and that very much can be done toward the cure or amelioration of the symptoms of a large number of cases by the application of the newer lines of thought and practice, not alone in psychiatry, but in general medicine and surgery.

Because of the desire of the authorities of the State to keep abreast of these newer developments and that this institution shall be fully representative of all that is best in the modern treatment of the mentally afflicted, a building program has furnished us with these two new buildings to be used as an intensive treatment unit.

The Reception Building was constructed after considerable study of our own particular problems in comparison with similar problems in other localities where modern buildings for this purpose have been constructed and is the result of an accumulation of expert opinions both from the construction standpoint and from a scientific aspect, and, as it stands we believe it provides as far as money and thought can furnish, the very latest facilities for its purpose second to no other of its type.

An outline, in a general way, of its purpose and facilities may not be amiss at this time.

On the first floor two units (male and female) for the reception routine have been placed. These each consist of an office for the admitting physician to examine the papers and to complete the forms necessary. From this office provision has been made for the patient to be conducted to an adjoining bath room where his clothes are to be removed, the admission bath given and hospital garments furnished. He is then placed in bed temporarily in an adjoining room for the purpose of observation by physician. Here evidence of injuries will be noted as well as symptoms of contagious diseases. As a rule with rarely an exception, after observation in this admission unit, patients will be sent to male and female reception wards. Exceptions will rarely need to be made and then only in the very violently disturbed who may need to go at once to male or female wards for active cases. The five moderate sized wards for each sex will permit when all are in use an ideal classification of the recently admitted cases so that a careful study of the psychotic reactions of all types may be made.

As indicated above a ward for each sex is provided for reception routine only and a ward for each sex for actively disturbed. In the classification program is found a ward for the cases coming from the reception ward who are not violently disturbed but who are in need of supervision because of their restless condition. Here will be found the dull, indifferent, stupid, extremely delusional, annoying and unappreciative group. Another ward according to the classification program has been made for the group of patients who are appreciative and whose mental symptoms are mild, border line, psychoneurotic and convalescent.

This group is so selected that no patient with symptoms that are annoying is included because of the tendency which such patients have of disturbing others who are making an effort to adjust their problems. The atmosphere of this ward is quiet, homelike and cheerful. Still another ward for the purpose of classifying a group of cases who are not actively disturbed, nor dull and indifferent and yet are too troublesome to be among the convalescent cases because their delusions and conduct are such that they require added attention. They may be able to appreciate

their surroundings and yet be fault finding, querulous and disagreeable. Here also will be found the depressions and other cases of a type requiring close supervision.

The physicians' offices have been placed one on each ward because this has been found advisable in similar institutions. Each physician having a private office is subjected to less outside distraction than in large congregate offices, besides being at all times in immediate contact with his patients and his ward problems. This location gives him greater opportunity for observation of individual moods and conduct as well as making him instantly available in emergencies.

The Clinic Building will now be devoted to the intensive treatment of all physical disorders both medical and surgical. When remodeled it will have all the treatment facilities of all the specialties. The Reception Building is not equipped for prolonged bed treatment of physical illness so it will be expected that whenever a case requires such treatment as a result of emergency illness or when diagnostic indications point to corrective treatment requiring hospital measures such patients will be transferred to the Clinic Building. This Clinic Building is intended to function as would a general hospital in an outside community. To it will go for hospitalization all acute and chronic ailments requiring bed treatment for treatable conditions. To this end it will be kept an active service and care taken that it shall not become custodial in nature. Aged, feeble and otherwise infirm individuals will be cared for elsewhere since they are not supposed to remain in bed space required for active treatment cases. As in a general hospital ambulatory cases will be brought from the Reception Building or other wards of the hospital to the clinics which will there be conducted by each of the specialists and then returned to their wards. Into this group of buildings each new admission is introduced for intensive study and in this group he will remain until he has received all the attention that can be provided. This will be for a varying length of time depending upon the therapeutic indications in each case. Its purpose is for prompt treatment and restoration and is not intended for prolonged custodial care in cases showing no response to

treatment or those whose physical disorders have been corrected. Each new case will have ample opportunity to remain in this group as long as necessary and until all resources have been exhausted. These buildings will be adequately staffed with competent, alert and energetic physicians who will be enthusiastically keen in physical as well as mental diagnoses and treatment.

The outline above given is that which we wish to achieve but which as yet has not been fully realized. One ward on each side of the Reception Building has been temporarily reserved for housing of employees and thus reduces our bed capacity and classification plan. The Clinic Building, which formerly was used for reception as well as for treatment purposes, when vacated was turned over to the contractors with the exception of one ward for male and one ward for female patients. These wards have been used for the medical and surgical emergencies arising in the hospital. It has not as yet been necessary to vacate the various surgeries and clinic rooms in the Clinic Building but this will soon be required as the work of alteration and construction progresses. All of these obstacles and inconveniences, however, will in a short time be removed and allow us to use this group intensively to its full capacity.

A very startling development to be taken into consideration from the clinical standpoint is the rapid increase in admissions which reached the total of 910 during the past year, compared with 827 the preceding year and 730 the next preceding year. An increase of admissions of nearly 200 in a period of 2 years is a heavy strain on our medical and nursing personnel, not to mention the supervision and housing accommodations. At the present rate we may assume that our next year's admissions will be well over a thousand patients. This annual increment of acute cases to an institution with a rated capacity of approximately 2500 beds produces a problem in treating the recoverable cases as well as caring for the residual of prolonged treatment cases which make up a great proportion of the more or less permanent residents in a mental hospital. In spite of the difficulties just enumerated it has been very gratifying to find that our percentage of recovery has been raised this year to 25%, which figure closely approximates that found in other hospitals not handicapped by the complications with which we are contending

at the present time. The mere factor of figures showing the greatly increased admissions of a year acting as the denominator dividing a numerator of recovered cases which number were out of the hospital on a year trial visit during practically the whole period and who were recruited from a smaller census of more than the year previous, indicates the supposition that a much higher figure would result if our admission rate were more uniform.

As mentioned in other reports we are year by year becoming convinced that the disease Encephalitis Lethargica is producing an increasing group of disabled patients who, because of their inability to carry on, are demanding hospitalization. The problem in each case is one requiring protracted care and treatment and makes of such patients a chronic class which the general hospitals cannot adequately provide for. A small percentage of such patients may sometime during the course of the illness show mental symptoms simulating a great variety of other classified mental ailments but there is quite evidently no characteristic mental picture. It is conspicuous that while the location of the disorder is in the brain that the mental symptoms rarely resemble the other organic psychoses which show varying degrees of impairment of the intellectual faculties. This of course is what would be naturally expected from the histological location of the lesions in the region of the basal nuclei of the brain. The residuals in the great majority of adults are those of a neurological character and as such can be grouped with other purely neurological conditions—Tabes Dorsalis—Multiple Sclerosis or Paralysis Agitans, etc., as far as institutional care is concerned.

In the two previous annual reports we have mentioned the malarial treatment of general paralysis which was started at this hospital in July 1925. Our results to date are based on a total of 225 cases treated since that date. It has been our policy to administer this therapeutic measure to each and every patient showing luetic involvement of the cerebro spinal nervous system providing we obtain the consent of the relatives who are first informed of the practically hopeless outlook of this condition under any other procedure. In this manner we have found that it is advisable to treat even the most advanced and apparently hopeless cases. Our mor-

talidity rate for the whole service is 34 cases or 10.5% which figure is somewhat lower than during the previous year. We now have a total of 52 cases out of the hospital and returned to the community in definite remissions of their mental and physical symptoms. This gives us approximately 23%, a figure in advance of that of last year. Of the 139 patients still in the hospital under treatment or observation following treatment, a great majority show marked improvement and many will undoubtedly leave the hospital during the ensuing year in remissions.

In addition to the malaria inoculation we have also used during the year the intra venous typhoid bacterin on certain patients in this group. This procedure as far as the temperature curve is concerned is entirely controllable. If elevation of temperature alone was the therapeutic factor responsible for the arrest of the disease process this measure would be the one of selection because, after determining an individual's resistance, it is possible to produce with measured dosage any degree of fever at any time and as often as desired with practically no untoward symptoms or complications. It also is applicable to a group of patients who seem to have an immunity for malaria and therefore are not treatable by this means. While we are still using this method in selected cases we are becoming convinced that the results do not measure up to those obtained with malaria. It is rather apparent that with the latter there is some other than the thermal factor involved which factor is probably in the nature of specific anti-bodies that have a definite inhibitory effect on the spirochaeta pallida.

The Director's office has during the past year taken over the local activities in conjunction with the department of Deportation of the State Department of Institutions and Agencies, the interstate transfer of non-residents and the deportation of alien patients. The following is a summary of these activities:

Cases deported	21
Cases transferred to other states	35
*Cases transferred to hospitals within the state	16
	<hr/>
	Total 72

Thirteen cases were handled and reported to Trenton who either died, were removed by relatives or were discharged With-

* Includes institutions for feeble minded and epileptic as well as for insane.

out Psychosis or Recovered before being transferred or deported. Total amount of money spent during the year-\$986.11.

The institution of an extra mural activity directed toward the problem of prevention of mental diseases in the community while they are yet in their incipiency was undertaken two years ago by the Clinical Department of the hospital. The response to this work and the interest which was very promptly shown by the community was an indication that it furnished a service which was appreciated. Six clinics each month were so crowded with patients and the demand from other communities for similar clinics was so urgent that it became impossible for the staff to continue to handle this work satisfactorily and because it was plainly evident that this endeavor was producing valuable results it was deemed highly expedient to obtain the services of a psychiatrist who would devote his whole time to the further development and expansion of the work. The services of Dr. Trentzsch were secured for this purpose. An enlarged social service and clerical department were placed at his service and the details of this new department will be found elsewhere in the report. As far as we are aware our efforts along this line of Mental Hygiene to the extent here indicated are in advance of that attempted by any other state institution. The hospital has continued its established policy of offering to the community a consultation service for hospitals and physicians in the matter of problem mental disorders. The community is becoming increasingly interested along the lines of mental hygiene and there is yearly a gratifying increase in the demand for instruction in this field. Besides the talks to interested groups outside of the hospital we have a large number of visitors to the hospital of individuals desiring greater knowledge of the methods used in mental hospitalization. In addition, demonstration clinics as well as lectures have been given at the hospital for The Rutgers University Class in Psychology, The Post Graduate Class in Psychology of Drew University and the New Jersey Division of Hospital Social Workers.

SURGICAL OPERATIONS, ACCIDENTS, BIRTHS ETC.

During the past year the surgical work of the hospital has been

continued under the direction of Dr. Laurence M. Collins who has personally performed practically all of the major operations. Dr. Collins is not only an excellent surgeon and diagnostician, but a constant student, always alert to new methods or discoveries. This year he became keenly interested in the work with spinal anesthesia being done by Dr. George P. Pitkin, one of our consulting staff, which has aroused general interest and been taken up by several of the leading surgeons of the country. Dr. Collins made numerous visits to his clinics and was instrumental in arranging for Dr. Pitkin to operate at this institution in order that the entire staff might have an opportunity to observe his technique. Following these demonstrations, Dr. Collins himself began to use spinal anesthesia, especially in the aged and those suffering from cardio-respiratory and the various organic diseases in which a general anesthetic was contra-indicated. Upwards of sixty cases have been operated upon under this anesthetic with no mortality, and a follow-up has revealed no after effects. In addition to the advantages of eliminating the dangers of ether pneumonia and the possible evil effects upon the kidneys or other organs, spinal anesthesia causes no nausea, and since the patient does not lose consciousness, much anxiety and discomfort are eliminated. So far as I know, this is the first time spinal anesthesia has been used in an institution for mental diseases and the fine results obtained have been a source of satisfaction, not only to Dr. Collins and his assistants, and to the hospital officials, but to Dr. Pitkin also.

During the year a complete check-up of all patients admitted to the reception service and a survey of the entire hospital by the physicians in charge of the various wards and special divisions, including the gynecological division, have revealed a number of cases requiring surgical intervention. Dr. Collins has submitted a list of the more important operations with the results; in the entire list, with over two hundred cases, there are only three deaths-two of these were forms of carcinoma, and the third was acute suppurative cholecystitis. In view of the types of patients involved, many of whom are so deteriorated that they are indifferent to their own symptoms, so that the disease may be well advanced before it is discovered, I think this showing is noteworthy.

No. of Cases	Diagnosis	Operation Performed	Result
1	Fracture of metacarpal bone, right thumb.....	Fracture reduced.....	Recovered
1	Fracture of first phalanx, small finger, left hand.....	" " " "	" "
1	Fracture of terminal phalanx, left thumb.....	" " " "	" "
4	Colles fracture of left wrist.....	Fracture reduced and splint applied....	" "
1	Fracture of left clavicle, outer third.....	Fracture reduced.....	" "
1	Fracture of right clavicle, outer third.....	" " " "	" "
1	Fracture of 5th and 6th ribs, left side.....	Chest immobilized....	" "
1	Fracture of lower jaw.....	Fragments wired.....	" "
1	Fracture of lower end of tibia.....	Fracture reduced.....	" "
1	Fracture of tibia.....	" " " "	" "
1	Fracture of internal condyle, right tibia.....	" " " "	" "
2	Fracture of neck of right femur.....	Fracture reduced and splint applied....	" "
1	Intracapsular fracture of neck of left femur....	Fracture reduced.....	" "
1	Intracapsular fracture of neck of right femur..	" " " "	" "
1	Fracture of lower end of ulna.....	" " " "	" "
1	Fracture of ulna, lower third.....	" " " "	" "
1	Fracture of neck of left humerus.....	" " " "	" "
1	Fracture of upper third, right humerus.....	" " " "	" "
1	Fracture of upper third, left humerus.....	" " " "	" "
4	Cellulitis of right leg.....	Incised and drained....	" "
2	Cellulitis of left leg.....	" " " "	" "
2	Cellulitis of right foot.....	" " " "	" "
2	Cellulitis of right arm.....	" " " "	" "
1	Cellulitis of right thumb and hand.....	" " " "	" "
1	Osteomyelitis, small finger, right hand.....	Bone curetted.....	" "
1	Osteomyelitis, second finger, right hand.....	Amputated	" "
1	Ankylosis (fibrous) of fingers of right hand.....	Adhesions broken up and casts applied.....	" "
1	Ankylosis (fibrous) of both knee joints.....	Adhesions broken up and casts applied.....	" "
1	Ankylosis and infection, small finger, right hand.....	Amputation at metacarpophalangeal articulation	" "
1	Anterior dislocation of right shoulder	Reduced.....	" "
1	Anterior dislocation of left shoulder.....	" " " "	" "
1	Gangrene small toe, right foot.....	Amputated.....	" "
1	Gangrene second toe, left foot.....	" " " "	" "
1	Gangrene (moist) lower leg.....	Amputation of lower third of leg.....	" "
1	Contusion of index finger, right hand.....	Finger immobilized.....	" "
1	Psoas abscess.....	Incised and drained.....	" "

No. of Cases	Diagnosis	Operation Performed	Result
1	Removal of foreign body, left leg.....	Incised and old sinus cured with removal of foreign body.....	Recovered
1	Adeno carcinoma of neck.....	Removal of tumor growth	Died
1	Carbuncle of back.....	Incised.....	Recovered
6	Carbuncle of neck.....	Incised and drained.....	" "
1	Lipoma of neck.....	Tumor excised.....	" "
5	Cervical adenitis.....	Glands dissected.....	" "
4	Tubercular adenitis.....	" " " "	" "
6	Sebaceous cysts of neck.....	Cysts extirpated.....	" "
1	Sebaceous cysts of face.....	" " " "	" "
5	Sebaceous cysts of scalp.....	" " " "	" "
1	Burn of first degree of face, chest, and forearm.....	Dressings applied.....	" "
1	Burns of first and second degree, both legs....	" " " "	" "
1	Burns of first degree over right arm and face..	" " " "	" "
1	Burns of first degree over entire body.....	" " " "	" "
46	Chronic catarrhal appendicitis.....	Appendectomy.....	" "
18	Acute catarrhal appendicitis.....	" " " "	" "
4	Acute suppurative appendicitis.....	" " " "	" "
1	Carcinoma of stomach.....	Exploratory.....	Died
1	Post operative ventral hernia.....	Tissues dissected, adhesions freed, and wall restored.....	Recovered
1	Strangulated inguinal hernia, right.....	Bassini.....	" "
3	Right inguinal hernia.....	" " " "	" "
6	Double inguinal hernia.....	" " " "	" "
2	Femoral hernia.....	Hernia reduced.....	" "
1	Incarcerated umbilical hernia.....	Sac resected, contents returned.....	" "
2	Incarcerated right inguinal hernia.....	Bassini.....	" "
1	Acute suppurative cholecystitis.....	Cholecystectomy.....	Died
6	Cholelithiasis.....	" " " "	Recovered
5	Chronic cholecystitis.....	" " " "	" "
1	Perinephritis abscess.....	Incised and drained....	" "
3	Intestinal obstruction due to adhesions.....	Adhesions broken up....	" "
1	Empyema of pleural cavity.....	Rib resected.....	" "
4	Hydrocele of sac.....	Bottle operation.....	" "
3	Tumor of testicle.....	Orchidectomy.....	" "
4	Paraphimosis.....	Circumcision.....	" "
2	Varicocele.....	Veins ligated.....	" "
1	Varicose veins, lower extremities.....	" " " "	" "
2	Toxemia of pregnancy.....	Caesarian section.....	" "
1	Left ovarian cyst and right salpingitis.....	Oophorectomy, salpingectomy....	" "
2	Ovarian cyst, right.....	Oophorectomy.....	" "

No. of Cases	Diagnosis	Operation Performed	Result
1	Fibroid uterus and cystic ovaries...	Hysterectomy, oophorectomy...	Recov'd
1	Fibroid uterus and left ovarian cyst...	Hysterectomy, left oophorectomy	"
3	Fibroid uterus and chronic salpingitis...	Hysterectomy, salpingectomy...	"
1	Fibroid uterus and chronic appendicitis.	Hysterectomy, appendectomy...	"
4	Fibroid uterus.....	Hysterectomy.....	"
3	Chronic endometritis.....	Dilatation and curettage	"
1	Vulvovaginal cyst.....	Cyst extirpated.....	"
10	External hemorrhoids.....	Hemorrhoidectomy.....	"
4	Carcinoma of right breast.....	Amputation.....	Improved
3	Carcinoma of both breasts.....	"	"
2	Fibroma of right breast.....	"	Recovered

During the past year there have been a number of minor accidents and injuries to both patients and employees. These have been treated by the hospital staff, as have the more important injuries resulting in fractures or in serious traumata to the soft tissues. Two suicides occurred. In each instance the coroner was called, made a thorough investigation and signed the death certificates.

There were three births at the institution in the course of the year, as follows:

Patient admitted February 1, 1927, female child born July 16, 1927. Child died July 17, 1927. In this case the mother was in a toxic condition, excited, and with suicidal tendencies; a Caesarean section was performed, but the infant was exhausted and died next day.

Patient admitted July 14, 1927; male child born March 21, 1928. Child removed from hospital by father, April 14, 1928.

Patient admitted December 14, 1927; female child born June 14, 1928. Child removed from the hospital by mother of the patient. In this case the patient was a young unmarried girl; near the end of pregnancy she became very toxic, with much nausea and vomiting; examination showed a contracted pelvis, so it was decided to perform a Caesarean section. The patient made an uneventful recovery, and the infant was normal.

GYNECOLOGICAL DIVISION

The gynecological work of the hospital has been throughout the year in charge of a woman physician, Dr. Margaret Douglas.

Routine examination has been made of all women patients on admission and of other patients and employees whom the different physicians have sent to this division. Treatments have been given where indicated. Those considered in need of surgical attention have been referred to the surgical division for consultation, and if an operation was found necessary permission was obtained from the relatives of the patient, as in other surgical cases, and the work was done by the resident surgeon. The gynecological operations performed during the year will be found listed with the other surgical work of the hospital, and the deliveries are also included under that topic. Dr. Douglas has submitted the following report of the year's work in her division:

EXAMINATIONS

New admissions.....	431
Referred cases, patients.....	130
Employees.....	80
Total.....	641

TREATMENTS

Total number of treatments given.....	3,809
Cases referred for surgical consultation.....	138

SMEARS

Positive for Neisserian Diplococci.....	47
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EYE, EAR, NOSE AND THROAT DIVISION

In the eye, ear, nose and throat division, Dr. P. J. Gambill has continued as the resident specialist in charge of the work; a nurse has been regularly assigned to the division. Dr. Gambill has been very successful both in medical diagnosis and treatment and in surgical cases, and has carried on all the work in his specialty required by the hospital without calling upon the consulting staff. Routine eye, ear, nose and throat examinations have been made upon all patients soon after admission, and special examinations have been made at the request of the ward physicians. Employees have been sent to the division by other physicians of the staff for examination and treatment, and others have voluntarily reported for examination, treatment, or operation.

Dr. Gambill's report for this year's work gives details of the different conditions diagnosed and the number of treatments

given for each, but to save space it has been necessary to condense the tables.

EXAMINATIONS

Patients:	Eye	Ear	Nose	Throat	Total
	Routine.....	910	910	910		910	3,640
Special.....	161	114	125	202	602
Employees:					
Special.....	69	51	40	940	1,100
Total.....	1140	1075	1075	2052	5,342

MEDICAL TREATMENTS

	Patients	Employees	Total
Eye:			
Number treated.....	454	173	627
Number treatments.....	751	287	1038
Ear:			
Number treated.....	271	92	363
Number treatments.....	968	227	1195
Nose:			
Number treated.....	476	99	575
Number treatments.....	1533	326	1859
Throat:			
Number treated.....	137	104	241
Number treatments.....	513	244	757
Total:			
Number treated.....	1338	458	1806
Number treatments.....	3765	1084	4849

SURGICAL OPERATIONS

Operation Performed	Patients	Employees	Total
Adenoidectomies, general anesthesia.....	..	1	1
Cataract extractions.....	4	..	4
Ethmoidectomies.....	4	..	4
Incision and drainage, peritonsillar abscess.....	7	7	14
Iridectomies.....	6	..	6
Mastoidectomies.....	2	..	2
Myringotomies.....	10	5	15
Radical antrums (modified).....	8	1	9
Radical antrums (caldwell Luc.).....	2	..	2
Removal of aural polyps.....	5	..	5
Removal of nasal polyps.....	16	2	18
Removal of fish bone from trachea.....	1	..	1
Removal of chalazion from eye lid.....	1	..	1

	Patients	Employees	Total
Removal lingual tonsil.....	2	..	2
Repair badly lacerated eye lids under ether.....	1	..	1
Submucous resection of septum, local anesthesia..	14	..	14
Tonsillectomies, general anesthesia.....	99	1	100
Tonsillectomies, local anesthesia.....	..	1	1
Turbinectomies, (anterior).....	8	..	8
Total operations performed.....	190	18	208

DENTAL DIVISION

The work of the dental division has been continued throughout the year, but for only eight months of the period has there been a full staff. Dr. Thomas R. Palmer, formerly, with the United States Public Health Service and the United States Veterans Bureau reported for duty as resident dentist in charge of the division on October 1, 1927, and has shown great interest in the work and been very successful in meeting the exacting requirements of his position. Dr. J. F. Henningsen continued as resident dental surgeon until June 1, 1928, when he resigned to enter private practice. Throughout the year Dr. F. C. Bartleman of Newark, as consultant, made weekly visits to the institution where his advice and assistance have been of extreme value. Mr. P. R. DeNapoly has retained his position as mechanical dentist, and two nurses have been regularly assigned to the division.

A complete dental and oral examination has been made of each patient within a week after admission which, with the routine lateral x-ray plates, constitute a complete record of the condition of the patient's mouth on his admission to this hospital. Where the oral examination or headplates disclosed any pathological condition, dental radiographs were made and treatment instituted. A large number of impactions have been discovered and promptly operated upon. The great majority of dental and oral operations have been performed under local anesthesia. A complete filing and follow up system has been installed whereby every patient admitted to the hospital is assured of receiving necessary dental treatment within a short time. The prosthetic work has increased and a large number of dentures and bridges have been constructed for patients whose masticating ability had been reduced to such a state that artificial replace-

ment seemed necessary. A definite schedule of fees covering fillings and replacements has been put into effect. These fees represent approximately the cost of the work to the hospital, and are very moderate compared to the cost of similar services outside the institution. During the year, the relatives or friends of patients paid in the sum of \$1553.00 for dental work, but in cases where they were unable to pay, the work was done without charge.

In addition to the work for newly admitted patients, a complete dental examination has been made for a number of other patients, both those referred by the ward physicians, and also as a routine measure for patients resident at the hospital. It is hoped that a regular oral examination of all patients in the institution can be arranged. During the past three months a number of cases of Vincent's Infection have been discovered among employees, necessitating their isolation and treatment. Results have been satisfactory in every instance. By a careful system of inspection and isolation, the disease among patients has been limited to two mild cases, both of whom are now recovered. The work accomplished in this division during the year is as follows:

REPLACEMENTS

Full vulcanite dentures.....	134
Partial vulcanite dentures with gold clasps.....	30
Lingual bar lower dentures with gold clasps.....	16
Total dentures made and inserted.....	180
Bridges made and inserted.....	7
Dentures repaired.....	42

FILLINGS

Cement.....	383
Amalgam.....	259
Silicate.....	64
Gold inlays.....	5
Gold crowns.....	1
Total fillings.....	712

EXAMINATIONS

New admissions.....	910
Patients for Vincent's infection.....	257
Employees for Vincent's infection.....	813
Total examinations.....	1,980

TREATMENTS

Vincent's infection.....	113
Prophylaxis.....	245
Total treatments.....	358

EXODONTIA AND SURGERY

Extractions.....	3,796
Impactions removed.....	84
Fractured mandible.....	1
Minor surgical operations in mouth.....	3
General anæsthetic, nitrous oxide.....	6

As in the previous years, the children from the Morris County Children's Home at Parsippany have received dental attention free of charge at such times as would not interfere with the treatment of our own patients. The following is a summary of the work done:

Number of treatments rendered.....	89
Number of teeth extracted.....	49
Number of amalgam fillings inserted.....	28
Number of cement fillings inserted.....	26

PATHOLOGICAL DIVISION

During the past year the pathological laboratory has continued its comprehensive and reliable work under the direction of Dr. Thomas B. Christian. Reports and records have been promptly made and filed, the data have been accurate, and the entire laboratory organization has functioned smoothly and efficiently. Dr. Christian is deeply interested in his specialty, up-to-date in his technique, and follows out with scientific care any new lines of research or treatment which may be required. His report, somewhat condensed, is as follows:

The same routine measures have been continued in the laboratory as were outlined last year, which consisted, for the newly admitted patients, of complete blood chemistry, Wasserman tests, urinalyses, complete blood counts, and urethral, vaginal and cervical smears. Every case in the hospital showing a four plus Wasserman has been under treatment, the drugs used being nearsphenamin, sulpharsphemine, mercury compounds, and bismuth compounds, and sodium iodide. The treatment has been

continued as long as the patient remained in the hospital, or until his blood became negative, or until his physical condition contraindicated further treatment, -- as in encephalitis or when the patient developed a susceptibility to the drugs. In syphilitic patients who could not take arsenic, especially old patients or those showing arteriosclerosis, we have used sodium iodide and sodium thiosulphate intravenously.

Typhoid inoculation for the treatment of general paralysis and cerebral spinal syphilis has been instituted, but malarial inoculation has not been discontinued. Upon admission a syphilitic patient has been as a rule placed upon neo-arsphenamin until permission has been obtained from his family for typhoid vaccine inoculation. Then typhoid vaccine has been administered intravenously, the frequency and duration of treatment depending upon the reaction of the patient. If he did not show improvement under this treatment, he was given malarial inoculation, and still later, if it seemed advisable, he was put on the regular antisyphilitic treatment.

The following table shows in brief the regular treatment for syphilis:

	Male	Female	Total
Number of cases under treatment.....	96	41	137
Number of doses of neo-arsphenimine administered.....	810	492	1,302
Number of doses mercury and other drugs.....	1,014	421	1,435

The free clinic for venereal disease among those who are not patients at this institution has been maintained. It is open to all indigent persons in the hospital district, and is held every Friday between the hours of 2:00 p. m. and 4:30 p. m. The subject must be referred by a physician and must be an indigent case in order to receive treatment. The drugs, such as salvarsan and mercury, and the apparatus used in this clinic are furnished by the United States Public Health Service. Included in this out-patient clinic have been many of the hospital patients who were out of the institution on trial visit, but who showed evidence of venereal disease for which further treatment was indicated. The following is a summary of the work in this clinic during the past year:

CASES TREATED:	Male	Female	Total
Syphilis.....	147	76	223
Gonorrhoea.....	63	20	83
Chancroid.....	10	4	14
Total.....	220	100	320

During the year at the pathological laboratory a grand total of 33,884 examinations were performed. Of these, 19,663 were made for males, 13,863 for females, and 358 were miscellaneous, such as milk and water tests. The following tabulation shows the type and number of examinations under each classification:

URINE:	Male	Female	Total
Chemical and microscopical.....	2,890	2,291	5,181
Quantitative for albumin.....	619	576	1,195
Quantitative for sugar.....	321	269	590
Quantitative for chlorides.....	46	26	72
Cultures for types of bacteria.....	16	8	24
Microscopical examination of stained smears.....	22	16	38
Phenolsulphonphthalein functional tests.....	12	11	23
Positive casts.....	471	310	781
BLOOD:			
Enumeration of red blood cells.....	1,174	946	2,120
Enumeration of white blood cells.....	1,666	1,011	2,677
Estimations of hemoglobin.....	781	620	1,401
Differential leukocyte counts.....	1,610	987	2,597
Examination for plasmodium malaria.....	64	21	85
Widal test.....	71	62	133
Cultures.....	27	21	48
Examination for pneumococcus.....	11	7	18
Determination of blood groups.....	140	96	236
Sugar.....	987	786	1,773
Non-protein nitrogen.....	984	809	1,793
Urea nitrogen.....	988	826	1,814
Creatinine.....	1,002	814	1,816
Uric acid.....	14	9	23
Cholestol.....	10	6	16
Chlorides.....	28	19	47
Total nitrogen.....	11	4	15
Tests for CO ₂ in the blood.....	12	3	15
Wassermann tests.....	1,554	313	1,867
Hecht-Weinberg-Gradwohl tests.....	1,554	1,172	2,726
Estimations of the coagulation time.....	71	28	99

SPINAL FLUID:			
Wassermann tests.....	317	132	449
Cell counts.....	317	132	449
Globulin.....	317	132	449
Colloidal gold curve.....	317	132	449
Microscopical examination of stained smears	28	12	40
Cultures.....	16	9	25
Quantitative sugar estimations.....	313	130	443
Quantitative chlorides.....	4	3	7
Non-protein nitrogen.....	6	5	11
Urea nitrogen.....	6	5	11
Creatinine.....	6	5	11
SPUTUM:			
For tubercle bacilli.....	56	41	97
For bacterial flora.....	29	18	47
Cultures.....	12	7	19
For types of pneumococci.....	14	12	26
FECES:			
For parasitic organisms.....	26	19	45
For tubercle bacilli.....	29	22	51
For typhoid bacilli.....	16	12	28
For bacterial flora.....	24	19	43
For occult blood.....	50	22	72
SMEARS:			
For gonococci.....	120	610	730
For treponema pallidum.....	26	6	32
From diphtheriæ cultures.....	42	29	71
From eyes.....	10	9	19
From pus from ears.....	4	3	7
From pus from wounds.....	6	2	8
Examination gums for Vincent's angina.....	62	49	111
Examination throat for Vincent's angina....	47	38	85
STOMACH CONTENTS:			
Total acidity.....	14	9	23
Free HCl.....	14	9	23
Combined HCl.....	14	9	23
Salts.....	14	9	23
For Oppler Boas bacillus.....	14	9	23
Cultures.....	12	6	18
Occult blood.....	14	9	23

MISCELLANEOUS:	Male	Female	Total
Patients inoculated with plasmodium malaria	36	21	57
Autogenous vaccines.....	12	9	21
Cultures from teeth.....	10	6	16
Examination of granulomas.....	14	11	25
Basal metabolism estimations.....	29	18	47
Sugar tolerance tests.....	18	7	25
Examination of tissues.....	61	42	103
Autopsies.....	11	7	18
Typhoid vaccine (doses).....	2,000	2,000	4,000
Total number.....	19,663	13,863	33,526
WATER:			
For colon bacilli.....			86
For typhoid bacilli.....			86
Bacterial counts.....			86
Quantitative chlorine estimations.....			4
MILK:			
Specific gravity.....			16
Fat contents.....			16
Total solids.....			16
Proteids.....			16
Sugar.....			16
Bacterial counts.....			16
Total number.....			358
Grand total.....			33,884

ROENTGENOLOGY AND ELECTROTHERAPEUTICS

During the past year the work of the x-ray and electrotherapeutic division has been continued under the direction of Dr. George R. Hampton. Both features of this division are highly valuable to the institution, and Dr. Hampton's accuracy and interest in his specialty, together with his constant application have resulted in the accomplishment of a great deal of work of an excellent type. The following is a brief outline of what has been done in the division, with its results, as submitted by Dr. Hampton:

As in previous years, the physical examination of newly admitted patients has included an exhaustive search for all hidden infection foci which might have either a direct or an indirect influence upon the patient's illness, and in a large proportion of

cases has called for a careful x-raying of the teeth, sinuses, and gastro-intestinal tract.

In the electro-therapeutic room daily treatments have been administered to all patients whose health might be improved by electrical methods. Thirty-one patients suffering from moderately advanced pulmonary tuberculosis were treated during their stay in the hospital by means of the ultra-violet rays. Such treatments consisted of daily exposure to the rays over a period of six to eight weeks. In each case a gradual improvement was noted in the general health, with better appetite and an increase of body weight. Ten patients afflicted with carcinoma were given deep x-ray therapy with good results in six cases. Twenty-two patients suffering from partial paralysis and muscular atrophies were given galvanic and sinusoidal treatment, and over five hundred with insomnia, nervousness and depression were benefitted by means of the high frequency currents.

ROENTGENOGRAPHY

EXPOSURES:

Head.....	446
Maxilla.....	1,246
Chest.....	386
Abdomen (barium meal).....	124
Spine.....	18
Hip.....	23
Pelvis.....	7
Upper extremity.....	194
Lower extremity.....	144
Teeth (films).....	158
Total exposures.....	2,746

ROENTGENOLOGY AND ELECTROTHERAPEUTICS

DIAGNOSES:

Fractures—

Skull.....	6
Nasal bone.....	1
Mandible.....	1
Ribs.....	15
Clavicle.....	3
Scapula.....	1

Humerus.....	10
Radius.....	7
Phalange.....	11
Femur.....	6
Tibia.....	1
Fibula.....	2
Patella.....	1
Metatarsal.....	1
Osteomyelitis—	
Maxillary bone.....	1
Metacarpal.....	5
Foreign Bodies—	
Intestines, hair pin.....	1
Intestines, safety pin.....	2
Stomach, hair pin.....	2
Chest, pins.....	4
Chest—	
Pulmonary tuberculosis, acute.....	93
Pulmonary tuberculosis, chronic.....	80
Bronchitis.....	11
Pleurisy with effusion.....	4
Aortic aneurism.....	5
Cardiac hypertrophy.....	6
Abdomen—	
Appendicitis.....	6
Duodenal adhesions.....	8
Colonic hypomotility.....	10
Elongated colon.....	8
Intestinal ptosis.....	6
Pelvic tumor.....	3
Pregnancy.....	5
Teeth—	
Impactions.....	107
Periapical abscess.....	67
Septic roots.....	89
Pyorrhea.....	93
Miscellaneous—	
Mastoiditis.....	3
Ethmoiditis.....	8
Brain tumor.....	2
Curvature of spine.....	5
Arthritis.....	8

Deltoid bursal.....	2
Sarcoma of femur.....	1

ELECTROTHERAPEUTIC AND X-RAY TREATMENTS

High frequency current (autocondensation).....	1,183
Galvanic and sinusoidal currents.....	41
Vacuum electrode.....	212
Ultra violet ray.....	1,059
Diathermia.....	145
Infra red rays.....	76
Electrolysis.....	4
X-rays.....	42
Total treatments.....	2,762

OCCUPATIONAL THERAPY DIVISION

The organization for the employment of patients has been the same as for several years previous, and a consistent effort has been maintained at all times to interest every possible patient in some form of work. Some assist in the ward house-keeping, others are employed in the different shops, the laundry, the kitchens, on the farm, about the greenhouse and grounds, and in the living quarters and offices of officers and employees. Activities of these simple types belong to the oldest form of institutional employment, and are not included in the more recently developed organized occupational therapy. This division proper comprises two main groups, the work in the various industrial buildings, and the work in the curative workrooms on the wards. During the past year, Dr. George B. Mc Murray has been in charge of the division, and has been able to maintain the different forms of industry on an efficient basis without losing sight of the fundamental reason for the existence of supervised occupation, namely: the greatest possible benefit to the individual patient. The curative workrooms have been under the immediate direction of Miss Rebecca A. Adams, who has been extremely successful in interesting newly admitted patients, as well as those of the more advanced and deteriorated types, in some form of creative effort. Dr. Mc Murray has submitted the following report of his division:

The outside industries are divided into Men's Arts and Crafts, Women's Arts and Crafts, Printing and Bookbinding, and Cons

crete Blockmaking. In the early part of the year the new Occupational Therapy Building for Men was opened for use and houses the arts and crafts formerly carried on in the basement rooms of the Dormitory Building. This new structure covers an area of 12,840 square feet, subdivided into the different working centres, and is equipped with up-to-date ventilating and lighting systems. It has a saw-tooth roof and approximately 40% of the outer wall space is of glass, insuring excellent working conditions. We consider this one of the model occupational buildings of the country at the present time.

All members of the occupational therapy staff are members of the New Jersey State Occupational Therapy Society, and with the permission of the hospital management a large percentage of them have attended the meetings of the society held during the past year at the different institutions throughout the State. Lectures in class rooms have been given for the teachers of the division whereby they have been instructed not only in the principles of occupational therapy, but also in reference to the different forms of mental sickness with which they come in contact. At the request of Hon. W. J. Ellis, Commissioner of Institutions and Agencies, a survey of the entire field of occupation for patients in this hospital has been made by Mr. Thomas B. Kidner, President of the American Occupational Therapy Association. This included the two chief sections of curative workrooms and industrial buildings, and also the employment of patients in the shops, laundry, gardening, grading, and other types of work having to do with the maintenance of the institution.

Owing to the fact that a few mild cases of smallpox had appeared among employees at the institution in the latter part of September, it was thought wise to cancel all arrangements for the usual exhibits at State and County fairs last fall. In the course of the year, however, a number of exhibits of articles made in this division have been held at different points in the State at which sales were made and orders taken. Incidentally, it may be said that because of the increased number of men patients required for carrying out the large amount of grading necessary around new buildings this year, a smaller number have been available for work in the division of occupational therapy proper, and a

somewhat lessened production has resulted.

The following is a synopsis of the work accomplished in the various groups of the division during the year.

MEN'S ARTS AND CRAFTS

Willow—	
Chairs.....	39
Settees—chaise longue.....	3
Extension foot rests.....	19
Fergeries.....	46
Tables.....	2
Bassinets.....	2
Dog and cat baskets.....	7
Fireside baskets.....	34
Cut flower trays.....	108
Scrap and market baskets.....	497
Lunch baskets.....	14
Hampers.....	41
Wash baskets.....	87
Baskets—various.....	82
Total articles of willow.....	981
Reed—	
Tables.....	10
Desks.....	1
Lamps, table.....	3
Lamps, boudoir.....	12
Lamp shades.....	14
Fergeries.....	37
Fireside and lawn settees.....	26
Vases.....	139
Shopping bags.....	98
Sewing baskets (work).....	34
Flower and other fancy baskets.....	851
Melon baskets.....	363
Total articles of reed.....	1,588
Brooms—	
Regular.....	2,380
Hearth.....	355
Whisk.....	126
Total brooms made.....	2,861

Toys—	
Wagons and carts.....	175
Row boats.....	62
Child's chairs, rush seats.....	61
Miscellaneous—automobiles, animals, etc.....	314
Total toys.....	612
Miscellaneous—	
Magazine and book racks.....	27
Book ends, hand painted.....	46
Smoking stands.....	5
Nut bowls.....	6
Scrub brushes.....	757
Chairs recaned.....	259
Victrolas repaired.....	16
Clocks repaired.....	2
Beds repaired.....	145
Broom handles salvaged.....	649
Total miscellaneous articles made and repaired.....	1,912
Textiles—	
Loom rugs.....	577
Runners.....	11
Tied tuqs, large.....	6
Cocoa fibre door mats.....	107
Hooked rugs.....	13
Total textiles.....	714
Total articles made and repaired.....	8,668
In addition to the above, about sixty tons of waste paper were gathered and baled	
In the willow holt, as the willows had become diseased, two and one-fourth acres of plants were grubbed out, the ground plowed, and two and one-half acres of American Green willows planted. These are growing nicely and should produce a good crop this fall.	
During the year the following articles were sent to the storehouse from this section for general hospital use:	
Brooms.....	2,101
Whisk brooms.....	36
Scrub brushes.....	770
Cocoa fibre door mats.....	96

Scrap baskets.....	32
Loom rugs.....	164
Total articles.....	3,199

WOMEN'S ARTS AND CRAFTS

Fancy work—

Braided rugs.....	81
Hooked rugs.....	79
Loom woven rugs.....	21
Articles in raffia.....	9
Miscellaneous.....	2,766
Total.....	2,956

The miscellaneous articles included luncheon sets, doilies, embroidered aprons and towels, laundry bags, baby quilts and spreads, pillow cases, dolls, bunnies, and a variety of other articles. Lace was crocheted to the amount of 67½ yards, and tatting made to the amount of 143½ yards.

Plain sewing—

Sheets, single.....	7,712
Sheets, double.....	6,240
Aprons.....	710
Bags, laundry.....	198
Bags, coffee and dairy.....	3,891
Towels, hand.....	9,804
Towels, dish.....	3,648
Bed spreads.....	10
Table cloths.....	54
Petticoats, flannel.....	1,806
Petticoats, gingham.....	942
Night dresses.....	2,174
Night shirts.....	312
Drawers.....	2,598
Chemises.....	744
Burial suits, four-piece.....	154
Operating gowns, physicians'.....	50
Muslin squares, for use of physicians in Clinic.....	429
Large sheets for painters.....	2
Loom covers.....	5
Bloomers, trunks, blouses, etc., for Field Day.....	106
Flags, for Field Day.....	160
Total plain sewing articles made.....	41,749

PRINTING AND BOOKBINDING

Ruling impressions.....	706,400
Printing impressions.....	1,431,047
Total impressions.....	2,137,447
Binding and stitching jobs.....	29,609
Desk and scribbling pads made up.....	6,071

CONCRETE BLOCK INDUSTRY

Concrete and cinder blocks are made for use in various sections of the institution and especially for new building and construction work. A special building is devoted to this industry. The following blocks were made during the year:

8" x 8" x 16".....	18,400
4" x 8" x 16".....	9,560
Total blocks made.....	27,960

CURATIVE WORKROOMS

This branch of the occupational therapy division is distinguished from the industrial section by the fact that work is carried on either in the wards or in rooms located close by. The purpose of this arrangement is to reach the numerous excited, depressed, or sluggish patients who cannot be dealt with so successfully in the larger groups and more complex surroundings of the different industrial buildings. Under the supervision of Miss Rebecca A. Adams very satisfactory advance has been made in this section during the past year. Miss Adams has submitted the following report of her work:

The formation of the New Jersey Occupational Therapy Association at Greystone Park in June 1927 marked the beginning of a wide general interest in occupational therapy throughout the public and private institutions of the State. The quarterly meetings held at the State Village in Skillman, the Essex County Hospital at Cedar Grove, the Commission for the Blind in Newark, the Training School at Vineland, and the first annual meeting which was held at Atlantic City in conjunction with the New Jersey Hospital Association, have given those persons actively engaged in occupational therapy an opportunity to study the possibilities of directed occupations in the treatment of a wide variety of mental and physical

ills. So needed has been this means of pooling the enthusiasm and knowledge of experienced occupational therapists for the common benefit of instructors of all degrees of skill and training that the society has enrolled eighty members during its first year.

As evidence of the serious purpose of the organization I quote here a resolution passed at the annual meeting: Resolution, Presented by Dr. George B. McMurray: Whereas, the New Jersey Occupational Therapy Association in annual convention assembled, has heard from leading physicians present a definite declaration that no institution for the care and treatment of sick and disabled persons, especially hospitals and sanatoria for diseases which require prolonged treatment, can be considered complete now-a-days unless it makes adequate provision for curative occupations and related activities, including recreation and physical exercises when the last named are appropriate:

Be it hereby resolved that this declaration be spread upon the records of our Association, and that a copy of the foregoing preamble and of this resolution be sent to the authorities of all hospitals, sanatoria, and other institutions for the sick and the disabled in the State of New Jersey.

In the section of curative workrooms, there are now four trained occupational therapists and twelve partly trained assistants. During the past year six new classes were opened; the largest number of classes held per day was twenty-eight. The average enrollment in the total number of classes was 532; 1,454 individual patients were treated during the year on the prescription of physicians, 932 of whom were new to the work. In the course of the year, 1,200 articles were completed for sale, and 534 were made for the use of patients, largely from waste material. For the use of the hospital there were made from new materials 115 pairs of metal tipped shoe laces, and window curtains for five wards. The following equipment was built by patients for use in the occupational therapy division: one weaver's bench, one four-harness floor loom, five rug frames, and one chest.

Six exhibitions and sales were held during the year, and a successful showing was made, despite the omission of the usual exhibits at State and County Fairs in the autumn. Three large ice-cream parties were held for the patients of the various classes, on July 4th,

Christmas, and Easter, respectively. In the course of the year, Miss Adams attended many meetings of occupational therapy associations, including the annual meeting of the American Occupational Therapy Association at Minneapolis.

PHYSICAL EDUCATION DIVISION

In the division of physical education, Miss Edith S. Moodie, who had organized the first class in 1923 and been director since that time, resigned on July 12, 1927. The supervision of the work was given to Miss Beatrice M. Ford, who had been first assistant to Miss Moodie for about seven months and was entirely familiar with the requirements of the position. Under her direction the activities of the division have continued in a satisfactory manner and with undoubted benefit to the general health and mental condition of the patients under treatment.

Miss Ford has submitted a detailed statement of the year's work which I have summarized as follows:

At the end of the year, besides the acting director, the division staff consisted of nine instructors, two of whom were of senior classification and the remainder juniors. Of the junior instructors, one had passed the civil service examination for senior and was in line for promotion. There were two resignations besides that of the Director during the year, and three appointments. One of the junior instructors left the staff in September to return to college for her final year and was re-appointed in June, after being graduated. A vacation assistant was engaged three days before the close of fiscal year, with the understanding that the appointment was for the summer months only.

As the patients, with the exception of sick and operative cases, were removed from the Clinic Building in July, no classes in physical education have been conducted in that building during practically the entire year. Daily attendance at classes in the Main Building has averaged about 377 patients, and at the Dormitory building about 221 patients. The average daily attendance for the year at classes conducted by this division was 602.

In November a new schedule for classes in the Main Building was adopted so that on each ward two classes were held each day, one for a half hour in the morning and one for a forty-five min-

ute period in the afternoon. The work was arranged to dovetail with that of the occupational therapy groups so that the patients were kept busy as much as possible. It was found that the patients responded better and seemed to receive more benefit from this division of the work.

Special classes in carol singing were held on the wards throughout the Main, Dormitory and Reception Buildings during the month of December, with an estimated attendance of 1030. A choir was formed for the purpose of leading the singing at the Christmas services, and forty men and women were selected to sing alone at the entertainment and also at the Sunday afternoon services. During Holy Week the patients on the wards practiced Easter carols. At the beginning of May special classes for Field Day practice were started. Those for women met in the afternoon and those for men in the evening. As Field Day is to be held in July, they have been continued up to the end of the fiscal year.

Each month ward parties were held for the patients who participated in the work of the division, with singing and social dancing for entertainment. Iced tea, cookies, and candy have been regularly supplied by the institution as refreshments on these occasions. In addition, a mass party was held once a month for the better types of patients from the entire hospital. They were planned to fit in with the various holidays and festivals, and during the summer were held out of doors whenever possible. The first indoor party of the year was in celebration of Hallowe'en, patients were urged to come in costume and prizes were awarded. A barrel of cider, cookies, candy, and apples supplied refreshments. Thanksgiving, Christmas, New Year, St. Valentine, St. Patrick, and Easter parties followed. On each occasion some entertainment was furnished by the instructors of the division. At the Easter party a small cabaret show was given, which was a novelty greatly enjoyed by the patients. The total attendance of patients at parties during the year has been 8,400.

SOCIAL SERVICE DIVISION

In the five years since it was first organized in the institution the social service division has grown steadily in size and in import-

tance to the medical department of the hospital. No case is considered ready to be brought before the staff meeting for discussion and diagnosis until the social service division has submitted its report as to the general history and the development of the present sickness. No patient under the regular routine leaves the hospital on trial visit until the social service division has investigated the surroundings into which he is to go, and after he does leave the hospital, the division keeps in touch with him for a full year before his final discharge from the records of the institution is permitted. In order to carry out efficiently work of this character, the individual workers must not only be broadly educated with special training in psychiatric methods, but to quote from a recent statement prepared by a committee on psychiatric social work in state hospitals they must also possess "good physical health, a well-adjusted mental life, more than an ordinary amount of optimism and patience, and a keen sense of humor." In addition to the help given to the patient and his family and friends by competent after-care, a direct saving to the state is effected by enabling many to live in the community who would otherwise continue for a longer period, perhaps indefinitely, as hospital residents.

During the past year Miss Mildred H. Hurley has continued as Director of the Social Service Division, and has supervised not only the social work connected with the hospital patients, but also that of the mental hygiene clinics. Her report is as follows:

Since our last annual report there have been changes in the personnel of our division--one resignation and three appointments--increasing our staff to ten. This includes the Director, four field workers, three mental hygiene clinic assistants, one historian and one psychologist. Early in the year the division was moved from its cramped quarters in the Clinic Building to the new Reception Building, where it is housed in a very adequate manner. Here the work has expanded to such a degree that the clerical force has also been increased.

During the past year 4,286 visits were made in the community in regard to the welfare of trial visit patients as well as our hospital patients, in obtaining medical and material aid and employment for 31 families and individuals, in making 66 special investigations for the following reasons: first, for further data in assist-

ing the physicians in differential diagnoses; secondly, to plan for the removal of recovered patients from the hospital; thirdly, to secure information as to the justice of certain commitments; fourthly, to obtain the information necessary in locating escaped patients and relative to the justice of returning certain patients from trial visit; fifthly, regarding the personal property of patients committed to the hospital; sixthly, regarding the legal residence of hospital patients; and, seventhly, to locate friends and relatives at the request of patients in the hospital. It may be added, however, that 120 of the total number of visits were made in regard to clinics, conferences, and executive matters.

Visits to the homes of patients being considered for trial visit were made in 260 cases for the purpose of presenting the environmental factors to the physicians as well as to assist the family in planning the patient's future. The social service division was instrumental in obtaining the trial visit of 60 recovered patients referred by the medical staff, who either were friendless or whose relatives were reluctant or refused to take them out. Of this number, homes and employment had to be provided for six before they could leave the hospital; of the remaining 54, some were returned to their own homes, one to the Salvation Army Home, four to the County Almshouse, some to boarding homes, others to their relatives, and still others to relatives in other states when the patient had no legal residence in this state.

In regard to newly admitted cases, 525 medical and social histories were obtained from 807 individuals and efforts were made to locate friends and relatives of new patients who were sent to the hospital with a record of being friendless. Office interviews to the number of 1,307 were held with friends and relatives of hospital and parole patients, and 53 interviews were held with patients themselves, while 505 visits were paid to individuals on the wards.

Two children born in the hospital this year were referred to the social service division to arrange for their removal from the institution. Four employees were referred to the division for assistance, one of whom was placed in a convalescent home, another in a home for the aged; one was given special examination at another State Institution, and the fourth was aided in placing children in a Home.

During the year Miss Hurley has attended various meetings having to do with social service and hospital work and has visited different types of mental hygiene clinics. She has given two talks to clubs in the community, and has served on sub-committees studying state hospital social service. At present she is abroad as a delegate to the National Conference of Social Workers in Paris.

Throughout the year the division has cooperated in every respect with various social workers of the State. In the early spring the New Jersey Hospital social workers group conducted a meeting at this hospital, following which a demonstration clinic was held by the clinical director. Various officials, physicians, and social workers have visited the division during the year, including Dr. Nelson, who made a survey of the work at the request of the Department of Institutions and Agencies. As in former years, the social service division wishes to place on record its appreciation of the willingness with which public officials and individuals in the community have assisted the workers in their extra-mural duties.

MENTAL HYGIENE CLINICS

As a rule, when a patient is admitted to a state hospital his mental disorder has reached an advanced stage, for it is still the tendency of the general public, first, to regard early symptoms as mere personal idiosyncracies; next, after the disease is recognized to wait as long as possible in the hope that it will disappear without treatment; then to try a general hospital or a sanitarium until either the violence of the patient or the financial resources of the family make some other method of care imperative; and finally to bring him to the state hospital. Naturally, the percentage of recoveries is reduced by this procedure, since abnormal habits of thought and reaction tend to become set with time and any physical disease which may be causing the psychosis is also less amenable to treatment after reaching the chronic stage.

In view of this situation, I had felt for a long time that if we could only reach the patients before it had become necessary for them to be committed, we might in many instances avoid hospitalization. This would not only relieve the hospital by reducing the number of admissions, but it would be an incalculable saving to the community, since in a large percentage of cases a hospital

commitment means a broken family. It would also enable us to educate the general public in matters of mental hygiene, which should result first, in averting a good percentage of mental attack and secondly, in an earlier seeking of expert psychiatric advice when abnormal symptoms did appear.

After the matter had been taken up with hospital officials and with Commissioner Ellis of the Department of Institutions and Agencies, acting under the direction of the Board of Managers, I had Dr. Lane open the first mental hygiene clinic in the late winter of 1926. Three clinics were all that could be handled by the regular staff of the institution. Preparatory to these clinics, it was necessary to do considerable educational work in each community as to their purpose and aim. With this foundation, they were enthusiastically received and used to more than capacity from the start. In the foundation of these clinics, Dr. Lane did very excellent work, especially in view of the fact that he was able to give to them only limited time, since he was on active duty as clinical director at the institution. In consideration of their success, the legislature appropriated a special fund for the support of the clinics, to cover the salary of a full-time director and provide necessary personnel and equipment. On December 15, 1927, Dr. Philip J. Trentzsch, who was well equipped by training and experience for the work, reported for duty as director of mental hygiene clinics; the social service workers were transferred from the hospital division and on June 16th a psychologist was added to the clinic staff.

These mental hygiene clinics have proved to be all that the hospital officials had hoped and there is no doubt that they fill a decided need in the community, and are enabling the state hospital to serve the public more effectively than ever before. Eight are now in operation, as follows: Elizabeth, at the General Hospital; Hackensack, at the General Hospital; Paterson, at St. Joseph's Hospital; Jersey City at the City Hospital; Morristown, at Memorial Hospital; Franklin, at the Community House; Newton, at the Court House, and Greystone Park, at the Reception Building. The hospitals, churches, social organizations, courts and communities as a whole have cooperated in every way with the clinic

staff. The local physicians have referred more persons to the clinics than any other source except social agencies, as they welcome an opportunity of obtaining expert consulting service in problem cases. The clinics are entirely free; no service is rendered except psychiatric and psychological examinations and advice, including the assistance of a trained psychiatric social worker in making home and business adjustments. If medical treatment is required, the patient is referred to the proper specialist or clinic.

A new system of mental hygiene records has been introduced by Dr. Trentzsch since he took over the directorship. These include a complete physical, laboratory, psychiatric, neurological, endocrinological, psychological, and sociological history, which gives a complete study of the individual as a whole and affords available material for research work in the future. Regular staff conferences have been held once a week, when cases from previous clinics were presented and discussed.

During the year 77 clinics were held with a total of 773 visits by patients—206 men, 192 women, and 375 children and adolescents. Of these 366 were new patients, 388 return patients, and 19 were turned away for lack of time. Psychiatric examinations were made to the number of 775, and 123 psychological examinations were given. In addition to the patients, 675 visitors attended the clinics and were interviewed by the clinic physician. These included friends and relatives of clinic patients, social workers, physicians, ministers and priests, lawyers, and school principals and teachers. A total of 1,463 visits were made by the clinic social workers; 16 special investigations were made, 24 special amneses obtained in the community, and 141 at the clinics. Of the total number of persons served, it was necessary to have only 9 committed to the state hospital for treatment.

WARD EMPLOYEES AND SCHOOL OF NURSING

At the end of March, Miss Catherine F. Wheeler, R. N., who had been superintendent of nurses since December 1, 1925, resigned to take a similar position in a large general hospital in New York City, and on April 1, 1928, Mrs. Anne How, R. N., was appointed. Mrs. How brought to the position an outstanding ability, a wide experience as superintendent of nurses, including

Manhattan State Hospital, Wards Island, and a maturity of view which, with her keen personal interest in all phases of institutional life as well as in the ward work itself promises extremely well for the future of her division and the hospital as a whole. Probably no other division in the medical service of an institution can contribute so much to either the satisfactory progress or the complete disruption of the work as the nursing and attendant staff. This institution has been greatly handicapped for the past ten years by utterly inadequate housing facilities for the personnel required to care for the patients on the wards, and the result has been a vicious circle of undermanning, heavier duties, and still further depletion of the force. Mrs. How has taken up her duties at a time when the promise of relief is near fulfilment, as the new sixty room addition to the home for nurses is now being placed in service, and the employees' building for two hundred fifty attendants is nearing completion. If general labor conditions continue to follow the same trends next year as in the past twelve months, it should be possible to effect a tremendous improvement in the ward care of the patients before the date for another annual report comes due. Mrs. How has submitted a brief outline of the year's work in her division:

The School of Nursing has been carried on throughout the year, along the lines worked out when the school was opened. Seven students were admitted during the year. The course of instruction given is as follows: Preliminary period—anatomy and physiology, principles and practice of nursing, bacteriology, chemistry, personal hygiene, drugs and solutions, bandaging, ethics, hospital housekeeping; Junior period—remainder of first year—history of nursing, materia medica, eye, ear, nose and throat, massage; Second year, affiliation at Fordham Hospital—surgical diseases, medical diseases, operating room technic, obstetrical nursing; pediatric nursing; Third year, Psychiatry, communicable diseases. The first and third years' work is given at this institution.

This year, from January to June three student nurses eligible for State Board Examinations were given a thorough review of all subjects with special emphasis on anatomy and physiology. This instruction totaled 108 hours. Next year it is planned to

include a brief course of lectures given by the social service division.

Graduation exercises were held in the hospital chapel on March 7, 1928, and a class of five students was graduated:

Ella Smith Hunt	Mary Elizabeth Kiely
Myrtle Margaret Putnam	Grace Hollinsworth
Artie Sue Kerley	

The principal address was delivered by Dr. Henry O. Reik, Secretary of the New Jersey State Medical Society. It was gratifying to note that there were present at the exercises forty-two graduate nurses who were employed at the hospital in different capacities.

The turnover in the nursing personnel has continued high, but at the end of the year fifty-seven graduate nurses were employed in the hospital, fifty women and seven men. This is an increase of twenty-one from the previous year. It is hoped that the new residence home recently completed will have a stabilizing effect on this group. An effort is being made to provide some organized social life and diversion for the nurses, since the location of the institution prevents ready access to city amusements. During the year three afternoon teas were given for student and graduate nurses in the apartment of the superintendent of nurses. Basketball was organized in the winter and regular instruction given one night weekly. Several hikes over the hills were enjoyed. In the spring the student nurses were outfitted for golf and instruction was provided; the recreation on the golf course proved most beneficial and enjoyable. This coming year it is planned to introduce lessons in folk dancing.

In the attendant force there were on June 30, 187 men and 143 women, a total of 330, which is an increase over the previous year of 17 men and 26 women, or a total of 43. Living quarters for this group are still in an unsatisfactory condition. A cottage is being rented in Morris Plains, as for several years past, and a number of women are housed there, being transported between the cottage and the institution by the hospital bus. Two wards in the Reception Building are used for attendants' quarters, one for men and one for women. Until the new Employees' Building is completed and in service, however.

it will be impossible to secure and keep an adequate force of attendants.

STAFF MATTERS

Although there have been numerous changes in the staff of physicians during the past year, they have practically all been among those new to the service, leaving the senior and the more experienced of the junior men unchanged. In the twelve months there were seven appointments and six resignations in the resident staff, so that the total at the end of the year was one more than at the beginning - twenty-one resident physicians. Of the resignations, four were of men appointed within the fiscal year, their stay at the hospital varying from five months to five days. One man who had been appointed near the close of the previous year resigned at the end of four months to accept a tempting offer in private practice; another who had been on the staff a year and three months left in order to accept a position in the state hospital of which his father is superintendent.

In the total of twenty-one physicians are included the superintendent, the clinical director, the pathologist, the roentgenologist, the gynecologist, and the one in charge of the eye, ear, nose and throat division; none of these can give any time to regular ward duty. Two other senior men are specialists who are able to devote only a portion of their time to the wards, the resident surgeon and the physician in charge of occupational therapy and amusements, who acts also as executive officer in the absence of the superintendent. Thirteen full time ward physicians to 3,650 patients is not a satisfactory ratio, but there are only rooms available in the present staff quarters for one more; this was vacated by resignation in June, and I hope to fill it soon by new appointment. During the ensuing year, further rooms for doctors will become available, since a two-family house for senior physicians is to be constructed and when occupied will release two apartments in the staff quarters.

The medical work of the hospital has been carried on well, I feel, considering the conditions of low ratio of physicians to patients and unusually high turnover on the staff. The established routine of five staff meetings a week has been followed; four of

these meetings are for the presentation and discussion of newly admitted cases, and the fifth for considering whether or not a trial visit is advisable for such patients as have shown marked improvement, or whose relatives are urging their release. Besides these meetings, the physicians attend a weekly conference in my office at which the heads of other divisions of the medical service are also present. At this time a free discussion of events and conditions is held, and such matters as need adjustment are taken up in detail.

During the year the hospital staff has been represented at all important conferences held in the State regarding medical or hospital matters, including meetings of the social service, nursing, and occupational therapy organizations. Dr. Lane, as clinical director, Dr. Trentzsch, as director of mental hygiene clinics, and I, as superintendent, attended the annual meeting of the American Psychiatric Association which was held in Minneapolis in June. Close contacts have been maintained with local physicians through the Morris County Medical Society, of which many of the staff are active members. According to custom, the annual meeting of the society was held at this hospital in September. Numerous visits have been made to other hospitals, both general and mental; particular interest has been taken in the technique of Dr. Pitkin for spinal anesthesia; several of our staff have paid frequent visits to his clinics at the Holy Name Hospital in Teaneck and he has also demonstrated his methods more than once in our own operating rooms. As I mentioned in my report of last year, Dr. Pitkin has been made a member of our consulting staff.

Dr. Donovan, senior physician, has been placed in charge of the Clinic Building, which is the medical and surgical hospital for patients and also for sick employees. At the present time, as throughout the year, the work in this building is curtailed by the remodeling which is under way, but the fourth floor operating rooms and hospital wards are still open, as are the third floor rooms for sick employees. During the past year, so far as possible, each new employee has been given a physical examination on reporting for duty.

PHARMACEUTICAL DIVISION

As for several years past, the drug division has been in charge of Mr. Philip B. Roberts, Ph. G., who has conducted it in a thoroughly efficient, systematic and reliable manner. He has had the same assistants as last year, Mr. Louis D. Bangert, Ph. G. and Mr. F. Heiman. Mr. Roberts has submitted the following report:

The work incident to the division has continued to increase both as to amount and scope with the growth of the institution. During the year just closed the number of new prescriptions was 15% larger than in the preceding year, and the repeat prescriptions increased proportionately. With the opening of the Reception Building a complete stock of standard drugs and solutions was put in place on each of the eight wards. More recently a new infirmary in the Dormitory Building was stocked. During the year the old drug room in the Dormitory Building was discontinued and dispensing for that service taken over by the regular pharmacy in the Main Building. This has provided a more uniform system and has relieved the physicians who had previously been obliged to do their own dispensing at that building.

All requisitions for supplies coming out of the medical and surgical appropriations have gone through the drug division. During the year two classes of pupil nurses were instructed in the theory and practice of drugs and solutions. Seven hours of additional work in the form of written reviews and quizzes was given to nurses preparing to take state board examinations.

It is expected that the new quarters under construction at the Clinic Building will be ready for occupancy some time in the coming year, and with more room available it will be possible to increase the manufacture of pharmaceuticals, which will mean a large saving to the institution.

PHOTOGRAPHY

The hospital photographer, Mr. Frederick C. Wainwright, has continued to turn out the same fine quality of work as in previous years, but as in other divisions of the institution, an increase in amount has been necessary in order to meet the requirements of a higher admission rate. As a routine measure, two views—

face and profile—have been taken of each patient soon after admission and mounted prints have been filed in the case record for reference. Photographs have also been made of patients leaving the hospital for trial visit, as well as those being deported by the Government authorities. A photographic record has been made of new construction work in progress at the hospital and pictures have been taken of Field Day events and other subjects of institutional importance. In addition to this work of the studio proper, Mr. Wainwright has been in charge of selecting, transporting, and showing the films for the moving picture entertainments which are given to the patients twice each month from September to June. His summary of the work of his division runs as follows:

No. of newly admitted patients photographed	888
No. of patients photographed for trial visit or deportation	140
No. of 7" x 11" photographs made for progress report	142
No. of 5" x 7" photographs made for progress report	39
No. of Field Day photographs	136
No. of copies and enlargements	62
Total	1407
No. of moving picture shows given during the season	29

GREENHOUSE, GROUNDS AND GRADING

The work of this division has continued to be highly important for the institution and Mr. Otto Koch, who has been in charge of it, deserves great commendation for the amount which he has accomplished during the past year. By the skillful use of patient labor he has not only effected a saving of thousands of dollars to the institution in grading and road repair, but he has also provided healthful outdoor employment for a large number of patients who might otherwise have remained on the wards. He has been especially successful in interesting his employees in the welfare of the patients under their charge, and they have been uniformly kind and considerate in their treatment of them, however trying they might be, or however difficult it was to accomplish the required work with this type of help. That the patients after recovery appreciated this is shown by the fact that during the year Mr. Koch and his men received many letters from those who had gone home.

At the greenhouse, plants and cut flowers have been raised for the wards and dining rooms, and bedding stock for the flower beds around the grounds. Fifteen patients and one employee have been constantly kept busy in this section, not only with the growing of plants, but with the upkeep of the equipment. The greenhouses were painted twice during the year, the benches repaired, and the boiler given attention. A detailed statement of the numbers and varieties of plants and cut flowers produced will be found in the statistical appendix.

Patients have been employed about the grounds during the summer months in mowing the grass, cleaning the debris, caring for flower beds, and keeping the walks and catch basins clear. In the spring they assisted in transplanting 10 trees. During the winter they shoveled and sanded walks and paths, and removed snow from the roads, gutters and fire hydrants. When the ground had frozen to a degree which made grading no longer possible, the working patients were taken to the woods along the brook at the entrance to the hospital grounds, where they cut over two hundred trees. Some of these went to the sawmill and were made into posts, others were cut up for firewood. The underbrush was cleared out, and the tangled woodlot made into an attractive recreation grove.

The roads on the hospital grounds have been kept in repair, although constantly worn by the passage of heavy trucks as well as lighter vehicles. A new gravel pit was opened on the land purchased last year at the entrance to the hospital grounds and 553 cubic yards of gravel were taken out and used on the roads; 624 cubic yards of stone were picked for the roads, and 1,330 cubic yards of crushed stone were utilized. At the hospital stone crusher, over 2,000 cubic yards of stone were crushed in 129 working days.

Grading around new buildings has been carried on extensively during the year whenever weather conditions permitted, the greatest amount of work being done around the Reception Building and Dining Hall. A steam shovel was hired from July to October and a gasoline shovel from July to March; with these and the hospital teams and patient labor, 15,719 cubic yards of soil were handled. In April a shovel was engaged for twelve days and moved 2,072 cubic yards of top soil. For top dressing 810 cubic yards of soil were moved by hand, 546 yards of stone were

picked out, and 50 bushels of grass seed sown. From January to March, at the site of the new root cellar, 1,978 yards of soil were removed by gasoline shovel and 465 yards by hand digging, a total of 2,443 cubic yards. After the construction of the cellar the refill was begun with a gasoline shovel purchased by the hospital for the use of this division; up to the end of the year, 639 cubic yards of soil had been handled.

CLERICAL DIVISION

During the past year the clerico-stenographic force of the medical department has continued to function smoothly and with increasing efficiency under the direction of principal clerk, Mr. James E. Lauenstein. There are now twenty-one stenographers and six typists as compared with nineteen stenographers and three typists last year. The tendency has been to remove stenographers from non-stenographic duties and to install clerk-typists for the more general order of work. This specialization has resulted in economy of service and made possible a closer check on performance.

Much extra work has had to be distributed during the year, owing to numerous illnesses in the force, including three cases of appendicitis which were operated upon by Dr. Collins. All demands for extra duty have been met, and the division has fulfilled all requirements.

The cross index has been kept up-to-date. This embraces a standard set of 9 cards for each patient, and sometimes runs as high as 16 cards. These cards must be filled out for each new patient admitted to the institution, and whenever a patient dies or is discharged all cards pertaining to his case must be removed from the active files. Although the task of making up and arranging some 50,000 cards was a heavy undertaking, the index has proved highly valuable as a source of ready information and has eliminated many tedious compilations from the records which were formerly necessary whenever specific data was requested.

All correspondence relating to patients, and a great number of administrative letters and reports have been handled by this division, as have also case records which include all histories, examinations and reports made up for new patients, as well as the

routine notes for all active cases. In fact, without an efficient clerical force, it is difficult to imagine how the work of so involved an organization as a modern state hospital could possibly be maintained.

RECREATION: AMUSEMENTS, SPORTS, MUSIC AND ENTERTAINMENTS

In addition to the graded activities provided by the divisions of occupational therapy and physical education, a constant effort has been made throughout the year to supply the patients with opportunities for recreation of both the independent and the organized types. Dr. McMurray has had general oversight of this program.

In the summer months athletics were encouraged. Baseball teams made up of patients from the different wards and buildings played competitive games, usually scheduled on Monday and Wednesday afternoons; a team made up of employees played against nine from near-by towns on Saturday afternoons, and the patients and their friends attended as spectators. On the hospital links a number of patients proved to be excellent golfers, while many others acted as caddies and found both pleasure and profit in the exercise. Croquet was enjoyed by women patients on grounds laid out near the industrial building, so that the game furnished a change of activity for those engaged in the various occupations there. During the spring and early summer the athletic field was constantly occupied by groups busy in training for Field Day events, the practice including running, jumping, hurdling and drills.

Field Day was held on July 16th, and despite the fact that it rained heavily late in the afternoon, the major part of the program was completed, to the great satisfaction of the patients and the many hundreds of friends and guests of the institution. A fine exhibit of work done in the occupational therapy division was arranged in conjunction with this, and was seen by throngs of visitors. There is no doubt that Field Day does more than any other single factor to educate the people of our vicinity and even those from more distant parts of the State as to the work accomplished at this institution.

Walking parties and picnics were enjoyed by many patients. Groups from the women's wards went often to the greenhouse and returned with their arms full of flowers to decorate the halls. Others visited the woods for wild fruits and flowers, or simply for the pleasure of walking over the beautiful hills.

In the winter, bowling was as usual a popular activity with both men and women patients. The alleys were reconditioned and equipped with new pins and balls. In the men's wards, the billiard and pool tables provided recreation. A supply of checkers, cards, dominoes, and other equipment for indoor games was given out to the different wards, so that a diversity of amusement could be had.

Music has been provided in many forms, as it affords recreation for almost all types of patients. On many of the wards are pianos, victrolas or radios, and the equipment has been increased during the year by purchases made from the amusement fund. In the spring the hospital orchestra, which had suffered severely from the general shortage of employees during the past few years, was reorganized; at the present time it is composed of both patients and employees, and not only supplies music for the dances and other entertainments, but also for its practice periods goes about to the different wards in all the buildings and to the lawns outside and gives concerts for the patients.

On each Monday afternoon except during the hot months of summer a dance has been held for the patients in the amusement hall of the Main Building. These are always attended by as many, both men and women, as can be accommodated in the space. Every other Friday evening and on special holidays moving picture entertainments were given in the amusement hall of the Dormitory Building. In order to make it possible for a larger number of patients to enjoy these entertainments, dancing which was formerly permitted between pictures, has been discontinued and the entire floor space filled with seats. The usual program has been a feature picture of six reels, a comedy and an International News reel.

Special entertainments for the patients were given during the year as follows: concert by an orchestra of 61 pieces from the

Batten High School of Elizabeth, N. J.; band concert by Exempt Firemen's Sons of West New York, a band of 45 boys under the direction of Professor McCann; a special concert by Guy Hunter, the blind minstrel; a prize dance in which many patients competed, with music by Mr. Victorine and his orchestra—this was arranged through the generosity of Mrs. Garrison of the Board of Managers; a concert by the Elks' Band of Morristown, N. J.; a concert by the Newark Grotto Band of Newark, under the managership of Professor George Morrell.

During Christmas week special effort was directed toward providing the patients with entertainment. Decorations were supplied for all the wards, including small trees and an abundance of paper and tinsel, and many parties were held by different divisions for special groups or entire wards. On Christmas Eve there was a general party held at the Main Building. The doors between the chapel and the amusement hall were thrown open and the entire space from the pulpit to the rear doors of the hall was filled with seats. Two large trees were placed, one on each side of the pulpit, and baskets heaped with gifts were assembled around them. Each package was marked with the name of an individual patient and not one of the hundreds who attended the exercises left without receiving his or her personal gifts. This was made possible through generous donations from the many friends of the institution, and through the careful and systematic work of the officers and employees who selected the gifts and wrapped the packages. After Christmas carols had been sung by a chorus of patients trained by the physical education instructors, greetings were extended by Hon. Daniel S. Voorhees, President of the Board of Managers, Senator Frank D. Abell, and the Superintendent. The presents were then distributed by the physicians, nurses and attendants. On Christmas Day gifts were taken on the wards to such patients as had not been able to attend the exercises of the evening before, a special dinner was served, and there was an abundance of candy, fruit and tobacco supplied from the general Christmas fund. In the evening a moving picture show was held.

In addition to the amusements provided for patients, an effort

has been made to give the officers and the employees more local recreation. The golf course has been constantly used during all but the winter months; an instructor has been available for those desiring his services. In the winter a large dance was held for officers and employees and their friends, and was extensively attended. In the spring two or three smaller receptions and dances were held. A new recreation hall for employees has been opened over the Cafeteria. This has been very comfortably furnished and is equipped with a piano and pool table. I feel we should have the services of a trained personnel worker who could give full time to organizing recreations and amusements for the employees, since the somewhat isolated location of this institution renders access to city sources of entertainments rather difficult, and I am convinced that suitable diversion would improve both the health and the morale of the working force.

LIBRARY DIVISION

There has been a change of personnel in the library division this year, as Miss Beers who was appointed librarian last year resigned on October 22, 1927. Her successor, Mrs. H. F. Howe, reported for duty on October 20, 1927. Miss Rebecca A. Adams, director of curative workrooms has continued her interest in the library and certain patients have found in the care of books a work which appealed to them, and have acted as assistants to the librarian. Under the competent direction of Mrs. Howe, the circulation of books and magazines has shown a steady increase, which means that more and more of the patients have been able to find diversion in reading. Mrs. Howe's report is as follows:

There has been a decided call for up-to-date books, both in fiction and non-fiction. Efforts have been made to fill this need by borrowing a considerable number of books from the County Library, and in this connection we have been greatly indebted to Miss Edith Smith, County Librarian, for the kind way in which she has met our requests. The trips of the book cart through the wards have been continued; 37 wards have been visited weekly, making a yearly total of 1,924 visits, not including periodical trips with extra books and magazines. The visits of patients to the

libraries to make their own selection from the shelves have also been continued.

There has been a steady demand for books and magazines by both staff and employees, and they have also given generously to the library. The ward in the Clinic Building for sick employees has been visited daily with reading matter. Some 300 medical books for the use of the staff were removed from the Main Building to the medical library in the Reception Building. Over 200 of these books have been catalogued, and the entire work will be finished at an early date. The work on this collection is necessarily intricate and lengthy, and here again we are indebted to Miss Edith Smith for the advice which she volunteered.

The following table shows the circulation of books and magazines during the year:

Type	Main Building Library	Coffin Library	Total
Fiction.....	4,108	2,285	6,393
Non-fiction, including magazines.....	7,559	4,192	11,751
Foreign language books.....	280	121	401
Total	11,947	6,598	18,545

There have been added to the library this year 926 books. In this connection the Morristown Library on South Street has been most generous with donations.

RELIGIOUS SERVICES

The same general system of religious services has been followed as in the past. The Roman Catholic priest of the Morris Plains parish has been at all times at the service of the patients. It has been possible to establish regular Mass at the hospital chapel on Sunday morning instead of on Tuesday, as had been the custom for several years. The Jewish patients attended services on Saturday held by a rabbi from Morristown. On Sunday afternoon in the hospital chapel Protestant clergymen have officiated. Methodist, Baptist, Presbyterian and Episcopalian ministers from Morris Plains and Morristown acting in rotation. Special observances have been held for important religious festivals and holidays in the different faiths, and many visits have been paid to patients by religious advisers from their home districts. The

hospital officials have made every effort to cooperate with priests, ministers and rabbis alike in order that so far as possible each patient might have the benefit of instruction and guidance from leaders of his own particular creed.

WAR RISK PATIENTS

As for several years past, I have made up a separate tabulation of the ex-service patients who have been cared for in the institution during the last twelve months:

On records July 1, 1927.....	161
Admitted during year.....	30
Total under treatment during year	191
Discharged during year:	
Recovered	11
Improved	10
Transferred	2
Without psychosis	2
Died.....	5
Total discharged during year	30
Withdrawn as not in World War service ..	2
Total discharged from records during year	32
Remaining on records June 30, 1928	159
Status of patients on records:	
Claims allowed	104
Claims pending	28
Claims disallowed	27
Total	159
On June 30, there was the following distribution of these patients:	
Resident in institution	144
Outside on visit	15
Total.....	159

Throughout the year every attempt has been made to provide these veterans of the World War with such comforts as are consistent with their mental condition and our facilities. A ward has been set aside for their exclusive use, and all whose mental or physical status did not require treatment in some other section of the hospital have been assigned to this ward, which has been fitted up with many special features, largely the gifts of different organizations. I still feel, however, that these men can be cared for much more easily and more satisfactorily in an institution main-

tained by the Federal Government for psychopathic ex-service patients, and am glad to report that the Veterans' Bureau is now arranging to transfer a large number of these men to such a hospital at an early date.

FIRE PROTECTION AND FIRES

In an institution of this type the possibilities of fire are always a source of much anxiety, since any considerable blaze would not only cause immense property damage, but also might result in serious consequences to the patients whose condition renders them helpless in an emergency. Because of this danger a considerable sum has been invested in fire fighting apparatus of the most up-to-date variety, all equipment being mounted on automobile chassis so that the most remote buildings can be reached immediately. Certain of the men employed in the business and maintenance divisions are regularly assigned to fire duty, sleep in the firehouse, and report instantly when an alarm is sounded, whatever their occupation. The division of fire protection has continued during the past year under the direction of Mr. William H. Matthews, formerly chief of the fire department of Orange. He has submitted the following report:

The motor fire apparatus has been regularly tested each week and kept in excellent condition; the fire alarm system has been tested on each working day by sending in a round alarm from one box at noon; the boxes have been rung in rotation, so that each has been tried ten times during the year. Three fire alarm boxes of the old type have been repaired, having been found defective when tested. All hydrants have been tested both in summer and in winter. All 2" and 2½" standpipe hose on the wards and in the different buildings has been thoroughly examined once a month. A total of 279 chemical extinguishers have been tested and recharged.

During the year the fire apparatus was called for fourteen fires on the hospital property. None of these reached at all serious proportions and the total property loss was small. Three of these fires occurred on the wards of the Main Building inside of two days, when a mischievous male patient who had obtained possession of matches in some manner seized such moments as he was unob-

served to start fires and then hide the matches, so that any search of his person would be futile.

WATER SUPPLY

The hospital reservoirs with filters and supply lines have been kept in condition throughout the year. Since the rainfall has been abundant the supply of water has been adequate for regular purposes during the entire twelve months. The report from the engineering division shows that a daily average of 883,900 gallons was consumed, or about 220 gallons daily per capita. The highest average was in January with 988,000 gallons daily. As I reported last year, land has been secured and a well driven in Morris Plains. The flow from this well has been tested at different times and found to come considerably above 700,000 gallons a day. A pump with a capacity of 750,000 gallons per day has been ordered and the water will be pumped through a pipe line into the hospital supply.

NEW BUILDINGS AND IMPROVEMENTS

During the past year there has been a steady advance in the building program. Two important buildings were placed in service early in the fiscal year, the Reception Building, which was opened on July 21, and the Occupational Therapy Building, which was occupied at the end of August. The Reception Building has proved all that was anticipated in design and equipment, but as yet, I regret to say, we have not been able to utilize it to full capacity owing to the necessity of setting aside two entire wards for attendants' quarters. The Occupational Therapy Building has also been entirely satisfactory and has provided ideal housing for the men's industries which were formerly carried on in cramped and makeshift quarters in the basement of the Dormitory Building. An addition to the firehouse providing rooms for fifty male employees of the business and maintenance divisions was also placed in service shortly after the opening of the fiscal year, affording relief for the housing shortage in that group.

Work on the cottage for nurses to house sixty has continued during the year and the building is now completed, furnished and partly occupied. With this additional space for graduate and

student nurses we shall be able to increase our staff to the required number. The building for employees to house 250 has also been under construction throughout the year and is now nearing completion. The wing for women attendants is practically ready for occupancy at the present time. Furnishings for this entire building are being supplied through the State-Use Division. A recreation room for employees which has been finished off in the space over the Cafeteria has also been furnished by the State Use Division.

During the year much time has been devoted to plans and specifications for other construction and reconstruction work for which money was appropriated from the half-mill tax. The remodeling of the Clinic Building into a medical and surgical hospital is now under way. Some of the contracts have been let for reconstructing the Main Building; plans for the reconstruction of the Dormitory Building have been drawn up. Contracts have been let for the house for the business manager and the two-family house for physicians, and work on the foundations is in progress. Plans and specifications have been discussed for the Senile Building, and a location has been selected at the rear of the Dormitory Building between the two temporary wings which are used for tuberculous patients.

An important improvement carried to completion during the year was the installation of a new outside lighting system. With the sidewalks along the Centre Drive in poor condition and frequently obstructed or broken up by trucking where construction on new buildings was in progress, the absence of lights has produced a real hazard during the last few years. The new lights were turned on in the early spring and provide ample illumination where installed; the funds available were not sufficient, however, to permit of extending the system to include all the roads and walks desirable. Contracts have been let for another much needed improvement, the reconstruction of the Centre Drive, and work will be started early in July. This road, built in the days of carriages, has an excellent foundation, but the surface required constant repair under the traffic conditions now prevailing, and at best was rough and far from creditable to the

institution. The contracts provide for a 6" concrete surface, topped by a 2" layer of mesite, which should make a very satisfactory approach to the hospital.

During the year a root cellar was constructed under contract, a sixty foot stack was built for the greenhouse heating plant, a new North Side sewer put in, with certain changes in the line, and a number of other minor improvements were carried on. Many of these will be found enumerated in the report of the engineering division.

During the past six months every effort has been made to increase the efficiency of the culinary division and the serving of food to patients and employees. In the Dormitory Building conditions were very unsatisfactory because of equipment practically worn out and elevator constantly out of order or in process of repair.

A kitchen and dining room were temporarily set up in the basement, while the old kitchen and dining room were remodeled into a modern dining hall with quarry tile floor, accommodating 1,000 patients. When this was completed, arrangements were effected whereby all food should be prepared in the large kitchen in the Main Building and conveyed in insulated food trucks by means of the underground cable car to the Dormitory Building basement and then taken to the dining room by means of the newly installed modern electric elevator. This system not only has improved the service and condition of food, but is effecting a saving.

ENGINEERING DIVISION

Under this classification are included a variety of maintenance activities, such as water supply, boiler plant, the dynamo room, the refrigerating plant, sewage disposal and the mechanical shops. The engineer-in-charge also assists in checking over plans and specifications for new work, inspects work done by contract before it is accepted, and arranges periodic examinations of the different buildings and equipment. During the past twelve months, Mr. Henry Landesman, C. E., has continued in charge of this division and has given to the work the same type of close interest and attention as in former years. He has submitted to me a

somewhat detailed report of the activities and accomplishments of the past year, but so great is the variety covered that I can here enumerate only the more important items.

At the water station a record has been kept of the daily and monthly consumption and also of the amount pumped, since the water level must be kept constant in the Klondike reservoir by pumping from the other reservoirs when necessary. There was a total of 323,509,000 gallons consumed during the year, with 80,942,000 gallons pumped. The average daily per capita consumption varied from 204 gallons in July to 247 gallons in January, the difference being largely due to the varying amounts required by the boilers. The average daily coal consumption was low in July with 32.33 tons and high in February with 109.57 tons. A total of 26,970.13 tons of coal was used at the power house during the year. The refrigerating plant manufactured 960 cakes of ice in February and 2,068 in July.

The mechanics have attended to 10,191 repairs and 172 pieces of new work during the year. The furniture repaired covered practically every variety in use in the institution; chairs led the list with 3,194 repairs. Roofs on practically all buildings, including shops and cottages, were repaired during the year. Reconstruction of dormer windows of the Main Building was continued and work is now about 75% completed. A new ventilator was installed in the roof of the nurses' dining hall. The roof of the rose section of the greenhouse was braced with purlins and posts. Living quarters and offices in the different buildings were remodeled. Rooms formerly used as offices in the Dormitory Building were remodeled into an apartment for a married physician; a small room on the second floor of the Main Building adjoining the superintendent's office was reconstructed and is now used as a private office by the President of the Board of Managers; a room in the basement of the Dormitory Building, was reconstructed as a barber shop; the dairyman's cottage was completely reconstructed; the rooms formerly occupied by outside employees in what was known as "mattress hall" were torn out and the space remodeled to afford additional working and storage room in the mattress shop.

On the different pieces of work completed under contract during the year, a certain amount of additional installation was required, which was accomplished by the hospital mechanical force. At the Dormitory Building kitchen, the removal of old equipment from the original kitchen and setting it up in the temporary basement kitchen was carried out by the regular mechanics; when the Reception Building was occupied, lamps and special sterilizers were connected up, new electrical circuits run for special exhaust fans, linen and clothes shelving constructed, key cabinets built and installed, and the grade of the water main lowered; in the new root cellar the electrical work was all done by the institution; in the reconstruction of the bathrooms and toilets in the Main Building, the work on one ward and the painting on all four was left for the maintenance force to do, owing to the shortage of the money appropriated.

At the dairy, milking machine lines and machinery were installed; bins were constructed, an electric motor installed for food mixing machine; a silo and feed room were constructed, including waterproof foundation 14" thick and 6' deep; a new boiler was set up and connected, and washers, pasteurizer, cooler and bottling machines were installed; various repairs were also given attention. The modern poultry house 20' wide and 200' long which was begun last year was completed, including plumbing, ventilation, carpentry, and painting. For the piggery 25 hog colony houses were completely built by the carpenter shop.

A great deal of plumbing was done during the year, both new and repair work. Many additional toilets have been installed, and many of the old ones have been replaced with new Sloan flush valves and larger supply lines; changes have been made in the heating lines of the Main Building. Repairs have been made in steam and water lines whenever leaks developed.

In the sewage disposal system, septic tanks were emptied and repaired. The valves were thoroughly cleaned and put in good working order, and the sludge delivered to sludge beds. The entire plant has been studied by representatives of the Division of Architecture and Construction, and a program is being worked out for putting the system on a more efficient basis.

Considerable new machinery has been installed during the year. Band saw, shaper, and filer were put in at the carpenter shop; wet grinder, small drill press and lathe at the machine shop; drill press and lathe at the Industrial Building; scaling machine in the bakery, and power brake in the tin shop. At the laundry worn out extractors were replaced by two new ones.

Many other pieces of work were given attention during the year, covering a wide range of mechanical requirements. Mr. Landesman reports that the entire hospital plant is in an improved condition as a result of daily inspections and repairs. Labor turnover in this division was kept to a minimum during the year.

BUSINESS DEPARTMENT

Mr. George J. Hamberger has continued as business manager of the institution during the past year. While interested in the progress of all divisions of his department, he has given especially close personal attention to the dairy, and has been very successful in increasing the amount of milk produced and improving the methods of handling. Mr. E. I. Coursen as assistant to the business manager has continued in charge of the outside division, while Mr. A. J. Van Winkle as chief clerk and treasurer, has managed the business office. Both have had many years of experience in their lines, and are able to attend to a mass of detail with a minimum of friction. The following brief summaries indicate the general type and amount of work done in the different sections of the organization during the past year:

LAUNDRY

In the laundry additional machinery was installed during the year, including two large extractors and one washer. Other equipment on hand will be installed as soon as circumstances permit. Mr. Daniel W. Leyhan has continued in charge, and the work is done partly by employees and partly by patient labor. By a careful system of checking, Mr. Leyhan has reduced the lost articles to a minimum and greatly increased the accuracy of the returns. During the year a total of 3,833,595 pieces were laundered.

GARAGE

The entire motor equipment of the institution has been kept in

repair during the year, the work being done by the very competent garage mechanics, assisted by the different drivers. The equipment includes trucks of different sizes used for transporting supplies about the grounds, and to and from the railroad station; a number of tractors used on the farm, a bus, an ambulance, and several light and heavy passenger automobiles used by the different officers, including the social service workers, on trips necessitated by their duties. The following new motor equipment was added during the past year: three Chevrolet sedans; one Buick seven passenger sedan; one Chevrolet depot wagon; one Mack International five ton truck.

FARM

Excellent work in production was accomplished by Mr. William Ayres in charge of farm work. There were some setbacks from heavy rainstorms and cold weather which retarded the work, but the total value of crops raised was \$17,757.96, an increase of more than \$6,500 over that of last year. A detailed list of the produce will be found in the statistical appendix.

GARDEN

Vegetables of excellent quality were raised in the hospital garden during the past year under the supervision of Mr. John J. Kelly. The total valuation was \$26,166.44, which is somewhat below that of last year, since cold weather, heavy rains and washouts reduced production. No exhibit was made up for the State Fair last year, owing to the breaking out of a few mild cases of smallpox in the institution, but an exhibit was arranged at the Morris County Flower Show and was awarded first honors by the board of judges.

STABLE

The farm stable contains twenty-four horses, but the ages of fourteen of them run from twenty-three to thirty years. Three horses were purchased during the year. In farm work, short hauls in grading, and other duties around the institution, horses are found more economical than motor equipment. Occasionally, during severe snow storms, horses are required to transport supplies when the snow drifts too rapidly to permit of clearing the roads for trucks.

DAIRY

At the dairy various improvements have been made during the past year, including milking machines and equipment for pasteurizing and bottling milk. The value of the dairy products of the year is \$80,435.84, an increase of \$15,304.01 over last year, or \$27,641.12 over two years ago. The increase is entirely in the amount of milk produced, since the beef, manure and other by-products show a slight decrease. The herd is now composed of pure bred and very good grade cows. Eleven cows, one calf and one bull were slaughtered during the year; twenty-six cows and one calf were purchased, and thirty-six heifers and ten calves were transferred. The present herd consists of 162 cows, 9 heifers, 6 calves and 4 bulls, a total of 181 head. Pasture was rented during the summer months for a number of head of dry cows and young stock, and they returned in fine condition. Much credit is due to the herdsman, Mr. John Warneke, for the excellent showing of the dairy; he is deeply interested in cattle and gives close personal attention to the work. Throughout the year the herd has been under the care of Dr. H. W. Dustan, veterinarian, and has been regularly tested for tuberculosis. In June Dr. McNeil, Chief of the Bureau of Animal Industry, Department of Agriculture, began an agglutination test for bacillus abortus; full cooperation has been given by the hospital authorities and the treatment of reactors and suspects and the final disposition of the animals will be made according to the advice of Dr. McNeil.

PIGGERY

At the hospital piggery twenty-five new colony houses have been put in use during the year. A few animals have died of disease, chiefly shoats. The produce for the year was valued at \$9,450.93, a decrease of about \$350 from last year; this decrease was due, however, to the lower market value of pork, as the production was 4,700 pounds higher than in 1927. At present we have 332 hogs and 51 young pigs.

HENNERY

During the year the new poultry house has been completed and put in use, and it is planned gradually to enlarge this indus-

try. The production for the year was valued at \$2,140.06, and the number of eggs collected increased by 1,398 $\frac{2}{3}$ dozen. The flock now included 530 fowls and 1,000 small chicks.

INVENTORY

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

Real estate	\$ 9,253,349.45
Personal property	1,107,298.55
Total	\$10,360,648.00

This is an increase of \$278,995.59 over the previous year.

RECOMMENDATIONS

Although the Board is familiar with the requests for appropriations which are incorporated in the budget for next year, there are a few items which I feel may well be called to its attention with a brief explanation of the reasons why they are desired at this time.

MENTAL HYGIENE CLINICS

Last year the Legislature very kindly, and it seems to me very wisely, granted our request for a special appropriation to cover the personnel and equipment for the Northern New Jersey Mental Hygiene Clinics. With the sum appropriated we were able to obtain the services of a full time director for the clinics, and also to provide the necessary social workers, psychologist and clerks. The clinics were increased from three to eight in number, all in our hospital district. I think that everyone who is in close touch with this work feels that these clinics are giving a real service to the people of the state, and that they should be continued and if possible increased to reach a still larger proportion of the population. The present clinics have been so well received that they have been patronized to more than capacity and other communities, recognizing the value of the special psychiatric service rendered, have requested that clinics be opened in their centres. It is impossible to say exactly how many people have been saved from hospitalization by the attention and advice given at these clinics, but of all the 773 who applied for examination during the

past year, it was necessary to have only nine committed to the state hospital.

UNCLIMBABLE FENCE: LODGE HOUSE AND GATE

During the past few years it has become necessary for the state hospital to follow the example of the owners of private estates and put up unclimbable fencing for protection from the public. The motor car has much to answer for, in the ease with which its occupants can avoid the penalties for their conduct, and we have had to suffer many depredations because of the ease with which stolen goods can now be transported. Beginning several years ago we have been obliged to run fences along the property wherever it bordered a public highway if we wished to raise any attractive produce in that locality. Garden stuff and fruit have suffered most frequently; young trees have been dug up and hauled away after being planted on the watershed, and this year plants were stolen from the flower beds. Now it has become necessary to have a fence in order to protect our patients from the public. Where the highway passes nearest to the hospital buildings, a line of ten or fifteen automobiles may often be seen parked while their occupants are engaged in peering through the hedges and windows at the patients as if they were looking at animals in a zoo. Not only is it unhumane to permit sick people to be subjected to this sort of thing, but there is always a chance that either some of the patients will be assisted to escape or that they will be handed some article which will be dangerous to themselves or others. It would require a considerable force of officers to prevent such irregular visitors from approaching the buildings and exercising grounds, especially on Sundays and holidays, but an unclimbable fence would afford protection.

In order to prevent people who have no legitimate business from entering the grounds, we need a lodge house and gate at the main entrance. With the construction of the new road from this entrance to the Main Building, this will be more necessary than before, since a smooth roadway will be a constant temptation to speeders who will be a serious menace to patients working or exercising along this drive. Also at present, no woman of any age or station can walk along the Centre Drive after dusk on a

pleasant evening without being accosted and invited to go for a ride by some male occupants of automobiles whom she has never seen before. Some of these drivers are not content with a simple refusal, but continue their annoyance for some distance, following slowly along as close to the sidewalk as they can, or even getting out of the cars and crossing the grass to the sidewalk. An efficiently kept gate would do much to check this nuisance, as well as to complete the protection to patients and property afforded by the unclimbable fence.

CURBS AND GUTTERS FOR CENTRE ROAD

In order to provide protection for the edges of the roadway and carry off the water, concrete curbs and gutters should be constructed along the Centre Road. Since this is a wide roadway about .8 of a mile in length and the slope of the land results in a considerable grade all of the way with a steep pitch near the lower end, the amount of water rushing down the road during a heavy storm is enormous. Even with a gravel surface on the road, which absorbed and impeded the water to considerable degree, the cobble stone gutters have frequently been washed out for a distance of many yards after a summer shower. With the smooth surface of the new road, the condition will be much worse, and if adequate concrete gutters and curbs are not provided, the gutters will require constant repair, and a heavy storm may produce sufficient wash to undermine portions of the road at any time.

SIDEWALKS ALONG THE CENTRE ROAD

The sidewalks along the Centre Road are in bad condition and should be replaced throughout their length. These walks were laid many years ago, before the methods of putting in concrete were as well perfected as now, and have been greatly damaged by frost and water. From time to time sections have risen or sunk, so that it has been necessary to replace them in order to avoid accidents; in the construction of the thirteen new buildings which have been erected along this roadway in the past seven years, the sidewalks have been further damaged by trucking across them, and by digging under them for pipe lines. The result is that now hardly a section of the original walks remains which is

not broken and uneven, and as these walks are constantly used by groups of patients out for exercise, as well as by employees and visitors, they should be replaced at once.

TREES AND SHRUBS FOR LANDSCAPING

Around the original buildings of the institution trees and shrubs were planted many years ago, with the result that plentiful shade and attractive outlooks are amply provided. In contrast the new buildings and the areas about them appear bare and crude, exposed alike to the burning sun of summer and the penetrating winds of winter. Since this new group of buildings is intended for newly admitted cases, more than average importance attaches to attractive surroundings. It would be a shortsighted policy that would expend hundreds of thousands of dollars to erect buildings designed for the care and cure of acute mental illnesses, and then leave their surroundings barren and desolate. The expenditure of a modest sum in trees and shrubbery would work wonders for the settings of the new betterment group, as well as for the houses for officers and employees which have also been recently constructed in what was previously open fields.

FIRE ALARM SYSTEM

The present fire alarm system is inadequate for the needs of the institution. Many of the boxes are old and do not function with sufficient certainty to be reliable; much of the wiring is in poor condition, some of it run overhead instead of in the proper underground conduits; and even the more recently installed section involves no fire alarm repeater, so if two or more stations were rung at the same time there would be no correct signal given, and serious delay would arise. The entire system should be replaced with a new and up-to-date installation, of a type sufficient to meet the requirements of an institution of this size. With buildings as widely extended as is now the case at this hospital, the entire fire protection equipment is greatly reduced in efficiency by the absence of a proper fire alarm system.

FIRE PROOF VAULT FOR PATIENTS' RECORDS

The collection of patients' case records should be housed in a fireproof vault. Much of the material contained in these records

is not duplicated, and in the event of a fire in the section of the Main Building where they are housed, not only would the reports of work dating back to the time of the opening of the institution be lost, but in many cases all records of the names and addresses of friends and relatives of patients now in the house would disappear as well as the history of the patient's symptoms and conduct without which no physician would feel justified in prescribing while the patient remained in the institution, or in permitting his discharge.

HOUSING FOR PHYSICIANS

We still have several physicians on the staff who have served the institution faithfully and risen to senior grade, are married and have one or more children, yet are living in quarters which would be comfortable for a single man, or even man and wife, but which are cramped and inadequate for a family. I feel that in the settled, experienced man the hospital has its most valuable staff member, and there is no question that satisfactory maintenance for himself and his family is quite as potent in retaining the services of such a man as an increased salary. Accordingly, I feel that the building of suitable cottages for housing the senior physicians with families is an excellent investment for the state, and that this year provision should be made for at least two such families.

APPOINTMENTS AND RESIGNATIONS

Physicians Appointed:

John Duncan McCallum, M. D.....	July 20, 1927
Charles Beatty Kenney, M. D.	December 12, 1927
J. E. Pickering, M. D.	February 1, 1928
Theodore Gebirtig, M. D.	February 1, 1928
W. W. Sonn, M. D.	April 12, 1928
Edmund S. Burwell, M. D.	April 13, 1928
David P. Young, M. D.	April 20, 1928
Philip J. Trentzsch, M. D.	
Non-resident director of mental hygiene clinics	December 15, 1927

Physicians' Resignations:

Kenneth Y. Sinclair, M. D.	October 1, 1927
Charles Wyatt Hutchings, M. D.	October 10, 1927
J. E. Pickering, M. D.	February 6, 1928
John Duncan McCallum, M. D.	February 28, 1928

Charles Beatty Kenney, M. D. March 1, 1928
 Edmund S. Burwell, M. D. June 11, 1928

Other Resident Officers Appointed

Beatrice M. Ford, Acting Directress of Physical training July 12, 1927
 Thomas R. Palmer, D. D. S., Resident Dentist October 1, 1927
 William G. Beucler, Assistance to Chief Executive Off. December 15, 1927
 Anne How, R. N., Superintendent of Nurses April 1, 1928

Other Resident Officers' Resignations

Edith S. Moodie, Directress of Physical Training July 12, 1927
 Catherine F. Wheeler, R. N., Superintendent of Nurses March 31, 1928
 Jackson F. Henningson D. D. S., Res. Dental Surgeon June 1, 1928

LOSS OF OLD EMPLOYEES

During the past year we have had no employees retire on pension, a rather unusual circumstance. We have, however, three deaths to record. On November 4, 1927, Mr. William Ramsey died. He had been employed at the institution since October 26, 1888, and up until shortly before the time of his death was a laundry worker. He had served the institution faithfully for almost forty years, and left many friends at the hospital and in the community. He made his home in the small village just off the state grounds and reared a family of five children, two of whom are now employed at the institution, and the third is the wife of an employee. It is men and families like this that form a permanent substantial group of workers, in contrast to the mass of short time employees who drift in and out of institutions.

Another man who had been employed in the institution for the major part of a lifetime, although he left the service some ten years ago, was Mr. Patrick Logan who died on March 24, 1928. He first entered the employ of the state on January 1, 1877, and worked in the garden division, except for occasional breaks totaling about eighteen months in all, until July 16, 1918, when he ceased work because of old age, unfortunately before the installation of the pension retirement system. He, too, reared a family not far from the hospital and his children and grandchildren have been listed among our employees.

On December 7, 1927, John Colman died. He had been retired on pension for four years, but prior to his retirement he served the institution continually for nearly fifty years, having been placed on the payroll on July 17, 1876, one month before the

institution was opened for the patients. As supervisor on the male side of the Main Building he knew personally all the men patients who were treated in the institution throughout that long period of time, and by his contacts with all visitors to the North Side he had a range of acquaintances numbered by thousands. To quote from the *Psychogram* which gives the patients' point of view: "We here who knew him personally and well had many reasons, indeed, to hold him in the highest respect because of his pronouncedly strong Christian character, his fairness, and his marked kindness in his official duties."

DISTINGUISHED VISITORS

As in previous years the hospital has been fortunate in having many distinguished visitors during the past twelve months. Numerous state officials have favored us with their presence, including State Comptroller N. A. K. Bugbee, State Treasurer William T. Read, Ex-Governor Stokes, Mr. James Baker, President of the State Board of Taxation, Budget Commissioner John Reddan, State Purchasing Agent Quigley and his assistant Mr. Lambert. Members of the State Board of Control, including Mr. Ellis P. Earle, Chairman, have spent generously of their time at this institution. Commissioner W. J. Ellis has made us many visits, attended conferences on many subjects, and accompanied various delegations to the institution. Members of his department have also devoted much attention to this hospital, including Mr. Charles Leatham and Mr. C. E. Smith, of the Division of Architecture and Construction, Captain George Geiger, State Dietitian George Holbig, all of whom have paid many visits. Dr. Emil Frankel, Dr. Jones and several others of the Department have also spent considerable time at this hospital. In December former commissioner, Hon. Burdette G. Lewis called, accompanied by Mr. George Thorn, Superintendent of the State institution at Vineland. Several from the State Hospital at Trenton have paid us visits at different times during the year, including Mrs. Florence Jacoby, Mr. John Gill and Mr. Klemann of the Board of Managers, Doctor Cotton, Medical Director, Mr. Samuel Atchley, Chief Executive Officer, Doctor Barry of the staff, and Miss Kennedy, Superintendent of Nurses.

Dr. D. F. Weeks, Superintendent of the State Village for Epileptics at Skillman has been here several times, Dr. English of the State Sanatorium at Glen Gardner, Mr. A. H. Meese, Superintendent of the North Jersey Training School at Totowa, Prof. Edward Johnstone, Superintendent of the Training School at Vineland, also Mrs. Johnstone, all have been visitors at this institution. Dr. Guy Payne, Superintendent of the Essex County Hospital at Overbrook, and Dr. Morrow, Superintendent of the Bergen County Hospital have also been here.

Several connected with institutions outside the state have inspected this institution, including Superintendent William J. Tiffany, M. D., and Dr. Blaisdell of Kings Park State Hospital, Long Island; Dr. O. O. Fordyce, Superintendent of Toledo State Hospital, Toledo, Ohio, accompanied by Mrs. Fordyce; Dr. H. W. Mitchell, Superintendent of the State Hospital at Warren, Pennsylvania; accompanied by Mr. A. L. Bell, of Ridgway, Pennsylvania; Dr. R. C. Swint, Superintendent of the Georgia State Hospital, with Mr. E. E. Lindsay of the Board of Managers, and Mr. R. L. Beutell, State Architect.

Senator Frank D. Abell of Morris County has kept in close touch with the institution, and Assemblyman Howard Barrett has also visited us. The appropriation committee paid its annual visit the middle of January, and spent the night at the institution. Many freeholders of the different counties have called upon us during the year, both in large committees and as individuals.

The regular quarterly meeting of the Morris County Medical Society was held in the amusement hall of the Dormitory Building on December 13, with Dr. Orrin Sage Whitman and Dr. Edward Livingston of New York City as the principal speakers. Five students from Mount Holyoke College visited the institution in December, and classes in psychology from Rutgers University and Drew University have been here in the course of the year.

ACKNOWLEDGMENTS

If I should attempt here merely to enumerate those who have given to the institution during the past year, the list of names would fill many pages. All gifts have been acknowledged, either

by *The Psychogram*, or by personal word or letter, but to all of our generous friends, I believe that more than any thanks is the knowledge that they have done something to make our sick people more comfortable or to help them forget for a little while their burden of real and phantastic troubles. The ex-service patients have been remembered most lavishly, especially by different American Legion Posts and their auxiliaries. Other organizations have also given freely during the year, and individuals have constantly remembered both their personal friends among the patients and the strangers within the gates. At Christmas time the annual appeal for donations brought a response unequalled in the history of the institution, which enabled us to realize our hope of individual gifts and holiday good things for everyone of the 3,500 on our wards.

But I cannot, in fairness, imply that all who gave to the patients were friends in the outside world. Very many of the employees are constantly from their own none too well furnished pocket-books buying presents of fruit, ice-cream, cigarettes and other luxuries for the patients with whom they come in contact, as well as making donations of books, magazines, and articles of clothing to be used for the general good. The officers, too, have given freely of things which they knew were suited to the particular individuals, since they were familiar with all the facts as regards history and condition, yet which could not be placed on the list as wise and safe for all patients to receive.

To all of these givers, whether their gift has been much or little, whether it has been prompted by personal regard for the individual or by broad and generous sympathy for suffering and loneliness, I hereby make grateful acknowledgment both of their contributions and of the spirit of friendship and service in which they were given.

CONCLUSION

This year the officers of this institution have made an honest endeavor to render a real service to those entrusted to our care. Along scientific lines we have tried to be progressive in our attitude in the effort to restore as soon as possible the acutely sick. We have also tried for the great number of people needing continued

care to make life brighter and more attractive. That many factors and many individuals have entered into this endeavor the foregoing report is evidence, but the full measure of our success is not set forth in this report, I hope, for much of the work has been in the nature of laying a foundation upon which future years may build.

In all of our endeavors we have found support and assistance in the ready response of the members of the consulting staff and in the cooperation given by those connected with the Central Office of the Departments of Institutions and Agencies. To the Commissioner, Hon. W. J. Ellis, I am especially grateful for his fairness, his consistent backing and his personal friendship.

In closing this, my eighth annual report and the fifty-third of the institution, I wish to record my earnest thanks to the members of the medical staff, the other resident officers and the many employees for their devotion to duty, their cooperation with each other, and their loyalty to the organization which, however complex its growth, still depends wholly upon the type of service rendered by the separate individuals for its success. I wish also to express my sincere appreciation to the Board of Managers, as a group and as individuals, for their constant interest in the institution, their unfailing response to any and all calls, and their many sacrifices of time and energy to the affairs of the hospital. As for their attitude toward the resident officers, including myself, no Board could have been more helpful or more inspiring, and none more worthy of our highest efforts.

Respectfully submitted
Marcus A. Curry
Superintendent

STATISTICAL APPENDIX TO CHIEF EXECUTIVE OFFICER'S
REPORT

TABLE 1.

GENERAL INFORMATION

Data correct at end of hospital year, June 30, 1928

1. Date of opening as a hospital for mental diseases.....	August 17, 1876
2. Type of hospital.....	State
3. Hospital plant—	
Value of hospital property:	
Real estate, including buildings.....	\$9,253,349.45
Personal property.....	1,107,298.53
Total.....	\$10,360,648.00
Total acreage of hospital property owned.....	929.49
Additional acreage rented.....	None
Total acreage under cultivation during previous year.....	251.5%

4. OFFICERS AND EMPLOYEES

Actually in Service at End of Year

	Males	Females	Total
Superintendents.....	1	..	1
Clinical directors.....	1	..	1
Assistant physicians.....	17	1	18
Pathologists.....	1	..	1
Consulting surgeons.....	1	..	1
Total physicians.....	21	1	22
Business managers.....	1	..	1
Assistant to Chief Executive Officer.....	1	..	1
Resident dentists.....	2	..	2
Consulting dentists.....	1	..	1
Pharmacists.....	2	..	2
Engineer.....	1	..	1
Graduate nurses.....	7	50	57
Other nurses and attendants.....	187	143	330
Occupational therapists.....	7	11	18
Social workers.....	..	9	9
Teachers of Physical Training.....	..	11	11
All other officers and employees.....	309	90	399
Total officers and employees.....	539	315	854

TABLE I. (Continued.)

5. CENSUS OF PATIENT POPULATION AT END OF YEAR

	Actually in Hospital			Absent from Hospital but Still on Books		
	Males	Females	Total	Males	Females	Total
White—						
Insane.....	1,726	1,702	3,428	137	144	281
Epileptics.....	..	..	..	..	..	..
Mental defectives.....	6	2	8	..	..	..
Alcoholics.....	..	..	..	..	..	..
Drug addicts.....	..	..	..	..	..	..
Neurosyphilitics (without psychosis).....	..	..	..	..	..	..
All other cases.....	2	..	2	..	..	..
Total.....	1,734	1,704	3,438	137	144	281
Other Races—						
Insane.....	113	108	221	8	16	24
Epileptics.....	..	..	..	..	..	..
Mental defectives.....	..	..	..	..	..	..
Alcoholics.....	..	..	..	..	..	..
Drug addicts.....	..	..	..	..	..	..
Neurosyphilitics (without psychosis).....	..	..	..	..	..	..
All other cases.....	..	..	..	..	..	..
Total.....	113	108	221	8	16	24
Grand total.....	1,847	1,812	3,659	145	160	305
6. Patients under treatment in occupational therapy classes, including physical training, on date of report.....				197	1,098	1,295
7. Other patients employed in general work of hospital on date of report.....				827	380	1,207
8. Average daily number of all patients actually in hospital during year.....				1,795.67	1,779.31	3,574.98
9. Voluntary patients admitted during year.....				42	43	85
10. Persons given advice or treatment in out-patient clinics during year.....				208	198	406

TABLE II.

FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 1928

RECEIPTS	
Balance on hand from previous fiscal year.....	\$.....
Received from appropriations.....	2,588,543.07
Received from paying patients.....	260,182.30
Received from all other sources.....	436,398.33
Total receipts.....	\$3,285,123.70
DISBURSEMENTS	
1. Expenditures for maintenance of patients:	
Salaries and wages.....	\$850,996.59
Provisions (food).....	361,997.09
Fuel, light and water.....	127,796.15
All other expenditures for maintenance.....	373,783.57
Total expenditures for maintenance.....	\$1,714,573.40
2. Expenditures for all purposes other than maintenance, including new buildings, other additions and permanent betterments.....	843,168.22
3. Expenditures for repayment of loans and interest on loans.....	.....
Total expenditures.....	\$2,557,741.62
Amount returned to State Treasurer.....	727,382.08
Balance on hand at close of year.....	.....
Total disbursements.....	\$3,285,123.70

TABLE III.

MOVEMENT OF INSANE PATIENT POPULATION
For year beginning July 1, 1927, and ended June 30, 1928

	Males	Females	Total
1. Patients on records of hospital at beginning of hospital year:			
a—In hospital.....	1,761	1,730	3,491
b—On parole or otherwise absent.....	144	148	292
Total.....	1,905	1,878	3,783
2. Admissions during year:			
a—First admissions.....	394	363	757
(Includes all patients admitted for the first time to any hospital for mental diseases, public or private, wherever situated, in or outside of State, excepting institutions for temporary care.)			
b—Readmissions.....	72	66	138
(Includes all patients admitted who have been previously under treatment in a hospital for mental diseases excepting transfers and patients who have received treatment only in institutions for temporary care.)			
c—Transfers from other hospitals for mental diseases.....	9	6	15
(Includes all patients coming directly from any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
3. Total received during year.....	475	435	910
(Includes total of items 2 a, b and c.)			
4. Total on books during year.....	2,380	2,313	4,693
(Includes total of items 1 and 3.)			

TABLE III. (Continued.)

5. Discharged from books during year:			
(Does not include patients away from hospital on parole, on visit, or on other temporary leave from hospital.)			
a—As recovered.....	99	91	190
b—As improved.....	101	90	191
(Does not include transfers.)			
c—As unimproved.....	1	12	13
(Includes all patients discharged not benefited by treatment, exclusive of transfers.)			
d—As without psychosis.....	14	3	17
(Includes all discharged patients who are found to have had no psychosis.)			
e—Transferred to other hospitals for mental diseases.....	5	6	11
(Includes all patients sent directly to any other hospital for mental diseases, public or private, in same State, excepting institutions for temporary care.)			
f—Died during year.....	168	139	307
6. Total discharged, transferred and died during year.....	388	341	729
(Includes total of items 5 a, b, c, d, e and f.)			
7. Patients remaining on books of hospital at end of hospital year:			
a—In hospital.....	1,847	1,812	3,659
b—On parole or otherwise absent.....	145	160	305
Total.....	1,992	1,972	3,964

TABLE IV.

NATIVITY OF FIRST ADMISSIONS AND OF PARENTS OF FIRST ADMISSIONS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Males	Females	Total	Fathers	Mothers	Both Parents	Fathers	Mothers	Both Parents
United States.....	221	222	443	5	12	123	5	13	121
Africa.....	..	2	2	..	..	..	..	..	2
*Asia.....	1	2	3	..	..	1	..	..	..
Australia.....	..	1	1	..	..	..	..	..	..
Austria.....	11	8	19	..	..	15	1	1	13
Belgium.....	..	2	2	..	1	..	..	..	2
Canada.....	1	5	6	2	2	1	..	1	5
Central America.....	..	..	..	..	..	..	..	..	..
China.....	1	..	1	..	..	1	..	..	..
Czecho-Slovakia.....	3	1	4	..	..	4	..	..	1
Cuba.....	..	..	..	..	..	..	..	..	..
Denmark.....	..	..	..	..	..	..	..	1	..
England.....	4	7	11	4	1	6	3	2	14
Europe.....	5	3	8	..	..	6	..	..	2
Finland.....	..	..	..	..	..	1	..	..	..
France.....	3	3	6	1	..	4	2	..	3
Germany.....	27	23	50	1	1	47	3	2	42
Greece.....	2	..	2	..	..	2	..	..	..
Holland.....	3	2	5	2	..	3	..	..	3
Hungary.....	8	5	13	..	..	8	..	..	6
India.....	..	..	..	..	..	..	..	..	..
Ireland.....	10	18	28	5	4	37	5	1	41
Italy.....	35	19	54	2	..	45	..	1	28
Japan.....	..	..	..	..	..	..	..	..	..
Jugo-Slavia.....	..	..	..	..	..	..	..	..	..
Mexico.....	..	..	..	..	..	..	..	..	..
Norway.....	1	2	3	..	..	1	..	1	2
Philippine Islands.....	..	..	..	..	..	..	..	..	..
Poland.....	25	15	40	..	..	28	1	..	16
Porto Rico.....	1	..	1	..	..	..	..	..	..
Portugal.....	2	..	2	..	..	2	..	..	..
Roumania.....	..	..	..	..	..	..	..	..	..
Russia.....	11	12	23	..	..	10	2	1	17
Scotland.....	6	2	8	..	1	5	1	..	2
South America.....	..	..	..	..	..	..	..	..	..
Spain.....	2	..	2	..	..	2	1	..	..
Sweden.....	3	2	5	..	..	3	..	..	2
Switzerland.....	1	4	5	..	..	1	..	..	5
Turkey-in-Asia.....	..	..	..	..	..	..	..	..	..
Turkey-in-Europe.....	2	1	3	..	..	2	..	..	1
Wales.....	1	..	1	..	..	1	..	..	..
†West Indies.....	2	2	4	..	..	3	..	..	1
Other countries.....	..	..	..	..	..	..	..	..	..
Uncertained.....	2	..	2	1	1	9	2	2	4
Total.....	394	363	757	23	23	371	26	26	337

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

TABLE IV.—a.

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

AGE GROUPS	Aggregate			NATIVE BORN												FOREIGN BORN															Nativity unascertained											
				PARENTAGE									TIME IN UNITED STATES BEFORE ADMISSION																													
	Total			Native			Foreign			Mixed			Unascertained			Total			Under 5 years			5-9 years			10-14 years			15 years and over			Unascertained											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
Under 15 years ..	..	4	4	..	4	4	..	..	..	..	4	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15-19 years	17	19	36	16	14	30	8	6	14	8	6	14	..	2	2	..	..	..	1	5	6	1	2	3	..	1	1	..	1	1	..	..	..	..	1	1	..	..	..
20-24 years	23	26	49	22	21	43	6	13	19	11	5	16	5	3	8	..	..	..	10	16	26	9	7	16	..	5	5	..	1	1	..	..	..	1	1	2	..	..	..
25-29 years	25	50	75	15	34	49	7	17	24	6	11	17	2	6	8	..	..	..	13	24	37	3	4	7	2	10	12	2	5	7	2	5	7	3	1	4	..	..	..
30-34 years	38	52	90	25	28	53	16	18	34	9	7	16	..	3	3	..	..	..	39	19	58	10	3	13	11	2	13	7	6	13	6	5	11	2	1	3	..	..	..
35-39 years	67	31	98	28	12	40	20	12	32	4	..	4	3	..	3	1	..	1	30	17	47	8	4	12	4	2	6	6	3	9	6	3	9	4	1	5	..	..	..
40-44 years	56	38	94	26	21	47	16	9	25	7	8	15	2	4	6	1	..	1	19	12	31	3	3	6	2	..	2	3	1	4	4	1	5	3	..	3	..	..	..
45-49 years	34	36	70	15	24	39	6	12	18	8	10	18	1	2	3	12	14	26	2	2	4	..	1	1	2	4	6	5	6	11	1	1	2	1	1	2
50-54 years	37	29	66	24	15	39	13	8	21	7	7	14	2	..	2	2	..	2	10	7	17	..	2	2	..	1	1	2	1	3	2	1	3	1	..	1
55-59 years	20	13	33	9	6	15	4	2	6	3	4	7	..	..	..	2	..	2	12	3	15	1	..	1	..	1	1	4	1	5	2	2	4	1	..	1	..	..	..
60-64 years	22	15	37	10	12	22	3	5	8	6	5	11	..	2	2	1	..	1	11	2	13	..	..	..	1	..	1	..	..	..	2	..	2	2	..	2	..	..	..
65-69 years	22	9	31	11	7	18	8	5	13	3	2	5	11	17	28	..	1	1	1	..	4	4	..	7	7	1	..	1	1	..	1
70 years and over	30	38	68	19	21	40	14	13	27	5	5	10	..	3	3	..	..	..	2	..	2	..	..	..	..	..	..	1	..	1	1	..	1	1	..	1	..	..	..
Unascertained....	3	3	6	1	3	4	..	1	1	..	..	..	..	..	..	1	2	3	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	..	1	..	..	..
Total.....	394	363	757	221	222	443	121	121	242	77	74	151	15	25	40	8	2	10	171	141	312	37	31	68	21	24	45	22	27	54	30	31	61	20	8	28	2	..	2			

TABLE V.

CITIZENSHIP OF FIRST ADMISSIONS

	Males	Females	Total
Citizens by birth.....	221	222	443
Citizens by naturalization.....	63	56	119
Aliens.....	69	59	128
Citizenship unascertained.....	41	26	67
Total.....	<u>394</u>	<u>363</u>	<u>757</u>

TABLE VI.

PSYCHOSES OF FIRST ADMISSIONS

<i>Psychoses</i>		M.	F.	T.	M.	F.	T.
1.	TRAUMATIC PSYCHOSES.....	..	..	..	5	..	5
2.	GENILE PSYCHOSES.....	..	..	..	5	19	24
3.	PSYCHOSES WITH CEREBRAL ARTERIOSCLEROSIS.....	..	..	..	89	60	149
4.	GENERAL PARALYSIS.....	..	..	..	67	11	78
5.	PSYCHOSES WITH CEREBRAL SYPHILIS.....	..	..	..	9	5	14
6.	PSYCHOSES WITH HUNTINGTON'S CHOREA.....	..	..	..	..	..	..
7.	PSYCHOSES WITH BRAIN TUMOR.....	..	..	..	..	2	2
8.	PSYCHOSES WITH OTHER BRAIN OR NERVOUS DISEASES, total.....	..	..	..	5	4	9
a.	Cerebral embolism.....	..	..	..	..	..	..
b.	Paralysis agitans.....	1	..	1	..	..	..
c.	Meningitis, tubercular or other forms.....	..	..	..	..	..	..
d.	Multiple sclerosis.....	..	1	1	..	..	..
e.	Tabes dorsalis.....	..	1	1	..	..	..
f.	Acute chorea.....	4	2	6	..	..	..
g.	Other diseases.....	..	..	..	..	..	..
9.	ALCOHOLIC PSYCHOSES, total.....	..	..	..	30	4	34
a.	Delirium tremens.....	9	..	9	..	..	..
b.	Korsakow's psychosis.....	..	1	1	..	..	..
c.	Acute hallucinosis.....	15	3	18	..	..	..
d.	Other types, acute or chronic.....	6	..	6	..	..	..

TABLE VI. (Continued.)

	M.	F.	T.	M.	F.	T.
10. PSYCHOSES DUE TO DRUGS AND OTHER EXOGENOUS TOXINS, total.....	..	..	..	..	..	..
a. Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined.....	..	..	..	..	..	..
b. Metals, as lead, arsenic, etc.....	..	..	..	..	..	..
c. Gases.....	..	..	..	..	..	..
d. Other exogenous toxins.....	..	..	..	..	..	..
11. PSYCHOSES WITH PELLAGRA.....	..	..	..	..	..	..
12. PSYCHOSES WITH OTHER SOMATIC DISEASES, total.....	..	..	..	14	17	31
a. Delirium with infectious diseases.....	..	..	..	..	..	..
b. Post-infectious psychosis.....	..	..	..	..	..	..
c. Exhaustion delirium.....	..	2	2	..	..	..
d. Delirium of unknown origin.....	1	..	1	..	..	..
e. Cardio-renal diseases.....	8	10	18	..	..	..
f. Diseases of the ductless glands.....	..	1	1	..	..	..
g. Other diseases or conditions.....	5	4	9	..	..	..
13. MANIC-DEPRESSIVE PSYCHOSES, total.....	..	..	..	55	88	143
a. Manic type.....	18	39	57	..	..	..
b. Depressive type.....	21	22	43	..	..	..
c. Other types.....	16	27	43	..	..	..
14. INVOLUTION MELANCHOLIA.....	..	..	..	1	9	10
15. DEMENTIA PRÆCOX (schizophrenia).....	..	..	..	74	108	182
16. PARANOIA AND PARANOID CONDITIONS.....	..	..	..	3	2	5
17. EPILEPTIC PSYCHOSES.....	..	..	..	2	5	7
18. PSYCHONEUROSES AND NEUROSES, total.....	..	..	..	3	6	9
a. Hysterical type.....	..	3	3	..	..	..
b. Psychasthenic type (anxiety and obsessive forms).....	1	2	3	..	..	..
c. Neurasthenic type.....	2	1	3	..	..	..
d. Other types.....	..	..	..	..	..	..

TABLE VI. (Continued.)

	M.	F.	T.	M.	F.	T.
19. PSYCHOSES WITH PSYCHOPATHIC PERSONALITY.....	..	..	..	13	10	13
20. PSYCHOSES WITH MENTAL DEFICIENCY.....	..	..	..	3	3	6
21. UNDIAGNOSED PSYCHOSES.....	..	..	..	6	6	12
22. WITHOUT PSYCHOSIS, total.....	..	..	..	10	4	14
a. Epilepsy without psychosis.....	..	1	1	..	..	..
b. Alcoholism without psychosis.....	4	..	4	..	..	..
c. Drug addiction without psychosis...	2	1	3	..	..	..
d. Psychopathic personality without psychosis.....	1	1	2	..	..	..
e. Mental deficiency without psychosis.....	3	1	4	..	..	..
f. Others.....	..	..	..	..	..	..
Total.....	..	..	..	394	363	775

TABLE IX.

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

PSYCHOSES	Total			Illiterate			Reads and writes*			Common school			High school			College			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	5		5				1		1	3		3		1	1	2		2	1		1
2. Senile.....	5	19	24					2	2	5	8	13		1	1					8	8
3. With cerebral arteriosclerosis....	89	60	149	3	4	7	10	13	23	48	32	80	2	3	5	2		2	24	8	32
4. General paralysis....	67	11	78	2		2	7	1	8	29	7	36	4	1	5	3		3	22	2	24
5. With cerebral syphilis.....	9	5	14				2		2	5	3	8							2	2	4
6. With Huntington's chorea.....											2	2									
7. With brain tumor...		2	2								2	2									
8. With other brain or nervous diseases..	5	4	9							4	4	8							1		1
9. Alcoholic.....	30	4	34	3		3	3		3	16	2	18	4	1	5				4	1	5
10. Due to drugs & other exogenous toxins.																					
11. With pellagra.....																					
12. With other somatic diseases.....	14	17	31	1		1	1	4	5	7	7	14	1	3	4	2	2	2	4	1	5
13. Manic-depressive...	55	88	143	2	3	5	6	14	20	29	51	80	1	11	12	4	2	6	13	7	20
14. Involution melancholia.....	1	9	10					2	2	1	4	5		3	3						
15. Dementia præcox...	74	108	182	3	5	8	7	18	25	46	55	101	7	15	22	2	6	8	9	9	18
16. Paranoia or paranoid conditions...	3	2	5							2	2	4							1		1
17. Epileptic psychoses.	2	5	7							2	4	6		1	1						
18. Psychoneuroses and neuroses.....	3	6	9							2	5	7		1	1	1		1			
19. With psychopathic personality.....	13	10	23							11	9	20	1	1	2	1		1			
20. With mental deficiency.....	3	3	6		1	1	1	1	2	2	1	3									
21. Undiagnosed psychoses.....	6	6	12				1		1	5	3	8		1	1		1	1		1	1
22. Without psychosis..	10	4	14		2	2				5	2	7	1		1	3		3	1		1
Total.....	394	363	757	14	15	29	39	55	94	222	201	423	21	42	63	16	11	27	82	39	121

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

TABLE X.

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Urban			Rural			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	5		5	4		4				1		1
2. Senile.....	5	19	24	4	15	19	1	4	5			
3. With cerebral arteriosclerosis ...	89	60	149	76	51	127	12	8	21	1		
4. General paralysis ...	67	11	78	63	10	73	4	1	5			
5. With cerebral syphilis.....	9	5	14	5	5	14						
6. With Huntington's chorea.....												
7. With brain tumor...		2	2		2	2						
8. With other brain or nervous diseases..	5	4	9	4	3	7	1	1	2			
9. Alcoholic.....	30	4	34	26	4	30	4		4			
10. Due to drugs & other exogenous toxins.												
11. With pellagra.....												
12. With other somatic diseases.....	14	17	31	13	13	26	1	4	5			
13. Manic-depressive ...	55	88	143	49	75	124	5	13	18	1		1
14. Involution melan- cholia.....	1	9	10	1	9	10						
15. Dementia præcox...	74	108	182	67	99	166	6	9	15	1		1
16. Paranoia or para- noid conditions...	3	2	5	3	2	5						
17. Epileptic psychoses.	2	5	7	2	5	7						
18. Psychoneuroses and neuroses.....	3	6	9	3	6	9						
19. With psychopathic personality.....	13	10	23	13	10	23						
20. With mental deficiency.....	3	3	6	2	2	4	1	1	2			
21. Undiagnosed psychoses.....	6	6	12	6	6	12						
22. Without psychosis...	10	4	14	10	3	13		1	1			
Total.....	394	363	757	355	320	675	35	43	78	4		4

TABLE XI.

ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Dependent			Marginal			Comfortable			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	5		5	2		2	2		2	1		1			
2. Senile.....	5	19	24	2	4	6	2	12	14	1	3	4			
3. With cerebral arteriosclerosis...	89	60	149	13	3	16	62	45	107	13	12	25	1		1
4. General paralysis...	67	11	78	10	3	13	53	7	60	4	1	5			
5. With cerebral syphilis.....	9	5	14				6	4	10	2	1	3	1		1
6. With Huntington's chorea.....															
7. With brain tumor...		2	2					2	2						
8. With other brain or nervous diseases..	5	4	9	2		2	3	4	7						
9. Alcoholic.....	30	4	34	3		3	24	4	28	2		2	1		1
10. Due to drugs & other exogenous toxins..															
11. With pellagra.....															
12. With other somatic diseases.....	14	17	31	2		2	12	14	26		3	3			
13. Manic-depressive...	55	88	143	5	4	9	42	67	109	8	17	25			
14. Involution melan- cholia.....	1	9	10					5	5	1	4	5			
15. Dementia præcox...	74	108	182	8	9	17	57	77	134	7	22	29	2		2
16. Paranoia or para- noid conditions...	3	2	5				3	1	4		1	1			
17. Epileptic psychoses.	2	5	7		1	1	2	3	5		1	1			
18. Psychoneuroses and neuroses.....	3	6	9				2	5	7	1	1	2			
19. With psychopathic personality.....	13	10	23		4	4	10	4	14	2	2	4	1		1
20. With mental deficiency.....	3	3	6	1	1	2	2	2	4						
21. Undiagnosed psychoses.....	6	6	12	1	1	2	4	2	6	1	3	4			
22. Without psychosis...	10	4	14		1	1	8	2	10	2	1	3			
Total.....	394	363	757	49	31	80	294	260	554	45	72	117	6		6

TABLE XII.

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

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic.....	5		5	2		2							3		3
2. Senile.....	5	19	24	2	13	15	2	1	3				1	5	6
3. With cerebral arteriosclerosis....	89	60	149	17	41	58	34	7	41	18	2	20	20	10	30
4. General paralysis...	67	11	78	16	6	22	27	1	18	6	2	8	18	2	20
5. With cerebral syphilis.....	9	5	14		4	4	6	1	7	1		1	2		2
6. With Huntington's chorea.....															
7. With brain tumor...		2	2	2		2									
8. With other brain or nervous diseases..	5	4	9	2	4	6	1		1				2		2
9. Alcoholic.....	30	4	34							30	4	34			
10. Due to drugs & other exogenous toxins..															
11. With pellagra.....															
12. With other somatic diseases.....	14	17	31	3	14	17	4	1	5	5	1	6	2	1	3
13. Manic-depressive...	55	88	143	20	67	87	23	14	37	1	4	5	11	3	14
14. Involution melan- cholia.....	1	9	10	1	8	9		1	1						
15. Dementia præcox...	74	108	182	34	94	128	20	5	25	10	4	14	10	5	15
16. Paranoia or paranoid conditions.....	3	2	5		1	1	2	1	3	1		1			
17. Epileptic psychoses..	2	5	7	2	5	7									
18. Psychoneuroses and neuroses.....	3	6	9	3	5	8		1	1						
19. With psychopathic personality.....	13	10	23	5	7	12	3	1	4	5	2	7			
20. With mental deficiency.....	3	3	6	2	3	5	1		1						
21. Undiagnosed psychoses.....	6	6	12		5	5	5	1	6	1		1			
22. Without psychosis..	10	4	14	4	3	7	1	1	2	5		5			
Total.....	394	363	757	113	282	395	129	36	165	83	19	102	69	26	95

TABLE XIII.

MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
1. Traumatic.....	5		5	4		4	1		1													
2. Senile.....	5	19	24	1	3	4	1	5	6	3	11	14										
3. With cerebral arteriosclerosis....	89	60	149	13	8	21	48	23	71	27	28	55		1	1	1		1				
4. General paralysis....	67	11	78	17	2	19	39	6	45	8	2	10		1	1	1		1		2		2
5. With cerebral syphilis.....	9	5	14	2	1	3	5	4	9	2		2										
6. With Huntington's chorea.....																						
7. With brain tumor...		2	2						2	2												
8. With other brain or nervous diseases..	5	4	9	1	2	3	2	2	4	1		1								1		1
9. Alcoholic.....	30	4	34	12		12	13	2	15	4	1	5	1	1	2							
10. Due to drugs & other exogenous toxins..																						
11. With pellagra.....																						
12. With other somatic diseases.....	14	17	31	3	2	5	11	12	23		3	3										
13. Manic-depressive...	55	88	143	31	30	61	21	50	71	2	5	7		2	2	1	1	2				
14. Involution melan- cholia.....	1	9	10		2	2	1	7	8													
15. Dementia præcox...	74	108	182	46	43	89	23	54	77	3	4	7		5	5	1	2	3	1			1
16. Paranoia or paranoid conditions.....	3	2	5	1		1	2	1	3		1	1										
17. Epileptic psychoses..	2	5	7	2	1	3		2	2		1	1							1	1		
18. Psychoneuroses and neuroses.....	3	6	9				3	6	9													
19. With psychopathic personality.....	13	10	23	7	6	13	5	2	7				1	2	3							
20. With mental deficiency.....	3	3	6	3	2	5		1	1													
21. Undiagnosed psychoses.....	6	6	12	1	1	2	5	4	9		1	1										
22. Without psychosis..	10	4	14	5	2	7	4	2	6							1		1				
Total.....	394	363	757	149	105	254	184	185	369	50	57	107	2	12	14	5	4	9	4			4

TABLE XIV.

PSYCHOSES OF READMISSIONS

PSYCHOSES	Males	Females	Total
1. Traumatic psychoses	1		1
2. Senile psychoses	3	1	4
3. Psychoses with cerebral arteriosclerosis	5	4	9
4. General paralysis	4	1	5
5. Psychoses with cerebral syphilis	1		1
6. Psychoses with Huntington's chorea			
7. Psychoses with brain tumor		1	1
8. Psychoses with other brain or nervous diseases		1	1
9. Alcoholic psychoses	3	1	4
10. Psychoses due to drugs and other exogenous toxins		1	1
11. Psychoses with pellagra		1	1
12. Psychoses with other somatic diseases		2	2
13. Manic-depressive psychoses	16	22	38
14. Involution melancholia		2	2
15. Dementia præcox	31	27	58
16. Paranoia and paranoid conditions		1	1
17. Epileptic psychoses			
18. Psychoneuroses and neuroses	1	2	3
19. Psychoses with psychopathic personality	4	2	6
20. Psychoses with mental deficiency			
21. Undiagnosed psychoses	3		3
22. Without psychosis			
Total	72	66	138

TABLE XV.

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

PSYCHOSES	Total			Recovered			Improved			Unimproved		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	3	1	4		1	1	3		3			
2. Senile												
3. With cerebral arteriosclerosis	23	17	40	13	6	19	9	8	17	1	3	4
4. General paralysis....	5	2	7				5	1	6		1	1
5. With cerebral syphilis.....	6	9	15	3	3	6	3	6	9			
6. With Huntington's chorea.....	1		1				1		1			
7. With brain tumor....												
8. With other brain or nervous diseases...	3	2	5	2	2	4	1		1			
9. Alcoholic.....	26	2	28	23	1	24	3	1	4			
10. Due to drugs & other exogenous toxins..												
. With pellagra.....												
. With other somatic diseases.....	4	6	10	4	5	9		1	1			
13. Manic-depressive....	40	58	98	34	46	80	6	11	17		1	1
14. Involution melan- cholia.....	1	9	10	1	4	5		5	5			
15. Dementia præcox....	65	54	119				65	47	112		7	7
16. Paranoia or paranoid conditions.....	3	5	8		1	1	3	4	7			
17. Epileptic psychoses..	1	5	6	1	5	6						
18. Psychoneuroses and neuroses.....	5	9	14	5	5	10		4	4			
19. With psychopathic personality.....	12	4	16	11	4	15	1		1			
20. With mental deficiency.....	2	3	5	1	2	3	1	1	2			
21. Undiagnosed psychoses.....	1	7	8	1	6	7		1	1			
22. Without psychosis....	14	3	17									
Total.....	215	196	411	99	91	190	101	90	191	1	12	13

TABLE XVI.

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

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

TABLE XVIII.

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

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
1. Traumatic.....																																										
2. Senile.....	7	20	27	1	3	4	1	1	2	1	3	4	1	1	2	1	4	5	1	3	4		1	1	1	2	3															
3. With cerebral arteriosclerosis....	50	37	87	12	3	15	14	6	20	8	4	12	2	4	6	10	10	20	2	7	9	1	1	2		1	1						1	1	2							
4. General paralysis... 5. With cerebral syphilis.....	38	7	45	9	1	10	15	2	17	1	1	2	2	1	3	8	1	9	2	1	3				1	1																
6. With Huntington's chorea.....	4	1	5				3	1	4																																	
7. With brain tumor...		1	1																																							
8. With other brain or nervous diseases..		2	2		1	1	1	1	1																																	
9. Alcoholic.....	4	2	6	1	1	2	1	1	1										2	1	3																					
10. Due to drugs and other exogenous toxins..	1		1	1		1																																				
11. With pellagra.....																																										
12. With other somatic diseases.....	9	5	14	6	4	10	3		3																											1	1					
13. Manic-depressive...	10	17	27	2	5	7	1	1	2				1	1	1		1	1	1	1	2		2	2			2	3	5	1		1	1		1	1	4	5				
14. Involution melancholia.....	1	4	5		1	1										1	1	1	1	1	1															1	1					
15. Dementia præcox...	35	34	69	1		1	2		2	2	3	5	1	1	5	2	7	4	4	8	2	1	3	1	3	4	2	2	4	2	2	4	1	1	2	5	7	12	9	7	16	
16. Paranoia or paranoid conditions.....	4	1	5																																	1	1	3				
17. Epileptic psychoses..	1	2	3								1	1											1	1										1	1							
18. Psychoneuroses and neuroses.....																																										
19. With psychopathic personality.....	2	1	3					2	2																																	
20. With mental deficiency.....	2	4	6											1		1		1	1								1		1								1	1				
21. Undiagnosed psychoses.....																																										
22. Without psychosis..		1	1																																							
Total.....	168	139	307	33	19	52	41	13	54	12	12	24	5	9	14	26	18	44	13	19	32	3	9	12	3	7	10	2	4	6	6	5	11	2	2	4	9	8	17	13	14	27

APPENDIX TO BUSINESS DEPARTMENT REPORT

AGRICULTURAL PRODUCTS

FARM

49.112 tons alfalfa	\$ 1,708.98
0.675 tons beets, cow	906.75
0.226 tons grass to dairy	495.68
1266.1 tons ensilage	11,394.92
328 baskets apples	213.20
0.535 tons timothy hay	2,528.58
27.76 tons oats, green, to dairy	214.10
106 tons manure to garden	212.00
67 baskets plums	83.75
	\$17,757.96

DAIRY

596,437.35 lbs. milk to Institution	\$74,234.32
3,542.50 lbs. milk to calves	1,094.76
1,380.30 lbs. milk to piggery	64.20
9,607 lbs. beef	1,359.47
238½ lbs. liver	21.47
1,541.91 tons manure	3,053.82
65 ea. calves sold	539.00
hides and offal	38.80
	\$80,435.84

HENNERY

4,451 11-12 doz. eggs	\$ 1,830.41
1,137½ lbs. chicken	309.65
	\$ 2,140.06

PIGGERY

5,469½ lbs. pork	\$ 8,945.29
901 lbs. liver	67.64
219 tons manure	438.00
	\$ 9,450.93

GARDEN

2,766 bunches asparagus	\$ 516.51
173 4-16 baskets beans, lima	195.42
1,413 10-16 baskets beans, string	1,384.61
0,515 bunches beets	261.45
0,084 12-16 baskets beets	503.00
2.76 tons beets, cow	25.84
16 14-16 baskets beet greens	6.73
1,839 barrels cabbage	1,932.68

383 barrels cabbage, sauer kraut.....	387.00
14,456 bunches carrots.....	388.72
1,446 13-16 baskets carrots.....	696.55
103 4-20 barrels cauliflower.....	292.78
8,486 bunches celery.....	1,702.79
409 1-16 baskets cucumbers.....	332.33
71,847 ears corn, sweet.....	1,865.65
90 qts. currants.....	9.90
152 8-16 baskets egg plant.....	75.25
218 baskets grapes.....	178.83
27 rts. horseradish.....	1.47
761 8-16 baskets kale.....	234.60
12,867 bunches leeks.....	156.30
28,948 hds. lettuce.....	1,179.22
182 5-16 baskets lettuce.....	171.00
29,047 bunches onions.....	734.76
2,700 15-16 baskets onions.....	1,560.46
2,870 bunches parsley.....	63.22
4 bunches parsnips.....	.16
2,106 12-16 baskets parsnips.....	1,069.30
11 2-16 baskets peppers.....	5.74
437 10-16 baskets peas.....	358.20
682 baskets potatoes.....	1,023.00
16,475 lbs. pumpkins.....	264.30
200 baskets radishes.....	100.00
8,356 bunches radishes.....	179.20
121 qts. raspberries.....	27.55
10,758 bunches rhubarb.....	325.74
959 7-16 baskets spinach.....	438.14
412 13-16 baskets squash.....	214.90
2,351 qts. strawberries.....	321.97
4 baskets tomatoes, green.....	1.61
24 baskets tomatoes, yellow.....	16.00
6,258 14-16 baskets tomatoes.....	3,368.50
4,519 baskets tomatoes, canned.....	2,259.50
2,286 9-16 baskets turnips.....	1,044.40
2 bunches turnips.....	.06
48.45 tons ensilage, sweet corn.....	290.70
	<hr/>
	\$26,166.44

FLORIST'S REPORT

RECORD OF CUT FLOWERS

Roses.....	14,259
Carnations.....	1,443
Chrysanthemums (large).....	2,129
Chrysanthemums (small).....	6,990
Chrysanthemums (pots).....	202
Dahlias.....	12,414
Snapdragon.....	28,832
Gladiolus.....	2,732
Lilies (calla).....	729
Narcissus (paper white).....	512
Narcissus (double).....	480
Sprengeri (strings).....	1,145
Sprengeri (strings, plts.).....	4
Peonies.....	42
Pansies (plts.).....	356
Pansies (bunch).....	12
Zinnia.....	4,019
Delphinium.....	96
Rambler roses.....	1,558
Ferns (leaves).....	250
Marigold.....	2,915
Begonias.....	88
Xmas pepper.....	31
Amaryllis.....	6
Hydrangea.....	10
Fuchsia.....	368
Lemon verbenia.....	50

PLANTS AND BULBS GROWN FOR FLOWER BEDS AND CUT FLOWERS.

Pansies.....	1,416
Geraniums.....	4,316
Coleus.....	3,438
Celossia.....	240
Petunia.....	1,645
Salvia.....	2,762
Vinca (rose).....	1,547
Vinca (wine).....	106
Helichrysum.....	80
Chrysanthemums.....	5,129
Dahlia.....	1,472
Cannas.....	2,066

TABLE SHOWING IN DETAIL MANNER OF SUPPORT
JUNE 30, 1928.

COUNTY	INDIGENT			ST. INDIGENT			PRIVATE			CONVICT			CRIMINAL			TOTAL		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Bergen.....	188	198	386	85	68	153	42	45	87	..	..	..	1	..	1	315	311	627
Essex.....	76	104	180	215	197	412	29	51	80	..	..	..	2	..	2	322	352	674
Hudson.....	95	86	181	157	143	300	80	76	156	2	..	..	..	..	..	334	306	640
Hunterdon.....	..	..	..	2	1	3	..	3	3	..	..	..	..	..	..	2	3	5
Mercer.....	1	1	2	1	..	1	1	5	3	..	..	..	..	..	..	3	..	3
Middlesex.....	3	4	7	..	..	..	2	7	9	1	..	..	..	..	..	6	9	15
Monmouth.....	1	4	5	..	..	..	2	4	6	..	..	..	..	..	..	3	11	14
Morris.....	94	103	197	47	22	69	15	24	39	1	..	..	1	..	1	158	150	308
Ocean.....	..	..	..	..	..	..	1	2	3	..	..	..	..	..	..	1	1	2
Passaic.....	328	302	630	71	47	118	32	38	70	..	..	..	..	..	..	431	387	818
Somerset.....	1	6	7	2	..	2	1	1	2	..	..	..	..	..	..	4	4	8
Sussex.....	32	29	61	13	4	17	4	11	12	1	..	..	..	..	..	50	41	91
Union.....	240	278	518	63	55	118	44	37	81	1	..	..	..	..	..	348	370	718
Warren.....	6	1	7	3	1	4	..	4	4	1	..	..	..	..	..	10	6	16
New York.....	..	..	..	..	..	..	3	3	6	..	..	..	..	..	..	3	3	6
Utah.....	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	1	..	1
Total	1065	1116	2181	659	538	1197	257	316	573	7	..	7	4	2	6	1992	1972	3964

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

Snapdragon.....	7,555
Asters.....	4,755
Gladiolus.....	10,200
Roses.....	1,231
Carnations.....	754
Begonias.....	1,529
Zinnias.....	1,540
Verbena.....	1,422
Ageratum.....	721
Jerusalem cherries.....	632
Hyacinths.....	631
Easter lilies (plts.).....	392
Easter lilies (flws.).....	1,961
Spirea.....	188
Fuchsia.....	1,197
Cobea scandens.....	34
Scabiosa.....	80
Marigold.....	858
Delphinium.....	1,067
Sprenger strings.....	120
Violas.....	68
Heliotrope.....	240
Hardy salvia.....	18
California Privet.....	54
Cleveland cherries.....	100
Sweet alyssum.....	548
English ivy.....	24
Palms (4-inch).....	21
Ferns.....	50

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

1929

HOSPITAL TRUST

1929